

CURRENT STATUS OF SOCIAL WORK IN SUPPORTING CHILDREN WITH SEVERE ILLNESSES AT THE NATIONAL CHILDREN'S HOSPITAL

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ABSTRACT

The study focuses on analyzing the current status of communication activities in social work to support children with severe illnesses at the National Children's Hospital. Through a mixed-methods research approach, including a quantitative survey of 200 caregivers of pediatric patients combined with in-depth interviews and group discussions with social workers, the study has clarified the level of implementation, forms of execution, and effectiveness of communication activities at the hospital.

The results show that communication activities are implemented diversely through various channels such as the website, fanpage, LCD screen system, patient clubs, and the hotline for consultation. The majority of caregivers of pediatric patients evaluate communication activities as necessary and very necessary, while also expressing a high level of satisfaction with the content and format of the communication being carried out. Communication activities have contributed to improving awareness, providing necessary medical information, and supporting caregivers during the treatment process for children with severe illnesses. However, the study also points out certain limitations related to the lack of complete statistics on the reach and effectiveness of communication for each specific target group.

Keywords: social work, pediatric patients, severe illnesses, communication activities

1.0 INTRODUCTION

Nowadays, both worldwide and in Vietnam, pediatric patients suffering from severe illnesses are considered a serious global issue (Anita V Arias et al., 2024). At the National Children's Hospital, in the first 6 months of 2024, on average, about nearly 4,000 pediatric patients came for examination each day and more than 2,000 pediatric patients received inpatient treatment (Report on Preliminary Review of Activities in the First 6 Months of 2024, Work Plan for the Last 6 Months of 2024), among whom a very large number suffered from severe illnesses such as: cancer groups, immunodeficiency diseases, kidney failure, liver failure, brain tumors, metabolic disorders, HIV..., pediatric patients and their families in this group often face many psychosocial issues (Government Inspectorate, 2023).

Based on paying attention to resources to promote and address issues in the lives of vulnerable groups, social workers have the task of empowering these target groups, helping them meet basic human needs (NASW, 2017). Accordingly, in the hospital, social workers have the task of providing activities to improve the relationships of patients/their families and their living

environment. From there, social workers develop the skills of pediatric patients and their families so that they are capable of coping with and solving their own problems during the process of outpatient or inpatient examination and treatment and after treatment ends (Saxe Zerden L et al., 2019).

Decision No. 112/QĐ-TTg of the Prime Minister on the social work development program for the 2021–2030 period was issued, helping social work in Vietnam to receive attention and development. In 2021, 100% of central-level hospitals, 97% of provincial-level hospitals, and nearly 90% of district-level hospitals established Social Work Departments/Units (Ministry of Health, 2021). In 2022, the Ministry of Health issued Decision No. 712/QĐ-BYT on the Plan for Developing Social Work in the Health Sector in Vietnam for the 2021–2030 period, aiming to develop social work in the health sector in a professional direction, approaching international standards.

The National Children's Hospital has been and continues to be one of the leading units in social work activities in hospitals. In 2011, the Social Work Department was officially established (predecessor was the Social Work Unit at the Hospital) and has implemented all 07 activities according to Circular 43/2015/TT-BYT of the Ministry of Health, becoming one of the model points in the northern region for other units and hospitals to learn from. At the Hospital, the role of social workers is to provide support, act as intermediaries, and provide education and guidance to target groups including pediatric patients, patients' families, and medical staff (Nguyễn Thị Huệ, Dương Thị Phương, 2020).

Social work in supporting children with severe illnesses at the National Children's Hospital” in order to clearly understand the current status of social work activities with children with severe illnesses at the National Children's Hospital; some factors affecting the implementation of social work activities at the Hospital. From there, the study proposes solutions to improve the quality of social work activities at the Hospital in general and social work activities in supporting children with severe illnesses in particular.

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2.0 RESEARCH METHODS

The study uses a combination of quantitative and qualitative methods to clarify the current status of social work activities in supporting children with severe illnesses at the National Children's Hospital. The quantitative study was conducted through a questionnaire survey with 205 caregivers of pediatric patients, of which 200 questionnaires were valid. In addition, the qualitative study was carried out through 03 in-depth interviews with patients' family members and the leadership of the Social Work Department. In addition, 03 group discussions were organized with social workers, medical staff, and the social work network in treatment departments. Quantitative data were processed using descriptive statistical methods on Excel software, while qualitative data were analyzed thematically to supplement and clarify the research results.

