

The Need for Social Worker Training in Some Hospitals in Hanoi 2024

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ABSTRACT

Objectives: Assess the need for training for social workers at some hospitals in Hanoi 2024.

Methods: A cross-sectional descriptive study was conducted on medical staff at Bach Mai Hospital, National Cancer Hospital and National Children's Hospital. Data were collected based on the toolkit developed according to Circular 43/2015/TT-BYT and Decision 32/2010/QĐ-TTg on developing social work in hospitals.

Result: Training needs: 53.7% of staff believe that social work in hospitals is very vital. Tasks such as welcoming, assisting patients, and providing information are highly valued. Required competencies: knowledge of law, social psychology, and social work methods are considered very important (42.1%).

Training Methods: Staff prefer to learn through presentations (55.7%), case studies (40.5%), and online learning (34.2%).

Conclusion: There is a huge demand for social work training in hospital (53.8%), especially in areas such as palliative care (37.5%), psychological counseling and patient support (28.7%). University (78.5%) resources are preferred. Most desired teachers are social work postgraduates.

Recommendation: Enhancing healthcare social work training, particularly in palliative care and psychiatric counseling. Developing and consolidating hospital social work departments with sufficient personnel and financial resources. Multiple instructional approaches and better teachers.

Keywords: Social Work; Hospital; Medical Staff; The Needs; Training; Hanoi

Introduction

The importance of social workers (SW) in the health system is recognized and developed worldwide. SWs help patients and their families access health services and improve treatment in hospitals. US and European studies show that SWs improve healthcare by providing psychological and social counseling and reducing patient stress [1]. To join the American Hospital Association (AHA), US hospitals must have a social work department, demonstrating its importance in the health system [2]. In Vietnam, hospital social work is growing but has several problems, especially professional competence. In Doan Kim Thang (2021)'s study at the National Children's Hospital and the Hanoi Traditional Medicine Hospital, SWs provided procedural support

to 21.5% of patients and 13.2% in emergencies [3]. Pham Tien Nam's research also demonstrates that Vietnamese hospital SW teams are undertrained, restricting their ability to help different patients [4]. Patients with high support needs are common in Hanoi's main hospitals. This study examines 2024 Hanoi hospital social worker training needs. It tries to identify SW professional competency gaps and guide SW workforce development to meet rising healthcare demands.

Methods

Research Subject

The study focuses on medical staff at several hospitals in Hanoi, as they are the group that interacts directly with social workers the most.

Inclusion Criteria: Medical staff agreed to participate in the study. Medical staff with at least 6 months or 1 year of experience in their department/ward. Staff working at the hospital during the study period

Exclusion Criteria: Staff on maternity leave, long-term leave, unpaid leave, or long-term study.

Study Duration and Location

Duration: Form October 2023 to October 2024.

Location: Selected departments at Bach Mai hospital, National Cancer Hospital, Viet Nam National Children’s Hospita, Hanoi.

Study Design

A cross-sectional descriptive design was used

Sample Size and Technique

$$n = Z^2 \left(\frac{a}{1-\frac{a}{2}} \right) \frac{p \cdot (1-p)}{d^2}$$

Where:

n: required sample size.

Z 1-α/2: 1.96 for 95% confidence level.

p = 0.5: estimated proportion (to maximize sample size).

d = 0.1: allowable margin of error.

Based on this formula, the required sample size is 97. To allow for a 10% loss, the sample size is increased to 121.

Sampling Method: Randomly select three departments from each hospital, prioritizing departments with the highest number of healthcare staff. The 121 samples are proportionally distributed across hospitals, with larger hospitals having more samples.

Evaluation Tools and Methods

Tools were developed based on Circular No. 43/2015/TT-BYT of the Ministry of Health and Decision No. 32/2010/QĐ-TTg by the Prime Minister approving the “Social Work Profession Development Project in Vietnam, 2010-2020” [5,6].

Data Analysis and Processing

Data will be processed and analyzed using Excel with descriptive statistics.

Research Ethics

The study only involves observation and interviews without direct interference in healthcare workers’ duties. Participants will complete self-assessment surveys via Google Forms, and assistance will be provided when necessary. Results will be shared with hospital/ department management after the study concludes.

Result

Describe General Information About the Research Subject

(Tables 1-5).

