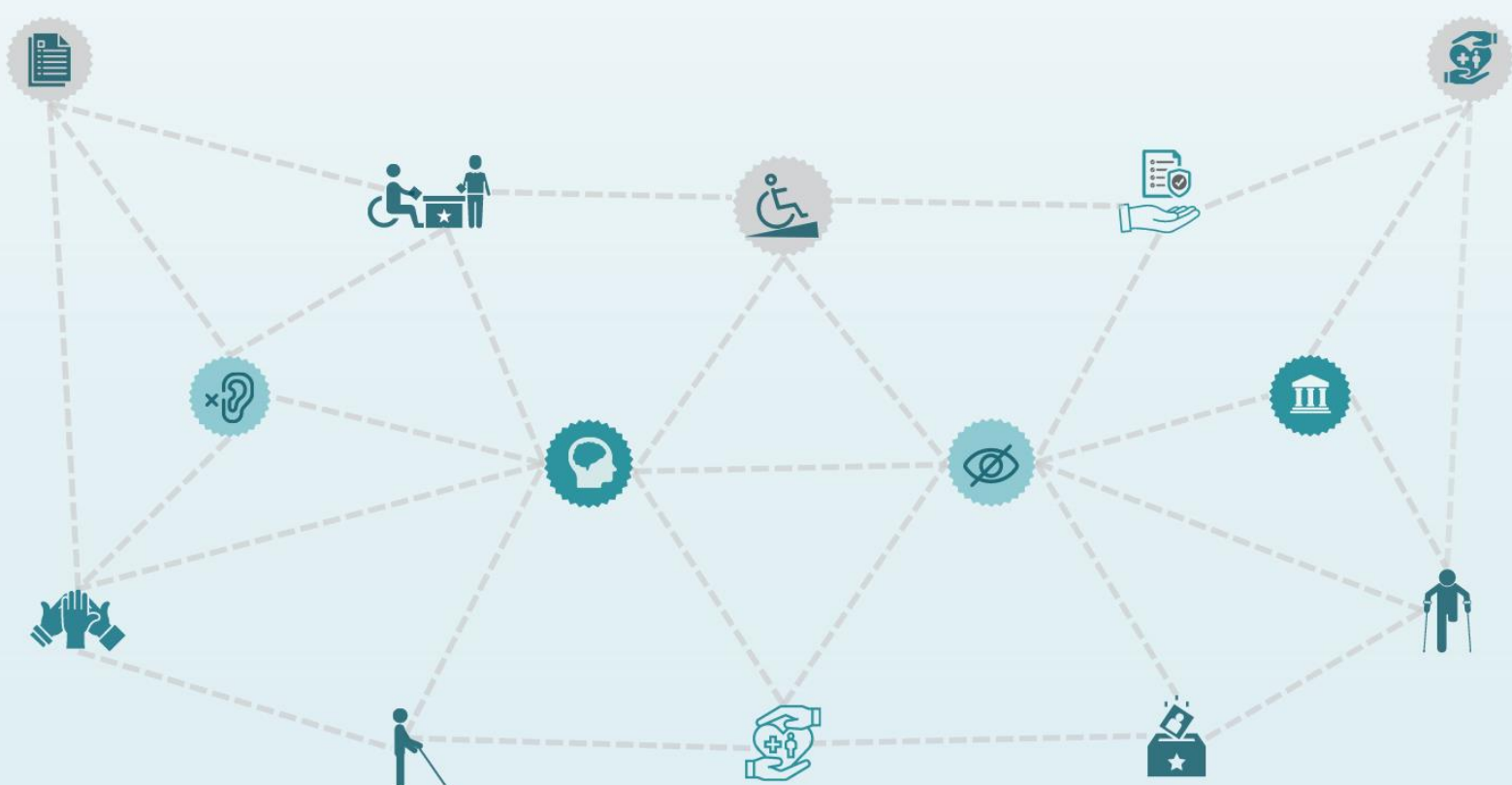


Governance and Participation

A Series of Policy Discussion Papers

Pilot Assessment of Disability Inclusion in Local Governance



The series of Governance and Participation Policy Discussion Papers is commissioned by the Governance and Participation Team at UNDP Viet Nam.

The series aims to analyse trends in Viet Nam regarding the implementation processes and options in specific public administration reform areas. In order to confront the social, economic, political and environmental challenges facing Viet Nam, policymakers need to adopt evidence-based decision-making. These policy papers aim to contribute to current policy debate by providing discussion inputs on policy reforms – thereby helping to improve Viet Nam’s development efforts.

Three principles guide the production of the policy discussion papers: (i) evidence-based research, (ii) academic rigour and independence of analysis, and (iii) social legitimacy and a participatory process. This involves a substantive research approach with a rigorous and systematic identification of policy options on key public administration reform and anti-corruption issues.

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UNDP Viet Nam

304 Kim Ma,
Ba Dinh
Ha Noi - Viet Nam

Tel: +84 4 38500 100
Fax: +84 4 3726 5520



Mekong Development
Research Institute
Power of Knowledge

Mekong Development
Research Institute

444 Hoang Hoa Tham, Tay Ho,
Ha Noi - Viet Nam

Tel : +84 243 247 4668
Fax : +84 243 247 4569

The research team

Phung Duc Tung

Nguyen Viet Cuong

Nguyen Hoang Khanh Minh

Pham Thi Thien Quynh

Le Nguyen Que Huong

Vu Minh Hoang

Nguyen Huynh Duc

(Mekong Development Research Institute)

and

Do Thanh Huyen

Dao Thu Huong

Nguyen Minh Chau

Dang Van Phu

(United Nations Development Programme)

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Abbreviations

CECODES	Center for Community Support Development Studies
CRPD	Convention on the Rights of Persons with Disabilities
DFAT	Department of Foreign Affairs and Trade
DK	Do not know
DWTA	Do not want to answer
ILO	International Labour Organization
LURCs	Land use rights certificate
PAPI	The Viet Nam Provincial Governance and Public Administration Performance Index
PWDs	Persons with disabilities
RTA	Real-Time Analytics
UN	United Nations
UNDP	United Nations Development Programme
USAID	United States Agency for International Development
VFF-CRT	Centre for Research and Training of the Viet Nam Fatherland Front

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Executive summary

Surveys done by UNDP in the past two years have shown the tremendous effects that COVID-19 has on persons with disability (PWDs) in multiple aspects such as employment, income, access to basic needs and rehabilitation services, etc. This situation requires great efforts from the Government in providing public services to support PWDs to overcome the consequences caused by COVID-19 and at the same time help PWDs access public services and participate in the monitoring and decision-making of local authorities more easily. Easy access to public services and completion of public administrative procedures are also prerequisites for PWDs to integrate into the locality while minimizing consequences caused by natural disasters and pandemics in the future.

However, the level of satisfaction in using public services and participating in local governance of PWDs has not been recorded in the Viet Nam Provincial Governance and Public Administration Performance Index (PAPI).

Therefore, in July 2022, UNDP collaborated with the Mekong Development Research Institute to conduct a pilot assessment of the inclusion of PWDs in local governance to supplement the annual PAPI Index with indicators on the inclusion of PWDs from PWDs' perspectives. Through this survey, PWDs can reflect on the quality of local governance, public service delivery, and the attitude of officials and civil servants when working with PWDs in the locality.

This report presents the results of a pilot telephone survey of 1,627 PWDs from 6 different types of disabilities randomly selected from a list of more than 19,000 PWDs provided by UNDP. As a pilot study with certain limitations in the sample set, the survey results **are not representative of PWDs nationwide**. However, the findings from the quantitative survey as well as the in-depth interviews of the study have provided some remarkable results, which can be used as a basis for further research. Specifically:

On PWDs' participation at the local level

The level of participation in social organizations/groups of PWDs is still modest, with only 34.4% of PWDs involved in at least one social organization/group. The proportion of male PWDs participating in social organizations/groups is higher than that of female PWDs. Persons with Hearing and Speech, Intellectual, Mental and psychiatric disabilities have significantly lower levels of participation in social associations/groups than the other groups.

The rate of PWDs who do not participate in the elections of People's Councils and National Assembly deputies in May 2021 is quite high, at 47.1%. Voting participation of PWDs continues to show disparities in gender, types of disabilities, and severity of disabilities. The two biggest factors hindering PWDs from participating in elections are the ability to get to the polling place and access to information about the election, with 27.7% of PWDs sharing that they did not vote because they could not get to the polling place by themselves and 24.3% reported that they were not informed about the election.

Regarding accessing information in general, the survey results show that Hearing and Speech, Intellectual, Mental and Psychiatric are the major disability groups which reported not being able to easily access information through any form (27.5%, 28.1%, and 30.7%, respectively).

Regarding the adequacy of information from the different forms accessible to PWDs, sign language and Braille are two forms reported by PWDs to be *more inadequate / scarce* than other forms.

Meanwhile, information sources in the form of text on computers/phones/technical devices are considered by many PWDs as *Adequate/Perfectly adequate* (58.7%).

On PWDs' inclusion in public administrative procedures

The rate of certification has not yet covered all eligible PWDs, with the proportion of respondents who already have a disability certificate accounting for only 68%. Common barriers to obtaining a disability certification as perceived by PWDs relate mainly to the lack of clear guidelines for the certification/revocation process: 18.7% of PWDs reported not knowing the necessary procedures for applying for a disability certificate; 18.1% of PWDs 'Had applied at commune/ward/township committee but had not been processed'.

The need for local public administration procedures of PWDs is similar to that of the general population, but PWDs still face many difficulties in carrying out the procedures themselves, especially the group with Hearing and Speech disabilities.

The use of e-portals for administrative procedures is not yet widespread, with only 2.9% of PWDs or their guardians/caretakers having used this service, due to the lack of information dissemination to PWDs and/or the lack of technology skills.

On PWDs' inclusion in public services

42.4% of PWDs reported that public transport in their locality is not easy to use. In addition, 24% of PWDs cannot tell if the local public transport is easy to use or not, largely because they have never used it.

The district-level hospital services were evaluated quite well by PWDs in terms of attitudes of the service providers (89.9% of PWDs rated it well), medical examination and treatment costs (86.9% of PWDs assessed it as reasonable), and waiting time (79.3% of PWDs do not have to wait long for medical examination). However, hospital infrastructure (elevators, toilets, wheelchair ramps, etc.) needs to be more PWDs-friendly.

Notably, PWDs are most interested in mental health services among other public services: 37.8% of PWDs chose mental health care as a service that needs to be prioritized for investment by the government in the next five years.

The above results show that there are still many barriers for PWDs in general in participating in socio-political activities, carrying out administrative procedures, and using public services such as public transport, public facilities, and health services. Deep-diving in the issues, persons with hearing and speech, intellectual, mental and psychiatric disabilities are the groups that face particular difficulties and are most often left behind compared to other groups.

From the above results, the research team proposes the following recommendations:

- In terms of policies, it is important for the government to have appropriate support and investment in inclusive infrastructure/facilities so that PWDs can participate in socio-political activities as well as carry out public administrative procedures as others. Simultaneously, PWDs also need to have full access to information sources and be equipped with the knowledge and skills to use those facilities. In particular, policies on the inclusion of PWDs should fully pay attention to the characteristics and needs of each group of different types of disabilities to

ensure that no group is left behind, especially persons with hearing and speech, intellectual, mental and psychiatric disabilities.

- Further research on PWDs should focus on more representative sampling and explore topics such as mental health, rights to property, PWDs' political participation, the intersection of gender and disability, etc. more deeply.

1. Introduction

Persons with disabilities (PWDs) are one of the most marginalized groups in society. In addition to overcoming physical, sensory, intellectual, and nervous system impairments, people with disabilities also face barriers to integrating into the community and accessing basic rights such as education, employment, healthcare, etc. Since the Doi Moi economic reforms in the late 1980s, policies to support people with disabilities have undergone significant changes. After signing the Convention on the Rights of Persons with Disabilities (CRPD) in 2007, the National Assembly of Viet Nam passed the Law on Persons with Disabilities (Law No. 51/2010/QH12) in 2010, which is an important legal ground for promoting the responsibilities of the community, families, and society towards people with disabilities. Since then, the Government of Viet Nam has issued many policies and support programs for people with disabilities and collaborated with international organizations (UN, USAID, etc.) to implement programs aimed at ameliorating the quality of life for people with disabilities.

