

# **SEX RATIOS AT BIRTH IN VIET NAM AND SOME LOCALITIES: CURRENT SITUATION AND COMMENTS**

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## Introduction

Sex ratios and sex ratios at birth reflect the structure of a population by sex. With different economic, social and cultural contexts, these ratios may vary among countries or areas within a country. Although at present, gender imbalance leading to a female deficit in Viet Nam is not as serious as in some other countries, recent reported data on sex ratios at birth in certain provinces requires comprehensive studies on reasons and impacts of the problems for future appropriate policy response. This report presents major characteristics of population structure by sex of the country and some selected provinces over in recent years as to provide preliminary comments.

## I. Current situation

### 1.1. Sex ratios of the population

Between 1999 and 2004, the sex ratios (number of males per 100 females) and the percentages of females of the total population remain almost unchanged (96.6 - 96.7 and 50.8% - 50.9%), This indicates a gender stability and balance in Viet Nam's population (Table 1), as it is often for a population, the percentage of females is often slightly higher than that of males

**Table 1. Sex ratios of Viet Nam and  
Percent of females of the total population, 2000-2005**

	Sex ratios	Percent of females of the total population
1999	96.7	50.8
2000	96.7	50.8
2001	96.7	50.8
2002	96.7	50.8
2003	96.6	50.9
2004	96.6	50.9

Source: General Statistics Office (GSO), *Population change and family planning surveys 2000-2004. Statistical yearbook 2000-2003. 1999 Population and housing census, Report on socio-economic development of the first 9 months of 2005.*

By age, the sex ratios are highest at youngest age groups like 0-4, 5-9, and 10-14, but increase by 5-7 points at age groups of 15-19 and 20-24 from 1999 to 2004. The figures gradually decrease at older ages. Generally, sex ratios of each age group show a small fluctuation and thus reflect a trend of gender balance (Table 2).

**Table 2. Sex ratios by age group, 2000-2004**

Age group	1999	2001	2002	2003	2004
0-4	108.6	106.1	106.8	107.7	107.1
5-9	107.4	105.8	105.7	106.4	107.2
10-14	107.2	104.5	106.1	105.7	107.7
15-19	100.7	102.7	103.6	105.7	105.0
20-24	94.3	94.9	97.3	98.5	101.7
25-29	99.3	97.3	97.6	97.6	97.8
30-34	99.0	98.8	99.4	99.2	97.8
35-39	94.7	96.8	97.8	97.1	95.9
40-44	90.7	91.6	92.1	92.4	93.3
45-49	89.7	92.7	93.7	93.7	94.6
50-54	82.4	81.3	82.3	83.2	82.7
55-59	78.5	78.6	81.4	86.3	83.4
60-64	78.3	77.6	77.6	76.4	76.4
65+	68.3	67.0	66.6	67.2	66.7

Source: GSO, *Population change and family planning surveys 2001-2004. 1999 Population and housing census,*

## 1.2. Sex ratio at birth

In Viet Nam, sex ratios at birth (number of boys per 100 girls) are available from decennial census. So far, Viet Nam has conducted 3 population censuses in 1979, 1989, and 1999. But only the last two censuses provide sex ratios at birth. According to the 1999 Population and Housing Census, the sex ratio at birth was 107 males per 100 females, slightly higher than that of 1989 (105), however, this ratio is almost close to the international standard level. But regionally, the sex ratio at birth is highest in the Mekong River Delta (113), then followed by Southeast (109) and Northwest (108) (Table 3).

**Table 3. Sex ratios at birth by region, 1999**

	Sex ratios at birth		Sex ratios at birth
<b>Viet Nam</b>	<b>107</b>		
Red River Delta	107	South Central Coast	103
Northeast	103	Highlands	104
Northwest	108	Southeast	109
North Central Coast	107	Mekong Rive Delta	113

Source: GSO. 1999 population and housing census.

Out of 61 provinces, six have very high sex ratio at birth (120-128) and 28 have high ratios (110-119). However, 18 provinces/cities have low ratios (85-103). 14 provinces have standard level of sex ratio at birth (Table 4). 9 out of 12 provinces in the Mekong River Delta have ratios ranging from 110 to 128.

**Table 4. Number of provinces/cities by level of sex ratio at birth, 1999**

Number of provinces/cities (n=61)	level of sex ratio at birth
6	120 - 128
23	110 - 119
14	103 - 109
18	85 - 103

Source: GSO. 1999 population and housing census.

