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Expand Maternity Protection for Informal Workers in Vietnam: Discussion and Recommendations

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Abstract

Maternity benefits play an important role in protecting women against the risks of loss of income and health from pregnancy and childbirth. According to ILO Maternity Protection Convention No. 183 (C 183), maternity protection provisions should apply to all women, including those working in informal conditions. In Vietnam today, maternity benefits are considered quite generous in terms of leave time and benefit rate. However, statutory and actual maternity coverage is very limited; Leave and maternity benefits vary significantly between groups of women, depending on their work status. Women not covered by mandatory social insurance, including informal workers, do not have access to this basic and important labor right. In the

context of the existence of a large-scale informal economic sector and a high rate of informal labor in Vietnam, this is a significant challenge to the ability to protect workers in the social insurance system (including female workers). In this article, the authors used document research methods, statistical analysis methods, comparison and contrast; Based on international standards on maternity protection and practical international experience on expanding maternity protection in the informal economy and informal workers, the authors have proposed some recommended policies to expand maternity protection for informal workers in Vietnam, gradually realizing the maternity protection rights of all female workers, regardless of their employment status.

Keywords: Expand, Maternity Protection, Informal Workers, Informal Sector, Vietnam

1. Introduction

Pregnancy and childbirth are particularly vulnerable times for female workers and their families. Ensuring work and income for female workers during and after pregnancy is necessary to help women have equal opportunities and equal treatment in the workplace, helping to promote gender equality and empower women. The International Labor Organization (ILO) soon recognized the importance of maternity protection and has promoted maternity protection as a basic labor standard since the Organization's founding in 1919. Convention No. 103 on Maternity Protection (amended) and Recommendation No. 95 adopted in 1952; and continued with Maternity Protection Convention No. 183 adopted in 2000. These Conventions and recommendations are aimed at all female workers, expanding the scope of rights and benefits for working mothers to minimize health risks for themselves and their children. However, the application of international standards at the national level remains largely flawed in both legal and practical terms. A large number of women, especially in the informal economy, remain completely or partially unprotected during pregnancy and breastfeeding. There are many challenges for female workers in the informal economy related to maternity benefits such as: Female workers in the informal sector are often exposed to work and occupations performed in unsafe and unhygienic conditions, which are especially dangerous for pregnant and lactating women and their children; not protected by law and excluded from regular social security programs; high levels of vulnerability due to loss of income and maternity-related costs. Maternity can represent major health and economic risks for vulnerable populations in the informal economy (ILO, 2013) ^[13].

Vietnam is a country with a relatively high rate of informal workers compared to other countries in the world. In 2021, Vietnam has 33.6 million workers with informal jobs, (accounting for 68.5% of the total number of employed workers), of which there are more than 14.8 million informal female workers. Compared to formal workers, informal workers not only suffer more disadvantages due to having to work in precarious, temporary jobs without social protection; but it is also difficult to ensure a minimum standard of living for themselves and their families. This situation among women is even more worrying, more than 61% of female workers with informal jobs receive an income lower than the regional minimum wage (nearly twice

as high as this rate among men). The existence of a large-scale informal economic sector is a significant challenge to the ability to protect workers in general and female workers in particular in the social insurance system in Vietnam. In fact, maternity policy in Vietnam is considered to have a wide range of benefits compared to other countries in the region and the world. However, leave and maternity benefits vary significantly between groups of women, depending on their work status. Currently, Vietnam has two maternity policies being applied: (i) maternity benefits paid from the State budget according to Decree No. 39/2015/ND-CP (applied to women as Ethnic minorities or Kinh women whose husbands are ethnic minorities, belong to poor households, and reside in administrative units in disadvantaged areas when giving birth); and (ii) maternity benefits paid from the social insurance fund according to Social Insurance Law No. 58/2014/QH13 (only applicable to employees participating in compulsory social insurance, not yet applied to employees participating in voluntary social insurance). Thus, it can be seen that female workers who are not covered by mandatory social insurance (including informal workers) do not have access to this basic and important labor right. This shows a large "gap" in maternity policy in Vietnam. Actual statistics show that, by 2021, up to 60% of Vietnamese women giving birth do not enjoy maternity policies. The actual coverage of maternity benefits in Vietnam in 2021 is only nearly 40% of women giving birth. When faced with poverty or financial hardship, women may not take maternity leave or return to work earlier than is medically advisable. Therefore, it can be seen that the existence of a large-scale informal economic sector is a significant challenge to the ability to protect workers (including female workers) in the social insurance system in Vietnam. This article systematizes the theoretical basis for maternity protection and standards according to the International Conventions on Maternity Protection, and the practical experiences of countries on expanding maternity protection in the informal economy. The authors propose a number of recommendations to expand maternity for informal workers in Vietnam, realizing the maternity protection rights of all women in Vietnam, regardless of their employment status.