Over the past two years, the United Nations Development Programme in Viet Nam (UNDP Viet Nam) has made positive contributions in collecting information on the impact of the COVID-19 pandemic on PWDs. UNDP Viet Nam's assessments emphasize the impacts on the livelihoods and health of PWDs through two online sociological surveys (one in 2020 and one in 2021). The results revealed that the COVID-19 pandemic has had a serious impact on PWDs in aspects such as employment, income, access to basic needs (medicines, personal protective equipment, nutrition, water storage, assistive devices), and functional rehabilitation services, especially in 2021. These survey results showed that significant efforts from the government and public services are necessary to support PWDs. Hence, it is crucial to understand how PWDs are using public services and to measure their satisfaction with these services.

The Provincial Governance and Public Administration Performance Index (PAPI) in Viet Nam is a UNDP Viet Nam initiative, implemented annually since 2009. The PAPI survey measures and compares people's experiences and perceptions of the effectiveness and quality of policy implementation and public services provided by local governments in 63 provinces/cities, to advocate for effective and responsive governance¹. However, regarding PWDs, the PAPI survey has not clearly outlined how PWDs use public services and interact with local governments where they reside. Therefore, a PAPI survey specifically adapted in an accessible format for PWDs is important to make PAPI more inclusive. The survey results would provide a basis for policy-makers and government agencies to improve programs and policies supporting PWDs.

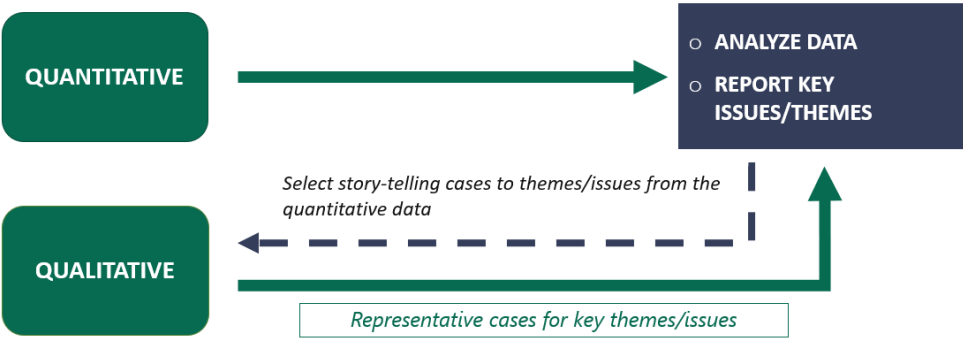
Responding to the need of understanding the experiences of PWDs regarding the effectiveness and quality of public services by local governments mentioned above, in July 2022, UNDP Viet Nam collaborated with the Mekong Development Research Institute (MDRI) to conduct a Pilot Assessment of the Inclusion of Persons with Disabilities in Local Governance (hereinafter referred to as the Pilot Assessment). This assessment integrates the measurement of some preconditions of disability inclusion and key dimensions of PAPI. Through this survey, PWDs will have the opportunity to reflect on the quality of public services and the attitudes of state officials at the local level when working with PWDs. Thus, the assessment results would be evidence to recommend actions advocating for disability inclusion into the policy-making process of central and local governments.

¹ <https://papi.org.vn/>

2. Methodology and limitations

The Pilot study on the disability inclusion in local governance consists of two components: quantitative telephone survey and qualitative interviews. The research design is illustrated in Figure 1. The main component is a quantitative survey with a large sample size. After the quantitative survey, the research team preliminarily analyzed the obtained data to identify key issues and themes for qualitative interviews. Qualitative interview data are used as case studies to illustrate quantitative survey data. This study design is intended to add insight from some case studies to further illustrate statements from the quantitative survey.

Figure 1. Research design



2.1. Quantitative sampling method

The research team utilized a sample list of people with disabilities (PWDs) provided by UNDP. The list included 19,472 PWDs with information on the types² and severity³ of disabilities, as well as the contact phone numbers of the PWDs or their relatives. This list was compiled by UNDP from various sources, with two main sources being (1) PWDs organizations/groups from the central to local level and (2) projects to support PWDs that UNDP had implemented previously.

The sample was randomly selected by disability type, with the goal of interviewing 250-300 samples for each disability type.

The total number of the actual survey sample obtained was 1,627 PWDs. The detailed statistics on the survey samples are presented in the table below.

² There are 6 types of disabilities, including: (1) Physical, (2) Visual, (3) Hearing and speech, (4) Mental and psychiatric, (5) Intellectual, (6) Others.

³ There are 3 groups of disability severity: (1) Mild, (2) Severe, (3) Extremely severe.

Table 1. Statistics on the number of initial samples and survey sample size

Types of disabilities	Total	Physical	Visual	Hearing and Speech	Mental and Psychiatric	Intellectual	Others
Population ⁴		9,840	4,227	1,277	2,601	1,280	2,558
Sample size	1,627	244	262	294	305	255	267
Number of contacted people	4,296	675	585	769	785	660	822
Rate of response	37.9%	36.1%	44.8%	38.2%	38.9%	38.6%	32.5%

2.2. Quantitative survey tools

The quantitative survey component uses a set of questions covering the following topics:

- General information about PWDs
- PWDs' inclusion in public administrative procedures at the local level
- PWDs' access to public services at the local level
- Meaningful participation of PWDs in decision-making processes related to local public governance

The main method of this survey is a telephone interview with an average duration of 20-30 minutes. However, the sample set includes people with Hearing and Speech disabilities, who are not suitable for the telephone interview method. In addition, the enumerators include both people with and without disabilities. Therefore, the research team designed survey methods to accommodate the diversity of both enumerators and respondents. Specifically, there are three forms of survey used:

- Enumerators interview the questionnaire using SurveyCTO software, entering data using a tablet
- Enumerators with a Visual disability interview the questionnaire using the Jotform platform, entering data by computer
- Respondents who are Hearing and Speech PWDs fill in their answers in a questionnaire on the Jotform platform (with a video of the questions being translated into sign language).

2.3. Qualitative interview method

Based on the quantitative results, the research team identified notable themes from the data set and selects cases representing those key topics to contact for permission to conduct qualitative interviews.

Scope and size of the qualitative sample: The research team selected 17 respondents from Quang Binh and Binh Dinh provinces because these are the two provinces with the highest proportion of the quantitative survey samples (29% and 13.6%, respectively). In addition, the research team selected an

⁴ This row represents the total disability types that the survey samples have. A PWDs can have many types of disabilities, so the total number of disability types is greater than the total number of PWDs surveyed. The second row is the accurate representation of the total number of PWDs surveyed.

additional respondent from Hanoi because they have a prominent story about public service experiences in urban areas.

2.4. Limitations

2.4.1. Survey tools

The language used in the questionnaire is administrative language. Therefore, some terms may be difficult to understand or not easily accessible for the general public and may cause misunderstandings, especially when communicated over the phone. For example, when asking about social services that require state investment, such as legal services, mental health services, etc., many respondents did not understand what legal services mean, or misunderstood mental health and physical health to be the same. In these cases, the enumerator would have to spend more time explaining these terms.

2.4.2. Sample set

The sample includes both veterans and other PWDs (including people who became PWDs because of war but are not veterans), so there are some difficulties as follows:

- In many cases, the respondents were veterans, but the sample did not include that information, so the enumerators had difficulties approaching these respondents.
- It is inappropriate to use the same questionnaire because PWDs and veterans have different ways of determining their disability status, as well as different impacts on their lives. They also have different supports and governing systems in the locality.

In addition, the sample set has several limitations as follows:

- In the sample set, there are still many people who do not have a disability certificate. In these cases, it is difficult to identify whether they are PWDs or not through phone interviews. Enumerators only have information provided by the respondents and cannot assess the accuracy of the information by themselves. The Washington Group on Disability Statistics considers respondents who “answer ‘a lot of difficulties’ or ‘cannot do it at all’ to at least one of the six functioning questions” (with the “six universal basic activities (functions)” being “seeing, hearing, walking, self-care, cognition and communication”)⁵ to be PWDs. However, determining the level of difficulty depends on many subjective and objective factors, such as distinguishing between “difficult” and “slightly difficult” to determine whether a person has a disability or not, which is not clear even when using the same definition of disability as the Washington Group on Disability Statistics⁶.
- The sample list contains a lot of information about the type and severity of disabilities that is not consistent with the information given by the respondents, or many respondents do not have a disability certificate. If the PWDs has a disability certificate with full information, the enumerator can update the information. However, for respondents who did not have a disability certificate or a certificate that lacked information on the type and/or severity, the enumerators could not accurately confirm the status of PWDs through phone interviews.

⁵ Washington Group on Disability Statistics (2020), An Introduction to the Washington Group on Disability Statistics Question Sets

⁶ GSO (2018), 2016 National Statistics Report on People with Disabilities

- This sample was collected by UNDP from previous projects to support PWDs, so it focuses mainly on Severe/Extremely severe PWDs and the elderly, and is more concentrated in some central coastal provinces than other regions. Therefore, the representativeness of the sample is limited. The results of the analysis are only representative of the sample, not all PWDs in Viet Nam.
- Within the limited resources, the project's survey subjects only focused on PWDs and did not include opinions from the perspectives of the public service providers, for example, local civil servants and employees in local public administration agencies. Therefore, the survey results only reflect a one-dimensional picture.

2.5. Some notes for how to interpret the survey results

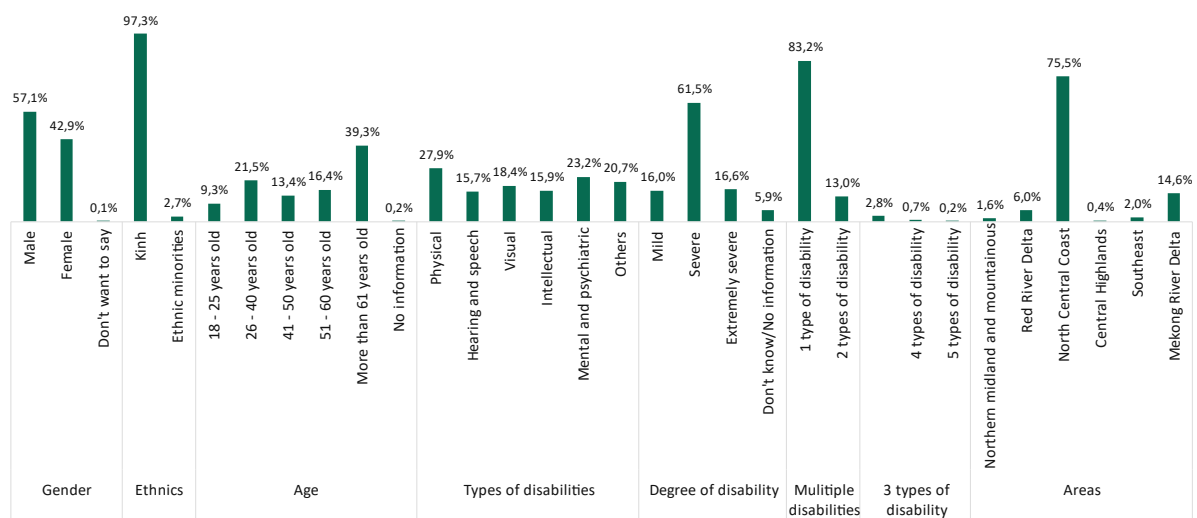
- The percentage disaggregated by disability type/severity of disabilities/gender/age means the percentage of PWDs who answered one option out of the total number of PWDs in the same disability type/severity of disabilities/gender/age groups surveyed in this study.
- Indicators disaggregated by type and severity of disabilities can only be calculated for PWDs who have a disability certificate.
- The results of this survey were compared with data from a number of other studies, such as the Provincial Governance and Public Administration Performance Index in Viet Nam (PAPI) and the 2016 National Survey of People with Disabilities by the General Statistics Office of Viet Nam. However, these comparisons are for reference only as each study has a different sampling method.

