Provider of antenatal care

- **Medical doctor**: 95%
- **Nurse/Midwife**: 2%
- **Village health worker**: 0.8%
- **No antenatal care**: 2.2%

Key Messages

- Ninety-seven percent of mothers age 15-49 years receive at least one antenatal care (ANC) from skilled health personnel.

- Nearly all antenatal care services are provided by medical doctors (95 percent) while midwives and nurses keep a minor role in antenatal care service provision (2 percent).

- The proportion of women who do not have antenatal care is accounted for 2.2 percent.

Percentage of women receiving at least one ANC provided by skilled health personnel

- **Pre-primary or non-education**: 72.2%
- **Kinh and Hoa**: 99.4%
- **Mong**: 60.5%

- The rate of at least one ANC provided by skilled birth personnel is low among Mong women (60.5 percent) and those who have pre-primary or no-education (72.2 percent) compared to Kinh/Hoa women (99.4 percent).
Key Messages

- The percentage of women receiving at least 4 antenatal care visits is 88.2. This rate is lower among those who have pre-primary or none education (29 percent), belong to Mong ethnic group (10.6 percent) and from the poorest quintile (62.3 percent).

- Seventy-four percent mothers report having blood pressure measured, urine and blood sample tested in antenatal care visits. This rate is much lower among respondents who belong to Mong ethnicity (13.8 percent), have pre-primary or none education (18.9 percent), reside in the Central Highland region (52.5 percent), belong to the poorest quintile (49.6 percent) and age under 20 years (52.3 percent).
Key Messages

- Ninety-six percent women age 15-49 years give birth at a health facility (88.5 percent at public and 7.8 percent at private facilities).
- Only 3.6 percent of women give birth at home.
- Ninety-six percent of live births are delivered by a skilled birth attendant (92.5 percent by medical doctors and 3.6 percent by midwives or nurses). The proportion of births attended by a skill birth attendant is less among women who have pre-primary or no education (50.8 percent), do not attend ANC visits (33.8 percent) and belong to the Mong ethnicity, (37.7 percent).
Key Messages

- C-Section accounted for 34.4 percent of maternal deliveries (20.5 percent decided before onset of labour pains and 13.9 percent after onset of labour pains), increased 6.9 percent points compared to that of the MICS 2014. The normal C-Section rate is 10-15 percent recommended by WHO.

- The proportion of C-Section deliveries is higher in urban areas (43.2 percent), among age 35-49 years (40.2 percent), have vocational school degree (50.1 percent), university/college or higher degree (42.1 percent), belong to the richest wealth index quintile (44.2 percent), and give birth at a private facility (48.6 percent).

- The higher rate of C-section raises a concern of the overuse of this technology that could harm health and well-beings of both mothers and babies.

- Among ethnic groups, the proportion of C-Section among the Kinh/Hoa women is the highest (38.3 percent) Surprisingly, the proportion of C-Section among the Mong women is very low (1.9 percent) underlying the underuse of this important service in life threatening situations.
Key Messages

- Nationally, 99.0 percent of women who gave birth in a health facility stay there for 12 hours or more after giving birth.
- Eighty-two percent of women stay in a health facility for 3 days or more after giving birth.
- Eighty-nine percent of mothers have postnatal care visit for newborns. However, this rate is very low among mothers who delivered at home (11.6 percent) and who have pre-primary or none education (46 percent).
Key Messages

- Overall, 88.1 percent of mothers receive postnatal health check following birth at a medical facility or at home.

- This rate is very low among Mong mothers (29.1 percent) and have pre-primary or no education (46.5 percent).

- This rate is lowest in the Central Highlands (73.8 percent) and highest in the South East region (96.4 percent). Difference is also observed between urban (93.8 percent) and rural areas (85.5 percent).

- Mothers who delivered via C-section (93.2 percent) are more likely to receive postnatal health checks more than those having vaginal delivery (85.4 percent).
### Key Messages

- Seventy-three percent of women age 15-49 years, currently married or in union report using any contraceptive method of which 59.8 percent use modern methods and 13 percent traditional methods.
- Of modern contraceptive methods, IUD remains a dominant method (23.7 percent), then pills (16 percent) and male condoms (15.3 percent) while injectables, implants and female condoms are accounted for a small proportion.
- The use of modern contraceptive methods is lower among women who reside in the South East region (53.6 percent) and belong to Khmer ethnic group (52.4 percent).
- The use of traditional contraceptive methods is higher among those who reside in the Central Highland (17.5 percent) and South East regions (16.2 percent) and age 40-49 years (over 16 percent).
Viet Nam SDGCW 2020-2021

Contraception

Percentage of contraceptive use among unmarried/not in union sexually active women

**Any Contraception Methods**

- Traditional Method
- Modern Method
- No method

**Key Messages**

• Among sexually active women who were currently not married or not in union age 15-49 years, 48.8 percent report using any method of contraception of which 45.0 percent modern methods and 3.8 percent traditional methods.
Unmet need for family planning (for currently married/in union women)

**Key Messages**

- The total unmet need for family planning for women who are currently married or in union is 10.1 percent (4.6 percent for spacing births and 5.6 percent for limiting births).
- For sexually active women who are currently unmarried or not in union, the total unmet need for family planning was much higher, 40.7 percent (20.4 percent for spacing births and 20.3 percent for limiting births).