Up to now, there has no comprehensive research on sex ratio at birth in Viet Nam to provide an overall review of the issue of the country. Currently, at national level gender imbalance has not occurred. Reported data from provinces with high sex ratios at birth in 1999 census reveal an increasing trend in sex ratio at birth, or in other words, a gender imbalance has started with excess much higher number of boys per 100 girls

**Table 5. Sex ratios at birth in 1999 and  
Reported sex ratios at birth of selected provinces, 2000-2004**

<b>Province</b>	<b>1999 population census</b>	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>
Lai Chau	116.0	-	-	-	-	116.7
Quang Ninh	118.0	-	-	121.0	128.0	125.0
Hai Duong	116.0	-	117.9	119.5	119.0	130.4
Thai Binh	120.0	-	-	-	-	113.5
Thanh Hoa	116.0	-	146.9	131.9	131.5	140.3
Ha Tinh	115.0	-	122.4	123.9	122.1	122.7
Da Nang	115.0	-	-	-	-	113.3
Kon Tum	124.0	-	183.8	114.0	129.6	134.5
Ninh Thuan	119.0	-	108.0	106.0	110.0	103.0
Binh Phuoc	119.0	105.6	105.8	109.4	105.2	107.5
Soc Trang	124.0	105.0	-	107.8	108.2	112.1
An Giang	128.0	-	-	151.1	142.2	124.8

*Source: GSO. 1999 population and housing census. Reports from selected provinces, 2005.*

Starting 2005 in Viet Nam, all children under six receive free-of-charge health care in public health facilities (1994 Law on Protection, Care and Education of Children). Each under-six child is provided with a health care card based on a computerized database which is regularly updated to generate precise and valid data to ensure children's rights to health care, especially for kids who are just few months. However, these databases have been just set up in some provinces. Table 6 present sex ratios at birth in certain districts of three provinces in 1999 and 2004, which are generated from these databases.

**Table 6. Sex ratios at birth in certain districts of three provinces,  
1999-2004**

<b>Province</b>	<b>District</b>	<b>Sex ratio at birth 1999</b>	<b>Births 2004</b>	<b>Female births 2004</b>	<b>Sex ratio at birth 2004</b>
Da Nang		115.00	11516	5371	114.00
	Hai Chau		2722	1215	124.03
Binh Duong		108.00	11547	5525	109.00
	Thu Dau Mot		1966	922	113.23
Ca Mau		112.00	16608	7671	103.47
	Ca Mau city		2661	1263	110.69

*Source: Under-six child database, Report from PCPFCs (Oct. 2005).*

### 1.3. Case study in Ha Tay province

Ha Tay is a province next to Hanoi Capital and in the Red River Delta, Its area is nearly 2.200 square km (ranging the 47th of the 64 provinces). The population in 2004 is 2.5 million, accounting for 3.6 percent of the total population (ranking the fifth of the 64 provinces) after HCM city, Hanoi, Thanh Hoa, and Nghe An. In the 1999 Population census, the sex ratio at birth in Ha Tay was 96, this placed Ha Tay among the 18 provinces with low sex ratios at birth.

However, sex ratios at birth of the province from 2000-2004 in Table 7 show a change with increases in some districts. Comparing to 1999, the sex ratio of Ha Tay is much higher in 2004. The ratios in most of districts increased, except Ba Vi and Thanh Oai that show a decrease in sex ratio at birth.

**Table 7: Sex ratios at birth of Ha Tay province and districts, 2002-2004**

	2002	2003	2004
<b>Ha Tay province</b>	<b>127.18</b>	<b>119.39</b>	<b>128.92</b>
Ha Dong	82.02	116.49	134.31
Son Tay	145.67	97.60	146.97
Ba Vi	111.39	106.75	90.73
Phuc Tho	138.65	140.29	150.27
Dan Phuong	110.51	130.77	124.14
Thach That	116.23	127.33	137.05
Hoai Duc	127.11	117.91	118.07
Quoc Oai	107.78	107.59	111.74
Chuong My	153.93	121.46	140.17
Thanh Oai	116.06	111.69	103.19
Thuong Tin	146.79	135.60	145.38
Ung Hoa	111.84	113.37	123.57
Phu Xuyen	158.58	97.50	175.60
My Duc	152.59	156.72	158.55

*Source: Report from Ha Tay PCPFC, 2002-2004.*

In an attempt to obtain reliable data on sex ratio at birth of all districts, the study team has collected data from the 2004 Birth Record Books from all commune health stations in the province. Data collected by this way differ with data from annual reports. Both types of data have certain errors. The data are proceeding by using SPSS. The results are shown in Table 8.

Table 8. Sex ratios at birth of districts in Ha Tay, 2004

	Births 2004	Female births 2004	Sex ratio at birth	Sex ratio at birth by first child	Sex ratio at birth by second child	Sex ratio at birth by third child
<b>Ha Tay</b>	<b>39292</b>	<b>18877</b>	<b>108.62</b>	<b>108.58</b>	<b>108.21</b>	<b>103.16</b>
Ha Dong	2111	960	119.79	122.04	113.14	139.33
Son Tay	1721	849	102.60	98.51	111.05	100.00
Ba Vi	3741	1789	108.94	113.62	105.97	103.63
Phuc Tho	2510	1198	109.35	104.14	115.99	108.15
Dan Phuong	2416	1163	107.74	101.42	103.98	143.06
Thach That	3036	1426	112.90	112.86	112.82	113.17
Hoai Duc	3403	1658	105.13	107.44	94.53	124.54
Quoc Oai	2513	1298	93.53	92.81	95.85	91.02
Chuong My	3982	1907	108.81	107.39	116.64	95.85
Thanh Oai	2673	1347	98.44	97.51	96.53	109.70
Thuong Tin	3514	1716	104.79	112.43	93.45	114.40
Ung Hoa	2538	1198	111.85	115.13	116.78	96.46
Phu Xuyen	2750	1280	114.84	117.63	114.72	104.22
My Duc	2384	1088	119.03	117.21	123.52	113.94

Source: Ha Tay PCPFC. 2005.