Table 1: Socio-demographic and occupational characteristics of the study subjects

Characteristic	Frequency (n)	Proportion (%)
Gender		
- Male	29	24
- Female	92	76
Age	34.5	
Mean (Min-Max)	(22-65)	
Workplace		
- National Cancer Hospital	34	28.1
- Viet Nam National Children’s Hospital	45	37.2
- Bach Mai Hospital	42	34.7
Working time		
- Under 1 year	14	11.6
- 1 to 2 years	13	10.7
- 2 to 5 years	20	16.5
- 5 to 10 years	32	26.4
- Over 10 years	42	34.7

Working time in the social work		
- Do not participate the social work	40	33.1
- Under 1 year	27	22.3
- 1 to 2 years	16	13.2
- 2 to 5 years	18	14.9
- 5 to 10 years	15	12.4
- Over 10 years	5	4.1
Work position		
- Doctor	37	30.6
- Nursing	39	32.2
- Social worker	36	29.8
- Nutritionist	5	4.1
- Public Health	2	1.7
- Activities direction	1	0.8
- Researcher	1	0.8
Major of graduation		
- Sociology	1	0.8
- Social work	7	5.8
- Public Health	7	5.8
- Preventive medicine	2	1.7
- General practitioner	30	24.8
- Specialist	6	4.9
- Nursing	36	29.8
- Bachelor of nutrition	5	4.1
- Pharmaceutical industry	4	3.3
- Others	23	19.0

Master's degree major		
- Sociology	1	0.8
- Social work	8	6.6
- Psychology	1	0.8
- Public health	4	3.3
- Preventive medicine	1	0.8
- General practitioner	8	6.6
- Specialist	20	16.5
- Nursing	20	16.5
- Nutrition	8	6.6
- Pharmacy	2	1.7
- Hospital management	2	1.7
- Master's degree in other fields	4	3.3
- Other and not yet master degree	14	11.6
- No master's degree	13	10.7
Average number of customers visiting in person in a business day		
- 0 to 5	13	10.7
- 6 to 8	18	14.9
- 8 to 10	18	14.9
- 11 to 20	12	9.9
- 20 to 50	24	19.8
- Over 50	35	28.9
- No contact with patients	1	0.8
Direct medical examination time		
- 5 to 15 minutes	46	38
- 15 to 30 minutes	53	43.8
- 30 to 50 minutes	13	10.7
- Over 50 minutes	8	6.6
- No contact with patients	1	0.8

Note: Comments: The youngest is 22 and the oldest 65, with an average age of 34.5. The majority are female (76%), while males account for 24%. National Children's Hospital has the highest participation rate (37.2%), while K Hospital has the lowest (28.1%). The highest proportion of participants has over 10 years of experience (34.7%), and 33.1% do not participate in social work. Most staff are nurses (32.2%), doctors (30.6%), and social workers (29.8%). Many earned nursing degrees (29.8%) and master's (16.5%). Over 50 patients (28.9%) have the highest contact rate, with 43.8% having 15-30 minutes.

Table 2: Need for training Bachelor of Social Work in hospitals.

No	Demand for training bachelors of social work	Strongly disagree n (%)	Disagree n (%)	Neutral n (%)	Agree n (%)	Strongly agree n (%)
1	Social work is necessary in hospitals.	14 (11.6)	0 (0)	7 (5.8)	65 (53.7)	35 (28.9)
2	Demand for human resources Bachelor of Social Work	14 (11.6)	2 (1.7)	15 (12.4)	62 (51.2)	28 (23.1)
3	Organizing social work departments	15 (12.4)	4 (3.3)	10 (8.3)	60 (49.6)	32 (26.4)
4	Need to build human resources for social work department	15 (12.4)	4 (3.3)	11 (9.1)	59 (48.8)	32 (26.4)

Note: Comments: Most questioned units reported a high demand for social work (SW) graduates in healthcare. The highest agreement rates were for the following activities: the necessity of SW in hospitals (53.7%), demand for human resources (51.2%), organizing SW departments (49.6%), and building a workforce for SW departments (48.8%). The “strongly agree” rates were 28.9%, 23.1%, 26.4%, and 26.4%, respectively. Some disagreed, with 11.6%, 13.3%, 15.7%, and 15.7% for the issues.

Table 3: Need for social workers in hospitals.

