



MEASURING WOMEN'S  
LEADERSHIP IN COVID-19  
RESPONSES IN VIET NAM

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# MEASURING WOMEN'S LEADERSHIP IN COVID-19 RESPONSES IN VIET NAM

PREPARED FOR UN WOMEN REGIONAL OFFICE FOR  
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**From  
the People of Japan**

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# ABBREVIATIONS

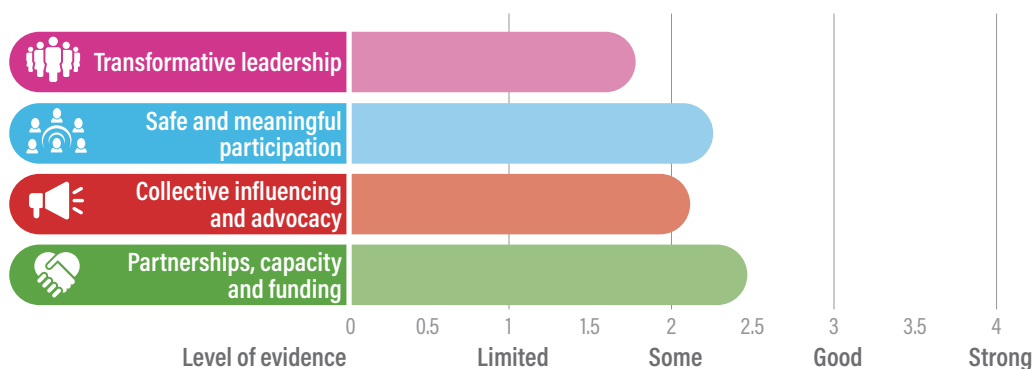
CBO	Community-based organisation
CSO	Civil society organisation
GBV	Gender-based violence
INGO	International non-governmental organisation
NGO	Non-governmental organisation
UN	United Nations
UNCT	United Nations Country Team
WFO	Women-focused organisation
WRO	Women's rights organisation

# EXECUTIVE SUMMARY

The COVID-19 pandemic has exacerbated pre-existing gender inequalities in Viet Nam, as in other countries. Several gendered impacts of COVID-19 have been noted, such as an increase in women’s time spent on care and domestic work, increased gender-based violence, and a decline in women’s labour force participation rate. In particular, women working in the informal sector, migrant workers, primary income earners and women-owned small businesses have been affected by the overall decline in household income. Furthermore, women from ethnic minority groups and migrant groups have been disproportionately affected.<sup>1</sup> These facts underline the importance of ensuring that women are involved in COVID-19 response and recovery efforts, including decision-making.

This report provides a snapshot of the extent to which, and in what ways, women and women-focused organisations (WFOs) have led and participated meaningfully in COVID-19 response efforts in Viet Nam. While it identifies some positive examples of WFO-led participation and advocacy, there are opportunities to strengthen investment and support to WFOs to bolster their leadership in COVID-19 response and recovery.

‘Opportunities for women led organisations to participate in decision-making processes are low.’<sup>2</sup>



The research used the Framework for [Measuring Women’s Leadership and Meaningful Participation in COVID-19 Responses](#). The research looked at four key domain areas: 1) transformative leadership, 2) safe and meaningful participation, 3) collective influencing and advocacy, and 4) partnerships, capacity and funding.

The findings outlined above highlight the need to improve the participation of women and WFOs in COVID-19 response efforts in Viet Nam. While better documentation may reveal more examples of good practice, concerted and sustained efforts are required to create the conditions for WFOs to contribute to response and recovery. A continued lack of representation and engagement of women and WFOs could mean that conditions for women in the COVID-19 recovery context in Viet Nam deteriorate even further.

Partners and financial supporters of WFOs and other COVID-19 response and recovery actors could facilitate greater leadership of WFOs in COVID-19 planning and decision-making by:

- Inviting WFOs to participate in key coordination forums where decision-making occurs
- Advocating for local civil society representation in key coordination forums where decision-making occurs
- Engaging with WFOs to better understand barriers to participation in forums and how

partners, donors and other humanitarian actors can support their engagement

- Supporting and resourcing platforms that bring together women's networks and WFOs
- Initiating regular and meaningful partnership processes based on shared priorities, partnership principles and ways of working; resourcing needs and opportunities, and long-term sustained capacity needs.

Through steps like these, UN Women and other actors looking to advance women's leadership and participation in Viet Nam can use their resources and influence to support partners. Increasing participation and leadership will take time, so it may be beneficial to identify short-term opportunities to optimise the participation of WFOs that already have access to decision-making forums. This could be done while developing mid- to long-term strategies to promote representation of WFOs in other forums to increase attention to women's experiences as part of economic recovery efforts.

*Photo: UN Women Việt Nam/Thao Hoang*





# 1. INTRODUCTION

This study examined the extent of women’s leadership in response to the COVID-19 pandemic in Viet Nam. Globally, the pandemic has exacerbated many of the issues affecting women and girls. Whilst the focus has shifted to recovery in many places, the effects of the pandemic will be felt for many years. As countries seek to minimise the long-term impacts of the pandemic, they can learn from the experiences of women involved in various aspects of COVID-19 response and recovery efforts.

Women in Viet Nam, as in other countries, have been particularly affected by COVID-19 and the restrictions put in place to prevent its spread. In addition to harming women’s health directly, the pandemic affected their employment – particularly in the informal sector – their safety, and increased their time spent on care and domestic work. Despite these gendered impacts, women and the organisations advocating for them were underrepresented in COVID-19 decision-making.<sup>3</sup>

The objective of this research was to measure women’s leadership and participation in the COVID-19 response in Viet Nam. The research was part of a broader portfolio of research overseen by UN Women on women’s leadership and participation during COVID-19 response and recovery in Asia, and drew on the [Framework for Measuring Women’s Leadership and Meaningful Participation in COVID-19 Responses](#). The portfolio of research will inform a regional report outlining the state of women’s leadership and participation in COVID-19 response and recovery in Asia and recommending avenues for improvement.

Overall, the research found women-focused organisations (WFOs) played important roles in supporting COVID-19 response efforts in

Viet Nam, particularly through providing relief packages, disseminating information on COVID-19 and supporting gender-based violence (GBV) prevention and response networks. However, these activities do not appear to have translated into participation into strategic decision-making and coordination forums. Ways to bolster support to WFOs include ensuring they are represented and actively participate in key decision-making forums, identifying and lowering barriers to such participation, supporting platforms that bring WFOs together, and building meaningful partnerships based on shared priorities.

## Report structure

This report has nine sections:

- Section 1 introduces the report
- Section 2 summarises the methodology and approach underpinning the study
- Section 3 summarises the key findings
- Section 4 explores the context of COVID-19 and its gendered impacts in Viet Nam
- Sections 5 to 8 detail the evidence related to the four domains of the [Framework for Measuring Women’s Leadership and Meaningful Participation in COVID-19 Responses](#): transformative leadership; safe and meaningful participation; collective influencing and advocacy; and partnerships, capacity and funding
- Section 9 concludes the report and discusses what the findings mean for action. It identifies how stakeholders can improve their support for the leadership and participation of WFOs in the COVID-19 recovery and future responses.