Characteristic		Gender					
		Male		Female		Total	
		N	%	N	%	N	%
Total number		67	100	133	100	200	100
1. Gender		67	33,5	133	66,5	200	100
2. Age group	< 26	3	2,3	7	2,7	10	5,0
	26-40	14	20,9	81	60,9	95	34,5
	41-55	45	34,4	36	21,1	81	27,5
	56 and above	5	4,3	9	5,1	14	6,0
3. Place of residence	Urban	40	59,7	45	33,8	85	42,5
	Rural	27	40,3	88	66,2	115	57,5
4. Education level	Completed grade 5	8	11,9	13	9,8	21	6,7
	Completed grade 12	41	61,2	85	63,9	129	41,0
	University	14	20,9	20	15,0	110	34,9
	Postgraduate	4	6,0	15	11,3	55	17,5
5. Occupation	Wage employment	25	47,6	43	32,3	68	34,0
	Business / Trading	11	26,2	11	8,3	22	11,0
	Self-employed	20	37,3	36	27,1	56	28,0
	Housewife	6	14,3	10	7,5	16	8,0
	Other occupations	5	11,9	33	24,8	38	19,0
6. Role in the treatment process for the relatives	Mainly responsible for paying treatment costs	33	49,3	25	18,8	58	34,0
	Partially supporting payment of treatment costs	11	16,4	34	25,6	52	21,0
	Mainly responsible for caring for the patient	5	7,5	55	41,4	197	24,4

Characteristic		Gender					
		Male		Female		Total	
		N	%	N	%	N	%
	Partially supporting care for the patient	5	7,5	5	3,8	8	5,6
	Mainly responsible for both paying costs and caring for the patient	13	19,4	14	10,5	69	15,0
7. Relationship with the patient	Grandfather/Grandmother	4	5,8	7	5,3	11	5,5
	Father/Mother	36	52,2	93	69,9	129	61,0
	Sibling (biological brother/sister)	2	2,9	4	3,0	6	3,0
	Cousin	5	7,2	2	1,5	7	4,4
	Aunt/Uncle (paternal/maternal)	22	31,9	27	20,3	49	26,1

Table 1: General characteristics of caregivers of pediatric patients

Data from the table below show that 33.5% are male caregivers and 66.5% are female. The total number of caregivers in the working age group under 55 accounts for a fairly high proportion (67%), the age group of male caregivers is concentrated in the 41–55 age range (accounting for 34.4%), the age group of female caregivers is concentrated in the 26–40 age range (accounting for 60.9%).

In addition, place of residence differs by gender of the caregiver: if pediatric patients have female caregivers, they often live in rural areas (66.2%), while pediatric patients with male caregivers often live in urban areas (59.7%). The majority of caregivers, whether male or female, have education level from grade 12 and above (41.0%); their main occupation is wage employment (accounting for 34%).

Caregivers of children with severe illnesses are mostly parents (61%); however, male caregivers often take main responsibility for paying treatment costs (49.3%), while female caregivers often take main responsibility for caring for the patient (41.4%).

According to caregivers, pediatric patients mainly suffer from severe illnesses concentrated in the main disease groups, including: Cancer, Organ transplantation (heart transplant, liver transplant, kidney transplant); Heart valve replacement surgery; Kidney failure; Liver failure; Systemic lupus erythematosus..., of which the highest proportion is cancer at 35%. 100% of pediatric patients have health insurance as the source of hospital fee payment; however, medical expenses for pediatric patients beyond hospital fees are quite costly. This point is similar to the research results “The burden of out-of-pocket medical expenses and financial protection in Vietnam from 1992–2014” by Hanoi University of Public Health (Hoàng Văn Minh, 2014).

3.0 RESEARCH RESULTS

Communication is an activity organized and implemented by the Department through the regular medical knowledge column on the website, through the LCD screen system, Patient

Club, consultation via hotline number 0865.879.879, and consultation for patients via the Hospital fanpage ... are among the contents that the Department has deployed.

