

# Current Status of Elderly Social Support Services in Elderly Care Centers in Hanoi

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## Abstract

The Article aims to elaborate and analyze the current status of social support services for the elderly in general and semi-professional social work services provided in care centers in Hanoi in particular today. The centers subject to the investigation include Social Protection Center 3 Hanoi, Dien Hong Nursing Home, Bach Nien Thien Duc Elderly Care Center, and Social Protection Center 2 Hanoi. The service performance is determined based on the satisfaction of the needs of the elderly group. The results evidence that from the point of view of the elderly, “the need for medical care, examination and treatment is the highest among other needs of the elderly (with 149 votes, taking up 64.2%), from the point of view of social support workers, the need for “someone to share their feelings” is the highest (with 144 votes, taking up 77.4%). The services subject to assessment and review to the extent of the Article include (1) Consultancy; (2) Legal aid; (3) Supporting the elderly in the integration; (4) Communication. The frequency of rendered services changes at the “sometimes received by the elderly” level, approx. 50% on average. The level of performance as assessed by the elderly and social workers is at a medium and quite high level, ranging from 2.26 to 3.30 and from 1.98 (high) to 3.1 (medium), respectively.

**Keywords:** the elderly, social support services, care centers

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## INTRODUCTION

Vietnam’s population has been “aging” since 2011 when the elderly (60 and older) accounted for 10% of the total population. Since then, the population-aging rate has been increasingly rapid. Considering the General Statistics Office of Vietnam’s report, by the end of 2017, Vietnam had about 11,313,200 elderly people (making up approx. 11.95% of the total population), including about 1,990,000 people aged 80 years or older (making up 17.75% of the total elderly); 5,734,900 female elderly people (making up nearly 50.7%); 7,293,600 rural elderly people (making up 64.4%). It is predicted that by 2038, the proportion of elderly people in Vietnam is likely to increase to 20%, twice higher than that of 2011, turning Vietnam into a country with an aging population.

Regarding handling the concern of “population aging”, many challenges have been posed to countries around the world. In Vietnam, the increasing proportion of elderly people puts higher pressure on the social security system. It entails the new policies to be established for the elderly group. Among the solutions to supporting the social security system, the establishment of elderly care centers in the community is one of these. Centers under the public and private systems are under construction in many forms and many places to support and care for the elderly.

This study focuses primarily on investigating the elderly care centers in Hanoi in terms of the service systems provided to the elderly group and their families. The study aims at revealing the social support services systems for the elderly at present in centers, assessing the pros & cons of the realization of such service systems, based thereon, recommending some solutions to develop and improve the quality of the service system in the future. The study is of remarkable practical significance, giving general assessments to improve, develop and increase services for the elderly. Additionally, the study aims at solutions to improving service performance to diversify and meet the needs of the elderly group more sufficiently, and build better living conditions for the elderly, especially those who demand to live in the elderly care centers. The centers involved in the investigation include Social Protection Center 3 Hanoi and Social Protection Center 2 Hanoi as the representatives of public centers, and Dien Hong Nursing Home and Bach Nien Thien Duc Elderly Care Center as the representatives of private centers).

## 2. Methodology

### 2.1. Statistical method using SPSS.22.0 software

After the practical investigation of two target groups of Elderly and Social Support Workers, the questionnaire is coded and included in statistical reports, and the relevant data are entered into SPSS software. For the accurate assessment of the service performance, two target groups are rated using a 1-5 scale: 1 represents “very effective”; 2 represents “effective”; 3 represents “medium”; 4 represents “less effective”; 5 represents “ineffective”;

Statistical results are analyzed using the following scale:

- From 1.0-2.5: The influence of factors is at a high level
- From 2.5 to 3.5: The influence of factors is at a medium level
- From 3.5-5.0: The influence of factors is at a low level

**Area of study:** 04 representative elderly care centers in Hanoi, including 02 public centers and 02 private centers are selected to be included in the study on social support services. During the site survey, the research students were present at three facilities of the Dien Hong Nursing Home, three facilities of Bach Nien Thien Duc Elderly Care Center, Social Protection Center 3 Hanoi, and Social Protection Center 2 Hanoi, reaching 08 facilities in total subject to the site survey.

