Listening to Young Lives at Work in Vietnam: Fifth Call

Introduction

While Vietnam was successful in containing the spread of COVID-19 during 2020, the fourth wave of the pandemic which hit in April 2021 (due primarily to the Delta variant) resulted in a marked increase in both infections and fatalities. Subsequent restrictions led to severe disruption and significant economic impact. In the third quarter of 2021, GDP declined by 6.17 per cent compared to the same period in 2020, the largest quarterly decrease since records began; the labour force (estimated at 49.2 million people) fell by 2.1 million, compared to the same period in 2020; and unemployment rose to 3.4 per cent, compared to 2.2 per cent in the first quarter of 2021.[1]

In October 2021, government strategy moved away from a 'zero-COVID' approach towards 'flexible adaptation' and living safely with the virus. This new strategy was made possible by an acceleration in the vaccination programme, improved health care systems and increased testing capacity. From mid-January 2022, the Ministry of Health reported that the entire adult population (aged 18 years and over) had received at least one vaccine dose, with 94 per cent fully vaccinated.

Despite the successful containment of COVID-19 in 2020, earlier Young Lives research showed that widening inequalities and the adverse economic and social impacts of the pandemic could derail progress towards the Sustainable Development Goals (SDGs). In particular, interrupted education had the most severe impact on those from poor and rural backgrounds, with girls and young women disproportionately affected by increased domestic work. There was also concern over potentially rising rates of anxiety and depression, as the crisis worsened.

1 Data from the General Statistical Office of Vietnam (GSO) (2021).

HEADLINES: FIFTH CALL

1. Levels of food insecurity have increased substantially compared to 2020. In the 12 months prior to the October–December 2021 survey, 29 per cent of respondents had been worried about running out of food, compared to only 14 per cent in the previous year.
2. The increase is driven primarily by an increase in severe food insecurity, most pronounced among minority ethnic groups (19 per cent of whom ran out of food at least once in the last 12 months, compared to 8 per cent in 2020), but also by an increase in mild food insecurity, even among those from wealthier households.
3. The pandemic has increased overall levels of perceived poverty, with a rise in the number of individuals who considered their household to be either struggling or poor/destitute (from 6 per cent to 9 per cent) between the pre-pandemic period and October–December 2021.
4. While the overall number of minority ethnic respondents who reported being poor or destitute has fallen, it is notable that the proportion of those who are at least struggling (24 per cent) is more than three times that of the majority ethnic group (7 per cent).
5. Young people reported a higher incidence of mental health issues, with 12 per cent of respondents experiencing symptoms consistent with depression in October–December 2021. This is double the prevalence recorded a year earlier (6 per cent). Reported symptoms of anxiety have also increased, from 5 per cent to 8 per cent.
6. A clear digital divide has impacted education; more than 1 in 5 (22 per cent) of young people enrolled in education who did not have internet access at home had dropped out by October–December 2021, compared to only 3 per cent of those with internet access.
7. Online teaching appears to be affecting the quality of education; more than half (55 per cent) of those enrolled in October–December 2021 reported that the quality of education was worse than before the start of the pandemic.
8. While employment recovered steadily until March 2021, the fourth wave (and related restrictions) led to a significant fall by the second half of 2021, with only 59 per cent of respondents having worked for at least one hour in the previous week, compared to 70 per cent before the pandemic.

This report summarises the ongoing impact of the COVID-19 pandemic (including the fourth wave of infections in 2021) on the education, employment, food security and mental health of Young Lives respondents in Vietnam, tracked since 2001 and now 19–20 and 26–27 years old. Our findings are based on a preliminary version of the data collected during the fourth and fifth calls of the Young Lives phone survey, conducted in August 2021 (Call 4), and October and December 2021 (Call 5).

Methods

The fifth call of the Young Lives phone survey took place between 4 October and 15 December 2021, following a shorter fourth survey call conducted between 2 August and 1 September 2021. A total of 2,425 young people were interviewed: 1,630 from the Younger Cohort (aged between 19 and 20 years) and 795 from the Older Cohort (aged between 26 and 27 years). This corresponds to 86 per cent of the sample located in the most recent tracking (May–July 2020) and 97 per cent of those contacted in November–December 2020 for the third phone call of 2020.[2]

In the analysis below, respondents from both age cohorts are included in the sample, unless otherwise stated. Our analysis is designed to assess how the impact of COVID-19 is affecting individuals with different socio-economic backgrounds and histories, and is informed by the previous COVID-19 survey calls, as well as longitudinal data collected since 2001 through regular in-person surveys.