2. Theoretical Basis

2.1 International Conventions on Maternity Protection

Pregnancy and childbirth are particularly vulnerable times for female workers and their families. Pregnant and breastfeeding women need special protection to prevent harm to their own health or that of their newborn baby, and they need adequate time to give birth, recover and raise their children. At the same time, they also need protection to ensure that they will not be dismissed simply because of pregnancy or maternity leave. Protecting the health of pregnant and lactating women and protecting them from discrimination in employment is a prerequisite for achieving true equality of opportunity and treatment for both men and women in the workplace and creating conditions for workers to feed their families in guaranteed conditions. Maternity protection includes: maternity leave; cash assistance and medical benefits; Protective health; Breastfeeding; employment protection and non-discrimination. The International Labor Organization (ILO) soon recognized the importance of maternity protection, adopting the first Maternity Protection Convention (No. 3) in 1919. The

Convention has always held that maternity protection is essential to ensure that women have equal access to employment and continue to receive vital income essential for the well-being of their families. The minimum standards for social security under ILO Convention 102 (1952) also mention childbearing as one of nine core provisions leading to the cessation or significant reduction of income guaranteed by social security. This convention sets minimum standards for the provision of health care services during pregnancy and childbirth, as well as cash benefits for related loss of income. In 1952, the ILO adopted Convention No. 103 on Maternity Protection (revised) and Recommendation No. 95; and then Maternity Protection Convention No. 183, 2000. These Conventions and Recommendations are aimed at all female workers, including those in atypical work. The Convention expands the scope of rights and benefits for working mothers to reduce health risks for themselves and their children. The ILO has promoted maternity protection as a fundamental labor standard since its founding in 1919. Since then, member states have adopted a set of laws covering broader categories of workers and ensuring broader rights for working mothers. However, practice has shown that, even in countries that have ratified Convention No. 183 and accompanying Recommendation No. 191, many groups of women included in the informal economy, family workers and self-employed workers have little or no security at all. Maternity can represent major health and economic risks for vulnerable populations in the informal economy (ILO, 2013) ^[13].

2.2 Informal Sector and Informal Labor Informal Sector

The informal economy is defined as "all economic activities of workers or economic units-by law or in practice-that are not protected or inadequate protection by formal agreements" (ILO, 2002) ^[11]. According to the report "Overview of Informally Employed Workers in Vietnam" by the General Statistics Office of Vietnam with technical support from the ILO Vietnam office (General Statistics Office of Vietnam, 2022) ^[3], the concept of the informal sector was first officially adopted in 1993 at the 15th International Conference on Labor Statistics (ICLS 15). This concept was later introduced into the revised System of National Accounts (SNA 1993). With an approach based on the characteristics of production units (facility-oriented approach) rather than based on characteristics related to employees (labour-oriented approach) and is considered useful for analyzing and describing labor markets and national economies; The concept of "informal sector" is understood as production and business establishments owned by households and not established as separate legal entities, not independent of household member owns them. These establishments do not have complete accounts (including balance sheets of assets and liabilities) to help clearly distinguish the production activities of the establishment from other activities of the owner; and to separate the facility's income and capital flows from those of its owners. The characteristics of establishments in the informal sector are that they operate with small-scale organizations, and labor relations are mainly based on irregular workers, kinship relationships, or personal relationships, rather than contractual relationships with formal guarantees. Fixed assets and other assets do not

belong to the facility but to the investment owner. These establishments cannot sign contracts with other businesses according to the law and they are also not allowed to use their status to cover their debts. The owner must balance his income and expenses and bear his own risks. Production costs are not distinguished from household costs. Similarly, the use of valuable goods such as houses or vehicles is not specifically for business or family consumption purposes.