**Target participants of the study:** 232 elderly people and 186 social support workers.

## 3. SURVEY RESULTS AND DISCUSSION

### 3.1. General needs of the elderly living in care centers at present

The performance of social support services for the elderly at present is assessed to a certain extent based on the satisfaction of their needs.

No	Needs	Elderly		Social support workers	
		Total	%	Total	%
1	Need for policy advice	56	24,1	67	36,0
2	Need for material support	75	32,3	70	37,6
3	Need for care, medical examination and treatment	149	64,2	130	69,9
4	Nutritional needs	87	37,5	102	54,8
5	Need for counseling, psychological counseling (individual, family)	107	46,1	116	62,4
6	The need to have someone by your side to share your feelings	102	44,0	144	77,4
7	The need to practice sports	65	28,0	95	51,1
8	The need to join support, entertainment and entertainment groups	104	44,8	128	68,8
9	The need to participate in social activities outside the community	90	38,8	97	52,2
10	Spiritual needs (going to temple, going to ceremony...)	85	36,6	97	52,2
11	The need to provide information on accessing social support services for the elderly	40	17,2	87	46,8
12	Other needs	5	2,2	5	2,7

The top need taking up the highest proportion today is medical care, examination, and treatment. The number of elderly people and social support workers reflecting this need is 149 and 130, respectively, accounting for 64.2% and 69.9%, respectively. The majority of elderly people experience problems in their physical health. The rate of the elderly with chronic diseases is quite high, and almost all the elderly need health care at all times. That is partly why many old parents/grandparents are sent to the centers to enjoy regular and daily care.

The need, rated second from viewpoint of the elderly, but first as rated by the social support worker group, is “having someone to share their feelings”, noted by 102 and 144 elderly people and social support workers, respectively (accounting for 44.0% and 77.4%, respectively). It is also the common aspiration of a significant number of people. Some elderly people feel very lonely, so, need someone to share their feelings.

In addition, the consultancy on policies is probably demanded as well but not a priority of the elderly and their families, as noted by 56 and 67 elderly people and social support workers, respectively, (accounting for 24.1% and 36.0%, respectively). That is partly because upon entering any public center, most of the elderly receive state subsidies, so, have no many doubts or questions. In the public center, the officers and staffs all give quite exhaustive advice to the elderly and their families on the State's support policies as well as basic and supportive care services for the elderly intending to live in the center. For private centers, before entry, the elderly receive specific advice on services, policies, and fees for those services.

Only 40 participants, accounting for 17.2% of the elderly, select the need for “information on accessibility to social support services for the elderly”. The likely reason is that the elderly who adapt to life in centers pay little attention to external social activities.

### 3.2. Social support services for the elderly living in care centers at present

The level and frequency of social support services to be received by the elderly have been investigated and revealed based on the viewpoints of the elderly and social support worker groups. Both have their assessments of the performance of the services received by the elderly people living in Care Centers at present. Specifically:

#### a. Consulting and counseling services

Consulting and counseling services act as one essential task and services, especially for the elderly group living in the centers. Consulting and counseling are carried out in several aspects, such as providing information about the elderly and their families in need, advising on various support policies of the State as well as general regulations of the centers to facilitate the suitable selection of the elderly and their families. The frequency of providing consulting and counseling services are presented.

According to the data shown in the table, consulting on health care and examination is at the highest frequency, as noted by up to 102 participants (accounting for 44.0%). Close attention is also paid by centers to the assessment of the needs of the elderly, a necessary issue. In addition, when an elderly person is likely to be hospitalized, the social support worker has involvement and accompanies to care him/her to medical facilities. As a result, regular hospital care and care in need are noted by 99 and 115 participants, respectively, (accounting for 42.7% and 49.6%, respectively).