Results

1. The impact of COVID-19 on health

COVID-19 infections and testing

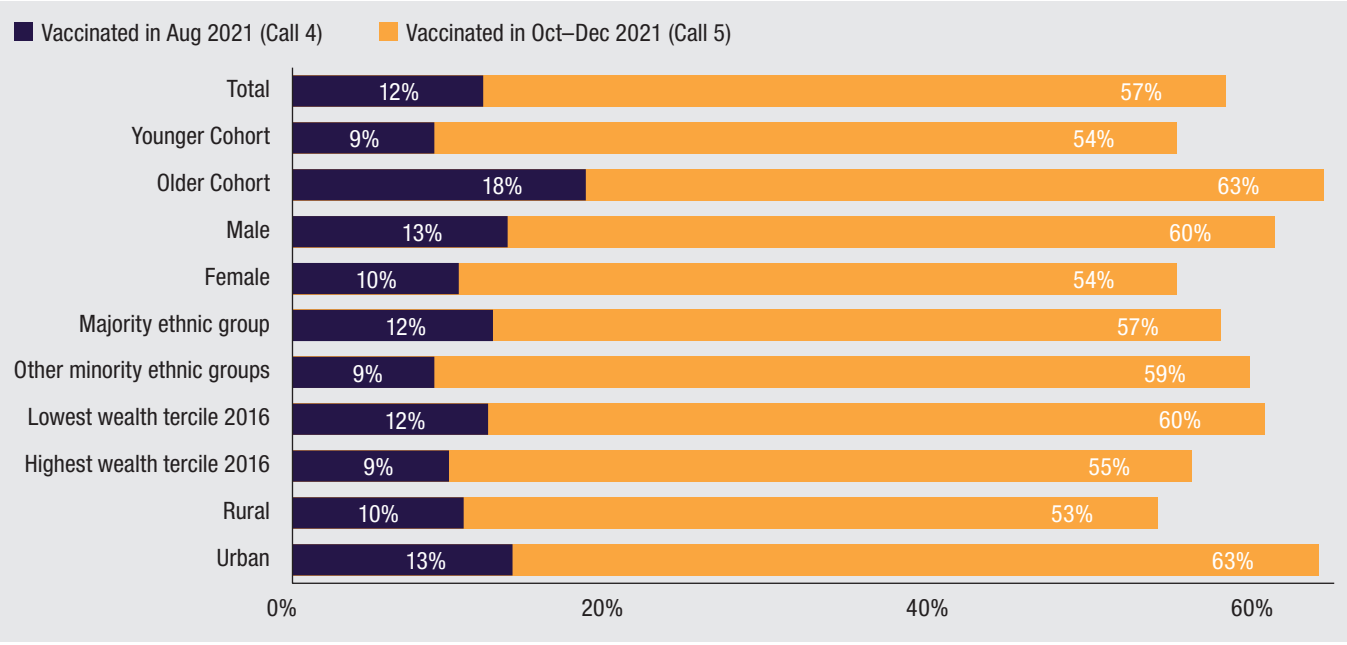
By October–December 2021, 2.6 per cent of Young Lives respondents believed that at least one member of their household had been infected since the virus outbreak, representing a small increase from the 1.5 per cent reported in August–October 2020.[3]

Overall, 94 per cent of young people said they would be able to get a COVID-19 test if needed. However, beliefs about access to testing appear to be influenced by household wealth.[4] Among young people from the lowest wealth tercile, 9 per cent reported that they were not able to get tested, compared to only 3 per cent from the highest wealth tercile. The two most common reasons given by those who did not think they could get a test were that the test centres were too far away (particularly among rural households) or that they did not know where to get tested (particularly among poorer households), while those in urban areas also cited travel restrictions.

