

POLICY RECOMMENDATIONS

STRENGTHENING HEALTH PROTECTION FOR INFORMAL OUTDOOR WORKERS IN THE CONTEXT OF CLIMATE CHANGE IN VIETNAM

Authors: Prof. Dr. Nguyen Van Kinh; Dr. Nguyen Thu Giang; Dr. Vu Ngoc Anh; Dr. Vu Thi Minh Hanh, together with the research team of the Vietnam Medical Association; LIGHT – Institute for Community Health Development; and the Vietnam Institute of Applied Medicine

August, 2026

Funded by wellcome

1. BACKGROUND AND RATIONALE

Climate change is emerging as one of the greatest challenges to Vietnam's sustainable development in the 21st century. Extreme weather events, including prolonged heatwaves, heavy rainfall, severe storms, flooding, droughts, and rising sea-levels are occurring with increasing frequency and intensity, with far-reaching consequences for human health, livelihoods, infrastructure, and economic growth.[1]

According to the World Bank's **Vietnam Country Climate and Development Report,** without effective adaptation measures, climate change could reduce Vietnam's GDP by approximately **12–14.5% by 2050**, while exacerbating inequalities and disproportionately affecting vulnerable populations.[2]

The World Health Organization (WHO) identifies climate change as one of the greatest threats to global health, contributing to an increasing burden of heat-related illness, cardiovascular and respiratory diseases, infectious diseases, mental health problems, and premature mortality.[3] These impacts are particularly severe for people who are required to work outdoors for prolonged periods.

Against this context, **informal outdoor workers** including street vendors, traditional and app-based motorcycle taxi drivers, delivery workers, construction workers, porters and loaders, and waste pickers are among the occupational groups most highly exposed to climate-related risks in urban areas. They perform a wide range of essential economic activities every day, and yet frequently work under conditions of extreme heat, heavy rain, storms, air pollution, and other extreme weather events. At the same time, many lack formal employment contracts, face unstable incomes, have limited access to social protection mechanisms, and encounter barriers to accessing healthcare services.

1. *Climate Change 2023: Synthesis Report. Geneva: IPCC; 2023.*
2. *Vietnam Country Climate and Development Report. Washington, DC: World Bank; 2022.*
3. *Climate Change and Health. World Health Organization (WHO), Fact Sheet; 2023.*











Ha Noi

Da Nang

Ho Chi Minh City

Can Tho

Over recent years, Vietnam has adopted a number of important strategies, policies and programmes addressing climate change, green growth, environmental protection, occupational health and safety, population health, and the expansion of social protection. These include the National Climate Change Strategy to 2050, the National Adaptation Plan for the period 2021–2030, with a vision to 2050, the National Green Growth Strategy, the 2024 Law on Social Insurance, and the 2025 Law on Employment, among others. These instruments provide an important foundation for strengthening resilience to climate change.[4–8]

However, findings from the field research and policy review indicate that existing policies remain largely developed and implemented in sector-specific silos, while informal outdoor workers are almost entirely absent from the existing policy framework. Climate change policies rarely address informal workers; occupational health and safety policies are primarily designed for workers in formal employment relationships; and although social protection policies have expanded, voluntary social insurance coverage among this population has remained at only 2.2% for many consecutive years. To date, no policy instrument has simultaneously integrated all three dimensions-climate change adaptation, occupational health protection, and social protection-for informal outdoor workers.

This is not simply a matter of insufficient policy integration. It represents the near-complete exclusion of a substantial segment of the urban workforce from the protective scope of the existing policy system. Closing this gap, particularly as Vietnam pursues green and inclusive growth, is not merely a humanitarian imperative. It is also essential to safeguarding national productivity, strengthening urban resilience, and ensuring the long-term sustainability of Vietnam's development.

Drawing on a survey of 1,208 informal outdoor workers in Hanoi, Da Nang, Ho Chi Minh City and Can Tho, complemented by in-depth interviews, focus group discussions, and a review of relevant policy and legal documents, this policy recommendation proposes a set of practical measures to strengthen the integration of health protection, climate change adaptation, and social protection for informal outdoor workers. These measures aim to contribute to the Sustainable Development Goals and to building a more climate-resilient health system capable of responding effectively to the growing impacts of climate change.

