APPLICATION CRITICAL SOCIAL THEORY IN INVESTIGATING NURSING COMPETENCY IN CONTEXT OF VIETNAM

Do Thi Ha[1]

[1]Pham Ngoc Thach University of Medicine

ABSTRACT

Background: *Competency of nurses is a critical component that drives the quality of healthcare. Investigation of required competencies among nurses in particular context is essential to foster nursing services.* ***Objectives***: *The aim of this article is to share the researcher's experiences and give out explanations of the application of the Critical Social Theory through investigating nursing competency in context of Vietnam.* ***Methods***: *An ethnography approach with data collection methods of participant-observations, in-depth interviews, and focus group discussions was conducted. Critical Social Theory was applied as theoretical foundation in order to gain deeply and fully understanding competencies of nurses.* ***Results***: *It's shown that using the Critical Social Theory as a theoretical foundation to investigate nursing competency in Vietnam context is applicable. This Theory is a school of thought whose primary goal is to improve the human condition. The theory focuses on general theoretical problems, as well as specific studies of concrete problems of contemporary social organization. The tactic focused on breaking with traditional hypothetical deductive methods, which are oriented towards the preservation and gradual reformation of the status quo. Its intention is to be a radically different approach which would consider the human construction of social forms of life and the possibility of their recreation. By applying the theory, it allows the researcher to explore and deeply understand what nurses think and act.* ***Conclusion***: *To hear all nurses' voices and smell the meaning of their behave in order to gain a rich and fully understanding of competencies of nurses, the Critical Social Theory is a suitable choice.*

*****Keywords***: *Critical Social Theory, application, nurse competency, Vietnam context*

1. INTRODUCTION

According to World Health Organization (WHO), nurses account for half of all health care professionals and play a critical role in healthcare system in many countries. Competency of nurses is vital to a safe nursing practice and is an essential component that determines quality of nursing services. The patients' outcome will be negative affected if nurses do not meet the competencies as required. The State of the World's Nursing of WHO reported that the needs of nurses for supporting the diverse global nursing workforce of 27.9 million individuals in the present and future. The shortage of nurses occurs globally affect the quality of nursing care and nursing competency development [1]. There are many studies have identified several aspects regarding competency among nurses. Accroding to Kajander-Unkuri et al. (2014) competencies of nurses include professional values and

ethics, nursing and intervention skills, interpersonal and intervention skills, knowledge and cognitive aptitude, assessment skills, improving nursing quality, professional development, leadership, teamwork, and research [2]. In a review, Fukada, (2018) also indicated that competencies of nurses include skills, values and attitude [3]. In Vietnam, the Core Competencies for Vietnamese Nurses regulated in 2012 included three main domains. There are Nursing care practice, Management and professional development, and legal and ethical competencies [4].

In order to identify needs and gather data for the investigation of ways to raise the standard of nursing care in the nation, it is crucial to thoroughly comprehend the depth required as well as the existing competencies of Vietnamese nurses, in particular in cultural and social contexts. The goal of quality management for nurse administrators is to understand, enhance, and sustain nurse skills. As a result, nurse educators and nursing education organizations should focus on developing competent nurses. The Critical Social Theory, which is a multidisciplinary framework with the implicit goal of advancing the emancipatory function of knowledge, is applicable applying in ethnography research to investigate competency of nurse within context of Vietnam.

2. INTRODUCTION TO THE CRITICAL SOCIAL THEORY

The Critical Social Theory was originally developed by a group of sociologists at the University of Frankfurt in Germany. The Theory pursues human emancipation, "to liberate human beings from the circumstances that enslave them" [5]. It aims to explain and transform all the circumstances that dominate human beings [6].

The Critical Social Theory drives for social research and practice is grounded on five fundamental assumptions:

- People have the power to change their world: People are the creators of their social world, so it can be changed if they wish.

- Knowledge of the social world is value laden: All scientific knowledge about the social world is socially constructed, and as such, cannot avoid being infused with 'value orientations', because all social constructions are value laden. Value orientations can be identified in both implicit and explicit forms of ideology held by the researchers.

- Reason and critique are inseparable: Marcuse [7] explained that reason means the capacity to understand the existing social world, to criticize it, and to search for and present alternatives to it. Reason here is to be understood in the Hegelian sense, as the critical faculty which reconciles knowledge with change toward the goal of human freedom. It is through critical reason that the inherent distortions of the social affairs can be reconstructed and understood.