## 2. METHODOLOGY

The research used the [Framework for Measuring Women's Leadership and Meaningful Participation in COVID-19 Responses](#). Humanitarian Advisory Group and partners developed this framework in 2020 and piloted it in the [Philippines](#); it was then adapted for Viet Nam based on the outcomes of that process. Subsequent baselines were conducted in [Bangladesh](#) in 2021 and [Tamil Nadu, India](#) in 2022. The framework also guided the development of two case studies in Nepal and Chiang Rai, Thailand, that aimed to identify opportunities for the leadership and participation of WROs and organisations focusing on issues affecting women in government-led COVID-19 recovery planning.

The framework was developed in 2020 to focus on the response phase of the COVID-19 pandemic; however, 2.5 years on, countries are increasingly working on recovery. Consequently, for this baseline, additional questions were added to cover the COVID-19 recovery phase.

While this study considered possible explanations for and implications of the findings, it did not attempt to explain their root causes. Instead, the baseline can be updated with additional studies to measure progress. Over time, this will help to clarify which approaches to promoting women's and WFOs' leadership and participation are most effective.

It was important to consider the experiences of a diverse range of individual women (who may not represent or be represented in women's organisations) as well as WFOs, because the participation of both contributes to transformative leadership. This was reflected in the identification of key stakeholders engaged for the research.

### Text box 1: Definitions

#### Defining women-focused organisations

This research involved organisations that focus on the needs of women. The term WFO includes, but is not limited to, women's representative organisations. This acknowledges that the research includes other organisations, such as those that focus on groups such as sexual and gender minorities, ethnic minorities or persons with disabilities, that can raise the voices of women in an intersectional way.<sup>4</sup>

#### Defining response and recovery phases during the COVID-19 pandemic

*Response* is defined as 'actions taken directly before, during or immediately after a disaster in order to save lives, reduce health impacts, ensure public safety and meet the basic subsistence needs of the people affected'. Response is predominantly focused on immediate and short-term needs.<sup>5</sup>

*Recovery* is defined as 'the restoring or improving of livelihoods and health, as well as economic, physical, social, cultural and environmental assets, systems and activities, of a disaster-affected community or society, aligning with the principles of sustainable development and "build back better", to avoid or reduce future disaster risk'.<sup>6</sup>

However, response and recovery phases are fluid, and responding actors and response and recovery mechanisms and plans often do not distinguish between them.

## The framework and indicators

The framework can be used to establish a baseline analysis to measure progress in leadership and participation of women and WFOs. It includes three results domains:



### Safe and meaningful participation



### Collective influencing and advocacy



### Partnerships, capacity and funding.

Each domain has a results indicator and a set of progress indicators (see Appendix 1). There is also an overarching impact domain – transformative leadership – which includes progress and impact indicators.<sup>7</sup> The framework was built on three areas that were identified as vital in achieving transformative leadership.<sup>8</sup> The assumption was that transformative leadership would be enabled if women and WFOs:

- Could participate actively and safely in decision-making processes and influence outcomes
- Could collectively influence and advocate for women’s leadership and gender inclusion in COVID-19 response and recovery
- Received targeted and relevant support through partnerships, capacity-building and funding.

## Supporting localised approaches to research

The baseline took a localised approach to the research, with two national researchers contributing to the design, leading data collection and contributing to debriefing and analysis. This ensured the research tools were appropriate and contextualised, with the research paying specific attention to ensuring the voices of women informed the process.

## Baselining approach

The baseline process used a mixed-methods approach, involving:

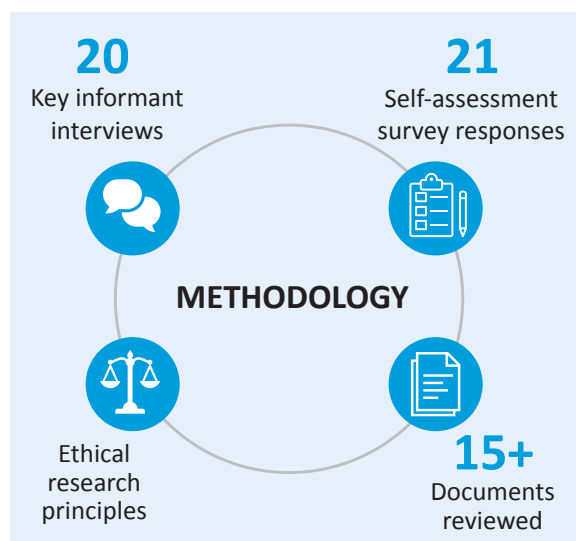
- a desk review of key documents
- key informant interviews
- a self-assessment survey for WFOs and other actors.

The self-assessment survey sought to capture quantitative data against key indicators in the framework, and was completed by representatives of:

- WFOs
- national government
- non-governmental organisations (NGOs)
- local and national civil society organisations (CSOs)
- international NGOs (INGOs)
- United Nations (UN) agencies

The research team worked in partnership with UN Women’s Viet Nam Country Office to distribute the self-assessment survey to international and national humanitarian actors working on COVID-19 response and recovery efforts. We also interviewed key informants from WFOs, INGOs, UN agencies and government working on the COVID-19 response in Viet Nam. Data was triangulated and assessed against the indicators in the framework using an assessment rubric (see Appendix 1) to determine the level of evidence. Indicators were assessed as having one of the following in each domain area: no evidence, limited evidence, moderate evidence, good evidence or strong evidence.

**FIGURE 1:**  
**Methods**



### Limitations

*Response and recovery context.* The case study focused on the COVID-19 response context. However, as mentioned above, response and recovery phases are fluid, and responding actors and response and recovery mechanisms and plans often do not distinguish between them. Consequently, additional questions on COVID-19 recovery were added to allow for discussion of the recovery from the pandemic,

whilst the focus remained on the response phase.

*Limitations of reach.* Given the sample of the baseline, and time constraints, some stakeholders may have been unable to contribute to the study. This includes some of the challenges in the context and limited space for engagement for civil society organisations in Viet Nam, which also impacted on reach of the research. The small sample size (N=21) for the self-assessment survey means that results may not be fully representative of WFOs' or other humanitarian actors' perspectives. To offset this issue, we used a mixed-methods approach, involving qualitative interviews with a broad range of stakeholders. Qualitative data was analysed alongside the quantitative data to cross-check findings and provide further context.

*Interpretation bias.* The baseline data may be influenced by different understandings or interpretations of key terms among our participants. We addressed this by explaining key terms and responding to any clarifying questions during the interview process.

*Photo: Udara Karunaratna on Unsplash*

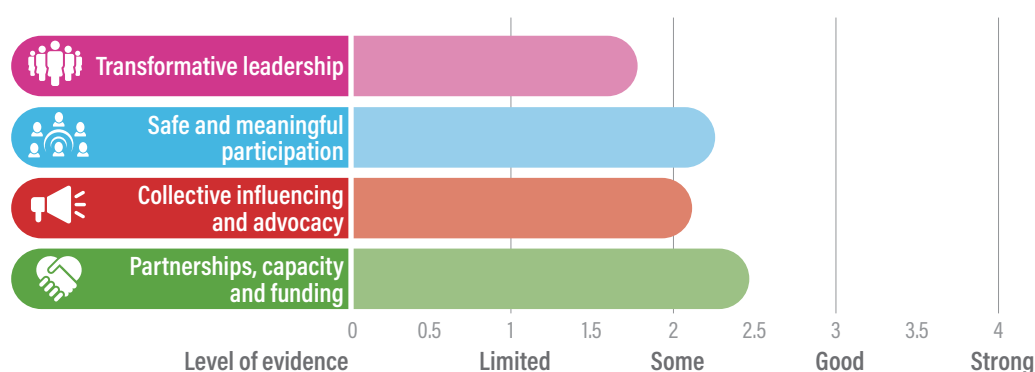


# 3. SUMMARY OF KEY FINDINGS

This report provides a snapshot of the extent to which, and in what ways, WFOs have led and participated meaningfully in COVID-19 responses in Viet Nam. While it identifies some positive examples of participation and advocacy led by WFOs, there remain opportunities to strengthen investment and support to WFOs to bolster their leadership in COVID-19 response and recovery.

