

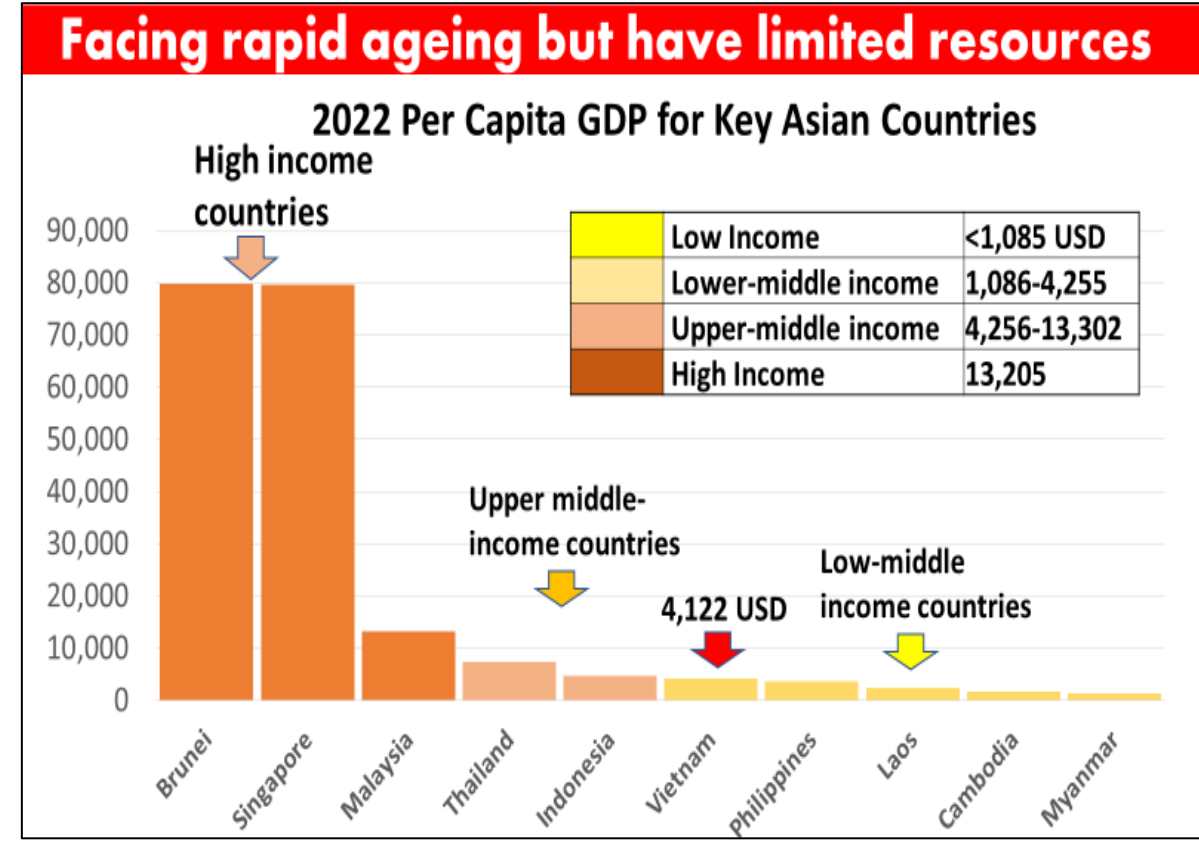
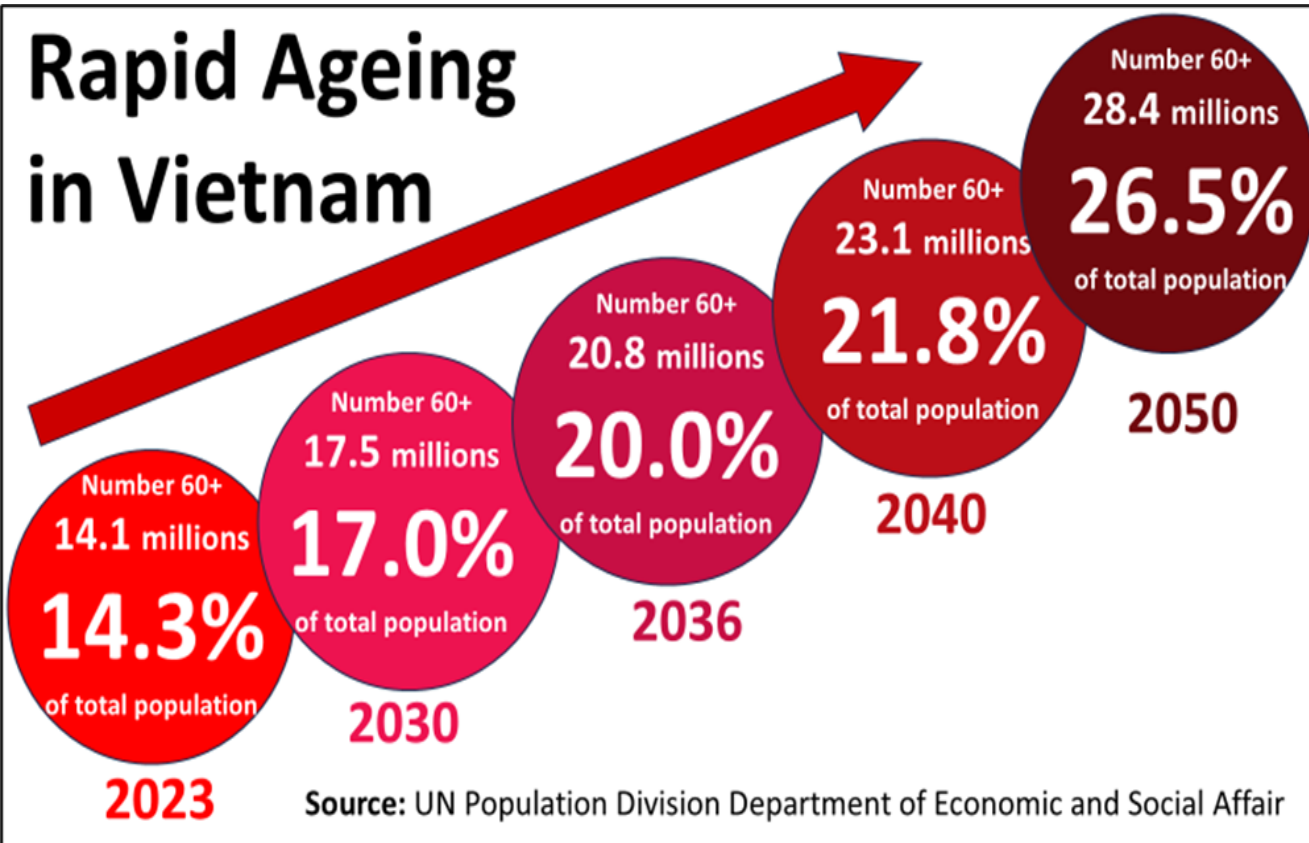
# Intergenerational Self-help Clubs (ISHCs) in Rapid Ageing Vietnam