- Theory and practice must be interconnected: Theory and practice ought to be inextricably interconnected, because the task of critical social theory is seen as that of reconciling knowledge with the satisfaction of the human need for self-improvement.

- Reason and critique must be reflexive in practice: that is, it must concern itself with the validity conditions of knowledge and change which it produces. Therefore, researchers following this approach must collaborate with those who will be affected by it, opening it up to public debate and critical reflection.

Habermas also contributed significant to the strength and broad of the theory fundamental assumptions by setting out to broaden the discourse on critical social theory to include various strands of contemporary thought. He supposed that a critical approach with a broader notion of rationality was needed to ensure that society maximizes the benefits of technological advancements while minimizing the disadvantages. Habermas also provided significant criticisms of modern theories of management and social control, such as functional systems and organizational theory, cybernetics, game theory, and decision theories, which are the current core of research, management and other applied behavioral sciences. In studying extensively, the methodological problems of knowledge acquisition of the social sciences, Habermas set out to construct a conceptual framework upon which a critical scientific methodology suitable to critical social theory research could be based. He outlines a program for the development of this methodology. Habermas identified at the transcendental level, three types of knowledge interest which he believes drive all human inquiry, these are technical; practical; and emancipatory. Habermas views science and its project of improving the human condition as a collaborative effort where people work together to the achievement. Such being the case, communication is central to the performance of a collaborative science. The question then becomes; how do the participants guard against systematic distortions and violations of free and unencumbered scientific discourse? Habermas has defined two classes of criteria for analyzing and validating discourses, content and relationship. The content criteria deal with the truth and clarity of every communicative action, while the relationship criteria deal with the appropriateness and sincerity of those actions. For Habermas the act of entering scientific discourse means that the participants are committed to finding a solution by force of better argument, and must adhere to domination free cooperation and communication. Facts may not be misrepresented, and jargon may not be used to mystify, as this would violate the principle of ideal discourse [8-9].

3. APPLICATION OF CRITICAL SOCIAL THEORY IN INVESTIGATING NURSING COMPETENCY WITHIN VIETNAM CONTEXT

The Critical Social Theory, which is a multidisciplinary framework with the implicit goal of advancing the emancipatory function of knowledge, is applicable applying in ethnography research to investigate competency of nurse within context of Vietnam. As mentioned, critical theorists identify human ability to advance conditions that are constrained by a number of social forms, cultural and political domination as well as natural laws and resource limitation. Thus, knowledge is not seen as discovered by objective inquiry but as acquired through critical discourse and debate. The initial aim of Critical Social Theory was to enable people to free themselves from all unnecessary control and encourage them to understand their own interests and situations. The intellectual community in nursing

is turning to critical science in a quest to gain in-depth understanding of the dynamics of the contemporary human condition in nursing's social and political contexts. With the concern for the social conditions of health and health care reform, the struggle against patriarchal oppression, and the issues of multiculturalism and cultural sensitivity, nursing's interest in the integrality of theory and practice is growing. Critical Social Theory provides a framework for mutual understanding between persons, allowing exchange of ideas, information, intentions, and desires in terms of topics of concern as well as actions. The ultimate goal of Critical Social Theory is to challenge the status quo and create a more just and equitable society by promoting greater social awareness and engagement.

Nursing profession earliest gives out services to satisfy the health care needs of people in society. Consequently, the professionalization of nurses' everyday practice is in line with societal trends. Today's health concerns and healthcare requirements have made the nursing profession more complex and demanding of both intellectual and professional skills. Nursing services have been undergone significant changes in both quantitative changes as nurses need to perform more tasks and also harder as well as qualitative changes since relating to variety of nurses' activities. The later changing is also related to an increasing of differentiation within medical discipline and technical process. These beginning nurses require growing levels of expertise. However, they simultaneously receive more jobs. Nursing was originally established beneath the medical discipline. Nurses historically were viewed as to display the physicians' order in term of treatment; meanwhile nurses perform a tremendous task in taking care of their patients in both somatically and psychologically as well. Nurses thusly have struggled constantly in attaining their position and status within healthcare professions' hierarchy. A significant concern is how these changes have a relation to nursing profession's nature and its situation as well as status of nurses within society and public arena.

From the 1980s, Kaler et al. [10] had proposed that despite nurses reach higher education levels, it's still so difficult for them in order to alter their occupation as well as social status. What's more, hidden in this issue is a complexity of social problem led to multiple factors i.e. policies that represents of interests. Under the critical theory perspectives, the circumstances of culture, economy and politics in society are not nature and fix. These can be alterable. Those support the concern that how struggles in the society be able to operate to dominate some individuals while systematically privileging others [11].

