

that impede women's access to justice are the belief that women should be blamed if violence occurs and if they reveal their problems to others, especially to police and local authorities¹⁰, and fear of corruption and of courts favoring men. Stigma and discrimination are key barriers that prevent sex workers and people living with HIV from accessing both services and the formal justice system.

5. RECOMMENDATIONS

The following recommendations are proposed in support of the establishment of one national program to prevent and address GBV, with a single planning, monitoring and evaluation framework. This should be embedded within the framework of existing gender equality mechanisms in Viet Nam with the overarching goal of achieving gender equality.

1. Further build and institutionalize a unified GBV data collection system and evidence base, as the foundation for advocacy, planning, monitoring and evaluation of investments and programming. This should include identifying gaps in knowledge and developing a national research agenda to contribute to the evidence base.
2. Advocate for an adequate state budget allocation for GBV that would produce results in each critical intervention area – including prevention, treatment, protection and support for survivors of violence. Additionally, identify unmet financial and technical resource needs and develop a resource mobilization strategy to fill any gaps.
3. Revise or develop new policies and legislation to include types of violence currently not covered and support for marginalized populations.
4. Strengthen the capacity of the police and judicial sectors to implement GBV policies and legislation at the national, provincial, district and commune levels.

One trafficking survivor said: *“Whenever we had conflicts, my husband recalled my past and said that if he had not married me, no one would have accepted me. Though I was not beaten, I felt that I could not live. I did not have the right to decide anything. A couple of times I was thinking of suicide. I want to go far away to where nobody knows me.”*

5. Integrate GBV into the education system to transform young people's understanding of gender equality and ensure that teachers and administrators can support basic counseling or refer young people to services if they experience violence.
6. Strengthen the capacity of the health and social service sectors at all levels to screen and provide treatment, counseling and referrals for clients experiencing GBV.
7. Establish a national behavior change communication strategy, within the context of the national GBV program, to raise awareness and transform norms in order to promote gender equality and to eliminate GBV.
8. Empower women to address violence in their lives through life skills training, self-help groups, education, job training, as well as legal and financial support.
9. Through a structured multi-sectoral response, ensure that an essential “minimum package” of GBV prevention, treatment, protection and support services are available, accessible and affordable to every person in the country through a coordinated multi-sectoral approach.



ADDRESSING GENDER-BASED VIOLENCE IN VIET NAM: TOWARDS A STRONG NATIONAL PROGRAMME DESIGNED TO SUPPORT BOTH PREVENTION AND RESPONSE

This fact sheet summarizes the paper **“Gender-based violence. A review”** prepared by the UN in Viet Nam in consultation with key stakeholders, to provide an overview of current issues relating to GBV in Viet Nam. Its purpose is to inform strategic planning, visioning and priority setting related to gender-based violence in areas including research, programming, planning, as well as monitoring and evaluation

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1. INTRODUCTION

Gender-based violence (GBV) is a major problem throughout the world. It includes sexual, physical, emotional, and financial abuse; structural discrimination (institutional structures and that result in disparities or stigmatization in services); violence perpetrated or condoned by the state; and trafficking of women and girls¹. GBV primarily affects women and girls², but men, boys and gender minority communities, such as gays, lesbians, transgenders and bisexuals are also affected.

In Viet Nam, a national study of the family conducted in 2006³ indicated that 21.2% of married couples had experienced at least one form of domestic violence, including verbal, emotional, physical or sexual violence. Other small-scale studies provide estimates of GBV that range from 16%-37% for physical violence, 19%-55% for emotional violence, and 6.6% to 33% for sexual violence⁴.

2. THE SOCIO-ECONOMIC AND CULTURAL CONTEXT OF GBV IN VIET NAM

Traditional beliefs play significant roles in the construction of gendered identities. Historically, in Confucian tradition, Vietnamese women's duties were focused on housework, procreation and nurturing of male offspring to perpetuate their husband's family lineage, and maintaining family harmony. The patriarchal system in Viet Nam required men to embody patrilineal honor across generations.

The concepts of *yin* and *yang* are also central to gender constructs in Viet Nam. Men are perceived to embody the force of *yang*, which is "hot", "active", "superior", "powerful," and easy to anger. Women embody the force of *yin*, which correlates with "cool", "passive", and "calm". Because of their association with "hot," men are also viewed as more able to consume alcohol. Alcohol and a hot temper are two common reasons people use to justify men's use of violence toward women⁵.



The UN Declaration on the Elimination of Violence Against Women (Article 1) defines violence against women as: *Any act of gender based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.*

The *doi moi* economic reforms which marked the State's transformation from a planned to a market economy have created social changes that need to be better understood in terms of their impact on family and gender norms. While *doi moi* has brought many positive changes, it is established that one negative impact from more open borders has been an increase in trafficking of women and children⁶. A number of studies have shown that while women's labour market participation rate is high in Viet Nam, and has increased in recent years, there continue to be significant gender disparities in income, economic opportunities and time spent working⁷. Another evident phenomena since *doi moi* is an escalation of migration, both internally and externally. This has increased opportunities for migrants to improve their lives through economic independence, higher self-esteem and empowerment. On the other hand, it also increases vulnerability of women and girls to abuse and exploitation at work and in the home⁸.

3. THE LEGISLATIVE AND POLICY CONTEXT

The Government of Viet Nam has been a leader in developing policy and legislation to promote gender equality and to end violence against women. Viet Nam ratified the Convention on the Elimination of Discrimination against Women (CEDAW) in 1982, is a signatory to numerous other international human rights treaties and conventions that relate to GBV, and is working to achieve the Millennium Development Goals (MDGs).