Joint expert group meeting  
10-11 October 2023, Bangkok, Thailand

**Thuy Tran, HelpAge International in Vietnam**  
**Email: [thuytb@helpagevn.org](mailto:thuytb@helpagevn.org)**

# Rapid ageing in Vietnam



**Only 25 years to move from an ageing to aged society**

# Situation of older persons (OP) in Vietnam

- ❑ **15%** OP live in poverty or near poverty (VNCA, 2023)
- ❑ **54%** OP: no social or contributory pensions (VNCA, 2023)
- ❑ High average life expectancy (nearly **74 yrs.**) but low average healthy life expectancy (**64 yrs.**)
- ❑ Increase in proportion of OP living alone, or with their older spouse or with only children (**35%**)
- ❑ OP are very active: community leaders, carers, volunteers, informal works, **35%** have paid jobs (**50% in age group 60-69**)...
- ❑ Not fully included in socio-economic policies, seen more as passive beneficiaries
- ❑ Some good policies on OPs but poor implementation
- ❑ Wider intergenerational gap (less interaction, ageism, impact of digital world...)



# WHY Intergenerational Self-help Clubs (ISHCs)?

**Vietnam:  
Getting old before  
getting rich- challenges  
in meeting SDGs**

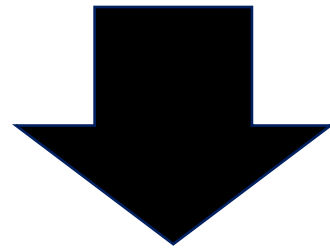
**AGEISM  
CAN BE COMBATTED**

---

  
**POLICY AND LAW**  
can protect human rights and address age discrimination and inequality

  
**EDUCATIONAL ACTIVITIES**  
can transmit knowledge and skills and enhance empathy

  
**INTERGENERATIONAL INTERVENTIONS**  
can connect people of different generations



**Intergenerational Self-Help Clubs (ISHC) –a community led innovative, cost-effective and affordable model that responds to and takes advantages of rapid ageing, challenge ageism through intergenerational approach**

# What is ISHC?

- A voluntary social organization of 50-70 members, established at village level under the overall management of Association of the Elderly (AE), with a purpose to improve the well-being of their members, majority of whom are older people (OP), women and other vulnerable groups, using intergenerational and mutual support approach.
- ISHCs is attractive and benefit both young and old, men and women, poor and non-poor, members and non-members.

# ISHC's Organizational Structure

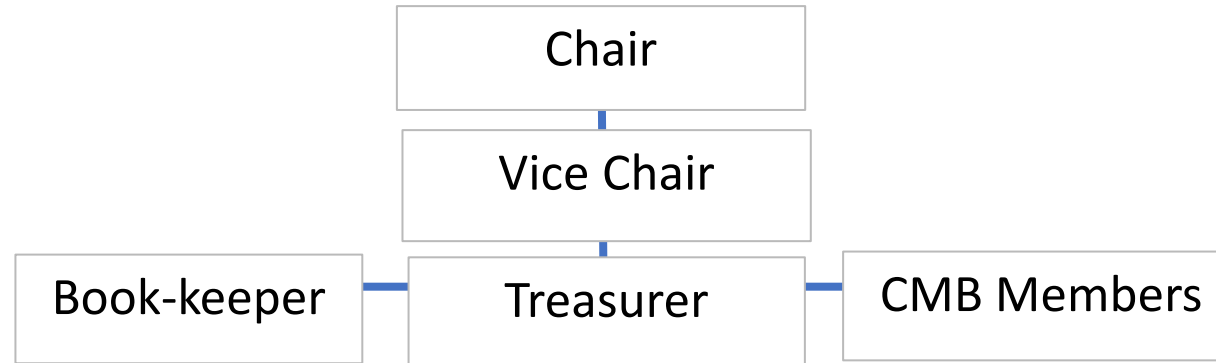
**Membership:**  
**50-70- in one village**

**ISHC Members:**

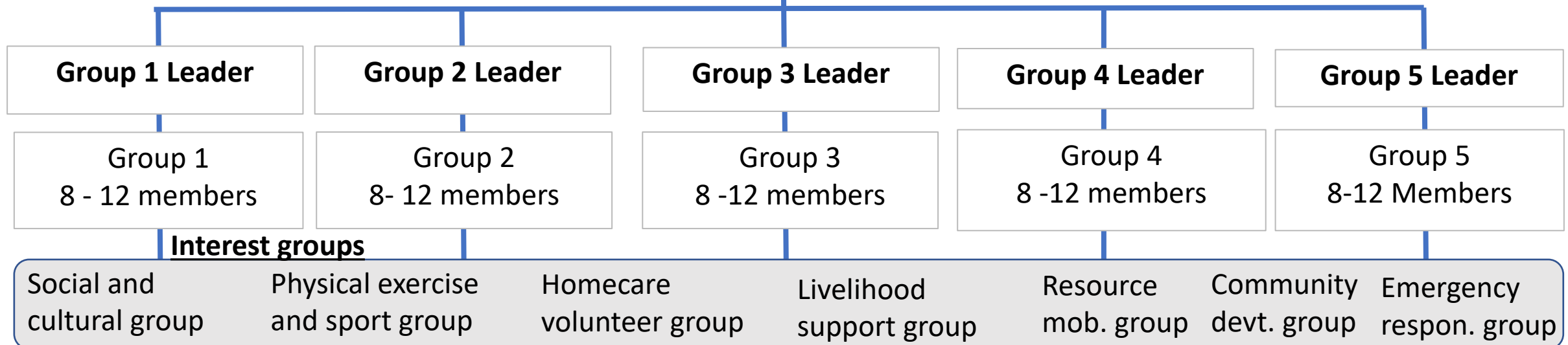
- 70% OP, **30% younger**
- 70% Women,
- 70% social/economically disadvantaged)

