

Cultural Report: Vietnamese Culture

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The phrase, history repeats itself, has often been used a lot in history. Lately, it has never been more true given recent world events as the last U.S forces pulled out of Afghanistan on August 30th, 2021, after twenty years of bitter fighting. In the end, the enemy stood victorious over a country that now belongs to them, leaving thousands of refugees desperately clinging on to the last U.S aircraft to take them to a safer home. History would prove itself again, as a similar scene took place about forty years ago on April 30th, 1975, at the end of the Vietnam war. During this time, the last U.S forces pulled out of Vietnam while frantically doing their best to take in as many fleeing South Vietnamese to America as possible after Saigon fell to the Communist North Vietnamese (Tran et al., 2019). The Vietnamese refugees that made it to America became the first generation of Vietnamese to set foot in the United States (Tran et al., 2019).

While only a tiny handful of 125,000 Vietnamese refugees escaped initially, more and more would be slowly brought into the U.S from 1975 to 2000, bringing over almost half a million Vietnamese refugees into the United States (Tran et al., 2019). Most of the Vietnamese refugees would reside in California and Texas; however, in the present day, their descendants settled in other states, including Illinois. Locally, there is an estimate of 1,278 Vietnamese living within the Champaign county of Illinois, which makes up 6.51% of the entire Asian population in the county (USA.com, n.d).

The first generation Vietnamese widely associate themselves with Buddhism and believe in spiritual enlightenment through conscious living by developing their wisdom, morals, and meditation (Swihart et al., 2021). Meditation is a significant aspect of Buddhism as it helps clients become in tune with their minds and spirits (Tran et al., 2021). Unfortunately, mediation

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requires plenty of focus, and so the hospital staff should be mindful of how loud the hospital floor is and limit any noise or disruptions (Tran et al., 2021). The dying process is also integral and meticulously crucial as it helps the person prepare for the next life. So the usage of opioids and analgesics must be carefully communicated with the client before administration as it can affect the spiritual goals of the client (Tran et al., 2021). It is generally okay to administer medication as long as it does not affect the client's state of mind and level of consciousness (Swihart et al., 2021). Regarding pregnancy, it is frowned upon within the religion to abort a baby, as many believe that taking a life is wrong in all forms (Swihart et al., 2021). In addition, the anesthesia used in epidurals may conflict with some Vietnamese clients depending on their level of spirituality, so it is essential to explain what anesthesia is and get her consent before administering it.

Those Vietnamese individuals that participate in Buddhism practices view pain and suffering as a natural and necessary aspect of life and accept it (Tran et al., 2021). A religious specialist typically does chants to help comfort the client (Tran et al., 2021). It is also not uncommon for the Vietnamese culture to consider that the cause of pain and illness is due to supernatural or spiritual forces (Tran et al., 2021). In addition, some Vietnamese believe that pain is also caused by the imbalanced "cold" and "hot" vital forces in the body, which are affected and altered by dietary changes, cupping, coining, pinching, steaming, acupuncture, and using herbs (Tran et al., 2021). While it is unknown why certain foods are considered "hot" or "cold" for the body, many people believe that food widely considered unhealthy is hot for the body as it can cause inflammation. So greasy fried or overly sweet food items are commonly bad food that puts the body in a "hot" state (Tran et al., 2021). Vietnamese clients often believe that the Western health system should immediately provide them with symptom relief and a cure.

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When the client does not get any medication prescriptions, Vietnamese clients usually seek care elsewhere or discontinue medications when their symptoms are gone, as many mistakenly perceive the lack of symptoms to being cured (Tran et al., 2021). It would benefit the client to provide education on adhering to the medication schedule and finish it. Acknowledging pain is also discouraged in the Vietnamese culture. A strong emotional response, such as crying, is looked down upon as the Vietnamese culture perceives it as a sign of weakness (Tran et al., 2021). Healthcare professionals will need to encourage the Vietnamese client to express these feelings of pain as it is normal and will also have to look out for nonverbal signs of pain when assessing the client for pain.

Vietnamese families may vary in size; however, they all always emphasize the recognition of one's debt to the previous generations and highly respect their elderly for their sacrifices and role in providing for the family (Tran et al., 2021). The dynamic of the Vietnamese family is usually nuclear but includes the elderly, who commonly live with the family until they die (Tran et al., 2021). A sense of social harmony is essential in the Vietnamese household, and knowing one's place within the hierarchy and social structure. Decision-making, in most matters, usually goes to the oldest male of the family, and family members do their best to prevent conflict between family and especially towards the older generation in order to maintain a sense of social harmony (Tran et al., 2021). It is vital to reassure the Vietnamese client that she has complete control and decision-making of her labor process as a nurse.

The Vietnamese household often is male-dominated and hierarchical as a norm. Women carry out the caregiving role to the family (Tran et al., 2021). The caregiving role is traditionally not viewed as a burden. It is a role that many usually take with pride in knowing that the wellbeing of the family rests on the female caregiver (Tran et al., 2021). Women are allowed to

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speak to strangers and have freedoms enjoyed by many in the American household, except that family decision-making usually falls on the oldest male individual in the family (Tran et al., 2021). Healthcare members will have to remember to pay attention to the Vietnamese client's nonverbal sign of pain as it is discouraged to express pain. In addition, the nurse will have to pay attention to the client's potential language barrier when assessing the Vietnamese client.

The Vietnamese culture often includes a high intake of fruits, vegetables, fish, other red meats, and white rice in their diet, with rice being a staple in meals (McCrary et al., 2017). Aside from the role of sustenance, food in the Vietnamese culture also has symbolic and spiritual implications since loved ones leave food on altars as offerings to previous ancestors (Tran et al., 2021). The same food used in offering the ancestors is then eaten and shared with the rest of the family as it is believed to have been blessed in return and provides good luck, fortune, prosperity, and divine benevolence (Tran et al., 2021). In terms of pregnancy, it is crucial to assess the client's diet at home to see if she is missing any crucial nutrients for birth and labor.

The Vietnamese people have endured hardships on their way to America. Many sacrificed and left behind their lives, family, and friends to find safety and escape their new regime. However, they did not come entirely empty-handed as they brought their traditions and stories with them. While some aspects of the Vietnamese culture may seem unorthodox and counterproductive to the Western idea of health care, exploring more of the unique needs and differences of the Vietnamese culture may provide opportunities for American health care to improve and become more culturally aware. For example, the Vietnamese culture is meticulous with what they eat as they are concerned that it may affect their hot and cold balance. Asking the client what foods she prefers in this situation may help give the healthcare team an idea of what she needs in her diet and what she likes to eat. It would also be an excellent opportunity to ask

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the client if she takes any herbal products or practices alternative treatment at home that may affect her hospital treatment. The nurse should also make sure that no medical treatments conflict with the client's religious beliefs. This acquired cultural awareness may help provide more culturally competent care, positively impacting the quality of care provided in the future.

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