4. *Decision No. 896/QD-TTg dated 26 July 2022 approving the National Climate Change Strategy to 2050.*
5. *Decision No. 1055/QD-TTg dated 20 July 2020 promulgating the National Adaptation Plan for the period 2021–2030, with a vision to 2050.*
6. *Decision No. 1658/QD-TTg dated 1 October 2021 approving the National Green Growth Strategy for the period 2021–2030, with a vision to 2050.*
7. *2024 Law on Social Insurance.*
8. *2025 Law on Employment.*

2. RESEARCH AND POLICY REVIEW: SUMMARY

The recommendations presented in this policy brief are based on **two independent sources of evidence.**

Source 1: Field research in four major cities of Vietnam (2024–2025)

- A quantitative survey of **1,208 informal** outdoor workers in Hanoi **(400)**, Da Nang **(201)**, Ho Chi Minh City **(406)**, and Can Tho **(201)**, covering four occupational groups: street vendors/lottery ticket sellers; motorcycle taxi and app-based drivers; porters/transport workers; and construction workers.
- The qualitative research comprised **76** in-depth interviews and eight focus-group discussions involving **48 participants.**

Source 2: Policy and legal document review (2024)

- A review of 45 legal and policy documents relating to climate change, labour, health, and social protection at both national and sub-national levels.

These policy recommendations are informed by two complementary sources of evidence generated under a research programme funded by the Wellcome Trust. The research was implemented by the Vietnam Medical Association (VMA), the Center for Community Health and Development (LIGHT), and the Medical Associations of Ho Chi Minh City, Da Nang and Can Tho, with technical support from the National Centre for Social Research (NatCen), United Kingdom.



3. KEY FINDINGS FROM THE RESEARCH

3.1. Informal outdoor workers experience very high exposure to climate and environmental hazards

- During the 12 months preceding the survey, as many as **95.4%** of respondents had been exposed to extreme heat; **71.0%** to heavy rainfall; **38.7%** had experienced flooding at their place of residence or work; **38.7%** had been exposed to storms or thunderstorms with wind speeds of Force 8 or above; and **31.0%** had experienced cold weather.
- Exposure intensity is compounded by long working hours and simultaneous exposure to multiple hazards. More than **50% of respondents reported working all seven days** of the week, with virtually no days off. Average working time was **8.7 hours per day** and approximately 6.36 days per week, equivalent to **55.3 hours per week.**
- Exposure is not only high but also cumulative and overlapping. Some **55.6%** of workers reported simultaneous exposure to **6–10 occupational, climate and environmental risk factors; 29.1%** were exposed to **11–15 risk factors**; and **1.8%** were exposed to **more than 15** risk factors.
- Exposure patterns also **varied considerably between locations**. Da Nang had a particularly high proportion of workers exposed to heavy rainfall, while workers in Hanoi simultaneously faced heat, heavy rain, thunderstorms, flooding, and cold weather. This demonstrates that a single standardised set of interventions cannot be applied uniformly across all cities; interventions need to reflect the specific climate and occupational risk profiles of each locality.

3.2. Impacts on physical health and work capacity are already evident

- Workers in all four cities reported that extreme weather events had directly affected their health, work, and livelihoods. Perceived impacts varied by location, with the highest proportion reported in Da Nang, where **87.6%** of participants **reported** that extreme weather had affected their physical health, followed by Hanoi (**69.8%**), Ho Chi Minh City (**62.6%**), and Can Tho **(48.8%**).
- In addition to self-reported impacts of weather, the survey documented symptoms experienced during the month preceding the interview, including:
  - **68.5%** experienced at least one musculoskeletal symptom after a working day;
  - **41.0%** experienced pain, numbness or fatigue in the shoulders and arms;
  - **33.7%** experienced lower-back pain, numbness or fatigue;
  - **32.1%** experienced neck pain, numbness or fatigue;
  - **27.4%** experienced pain, numbness or fatigue in the hips and legs;
  - **23.7%** experienced respiratory symptoms;



- **13.1%** eexperienced skin-related problems; and
- **12.2%** eexperienced gastrointestinal symptoms.

- Importantly, most workers experiencing these symptoms did not seek medical care. Only **23.1%** of those experiencing shoulder and arm pain and **21.6%** of those experiencing lower-back pain had sought medical attention. For cough-related symptoms, only 12.3% had visited a healthcare facility. Common reasons included workers perceiving the symptoms as **not serious enough**, **lack of time** because they needed to continue working, **financial difficulties**, and **self-treatment.**
- In-depth interviews further demonstrated that many workers continue working during extreme heat, heavy rain, or otherwise adverse weather conditions because stopping work means losing their income for the day. This situation undermines health, increases healthcare expenditure, and weakens household resilience.