No	The role of social workers in health care	Very unnecessary (%)	Unnecessary n (%)	Undecided (%)	Necessary n (%)	Very necessary (%)
1	Welcoming, guiding, and providing information about hospital services to patients from the beginning	12 (9.9)	1 (0.8)	2 (1.7)	66 (54.5)	40 (33.1)
2	Inquiring about patients and their families to gather information	12 (9.9)	0 (0)	6 (5)	63 (52.1)	40 (33.1)
3	Providing emergency support for social work activities for patients who are victims of abuse, violence, accidents, or disasters to ensure their safety.	12 (9.9)	0 (0)	3 (2.5)	63 (52.1)	43 (35.5)
4	Assisting and advising patients on their rights, benefits, and obligations, as well as social policies and programs, including health insurance and social support for medical treatment.	12 (9.9)	0 (0)	5 (4.1)	64 (52.9)	40 (35.5)
5	Providing information and counseling for patients being transferred or discharged: supporting discharge procedures and referring patients to community support locations.	12 (9.9)	0 (0)	5 (4.1)	65 (53.7)	39 (32.2)
6	Coordinating and guiding volunteer organizations interested in hospital social work	12 (9.9)	0 (0)	4 (3.3)	66 (54.5)	39 (32.2)
7	Health communication and education for patients and implementing related activities	13 (10.7)	2 (1.7)	2 (1.7)	69 (57)	35 (28.9)
8	Serving as the hospital spokesperson and providing information to the press	12 (9.9)	1 (0.8)	9 (7.4)	64 (52.9)	35 (28.9)
9	Promoting the hospital’s image, services, and activities to patients	12 (9.9)	1 (0.8)	4 (3.3)	62 (51.2)	42 (34.7)
10	Disseminating government policies and laws related to medical services and hospital activities to medical staff, patients, and their families.	12 (9.9)	0 (0)	5 (4.1)	68 (56.2)	36 (29.8)

11	Organizing the implementation of the hospital’s code of conduct and feedback system.	12 (9.9)	0 (0)	6 (5)	65 (53.7)	38 (31.4)
12	Carrying out charity activities and soliciting, receiving funds and materials to support underprivileged patients.	12 (9.9)	0 (0)	2 (1.7)	63 (52.1)	44 (36.4)
13	Providing necessary patient information to medical staff to support treatment.	13 (10.7)	1 (0.8)	4 (3.3)	66 (54.5)	37 (30.6)
14	Participating in the guidance of social work practice for students from social work training institutions.	12 (9.9)	0 (0)	4 (3.3)	66 (54.5)	39 (32.2)

Note: Comments: The table demonstrates healthcare facility social work demand, with 33.1% saying welcome, directing, and providing medical service information is very necessary. Additionally, 33.1% stressed the importance of rights and health insurance policy consultation. 35.5% think emergency support for abuse victims is essential, while 9.9% do not. Discharge support and referrals are 53.7% necessary. Volunteer coordination is needed by 54.5%, and health communication and education by 57%. Service introduction and SW guidance had 51.2%–56.2% need rates. However, 10.7% said giving medical workers patient information was unnecessary, while 30.6% thought it was essential.

Table 4: Essential Competencies for Social Work Graduates.

No	Essential Competencies for Social Work Graduates	Very unnecessary (%)	Unnecessary n (%)	Undecided (%)	Necessary n (%)	Very necessary n (%)
Knowledge						
1	Possess a systematic understanding of Vietnamese laws on social issues; fundamental knowledge for social work practice; and knowledge of human psychology, society, and behavior	6 (5)	11 (9.1)	3 (2.5)	50 (41.3)	51 (42.1)
2	Apply basic knowledge of psychology, sociology, social work theories, and models, as well as professional social work methods in practice	7 (5.8)	10 (8.3)	3 (2.5)	52 (43)	49 (40.5)
3	Utilize supplementary knowledge to analyze, plan, support, and evaluate the problem-solving process for patients	7 (5.8)	9 (7.4)	3 (2.5)	51 (42.1)	51 (42.1)
4	Possess knowledge to research and develop different intervention models to assist individuals facing life challenges.	8 (6.6)	8 (6.6)	4 (3.3)	51 (42.1)	50 (41.3)
Level of autonomy and responsibility						
5	Have a sense of responsibility, professional ethics, and apply the ethical standards of social work in fulfilling the role and duties of a professional social worker	8 (6.6)	8 (6.6)	2 (1.7)	50 (41.3)	53 (43.8)

Note: Comments: Most respondents viewed knowledge as essential or very useful for social work graduates. Legal and psychological expertise were crucial for 42.1%. The application of professional social work expertise was important for 43% and very necessary for 40.5%. 42.1% said patient support analysis and planning was required, while 5.8% and 7.4% did not. 42.1% considered research and support models necessary, 41.3% very necessary, and 3.3% uncertain. Professional responsibility was very required for 43.8%, necessary for 41.3%, unsure for 1.7%, and unneeded for 6.6%.

