

Asian Culture Brief: Vietnam

A collaborative project between NTAC-AAPI and the Center for International Rehabilitation Research Information and Exchange (CIRRIE) at the State University of New York at Buffalo

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To increase employment opportunities for Asian Americans and Pacific Islanders with disabilities nationwide.

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The purpose of this brief, developed as part of a series of Asia and Pacific Island culture briefs, is to present readers with a quick overview of the Vietnam culture and to introduce references that will provide more in-depth perspectives. It is adapted from: Hunt, P. C. (2002). *An Introduction to Vietnamese Culture for Rehabilitation Service Providers in the U.S.* Buffalo, NY: Center for International Rehabilitation Research Information and Exchange (CIRRIE).

Introduction

To many Americans, the word “Vietnam” conjures images of the devastating war that took place in remote villages of Southeast Asia some 30 years ago. The media portrayal of Vietnam suggested it was made up of only scattered thatched-hut villages amidst the burning fire of jungle warfare. Few Americans, especially those in the post-Vietnam War generation, are aware of the rich culture and history of Vietnam. The aim of this monograph is to provide rehabilitation providers in the U.S. with basic information on Vietnam’s culture, people and disability issues so they can better serve Vietnamese with disabilities in the U.S.

Cultural Values

Vietnamese cultural values emphasize the importance of family and community. Its core values, which embrace the principles of Confucianism, are harmony, duty, honor, respect, education and allegiance to the family.

Harmony

To achieve harmony, one must observe moderation and avoid extremes in communication, daily life activities, consumption of food and drink, and social interaction to ensure physical safety and adhere to the moral imperative of keeping one’s dignity unimpaired.

Duty and Honor

Individuals have the ultimate duty to carry themselves with the utmost dignity in all circumstances so as not to bring shame to oneself and the family. The duties and roles of each family member are well defined. They govern the actions of the individual and are the sacrifices one makes to one’s family. For example, the role of parents is to raise their children properly, provide them with food and shelter, and educate and instill them with moral values. The children’s duty is to obey their parents and never to question their authority or teaching. When the parents get older, it is the duty of the children to take care of them.

Respect

This is the guiding principle of all relationships. It is conveyed through language and demeanor. At home, one is expected to show respect to parents and family members. Outside the home, it is shown to elderly people, teachers, and other authority figures. By showing respect to others, individuals indicate their expectation that they will be treated with the respect due their age, social status, or authoritative position. Respect is earned by leading a virtuous life, fulfilling filial and social duties, accomplishing heroic deeds, and attaining a high degree of intellectuality.

Education

Education, valued more than material wealth and success, is the pillar of the culture and begins at home. An uneducated rich person is regarded as inferior to a learned person who is poor. In the traditional social system the scholar is at the top of the social hierarchy, followed by the farmer, the artisan, and the tradesman. Parents are responsible for the education of their children.

Family

Traditionally, children were taught to forsake self and make sacrifices to ensure the family's welfare and harmony. Allegiance to one's family was absolute and included fulfilling one's responsibilities and proper conduct (i.e., moderation, modesty, moral probity, self-control).

The traditional family has been changing as a result of communist ideology, economic forces, migration, and assimilation of western culture. Traditionally, the father has been responsible for the well-being of family members and the ultimate decision-maker and provider. Grandparents and elder relatives within the household often share authority with the father. Hierarchy of authority also exists among siblings. The oldest son of the family has the most authority and it is his duty to look after the siblings if the parents are deceased. Familial duties and obligations extend to the extended family and beyond. Ancestor worship, for example, is a form of filial piety and children are responsible for the maintenance of the ancestral tombs and pay homage to ancestors' spirits at home.

Communication

Vietnamese often appear to be reserved, non-responsive, or non-assertive by American standards. Children are taught to be modest and reserved in speech and manner. They are encouraged to think deeply before speaking. It is believed that useless and excessive verbal expressions can create discord and animosity. Hasty words and slips of tongue are considered to be as detrimental as hasty actions and bad deeds. Use of proper language conveys respect and helps create harmonious relationships with others.