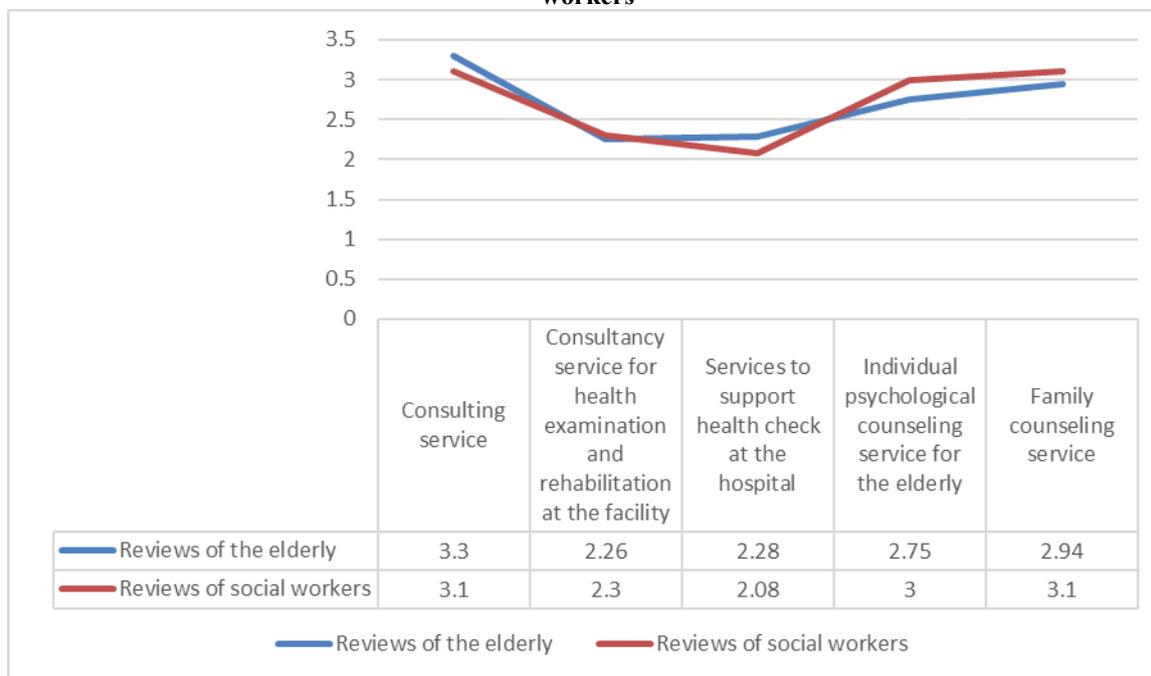
Only 21 and 18 participants (accounting for 9.1% and 7.8%, respectively) claim that they did not receive health care and hospital care services, respectively.

Consulting and counseling services for elderly individuals and their families are, for the most part, at a “sometimes” level. Consulting for elderly individuals and their families is received by 100 and 93 participants, accounting for 43.1 and 40.1%, respectively.

According to the assessment of the group members, 66.7% affirmed that the service “on-site consulting for medical care and examination and rehabilitation” is performed regularly, which is in line with interviews. Health checks and assistance of the elderly in taking medicines or periodic health assessments are among the day-to-day duties of the worker. In this regard, the investigational team also assessed the performance of consulting services.

In addition, from the perspective of social support workers, the frequency of consulting and counseling services is slightly different.

**Chart 1: The effectiveness of counseling and counseling services as assessed by the elderly and social workers**



Regarding the level of performance, such services are rated at the nearly medium rate of 3 by the elderly. Thus, virtually, many elderly people have appreciated the support of social support workers in psychological counseling services not more highly than that in health care counseling services both for elderly individuals and their families.