The summary below shows scores against the result areas.

## Summary of findings



**Table 1: Overview of scoring**

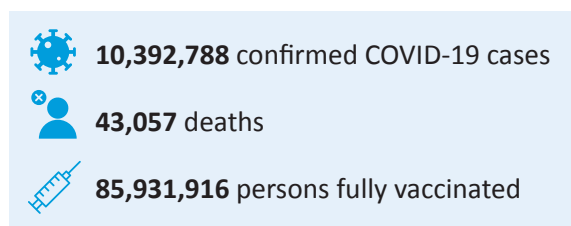
Score	Explanation
<b>None</b>	Evidence is restricted or slight, and inconsistent
<b>Limited</b>	Evidence is limited and inconsistent
<b>Moderate</b>	Moderate evidence, with some inconsistency reflecting genuine uncertainty
<b>Good</b>	Substantial evidence, mostly consistent, and inconsistencies between or within tools may be explained
<b>Strong</b>	Strong evidence, consistency between and within tools

Factors that were considered in the scoring include the extent to which data was available, the level of positive and negative examples and perceptions shared in the surveys and KIIs, and consistency in results across different data collected from different sources.

# 4. CONTEXT: COVID-19 IN VIET NAM

Viet Nam has reported over 11 million confirmed COVID-19 cases, with over 43,000 deaths since the beginning of the pandemic (see Figure 2).<sup>9</sup> It has experienced four major waves of COVID-19, with the fourth (Delta) variant wave beginning in April 2021 and considered to be ongoing nearly two years later. Initially the Government of Viet Nam pursued a zero-COVID-19 strategy, but as of October 2021, restrictions were eased and, similarly to other countries, the approach shifted to living with the virus.<sup>10</sup> By March 2023, 88% of the population was fully vaccinated.<sup>11</sup>

**FIGURE 2:**  
**Impact of COVID-19 in Viet Nam<sup>12</sup>**



## Disaster response management

Viet Nam has four administration levels: national or central, provincial, district level, and ward or commune level. In 2013, Viet Nam enacted the Law on Nature Disaster Prevention and Control, which was later amended in 2021; these laws supported a more robust disaster management architecture.<sup>13</sup> Disaster management is led by the central, provincial, district and local authorities, depending on the risk. At the central level, the National Steering Committee for National Disaster Prevention and Control is the lead body, with the standing office being the Viet Nam Disaster Management Authority.

## The COVID-19 response

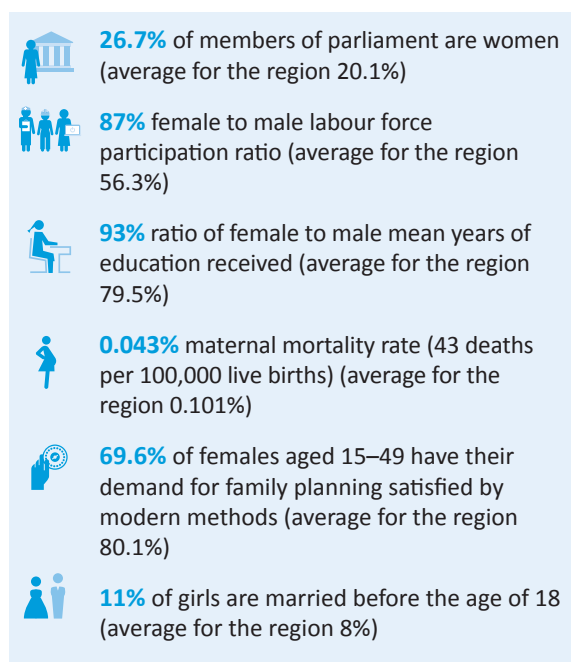
The Viet Nam government imposed significant restrictions and policy decisions which supported an effective response at the beginning of the pandemic. These included restrictions on international arrivals and internal mobility, strong public awareness campaigns, and detailed contact tracing.<sup>14</sup> On 1 February 2020, a Government of Viet Nam executive order declared COVID-19 a national epidemic. Initial Government responses included establishing regional COVID-19 prevention taskforces deployed to provincial treatment sites under the Ministry of Health. The Government also developed the National Response Plan and assembled the National Steering Committee. The plan outlines the different roles and responsibilities for each sector and for each level of administration (central, provincial, district and commune).<sup>15</sup> The Government also announced a \$2.6 billion social protection package, which aimed to provide cash support to the most vulnerable in the community, including those who lost their jobs. The United Nations Country Team (UNCT) also established a One UN response to COVID-19 in order to support the Government's health and socio-economic response.<sup>16</sup>

## A snapshot of gender equality in Viet Nam and the gendered impacts of COVID-19

Significant progress has been made towards gender equality in Viet Nam.<sup>17</sup> A recent report noted that Viet Nam 'maintains a positive reputation as a country where women enjoy formal equality under the law'.<sup>18</sup> Viet Nam

recently adopted a National Strategy on Gender Equality for 2021–30,<sup>19</sup> focused on gender equality and women’s entrepreneurship. The strategy has six priorities, including women’s political participation. However, there is still critical work to be done to eliminate biases and barriers to women’s empowerment, participation and security (see Figure 3). Women have been historically underrepresented in public decision-making processes, and this is reflected in high-level decision-making structures for COVID-19. While almost 27% of members of parliament are women, they make up only 9% of ministers.<sup>20</sup>

**FIGURE 3:**  
A snapshot of key gender equality indicators in Viet Nam<sup>21</sup>



Women make up 47% of informal workers in Viet Nam, including domestic workers, home workers and street vendors. They also account for 77% of workers in garment manufacturing. In addition to employment in formal and informal sectors, women undertake the majority of unpaid and domestic and care work.<sup>22</sup> Women account for 63% of health sector employees, whose work has been complicated and expanded by the COVID-19 pandemic. Meanwhile, women maintain their role as domestic caregivers, including home schooling.<sup>23</sup>

These factors have influenced the gendered impacts of the pandemic for women across Viet Nam, including:

- Increased time spent on care and domestic work
- Increased violence experienced by women and children
- A overall decline in household income, affecting women in the informal sector, migrant workers, primary income earners and women-owned small businesses
- Disproportionate impacts on women from ethnic minority groups and migrant groups
- Reduced access to sexual and reproductive health services.<sup>24</sup>

# 5. TRANSFORMATIVE LEADERSHIP



**KEY FINDING:** There is **limited to moderate evidence** that women and WFOs have a transformative leadership role in COVID-19 response efforts.