## ISHC Management Board Members

- At least 50% are female
- Elected every 2 yrs.



Diversity to promote social connections among and between generations





# At least 8 core areas of activities

**1. Having fun with games**  
  
**2. Cultural performance**  
  
**3. Home-visit**  
  
**4. Exchange and sharing between ISHCs**  


**1) Revolving fund scheme**  
  
**2) Pro-poor and age friendly livelihoods**  
  
**3) Support groups**  
  
**4) Livelihood Volunteers**  


**1) Physical exercise & sport**  
  
**2) Monthly health screening**  
 Monthly weight and blood pressure measurement and recording  
  
  
 At least once a month for ISHC members and CPT receiving health screening  
 Weight pressure and BP monitoring booklet  
**3) Health & care awareness**  
  
**4) Health check up by doctors**  
  
**5) Health insurance**  
**6) Medical referral**

**Home care services by homecare volunteers**  
  
  
  
**Care Plan**  
 1. Social care  
 2. Personal Care  
 3. Living support  
 4. Medical/Health care  


**1) Social/Cultural**

**2) Food & Income S.**

**3) Healthy Ageing**

**4) Community-based Care**

**Monthly self-help & community support**  
  
**1) Labor contribution**  
  
**2) Technical support**  
  
  
  
**3) In cash**   **4) In kind**

**1) Monthly learning (communication talks)**  
  
**2) Study visits & exchanges**  
  
**3) Intergenerational cross learning and sharing**  
  
  


**1) Communication on rights and entitlements**  
  
**2) Monitoring the implementation**  
  
**3) Provide legal services and supports**  
  
**4) Dialogue with local authorities**  


**1) Local donations (in cash, in kind or labour)**  
  
  
  
**2) Monthly membership fees**  
**3) Revolving fund scheme**  
  
**4) Collective income generating activities**  


**5) Self-help & CD.**

**6) Life-long Learning**

**7) Rights & Entitlement**

**8) Resource Mobilization**



# 1. SOCIAL AND CULTURAL COMPONENT

## 1. Games & team building



## 2. Cultural performance



## 4. Exchange and sharing





## 2. FOOD & INCOME SECURITY COMPONENT

### 1) Revolving fund scheme



### 2) Pro-poor & age friendly livelihoods



### 3) Support groups

### 4) Livelihood Volunteers



# Climate change in IGAs activities





# 3. Healthy & Active Ageing Com.

## 1) Physical exercise & sport



## 2) Monthly health screening

Monthly weight and blood pressure measurement and recording



At least one a month for ISHC members and OP receiving health screening

Date	Weight		BP		Weight		BP		Weight		BP		Weight		BP	
	kg	cm	mmHg	mmHg	kg	cm	mmHg	mmHg	kg	cm	mmHg	mmHg	kg	cm	mmHg	mmHg
15/01/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/02/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/03/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/04/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/05/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/06/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/07/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/08/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/09/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/10/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/11/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80
15/12/2009	55	155	120	80	55	155	120	80	55	155	120	80	55	155	120	80