#### b. Legal aid service

Legal aid, one of the social work services, is crucial for the elderly and their families. The legal aid services for this group of specific clients involve “assistance in the procedures for entry to and exit from centers” and “rendering of legal consultancy on inheritance, transfer, and property settlement”. The services are designed to

provide a deeper understanding to the elderly of the provisions of the applicable law as well as the regulations of the centers where the elderly expect to live. Legal aid brings higher assurance to the elderly and their families in terms of legal issues as well as quick procedures for the life of the elderly in the centers.

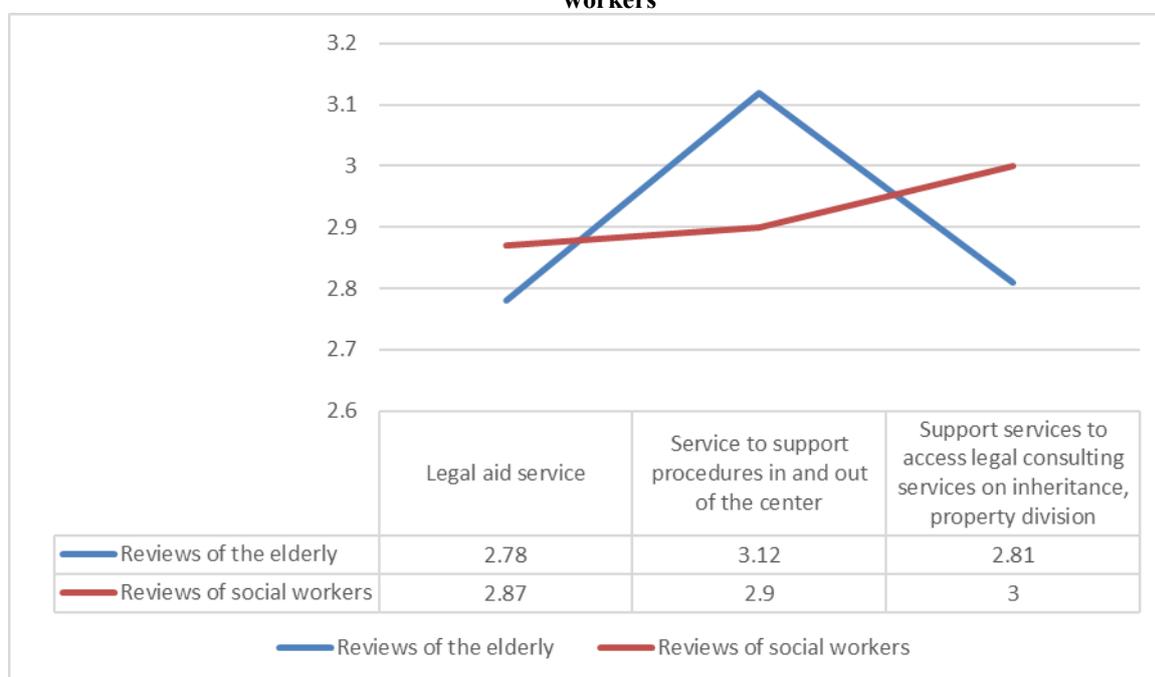
In general, the frequency of rendering of legal aid service is rated at “sometimes” as the highest level, of which “assistance in the procedures for entry to and exit from centers” is at the “sometimes” level as noted by 97 participants (accounting for 41.8%) while rendering of legal consultancy services on inheritance and property settlement is noted by 89 participants (accounting for 38.4%). This figure reflects closely the facts obtained by the research students during an in-depth interview with centers’ leaders.

Based on that, legal support services are rated “good and effective” for the elderly in need. Thanks to this, the elderly feel more secure living in the centers as their concerns about disputes/inheritance are thoroughly resolved.

From the perspective of social support workers, the rate of elderly people receiving advice on legal aid ranges more than 50%, at a medium level.

The social support workers said that the rate of the elderly receiving legal aid service is approx. 52.2% on average. The rate of the elderly receiving “regular” aid in “assistance in the procedures for entry to and exit from centers” and “rendering of legal consultancy services on inheritance and property settlement” is 37.6% and 40.9%, respectively. The rate of the elderly receiving no such service is just under 10.