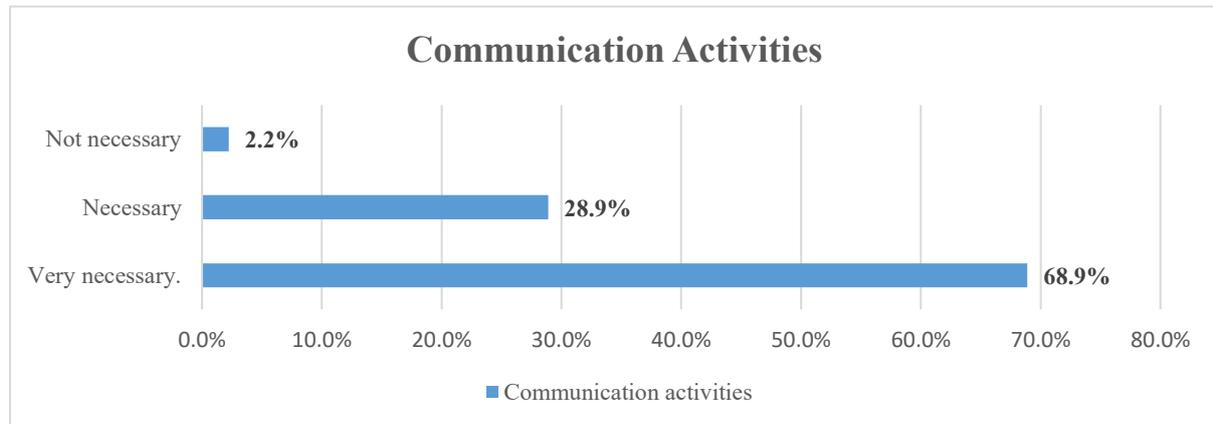


Chart 1: Caregivers’ assessment of the importance of communication activities

In reality, communication activities are content under the Communication – Press Relations section managed by the Department. According to the participants’ evaluation, 97.8% of respondents stated that this activity is very necessary and necessary. The study conducted group discussions with social workers and received the following responses:

Over the past year, the Department has always taken pride in being the unit that has hosted hundreds of press delegations annually to cover the hospital's activities, provide health education communication to the public, and highlight advanced medical techniques as well as challenging cases at the Hospital.

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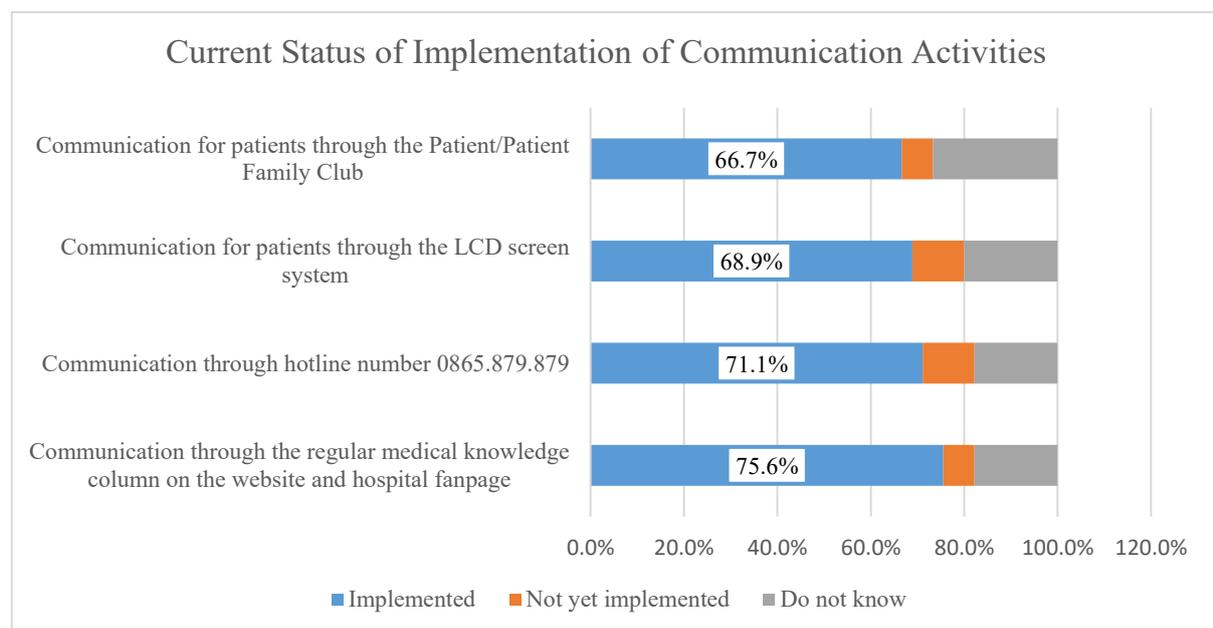