Overall, there is limited to moderate evidence that women and WFOs have a transformative leadership role in COVID-19 response efforts in Viet Nam. WFOs are primarily present in community and village-level meetings as well as CSO-driven platforms and issue-specific coordination forums. While WFOs' involvement in high-level decision-making was found to be low, other evidence indicates that women and diverse women's groups were included through bilateral, issue-based consultation with other actors. However, as a result of inadequate consultation with diverse women and women's groups, some actors felt that the overall response to COVID-19 had not sufficiently addressed the needs of women.



**Progress indicator:** Women and diverse women's groups are present in the forums where key decisions are made for COVID-19 responses: **LIMITED TO MODERATE EVIDENCE**

There is limited to moderate evidence that women and WFOs are present in the key decision-making forums for COVID-19 response and recovery efforts in Viet Nam. Figure 4 provides a list of the platforms in which WFOs and other actors reported participating. These survey results show that, as a group, WFOs had access to all levels except for the top national decision-making forum. Other research that examined the composition of national COVID-19 taskforces also identified low levels of women's representation, both in terms of membership and leadership. In Viet Nam, 7.4% of national COVID-19 taskforce members were women, whilst the regional average for East Asia, Southeast Asia and Oceania was 15%.<sup>25</sup> The leadership role of individual women however was noted by respondents, as leaders of WFOs and government agencies.

Survey respondents representing WFOs indicated that they were present in 1–2 forums on average, with the most commonly reported being community and village meetings. Free-text responses to this question indicated participation in CSO-driven platforms and issue-specific coordination forums. While WFOs reported more limited representation, rates of participation reported by other actors were not dramatically higher.



**FIGURE 4:**

**Coordination and decision-making platforms in which WFOs and other actors participated**

Platform	WFOs	Other actors
National COVID-19 Steering Committee		
Provincial COVID-19 Steering Committee		
District COVID-19 Steering Committee		
Commune COVID-19 Steering Committee		
Community/ village meetings		
CSO coordination meetings		
UN Country Team meetings		
Viet Nam Women’s Union		Not applicable
I did not participate in any platforms		
Other		

When unpacked further in interviews, some WFOs and other actors perceived the lack of representation and consultation in decision-making forums to be a result of the urgency of the situation at the beginning of the pandemic.<sup>26</sup> This challenge is likely to have affected not only WFOs but other CSOs.

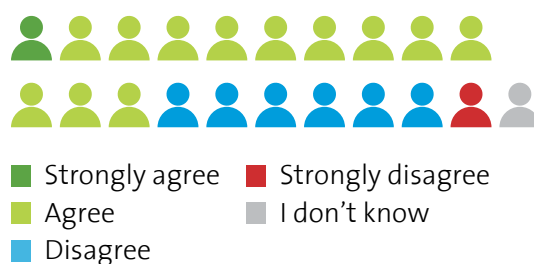
*‘It could be said that they have no time for involving any organisations in the decision-making process, because it would take time and human resources [...] I found that the civil society organisations, vulnerable groups or individuals were not able to join in decision-making at [the] national level. Perhaps in the future, but now, I did not see other organisations, not just women[’s] organisations, participate in the decision-making process.’<sup>27</sup>*

Despite what appears to have been limited representation in joint decision-making forums, especially at the national level, interviewees

highlighted that WFOs supported the COVID-19 response in other ways, including carrying out response activities such as providing relief items and cash assistance and disseminating information on COVID-19. Two key response areas in which WFOs provided support were GBV prevention and response services, and ensuring support packages reached migrant workers and other marginalised groups.<sup>28</sup> Overall, as shown in Figure 5, respondents agreed that relevant organisations were receiving support to tackle gender-based issues.

**FIGURE 5:**

**The relevant organisations are receiving appropriate support to address gender-based issues**



As explored further below, at times WFOs' support for the COVID-19 response involved operational cooperation with government, despite limited formal recognition of WFOs in or by taskforces. For example, one organisation worked with government to provide packages to support migrant workers in the informal sector. Other organisations provided GBV prevention and response services through hotlines and shelters (see Text box 2).<sup>29</sup> However, experiences shared for this research suggest that these activities – while important – did not lead to greater recognition in decision-making forums over time.

'We accompanied other domestic violence networks in Viet Nam to set up meetings and workshops to find out ways how to respond to violence during COVID-19, [...] strengthening awareness of women on domestic violence during COVID-19.'<sup>30</sup>

#### Text box 2: A spotlight on women's leadership during COVID-19

WFOs played a strong role in leading operational aspects of COVID-19 response and recovery. This included delivering a range of basic materials and tools for women and girls. Due to WFOs' networks in communities and ability to communicate with and reach a diversity of women, international organisations partnered with them so that they could lead implementation of these programs.<sup>31</sup>

Other WFO activities included establishing coordination platforms, developing information and awareness campaigns, and establishing hotlines and referral services focused on preventing and responding to GBV. Platforms like Facebook were used to share information in community groups, in addition to printed leaflets and loudspeakers. WFOs also mobilised male advocate clubs to share information and raise awareness.

WFOs have had an important role in economic recovery by, for example, providing loans and benefits for women who are pregnant, caregivers, migrants, ethnic minority members, elderly or who have experienced domestic violence.<sup>32</sup>

Many of the interviewees' examples of engagement with government were ad hoc and there were limited cases identified of WFOs being systematically included or formally integrated into structures, particularly high-level ones. Consultation gaps in the emergency phases of the pandemic appear to be continuing in the recovery phase.

'I don't think social organisations' expertise has been considered to make any policy decisions related to COVID-19.'<sup>33</sup>



**Progress indicator:** Women and diverse women's groups are listened to and their opinions respected: **MODERATE EVIDENCE**

While WFOs had little involvement in high-level decision making in Viet Nam, other evidence suggests that women and diverse women's groups were listened to. Participants in the study shared examples of bilateral, issue-based consultation between government, WFOs and other humanitarian actors in relation to health measures and COVID-19 response policies affecting women and other marginalised groups.<sup>34</sup> For instance, one WFO reported providing guidance and advice on how policies could be adapted to reach specific groups.<sup>35</sup> Some examples suggested constructive working relationships between WFOs and governments at national and local levels;<sup>36</sup> interviewees spoke about WFOs proactively raising issues with government and finding receptive audiences. One organisation that had provided multiple inputs – advocating for a range of actions including gender-sensitive data collection and support for the needs of socially marginalised, transgender and pregnant women – reflected:

'Our suggestion was highly appreciated and received support from [the]

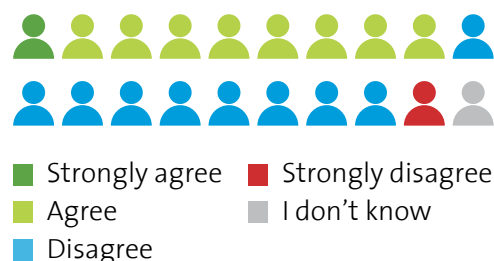
### government regarding recommendation of gender needs.<sup>37</sup>

In some instances, influence was enabled by data collection and analysis. Some WFOs conducted research and rapid surveys to understand the impact of COVID-19 on women, migrant workers and other workers affected by the pandemic. They used their research results to engage with government stakeholders on specific COVID-19 policies affecting women and other marginalised groups (see section 7 for more on influencing and advocacy).<sup>38</sup>