**Chart 2: The effectiveness of counseling and counseling services as assessed by the elderly and social workers**



**c. “Supporting the elderly in the integration” service**

“Supporting the elderly in the integration” service is one of the distinct activities of social work at present. During living in care centers, many problems and troubles are posed to the elderly people such as troubles in relationships with other elderly people, disagreements with care workers, and lack of attention from their families. These pose challenges to the elderly people in integration into and interaction in a new environment. Therefore, the social support work group should pay much attention to providing the “supporting the elderly in the integration and building relationships” service during their time in these centers.

The “supporting the elderly in the integration into the life in centers” is “sometimes provided” or at a quite high level, as noted by 80 participants (accounting for 34.5%). It is a regular and important task of social support workers to ensure a harmonious and happy environment for the elderly. Regarding the integration support activities, the rate of elderly people with the answer “not provided” was quite low. The “Supporting the elderly in entertainment activities” is noted by 31 participants (accounting for 13.4%), at the lowest level.

As assessed by the social support worker group, the “provided” rate of the “supporting the elderly in the integration” service (both “regularly” and “sometimes”) is higher than 60%, at quite a high level. It is an essential service to support the elderly in integrating into the living environment in the centers.

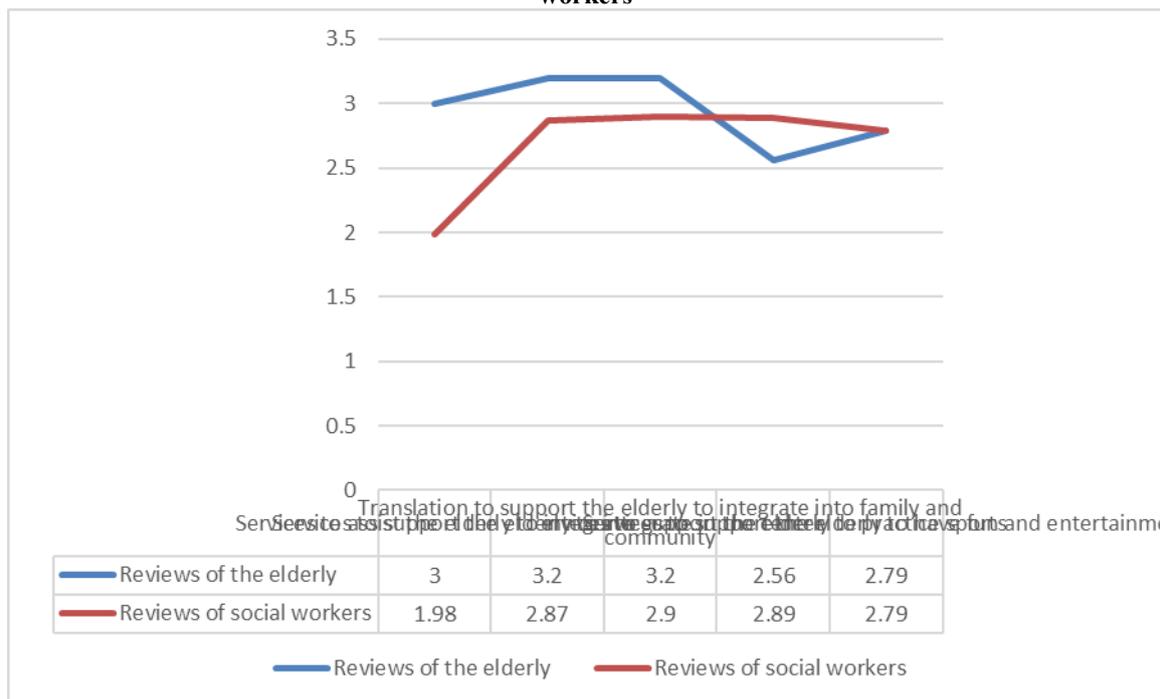
In addition, according to the statistical table, the “not provided” rate of “supporting the elderly in the integration” service as assessed by social support workers was less than 23%, not at a high level. However, the frequency, as well as the performance of such services, appear desirable to be increased to meet the requirements

of the elderly group living in the centers.