3. Key findings

3.1. Socio-economic characteristics of the survey sample

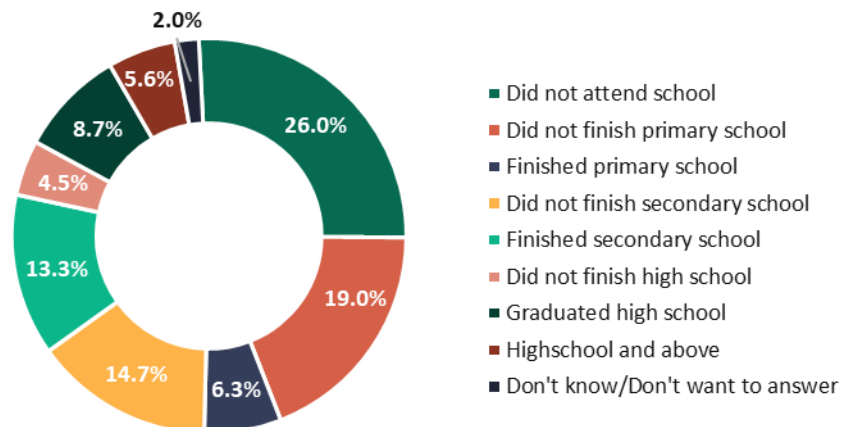
In this assessment, the proportion of male respondents accounted for 57.1% (while female respondents accounted for 42.9%). Ethnic minority respondents represented only 2.7% of the sample. Notably, the group of PWDs aged 61 and above made up the highest proportion at 39.3%. Regarding the degree of disabilities, severe PWDs accounted for 61.5%. Considering multi-disabilities, more than 16% of respondents have two or more types of disabilities. In terms of geographic distribution, 75.5% of PWD were currently living in the North Central Coast region. As previously mentioned, the survey sample has limitations in terms of representativeness, and therefore, the survey results in this report are not representative of PWDs nationwide.

Figure 2. Overview of the characteristics of the survey sample



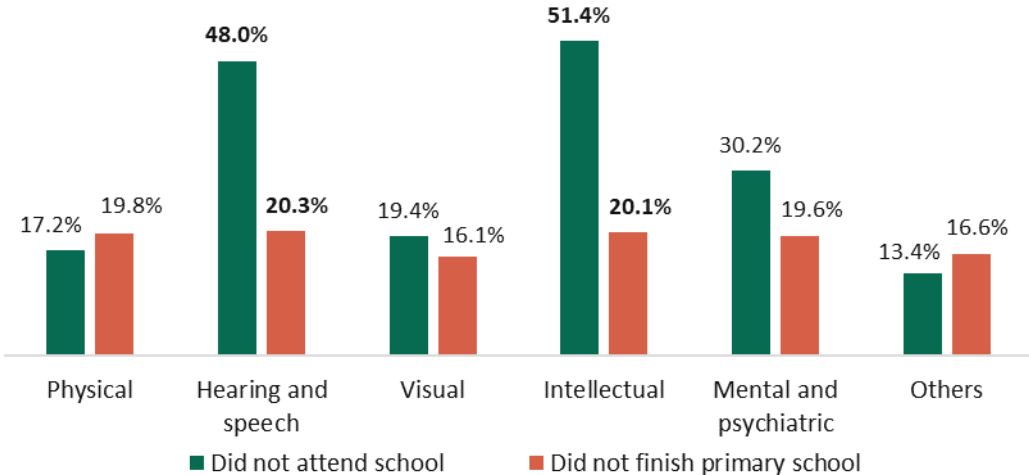
The education level of the survey sample is mostly "Did not attend school" (26%) and "Did not finish primary education" (19%). Only 13.3% of the survey sample finished secondary school and just 14.7% finished high school or higher.

Figure 3. Education level of the surveyed sample



In the group of PWDs who “Did not attend school” and “Did not finish primary school” (Figure 4), when disaggregated by types of disabilities, the two highest groups are: Hearing and Speech (Did not attend school: 48%; Did not finish primary school: 20.3%) and Intellectual (Did not attend school: 51.4%; Did not finish primary school: 20.1%). Therefore, it is noticeable that the education level of PWDs in this assessment is relatively low.

Figure 4. Percentage of PWDs did not attend school/did not finish primary school



Regarding employment status, more than half of the survey sample (55.7%) responded that they were currently not employed/have no job, and 17% of respondents reported that they have never had a job. Only 27.3% of PWDs reported that they are currently employed, with the self-employed in agriculture accounting for the highest proportion (36.2%), followed by those with an informal job/without labor contract (18.2%) and those self-employed in the non-agricultural sector (16.2%). The group with the lowest proportion is those “support in family business” (3.6%). It appears that these are job groups with no requirement of a high level of education, given the majority of PWDs reported that they did not attend any school and did not finish primary education.

Figure 5. PWDs’ employment status

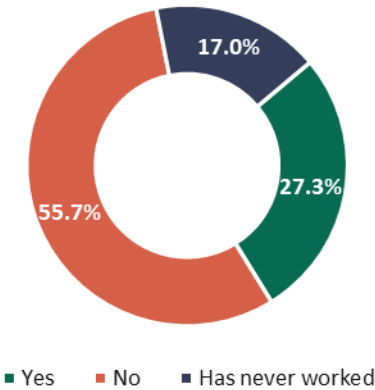
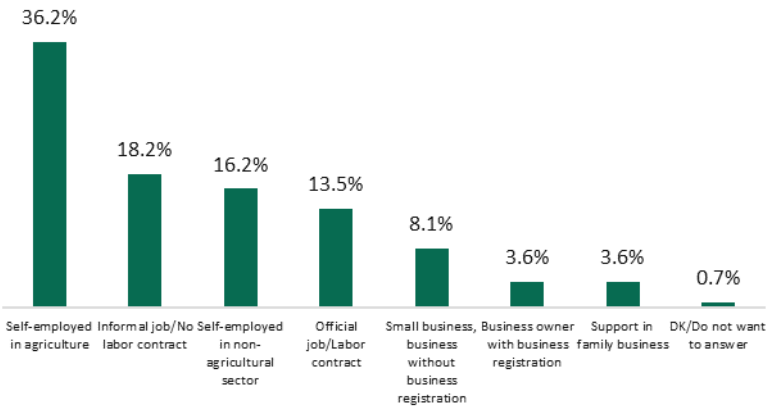


Figure 6. PWDs’ employment types



Among PWDs who were unemployed/had never worked, the Intellectual disabilities group had the highest percentage at 92.8%, while the rate for the group of Visual disabilities was only 49.1%. Additionally, when classified by the severity of disabilities, the rate of people with Severe and Extremely severe disabilities who are unemployed/had never worked both stood up for over 70%.

Figure 7. Percentage of PWDs unemployed/have never worked by types of disabilities

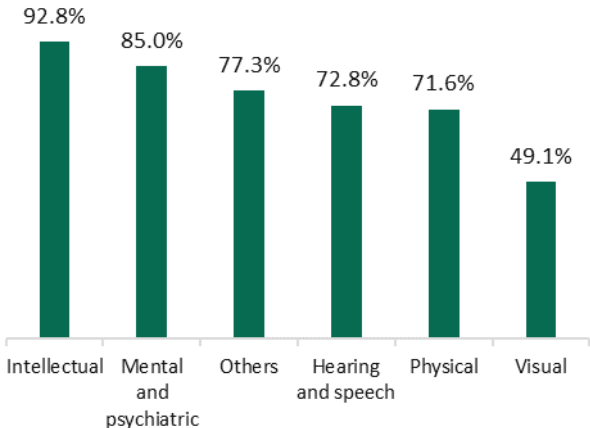
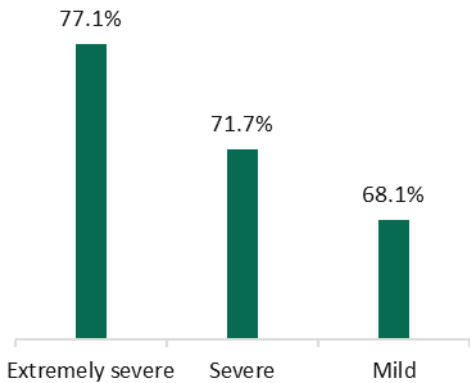
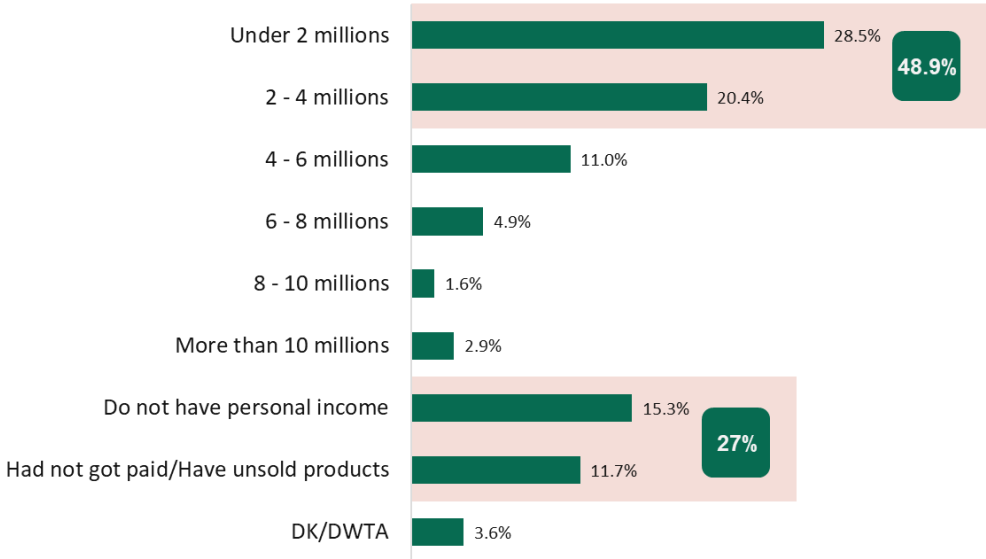


Figure 8. Percentage of PWDs unemployed/have never worked by severity of disabilities



In terms of income, the survey examined information on the total income of PWDs in June 2022. Among the PWDs having a job with income, roughly half of PWDs (48.9%) had incomes below 4 million VND in the most recent month. Furthermore, the proportion of PWDs who “Have no personal income” and “Had not got paid/have unsold products” was relatively high, accounting for 27% of the total survey sample.

Figure 9. Total income of PWDs (June 2022)



The survey results reflect the existing barriers in accessing education and employment services for PWDs. These are two basic services that can help PWDs improve their cognitive and skills development, as well as enable them to generate income for their lives. Hence, supporting PWDs in approaching education and employment services should be a top priority in the near future.

3.2. Persons with disabilities’ participation at the local level

3.2.1. Participation in social groups/organizations

The level of participation in social groups/organizations is an important indicator of the level of PWDs’ inclusion into the community. The International Convention on the Rights of Persons with Disabilities (CRPD) states that countries should encourage PWDs to participate in social activities, such as non-governmental organizations and associations, as well as local, regional, national, and international disability organizations.⁷

The results of the pilot assessment revealed that the level of participation in the social activities of PWDs was still minor, with only 34.4% of PWDs surveyed participating in at least one social group/organization. This rate is lower than the rate of participation in social groups/organizations of the population in the 2021 PAPI survey⁸ (by 10 percentage points) (Figure 10).