3.3. Mental health among informal outdoor workers is an emerging concern requiring greater attention

In addition to its effects on physical health, the research indicates that extreme weather, insecure working conditions, and livelihood pressures are having significant impacts on workers' mental health.

Assessment using the DASS-21, a mental health screening and assessment instrument used in the health system, found that:

- **32.8% showed symptoms** of anxiety ranging from mild to extremely severe, including **10.7%** mild, **16.4%** moderate, **3.3%** severe, and **2.5%** extremely severe;
- **17.8% showed symptoms** of stress ranging from mild to extremely severe, including **9.8%** mild, **5.4%** moderate, **2.0%** severe, and **0.6%** extremely severe.

Comparison of the same DASS-21 indicator across the four cities showed that the proportion of respondents with anxiety symptoms at any severity level, from mild to extremely severe, was **44.1% in Hanoi, 33.2% in Da Nang, 23.3% in Ho Chi Minh City, and 29.5% in Can Tho.**

Although Can Tho had the lowest overall proportion, it had the highest proportion of workers with extremely severe anxiety symptoms, at 3.6%. These figures were calculated among participants with sufficient information to score the DASS-21 in each locality.



Using another measure-workers' self-assessment of the effects of weather events on their mental health-the proportion reporting that their **mental health had been affected** was **50.7%** in Da Nang, **41.3%** in Can Tho, **38.5%** in Hanoi, and **22.7%** in Ho Chi Minh City.

These two sets of findings capture different dimensions and should not be directly compared. Nevertheless, both indicate a concerning situation regarding the mental health of informal outdoor workers.

In-depth interviews identified common concerns, including fear of reduced or lost income during adverse weather, concerns about healthcare costs, the ability to maintain employment, and family caregiving responsibilities when income is interrupted.

The analysis also identified an association between mental and physical health: workers exhibiting anxiety symptoms had a higher risk of experiencing physical health problems than those without anxiety symptoms; similarly, stress was associated with a higher risk of physical health problems. However, because this was a cross-sectional study, these findings indicate associations only and should not be interpreted as evidence of causal relationships.

3.4. Gaps in social protection and adaptive capacity increase vulnerability

Although most workers clearly recognised that climate change has been occurring in recent years, their knowledge of climate change and protective/adaptive measures remained limited:

- **55.5%** had below-average levels of awareness;
- **40.7%** had average levels of awareness; and
- only **3.8%** had above-average levels of awareness.

Adaptation measures were predominantly self-initiated and based on personal experience, including using sun-protective clothing, raincoats, masks, carrying drinking water, taking temporary shelter during heavy rain, or attempting to avoid direct sunlight whenever possible.

While these measures are useful, they are insufficient to protect workers from prolonged exposure, particularly when workers remain dependent on daily earnings.

Only **19.1%** reported being able to stop working during periods of extreme heat, while just **1.4%** could switch to work less affected by weather conditions.

The study population also had several characteristics that constrained their ability to protect themselves against climate-related risks:

- **42.2%** were aged 45 years or older;
- Only **8.7%** had received formal professional or vocational training;



- **58.8%** were temporary residents;
- Average duration of residence in the city was **10.9 years**, indicating that this is not a transient population but a relatively stable component of the urban workforce;
- **60.7%** lived in rented accommodation or boarding houses;
- **29.4%** lived in temporary housing;
- Only **73.5%** had health insurance cards, considerably below the national health insurance coverage rate of **95.2%** in 2025. By locality, coverage was **89.1%** in Da Nang, **71.3%** in Hanoi, **70.2%** in Ho Chi Minh City, and **60.2%** in Can Tho.
- Among those holding health insurance cards, **80.4%** had purchased the cards themselves, while only **0.3%** had their cards purchased by an employer;
- Particularly concerning, only **2.2%** of interviewed informal workers participated in voluntary social insurance.



These findings indicate that adaptive capacity depends predominantly on individual resources, while many workers lack sufficient savings, insurance coverage, or occupational alternatives to stop working when weather conditions become hazardous.

At the same time, workers expressed clear demand for support:

- **78%** wanted support to enrol in or maintain health insurance;
- **76.2%** wanted support with healthcare costs at primary healthcare facilities:
- **71.1%** wanted access to public rest points where they could seek protection from heat and rain;
- **62.6%** wanted support to participate in social insurance;
- Notably, **49%** wanted opportunities to move to jobs less affected by climate change. This demand was highest in Da Nang **(63.7%)**, followed by Hanoi (**54.5%**), Can Tho (**48.8%**), and Ho Chi Minh City (**36.5%**);
- **41.5%** wanted training on occupational safety and health under extreme weather conditions; and
- **38.7%** wanted support for vocational training.