Informal Labor

The ICLS 15 conference also mentioned the classification of workers working in the informal sector, but did not provide a complete definition of informal workers. By 2003, at the 15th International Conference on Labor Statistics (ICLS17), the conceptual framework of informally employed workers (also known as informal workers) was officially established, introduced and approved. This conceptual framework clarifies the difference between workers working in the formal sector and workers with informal jobs (also known as informal workers). Workers working in the informal sector are people working in the informal sector (based on the concept of the informal sector adopted at the 15th ICLS Conference). Workers with informal jobs (also known as informal workers) are those who do jobs that are not protected by law or in fact, by labor laws, do not have to pay income tax, or are not entitled to social protection and other employment regimes (such as not being notified in advance of dismissal, not receiving severance pay, not being paid an annual salary or not being given sick leave, etc.). Such work is often undeclared, temporary, or short-term in nature, has working hours or salary below the prescribed threshold, and sometimes does not fully comply with legal regulations. According to this definition, self-employed workers and establishment owners are identified as informal workers when their workplace is in the informal sector. All unpaid family workers are identified as informal workers. Salaried workers do not have a labor contract and are not paid social insurance by their employers; or there are no commitments to ensure social benefits in the labor sector are also identified as informal workers regardless of whether they work in either formal or informal sector establishments. Workers with informal jobs always exist in every economy as an objective necessity. In particular, when the economy encounters shocks, informal jobs act as a pedestal for the economy, a temporary shelter to solve employment problems. However, this is a weak, vulnerable group of workers who have difficulty accessing state policies and need to be protected.

2.3 Some Challenges of Maternity Protection in the Informal Economy and Informal Labor

According to ILO (2013)^[13], a characteristic of the informal economy and informal labor is the lack of regulation and social protection, workers are often not covered by mandatory social security and contributory health care programs for a variety of reasons. Despite being exposed to greater risk and uncertain income, the majority of workers in the informal economy are still deprived of social security benefits. Lack of social protection is a major factor contributing to their social exclusion and poverty. In practice, efforts to reduce the exclusion of workers in the informal economy have shown limited results. High risks and low social security scope put workers in the informal economy in a very vulnerable situation. Women make up a

large portion of the working poor in most developing countries. The correlation between poor maternity health and weak maternity protection, lack of decent work and persistent poverty is a major feature of the informal economy. Most female workers in the informal economy worldwide still have little or no maternity protection. Women in the informal economy are not protected under current laws, and they do not or cannot afford existing social security and health care programs. There are many challenges for female workers in the informal economy related to maternity benefits, some of which are as follows:

First, there is a high level of vulnerability due to loss of income and maternity-related costs. Loss of income during pregnancy and breastfeeding and the costs associated with pregnancy and childbirth have a particularly detrimental impact on the working poor and their families. Given the informal nature of work and the precariousness of employment, workers and owners of informal economic establishments are often forced to continue economic activities when they are still not healthy enough to work. When they are unable to rest and recover during late pregnancy, birth and postpartum, they often put their health and that of their children at serious risk. Actors in the informal economy largely do not receive cash benefits from cash benefit regulations or do not meet the criteria for protection, such as minimum hours of work. Additionally, when they are not covered by social assistance funds, women often choose not to seek needed care; because medical costs related to pregnancy, childbirth and breastfeeding may be unaffordable for poor households.

Second, they are not protected by law and are excluded from regular social security programs. Self-employed workers and certain types of dependent workers, such as domestic workers, home workers, and agricultural workers, are often explicitly excluded from maternity laws. This problem also goes hand in hand with being excluded from regular social security programs. The absence of a clear employment relationship often means that many people in the informal economy are not covered by contributory social security schemes. Furthermore, the majority of the working poor in most developing countries have incomes that are too small or intermittent to be able to provide for their basic needs and cover the costs of social security programs. On the other hand, discrimination against female workers due to maternity-related reasons occurs in many fields and both formal and informal employment (such as loss of job or dismissal due to pregnancy, salary reduction or suspension during pregnancy breastfeeding, etc.). In reality, informal workers have limited and sometimes even impossible access to effective remedies for such discrimination; Female workers in the informal economy still receive almost no assistance.

Third, female workers in the informal sector are often exposed to work and occupations performed in conditions that do not ensure safety and hygiene; especially dangerous for pregnant and lactating women and their children. Meanwhile, poor awareness and limited access to information and advice, and limited access to quality healthcare provision are significant challenges. Work-related risks include: lifting, carrying, pulling, and pushing heavy objects by hand; exposure to chemical, biological, or physical substances that represent a hazard to reproductive health; work requires balance; work that involves physical stress due to prolonged periods of sitting or standing,

extreme temperatures, or concussion; work at night. In addition, long working hours, lack of weekly breaks, and annual or sick leave are also important aspects of working conditions that can affect the health of pregnant women in the non-economic economy. Women are often unaware of the health risks associated with their work and the consequences of those risks on pregnancy and childbirth. They also often have limited access to formal and informal services and advice on maternity health issues. Women, especially in rural areas, may face economic/physical/cultural barriers to accessing adequate health care support.