Vaccinations

The vaccine rollout in Vietnam accelerated rapidly towards the end of 2021. By October–December 2021, 57 per cent of respondents reported that they had received at least one vaccine dose, a substantial increase from the 12 per cent reported in August 2021 (Figure 1).

Figure 1: *Vaccination rates in August 2021 (Call 4) and October–December 2021 (Call 5)*



2 The full sample attrition report for Call 5 is available at https://www.younglives.org.uk/research-project/young-lives-work

3 By comparison, the Young Lives sample in India reported a 16 percentage point increase over the same period (from 13 per cent to 29 per cent).

4 Relative household wealth is determined using the Young Lives wealth index measured during the Round 5 survey, undertaken in 2015/16.

Although the vaccine rollout started more slowly for some groups, inequalities appear to have largely disappeared by October–December 2021. The main exception is for those in rural areas (53 per cent vaccinated) where vaccination rates continued to fall below urban areas (63 per cent). Figure 1 also shows a relatively higher vaccination rate among those aged 26–27 (Older Cohort), compared to the 19–20-year-old age group (Younger Cohort), despite both groups becoming eligible in March 2021. Young men were also more likely to be vaccinated than young women, continuing the pattern observed in August 2021.

Encouragingly, our results show virtually no vaccine hesitancy, with 99 per cent of respondents reporting they 'somewhat' or 'strongly' agreed that they would get a vaccine if it were available (this figure includes those already vaccinated). Of the few who disagreed, the most commonly reported concern was over its safety and potential side effects, with a small number of females reporting that this was because they were breastfeeding.

2. The impact of COVID-19 on education

Vietnam closed educational institutions in May 2021, following the start of the fourth wave of infections. Despite the government's focus on vaccinating young people to allow in-person teaching to resume, lessons were conducted almost exclusively online throughout the latter half of 2021. In October–December 2021, 47 per cent of 19–20 year olds were enrolled in education, including those who were registered for the school year but were unable to attend due to classes being suspended.

Enrolment and dropout

Among those 19–20 year olds who were enrolled between the start of 2020 (including before the pandemic) and the Call 5 interview, 14 per cent were no longer in education by October–December 2021. Previously enrolled students in rural areas were more likely to have ended their studies (18 per cent, compared to 10 per cent of urban students). Notably, there were very few students from minority ethnic groups enrolled in education in 2020/21 (51 in total), of which almost half had left by October–December 2021.

Of the 14 per cent of students who had left education, 6 per cent stated that they did so because they had completed their course, while 8 per cent left for other reasons. Most commonly, those who left education for reasons other than completing their course reported only that they had chosen not to continue, although 1 in 5 left prematurely to look for work.

A clear digital divide is limiting young people's chances of success in education. Those most likely to leave education for reasons other than course completion were young people without a suitable device on which to study online. **More than 1 in 5 (22 per cent) of those who did not have internet access at home** (via a laptop, tablet, or computer), **had dropped out by October–December 2021**, compared to only 3 per cent of those with access to the internet (on at least one of these devices).[5]

Quality of education

With online teaching conducted throughout much of 2021, many young people believed that the quality of their education had declined. More than half (55 per cent) of students reported that the quality of education was worse than before the pandemic (approximately 40 per cent reported it was the same, and 6 per cent reported an improvement). Those in the poorest households were more likely to report that quality of education had fallen (59 per cent, compared to 50 per cent of those in the wealthiest households), as were those in rural areas (59 per cent) compared to those in urban areas (49 per cent).

3. The impact of COVID-19 on employment

Employment rates had returned to pre-pandemic levels by early 2021, only to fall again following the fourth wave and subsequent restrictions. By March 2021, 73 per cent of respondents were working (65 per cent of the 19–20-year-old cohort and 88 per cent of the 26–27-year-old group), compared to 70 per cent before the pandemic.[6] However, the employment rate fell in the second half of 2021, with only 59 per cent of young people reporting having worked for at least one hour in the previous week (49 per cent of the Younger Cohort and 79 per cent of the Older Cohort).