Table 5: Training program content that health workers wish to participate in, teaching methods, resources and teaching staff desired.

Characteristic	Frequency (n)	Proportion (%)
Training program content that health workers want to participate in:		
- Introduction to social work	19	23.8
- Group social work	17	21.3
- Community development	21	26.3
- Individual consultation	17	21.3
- Social work with the elderly	15	18.8
- Social work with people with disabilities	9	11.3
- Social work with victims of trafficking	8	10
- Social work with drug Drug Addicts, Sex Workers, HIV/AIDS Patients	9	11.3
- School Social work		
- Palliative Care Social Work for cancer patients	6	7.5
- Hospital Social Work	30	37.5
- Psychological consultation practice	43	53.8
- Social work management	23	28.7
- Communication in social work	17	21.3
- Social work with children with special needs	21	26.3
- Social work in health care for the poor and ethnic minorities	12	15
- Graduation internship	15	18.8
- Social work practice with individuals	8	10
- Social work practice with groups	10	12.5
- Social work services	9	11.3
	17	21.3
Desired teaching method:		
- Presentations	44	55.7
- Seminars	17	21.5
- Case studies	32	40.5
- Internet	27	34.2
- Community fieldwork	5	7.4
Desired teaching resources:		
- Ministry of Labour, Invalids and Social Affairs	34	43
- Unicef	22	27.8
- FHI	13	16.5
- University/research institute	62	78.5
- Others	10	12.8

Desired Teaching Staff:		
- Postgraduate Social Work	55	68.8
- Postgraduate in Healthcare	34	42.5
- Postgraduate Psychology, Sociology, Education	44	55
- Others	7	9

Note: Comments: The most desired training content for healthcare workers is social work in hospitals (53.8%), palliative care for cancer patients (37.5%), psychological counseling (28.7%), and individual counseling (21.3%). From 10 to 26.3% of social work is with organizations, the elderly, the impoverished, special needs children, and trafficking victims. Teaching techniques preferred were lectures (55.7%), case studies (40.5%), and the Internet (34.2%). University (78.5%), Ministry of Labor (43%), and NGO (27.8%) resources are preferred. Most desired teachers are social work postgraduates (68.8%) and psychology/sociology (55%).

Discussion

Data shows that 53.7% agree the importance of training social work graduates in hospitals and 48.8% believe social work departments should be created. In industrialized countries like the U.S. and Europe, social workers in healthcare improve patient care, particularly psychological and social assistance [1]. The American Hospital Association requires hospitals in the U.S. to have social work departments [2]. Social workers in community healthcare broaden the network and encourage them to handle health concerns using suitable skills and strategies. Most Singaporean and Filipino hospitals have social work departments [2]. To acknowledge the importance of social work in hospitals, the Vietnamese Prime Minister announced Decision No. 32/2010/QĐ-TTg on March 25, 2010, approving a project to develop the profession from 2010 to 2020 [1]. The Ministry of Health approved a 2011 project to improve social work in healthcare to create a welcoming and effective workplace [6].

Additionally, Circular 43/2015/TT-BYT establishes hospital social work roles and organizations. This shows that the Party, State, and various levels of government are increasingly focusing on hospital social work [7]. Nguyen Thi Hang Phuong and colleagues (2021) published "Introduction to Social Work," a textbook on social work and hospital social work, providing an overview of global and Vietnamese social issues and laying the groundwork for social workers to shape and understand the profession [7]. Author Dang Kim Khanh Ly (2011) clarified personal and communal ties in hospitals [8]. Hospital social work research and development are popular worldwide and in Vietnam. However, 11.6% still don't appreciate or support hospital social work. Some people may not understand social work's relevance. In a 2019 survey of 500 hospitals nationwide, Pham Tien Nam and colleagues found that 100% of central hospitals, 96.14% of provincial hospitals, and 88.65% of district hospitals had social work departments or units. Only 64.29% of central, 44.22% of provincial, and 25.2% of district hospitals had full-time social workers.