Figure 10. Percentage of PWDs participating in at least one social organization/group

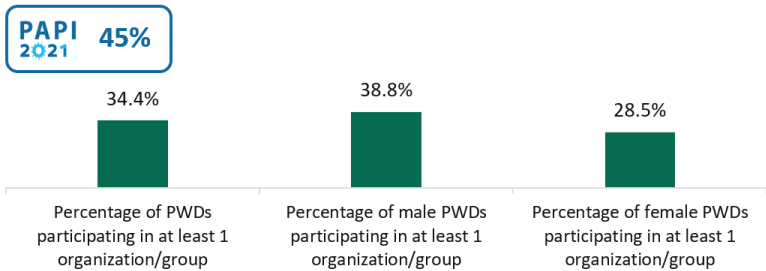
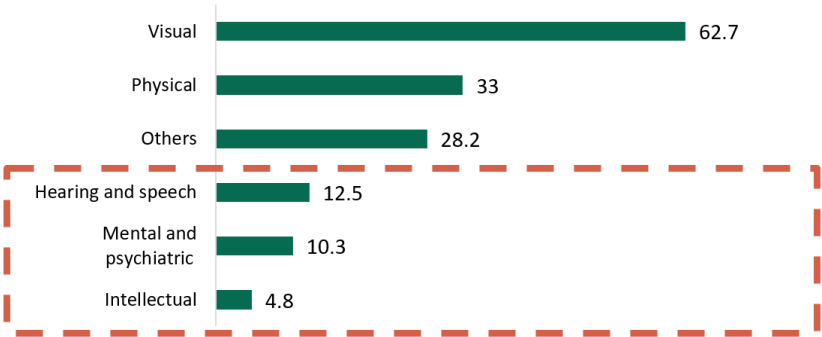


Figure 11. Percentage of PWDs participating in at least one social organization/group (disaggregated by types of disabilities)



The level of participation in social organizations/groups varies by gender and types of disabilities. The proportion of male PWDs participating in groups/organizations is 10 percentage points higher than female PWDs (Figure 10). The groups of Hearing and Speech, Mental and Psychiatric, and Intellectual disabilities have significantly lower levels of participation in social groups/organizations compared to other groups (Figure 11). Specifically, while nearly 63% of Visual, 33% of Physical, and 28% of Others have participated in at least one social group/organization, the figures for Intellectual, Mental and

⁷ Article 29, the International Convention on the Rights of Persons with Disabilities. <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-29-participation-in-political-and-public-life.html>.

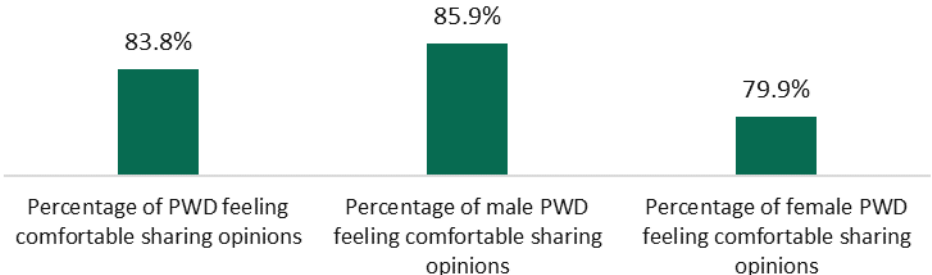
⁸ CECODES, VFF-CRT, RTA & UNDP (2022). The Provincial Governance and Public Administration Performance Index (PAPI) 2021: Measuring citizens' experience.

Psychiatric, and Hearing and Speech disabilities are only 5%, 10%, and 13%, respectively. These results indicate significant inequality in the inclusion and participation of people with cognitive and communication-related disabilities in community activities. Therefore, it is imperative to undertake additional research aimed at designing support strategies for people with these disabilities in order to eliminate existing barriers, and enable them to fully engage in social activities and organizations as their right.

The most common groups/organizations that PWDs typically participate in were the Veterans Association (11.7%), the PWDs Association/Blind Association (11.5%), and the Association of the Elderly (10.9%). These results reflect the characteristics of the sample, which includes many veterans and senior citizens, and show that the organizations that PWDs participate in are not yet diverse enough.

The majority of PWDs who participated in at least one social group/organization felt that they did not encounter barriers when participating in activities at these organizations. Nearly 84% of PWDs surveyed felt comfortable expressing their opinions in group/organization meetings. Upon examining the results regarding the most common groups/organizations that people with disabilities participate in, one plausible explanation for this is that most of these groups consist of individuals who share similar circumstances and belong to the vulnerable groups, rather than organizations that promote inclusion, such as youth associations or professional associations. However, the proportion of male PWDs who feel comfortable expressing their opinions is higher than that of female PWDs (Figure 12).

Figure 12. Percentage of PWDs who feel comfortable sharing opinions in social groups/organizations meetings (disaggregated by gender)



3.2.2. Participation in practicing voting rights

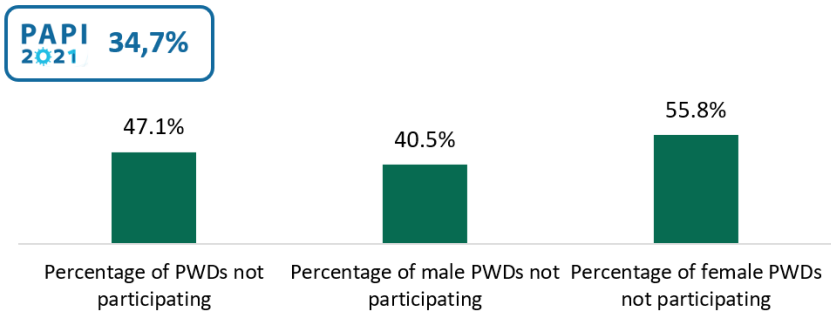
The International Convention on the Rights of Persons with Disabilities, adopted by the United Nations General Assembly in 2007, emphasizes that the right of persons with disabilities (PWDs) to participate in political life is one of their fundamental rights, and member states must "ensure that persons with disabilities can effectively and fully participate in political and public life on an equal basis with others," including "the right and opportunity for persons with disabilities to vote and be elected" (Article 29, b, Convention on the Rights of Persons with Disabilities). The pilot assessment on the Political Participation of PWDs in the sample examined the extent of PWDs' participation in the most recent elections to the People's Councils and the National Assembly (May 2021).

The survey results show that the proportion of PWDs who reported not participating in the May 2021 elections for the People's Councils and National Assembly was quite high, at 47.1%. This percentage is

significantly higher than the percentage of non-participation in this election from the PAPI 2021 survey ⁹(34.7%).

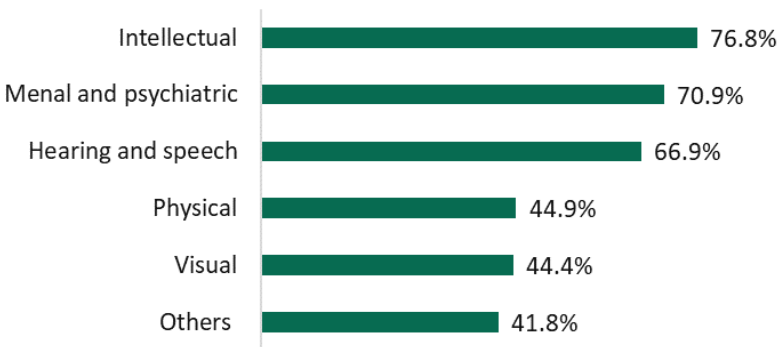
The disaggregated data indicates that the level of participation in elections among PWDs continues to vary by gender, types of disabilities, and severity. Specifically, the percentage of female PWDs who did not participate in the elections was 15 percentage points higher than that of male PWDs (Figure 13). However, this difference needs to be interpreted with caution due to the lower percentage of female PWDs in the sample compared to male PWDs (43% and 57%, respectively). Nevertheless, this result highlights the barriers that female PWDs might face compared to male PWDs in practicing their voting rights and participating in political life. Therefore, this issue should be further studied in the future.

Figure 13. Percentage of PWDs not participating in voting for People’s Councils/National Assembly May 2021 (disaggregated by gender)



When comparing the results between different disability groups, there was a significant difference in the voting rates between the groups of intellectual, mental and Psychiatric, and Hearing and Speech disabilities compared to the other groups. Specifically, the percentage of PWDs who did not vote in the May 2021 People's Councils and National Assembly elections for these three groups was 77%, 71%, and 67%, respectively, much higher than the other groups of PWDs such as Physical, Visual, and Others (Figure 14). It reflects consistent barriers imposed on persons with Intellectual, Mental and Psychiatric, and Hearing and Speech disabilities in participating in political and public life.

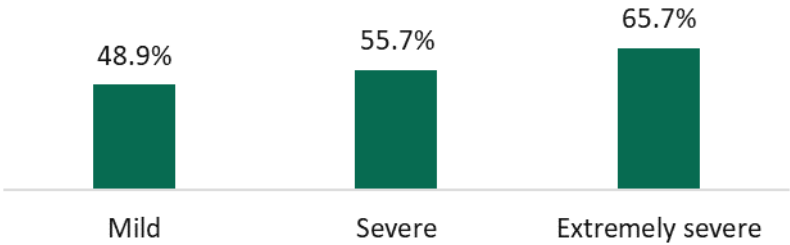
Figure 14. Percentage of PWDs not participating in voting for People’s Councils/National Assembly May 2021 (disaggregated by types of disabilities)



⁹ CECODES, VFF-CRT, RTA & UNDP (2022). The Provincial Governance and Public Administration Performance Index (PAPI) 2021: Measuring citizens' experience.

Additionally, the disaggregated results showed that PWDs with severe and extremely severe disabilities have lower voter turnout rates. Specifically, 66% of PWDs with extremely severe disabilities and 56% of those with severe disabilities did not participate in the May 2021 election (Figure 15).

Figure 15. Percentage of PWDs not participating in voting for People’s Councils/National Assembly May 2021 (by severity of disabilities)



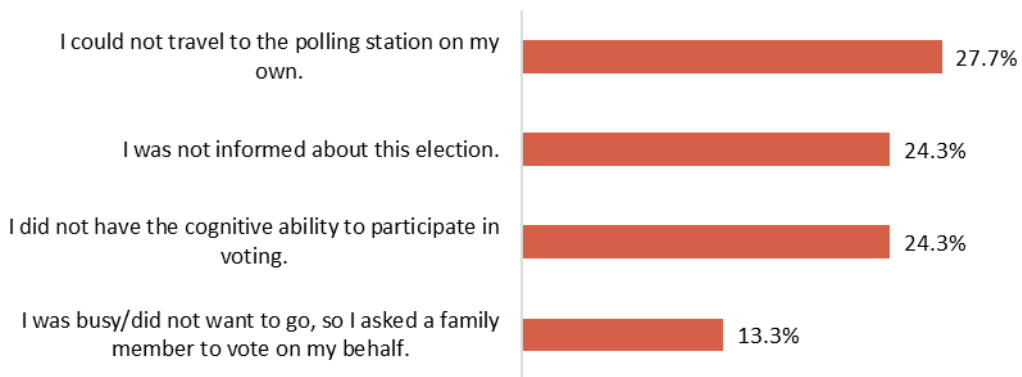
Due to the characteristics of the pilot survey sample, which included both people with disabilities and veterans, the research team separated the election data of the two groups in order to reflect more accurately the participation rate of people with disabilities. The results showed that veterans participate in elections much more than PWDs (Figure 16). Therefore, it can be concluded that although both groups may face similar physical difficulties in participating in elections, there are still specific barriers for PWDs, who are often not members of political-social organizations such as the Veteran's Association.

Figure 16. Percentage of people participating in voting in PWDs (not veterans) group and veterans group



In order to gain a deeper understanding of the barriers preventing PWDs from engaging in public political life, the Pilot Assessment asked why PWDs did not participate in the 2021 elections for the People's Council and the National Assembly. The study found that the main obstacle hindering people with disabilities from exercising their voting rights was the difficulties they faced in accessing polling stations. 27.7% of respondents reported that they could not travel to the polling station on their own. Other common reasons included the lack of cognitive ability to participate in voting, the lack of information about the election, and being too busy or not wanting to go, so they asked a family member to vote on their behalf (Figure 17). These findings demonstrate that while some barriers are subjective, such as lack of awareness or being too busy, there are also objective barriers such as accessibility to polling stations and information that prevent PWDs from exercising their political rights on an equal footing with non-disabled people.

Figure 17. Reasons why PWDs did not attend voting



In order for PWDs to fully and effectively participate in public political life, their right to vote is protected by the 2015 Law on Election of Deputies to the National Assembly and People's Councils. According to Article 69, Clause 4 of this law, in cases where PWD "cannot come to the polling stations, the Election Committee shall bring ballot boxes and ballots to their place of residence or treatment." However, the results of this pilot assessment and the insights shared by PWDs from in-depth interviews suggested that the implementation of support measures for PWDs to participate in local elections still faces many challenges and needs to be improved, particularly in terms of accessibility to polling stations and providing accessible information about the election to PWDs, in accordance with the spirit of the CRPD.