3. Methods

These authors used secondary data collection methods from the following sources: Documents of the International Labor Organization and conclusions of the International Labor Conference; some related publications on maternity protection; previous related research works on maternity protection and expanding maternity protection in the informal economy and informal workers; statistical report of the General Statistics Office of Vietnam on the informal labor situation in Vietnam; report on annual work results of Vietnam Social Security; and legal documents as a basis for implementing maternity protection policies in Vietnam. From the collected secondary data, the authors used statistical analysis, synthesis, and comparison methods; to select valuable findings closely related to the research topic to include in the theoretical basis section. Along with that, the authors used a systems approach to analyze international experience on expanding maternity protection in the informal economy and for informal workers; This method has also been used to assess the current status of maternity protection for informal workers in Vietnam and propose recommendations to expand maternity protection for informal workers in Vietnam.

4. Results

4.1 International Experience on Maternity Protection in the Informal Economy and for Informal Workers

Expanding women's access to health care during and after pregnancy, and minimizing the economic risks associated with maternity is in the interest not only of individual women but also of society and the economy. Worldwide, most informal female workers (of which the majority are female workers in the informal economy) still have little or no maternity protection at all. A comprehensive approach is needed to improve and expand women's access to quality affordable (and/or free) health care on the one hand, and on the other hand, reduce the adverse socio-economic impacts of maternity on women and their families. Healthcare initiatives need to be matched by complementary interventions, such as maternity benefit programs, awareness campaigns on work-related hazards for pregnant and lactating women, targeted employment promotion programs, capacity building and support activities to enhance women's socio-economic status and voice. Maternity protection is within reach of most countries, including low-income countries. Specific community-based health financing programs, such as microinsurance or self-help programs, are proving particularly effective in reaching actors in the informal economy. Cash transfer programs are also being used as effective tools to alleviate the potential negative consequences of maternity for the very poor and

improve access to health care.

In recent years, many developing countries have seen growth and expansion of microinsurance programs and public health financing systems; These programs offer a viable and affordable option to expand health care access and reduce vulnerability to pregnancy-related risks for workers in the informal economy. Many studies show that microinsurance programs have a strong potential to reach actors in the informal economy, mobilize additional resources for social protection and contribute to reducing social exclusion, especially for women (De Bock and Ontiveros, 2013; Apostolakis *et al.*, 2015) ^[2, 1]. Such programs are being adopted around the world and have proliferated over the years. For example: the Lalipur Health Insurance program in Nepal focuses on maternal and child health, awareness raising and health education on safe motherhood; The program provides essential medications and basic health services at a nominal cost to members. Another example in Nepal is the medical cooperative established by the Confederation of Nepalese Trade Unions (GEFONT), which includes a health insurance scheme in partnership with a hospital, and towards the informal economy. The scheme provides antenatal care as well as childbirth and serious illness services, including a referral mechanism to a hospital where members can receive treatment at a low cost. The Safe Motherhood Foundation's Community Insurance Program in Tanzania and Grameen Kalyan's Rural Health Program in Bangladesh provide a full range of pre-and post-natal services to members. Micro-health insurance has demonstrated good potential to reach groups excluded from compulsory social insurance, mobilize additional resources, and contribute to strengthening the position of socio-professional groups, including women. However, independent and self-funded microinsurance programs have major limitations in terms of sustainability and effectiveness in reaching the largely excluded population. The impact of these programs should be significantly increased by developing functional links with the extended national or social insurance system, in this way, contributing to improving fairness and efficiency in national social security policies.