## 2. Discussion

Available data sources at national as well as lower level are not reliable enough to provide a concise description of sex ratio at birth in Viet Nam.

However, current data does show trends of sex ratios at birth in certain provinces. In 2004, Sex ratios at birth remain very high in some provinces which were already very high in 1999 such as An Giang (124.8 and 128.0), Kon Tum (134.5 and 124.0) and Thai Binh (113.5 and 120.0). Other provinces with low ratios in 1999 have got higher ratios like Ha Toy to 128.9 in 2004 from 96/0 in 1999 (according to annual report) or to 108.6 (according to data from Birth Record Books).

In sites where data from under-six child databases or from Birth Record Books may be reliable, it can be shown that sex ratios at birth in urban areas or provincial centers are higher than the provincial level: 119.79 (Ha Dong town) vs. 108.6 (Ha Toy province); 124.03 (Hai Chau district) vs. 114.0 (Da Nang City); 113.23 (Thu Dau Mot town) vs. 109.0 (Ca Mau province); and 110.69 (Ca Mau city) vs. 103.47 (Ca Mau province).

Sex ratios at birth by birth order from Ha Tay, remain normal at provincial level, but vary in Ha Dong town and Dan Phuong district. Viet Nam population strategy promotes one or two-child couples. The sex ratio of the third births and over in Ha Dong town is 139.33, that in Dan Phuong is 143.06 and in Hoai Duc, 124.54. These ratios are much higher than those of the first and second births.

It is expected that the trend is likely to continue if no appropriate interventions based on comprehensive analysis of causes and related factors.

2.2. As Viet Nam is an Asian traditional society, the view on "respect men and despise women" and a backward agriculture have been rooted in people's mind and remain strong now. This is one of the most reasons creating a psychological pressure on women having only daughters.

Women having daughters are pressured by their parent-in-law, especially when they are wives of first sons or the only daughter-in-law. Many persons, before passing away, still feel regret for having no grand-sons to continue the family line. Many husband themselves also support their parents to force their wives to have sons at any rate. In addition, social attitudes also influence and contribute to this phenomenon. People sometimes disregard those couples with only daughters. On the other hand, some women still think that when they marry, they have to follow their husbands' family rules, they must have sons as others. They do cause pressure for themselves.

Because of the view "respect men and despise women", people often think that sons have more responsibilities in supporting parents when they are old and do all worships after their deaths.

2.3. In order to have sons, there are many documents under all forms (printed and electronic) that provide information on "having desired son and daughter". At the same time modern technology such as ultrasound to know sex of the fetus has been used and some women choose abortions if they know that would be a girl baby. Now in Viet Nam, particularly in big cities, ultrasound services for reproductive health care and antenatal care and abortion services are available and convenient.

2.4. Organizations including PCPFCs, health offices or statistics departments do not pay due attention to the issue and understand the trend in their localities, thus no appropriate responses. In the 1999 population census, 29 provinces/cities have high or very high sex ratios at birth. However, consequences of the problem are not well recognized to conduct in-depth studies and find out reasons and related factors, and solutions for improvement.

In the past few years, the lack of appropriate policy responses to balance the sex ratios at birth contributes to the above-mentioned situation.

### **3. Solutions**

3.1. At present, Viet Nam has experienced a serious gender imbalance. But the prevention of a future female deficit caused by son-preference requires specific policy solutions. These should include IEC activities, improvement of women's status and roles, and social security scheme for the elderly. Also the management information system on population, family and child issues and the under-six child database should be finalized to generate timely and reliable data on this issue.

3.2. There should be measures to reduce psychological pressure for women, and couples having daughters. Education of women and people as whole should be enhanced to improve women's status, gender equality should be promoted to eliminate the thinking "respect men despise women."

3.3. Together with the involvement of mass media, campaigns on ideological and cultural issues should be done to influence people's mind, especially aiming at older and young persons.

Research and trial practice of incentives provided for couples who follow the population policy and gender quality. Social policies and security scheme for older persons, with special

focus to those having only daughters should be developed and implemented. These should be conducted in accordance with current social, economic and cultural conditions.

3.4. Women and girls should be provided with more access to education, employment and care programs.

### **References**

[1]. *VCPFC, Information Centre. Data on population, family and children, 2005.*

[2]. *GSO. 1999 Population and housing census.*