"Normally people say that for a person with a disability who cannot move and can only lie in one place, if an important election is taking place, someone will bring a ballot box over, but I think it's just talk.

Interview with a person with a physical disability

Article 69, Clause 4, Election Law:

In case a voter is ill, elderly, or disabled and unable to come to the polling station, the Election Board shall bring a supplementary ballot box and ballot papers to the place of residence or medical treatment of the voter, for the voter to receive ballot papers and exercise the right to vote.

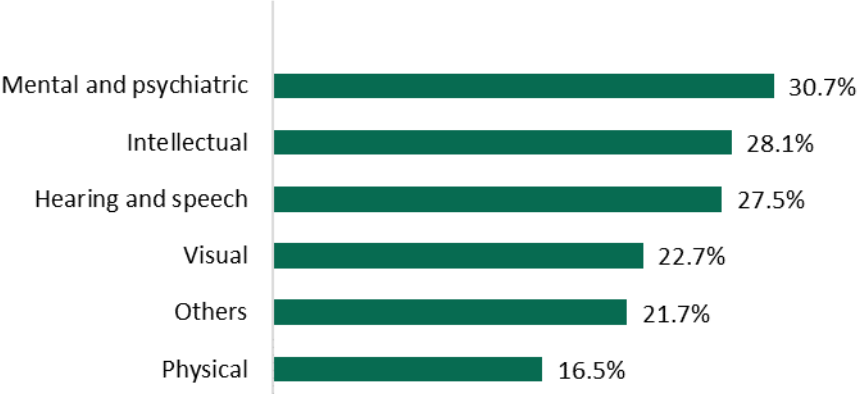
3.2.3. Access to information

The results on PWDs' participation in elections above demonstrate that information barriers are one of the biggest issues that reduce their ability to participate equally in public political and social activities. This pilot survey included questions to investigate the tools that support PWDs' access to information, specifically the most easily accessible information formats, as well as the completeness of information sources from these formats.

The majority of PWDs find audio the easiest format to access information (63.3%), with the exception of respondents with Hearing and Speech disabilities who find sign language the most easily accessible format. Notably, respondents with hearing and speech, intellectual, and mental and psychiatric disabilities are the three groups that have the most difficulties in receiving information through any form (**Error! Reference source not found.**). These are also the groups with the lowest levels of electoral and social group participation. While it is not yet possible to establish a correlation between information

access inequality and the ability of these groups to participate in community political and social life, these results suggest a need for deeper research into this correlation in order to identify the obstacles that hinder PWD's participation in community political and social life, and thus provide more effective solutions for their integration.

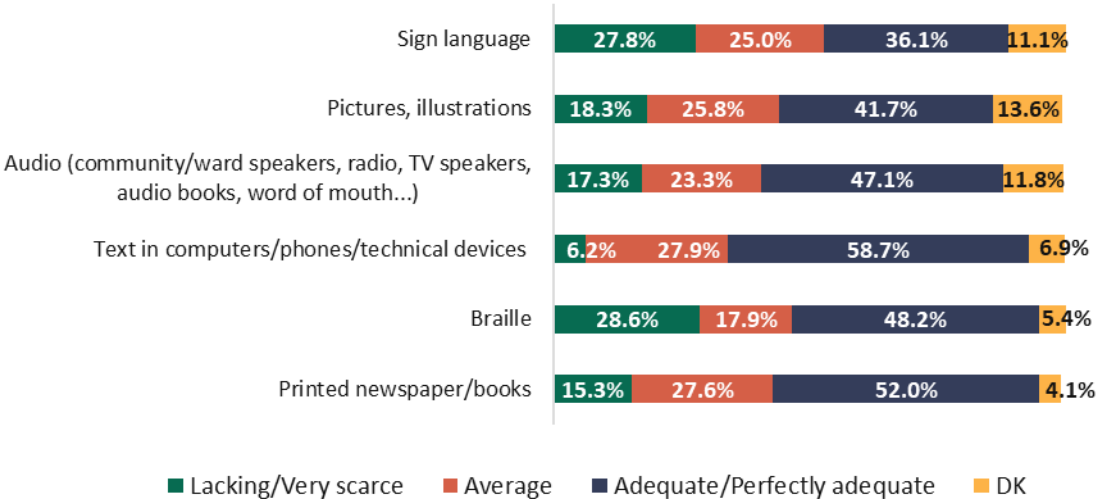
Figure 18. Percentage of PWDs who do not find it easy to access information in any form



Regarding the completeness of information sources accessed through different formats by PWDs, sign language and Braille are two forms reported by PWDs to be *Lacking/Very scarce* compare to other forms that PWDs can access. An in-depth interview with a Visual PWD in Binh Dinh province showed that although they have been taught to read Braille, they have no access to any Braille documents to read. This finding suggests that providing skills for accessing information alone without providing the necessary information sources may still leave PWDs behind in accessing information.

Meanwhile, information sources in text from computers/phones/technical devices are considered *Adequate/Perfectly adequate* by many PWDs (58.7%) (Figure 19). This implies that if technological devices are designed to be easily accessible to PWDs, they can become a primary, complete, and up-to-date information source for them.

Figure 19. The adequacy of information resources that PWDs can access



Conclusion regarding the level of participation of PWDs at the local level:

The level of participation of PWDs at the local level is still low and there is a disparity in gender and disability types.

- In-depth studies are needed to understand the particular barriers faced by female PWDs and persons with Hearing and Speech, Mental and Psychiatric, and Intellectual disabilities in participating in local community groups and activities, in order to develop appropriate solutions for each group.

The two biggest factors that hinder PWDs from voting are the ability to travel to the polling place and access to information about the election

- Local authorities need to improve polling locations to be easily accessible to all voters, including PWDs.
- Local authorities need to focus on disseminating information about the election to PWDs, especially those with hearing and speech, mental and psychiatric, and intellectual disabilities, in accessible formats for each group.

Persons with hearing and speech, intellectual, mental and psychiatric disabilities are the groups that face many difficulties in accessing information

- Training in accessing information skills is needed for these PWD groups (e.g., supporting those of Hearing and speech to learn sign language).
- Official interpreter training courses in sign language are needed to increase the quantity and quality of interpreters, especially in public services such as healthcare and legal assistance.
- More accessible information channels are needed for these groups (e.g., sign language on television for those with Hearing and speech disabilities).
- Budgets should be allocated for producing and disseminating accessible formats.

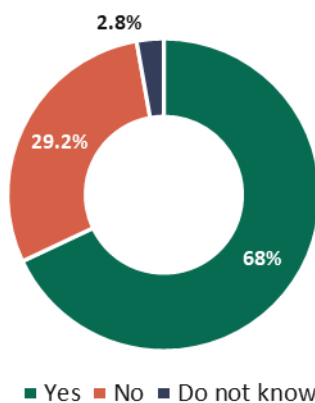
3.3. Persons with disabilities' inclusion in public administrative procedures

3.3.1. Disability certificate & disability support pension

Procedures for issuing a disability certificate

Disability certificate issuance is one of the essential procedures as it provides the basis for subsequent steps in the overall policy of supporting PWDs in the locality, for example, for PWDs to become eligible for social assistance according to the regulations of Decree 20/2021/NĐ-CP of the Government. Out of a total of 1,627 respondents, 68% had a disability certificate, 29.2% had not been issued a disability certificate, and 2.8% did not know whether they had been issued a disability certificate or not (Figure 20).

Figure 20. Proportion of PWDs with disability certificate



Among the respondents who have not been issued a disability certificate, 51.4% have been issued with a certificate of veterans, other certificates related to veterans, or their disability certificate applications are being processed. (Table 2).

In addition to the reason that there are other types of certificates, the two most common reasons for not having a disability certificate are 'Have applied to the commune/ward/township committee but it has not been processed' (18.1%) and 'Do not know the procedure for applying for disability certification' (18.7%). About 1.7% of people who do not have a disability certificate said that they could not apply for a disability certificate because of a lack of support to go to the People's Committee of the commune/ward/township and 4% did not know the reason why they do not have a disability certificate. These four reasons have many cases related to the interaction between PWDs and officials providing public administrative procedures in the locality. The total proportion of this group accounts for 42.5% of the people who do not have a disability certificate.

Table 2. Reasons PWDs do not have a disability certificate

Reasons for not having a disability certificate (% of people without a disability certificate)	%
See no purpose in getting one	1.1
Other	2.7
Do not know	4
Lack support to do the procedures at commune/ward/township committee	1.7
Has applied at commune/ward/township committee but had not been processed	18.1
Do not know the necessary procedures	18.7
Had done the procedures and waiting to be processed	2.3
Already had veteran certificate or other related certificate	51.4

In addition, in qualitative interviews, some PWDs reported that they had their disability certificates revoked or their disability support pension cut off without a clear explanation, for example, a 67-year-old PWD shared that he was entitled to disability support pension at 'about 180 thousand dong the first time [...] then more at 270 thousand. I was cut off in 2015. They decided to cut me off and that's it [...] no reason at all.'

Another problem that many respondents reported is that they have not received a clear and reasonable explanation of the criteria for issuing disability certificates. For example the following story of a respondent who did not receive a reasonable explanation of the criteria and procedures for granting certificates and benefits related to their alleged disability:

“R: Because I am not from a poor/near poor household, I do not get disability aid. They said that only the poor get to have it. [...] If I want to be recognized as a PWD, they will examine me and I get that examination in paper, but I would not have the disability certificate [...]

Q: Do you know what papers would one need to ask for the disability certificate?

R: We have to go to the Commune People's Committee if we want that [...] As for paper, like back then I was in an accident and there were papers, when they investigated they did confirm that I was in an accident.

Q: *Is that not acceptable?*

R: *No. The list that was sent to the Commune People's Committee still has my name, as in the policies but I did not receive anything. So my husband went to the commune council. [...] The council responded that when the US compensates, you will have it. How do you feel about that answer?"*

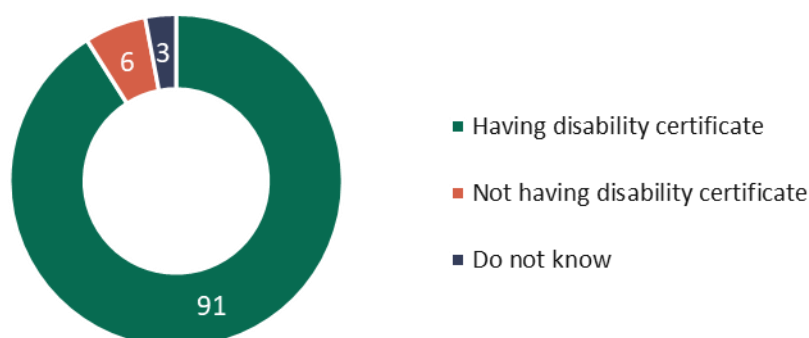
Interview with a 66-year-old female PWD

With the information provided by the above 66-year-old female respondent, if compared with the provisions of Clause 6, Article 5, Decree 20/2021/ND-CP of the Government, there is no requirement to be a poor/near-poor household to receive disability support pension. If the respondent's condition does not satisfy the conditions for a disability certificate as prescribed, the respondent should also be explained the reasons in accordance with the government's regulations.

In the scope of this project, because there is no component of interviewing the opinions of local government officials and employees, it is not possible to get more information from the provider of this public service. However, with the general situation reflected in both quantitative and qualitative data on the difficulties and obstacles that PWDs face in receiving information from local authorities, this is also an issue that should be noted in supporting PWDs to carry out public administrative procedures to avoid causing confusion and frustration for PWDs.

Disability support pension

Figure 21. Proportion of PWDs receiving disability support pension



38 PWDs with a Severe/Extremely severe disability certificate do not have a disability support pension. However, in this group, there are people who have received other types of social assistance. The remaining PWDs who have a Severe/Extremely severe disability certificate and answered that they did not receive any assistance are 07 people.