Gender employment gap

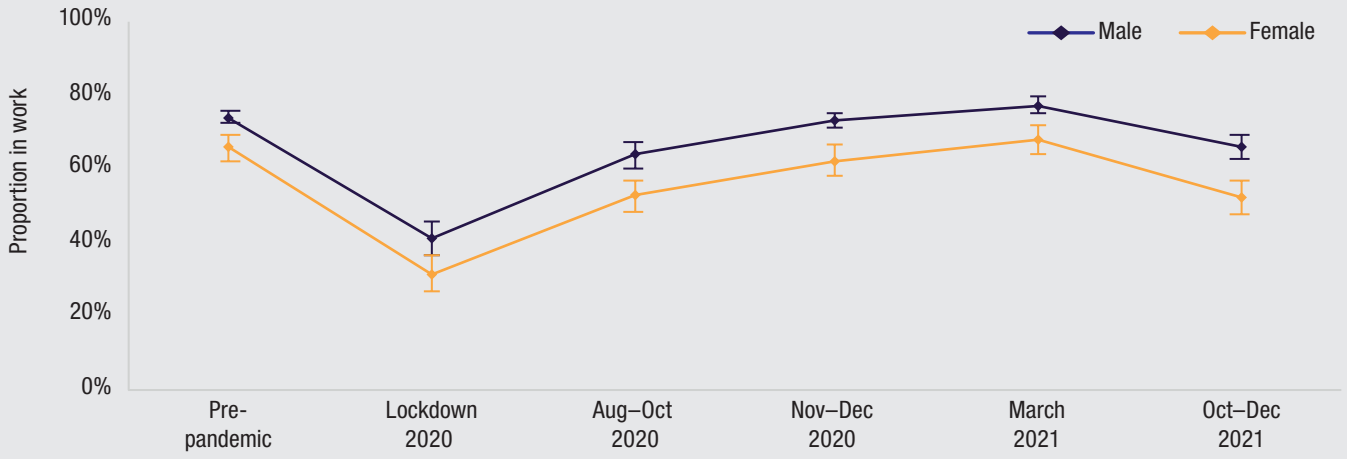
Figure 2 shows that the loss of work during the initial lockdown in 2020 had a significant impact on both young men and young women. While recovery was steady until March 2021, the proportion in work declined sharply for both groups following the fourth wave of infections.

There has been a small increase in the gender employment gap, compared to before the pandemic. An 8 percentage point gender employment gap, pre-pandemic, had increased to 13 points by October–December 2021. This reinforces previous findings on the slower return to work for young women following the lifting of restrictions in 2020. Earlier analysis of our data indicates that the unequal burden of caring responsibilities among young men and women directly contributed to the gender disparity in employment recovery during 2020 (Scott et al. 2021).

5 The growing digital divide in the Young Lives countries was the subject of a recent blog.

6 Lower employment levels in the Younger Cohort are due to a high proportion still being in full-time education.

Figure 2: *The percentage of Young Lives respondents in work since the beginning of the pandemic*