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>For spacing births</td>
<td>4.6</td>
<td>5.6</td>
<td>10.1</td>
<td>27.9</td>
<td>33.4</td>
<td>29.3</td>
<td>13.4</td>
</tr>
<tr>
<td>For limiting births</td>
<td>5.5</td>
<td>13.4</td>
<td>29.3</td>
<td>16.3</td>
<td>14.4</td>
<td>12.1</td>
<td>7.1</td>
</tr>
<tr>
<td>Total</td>
<td>10.1</td>
<td>47.2</td>
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<td>47.2</td>
<td>47.2</td>
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</table>

Unmet need for family planning (for currently sexually active unmarried/not in union women)

<table>
<thead>
<tr>
<th>National</th>
<th>Urban</th>
<th>Rural</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>For spacing births</td>
<td>20.4</td>
<td>25.7</td>
<td>14.8</td>
</tr>
<tr>
<td>For limiting births</td>
<td>20.3</td>
<td>22.6</td>
<td>17.9</td>
</tr>
<tr>
<td>Total</td>
<td>40.7</td>
<td>48.3</td>
<td>32.7</td>
</tr>
</tbody>
</table>

- The demand for family planning satisfied with modern methods for women who are married/in a union is accounted for 72.2 percent, much higher than that of those who are sexually active but unmarried/not in a union, 50.3 percent.
The age specific fertility rate (ASFR) peaks among women aged 25-29, with an average of 135 live births for every 1,000 women, followed by women aged 20-24, 125 live births per 1,000 women, and women aged 30-34 years, 90 live births per 1,000 women.

Nationally, the adolescent birth rate is 42 live births per 1,000 women. This rate in the Kinh/Hoa ethnic group is 28 live births per 1,000 women while it reaches 210 live births per 1,000 women in Mong ethnic group, i.e. 7.5 times higher than that of the Kinh per Hoa group.

The adolescent birth rate is higher among those living in the Northern Midland and Mountain region (115 live births per 1,000 women) and among the poorest women (106 live births per 1,000 women).

Nationally, the total fertility rate (TFR) is estimated at 2.2 children per woman.
The abortion rates indicate:

- Among pregnant women, 81.7 percent report a live birth and 18.3 percent report other pregnancy outcomes, including stillbirth (0.4 percent), induced abortion (5.5 percent), miscarriage (4.2 percent), and missed abortion (8.2 percent).

- The total abortion rate, an estimate of the average number of induced abortions a woman will have by the end of her reproductive life, is estimated at 0.15, the general abortion rate is estimated at 4.7 per 1,000 women, and the abortion ratio at 68 per 1,000 live births.

- The abortion ratio is highest in the Ha Noi, 196.9 per 1,000 live births. In the Red River Delta region, it is 127.5 per 1,000 live births.

- The abortion ratio is higher among women having primary education (94.5 per 1,000 live births), belonging to Kinh/Hoa ethnicity (74.0 per 1,000 live births), residing in rural areas (75.8 per 1,000 live births) and belonging to the richest quintile (130.5 per 1,000 live births).
Key Messages

- Unwanted pregnancies are accounted for more than half of the reported latest abortions, 53.6 percent.
- Nine percent of abortion are related to contraceptive failure.
- Concerns about the health status of the mother or fetus contribute to 20.1 percent and 19.8 percent of the abortion cases.
- Fetal sex preference is accounted for 1.6 percent of the abortion cases.

Key Messages

- A majority of abortions are performed by trained health providers (94.1 percent), including medical doctors or OB-GYN specialists (90.6 percent), assistant doctors and midwives (2.8 percent). However, 6.5 percent of induced abortions are still performed by unqualified providers such as village health workers, population collaborators, traditional birth attendants, traditional healers or other untrained individuals.
- Most abortions are performed in healthcare facilities (95.4 percent), including 54.4 percent in public, 40.3 percent in private and 0.7 percent in NGO facilities, compared to 5.6 percent performed outside of healthcare facilities.
**Key Messages**

- Overall, 73.5 percent of women age 30–49 years have ever heard or read about cervical cancer (85.0 percent in urban and 66.7 percent in rural areas).

- Twenty-eight percent are screened for cervical cancer: 13.6 percent have one cervical cancer screening test and 14.6 percent have two or more. This rate is 10.1 percent among the poorest women compared to 46.4 percent in the richest women.

- Sixty-two percent of women and adolescent age 15-29 years have ever heard, read or talked about human papillomavirus (HPV) vaccination (73.1 percent in urban and 56 percent in rural areas).