In addition, 24 PWDs with a Severe/Extremely severe disability certificate do not have health insurance – equivalent to 3.4% of the surveyed PWDs with a Severe/Extremely severe disability certificate. Thus, this result is similar to the analysis of the rate of PWDs being issued health insurance in the 2016 National Statistics Report on People with Disabilities of the General Statistics Office (GSO). According to the GSO's report, in general, PWDs always have a higher rate of having health insurance than people without disabilities because in addition to the health insurance provided by the Government for PWDs according to regulations on supporting PWDs, PWDs also have the ability to receive support for health insurance through other social support policies (e.g. poor households, elderly, people with serious diseases such as HIV, etc.). However, the GSO's report does not have results comparable to the results

of this report. The reason is that the GSO's report does not disaggregate the group of PWDs with disability certification according to the type and level of disability as detailed in this report.

Even though the number of PWDs with a Severe/Extremely severe disability certificate that do not have disability support pension or health insurance accounts for a very small percentage of the total sample, it still illustrates the disparity between the issuance of disability certificates and the provision of social assistance for Severe/Extremely severe PWDs, in accordance with Decree 20/2021/ND-CP (Clause 6, Article 5; Point e, Clause 1, Article 6) and free health insurance (Article 9).

The need for a minimum support rate

In accordance with Decree 20/2021/ND-CP (Articles 4 and 6, Clause 1(e)), PWDs with a certificate of Severe/Extremely severe disability are entitled to social assistance with a support rate of between 1.5 and 2.5 compared to the standard social allowance of 360,000 VND/month depending on the situation. Accordingly, surveyed PWDs whose status is eligible for receiving social allowance will receive from 560,000 VND to 900,000 VND per month. However, up to 86.1% of surveyed PWDs think that the current support rate is not enough to meet their minimum subsistence.

According to the survey results on the minimum allowance that respondents consider to be enough to cover their basic living needs, the average suggested allowance is VND 1,500,000/month. During the qualitative interview, some respondents offered more specific reasons to explain why they chose the proposed subsidy levels, including references to the minimum wage (as in the case of the respondent quoted below). Although the allowance of social assistance in accordance with Decree 20/2021/ND-CP is calculated in a different way than the minimum wage, the minimum wage is also one of the references for many respondents and is closest to the average proposed support rate of the surveyed samples.

“Do not know how much is enough, as long as it is enough to live. [...] At the last meeting between the People’s Council and the people, many people did not want to speak up so I said that is the need of families under preferential treatment policy, [if we were to raise the salary] then we should give them higher support too, at least as the minimum wage of 1,490,000 or something.”

Interview with a 67-years-old female PWD

In addition, because the monthly support rate still does not meet the minimum subsistence of PWDs, those without or with limited support from their families find it difficult to accumulate financial resources for emergencies. Therefore, in addition to monthly social subsidies, some PWDs surveyed also expressed their need to receive special needs-based support. For instance, in the case of a PWD (a 40-year-old visually impaired male who has completed university education) who was interviewed for the qualitative interviews component, the biggest barrier for him in secondary and higher education is the lack of "educational tools". According to him, specialized equipment to support PWDs' learning often costs a significant amount of money, which is not affordable for those with low income, who already struggle to meet their minimum living needs. Thus, for those who are impacted by both disability and poverty, monthly social subsidies are insufficient to help them overcome these dual barriers.

The effect of barriers in terms of learning tools to support PWDs' participation in economic-educational activities is partly reflected in the survey results on the education level and employment status of the surveyed PWDs (details in Section 3.1). Accordingly, nearly half of the survey sample (about 45%) have

never attended any school or have not finished primary school and nearly two-thirds (about 68%) of the survey sample are either unemployed or have never worked before. Therefore, in addition to the monthly monetary social allowance, there should be other types of special needs-based support to help PWDs have equal opportunities to participate in educational and economic activities.

3.3.2. Right to property – Percentage inscribed in the land use right certificates

Under Article 12(5) of the 2007 Convention on the Rights of Persons with Disabilities, PWDs must be recognized as equal before the law, in which the Convention requires member states to "ensure the equal right of persons with disabilities to own or inherit property". One of the most important inheritance and property ownership issues is land use rights so that PWDs can own property in terms of land and residence.

The issue of ownership of land use rights for PWDs is related to the relationships and interactions between PWDs and other individuals, from family members to local government agencies and society in general. In particular, PWDs face many barriers to their ability to participate in family decision-making and legal processes to own and protect an important and valuable asset to which they are entitled.

On that basis, this study surveyed PWDs about their ownership of land use right certificates (also known as "red books"). The results showed that 46% of PWDs who have a disability certificate in the survey sample are listed on the household's land use right certificate. This number in the PAPI 2021 survey results¹⁰ is 72.5%. Thus, the proportion of PWDs inscribed in the land use right certificates is significantly lower than that of the general population survey sample.

Figure 22. The rate of PWDs being inscribed in LURCs by gender (only PWDs having disability certificates)

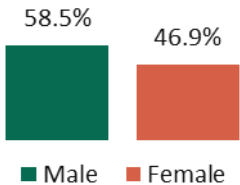
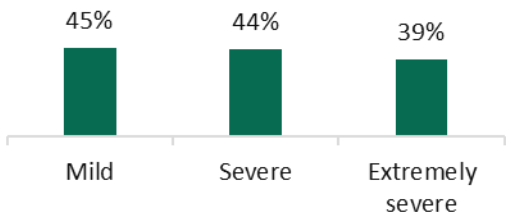


Figure 23. The rate of PWDs being inscribed in LURCs by disability severity



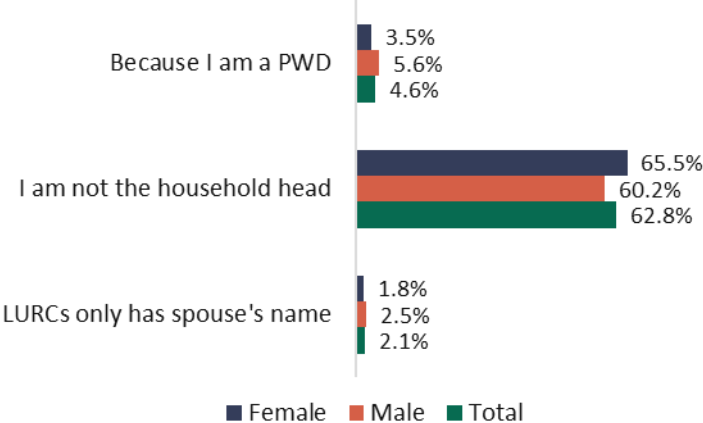
Comparing the proportion of PWDs inscribed in the land use right certificates disaggregated by gender, the rate of male PWDs being inscribed in land use rights certificates is about 10% higher than that of female PWDs (Figure 22). However, there is not a big difference in the proportion inscribed in the land use right certificates between different severity of disabilities (Figure 23).

Although the percentage of PWDs inscribed in the land use right certificates is lower than the equivalent rate in the general population survey, the biggest reason (62.8%) the respondents are not

¹⁰ CECODES, VFF-CRT, RTA & UNDP (2022). The 2021 Viet Nam Governance and Public Administration Performance Index (PAPI 2021): Measuring Citizens’ Experiences. A Joint Policy Research Paper by Centre for Community Support and Development Studies (CECODES), Centre for Research and Training of the Viet Nam Fatherland Front (VFF-CRT), Real-Time Analytics (RTA), and United Nations Development Programme (UNDP). Ha Noi, Viet Nam.

inscribed in the land use right certificates is because they are not the household head/spouse of the household head. However, there are still other reasons related to the equal right to property of PWDs that respondents mentioned, which are the land use right certificates only have the spouse's name (2.1%), or "Because I am a PWD" (4.6%).

Figure 24. Main reasons why PWDs are not inscribed in LURCs



In the qualitative interviews, some of the surveyed PWDs and their guardians/relatives also expressed their opinions on the reason why PWDs are not inscribed in the household's land use right certificates. Accordingly, there are two main groups of opinions. The first is that the guardians/relatives of PWDs were concerned that PWDs did not have the capacity to manage assets and therefore did not include them in the land use rights certificate. For example, a family member of a 38-year-old male PWD surveyed stated that their family did not include this PWD in the land use certificate because "he has hearing and speech disability, what if there are some problems?" Meanwhile, the brother of a 57-year-old male PWD shared that their mother transferred the land use certificate to him instead of to his PWD brother because "He is mentally disabled, what does he know anyway?"

The second common group of opinions was that PWDs voluntarily chose not to be included in the land use right certificates because they believed that they had limited abilities and would find it difficult to carry out necessary procedures or related socio-economic activities. One 56-year-old male PWD surveyed voluntarily chose not to be included in his family's land use certificate because he felt that "as a person with a disability who cannot walk, how can I be included?" Another case of a 42-year-old male PWD stated that his mother transferred the land use rights certificate to his younger brother who is not a PWD "so that it can be easier for the transferring procedure and so on" and he lives with the brother.

However, in addition to the above popular opinions, some PWDs know and understand laws related to the right to property, namely the right to be inscribed in the land use right certificates, and how to exercise their rights. The following case of a female PWD is a positive example for PWDs, especially women:

"The old law stated only 1 but now it is both husband and wife. [...] it has always been both my husband and I (have names in land use rights certificates) but I am the owner of the land in the certificate."

Interview with a 67-year-old female PWD

The results of the survey indicate the importance of providing basic information and legal knowledge to PWDs to enable their equal participation in decision-making on significant issues, such as ownership of land use rights within their families and social interactions.

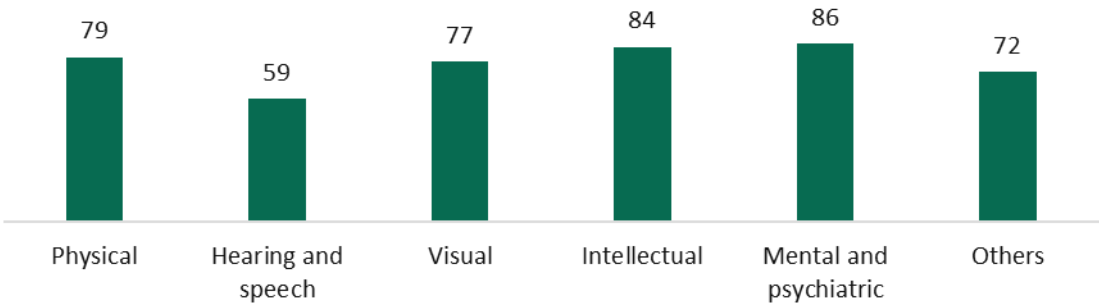
3.3.3. Experience with local administrative procedures and the rate of PWDs using local government e-portals

Sections 3.3.1 and 3.3.2 have partly demonstrated issues related to the interaction between PWDs with their families and society in order to participate in administrative procedures and enforce their rights. Accordingly, this section will present the survey results from a more general perspective on the degree of inclusion of PWDs in general local administrative procedures.

According to the survey results of this study, only about 28% of PWDs or their guardians/relatives have participated in public administrative procedures at the People's Committee of the commune/ward/township within the past 12 months from the date of the survey. This number is similar to the results of PAPI 2021 (27%). Thus, it is evident that the PWDs group also has the same need for local administrative procedures as people without disabilities.

A rather positive result is that up to 79% of PWDs or their guardians/relatives who have participated in public administrative procedures in the locality said that they did not face any difficulties when going through the procedures. However, when disaggregating PWDs who had no difficulties when going through administrative procedures in the locality into each type of disability, the Hearing and Speech group had the lowest results (Figure 25). In other words, Hearing and Speech faces more difficulties than other disability types when going through administrative procedures in the locality. Compared with the results in section 1.7, Hearing and Speech also have the lowest voting rate, but the highest rate of lack of accessible information channels. Therefore, Hearing and Speech is the group that needs more attention and support to be further integrated into the local public administration procedures.

Figure 25. Percentage of PWDs/guardians (with disability certificate) have NO difficulties when participating in PWDs-related administrative procedures (% PWD of the same type)



In addition, during the qualitative interviews, the research team noted some popular opinions of PWDs, especially Severe, Extremely severe, and/or elderly PWDs who wish to be supported in various forms of administrative procedures at home. These PWDs said they heard information about the support model for the elderly or severely/extremely severe PWDs (who face difficulties getting the local People's Committee) to do administrative procedures at home. However, they have not received that support in their locality and still have to go to the People's Committee of the commune/ward/township to do the procedure. For cases that have too many difficulties and do not have relatives to support them, they still cannot go to the local People's Committee to start the procedures.

