HOSPITALLER ORDER OF SAINT JOHN OF GOD Province Of The Blessed Mary Of The Holy Spirit - Vietnam



SENSING GROUP PREPARING FOR THE GENERAL CHAPTER 2024

Research Topic 1

The Current Situation of Patients Who are Lacking Caregivers at the Apostolic Centers in Vietnamese Province

Research Topic 2

Current situation of pastoral care at the apostolic centers centers of the Vietnamese Province

Tan Bien, April 20, 2024

4. Evaluate results and current situation

Looking at the present situation of patients admitted to the clinics of the province of the St. John of God Order, namely the two large clinic centers, Thien An clinic and Thanh Son clinic, we see a real situation. In fact, the number of patients who have to hire someone else to take care of them, caused they have no family members to do this job (the care understood here as minimal care, such as washing, helping them a shower, etc. for patients) is 514 patients, a rate 33.8% of all inpatients. We have not counted the number of patients who have to go home because there is no one to take care of them (for many reasons).

In table 3.1b. represents the number of patients with strokes and spinal cord injuries compared to the remaining forms of the disease during inpatient stays. Note that this form of disease is a form of sequelae after a stroke or spinal cord injury such as broken bones, crushed spinal cord... These sequelae require a very long treatment, which can be calculated months or even years.

Table 3.2. Mention about the age of patients admitted to inpatients, the results of this table show that the age group from 15 to 64 years old admitted to inpatients is: 1597, accounting for 72.95%. This is the working age of society. In addition, the retirement age, that is, the age over 64 also accounts for 25.82% of the total number of inpatients.

The problem here is that the inpatients are patients who must be treated for a long time, which also means the costs will increase when treated for such a long time. Meanwhile, most of those patients are of working age. So the economic problem is a difficult issue.

Considering the factors affecting the situation of patients lacking caregivers, we can see some problems as follows:

The ratio of people who are unable to work to those who are able to work is 3:7 (in 2017 only). However, by 2022, this ratio will be approximately 1:1. Considering the population, we can see that Vietnam is still in the golden age of labor, but if we consider the growth rate of the dependent population, we can see the aging of the population. This comes from many factors, including the fact that the birth rate is decreasing, while life expectancy is constantly increasing.

In terms of economic issue, social security still focuses on retirees, but there are not many policies for those who are unemployed or who are in working age. In addition, the gap in social security between urban and rural areas is still a problem.

Looking at the average income per capita of 6.1 million VND/year, of which income from social security accounts for 4% equivalent to 264 thousand VND (in 2004), and increased to 6.7 million VND (in 2022). If compared with the number of patients entering the hospital who have to bring

family members to take care of them, or hire caregivers at a cost of 300 to 500 thousand VND/day, the patient must pay separately for the caregiver about 9 - 15 million VND/day, month. Looking at the whole picture, we can understand why the number of sick people without a caregiver is so high.

HOSPITALLER ORDER OF SAINT JOHN OF GOD PROVINCE OF THE BLESSED MARY OF THE HOLY SPIRIT - VIETNAM



SENSING GROUP PREPARING FOR THE GENERAL CHAPTER 2024

Research Topic 2

Current situation of pastoral care at the apostolic centers centers of the Vietnamese Province

Tan Bien, May 20, 2024

c. Evaluate the survey results.

After collecting and analyzing information from 19 questions of the questionnaire, we can provide results about the current pastoral care situation at the apostolic centres of the Province. This result will give us an overview of the present situation and suggest the effected solutions for the future.