On the other hand, cash benefit programs are also effective tools to reduce the potential negative impact of maternity on working mothers and their families through loss of income and increased costs. Maternity Protection Convention No. 183 provides the right to cash benefits that at least enable a woman to support herself and her child in suitable conditions of health and with an appropriate quality of life. Cash transfer initiatives began in many developing countries to alleviate poverty by targeting the poorest populations. These initiatives often include conditions for prenatal and postnatal health monitoring for mothers and children and/or school children. For example, in Indonesia, Brazil and Mexico, cash transfer programs targeting poor communities require pre-and post-natal health screenings for mothers and children. In Brazil, the national Bolsa Familia program is one of the most comprehensive cash transfer programs in the world. This program regulates the conditions for money transfers related to children's schooling and access to health care and social assistance services. The program also includes the provision of health care services in communities mainly in the poorest areas. In Mexico, the Progres conditional cash transfer program (since 2002, Oportunidades) launched in 1997 with a focus on rural

communities has expanded nationwide, including major urban areas. Under this plan, pregnant women who attend monthly lectures receive free maternity services. Participation in the program is conditional on prenatal care and related vaccinations. Beneficiaries receive free antenatal care if they present within the first trimester of pregnancy. Pregnant and lactating women and their children receive vitamins and nutritional supplements.

Besides protecting maternity by reducing the associated risks (economic and social) for working mothers and their children through social security measures; There is also a need to address the root causes of vulnerability to risk, which leads to poor maternal health, by promoting decent work and adequate living standards for the working poor, especially women. Increased income and better working conditions for female workers are fundamental factors contributing to improved health for mothers and children. The availability and affordability of quality social care services (especially childcare) is a decisive factor in enabling women to return to work after giving birth and affects access to better quality jobs. Similarly, policy measures to support fatherhood have the potential to promote more equitable sharing of family responsibilities between women and men. Along with that, education, information, and propaganda campaigns are also useful and effective policy tools used by the government, adopted by trade unions and workers to reach workers in the informal economy and reduce the potential negative consequences of maternity for workers and society at large.

4.2 Current Status of Maternity Protection for Informal Workers in Vietnam

In Vietnam, according to the General Statistics Office's "Overview of Informally Employed Workers in Vietnam" report (2022), The majority of informal workers do not have a labor contract or have an unwritten contract (nearly 79%) and only 15.3% have a labor contract. With this reality, informal workers will face job insecurity, disadvantages in salary agreements, not receiving benefits and not being fully guaranteed conditions. labor. The proportion of workers with labor contracts of 1 month or more but without social insurance still accounts for a large proportion. In the formal sector, up to 20.8% of salaried workers have signed labor contracts but do not pay mandatory social insurance.

Up to 97.8% of informal workers do not participate in any type of insurance, and 35.5% of them are salaried workers. Only a small proportion (2.1%) of informal workers said they participate in voluntary social insurance; However, risk benefits under the voluntary social insurance system started very limited and have remained that way, including only retirement and death benefits. Meanwhile, compared to many countries in the world, Vietnam's informal labor rate is high. In 2021, Vietnam had 33.6 million workers with informal jobs, accounting for 68.5% of the total number of employed workers. Vietnam's informal workers not only work in the informal sector but also work in large numbers in the formal sector, with low professional qualifications. In 2021, up to 42 out of 63 provinces and centrally run cities will have an informal labor rate of over 70%, many provinces even have over 80% (26 provinces); There is a positive relationship between the rate of informal labor and the proportion of workers working in the agricultural, forestry and fishery sector and the rate of poor households in the provinces. The income from the main job of informal

workers in 2021 is 4.4 million VND, only half the income of formal workers (8.2 million VND). Nearly half (47.0%) of informal workers have income lower than the regional minimum wage. This figure for official workers is only 8.0%. Clearly, compared to formal workers, informal workers not only suffer more disadvantages due to having to work in precarious, temporary jobs without social protection; but it is also difficult to ensure a minimum standard of living for yourself and your family. This situation in women is even more worrying. More than 61% of female workers with informal jobs receive an income lower than the regional minimum wage, a rate nearly 2 times higher than that of men. Women working in informal jobs not only have a lower average income than men, but during the Covid19 pandemic they are also more vulnerable than men with their income falling quite deeply. After 2 years of the pandemic, women's average income decreased by more than 100,000 VND/month. Meanwhile, the reduction for men is only 26 thousand VND/month. In general, in all industries, the average income of male informal workers is always higher than that of women.