“Like when I was waiting to participate in the procedures for the ID, they said that for people like me, they would come to my place to do it [...] But farmers like me and this one here, if we want to do the procedures, we would have to go ourselves. They said they would go to the house, but they won’t, that’s all lip service. [...] It might be the case somewhere else but it is not the case here.”

Interview with a male PWD, 65 years old

In addition, following the trend of digital transformation in state governance, the locality also needs to implement digital transformation in the process of implementing public administrative procedures. Accordingly, public administrative procedures can be carried out through the e-portal of the People's Committee of the commune/ward/township. However, only 47 PWDs and their guardians/relatives surveyed used the local government e-portals during administrative procedures, approximately 2.9% of the total sample. This rate is also similar to the reported rate of nearly 3% of the survey sample in the PAPI 2021 report for the general population.

For PWDs in the survey sample of this study, due to the majority being Severe/Extremely severe PWDs and/or the elderly, the common obstacle to using the local government e-portals is the lack of equipment or lack of skills to use technology. This is illustrated through the following typical sharing:

“Q: Have you ever had commune and ward officials instructing you how to access the government e-portal?”

R: They did instruct that but because I lack the skills to use it comfortably, I do not use it.”

Interview with a visual PWD, male, 66 years old

Another very common reason is that PWDs and their relatives have not been informed about the local government e-portals or have not been instructed on how to use the e-portals to do administrative procedures. In the qualitative interviews, when asked whether PWDs know about the local e-portal or not, the most common answers the research team encountered were “do not know” or “have never heard of it”.

In addition, for PWDs who are able to use technology, have had a lot of exposure to the internet, and have even used the portal at higher levels of government, they still face difficulties when using the local government e-portals, especially since the interface sometimes still difficult for PWDs to be able to operate easily. For example, a Visual PWD who is proficient in using information technology may still encounter difficulties when operating local government e-portals. He raised opinions from his own experience about the reasons why the local government e-portals are not really accessible to Visual PWDs:

“I also looked into filing taxes, but it's actually quite difficult for people who are visually impaired. [...] People usually rely on certain standards to create accessibility. [...] The issue is visually impaired individuals being trained according to those standards in order to access them? [...] The same goes for government e-portals.”

Interview with a Visual PWD, male, 40 years old

From the above sharing of the Visual PWD, it is clear that popularizing the use of e-portals encompasses broader issues. In this regard, providing means such as user-friendly electronic portals for PWDs according to the required standards must be accompanied by enhancing the corresponding capabilities for PWDs so that they can use these means effectively.

Conclusion on the degree of inclusion of PWDs in public administrative procedures:

The rate of disability certification had not covered all qualified PWDs. The procedures regarding disability certificates are not yet clear. The disability support pension is not suitable for PWDs' minimum subsistence.

- Local civil servants need to clearly explain regulations and procedures for granting certificates of disability and related supports, especially for the Others group, to avoid misunderstandings and frustrations for PWDs. The same goes for other types of administrative procedures.
- Local authorities should provide appropriate subsidies for all PWDs eligible for disability support pension. It is necessary to study the suitable disability support pension rate for PWDs to ensure a minimum standard of living, especially for PWDs who are unable to work.

The rate of PWDs exercising their rights to property is still not high, there is a disparity between genders and types of disabilities, and there are still many barriers due to social stereotypes.

- Local authorities need to popularize the rights and practice of ownership of land assets according to regulations to the community and PWDs.
- Support PWDs in legal and procedural regarding ownership of land assets if they are entitled to such rights in accordance with regulations.

The need for local public administration procedures of PWDs is similar to that of the general population, but PWDs still face many difficulties doing them themselves, especially with the Hearing and Speech group.

- Need to further the support for suitable information sources and methods of administrative procedures for each type and level of disabilities so that PWDs can directly or participate more in administrative procedures.

Eg: Digitalize the public administrative procedures according to the accessible standard (TT 26/2020/TT-BTTTT), combine with instructing PWDs on how to use that accessible technology.

3.4. People with disabilities' inclusion in public service

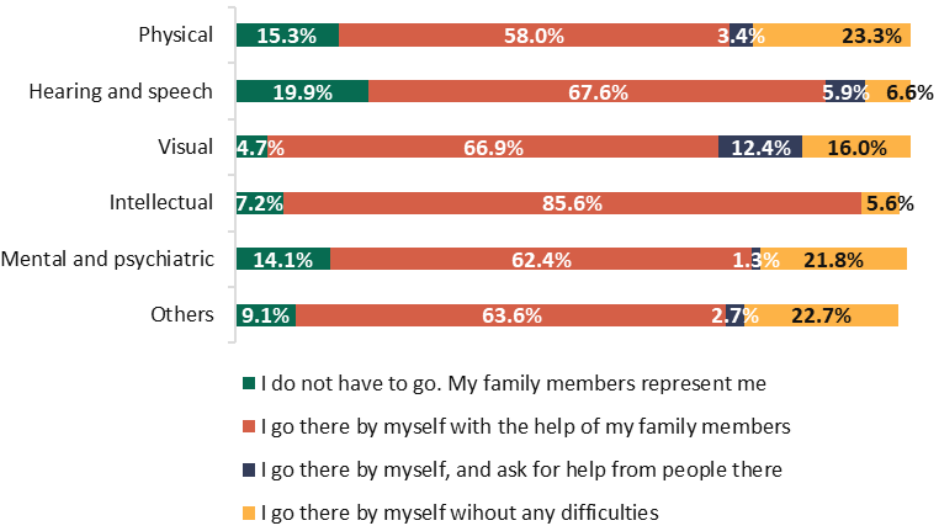
3.4.1. Access to public facilities and public transport

According to Clause 8, Article 2 of the Law on PWDs 2010, access to public facilities is the ability of PWDs to use public facilities to integrate into the community. Access to public facilities is the first step to removing barriers from the physical environment, ensuring the integration of PWDs into the community. Accordingly, the Government of Viet Nam has issued Circular No. 21/2014/TT-BXD dated December 29, 2014, promulgating the National Technical Regulation on Construction of Works to ensure accessibility for PWDs.

This survey focuses on exploring how PWDs can access public works in the locality, especially those performing public administrative procedures and public services such as People's Committees, hospitals, schools, etc. When asked about how to access public works, the majority of PWDs said that they can "go to those places (public works) with the support of family members". The percentage of

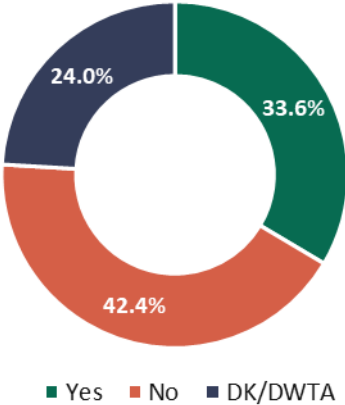
PWDs who can go to public works alone because there are no difficulties is not high and is especially low among the Hearing and Speech (6.6%) and Intellectual (5.6%) groups (Figure 26).

Figure 26. How to access public facilities by types of disabilities



According to the results of this survey, 42.4% of PWDs said that public transport in their locality is not easy to use. In addition, 24% of PWDs responded that they do not know about the ease of use of local public transport mostly because they have never used these transports before (Figure 28). This result is much lower than the target set by the Prime Minister's Decision No. 1019/QD-TTg: Approval of the Project to assist PWDs in the 2012-2020 period: "At least 80% of PWDs who wish to join traffic may use means of transport meeting the technical regulations on accessible traffic or equivalent assistance services."

Figure 27. Ease of use of local public transport



During the qualitative interviews, the respondents said that it is difficult to access various types of public transport in the locality because the public transport system is not widespread in small cities and provinces, making it difficult for PWDs to have access to many types of public transport.

Q: *In your locality, do you often use public transport?*

R: *No because there is not much public transport in the city, mainly buses from the city to the districts, from one province to another, but within the city, it (public transport) is quite limited.*

Interview with a female PWD, female, 19 years old

In addition, public transports staffs also play an important role in supporting PWDs using public transportation. Therefore, the staff's attitude can be either an enabler for or a barrier against PWDs using public transport. This is clearly shown in the sharing of a PWD living in Hanoi, where the public transport system is relatively developed:

“Q: Do other people support you when you travel by public transport?”

R: Oh well this depends, depends on their mood. [...] Like, there are some buses that are already familiar with me, some I go on so often that the drivers would open the door: “Hey 30 (bus number) here, aren’t you coming?” for example, they are very enthusiastic. But other drivers can react differently, and people’s moods can fluctuate too, so we cannot expect people to always react positively to us. [...] Then there are people, like, they think that me going out like this is too dangerous, and they were very blunt: “If you are like this, shouldn’t you stay at home? Why go out?”. I was blunt back: “Why are you going out then?”.

Interview with a 40-year-old male PWD

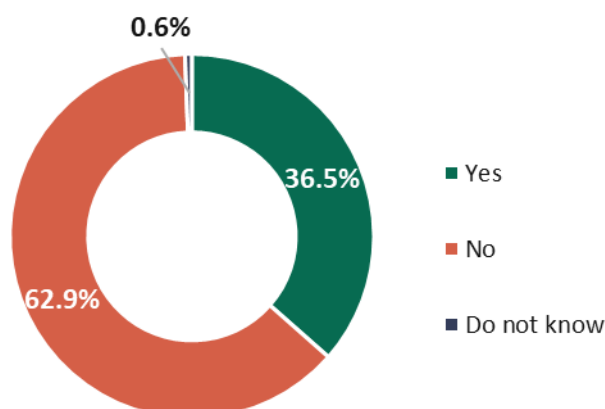
The above survey results show that PWDs' ability to access public works and public transportation in the surveyed areas is still low. These are direct barriers to the integration of PWDs into the community.

3.4.2. Quality of local public hospital services

Health care service is one of the four basic types of social services for people, especially ensuring that PWDs can access health care services is important to ensure the right to independent living and equality for PWDs. Under Article 25 of the CRPD, member states must recognize that PWDs have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability.

The results of the pilot survey show that the rate of PWDs using services at district hospitals is not high, with only 36.5% of PWDs out of the total number of respondents having used this service in the past year. This rate is lower than that of the general population in the PAPI survey in 2021 (3.3 percentage points lower).

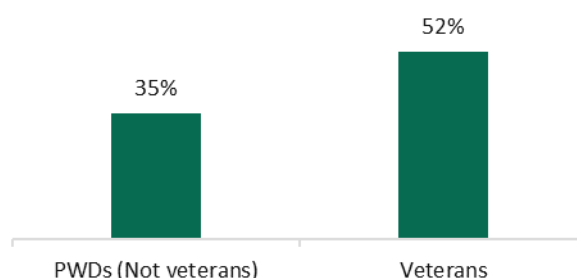
Figure 28. Percentage of PWDs using services at district hospitals



The disaggregated data also shows that there are differences in the rate of using services at district hospitals in terms of disability types¹¹ and severity of disabilities. Specifically, when disaggregated into two groups, veterans and non-veterans, the respondents who are veterans (52%) have a much higher rate of using services at district hospitals than the remaining group of PWDs (35%) (Figure 29). Similarly, when considering the 6 types of disabilities, Hearing and Speech (29.4%) and Intellectual (28.0%) have a 10 percentage point lower rate of using services at district hospitals compared to other groups¹². The rate of using services at district hospitals of the group of Extremely severe PWDs (28.3%) is also much lower than that of Mild (40.4%) and Severe PWDs (38.2%).

The cause of this result may stem from the varying needs to use and access services at district hospitals of PWDs with different types of disabilities and different severity of disabilities. One of the possibilities that should be considered is that Hearing and Speech and Intellectual, as well as Extremely severe PWDs, face barriers in accessing health services. Therefore, more research is needed on the causes and supportive measures to remove existing barriers to ensure equal access to health services for these groups.