3.5. Existing policies do not yet provide an integrated protection mechanism for informal outdoor workers

In addition to collecting field data, the research team reviewed 45 legal documents, strategies, programmes and plansrelating to climate change, health, labour, occupational safety and health, and social protection at both national and local levels.

The findings reveal a clear situation: **none of the 45 documents reviewed simultaneously integrates the three dimensions of climate change adaptation, occupational health protection, and social protection for informal outdoor workers.**

This is not necessarily a lack of policies. Vietnam has developed important policy instruments in each of these sectors. The fundamental problem is that informal outdoor workers are largely absent from all of these policy instruments.

Five systemic gaps were identified:

- **First:** Informal outdoor workers have not yet been explicitly recognised as a vulnerable group requiring priority attention in climate change adaptation programmes.
- **Second:** Occupational safety and health regulations have largely been designed around formal employment relationships, with identifiable employers and fixed workplaces, and therefore do not adequately address informal outdoor workers.
- **Third:** Policies on health insurance, voluntary social insurance and employment have expanded opportunities for informal workers, but have not been directly linked to climate-related health risks.
- **Fourth:** Data on climate exposure, illness, occupational accidents, income losses and adaptive capacity among informal outdoor workers are not routinely collected and shared across sectors.
- **Fifth:** There is no clear intersectoral coordination mechanism connecting climate, environment, health, labour, insurance and finance sectors to protect this population.

These gaps do not exist independently. They overlap and reinforce one another, leaving informal outdoor workers increasingly exposed to climate risks while having very limited access to systemic protection.

Addressing and closing these gaps is therefore the central focus of the recommendations proposed in this policy brief.



4. POLICY REVIEW APPROACH

Evidence from the policy review demonstrates that existing policies already contain important provisions relating to climate change, preventive health, occupational safety and health, and social protection. However, these policies have largely been developed and implemented within individual sectors and have not sufficiently addressed informal outdoor workers.

At the same time, evidence from the field research shows that, for this population, these issues are closely interconnected and require a comprehensive, intersectoral approach.



Therefore, the challenge is not simply the absence of a dedicated policy. It also lies in the lack of effective linkages between existing policies and systems.

➔ Vietnam should move from a fragmented, sector-specific approach towards a more integrated and coordinated approach, in which the protection of the health of informal outdoor workers is recognised as an intersection of climate change adaptation, public health, occupational safety and health, employment, and social protection.

This approach should prioritise prevention and early detection, rather than responding only after health has already been compromised. It should combine knowledge and awareness-raising with expanded access to insurance, healthcare services, safe rest facilities, and opportunities for livelihood diversification and occupational transition.

KEY PRINCIPLES OF THIS APPROACH INCLUDE:

- **Identify before intervening:** Informal outdoor workers should be explicitly recognised among vulnerable groups in health and labour data systems and in climate change adaptation plans.
- **Integrate rather than create new systems**: Protection measures should be embedded within existing mechanisms, including primary healthcare, health insurance, voluntary social insurance, weather early-warning systems, climate change adaptation plans, employment programmes, and social protection programmes.
- **Assign clear responsibilities:** A cross-sectoral coordination mechanism should be established among health, agriculture and environment, home affairs/labour, finance, Vietnam Social Security, and local authorities, with clearly designated focal points and measurable monitoring indicators.
- **Localise interventions according to risk profiles:** National guidance should allow adaptation to four distinct urban risk profiles: Hanoi and Ho Chi Minh City (heat + urban air pollution); Da Nang (storms/heavy rainfall + heat); and Can Tho (heat + flooding/tidal inundation).