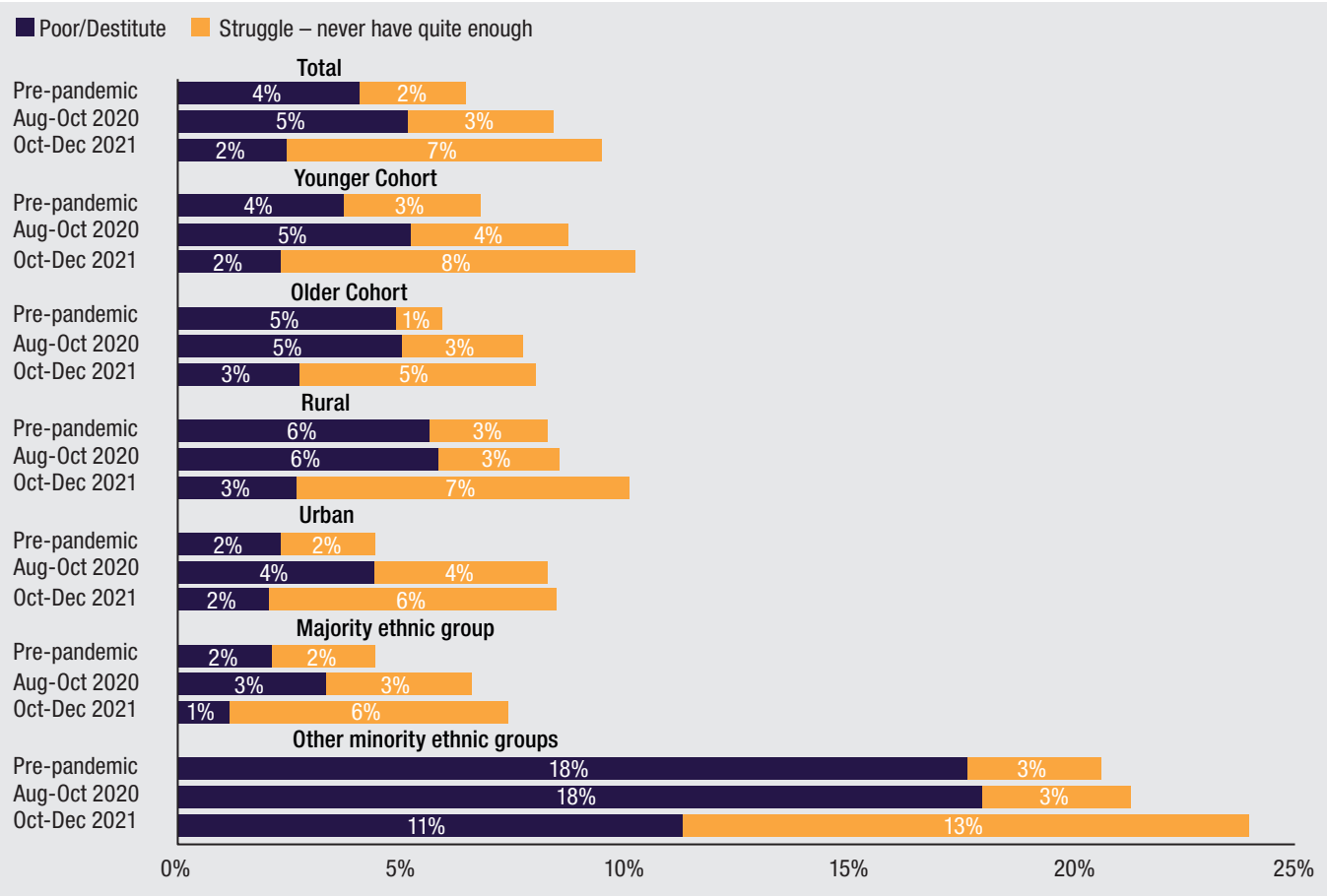
4. The impact of COVID-19 on household wealth and food security

Household wealth

In October–December 2021, we asked respondents to categorise the current wealth status of their household between poor/destitute, struggling, comfortable, or rich/very. We compared their answers to responses in August–October 2020 (as part of Call 2) and just before the pandemic (recalled during the Call 2 interview). Figure 3 shows how the proportion of respondents falling into the bottom two wealth categories has shifted over the course of the pandemic.

There has been an overall decrease in subjective wealth since the start of the pandemic, though encouragingly the number of those perceiving their household to be very poor (poor or destitute) has fallen. The number of individuals who considered their household to be either struggling or poor/destitute increased from 6 per cent to 9 per cent between the pre-pandemic period and October–December 2021.

Figure 3: *Changes in subjective household wealth since the beginning of the pandemic*



Despite this overall increase, the share of individuals who believed their household lies in the very poorest group (poor/destitute) actually declined, suggesting that some of the very poorest households were able to improve their status (at least marginally), while previously comfortable households now find themselves struggling.

Those from minority ethnic groups are significantly more likely to consider themselves struggling or poor/destitute, compared to those from the majority ethnic group (across all periods)**.** While the number of minority ethnic respondents who are poor or destitute has fallen, it is notable that the proportion of those who were at least struggling by October–December 2021 (24 per cent) is more than three times that of the majority ethnic group (7 per cent).