In Vietnam currently, there are two maternity policies being applied: maternity benefits paid from the social insurance fund according to Social Insurance Law No. 58/2014/QH13 and maternity benefits paid from the State budget according to Decree No. 39/2015/ND-CP. According to Decree No. 39/2015/ND-CP, women who are ethnic minorities or Kinh women whose husbands are ethnic minorities, belong to poor households, and reside in administrative units in difficult areas. difficulties during childbirth will be supported 2 million VND/person. Regarding the maternity policy of employees participating in social insurance, currently, it only applies to employees participating in mandatory social insurance, not yet applied to employees participating in voluntary social insurance. Cases protected under the maternity regime prescribed in the Law on Social Insurance No. 58/2014/QH13 include pregnant female employees, female employees giving birth, and employees adopting children under 6 months old; female surrogate mothers and surrogate mothers; Workers insert IUDs and perform sterilization measures. In general, Vietnam's maternity regime is quite generous in terms of leave time and benefit rate. With 26 weeks of leave paid at 100% of the insured's previous earnings, this benefit exceeds the ILO minimum standards set out in Convention 183 of 2000 (14 weeks at 2/3 of prior earnings). that) and includes the recommended period of 18 weeks under Recommendation 191 of 2000. However, this policy only applies to employees participating in compulsory social insurance with the beneficiary rate only accounting for about 30% of the workforce, and has not been applied to employees participating in automatic social insurance. In the context of limited coverage of the social insurance system in Vietnam, most women today depend on family income sharing to be able to cope with the loss of income due to childbirth, postpartum leave, and childcare. Statistics show that up to 60% of Vietnamese women do not enjoy maternity policies when giving birth. The actual coverage of maternity benefits in Vietnam in 2021 is only nearly 40% of women giving birth. Of the more than 1.5 million women giving birth in 2021, there are more than 14,700 women receiving maternity benefits according to Decree No. 39/2015/ND-CP, more than 600,000 women receiving maternity benefits according to regulations of the Law on Social Insurance No.

58/2014/QH13. There are up to 22 provinces and cities where over 80% of women who give birth or adopt children do not receive maternity benefits. Thus, it can be seen that the maternity policy in Vietnam has a large "gap". Leave and maternity benefits vary significantly between groups of women, depending on their work status. Women not covered by mandatory social insurance, including informal workers, often do not have access to maternity policies. The voluntary social insurance system does not have a maternity benefit, so it also leads to inequality in benefits between the two contribution systems. Most women in the informal economic sector work in agriculture or as contributors to the family. When faced with poverty or financial hardship, women may not take maternity leave or return to work earlier than is medically advisable. It can be seen that the existence of a large-scale informal economic sector is a significant challenge to the ability to protect workers in general and female workers in particular in the social insurance system in Vietnam. Therefore, to increase women's participation in the social insurance system, strategies to expand coverage need to address the specific challenges that these populations face in the contributory social insurance system.

4.3 Recommendations to Expand Maternity Protection for Informal Workers in Vietnam

Based on the standards under the International Conventions on Maternity Protection and the practical experience of other countries, the authors propose a number of recommendations to expand maternity leave for informal workers in Vietnam, including:

First, it is necessary to build and implement a multi-pillar maternity allowance system. The first pillar is the system of universal maternity benefits paid by the State Budget for all female workers who are unable to pay social insurance. A universal maternity benefit system will provide basic income security for mothers who do not participate in social insurance, reducing the financial burden of social insurance contributions on households unable to contribute; contributing to increasing the level of maternity protection for employees, especially female employees, thereby increasing social insurance coverage. The second pillar is a contribution-based maternity benefit (social insurance) that will replace lost income for parents participating in social insurance when they encounter maternity risks such as giving birth or adopting children. In fact, maternity benefits based on contribution relationships are currently only implemented in the form of compulsory social insurance. Therefore, it is necessary to add a maternity policy for parents to the voluntary insurance system; This not only helps correct the current imbalance between the voluntary and mandatory systems but also increases the ability to attract young self-employed couples who are thinking about having children to join the social insurance system. Adding maternity benefits to voluntary social insurance is considered necessary, contributing to connecting social security policies and policies on economics, employment, and childcare services.