Weight pressure and BP monitoring booklet

## 3) Health & care awareness



## 4) Health check up by doctors



## 5) Health insurance

## 6) Medical referral



# 4. COMMUNITY-BASED CARE COMPONENT

Home care services by homecare volunteers (5-10), 2 visits/week



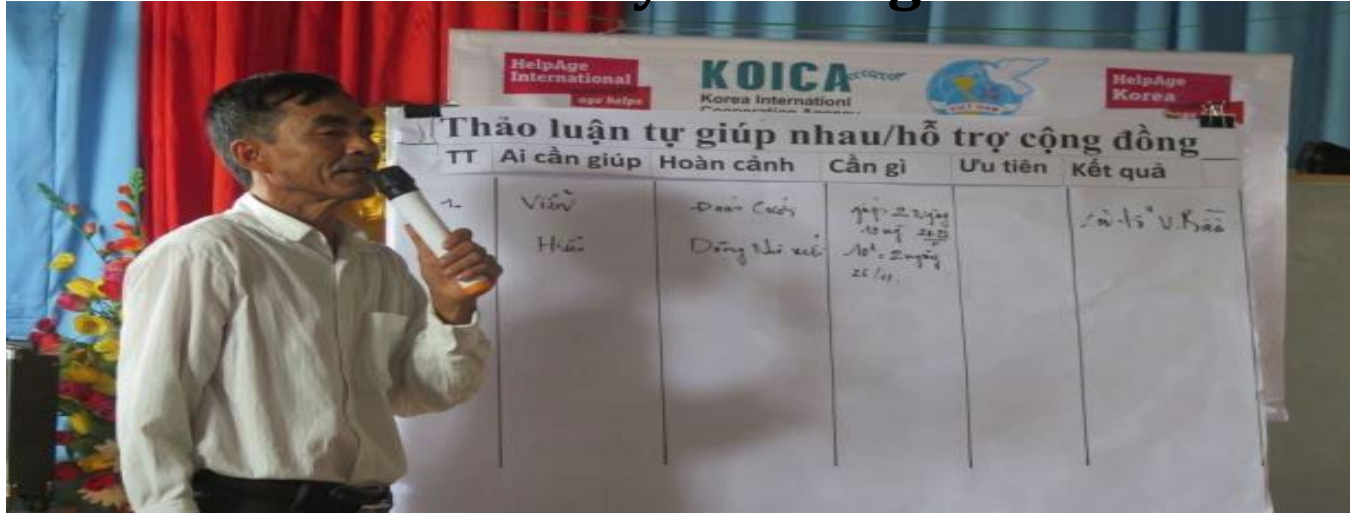
## Care Plan

1. Social care
2. Personal Care
3. Medical/Health care
4. Living support



# 5. SELF-HELP & COM. DEVELOPMENT COMP.

Self-help & community Development discussion at monthly meetings



1) In cash or in-kind



2) Labor contribution



3) Community improvement activities (weekly or monthly)