The performance of the “supporting the elderly in the integration into the life in centers” service is not at a high but medium level. Compared with the other four services in question, the performance of such services is still limited and lowest according to the elderly’s assessment. A part of the reason for that is figured out when the study team discussed and conducted in-depth interviews with elderly people. The elderly interviewees said that a lot of problems arising in connection with the fact that many elderly people living together in a room have not been considered and resolved by social support workers.

In addition, some elderly people also suggested that the leadership and social support work groups need to organize group activities for elderly people, listen to their opinions, and create favorable conditions to better support the life of the elderly.

**Chart 3: The effectiveness of counseling and counseling services as assessed by the elderly and social workers**



Thus, it can be seen that group activities with the correct procedures and topics are well-organized nearly at neither public nor private centers due to the health status of the elderly and the insufficient number and limited qualifications of staff.

#### d. Communication service

Communication is a community-oriented activity. In the centers, communication services are conducted with the aim of introduction of facilities and services, provision of information, reduction of discrimination, or resource mobilization. The activities play a crucial role in disseminating the advantages of elderly care services, raising awareness of the community, and attracting more elderly people and families to enjoy the services.

One of the key restrictions on the elderly’s access to and use of services is the discriminatory views, attitudes, and thoughts about that in facilities and centers. Today, significant prejudices against sending old parents/grandparents to care centers remain in the family and community. In addition, for their better understanding of necessary issues on sending the elderly to live in centers, communication about the right of the elderly and their families to access the information is also very important. It can be conducted in many forms such as communication on television, newspapers, leaflets, loudspeakers, and especially on the internet, and integrated into activities close to the elderly in the community and families such as residents’ meetings and community activities.

For communication on the introduction of care facilities and services, with the aim of the long-term existence and development of services, the *regular* rate is noted by about 71 participants, accounting for 30.6%. Most care centers have their websites, fan pages, zalo, etc. According to the general assessment, communication regarding the introduction of care facilities and services in private centers is at a higher level than that in public centers. The reason is that most of the public centers are State-sponsored and funded by the State for care activities for the elderly, so insignificant attention is paid to communication about services. The entry and exit procedures and the living conditions for the elderly in public centers are also different from those in private ones. Most of the elderly intending to live in public centers must undergo the document selection and subject review,

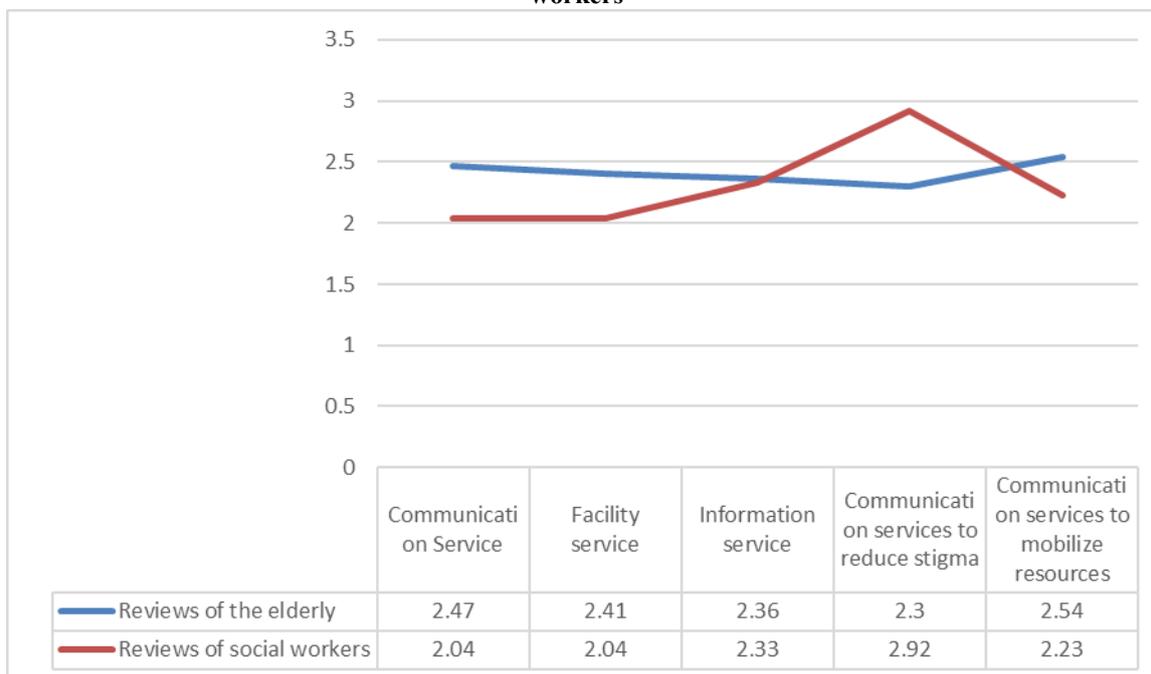
then, be transferred in if they are eligible. Communication activities of public and private centers are also significantly different due to different purposes and recipients.