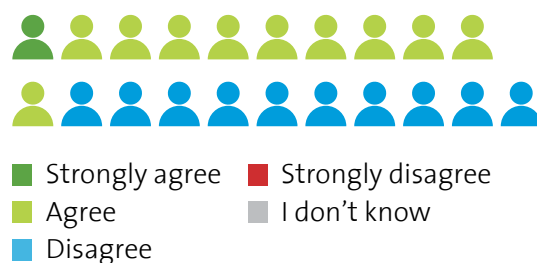
‘We consulted with the local authorities on how to choose groups that have been seriously impacted by COVID-19 [and the] evaluation criteria toward such groups.’<sup>39</sup>

As a result of limited consultation with diverse women and women’s groups, some actors felt that the overall response to COVID-19 had not met the needs of women. For example, one interviewee highlighted how the needs of women staying in quarantine centres were not considered, seeing this as a consequence of their absence from the consultation process. Another interviewee noted that some marginalised groups are indirectly left out of response and recovery efforts, because policies target people more broadly or in a ‘gender neutral’ way, without paying attention to specific gender needs.<sup>40</sup> This contention was supported by the survey data for this baseline, with under half of the respondents to this study agreeing that GBV prevention and response services had been priorities (see Figure 6). Similarly, only just over half of the respondents agreed that the needs of diverse women were met during the pandemic (see Figure 7).

**FIGURE 6:**  
Gender based violence prevention and response services have been prioritised during the COVID-19 response



**FIGURE 7:**  
Extent to which COVID-19 response is perceived to have addressed specific needs



In the logic of the measurement framework, women and WFOs are enabled to play a transformative role in leadership and decision-making by building on supporting activities in various domains or levels of action: safe and meaningful participation; collective influencing and advocacy; and partnerships, capacity and funding. These domains are discussed below.

# 6. SAFE AND MEANINGFUL PARTICIPATION

This domain encompasses the extent to which there is safe and meaningful participation for women and the impact of this on broader COVID-19 response efforts. Meaningful participation is defined as when ‘people not only have access to or are present within decision-making processes, but also that they are able to actively participate in and have influence over their format and outcomes’.<sup>41</sup> Safe participation is defined as the ‘absence of trauma, excessive stress, violence (or fear of violence) or abuse, where women have the freedom to express themselves without fear of judgement or harm’.<sup>42</sup> Evidence shows that, in many contexts, women’s participation increases the reach and impact of recovery efforts, revitalises economies, and builds stronger and more durable peace.<sup>43</sup>



**KEY FINDING:** There is **moderate evidence** that women and WFOs participate actively and safely in decision-making processes and can influence outcomes.

There is moderate evidence that women and WFOs participate actively and safely in decision-making processes and can influence outcomes in Viet Nam. As mentioned in the leadership section, the extent to which WFOs were involved in high-level decision-making processes and coordination forums was overall limited. Instead, they were largely present at the community and village or commune level. However, as discussed in this section, there were positive indications about WFOs’ space to actively engage in the forums they were attending, and they felt that barriers to their participation in those forums were addressed.



**Progress indicator:** Diverse women and national and local WFOs are represented and engage actively in COVID-19 response decision-making and coordination forums: **MODERATE EVIDENCE**

As noted above, WFOs’ presence in key forums is variable but limited overall; when they are present, however, there were positive indications about WFOs’ space to actively engage. Some WFO representatives noted that they participated in workshops, conferences or dialogues with government and international organisations that focused on social security support measures during COVID-19, whilst another noted that their engagement with other humanitarian actors related mostly to specific project design and implementation. One humanitarian actor mentioned the participation of WFOs in the disaster response working group, but this was not a notable theme in the interviews with WFOs.<sup>44</sup> When reflecting on the forums in which they were participating, overall, WFOs felt they could engage meaningfully (see Figure 8). WFOs also shared examples of bilateral, issue-based consultation with government in relation to health measures and COVID-19 response policies affecting women and other marginalised groups that showed some level of safety in engagement.<sup>45</sup>

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‘We have a well-established coordination forum at the national level – we use that network to support COVID-19 response, the network includes many WFOs, mostly NGOs that we worked with [...] In provincial and district level, the provision was done through coordination meeting via zoom, we invite female CBO leaders as part of the meeting.’<sup>46</sup>

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**FIGURE 8:**  
**WFOs have been able to meaningfully engage in COVID-19 forums during response times**



However, research suggests that WFOs were not able to contribute to the full range of COVID-19 decision-making forums in Viet Nam.<sup>47</sup> Specifically, as outlined in the leadership section, there was little evidence that WFOs had access to strategic response spaces and national-level coordination structures such as national COVID-19 steering committee meetings and UNCT meetings. Their safe and meaningful participation was inevitably limited.

Additionally, there were ambiguous reflections on the level of respect or safety that WFOs experience when engaging with other actors. One interviewee highlighted that being known for a certain role prior to the pandemic could strengthen the chance of being listened to, citing the example of organisations working on GBV. However, they also raised concerns about the potential for accusations of overreach when organisations stepped out of their perceived focus areas. This is pertinent in a whole-of-society emergency in which many actors may be improvising or seeking to engage beyond their usual networks.<sup>48</sup>

*'If the NGO is a policy NGO or a research NGO or a community development role, if they stick to their role, that's good, but if they are for example a community development role and doing research it's like going overboard on their mandate.'*<sup>49</sup>

 **Progress indicator:** Coordination and consultation forums address access and safety considerations for WFOs: **MODERATE EVIDENCE**

Survey data highlights that WFOs believe barriers to their participation in forums are addressed, with most WFOs surveyed reporting that this was the case (see Figures 9 and 10). However, this primarily relates to the forums they are already attending, largely at the community

and village or commune level, rather than national or strategic decision-making forums. When unpacked further in interviews, the need to have explicit or implicit approval to contribute was raised as a factor that could facilitate or hinder access to meetings and implementing activities. In particular, some participants observed that when their interlocutors understood WFOs' purpose and programs, this increased the likelihood of WFOs receiving support for administrative processes and procedures or assistance with potential safety issues.<sup>50</sup> Additionally, the potential for COVID-19 infection was raised as a safety concern, and the impact of stress and people dying from COVID-19 on mental health was noted.<sup>51</sup>

*'If we did not get COVID-19, we felt physically safe. But at that time, we had a lot of meetings, and thus, we felt stressed.'*<sup>52</sup>

In forums with non-Vietnamese participants, one organisation also noted other barriers to participation, including the discussion being dominated by some participants and the forums being conducted in English: *'For some meetings, I found there are some participants who dominate the discussion, they tend to share and talk too much and other participants cannot concentrate on the meeting content.'*<sup>53</sup>

**FIGURE 9:**  
**Barriers to attending coordination forums and meetings are actively addressed**



**FIGURE 10:**  
**It is safe for representatives of my WFO to participate in COVID-19 forums and meetings**



# 7. COLLECTIVE INFLUENCE AND ADVOCACY

This domain relates to the extent to which WFOs are supported to advocate for and engage with processes that influence COVID-19 responses. The result indicator reflects good practice in supporting WFOs to advocate for their priorities. Advocacy can be defined as activities that are designed to ‘influence the policies and actions of others to achieve change’.<sup>54</sup>

**KEY FINDING:** There is **moderate evidence** that COVID-19 responses are influenced by the priorities of national and local groups and movements that advocate for women’s leadership and gender inclusion.