• Advantages:

- In general, There are some pastoral care activities in all apostolic centres of the province, although they are still sporadic and have not received much concern (from the provincial definitery), fortunately patients who come and stay at the patients' residential house can recognise the presence of the Pastoral Care Department through its activities such as: organizing the meetings, sharing group, companionship, prayer sessions, mass and other spiritual activities to help patients feel at easy so that they may support for the treatment process. Apart from that, there are different ways to be and support to the patients (for example: the pastoral care staffs directly visiting, encouraging, cutting hair for patients, visiting patients every day, and inviting patients participate in feastdays ...)
- Patients almost participate and support pastoral care work. Furthermore, we have the detailed guidance documents of the Order on pastoral care for hospitals and parishes. The Province has also appointed a Pastoral Care Department for the entire province to provide the service for all the apostolic centres, this is a great point. Besides, the Province has all the means and environment for those are in charge of pastoral care to work most conveniently, but there is a lack of professional staffs at some centres. Fortunately, most of the patients trust in the province's apostolic centers so that they come for treatment, and that is a good opportunity for us to carry out the mission at right our centres, rather than to look for patients at other places like State hospitals, medical centers....

• Difficulties and Challenges.

Realizing that, through the questionnaire survey, the patients have somehow shown us more clearly many problems and difficulties as well as challenges for the Pastoral Care Department at the present and in the future. Therefore, the implementing of the pastoral care for mental and spiritual life at the apostolic centres of the Province is not simply about providing the services of mental health and spiritual life, but also requires the preparation and making efforts from responsible Departments and especially paying more attention to apostolic centres and communities. However, in reality, from

the survey results showed that implementing this ministry still have many challenges and difficulties, such as:

- Although there have been pastoral care services at apostolic centres, however, the
 implementing of this activity still have many difficulties and challenges because it has
 not yet been implemented comprehensively, lack of capable personnel and plans are
 still unclear...
- In some apostolic centres, pastoral care is not yet included in the plan and is not considered an important and worthy part to help patients getting well. This causes pastoral care not being prepared and concerned enough.
- In addition, there are also difficulties in terms of human resources and organization. Organizing pastoral care activities requires investment in human resources. However, currently, the Order's apostolic centres are having difficulty in training and do not have enough human resources to implement this service and pastoral care is not yet included as an indispensable part of entire apostolic centre.

Besides that, in the process of carrying out the pastoral care , we may also encounter many situations and challenges such as:

- Difficulty in accessing and understanding the role of people and pastoral care of mental
 health and spiritual life at apostolic centres, for example not being recognized in the
 structure organization of clinics as mentioned above, as well as the openness of
 sharing from patients...
- Lack of support and training to improve professional skills for the brothers and volunteers... in the pastoral care area.
- Pastoral care services are not appropriate to the needs and conditions of patients and apostolic centre. They do not have specific plans and programs.
- Lack of plans, programs as well as facilities and equipment to serve the pastoral care services for the mental health and spiritual life at the apostolic centres of the Province.

To solve these challenges and difficulties, I think we need solutions and support from the Province, Communities and the Apostolic Centres.

• The benefits of pastoral care for mental and spiritual life.

The pastoral care of mental health and spiritual life at the Province's apostolic Centres brings many benefits to patients, including:

- Improve mental and psychological health.

Mental and spiritual life plays an important role in balancing and improving the spirit and psychology of people, especially the sick. Pastoral care for their mental and spiritual lives at the Order's apostolic Centres helps patients feel more peaceful and secure, thereby helping them positively overcome their difficulties in life.

- Looking for peace and hope.

Spiritual life is also a place for people to look for peace and hope in life. At the Order's apostolic centres, patients can meet and share with people who share the same beliefs, thereby finding peace and hope in their souls.

- Support during disease treatment.

Pastoral care of spiritual life also helps in the treatment of illness. This has been proven through many scientific studies, when patients who receive spiritual care often have better progress and recover faster than those who do not receive spiritual care.

III. CONCLUSION:

The pastoral care of the mental and spiritual life at the Order's apostolic Centres is an important part of the comprehensive health care process for patients: "From the Weak Body, to the Immortal Soul". This helps bring perfection to both the body and soul of people in general and the patients who come to our services in particular, thereby helping them have a better life. With the mission of serving the poor and not refusing to help anyone, the Order has been a reliable address that brings Christ's mission of love and healing to those in need of being care, about mental, spiritual and religional life.