Communication on resource mobilization is “sometimes provided” as noted by 158 participants (accounting for 68.1%). For the care services for the elderly in the community, many elderly people face material difficulties so, need a unified contribution. Mobilizing resources from the community or agencies and organizations represents humanity and the sharing of people in society.

In addition, according to the assessment of the social support workers, the “not provided” rate of communication services is quite low, mostly less than 2%, except for those regarding rights and obligations of care and reduction of discrimination against the elderly (21.5%).

As assessed by the social support workers, the “sometimes provided” rate of communication services, ranges from 30.6% to 37.1% while the “regular” rate ranges from 44.6% - 68.8%. In their opinion, communication services at the facilities are still provided; however, the rate at private centers is higher than that at public centers as assessed by the social support workers.

**Chart 4: The effectiveness of counseling and counseling services as assessed by the elderly and social workers**



The performance of the communication service is rated higher than the medium level. The most effective is the facility/center communication services (at 2.41- as rated by the elderly group, 2.04 - as rated by the social support worker group. According to the elderly's assessment, the performance level of communication service for resource mobilization is 2.54, the lowest level.

**e. Satisfaction of the elderly living in care centers with social support services**

For the accurate assessment of the services and their performance, the investigational team further inquired about the satisfaction of the elderly. The “normal”, “satisfied” and “unsatisfied” level is rated by 95, 90, and 47 participants, respectively, (accounting for 40.9%, 38.8%, and 20.3%, respectively). (See Table 15).

Elderly people believe that life and support services in the centers are “normal” since their needs (mainly, material, food, accommodation, and daily activities) are partially satisfied while no attention is paid to their needs for psychological support.

Besides, the number of elderly people who are not satisfied with the services in the centers accounts for 20.3%. In their opinions, the services are adequate, but some service fees are high (as noted by 68 participants, accounting for 29.3%), the number of workers is insufficient, and the key staffs have professional qualifications in nursing, nurse, and rehabilitation, who are unable to take care and support fully the elderly, especially in consulting and counseling services. Therefore, the “unsatisfied with workers” rate as assessed by the elderly people is quite high, for, including but not limited to, the reasons of limited expertise (as noted by 103 participants, accounting for 44.4 %), or unconcern of workers (as noted by 101 participants, accounting for 43.5%)

**3.3. Discussion**

Currently, social support services for the elderly have been implemented in care centers. Compared with social

work services, social support services are being gradually improving but face a lot of obstructions and challenges in local implementation. However, social work services for the elderly require further supplementation and perfection to improve the quality of care services in the centers. Over time, to satisfy the needs and improve the quality of social support services for the elderly, care centers need to consider many aspects as well as advantages and disadvantages and their remedies for service development. The assessment of some staff of the Center for Social Protection and the Elderly shows that: (The content of the opinions obtained after the investigation were voice-recorded, and the questionnaire was maintained.)