There is moderate evidence that COVID-19 responses in Viet Nam are influenced by the priorities of national and local groups and movements that advocate for women’s leadership and gender inclusion. Several interviewees gave examples of how WFOs undertook research and advocacy on key issues affecting diverse women and other marginalised groups they represent. However, there remains opportunity to improve the policies and approaches adopted in the recovery from COVID-19 to address the priorities of women.

**Progress indicator:** National and local WFOs and grassroots networks are able to successfully advocate for the development of policies and standards in relation to COVID-19: **LIMITED TO MODERATE EVIDENCE**

There is limited to moderate evidence that WFOs have been able to advocate successfully for the development of COVID-19 policies and standards in Viet Nam. As Figure 11 shows, more than half of the respondents from WFOs and other actors felt that advocacy by WFOs and networks has influenced the development of national, provincial or district-level COVID-19 response policies or approaches.

**FIGURE 11:** Advocacy by WFOs and networks has influenced the development of national, provincial or district level COVID-19 response policies or approaches



WFOs reported undertaking research and advocacy on key issues including integrating gender issues into COVID-19 guidelines, vaccine equity, domestic violence during the pandemic, and support for women-owned small and medium-sized enterprises, migrant workers and ethnic minorities, amongst others. Some monitored the implementation of policies to ensure target groups were being reached and to identify any challenges. For example, one organisation undertook a survey to support their advocacy to local authorities, arguing for women to be included when interpreting the decree 68/NQ-CP on policies to support COVID-hit employees and employers.<sup>55</sup>

‘We participated in policy advocacy to help the vulnerable people receive support packages in easy ways.’<sup>56</sup>

However, as mentioned in section 5, interviewees felt that there was a gap between COVID-19 response policies or approaches integrating gender perspectives, and being ‘gender neutral’. For example, some respondents perceived certain economic policies and guidelines as gender neutral because they did not specifically prioritise women or gendered needs and impacts,<sup>57</sup> such as sexual and reproductive health, GBV prevention, and the needs of women workers and women-owned businesses affected by the pandemic. Other research confirms that gender-sensitive measures or those prioritising women’s needs were not incorporated in policy responses.<sup>58</sup>

‘I don’t think it explicitly has provisions for women’s participation and leadership – it’s a very neutral policy and plan.’<sup>59</sup>

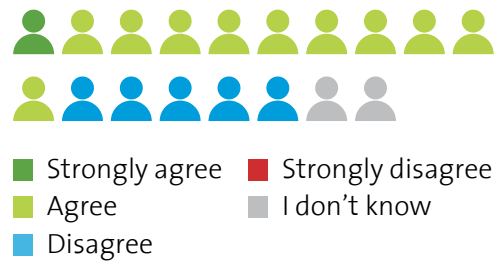


**Progress indicator:** International partners/donors amplify the voice of national and local WFOs during COVID-19 responses: **MODERATE EVIDENCE**

There is moderate evidence that international partners/donors have amplified the voice of national and local WFOs during COVID-19 responses in Viet Nam; most survey respondents agreed with this proposition (see Figure 12).

**FIGURE 12:**

**Donors have amplified the voices of WFOs during COVID-19 response**



Despite this agreement, few examples of good practice emerged from interviews. Donors and international partners identified several ways in which they had sought to profile the priorities and voice of WFOs and women. International partners’ direct implementation included activities like inviting women leaders of CBOs to join coordination forums with provincial and district-level government; convening learning activities and platforms; actively promoting and socialising the expertise and knowledge of WFOs; and using their own networks and influence with government to support grassroots and smaller WFOs.<sup>60</sup>

‘[We] play a facilitating role at the local level. We introduce them to government officials and leverage our relationship with government to enable and help them work in these areas.’<sup>61</sup>

# 8. PARTNERSHIP, CAPACITY AND FUNDING

For WFOs to shape COVID-19 responses, they must be supported. This support includes help to prioritise their organisational needs, strengthen their capacity to deliver programs, access adequate funding, and participate in decision-making about funding changes.<sup>62</sup> Measuring progress on the development of equitable and complementary partnerships between international and national actors and national and local WFOs is therefore critical in understanding women’s participation in response and recovery.

**KEY FINDING:** There is **moderate evidence** that WFOs have targeted and relevant support through partnership, capacity building and funding to help them respond effectively and efficiently to COVID-19.

Overall, there was moderate evidence of equal and complementary partnerships, targeted and relevant support, and funding for WFOs. However, there were some indications that WFOs have less funding and capacity support for recovery activities than in the response phase.



**Progress indicator:** Equitable and complementary partnerships between local and national WFOs and other responding actors are upheld:

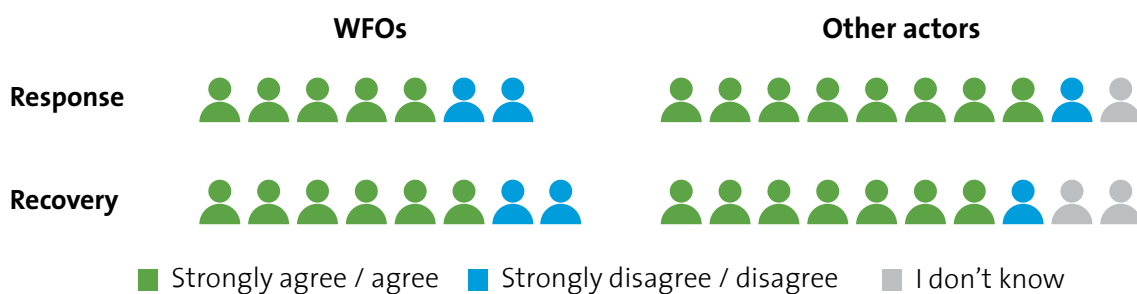
**MODERATE EVIDENCE**

There is moderate evidence that equitable and complementary partnerships between local and national WFOs and other responding actors are upheld. As highlighted in Figure 13, a large majority of both WFOs and other actors surveyed reported that WFOs in Viet Nam are involved in the development of COVID-19 response and recovery programs with their partners. Interviewees shared examples of projects implemented in partnerships and highlighted how these were co-designed and co-implemented. For example, one project co-designed by a group of organisations involved conducting collaborative research and then co-implementing a project based on the results.<sup>63</sup>

*‘In general, our current donors are very supportive. They understand the situation and create [room] for us to promote innovation, encourage creative ideas and feasible solutions.’<sup>64</sup>*

**FIGURE 13:**

**WFOs are involved in the development of COVID-19 response and recovery programs with their partners**





International partners noted several factors supporting partnerships during COVID-19, including partnerships being well established, facilitated co-design on project proposals, and partnering with organisations at the provincial level or with good networks to connect to the grassroots level.<sup>65</sup>

However, these positive examples were not reflected across all partnerships. One WFO noted an instance where the provision of kits for women was not suitable, as the items then had to be transported to another location – which may have been avoided through more collaborative decision-making.<sup>66</sup> Another interviewee reflected on the importance of open dialogue and trust building as the foundation of good partnerships and programming, and how this was complicated by the COVID-19 pandemic and when working remotely and conducting remote post-distribution monitoring.<sup>67</sup> Partnerships were also often project based; the financial impact of this and the extent to which WFOs were able to access sufficient funding are discussed in the next section.