Only a few people were trained in sociology and psychology, whereas most were hospital workers reassigned to social work [9]. Financial and staffing issues make hospital social work departments/units difficult to establish and maintain. According to research by Ngo

Anh Minh at Phu Tho General Hospital, money is crucial for the success of social work initiatives. Social work is more successful in hospitals with supportive leadership, high-quality staff, and enough investment [10]. Nguyen Thi Thanh Tung confirms that 30.8% of social workers are unsatisfied with their pay [9]. Many social work or allied majors avoid hospital social work units for this reason. Social work is unattractive due to its high workload, low pay, and little career advancement chances. Training programs, improved knowledge of social work, and management support in allocating resources and funds to build a sustainable working environment and improve healthcare efficacy are needed to solve this issue. The study found that most respondents understand social work (SW) in healthcare facilities, including supporting and advising patients and their families, communicating, and fundraising. However, 9.9% still undervalue social work, calling it "very unnecessary."

According to a study by Lý Tiểu Long at Phạm Ngọc Thạch Hospital, only 4.89 percent of healthcare workers had strong social work expertise, while the majority had average (20.98%) or low (74.13%) understanding. However, 52.21% had a positive opinion toward hospital social work and 51.29% behaved appropriately [11]. A study by Duong Thi Minh Thu found that 48.9% of healthcare workers in acute, chronic, and intensive care departments at the National Children's Hospital had average social work knowledge, but 80% had a positive attitude and 75.6% exhibited appropriate behavior when interacting with social workers [11]. Sample size, target group, and research location may explain study variances. This highlights the need for more research and social work training to improve healthcare staff' understanding and conduct, increasing patient care and support.

Social workers must know law, social psychology, and human behavior, with 41.3% believing it necessary and 42.1% highly necessary, according to the survey. Additionally, 42.1% believe social workers must have research expertise and be able to build intervention strategies to aid people with life problems. Meanwhile, 43% believe social workers must be able to apply psychology, sociology, social work ideas and models, and professional procedures. According to 42.1%, expertise is needed to analyze, plan, and implement patient solutions. In particular, 43.8% agree that social work graduates must be respon-

sible and follow professional ethics, which is crucial to their employment. This finding is similar to a 2014 Australian study that found hospital social workers need legal healthcare system and patient rights knowledge, crisis management abilities, and human behavior knowledge to provide counseling and psychological support [12].

The National Association of Social Workers (NASW) in the U.S. also reported that social workers need legal knowledge and research abilities, notably in patient rights and health insurance legislation. The main difference is that NASW promotes interdisciplinary collaboration with healthcare and mental health specialists to create patient care plans [13]. The study also found that social workers must follow professional ethics and base their ethical decisions on the NASW Code of Ethics [13]. Healthcare workers (HCWs) want to train in hospital social work, palliative care for cancer patients, psychological counseling, and individual counseling, according to a survey. In contrast to Nguyen Trung Hai's study, 57.4% of staff believe patient psychology training vital, while 54.1% acknowledge the significance of understanding patients' difficulties [14]. HCWs typically work in hospital social work and palliative care, which may increase their requirement for knowledge and abilities in these areas.

Conclusion

Social work training is valued in healthcare, with 53.7% saying hospitals need it. 51.2% support social work staff, 49.6% support social work departments, and 48.8% support staffing them. Regarding social work tasks, 33.1% find welcoming and providing medical service information very necessary, while 53.7% consider discharge support and referrals important. Health communication and education are important to 57%, while 35.5% value emergency support for abuse victims. Regarding social work graduates' competencies, 42.1% find legal and psychosocial knowledge very necessary, and 43% consider the application of social work necessary. Professional responsibility and ethics in social work are highly valued by 43.8%. Healthcare workers want to take hospital social work (53.8%), cancer palliative care (37.5%), and psychological counseling (28.7%) courses. They prefer lecture-based teaching (55.7%), case studies (40.5%), and online learning (34.2%). Most preferred teachers have postgraduate degrees in social work (68.8%) and psychology/ sociology (55%).

Recommendation

Increase social worker professional training: Bachelor's programs in social work should emphasize on palliative care, psychiatric consulting, and social work with specific patient populations. Establish and consolidate hospital social work departments: Social work

departments should have enough staff and resources to welcome, inform, and support patients and their families. Create specialized social work training: This program should cover legal, psychological, and practical social work abilities. Training must include ethics and professional standards. Presentations, case studies, and online learning should be used to fulfill healthcare staff's different learning needs. To assure high-quality training, employ teachers with postgraduate degrees in social work and related subjects like psychology and sociology.

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