5. SPECIFIC POLICY RECOMMENDATIONS

5.1. RECOMMENDATIONS TO THE MINISTRY OF HEALTH

- Integrate climate change considerations into preventive healthcare, primary healthcare, occupational health, non-communicable disease management, and health communication and education, with informal outdoor workers identified as a priority vulnerable group.
- Develop health protection guidelines for outdoor workers addressing both common climate-related risks, such as heat exhaustion and heat stroke, and the interacting climate and environmental risks specific to different regions. For example: Hanoi and Ho Chi Minh City should integrate heat + air pollution + traffic-related risks; Da Nang should integrate storms/heavy rainfall + heat; and Can Tho should integrate heat + flooding/tidal inundation.
- Strengthen surveillance of climate-sensitive diseases through the preventive health system, provincial/municipal Centres for Disease Control (CDC), local primary health care facilities, and other health care facilities. A pilot surveillance indicator set could include heat-related illness, respiratory diseases associated with air pollution, cardiovascular disease and exacerbation of chronic conditions during heatwaves, outdoor occupational injuries, and mental health impacts associated with livelihood pressures and climate change.
- Pilot a model of "Climate-Resilient and Informal Outdoor Worker-Friendly Health Stations" in urban areas with high concentrations of outdoor workers, combining health communication, first aid, mobile periodic health check-ups, health insurance/ social insurance counselling, and referral services where required.\



5.2. RECOMMENDATIONS TO THE MINISTRY OF AGRICULTURE AND ENVIRONMENT

- Integrate health and labour considerations into the National Climate Change Strategy to 2050 and the National Adaptation Plan for 2021–2030, with a vision to 2050, explicitly identifying informal outdoor workers in urban areas as a priority vulnerable group.
- Strengthen early-warning systems and climate risk communication linked to health advice. Warnings should be simple and accessible and disseminated through smartphones, community loudspeakers, social media, digital platforms, market management boards, and residential neighbourhood groups.
- Pilot a network of "Health Protection Rest Stations for Extreme Weather Conditions" in urban areas. During the initial phase, Hanoi, Ho Chi Minh City, Da Nang and Can Tho could be prioritised. Rest stations could be located near wholesale markets, bus stations, delivery and logistics hubs, areas where app-based drivers and delivery workers congregate, parks, and other public spaces.
- Each rest station should, at a minimum, provide shade, drinking water, climate risk information, basic first-aid guidance, and a means of contacting the nearest health facility.
- Integrate health protection criteria for vulnerable workers into implementation of the Scheme on "Development of Vietnamese Cities Responding to Climate Change for the 2021–2030 Period" under Decision No. 438/QD-TTg, as well as into green urban development and climate-resilient urban planning programmes.
- Relevant indicators could include shade coverage, public drinking-water points, public toilets, temporary rest areas, and access to early-warning information in locations with high concentrations of outdoor workers.





5.3. RECOMMENDATIONS TO THE MINISTRY OF HOME AFFAIRS

- Strengthen policies supporting informal workers, particularly informal outdoor workers who have no employment contracts, no fixed workplaces, and limited access to traditional protection mechanisms.
- Pilot a model in which commune/ward-level People's Committees identify, manage and support informal workers in accessing social services locally, making use of digital platforms and the roles of residential neighbourhood groups, local police, community-level Fatherland Front Working Committees, market management boards, boarding-house managers, occupational groups, and app-based driver/delivery networks.
- The objective would be to identify and map the number of informal workers—including outdoor workers-within each commune/ward and proactively reach them with climate and health warnings, health advice, health insurance/social insurance counselling, occupational safety and health information, healthcare referrals, and livelihood support.
- The model should be designed to avoid creating additional administrative burdens for workers or excessive administrative workloads for local authorities.
- Integrate occupational health and safetyunder extreme weather conditions into community communication programmes, training activities, and vocational skills guidance for the informal sector.
- Review whether Decree No. 44/2016/ND-CP, which provides detailed regulations on certain provisions of the Occupational Safety and Health Law, or another appropriate implementing instrument should be amended to establish suitable occupational safety and health requirements and practical guidance for informal outdoor work. Any worker identification or digital management mechanisms considered for this purpose should protect personal data, avoid creating barriers to work, and be developed with worker participation.
- Promote vocational training, employment transition, and livelihood support as climate change adaptation measures. In the study, only 1.4% of workers reported being able to transition to jobs less affected by weather, while 49.0% wanted opportunities to move to work less affected by climate change.
- Training programmes should prioritise short-term skills, flexible schedules, and direct linkages to suitable employment opportunities.

5.4. RECOMMENDATIONS TO VIETNAM SOCIAL SECURITY

Only 2.2% of outdoor workers participating in the study were enrolled in voluntary social insurance. It is therefore important to continue prioritising this group in efforts to expand voluntary social insurance coverage and facilitate practical and feasible access to health insurance.