Gender equality, as well as GBV, has been addressed in general ways in several pieces of legislation since 1992. However, between 2004 and 2007 two key pieces of legislation were passed, and one national plan of action approved, that specifically address: trafficking (National Plan of Action against the Crime of Trafficking, 2004); gender equality (Law on Gender Equality, 2006); and domestic violence (Law on Domestic Violence Prevention and Control, 2007). Together these provide significant improvements to the GBV-related legal and policy framework.

4. CHALLENGES TO PREVENTING AND ADDRESSING GBV IN VIET NAM

4.1. Challenges to policy implementation

Major challenges to policy implementation include insufficient coordination, financial resources, human resource capacity and strategic monitoring of programme investments to ensure desired results are achieved. For example, to date no costing study has been carried out to identify how much is needed to implement the domestic violence law nationwide. It is encouraging, though, that in 2009 all 63 provinces have developed budgets to implement certain aspects of the law.

While it is commendable to see the broad allocation of responsibility for GBV, from each line ministry down to the ordinary citizen, the diffuse nature of the responsibilities outlined in the laws, decrees, circulars and plans of action, sometimes without clear accountability, is a limitation to effective implementation. A model that empowers a broad range of people also carries a responsibility for extensive training and capacity building.

4.2. Challenges to prevention

Prevention of violence must remain at the forefront of any national GBV response. Life skills, including goal-setting, decision-making, communication, assertiveness and negotiation skills can prevent and mitigate violence. One of the most effective ways to prevent and control GBV is to challenge gender inequality norms and promote gender equality among citizens from a young age. The Ministry of Education and Training (MOET) is working to initiate a project to integrate GBV prevention and control in a school curriculum for pupils. This project is currently in the development process. However, a national curriculum on GBV needs to be implemented comprehensively within the education system.

While there has been a positive increase in discussing GBV in the mass media – resulting in greater public awareness – there is still gender insensitive reporting and sensationalization of cases that perpetuate the belief that women are too blame for violence. There is also insufficient funding for long term, nationwide behavior change communication campaigns to change gender norms and challenge GBV.

One woman interviewed by the reconciliation groups shared her disappointment with the approach: *"They follow exactly the reconciliation principle. They come and ask the couple to stop fighting, but this work does not really end violence. They treat both the perpetrators and survivors in a similar way. They push the burden to women, and ask women to give in. ...because local authorities report the number of cases that they successfully reconcile in their report. Therefore, they ask women to not only sacrifice for their families and their children, but also for the village."* (Hoang Tu Anh et al 2009, Dovipnet 2009)



Although engaging men in programmes to prevent GBV has proven effective in other countries, this approach is relatively new for Vietnamese organizations working in this area. Some recent initiatives have tried to engage men in GBV prevention through community-based clubs, but men often think these clubs are for women, leading to lower levels of male participation.

4.3. Challenges to access to services

In Viet Nam, GBV intervention programmes are often in the pilot stage and operate on a small scale. While some projects have made efforts to strengthen co-ordination mechanisms between sectors, the experience of others reveals that multi-sectoral collaboration remains weak. Lack of coordination and collaboration between service providers and projects limits the availability and effectiveness of referral services⁹.

The current legal framework still needs to be improved in order to provide clearer and more effective guidance for police and members of the judicial system. Local authorities, health providers, police, judges, legal aid providers, and members of reconciliation groups all require specific knowledge about the Law on Domestic Violence Prevention and Control. They also need training that will enhance gender sensitive attitudes and skills to work with GBV survivors.

The work carried out by reconciliation groups to persuade victims and perpetrators to make compromises as a means of promoting harmony also poses challenges in terms of access to services. The reconciliation approach can be effective in dealing with some small conflicts; however, this approach does not address the root causes of GBV. Furthermore, the process often reinforces traditional gender inequity and limits women's choices.

Among the general public, there is limited knowledge about the legal system and about legal aid, which prevents survivors from accessing justice. Other factors

¹ United Nations, 2006. Ending violence against women: From words to Action, Study of the Secretary-General. New York.

² Garcia-Moreno et al 2005. WHO Multi-country Study on Women's Health and Domestic Violence against Women: Initial Results on Prevalence, Health Outcomes and Women's Responses Geneva: World Health Organization.

³ MOCST, GSO, UNICEF, IFGS, 2008 Result of Nation-wide Survey on the Family in Viet Nam 2006. Hanoi.

⁴ See for example, Luke et.al. 2007, Exploring Couple Attributes and Attitudes and Marital Violence in Viet Nam. Violence Against Women 13(1): 5-27.

⁵ UNFPA, 2007 (December). Domestic Violence Prevention: Status, Needs and Priorities for Interventions in Phu Tho and Ben Tre Provinces. Viet Nam, Loi et.al. 1999. Viet Nam Gender-based Violence. World Bank, Viet Nam.

⁶ Loi et.al. 1999. Viet Nam Gender-based violence. World Bank, Viet Nam.

⁷ Vietnamese Non-Governmental Organizations, 2006 Report on Implementation of the Convention on the Elimination of All forms of Discrimination Against women (CEDAW) in Viet Nam. Hanoi.

⁸ Thuy et.al. 2009 (October) Socio-Economic Impacts of WTO Accession on Rural Women: Qualitative Research in Hai Duong and Dong Thap Viet Nam. ILSSA, UNIFEM and AusAID.

⁹ UNFPA, 2007. Domestic Violence Prevention: Status, Needs and Priorities for Interventions in Phu Tho and Ben Tre Provinces. Viet Nam, Greig and Phuong 2009 Promotion of Engagement of Men and Boys in prevention of domestic violence against women and children in Ninh Binh Province.

¹⁰ Dovipnet, 2009 Evaluation of the implementation of law on domestic violence prevention and control. Hanoi: Dovipnet, Minh et al, 2007. Research on gender based domestic violence in Viet Nam. Hanoi.