Critical Social Theory can be used to view how social derived power structures filter into healthcare practices, both in term of how deficits in health are viewed and managed, and how they affect communication between nurses and patients. Under the Critical Social Theory perspective, the way of deriving social power structures that filter into healthcare practice can be viewed as well as how these affect communications between nurses and patients, how these affect the quality of nursing services. The emancipatory dimension of Critical Social Theory proposes that all people be equal. However, this goal can be difficult to achieve. One significant conclusion regarding social position and status of nurse professionals in the International Confederation of Nurses conducted in Hungary in 1966

(Cited in Bojtor, 2003) [12] was: "Nurses are expected to do more and receive less, and have no means to protest against this. They may choose: either they give their credence to the bad situation, or they leave the profession".

In nursing education programs, the basic techniques of nurses are trained; however, these programs only go so far with regard to the dissemination of knowledge and skills. While they provide a foundation, there is still a need to explore how the nurses who are working in clinical settings gain a higher level of knowledge and skills required for competency and how competency of nurses can be developed. It is possible for nurses to acquire greater levels of knowledge and abilities that go beyond their core technical skills and information at the basic level through a variety of learning opportunities since their learning ability is in the adult learning process.

Traditionally, nursing has been thought to be dominated by medical physicians with Vietnamese nurses themselves lacking unity. Besides, nursing is still viewed as a low status profession and with that nurses often have low self-esteem when compared to medical professionals or other such health professionals. Currently, patients often value medical doctors over nurses, and they tend to find the physician seeking for their health problem consultation. In fact, a qualified nurse can take care of clients effectively and provide valuable advice. Critical Social Theory therefore is very useful in encouraging nurses to think critically, to reveal, and to value conditions and situations.

In recent years, the situation of nursing profession in Vietnam has been changing; however, still facing with numerous of issues, such as nursing shortage, working environment, negative view of community towards nursing. There have also been pervading negative cultural perceptions and attitudes among communities toward the nursing profession in Vietnam. These deficits may be the factors responsible for low quality nursing care [13]. In the very sensitive working context, to understand deeply and truly relevant to competencies of nurses, the researcher needs to build close relationships with key informants in order to encourage them expressing their feelings and perspectives when conducting research. To understand nurse participants' expression and sharing of values, beliefs, and perspectives in relation to the research topic, the researcher enter their world to learn how these nurses construct their practice, what meaning nursing competency has to them, about their capacity in self-managing with regards learning to become competent nurses, and the meaning of their actions. Later the researcher reconstructed the knowledge gained from participants. By affecting a close relationship with research participants, observing their emotions and activities, listening to their opinions, and reflecting hidden meaning from their behaviors or languages, the researcher gains rich knowledge and understanding regarding nurses' perspectives of nursing competencies and nursing competency development, their capacity as well as barriers. The researcher thus can relay the voices of participants, their beliefs, and perspectives to communities and society, especially administrators, nursing educators and policy makers.

Based on the spheres of Critical Social Theory, the researcher applied to investigate competency of nurses as referenced below.

Table 1. Translation of the Critical Social Theory to investigate competency of nurses

Research questions	Data needed	Expected outcomes
What are the exiting nursing competencies of nurses?	- Current situation regarding nursing competency - Nursing competency means - Exiting nursing competency	- Current situations regarding nursing practice & nursing competency can be investigated - Current nursing competency can be studied and understood - Perceptual information concerning exiting nursing competency among nurses would be varied on individuals →Deep understanding nursing contexts, social and professional status of nurses and exiting nursing competencies Explore differences between current nursing competency and expected nursing competency
What knowledge, skills and attitudes do nurses perceive they need in order to become competent one?	Perceptual information concerning needed knowledge, skills and attitudes of a nurse	Knowledge, skills and attitudes would be varied & different between nurses Deep understanding how different between current nursing competency of nurses and expectation competency → Propose effectively strategies for enhancing Nursing competency of nurses
How do nurses develop their own competency?	Knowledge, skills and attitudes needed Paths of learning	Paths of becoming competent are varied Learning ways are somewhat different among nurses →Propose effectively nursing education programs, continuing study strategies, informal learning environments and appropriate related policies to promote nursing competency and quality of nursing services