- Leverage the policy opportunities created by the 2024 Law on Social Insurance, which took effect on 1 July 2025, to communicate new benefits, eligibility requirements, and voluntary social insurance participation options suitable for workers with unstable incomes.
- Develop flexible communication, counselling and contribution-reminder packages for informal workers, particularly motorcycle taxi and delivery workers, porters, street vendors, and construction workers.
- Collaborate with digital platform companies such as Grab, Xanh SM and Be, which operate ride-hailing and delivery platforms used by large numbers of urban outdoor workers, to disseminate information on health insurance, voluntary social insurance, and health warnings through companies' existing applications. These platforms provide a rapid and potentially high-reach communication channel for a large proportion of urban outdoor workers.
- Coordinate with primary healthcare services and commune/ward authorities to provide direct counselling at locations where workers live or work, including markets, bus stations, boarding-house areas, app-based driver gathering points, and construction sites.

5.5. RECOMMENDATIONS TO THE MINISTRY OF FINANCE

- Provide guidance to ministries, sectors and local authorities on integrating health protection activities for informal outdoor workers into recurrent expenditure plans for preventive healthcare, primary healthcare, health communication and education, and occupational safety and health.
- Enable and support the integration of small-scale but practical interventions-including heat/rain protection rest points, public drinking water, risk communication, mobile health check-ups, and first-aid services-into local plans for climate change adaptation, green growth, disaster risk reduction, and sustainable urban development.
- Consider mobilising and integrating existing financing mechanisms, including medium-term public investment plans, health-sector budgets, environmental protection budgets, disaster prevention and control funds, relevant national programmes, health insurance resources, public–private partnerships, and international development assistance.
- Encourage co-financing mechanisms involving local government budgets, digital platform companies, market/bus station/tourism-area management bodies, and social organisations to establish rest points, communication activities, and mobile health services for outdoor workers.
- Coordinate with the Ministry of Home Affairs (Department of Employment), Ministry of Agriculture and Environment (Department of Climate Change), and Ministry of Health (Department of Disease Control) to issue additional statistical indicators measuring climate vulnerability among informal workers, including informal outdoor workers, within the national statistical indicator system.
- Advise the Government on mechanisms to strengthen coordination among relevant stakeholders and promote digital transformation in the collection and sharing of evidence on climate vulnerability, particularly among informal workers and informal outdoor workers in major urban areas.

5.6. RECOMMENDATIONS TO THE NATIONAL ASSEMBLY AND ITS COMMITTEES

- In monitoring implementation of the 2024 Law on Social Insurance (Law No. 41/2024/QH15, effective 1 July 2025); the 2025 Law on Employment (Law No. 74/2025/QH15, effective 1 January 2026); the Law on Occupational Safety and Health (Law No. 84/2015/QH13, effective 1 July 2016); the Law on Health Insurance, as amended by Law No. 51/2024/QH15 (effective 1 July 2025); and climate change adaptation policies, particular attention should be given to informal outdoor workers as a vulnerable urban population.
- Consider incorporating the protection of outdoor workers' health in the context of climate change into hearings, accountability sessions, and thematic oversight on preventive healthcare, social protection, decent and sustainable employment, climate change, and urban development.
- Encourage the development of an indicator framework to monitor informal outdoor workers' access to climate, health, employment and social protection policies.
- For example, indicators on health insurance and social insurance coverage among informal outdoor workers could be incorporated into monitoring reports on implementation of the 2024 Law on Social Insurance. Monitoring could also include the proportion of localities with health warnings, public rest points, and appropriate healthcare referral mechanisms for this population.

6. CONCLUSION

Climate change is transforming the working conditions, health, and livelihoods of millions of informal workers in Vietnam's urban areas. Informal outdoor workers are among the groups most highly exposed to climate-related hazards, yet they remain among the least protected by existing policy mechanisms.

At present, there are no policy instruments that simultaneously and comprehensively integrate climate change adaptation, health and occupational health protection, and social protection for this group.

This represents both a significant policy gap and an important opportunity for Vietnam to develop an integrated, intersectoral, inclusive, feasible, and highly people-centred approach to climate resilience.

Protecting the health of informal outdoor workers is not merely a health or social protection intervention. It is an investment in human capital, labour productivity, urban resilience, and the sustainable development of Vietnam in the context of climate change.

For further information, please contact:

LE, Viet Anh

Center for Applied Medicine Education and Training, Vietnam Institute of Applied Medicine

Phone number: +84 912 019208 - Email: levietanh@viam.vn

Light for better LIFE

National Centre for Social Research

Funded by wellcome