



Health and health care for older people in Vietnam

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Abstract

Vietnam has been undergoing a rapid demographic transition characterized by an increase in the number of older people. The number of people aged 60 years and over in Vietnam increased from 4 million (accounting for 6.9% of total population) in 1979 to 10.35 million (accounting for 11.3% of total population) in 2015 [1]. It is projected that, by 2038, the amount of older population would account for 20% of the entire Vietnamese population [2]. The fast aging population process is mostly due to the declines in fertility rates, mortality rates, and increase in life expectancies of the population [3]. Older people in Vietnam have been facing a heavy burden of non-communicable diseases (NCDs), accounting for 87 - 89% of lost DALYs and 86%-88% of deaths depending on the age group [4-7]. Cardiovascular diseases (mainly stroke and ischemic heart disease), cancers (mainly lung, tracheal, liver, stomach, colon, with burden rising with age) and chronic obstructive pulmonary diseases (COPD) are the first, the second and the third leading causes of mortality and mortality among the older people, respectively [8]. Joint pain, dizziness and headache are the most common symptoms reported by older persons, followed by cough, breathing difficulties and chest pain. Symptoms and disease most commonly reported by older persons included hypertension (30%), musculoskeletal disorders (10%) and respiratory disease (7.6%) [8]. Health care for older people has been being regarded as a priority in Vietnam.

Introduction

Even though significant progress has been made, Vietnam's health care system still faces variety of

Challenges as reference to health look after older people. While suffering a heavy burden of NCDs, the capacity of the health system is still inadequate to serve this health needs and the access to health care services for these conditions among older people in Vietnam has been still limited [7]. More than 26% of older people in Vietnam did not have health insurance and more than 51% of them could afford health care costs and, as a result, refrain from seeking treatment [4]. Those who did seek treatment often suffer from catastrophic costs and impoverishment problems due to out-of-pocket health expenditure, with households with older people [8]. Older persons in Vietnam would have a high need for future cares but these sorts of services are still lacking [8]. Given the above-mentioned challenges, more comprehensive public-health action on health and health look after older people is urgently needed in Vietnam. Improving capacity of primary health care system for NCDs prevention and control would be a top priority in the coming time in Vietnam. More health care services for older people, including social, clinical supports, rehabilitation, health promotion, etc. should be available at primary care level. These services should be covered by insurance scheme and universal insurance should be achieved among older people.

Keywords

Health care, Older people, Demographic, Vietnamese population



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