**Progress indicator:** WFOs have financial support and autonomy that enables them to respond effectively and efficiently to the impacts of COVID-19:

**MODERATE EVIDENCE**

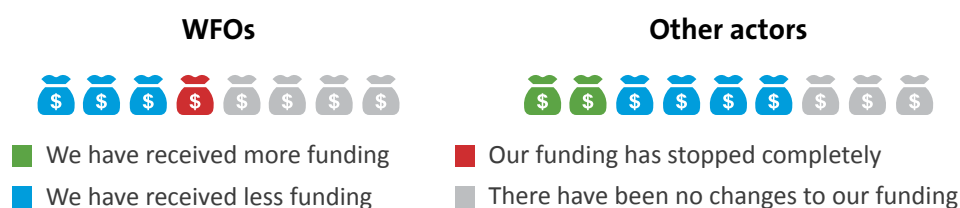
There is moderate evidence that WFOs in Viet Nam have financial support that enables them to respond effectively and efficiently to the

impacts of COVID-19. Several WFOs reported receiving funding for COVID-19 response efforts, including distribution of relief items and undertaking baseline surveys to understand the impact of COVID-19 on women. One WFO also highlighted how donors for existing projects provided flexibility, with the organisation able to repurpose budget lines for activities that had to be adapted as a result of COVID-19.<sup>68</sup>

*‘It could be said that our budget entirely depends on donors, we received funds and we followed donors’ regulations and funding criteria. We made our decisions to adjust the programmes, but we need to get approval from our donors in align[ment] with [the] COVID-19 situation.’<sup>69</sup>*

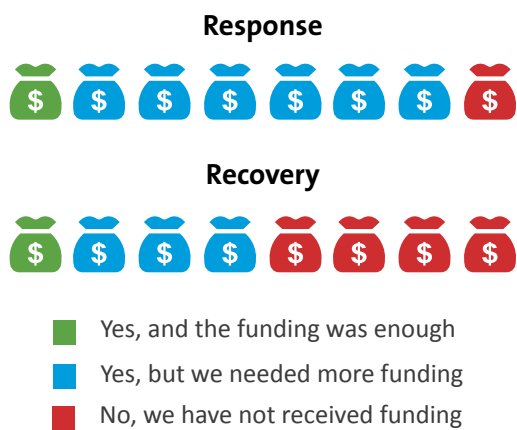
However other WFOs noted that there had been no change in their funding or that it had decreased because of the need to procure additional items such as COVID-19 testing kits for staff and due to fluctuating exchange rates.<sup>70</sup> This was reflected in the survey data, with no WFOs reporting that they received more funding; instead, half reported that there had been no changes to their funding, whilst the other half reported that they had received less funding or that funding had stopped completely. Whilst other actors also reported receiving less funding due to COVID-19, none of these actors reported that their funding had stopped completely (see Figure 14).

**FIGURE 14:**  
How has your funding been affected by COVID-19?



The WFOs surveyed indicated clearly that there has been less funding for recovery than response activities. Whilst more than three quarters of WFOs surveyed had received funding for COVID-19 response activities, half had not received any funding for recovery activities (see Figure 15).

**FIGURE 15:**  
Funding for WFOs for COVID-19 activities



**Progress Indicator:** WFOs have targeted and relevant support from donors and partners to help them respond effectively and efficiently to COVID-19: **MODERATE TO GOOD EVIDENCE**

There is moderate to good evidence that donors and partners helped build the capacity of Vietnamese WFOs to effectively and efficiently respond to COVID-19. All WFO survey respondents said they define the capacity needs of their own organisation or a combination of partners and their own organisation does so, and they felt that this was appropriate. However, when asked if donors and international partners focused on the areas of capacity that they themselves had prioritised, only just over half felt they had done so completely or to a large extent. Only a small number WFOs gave specific descriptions of how targeted and relevant support from donors and partners helped them respond to the pandemic. One potential explanation for this is

that interviewees may not want to jeopardise existing support by appearing unappreciative, leading to positive assessments even in cases where there is room for support to be defined more collaboratively and better tailored.<sup>71</sup>

Partners of WFOs noted various types of support that they provided, including:

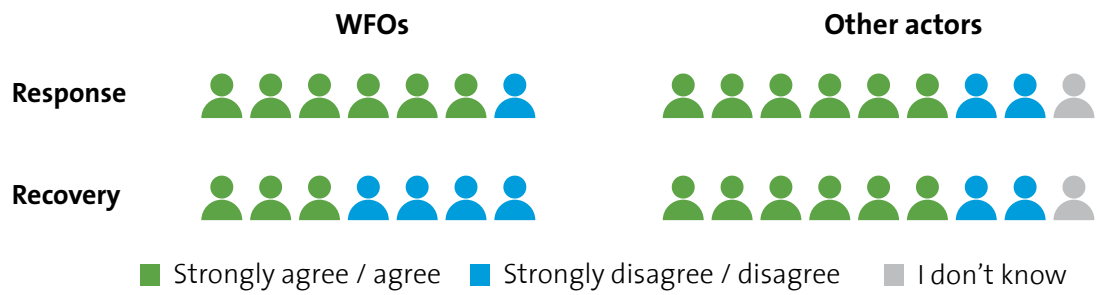
- Capacity strengthening on Zoom and other online communication platforms used for remote work
- How to pivot activities such as counselling to be delivered remotely
- Providing funding for procurement of personal protective equipment
- Adapting and sharing guidance on responding to COVID-19 from their own regional offices
- Holding remote, and (once possible) face-to-face workshops and trainings.<sup>72</sup>

*‘We worked together to adapt the guidance. We got support from our regional office and engaged our partners in workshops, and we supported them to know how to react during the COVID-19 situation.’<sup>73</sup>*

Participants reported changes in support as the pandemic progressed. Echoing the findings in relation to funding, WFO survey respondents noted a decrease in appropriate capacity support to help women recover from the pandemic, compared with the response phase. Whilst most of the WFOs surveyed strongly agreed or agreed that they had received appropriate capacity support to help women respond to the pandemic, less than half said they had received appropriate capacity support to help women recover from the pandemic (see Figure 16). There is an important opportunity to enable WFOs to extend support for women in the COVID-19 recovery.

**FIGURE 16:**

**WFOs received appropriate capacity support to help women respond to and recover from the pandemic**



*Photo: Doan Tuan on Unsplash*



# 9. CONCLUSION

Overall, the research showed that WFOs' practical initiatives and information-gathering are not translating into participation in or influence on COVID-19 decision-making in Viet Nam. More work is needed to ensure that continuing responses and shifts into recovery meet the needs of diverse women. Some good practices in partnerships and participation can be formalised and expanded to promote the role of WFOs as representatives and advocates of women in Viet Nam.

**FIGURE 17:**

## Summary of findings



### Transformative leadership

Limited to moderate evidence ✓✓



### Safe and meaningful participation

Moderate evidence ✓✓



### Collective influencing and advocacy

Moderate evidence ✓✓



### Partnership, capacity and funding

Moderate evidence ✓✓

## Where action has been seen

Our research revealed the proactive and multifaceted work of WFOs during COVID-19 response and recovery in Viet Nam. WFOs have often undertaken bilateral engagement and advocacy on policies affecting the diverse groups of women and marginalised groups that they seek to serve. This has complemented their access to decision-making forums,

which has been strongest in community and village-level forums and most restricted at the national level. WFOs have supported the COVID-19 response through a range of practical activities, including the provision of relief items and cash assistance, disseminating information on COVID-19, and supporting GBV prevention and response services.