Figure 29. Percentage of district hospital usage in PWDs (non-veterans) group and veterans group



In addition, when considering cases of PWDs who did not use services at district hospitals in the past year, one of the reasons given in the qualitative interviews was that respondents were concerned about the hospital will be a place of COVID-19 infection, so they restrained from using health care services here. A PWD said, *“I used to have skin diseases frequently. I often have itchy skin on my hands, mouth sores, and other things, I often have some kind of inner body-hot problems, so I go to the hospital often. But since Covid, I have gone less because it is quite dangerous.”* Previously, a survey on the impact of COVID-19 on Vietnamese households conducted in 2020 also showed that up to one-fifth of people did not bring their children to the health station for vaccination or pregnant women did not go to the hospital because they are afraid of contracting COVID-19¹³.

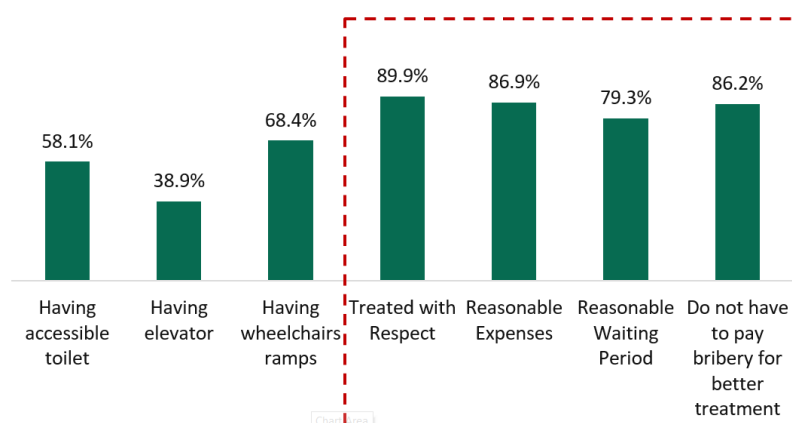
Regarding the criteria for evaluating the service quality of the district public hospital, the criteria like Treated with Respect, Waiting Period, and Expenses are rated higher than the criteria about infrastructure. Specifically, Treated with Respect, Reasonable Expenses, Reasonable Waiting Period, and Do not have to pay bribery for better treatment are 89.9%, 86.9%, 86.2%, and 79.3% respectively, significantly higher than other criteria related to the hospitals’ infrastructure (Figure 30).

¹¹ Disaggregated by 6 types of disabilities and groups of veterans and non-veterans.

¹² The rate of using local public hospitals: Physical: 38.1%, Visual: 39.6%, Mental and psychiatric: 36.3%, and Others: 38.2%

¹³ Judy Yang, Philomena Panagoulas, Giorgia Demarchi. 2020. “Monitoring households and firms in Vietnam during COVID-19.”

Figure 30. Rating of local public hospitals' quality



Based on the experience of using services at district public hospitals, PWDs rate doctors' and nurses' attitudes in the past years highly. Below is a PWD's sharing about the attitude of doctors and nurses now compared to 5-10 years ago.

*"I think that compared to previous years, it **has improved a lot** because many health centers have really good service and provincial and city hospitals, as well as other facilities, **they treat patients very well, warmly, not scolding or being angry.** [...] Generally, the service is better than before. In the past, people can be very unkind and complain a lot, but now the patients are sick and in pain, so they have to be warmer and kinder."*

Interview with an Others PWD

In addition to PWDs' high opinion about the quality and attitude of doctors and nurses, the survey results show that infrastructure at district hospitals should be improved to be more PWD-friendly. Less than 70% of respondents said that the local district hospital has wheelchair-accessible ramps (64.8%), standard toilets for wheelchair users (58.1%), and elevators (38.9%). The results of the in-depth interviews also show that PWDs still face many difficulties in using the toilets at the hospital. One Physical PWD reported about their experience using toilets at their district hospital that there were no separate toilets for wheelchair users, the toilet doors did not fit wheelchairs and toilets are not hygienic.

***R:** It is more inconvenient than other people. Like, it is hard to do my business when I use the toilet.*

***Q:** So you have difficulty using the toilet too, right?*

R:** Yes. But that toilet, **everybody can use but I cannot.** I do not know about other places but where I got my eye surgery, my nephew wheeled me in but he **could not go through the narrow door frame.

***Q:** So if you use the wheelchair, you cannot go in the toilet because it is too narrow, right?*

***R:** Yeah, so narrow, wheelchairs cannot come in.*

***Q:** Do you have any recommendations about infrastructure for the local hospitals so that they can become more PWDs-friendly?*

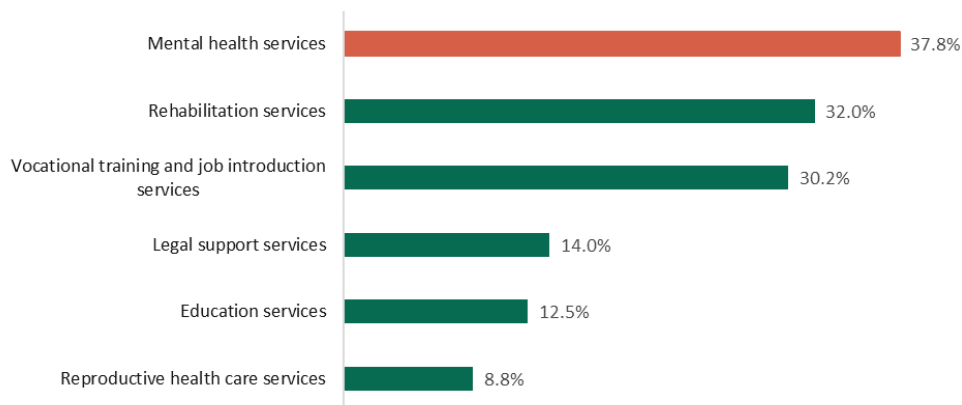
***R:** **They can make a toilet for only PWDs.** Because they cannot go by themselves in wheelchairs and have to ask other people's help. If we use the same toilet as everybody else, we cannot come in and also it is not sanitary."*

Hospitals are places where medical examination and treatment often take a long time, not to mention there are PWDs undergoing inpatient treatment, so the demand for PWDs to use restrooms is very high. Therefore, PWDs wish to have "a separate restroom for PWDs", so that they can use it themselves when needed without the assistance of family members.

3.4.3. Mental health service

In addition to physical health, PWDs' mental health is also an important issue that needs special attention. According to the results of the pilot assessment, mental health service is a service of common interest to PWDs. When asked about the services that need to be prioritized for investment by the government in the next 5 years, up to 37.8% of PWDs chose mental health services (Figure 31).

Figure 31. Services that need to be prioritized for state investment



Disaggregated data show that there is not much gender difference in the level of interest in mental health services for PWDs. Specifically, the percentage of female PWDs who think that the State should prioritize investment in mental health care services for PWDs is 0.9 percentage points higher than that of male PWDs.

Regarding the reason why mental health care services receive a lot of attention from PWDs, according to the results of in-depth interviews, the physical barriers hindering community integration of PWDs directly affect the mental health of PWDs because they are isolated and cannot fully participate in society. Although there are a number of solutions that can partially overcome the physical limitations of PWDs, such solutions are often expensive and not convenient for PWDs. Below is the sharing of PWDs when asked about why they are interested in mental health services.

*"[Why we need to care about mental health] like I said, you see, I have to **stay within these four walls all day**. I want to go out. Like I (a Physical PWD) have to use a taxi to go out [...] I told you that I just wanted to die when I first started to be like this. But my friends all said that it is so sad that while everyone wants to live, I **want to die instead**."*

Interview with a Physical PWD

When the research team delved deeper into the mental health problems that PWDs have experienced, the key phrase "want to commit suicide" is not uncommon. Below is a typical story of a PWD who has experienced mental health problems.

A is a person with multiple disabilities (Physical and Visual). His physical mobility and ability to see have been limited since he was young and worsen as he gets older. Even though he had made the effort to finish high school, A can only stay at home now because he cannot find any suitable job. Because of his limited physical mobility, A has to stay home 24/7 and his daily life revolves around a few basic tasks.

Because he has no chance to work, there is no opportunity for him to integrate into society, which has negatively affected his mental health, A shared: *“Just last year, I felt like life is so tedious and boring so I ... like when my parents scold me ... I did think about that (suicide)”*

A’s experience when he wants to get out of his suicidal thoughts is to try to think about the most beautiful things for him, the memories of when A can still see and move around freely. *“I laid down and I think of songs I have heard to feel better. I think of the cartoons I watched when I was young, I watched them to be reminded of when I went to school and played outside. That’s how I escaped that darkness.”*

The saddest thing is that A usually cannot share his feelings with his loved ones but must find ways to balance out himself. A’s desire is simply *“it would be nice if someone can come and talk with me.”*

Thus, it can be seen that a few causes for this problem stem from the fact that PWDs do not have many opportunities to work, and do not have the opportunity to integrate into society, which makes them feel that life is boring and they are not beneficial to family and society. More importantly, when PWDs experience mental health issues, they are often unable to share their feelings with others, even loved ones. Therefore, it is necessary to have studies to understand the causes and supportive measures to solve the mental health problems of PWDs from the very roots.

Conclusion on PWDs' inclusion in public service delivery:

In general, public transportation and public infrastructure are still not PWDs friendly.

- It is necessary to invest in a PWD-friendly public transport system to increase accessibility to public works, thereby increasing the ability to participate in voting activities, conduct public administrative procedures, etc.
- It is necessary to raise awareness and train staffs in the public transport system on service attitudes and ways to support customers with disabilities.

Services at district hospitals are rated quite highly by PWDs, but hospital infrastructure needs to be more PWD-friendly.

- Investment in inclusive hospital infrastructure is needed so that PWDs can use local public health services more easily.
- More in-depth research is needed on special barriers for persons with Hearing and Speech and Intellectual disabilities as well as Extremely severe in using the services at the district hospital in order to provide solutions so that PWDs can access health care services on an equal basis.

PWDs are most interested in mental health services among other public services.

- More research is needed on issues related to the mental health of PWDs to better understand the needs of PWDs and develop appropriate support programs/policies.

Conclusion and recommendations

Although this is a pilot assessment with some limitations in terms of sample representativeness, the survey provided some notable results that can serve as a basis for further research.

The level of participation of PWDs at the local level (participation in social organizations/groups, voting practice) was still low. Female PWDs tended to participate less than male PWDs. People with Hearing and Speech, Intellectual, Mental and psychiatric disabilities had lower participation rates than other groups.

Administrative procedures for PWDs still faced many barriers, especially regarding obtaining disability certificates and disability benefits. People with Hearing and Speech disability encountered more difficulties when processing administrative procedures locally compared to other types of disabilities. The use of online public services for administrative procedures was not yet common among PWDs.

The quality of healthcare services provided by district-level hospitals was rated positively by PWDs regarding attitude, time, and cost of services. However, infrastructure-related issues such as hospital facilities and public transportation systems still need significant improvement to become more accessible for PWDs. Additionally, many PWDs expressed concerns about mental healthcare services.

Hearing and Speech, Intellectual, and Mental and Psychiatric are the groups that encountered significant difficulties when participating in social activities, processing administrative procedures, and using public services.

Based on the aforementioned survey results, the research team proposes the following recommendations:

Regarding policies:

- It is necessary to ensure the transparency of information on the criteria, the process of issuing disability certificates, and disability benefits;
- Clear regulations should be established in the National Assembly and People's Council Election Law: polling stations and election information must be easily accessible to all voters, including the elderly and people with disabilities;
- More inclusive facilities and information technology investment are needed to enable people with disabilities to access public services and participate in cultural, social, and entertainment activities;
- In addition to providing inclusive facilities and accessible information, people with disabilities need to be provided with knowledge/instructions on how to use these facilities and technologies;
- Disability inclusion policies need to fully consider the characteristics and needs of each type of disability group to ensure that no group is left behind, especially persons with hearing and speech, intellectual, mental and Psychiatric disabilities, as well as persons with extremely severe disabilities.

Future studies on PWDs inclusion

- The sample set should include more accurate information, particularly regarding the types and severity of disabilities;

- Separate the group of veterans from PWDs to gain a more accurate understanding of the inclusion levels of these two groups in local administration;
- Several topics warrant further in-depth investigation, including mental health, property ownership rights, political participation of PWDs, and the dual impact of gender and disability on the enforcement of their rights, etc.

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