Research questions	Data needed	Expected outcomes
What are the factors that facilitate and/or impede the development of nursing competency?	Perceptual information concerning: Personal/professional life impacts Working environments Social/cultural impact Colleagues/family/interaction Policies/regulations	Factors influencing nursing competency development can be identified & understood →Rich understanding what & how these factors obstruct the development of nursing competency → Propose strategies to fill out the gaps
Ethnography approach with methods of gathering data: Documentation records, field-note, participant-observations, in-depth interviews, focus group discussion		

According to the Critical Social Theory point of view, the researcher may suppose that nurses' critical reflection abilities have improved, they feel more self-assured, and this may lead them to become more conscious of their own viewpoints and nursing beliefs. These activities might aid individuals in elevating their sense of self-worth, empowering them to overcome oppression, and fostering favorable attitudes toward the nursing profession. This is supposed to help nurses make wise choices and choose the right courses of action as they practice and participate in the future development of the nursing competency process.

4. DISCUSSION AND CONCLUSION

As conferred, Critical Social Theory is a multidisciplinary framework with the implicit goal of advancing the emancipatory function of knowledge. Critical theorists recognize human ability to improve conditions that are constrained by various forms of social, cultural, and political domination as well as natural laws and resource limitation. Thus, knowledge is not seen as discovered by objective inquiry but as acquired through critical discourse and debate. The initial aim of Critical Social Theory was to enable people to free themselves from all unnecessary control and encourage them to understand their own interests and situation.

Under the Critical Social Theory perspective, the researcher interacts with nurses to understand them and to provide an opportunity for nurses to better understand themselves rather than the researcher imposing the own views. Critical social theorists believe that all human actions involve language. The importance of language is that it reveals meanings, interests, beliefs, and perceptions [9]. To achieve emancipation, people need to be able to communicate clearly and openly without fear from those who uphold the 'rules'. In this situation, the investigators contact and establish a close relationship with nurses and encouraged them to present their opinions democratically about what they actually view and perceive of with regards competencies of nurses, what nursing competency means to them, what knowledge, skills and attitudes they view they need in order to take care of clients effectively; moreover, how they develop their competencies, and what factors they perceive to influence nurses' competency development without domination of other

more powerful persons. Through process of open dialogue with nurses, the researchers can believe that they would become critically self-reflective, their experience consciousness could be raised, and they could share their different perspectives in reference to issues relating to nursing competencies.

Based on historical realism, Critical Social Theory entails a comprehensible reality, where the social, political, cultural, economic, ethnic, and gender factors are materialized into a series of historically constructed structures and, hence, considered real. Thus, in term of considering the transactional and subjectivist, the researcher and the participants are interactively linked and used the dialogic-dialectics, where the dialogue between researcher and participants seeks to generate informed conscience [14]. The social standing of nurses could be revealed and explored in terms of how it relates to competency levels and the standard of healthcare services in Critical Social Theory. So, what the social status of nurses would be and how that affects quality of health care and nursing services in Vietnam. Upon Critical Social Theory, allowing nurses to contribute with concrete answers to approach the diverse realities without power domination. The application of Critical Social Theory guides the researcher to investigate critically what was occurring within the context that nurses practiced. It also provided a guideline in term of inquiring the possible practices of inequality within the healthcare system. Furthermore, the processes of analyzing situations, identifying problems, synthesizing the social status of nurses that influence their competency development as well as elaborating the strategies during conducting the study would be supported.

Although the nursing position has also been re-evaluated properly with many innovations, such as, more clearly reflected in Circular 31/2021/TT-BYT dated December 28, 2021, with many new contents, including Renovating the role and position of nurses in practice; Assign rights and duties for the nursing system to actively perform; Prescribing the most favorable conditions for nurses to perform their duties, and so on; According to Ha Thi Kim Phuong and Nguyen Thi Bich Luu, there are still many shortcomings in the mechanisms, policies, management and organization of care for the nursing industry. In particular, there is a serious shortage of nursing human resources [15-16]. These can affect nurses' motivation in performing task, hinder nurses' dedication to their profession and obstruct nurses from developing their capacity. The voice and condition of nurses need to be concerned and improved.