*'Opportunities for women led organisations to participate in decision-making processes are low.'*<sup>74</sup>

*'If women were part of the consultation process, their basic needs would have been considered. You can see the absence of the participation of women.'*<sup>75</sup>

## Opportunities for strengthening investment and support

While there is some evidence of progress in each of the domain areas, there are opportunities to progress with respect to WFOs' safe and meaningful participation, collective influencing and advocacy, and equitable partnerships with other humanitarian actors. In particular, there is an opportunity to ensure that WFOs' expertise, experience and understanding of women's needs is drawn upon and that they are included in national-level coordination and decision-making forums to ensure better outcomes for women and other marginalised groups.

### **Priorities for increasing women's leadership and participation in COVID-19 response and recovery**

There are several key opportunities for partners and donors of WFOs and other humanitarian actors to consider in advancing women's leadership in the ongoing recovery and future responses. Priority actions include:

- Inviting WFOs to participate in key coordination forums where decision-making occurs
- Advocating for local civil society representation in key coordination forums where decision-making occurs
- Supporting the implementation of specific policies that promote gender equality
- Engaging with WFOs to better understand barriers to participation in forums and how partners, donors and other humanitarian actors can support their engagement
- Supporting and resourcing platforms that bring together women's networks and WFOs

- Initiating regular and meaningful partnership processes based on shared priorities, partnership principles and ways of working, resourcing needs and opportunities, and long-term sustained capacity needs.

This baseline report presents evidence that can catalyse change among humanitarian actors, including government, national and international NGOs, UN agencies, the private sector and the International Red Cross and Red Crescent Movement. It should prompt organisations and coordination forums to set targets and track change to better include, support and elevate the role of WFOs in COVID-19 recovery and future humanitarian response and recovery processes. Enhancing leadership and participation during decision-making and elevating women's voices in response and recovery processes is vital to increasing the quality of humanitarian outcomes for affected communities in Viet Nam throughout the COVID-19 recovery, and beyond.

*Photo (this page and previous page): Doan Tuon on Unsplash*

## APPENDIX 1: ASSESSMENT RUBRIC

Result indicator/ Impact indicator	Progress indicator	Means of verification	Evidence				Evidence grading
			0 None	1 Limited	2 Moderate (some)	3 Good	
<b>Result domain: Safe and meaningful participation</b>							
Women and WFOs participate actively and safely in COVID-19 response decision-making processes and can influence outcomes	Diverse women and national and local WFOs are represented and engage actively in in-country COVID-19 response decision-making and coordination forums	WFOs are present and participate at key COVID-19 response platforms and forums			X		
		Perception that WFOs can meaningfully and safely participate in key forums and information is made accessible			X		
	Coordination and consultation forums address access and safety considerations for WFOs	Evidence that security risks, physical access, transport requirements and internet/technology access have been addressed			X		
<b>Result domain: Collective influencing and advocacy</b>							
COVID-19 responses are influenced by the priorities of national and local groups and movements that advocate for women's leadership and gender inclusion	National and local WFOs and grassroots networks are able to successfully advocate for the development of policies and standards in relation to COVID-19	National and local WFOs and networks are able to advocate for the development of COVID-19 policies and standards that align with their priorities			X		
		Perception that advocacy by national and local WFOs and networks has influenced policy development		X			
	International partners/donors amplify the voice of national and local WFOs during COVID-19 responses	Perception that donors have amplified the voices of WFOs during COVID-19			X		
	Evidence of investment of resources to support response advocacy				X		
<b>Moderate evidence</b>							

Result indicator/ Impact indicator	Progress indicator	Means of verification	Evidence grading			
			0 None	1 Limited	2 Moderate (some)	3 Good
<b>Result domain: Partnership, capacity, and funding</b>						
WFOs have targeted and relevant support through partnership, capacity-building and funding to help them respond effectively and efficiently to COVID-19	Equitable and complementary partnerships between local and national WFOs and other responding actors are upheld	Evidence that response projects are co-designed, implemented and evaluated in partnership			X	
	WFOs have targeted and relevant support from donors and partners to help them respond effectively and efficiently to COVID-19	WFOs define their own capacity-strengthening priorities in relation to responding to COVID-19			X	
		WFOs are supported by partners to undertake capacity-building activities for the COVID-19 response			X	
WFOs have sufficient financial support and autonomy that enables them to respond effectively and efficiently to the impacts of COVID-19	WFOs have direct access to COVID-related funding			X		
	Perception that WFOs have increased control over COVID-related funding decisions		X			

Result indicator/ Impact indicator	Progress indicator	Means of verification	Evidence grading			
			0 None	1 Limited	2 Moderate (some)	3 Good
<b>Impact domain: Transformative leadership</b>						
Women and WFOs have a transformative leadership role in COVID-19 response efforts	Women and diverse women's groups are present in the forums where key decisions are made for COVID-19 responses	Proportion of leadership positions occupied by diverse women	X			
		Evidence that women have a key role in informing response efforts		X		
	Women and diverse women's groups are listened to and their opinions respected	Evidence that women and local and national WROs influence key decisions in COVID-19 responses efforts			X	
		Gender perspectives, goals and desired impacts are included in COVID-19 response efforts		X		

Score	Explanation
0 None	Evidence is restricted or slight, and inconsistent
1 Limited	Evidence is limited and inconsistent
2 Moderate	Moderate evidence, with some inconsistency reflecting genuine uncertainty
3 Good	Substantial evidence, mostly consistent, and inconsistencies between or within tools may be explained
4 Strong	Strong evidence, consistency between and within tools



# ENDNOTES

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- 4 The Grand Bargain Friends of Gender Group uses the following definition: '1) an organization that self-identifies as a woman's rights organization with primary focus on advancing gender equality, women's empowerment and human rights; or 2) an organization that has, as part of its mission statement, the advancement of women's/girls' interests and rights (or where 'women', 'girls', 'gender' or local language equivalents are prominent in their mission statement); or 3) an organization that has, as part of its mission statement or objectives, to challenge and transform gender inequalities (unjust rules), unequal power relations and promoting positive social norms. Self-identification by local actors themselves is being proposed while the possible technical definition described above can be used for guidance or further verification.' See CCTRI Localization Workstream (2019) Core Commitment Indicators and Target-Results (CCTRI), pp. 1–2, <https://gblocalisation.ifrc.org/wp-content/uploads/2019/03/CCTRI-Localization-Workstream.pdf>; UN Women (2020) How to promote gender-responsive localization in humanitarian action, Guidance Note, p. 59, <https://reliefweb.int/sites/reliefweb.int/files/resources/Guidance%20note%20-%20How%20to%20promote%20gender-responsive%20localization%20in%20humanitarian%20action.pdf>
- 5 UNDRR (n.d.) Response, <https://www.undrr.org/terminology/response>
- 6 UNDRR (n.d.) Recovery, <https://www.undrr.org/terminology/recovery>
- 7 The domains are outlined further in Appendix 1.
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- 9 'Vietnam COVID-19 Data, Department of Health and Preventive Medicine, updated 9/3/2023, <https://ncov.vncdc.gov.vn/>
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