SUMMARY NEW CONTRIBUTIONS OF THEORETICAL ISSUES, SCIENTIFIC AND PRACTICAL ARGUMENTS OF THE DOCTORAL DISSERTATION

1. General information

Dissertation topic: State management on sex composition at birth in VietNam

Major: Public management; Code: 62 34 04 03

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2. New researching findings of the dissertation

First, state management on sex composition at birth is conceived in the dissertation as organized and purpose-oriented process of intervention, reflecting power of the competent state authority, affecting population-reproductive health perception and behavior of individuals and organizations, aiming to achieve balanced sex composition at birth determined by the natural law of human reproduction.

Secondly, the dissertation has identified factors influencing state management on sex composition at birth, including: (i) Competency of public servants and refinement of state management institutions of sex composition at birth; (ii) People's awareness and responsibility of compliance with laws and regulations; (iii) Investment and effective use of financial resources; (iv) Impact of international and regional integration; (v) Development of science-technology, especially in obstetric practice; (vi) Natural-economic-cultural-social conditions and other related institutions.

Thirdly, the dissertation has pointed out limitations that are observed to exist in state management on sex composition at birth, including: (i) Absence of leadership and guidance by authorities somewhere; (ii) Limitations that exist in the enactment and enforcement of state management institutions on sex composition at birth; (iii) Somewhat low effectiveness in communicative, educational and campaigning activities;(iv)Deficient and untimely investment in interventional activities; (v)Somewhat poor coordination between relevant sectors, which has failed to take advantage of the strengths of characteristic sectors, etc. The dissertation also has identified causes of the above-mentioned limitations: (i) The Vietnamese population is experiencing demographic transition, in which sex imbalance at birth is a newly emerging problem for which has not undergone any experience how to deal with. The party committees and authorities also acquire incomplete awareness of the problem and its effects on socioeconomic development, causing their negligence in leadership and guidance as well as substandard institutional enactment;(ii) Incomplete and unstable organizational structure at the grassroots level; (iii) Limited capacity by officials in charge of population-family planning activities at the grassroots level; (iv) Reduction in budget allocation for the target program of population-family planning and the cessation of international aids; (v) The content and form of communicative, educational and advocacy activities is limited (much focus on family planning, no more forms of innovation) and absence of detailed categorization of target groups, areas with documentation being irrelevant to the specific context, etc.

Fourthly, the dissertation has stated a number of arguments (given the distinctive features of the object of state management, the subject of state management is not advised to impose its subjectivism or act arbitrarily; it is advised to exert gradual impact to regulate the social awareness, whereby forming new values and norms relevant to femininity and gender equality; it is advised to address the matter by taking into account socio-economic context, integrating the matter into development policies; it is not advised to view and address population problems solely on healthcare perspectives). At the same time, eight sets of solutions are proposed to the improvement of state management on sex composition at birth in VietNam, including: (i) Refinement of institutions and policies; (ii) Strengthening and stabilizing the organizational structure; (iii) Enhancing the capacity of population-family planning staffs at the grassroots level; (iv) Guaranteeing a sufficient financial resource and its proper allocation; (v) Enforcing, in an effective manner, legislations that prohibit fetal sex selection; (vi) Strengthening, innovating organization and management of communication, education and advocacy to direct behavior towards non-selection of fetal sex; (vii) Promoting linkage, coordination based on the own strengths of individual sectors in intervention activities to ensure sex balance at birth; (viii) Promoting socio-economic development as a precondition to enhance gender equality as a step towards balance of sex composition at birth.

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