Non-verbal communication is important in conveying respect. It is often used to reinforce linguistic expressions. The following are examples of non-verbal communication that may be misinterpreted by Americans:

- Direct eye contact with parents, teachers, or authority means a challenge and should be avoided (note: providers are considered authority figures).
 - Direct eye contact with someone of the opposite sex can be interpreted as deep passion and should be discouraged, especially in public settings.
 - Children are taught to remain silent and listen attentively when speaking to someone older or to an authority figure and not to talk back or ask questions.
 - Asking questions or disagreeing with an authoritative speaker is like challenging the senior person's social status.
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Common Non-verbal Gestures

Nodding: Greeting, affirmative reply; agreement

Bowing: Greeting, great respect

Avoiding eye contact: Showing respect to people senior in age/status/of opposite sex

Winking: Not decent, especially when directed at people of the opposite sex

Smiling: Agreement; embarrassment; disbelief; mild disagreement; appreciation; apology

Shaking hands: Friendly greeting between men (not the elderly); not customary between women/men & women; acceptable between Vietnamese woman & non-Vietnamese man

Beckoning with index finger: Offensive to adults; threatening to children

Holding hands with/arm over shoulder of same sex person: Friendly gesture; no sexual connotation

Crossing arms: Sign of respect

Putting one/both hands in pockets/on hips while talking: Arrogance; lack of respect

Patting a person's back, esp. those senior in age/status: Disrespectful

Pointing to others while talking: Disrespectful

Whistling at performers: Displeasure

Putting feet on table/sitting on desk while talking: Rude

Vietnamese Immigrants in the U.S.

Approximately 995,000 Vietnamese refugees have immigrated to the U.S. Most have settled in southern California. Others live in Houston, Dallas, the suburbs of Washington, D.C., and the states of Washington, Pennsylvania, Minnesota, Massachusetts, New York, and Illinois.¹ The 2000 Census reported there were 1,223,736 self-identified Vietnamese and bi-racial Vietnamese living in the U.S. Bradsher² estimated that between 1991-1992, 9.9 percent of Asians and Pacific Islanders in the U.S. had disabilities. Applying Bradsher's indicator to 2000 Census data, one can estimate that there are approximately 12,237 Vietnamese with disabilities in the U.S.

Concept of Disability within the Culture

The Traditional View

Disability is a punishment for sins committed by one's ancestors. Whether acquired or congenital, it is associated with shame and pity. Family members take extraordinary measures to keep the person with disabilities out of the public eye.

Mental illness represents possession by evil spirits and exorcism is considered the remedy. Affluent families hire monks or fortunetellers to conduct elaborate exorcisms in the hope of driving the evil spirit out of the afflicted. Many individuals with mental illness in Vietnam end up homeless, living on the streets.

People who are blind at birth are, in certain social circles, revered as psychics and fortunetellers. It is believed that they have special vision that can see beyond the present life into the past and the future. Often they work at temples, in their own shops, or in the open market.

The Contemporary View

People with disabilities are victims of the war. Society pities – yet sympathizes with – these “victims.” Since Agent Orange is believed to cause both acquired and congenital disabilities, there is no differential treatment, especially by the postwar generation.³

Providing Rehabilitation Services to Vietnamese in the U.S.

Person-Centered Approach

This approach emphasizes maximum participation of the consumers and they are encouraged to take an active role in guiding their course of rehabilitation. This may pose conflict for the Vietnamese client who may view health care professionals as respected authority figures who have the obligation to care for and protect their constituents. Vietnamese tend to expect absolute guidance from these professionals and they typically comply without contesting or questioning their decisions.

The Concept of Independence

Rehabilitation in the U.S. focuses on restoring function and independence. For many Vietnamese, these may be difficult concepts to accept. In their view, disabled family members, regardless of age or social status, live with immediate family members, whose responsibility it is to care for them.

Recommendations to Rehabilitation Service Providers

- Be mindful of verbal and non-verbal communication cues.
- Do not speak in a patronizing or over-sympathetic tone, especially to the elderly.
- Anticipate evasive answers at times: being assertive/aggressive is not encouraged.
- “Independence” may be an unacceptable goal for clients.
- Nursing homes and long-term care facilities may not be acceptable placements for many.
- Become familiar with some of the traditional medical practices and diets.

References

1. Southeast Asia Resource Action Center. “Vietnamese Refugees.” 2002. <http://www.searac.org/vietref.html> Retrieved July 16, 2002.
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