# 6. LIFE-LONG LEARNING COMPONENT

## 1) Monthly learning talk/training



## 2) Study visits & exchanges



## 3) Intergenerational cross learning and sharing





# ***7. RIGHT AND ENTITLEMENT COMPONENT***

## **1) Awareness on rights & entitlements**



## **2) Monitoring the implementation**



## **3) Provide legal services & supports**



## **4) Dialogue with local authorities**





# 8. RESOURCE MOBILIZATION COMPONENT

## 1) Local donations (in cash, in kind or labour)



## 2) Monthly membership fees

## 3) Revolving fund scheme



## 4) Collective income generating activities





# Benefits to the ISHC members through social connections and intergenerational approach

Happier **98.6%**



Improved solidarity **95.9%**



Enhanced confidence **93.2%**



Empowered **91.0%**



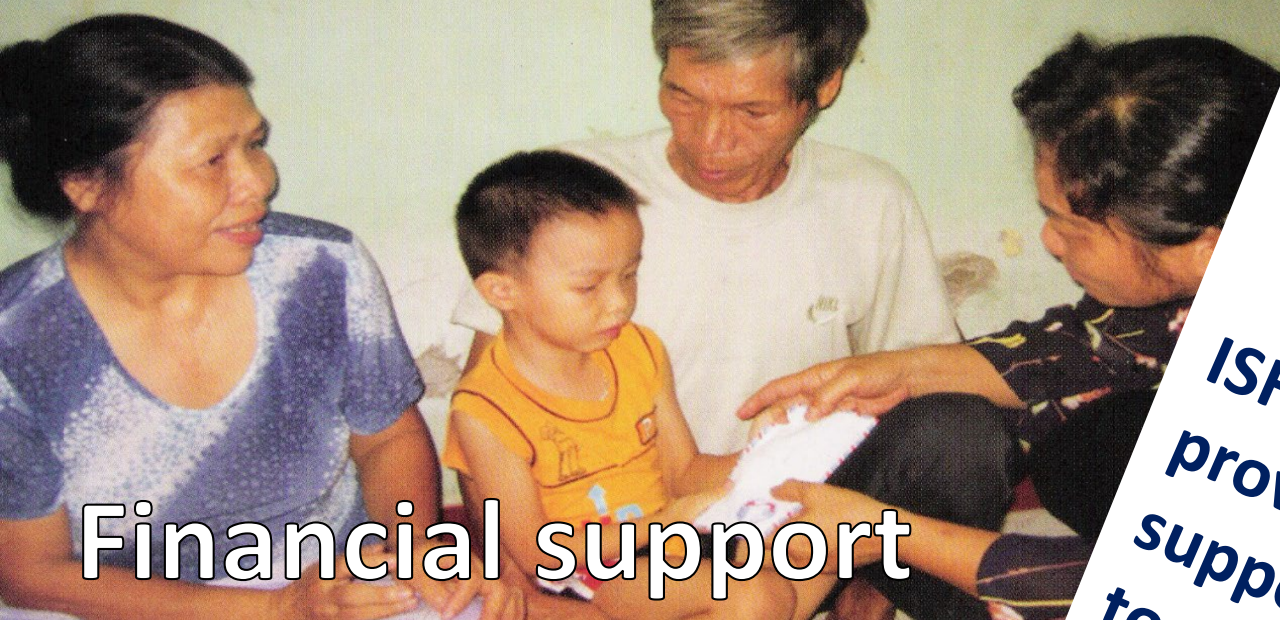
Healthier **90.6%**



Wealthier **88.7%**







**Financial support**

**For non members**

**ISHCs provide support to many non members both young and old**



**Emotional support**



**Education support**



**Technical support**



# ISHCs: change in the way people think, feel and act towards older people in communities – reduce intergenerational gap

Before ISHCs	After ISHCs
Most of older people are frail and need care	Most of OP are still healthy and only small portion need care
OP need help from others	OP can help themselves, others and communities
Older people can not repay loans	OP are bankable – the repayment rate is higher compared to other age groups
OP income relies only on their children	OP can generate income if they have access to financial services and knowledge, skills for income generating activities
OP can not learn new things	OP can learn new things, just need age friendly approach
Less engaged OP in community events	Consult with & engage; Ask for help
Reluctant to invest in ISHCs self managed revolving fund	Allocated budget to support ISHCs self managed revolving fund

# ISHC promotes Intergenerational bonding

1. It promotes **mutual understanding** - Break down **stereotypes** among generations
2. It promotes **interaction between and engagement of** each generation; gives them a **sense of purpose**.
3. It promotes **shared learning**: younger generations share new technology; older generations share life skills & wisdom. Its helps **keep local stories, history and custom alive**
4. Helps **prepare** younger generation for old age.
5. Enhance **mutual support, collaboration and empowerment**



