Challenges Encountered by Vietnamese Nurses When Caring for Patients With Cancer

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Providing holistic care is acknowledged as central to providing quality care for patients with cancer, but providing competent nursing care consistent with these approaches remains a challenge for nurses in Vietnam. Obstacles for Vietnamese oncology nurses include their low status, the limited scope of nursing practice, work overload in a hierarchical system, and cultural beliefs that view death and dying as taboo. Additional research to support oncology nurses in Vietnam must acknowledge the merits of improving nursing education as an important strategy for enhancing nursing autonomy, quality of care, and outcomes for the increasing number of patients with cancer in low- and middle-income countries.

Cancer is an increasing problem in Vietnam, with more than 125,000 people diagnosed each year, most at an incurable stage (International Agency for Research on Cancer, 2012). Despite the growing need for oncology care, Vietnam lacks adequate cancer treatment facilities, and a National Cancer Control Program is still in development (Vietnam Ministry of Health, 2015b). Because of the low awareness about cancer among the population and the absence of sufficient early diagnosis and appropriate treatment, mortality from cancer remains high (Ngoan Le, Lua, & Hang, 2007). The Vietnamese healthcare system is struggling to reduce the number of new cancer cases and to provide adequate care services for existing patients with cancer. With minimal staffing and limited resources—combined with caring for extremely ill and symptomatic patients—Vietnamese nurses face a number of barriers in providing quality care for patients with cancer and their families. This article will discuss key barriers for Vietnamese oncology nurses related to nursing status and cultural factors.

Nursing Status

In Vietnam, nursing practice has been significantly influenced by many years of war, with nursing care focused mainly on basic tasks, such as administering medications or performing wound dressings. This focus has generated a long legacy of ambiguity about the nursing role, which has resulted in varying standards for nursing care and societal expectations about how nurses should function professionally. Two main factors that contribute to the low status of Vietnamese nurses ascribed by the public include inadequate educational preparation and gender inequality and bias.

Educational Preparation

In Vietnam, only one nursing university exists; most nurses are trained in medical universities, colleges, or schools, which include nursing faculty. The current nursing workforce in Vietnam possesses varying levels of education, including a secondary certificate program (two years), a college program (three years), or a bachelor’s degree (four years). Most nurses (about 70%) in Vietnam practice with a secondary certificate (Vietnam Ministry of Health, 2009). Regardless of educational preparation and training, all nurses assume the same role in healthcare environments (Muc, 2009). In response, the Vietnam Ministry of Health (2015a) issued a governmental decision that, from 2021 onward, the healthcare system will only recruit college program– and bachelor’s degree–level nurses, and, by 2025, all existing secondary-level nurses must upgrade to higher education levels.