Food security

To analyse changes in food security over the course of the pandemic, we compare responses from November–December 2020 (Call 3) and October–December 2021 (Call 5). In both interviews, we asked whether a respondent (or those in their household) had been worried about running out of food in the past 12 months due to a lack of money, and also whether they had actually run out of food in that period. A 'yes' response to the first and second questions would be consistent with (at least) mild and severe food insecurity, respectively.[7]

Food insecurity increased substantially compared to 2020. In October–December 2021, 29 per cent of respondents had been worried about running out of food at least once in the last 12 months, an increase of 15 percentage points from 2020 (14 per cent). The percentage classed as severely food insecure (measured as actually running out of food) also rose from 4 per cent in 2020 to 5 per cent by October–December 2021.

Mild food insecurity increased substantially among the wealthiest households between 2020 and 2021, from 9 per cent to 28 per cent, despite no changes in the percentage of households reported to have actually run out of food (2.9 per cent).

Increases in severe food insecurity were most pronounced among minority ethnic group respondents, where 19 per cent ran out of food at least once in the 12 months prior to Call 5, compared to 8 per cent in 2020. Those in the poorest households also experienced an increase in severe food insecurity (from 5 per cent to 9 per cent).

5. The impact of COVID-19 on mental health

As in previous survey calls, we investigate the impact of the pandemic on young people's mental health using the Generalised Anxiety Disorder Assessment (GAD-7) to measure anxiety and the Patient Health Questionnaire (PHQ-8) to measure depression.[8] Anxiety and depression are defined here as at least mild symptoms of either condition.

An initial improvement in mental health, reported by the end of 2020, has been followed by a substantial increase in both depression and anxiety, as a consequence of the fourth wave in 2021. The prevalence of both anxiety and depression had previously declined between August–October and November–December 2020 (Call 2 and Call 3). However, by October–December 2021, the proportion of those suffering from depression (12 per cent) had doubled (from 6 per cent). Furthermore, those reporting symptoms of anxiety had also increased from 5 per cent to 8 per cent.

Although the number of COVID-19 cases had decreased substantially by Call 5 (relative to the height of the fourth wave earlier in the year), it seems reasonable to speculate that these events may still be affecting the mental health of the young people we interviewed. Previous Young Lives research has also established an association between food insecurity and poor mental health among young people in Vietnam (Porter et al. 2022).

Concluding remarks

Vietnam's experience of the COVID-19 pandemic during 2021 differed substantially from the previous year. Whereas cases during 2020 were remarkably low, the fourth wave of infections in 2021 put tremendous pressure on the country's health care system. In response, the vaccination rollout in 2021 was rapid and, encouragingly, the proportion of our sample willing to receive a vaccine (99 per cent) was the highest among the four Young Lives study countries (the corresponding figures being 71 per cent in Ethiopia, 96 per cent in India and 93 per cent in Peru).

However, the devastating fourth wave has clearly affected the lives of young people in Vietnam, threatening progress towards the Sustainable Development Goals through dramatically increasing food insecurity (especially among those from minority ethnic groups), worsening mental health, and pushing many out of the labour market. Furthermore, those in education reported a decline in the quality of teaching, while a clear digital divide has left students without suitable access to the internet at risk of leaving education early.

Young Lives is planning to return to the field for the next regular round of data collection (Round 6) in 2023. This survey round will assess the continuing effect of the pandemic on young people's lives three years after the coronavirus outbreak.

7 We used comparable questions from the Food Insecurity Experience Scale (FIES) used in Call 3 of the phone survey (Ballard, Kepple, and Cafiero 2013) and the Household Food Insecurity Access Scale (HFIAS) employed in Call 5 (Coates, Swindale, and Bilinsky 2007). Under the definition used in the HFIAS, worrying about having sufficient food to eat is consistent with at least mild food insecurity, whereas running out of food is consistent with severe food insecurity.

8 The GAD-7 and PHQ-8 consist of seven and eight statements, respectively, recording if the respondents experienced any of the anxiety and depression symptoms listed and how often. To calculate the GAD-7 and PHQ-8 scores, values of 0, 1, 2, and 3 are assigned to the frequency of symptoms reported ('not at all', 'several days', 'more than half the days', and 'nearly every day') and summed. Mild anxiety or depression is defined using a 5-point threshold on either scale (Spitzer et al. 2006; Kroenke et al. 2009). The scales were adapted for use during a phone survey: see Porter et al. (2021) for details.

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