Chart 2: Current status of implementation of communication activities (according to evaluation by caregivers of children with severe illnesses)

From Chart 2, it can be seen that most communication forms have been accessed by caregivers and implemented systematically at the Hospital (over 65%). Among them, survey participants reported that the implemented activities include: Communication through the regular medical knowledge column on the website, Hospital fanpage (75.6%); Communication through hotline number 0865.879.879 (71.1%); Communication for patients through the LCD screen system (68.9%); Communication for patients through the Patient/Patient Family Club (66.7%). The results of group discussions with social workers show:

The hospital serves a very large volume of pediatric patients for both outpatient examinations and inpatient treatment. Although we have not yet compiled statistics on the exact number of pediatric patients or caregivers of children with severe illnesses who have received health education and communication, during the past year we maintained 15,197 hotline consultations via the number 0865.879.879 and 12,825 consultations through the hospital’s fanpage. These remain the primary channels enabling children with severe illnesses and their caregivers to access relevant health information and guidance on care at the hospital.

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Level of Satisfaction with Communication Activities at the Hospital

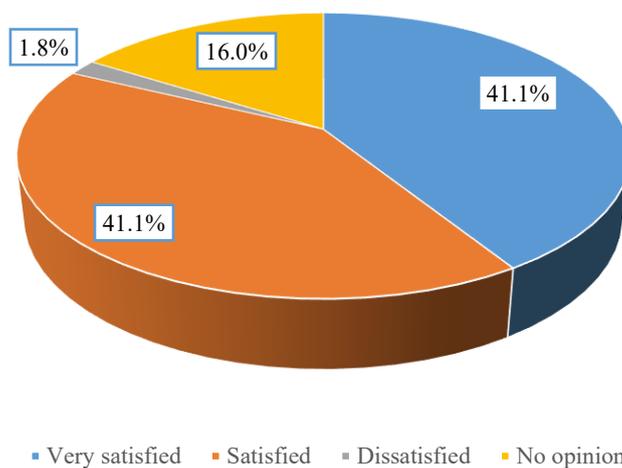


Chart 3: Evaluation by caregivers of children with severe illnesses regarding satisfaction with communication activities at the hospital

Overall, in reality, patients’ families and patients evaluate the communication activities that have been implemented; the majority of survey participants are satisfied and very satisfied with these activities (82.2%) (see details in Chart 3). The results of group discussions with social workers show:

4.0 CONCLUSION

The study has clarified the current status of implementing communication activities in social work to support children with severe illnesses at the National Children's Hospital. The results show that communication is one of the activities organized regularly, diverse in forms, and plays an important role in providing information, improving awareness, and providing psychological support to caregivers of pediatric patients during the treatment process.

Through channels such as the website, fanpage, LCD screen system, patient club, and consultation hotline, communication activities have helped caregivers of pediatric patients promptly access information related to the examination and treatment process, health care, and risk prevention. The majority of caregivers highly appreciate the necessity and effectiveness of communication activities, while also expressing a high level of satisfaction with the content and implementation methods at the hospital.

However, the study also shows that communication activities still have some limitations such as the lack of a complete tracking and evaluation system for the level of reach and impact of each communication channel on different target groups; the statistics on the number of pediatric patients and caregivers benefiting from communication are not yet consistent. These limitations somewhat affect the overall effectiveness of communication activities in social work at the hospital.

From the research results, it can be affirmed that continuing to improve and enhance the quality of communication activities in social work is a necessary requirement, contributing to more effective support for children with severe illnesses and their families, while also improving the quality of medical services and patient satisfaction at the National Children's Hospital.

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