“There are a lot of elderly people here needing the legal support related to inheritance. Many of them have property, so they want to allocate their inheritances to their descendants so that their property is cared for and no trouble occurs after their mind is not lucid. Our center contacts lawyer's offices to consult directly for them. In general, they are highly satisfied,” said the Deputy General Director of Dien Hong Nursing Home.

“Our center also invites a law office to consult for the elderly in need. Many of them have property subject to disputes between their family members, which makes them unsecured to live here. Our center helps them to deal with this legal procedure so that they live here peacefully without any worries...” said the Director of Social Protection Center 2 Hanoi.

“Group activities among the elderly were organized without close interaction. Many weak people join but say nothing, just sit and watch TV. In general, no specific topic is set out for the activities,” said Mrs. N.H.P, 73 years old, Dien Hong Nursing Home.

“I see that group activities are sometimes organized in the meeting room, mainly disseminating regulations or welcoming delegations, or art and sports performance on some public holidays. There is so little time for our group activities because of few workers but a lot of elderly people...” said Mrs. N.B, 74 years old, Social Protection Center 2 Hanoi.

From the viewpoint of a worker, “I studied nursing and undertake the tasks of supporting group activities for the elderly, sometimes consulting and talking to the elderly when they are feeling down. As for group activities such as social work activities as you said, it is quite difficult to organize professionally in the center because of insufficient staff, most of whom must undertake concurrent tasks. The number of staff with expertise in social work is so low...,” said Mrs. P.V.K, 36 years old, social service worker of Bach Nien Thien Duc Elderly Care Center.

During in-depth interviews, discrimination against sending old grandparents and parents to live in care centers exists. “We have met an old person who was sent to live in our center but after one day, he must come back to his home because his relatives strongly objected and thought that it is irresponsible for him. One week later, he was sent again because no one took care of him as regularly as in the center. Seeing the positive change and condition of him, gradually, his family members have had no objections. It is necessary to show the positive changes of the elderly's life in the centers to their family and people to reduce misunderstanding,” said Deputy Director of Dien Hong Nursing Home.

In another case, “when I was homeless, fortunately, I was sent here. What lucky I am!,” said Mrs. K.B, female, 72 years old, the elderly, Social Protection Center 3 Hanoi.

In addition, “I wish to live in the center. I visited but was not satisfied with many centers. I find that the center is clean and cool. I am not afraid of any criticism. The director of the center cares about me so much and everyone else, and gave me a very precious tea box,” said Mrs. N.K., 80 years old, the elderly, Dien Hong Nursing Home.

The support services and life in the centers are rated “normal”, “unsatisfied” or “satisfied” by certain elderly people for the reason. “It is normal because here, my daily activities such as eating, sleeping, and rest are in moderation. Of course, I don't feel at home with the love of my family members,” said Mrs. L.T.B, 65 years old, the elderly, Social Protection Center 2 Hanoi.

Regarding the satisfaction, “It's okay in general because, in fact, I also want to live with my family. My family is still the best.” said Mr. P.D.H, 80 years old, Bach Nien Thien Duc Elderly Care Center.

## CONCLUSION

At present, social support services for the elderly at the elderly care centers such as legal aid and communication services are pretty good. However, besides these, some have shortcomings and are not highly effective such as psychological counseling for elderly individuals and their families, and supporting the elderly in integration. The factors that lead to low performance include the elderly themselves, direct support workers, and care facilities. Circular No. 02/2018/TT-BLDTBXH regulating necessary social work services for target groups in social support facilities, serves as the legal ground for the study to propose appropriate solutions to improving the performance of support services for the elderly in care centers. However, the effectiveness and existing obstructions and challenges in realization require a lot of solutions. However, it can be seen that the implementation of such services is crucial to improve the life quality of the elderly living in the centers.

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