In conclusion, applying the Critical Social Theory in order to investigate deeply how nurses in Vietnam present and construct their self in relation to these considered competencies, how they perceive needed and existing competencies of nurses, what nursing competency means to them, what knowledge and skills they perceive they need to serve clients, how to acquire these knowledge and skills, how they define the situations that they interact with others and how nurses create meaning during social interaction is suitable. These are important aspects influencing their thinking, meaning of their practice as a nurse and meaning in their lives. Nurses' self and the meaning and value of their daily actions as well as practice and behaviors might be diverse and different from nurse to nurse due to the

uniqueness of human beings and work in differing clinical settings, environments, contexts and the situations that they interact with in. These will be a significant information in order to find appropriate strategies to improve competency of nurses and quality of nursing care. To explore expectation competencies among nurses in Vietnam, the Critical Social Theory could be applied in order to fully understand nurses and to ensure that all voices of nurses to be heard and recognized.

REFERENCES

1. World Health Organization [WHO] (2020). State of the world's nursing 2020: Investing in education, jobs and leadership. Geneva: World Health Organization. [cited 2022 December 10]. *Available from: https://www.who.int/health-topics/nursing.*

2. Kajander-Unkuri S, Meretoja R, Katajisto J, Saarikoski M, Salminen L, Suhonen R, Leino-Kilpi H (2014). Self-assessed level of competence of graduating nursing students and factors related to it. *Nurse Educ Today* 34(5): 795–801. DOI: 10.1016/j.nedt.2013.08.009.

3. Fukada M (2018). Nursing Competency: Definition, Structure and Development. *Yonago Acta Med* 61(1): 1–7. doi: 10.33160/yam.2018.03.001

4. Ministry of Health of Vietnam [MOH] (2012). Core Competency for Vietnamese Nurses. Ha Noi, Vietnam.

5. Horkheimer, M. editors. (1972-2002). Critical Theory: Selected essays (Vol. 1). *Continuum - New York.* (Transl. Matthew J. O'connell & Others). [cited 2022 December 10]. Available from: https://monoskop.org/images/7/74/Horkheimer_Max_Critical_Theory_Selected_Essays_2002.pdf.

6. Nickerson, C. [homepage on the Internet] (2022, Jan 06). Understanding Critical Theory. *Simply Psychology*. [updated 2022 Jan 06; cited 2022 Dec 20]. Available from: www.simplypsychology.org/critical-theory.html.

7. Marcuse, H., editors. Negations: Essays in Critical Theory. *Heinemann, London*, 1968. Published by MayFlyBooks in paperback in London and free online at www.mayflybooks.org in 2009. [cited 2022 December 20]. Available from: https://monoskop.org/images/5/57/Marcuse_Herbert_Negations_Essays_in_Critical_Theory_2009.pdf.

8. Habermas, J., editors. Knowledge and Human Interests. *Beacon Press, Boston*, (1971 transl. J. J. Shapiro) 1968. [cited 2022 December 20]. Available from: https://hugoribeiro.com.br/area-restrita/Habermas-knowledge-and-human-interests.pdf.

9. Habermas, J., editors. Communication and the Evolution of Society. *Heinemann, London*, 1979. (transl. T. McCarthy). [cited 2022 December 20]. Available from: https://teddykw2.files.wordpress.com/2012/07/jurgen-habermas-communication-and-the-evolution-of-society.pdf.

10. Kaler, S.R., Levy, D.A., & Schall, M. (1989). Stereotypes of professional roles. Image: The Journal of Nursing Scholarship, 21(2), 85-89. https://doi.org/10.1111/j.1547-5069.1989.tb00104.x

11. Thomas, J. (1993). Doing Critical Ethnography. Sanit Paul, *MN: Sage.* https://dx.doi.org/10.4135/9781412983945

12. Bojtor, A. (2003). The importance of social and cultural factors to nursing status. *International Journal of Nursing Practice,* 9(5), 328-335. doi: 10.1046/j.1440-172x.2003.00434.x

13. Vietnam Nurse Association (2022). Summary report on activities of the Vietnam Nursing Association for the term 2017 - 2022. *National Nursing conference X* on 22 October, 2022, Ha Noi, Vietnam.

14. Guba, E.G., & Lincoln, Y.S. (1994). Competing paradigms in qualitative research. *Handbook of Qualitative Research*, 2, 163-194.

15. Ha Thi Kim Phuong (2022). Nursing workforce situation: Current status and needs. *National Conference: Education on Nursing and Medical Technology in the Context of Integration and Development*, December 24, 2022, Phenikaa University.

16. Nguyen Bich Luu (2022). Orientation to improve nursing teaching competency. *National Conference: Education on Nursing and Medical Technology in the Context of Integration and Development*, December 24, 2022, Phenikaa University.