Second, develop micro-insurance programs to promote the important role of this type of insurance in the social security system. From international experience and practical implementation of microinsurance in Vietnam, microinsurance has strong potential to reach subjects in the informal economy, mobilizing additional resources for

social protection and contributing to reducing social exclusion, especially for women. Microinsurance cannot replace social insurance or social assistance programs; however, microinsurance can act as a supplement to social insurance; This is especially useful when social insurance does not cover all the costs that an insurance event may cause. In some cases, microinsurance can also serve as a substitute for social insurance where social insurance schemes already exist but are not attractive to informal sector workers. Therefore, the Government needs to create favorable conditions to develop micro insurance; The impact of these programs needs to be increased significantly by developing functional links with national social insurance systems. In this way, contributing to improving fairness and efficiency in national social security policies. Developing micro-insurance, targeting social actors, and focusing on the poor, low-income people and vulnerable people in society is considered an important solution to protect people from risks, and financial compensation. Developing this type of insurance, on the one hand, is deeply humane, contributing to social security, hunger eradication and poverty reduction. On the other hand, promote financial inclusion so that no one is left behind in the development process, especially female workers. In order for the micro-insurance program to be implemented effectively, contributing to the successful implementation of social security policies of the Party and State; It is necessary to create conditions for this form of insurance to develop with the support and active participation of many subjects, in which the State plays a constructive role.

Third, focus on strengthening solutions to promote sustainable employment and strengthen women's social and economic position. International experience has shown that increased income and better working conditions for female workers are fundamental factors contributing to improving maternal and child health; Helping female workers ensure their maternity rights. Currently, the proportion of female workers in the informal sector in Vietnam is quite high and mainly concentrated in rural areas; Most female workers work in fields with low expertise and have lower incomes than men. Low labor quality, low stability and sustainability in employment are some of the barriers that make it difficult for rural women to change jobs and access the labor market. Female workers are suffering a lot of disadvantages because at the same time, they have to take on many responsibilities such as giving birth, raising children, doing business, and taking care of the housework; The working process also faces more difficulties due to being overlooked and undervalued. Creating jobs for female workers not only contributes to reducing the poverty rate but also creates opportunities for women to improve their position in society. Therefore, increasing opportunities to access vocational training and supplement training and update career knowledge for rural women, is considered an important solution to enhance the role of women in accessing sustainable employment opportunities. The Government needs to continue to implement and further strengthen policies to support women in borrowing capital for production, women starting businesses and creating sustainable jobs for female workers. Localities need to strengthen propaganda and dissemination of vocational training policies and models; Carry out enrollment work, vocational training and employment consulting for workers, especially rural female workers. Vocational education

institutions implement solutions to improve training quality; diverse and flexible training programs and training forms; Closely associated with the business, training as required and ordered by the business. Along with that, it is necessary to carry out various forms of propaganda and education to raise awareness of families and society about gender and gender equality. Promote propaganda work through mass media on gender equality, the position and role of women and female officials. Especially for rural areas, remote areas, and ethnic minority areas... are places with difficult economies and low educational levels; There needs to be many programs and projects integrated with local socio-economic development to raise income, strengthen the position of women, and eliminate feudal and backward ideas; create conditions for gender equality to be implemented better and more effectively.

5. Conclusion

Maternity benefits play an important role in protecting women against the risks of loss of income and health from pregnancy and childbirth. Without replacement income through maternity benefits, women's absence from work and increased expenses due to pregnancy, childbirth and child care will cause financial hardship for most families. By helping to protect women's jobs and income during and after childbirth, maternity protection ensures that women's reproductive role does not compromise their equal opportunities and economic and family security. According to the Maternity Protection Convention No. 183, 2000 (C 183), maternity protection provisions should be applicable to all women, including those working in informal conditions. Currently, the maternity policy in Vietnam has a large "gap". Women not covered by mandatory social insurance, including informal workers, often do not have access to maternity policies. The voluntary social insurance system does not have a maternity benefit, so it also leads to inequality in benefits between the two contribution systems. Most women in the informal economic sector work in agriculture or as contributors to the family. When faced with poverty or financial hardship, women may not take maternity leave or return to work earlier than is medically advisable. Therefore, it can be seen that the existence of a large-scale informal economic sector is a significant challenge to the ability to protect workers in general and female workers in particular in the social insurance system in Vietnam. The article presents standards according to international conventions on maternity protection, and practical experiences of countries on expanding maternity protection in the informal economy and for informal workers; At the same time, the article also presents the current situation of maternity policy in Vietnam. On that basis, the authors have proposed a number of recommendations to expand maternity leave for informal workers in Vietnam and take steps to ensure maternity protection rights for all women in Vietnam, regardless of their employment status. Proposed recommendations include: (i) the need to develop and implement a multi-tiered maternity benefits system; (ii) develop micro-insurance programs to promote the important role of this type of insurance in the social security system; and (iii) focus on strengthening solutions to promote sustainable employment and strengthen the social and economic position of women.

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