- The HPV vaccination rate is 12.0 percent (15.6 percent in urban and 9.2 percent in rural areas). This rate among the poorest women is only 2.1 percent compared to 19.8 percent among the richest women.
Key Messages

- The mean age at the first and the last HPV vaccination among women age 15–29 years was 19.2 and 20.0 years respectively, far later than that recommended by the WHO.
- The average interval between the first and the last injection was 1.1 years.
Key Messages

- Only 43.2 percent of women age 15-49 years have a comprehensive understanding of HIV prevention. This rate is lower among women age 15-24 years (39.8 percent).

- Men have better knowledge about HIV than women. The percentage of men age 15-49 years who have a comprehensive understanding of HIV prevention is 54.1 percent. Among men age 15-24 years, this rate is 48.7 percent.

- Up to 36.1 percent of women age 15-49 years have discriminatory attitudes towards people living with HIV, compared with 36.6 percent of women age 15-24 years. Men have higher discriminatory attitudes than women, especially among young men, at 39.7 percent.

- The proportion of people who have tested for HIV and know their test results in the past 12 months is very low for both men and women (5.5 percent for women and 9.3 percent for men). The rate is even lower among young women and men.

- Only 10.2 percent of women in their most recent pregnancy were offered an HIV test, tested, received test results, and received post-test HIV health information or counseling. This rate is also much lower among women age 15-24 years (7.7 percent).
The proportion of men who have been tested for HIV and received their results in the past 12 months is consistently higher than that of women in all age groups in which the largest gap is observed in the age group of 25-29 (5.5 percentage points).

The proportion of men who have tested for HIV and received their results in the last 12 months is the highest in the Red River Delta (16.9 percent), 18.8 percent in Hanoi alone, and the lowest in the North Central and Central Coastal (3.1 percent). This rate is lower among women in all regions.

The proportion of women tested for HIV during the ANC also varies significantly between regions.
Sexual behaviour by key characteristics

Sexually Active

Young people who had sex before age 15

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent boys &amp; young men 15-24 years</td>
<td>0.2</td>
</tr>
<tr>
<td>Adolescent girls &amp; young women 15-24 years</td>
<td>0.9</td>
</tr>
</tbody>
</table>

Multiple Partners

Sex before age 15

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent boys &amp; young men 15-24 years</td>
<td>0.2</td>
</tr>
<tr>
<td>Adolescent girls &amp; young women 15-24 years</td>
<td>0.9</td>
</tr>
</tbody>
</table>

Sex with man 10 years or older

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent girls &amp; young women 15-19 years who reported sex with man 10 or more years older</td>
<td>8.9</td>
</tr>
</tbody>
</table>

Key Messages

- About 70 percent of women age 15-49 years have had sex in the past 12 months while the rate among men is about 69 percent.
- The percentage of young women age 15-24 years who have had sex in the past 12 months is about 28 percent compared to 22 percent among young men.
- The percentage of people who had sex with more than one partner in the past 12 months is consistently higher for men than for women. This rate is 0.4 percentage points lower among young men (age 15-24 years) than that of men age 15-49 years, yet no difference is observed for women.
- The percentage of young men who have sex before the age of 15 is 0.2 percent. This rate is higher among young women, about 0.9 percent.
- 8.9 percent of women aged 15-19 have sex with a partner who was 10 years or older than themselves in the past 12 months.
### Key Messages

- A majority of women make their own informed decision on sexual intercourse (84.8 percent) and the use of contraception (70.7 percent).
- Autonomy decision on sexual intercourse is lower among women who are Mong ethnic (42.6 percent) and have pre-primary or no education (61.4 percent).
- Autonomy decision on contraceptive use is lower among adolescents age 15-19 years (25.5 percent) and Mong women (61.2 percent).

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The Survey measuring Sustainable Development Goal indicators on Children and Women (SDGCW) Viet Nam was carried out in 2020-2021 by the General Statistics Office as part of the global MICS programme of UNICEF. Technical and financial support was provided by UNICEF and UNFPA.

The objective of this snapshot is to disseminate selected findings from the Viet Nam SDGCW 2020-2021 related to Antenatal care, Delivery, C-Section, Postnatal care, Contraception, Unmet need, Childbearing, Abortion, Cervical Cancer, HIV & Sexual Behaviour. Data from this snapshot can be found in tables TM.1.1, TM.2.1, TM.3.1, TM.3.2, TM.3.3, TM.3.4, TM.4.1, TM.4.2, TM.4.3, TM.6.1, TM.6.2, TM.8.2, TM.8.7, TM.50, TM.52, TM.55, TM.57, TM.58, TM.59, TM.61, TM.62, TM.7.1, TM.10.2M, TM.10.2W, TM.11.1M, TM.11.1W, TM.11.3M, TM.11.3W, TM.11.4M, TM.11.4W, TM.11.5, TM.11.6M and TM.11.6W in the Survey Findings Report. Further statistical snapshots and the Survey Findings Report for this and other surveys are available on mics.unicef.org/surveys.