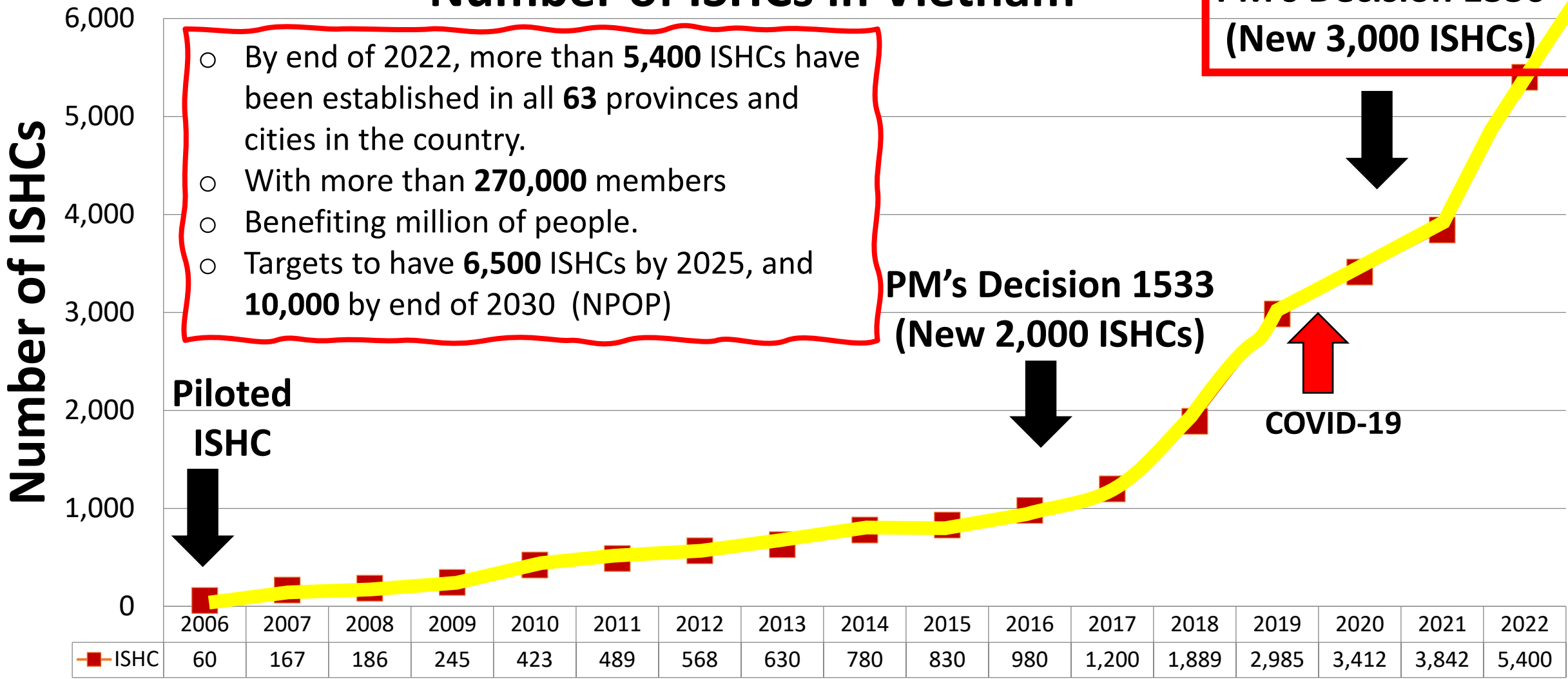


# ISHCs in national policies

- **National ISHC Replication Project (2 phases)**, approved by Prime Minister target **2,000 new ISHCs** by 2020 and **3,000 new ISHCs** by 2025 while maintain the existing ISHCs.
- **National Program on Older people for 2021-2030**: which target by 2030, at least **80%** of the communes and wards will have at least one ISHC or the like.
- **National Program on Health and Care for Older People 2021 to 2030** also have a target on ISHCs
- **Finance for ISHCs**: Government, private sectors, community, member contribution...
- ISHCs is the performance target of Association of the Elderly (AE)
- AE has MOU with health, social welfare, inf & communication, agricultural depts, Women's Union, ....to support ISHCs

# Rapid growth of ISHCs – with government support

## Number of ISHCs in Vietnam



**Note:** Prime Minister's (PM) Decisions on ISHC national Scale-up





Thank you!