Project Background: The Vietnamese Catholic Church has long been the church marginalized. The Catholic community of 7.2 million people are often stigmatized by other groups with high dependence on foreign political and religious powers, and therefore are characterized as being not nationalistic and trustworthy enough. This prejudice directly leads to hundreds of years of hatred and persecution. Despite the challenges, the Catholic Church in Vietnam continues to live with its mission of peace and justice. During the French colonial period and Vietnam War, the Catholic Church served as one of the largest providers of humanitarian relief works and charity programs through building and staffing hospitals, schools, shelters, and refugee camps. Many generations, both Catholic and non-Catholic, took safe refuge in the nourishment of the church. After Vietnam was unified under the Communist regime in 1975, the Catholic Church lost many institutions, and was limited in its activities of serving the community. Consequently, many marginalized communities were deprived of their rights to receive care with dignity and lost access to other faith-based social services that they needed.

Starting in the Doi Moi Reform of 1986, the Catholic Church and other religious institutions have been invited to serve in several social services that once were strictly reserved for the government such as healthcare. Health systems in Vietnam can be divided as public, private for profit, and faith-based nonprofit. Public institutions care for all people regardless of paying capacity, but always experience work overload and low patient satisfaction with the service. Private facilities offer care to people that can afford care fees, but not all medical procedures are available and as advanced as those in public, and care fees are quite high. Faith-based nonprofits are often managed by Buddhist and Catholic organizations. These faith-based facilities provide free services to patients, and receive donations from benefactors. However, faith-based facilities are still restricted in their ability to serve due to many factors. For example, several clinics and nursing homes are currently being operated by the Catholic Church, but still cannot satisfy the high demands of underserved patients seeking Catholic healthcare, because certain regulations hinder their facility expansion. For many patients, both Catholic and non-Catholic, Catholic healthcare is the last hope that they turn to when they perceive the public health institutions lack the empathy for their care, and dignity, as well as the rising care fees for access to good care in private facilities. Covid-19 pandemic further unveils the social wounds of injustice in the form of dehumanizing healthcare on marginalized bodies, but also opens an opportunity to search for a more respectful and holistic care system.

Catholic healthcare in Vietnam, with its mission of serving human dignity, makes significant contributions to foster peace and justice in creating a more humane health system. It is also noteworthy that the majority of the staff at Catholic facilities are female, and Catholic nuns outnumber their male religious leaders in serving in healthcare. In the places where pain reigns, these extraordinary women comfort the afflicted and care for their physical and spiritual wounds. The women religious put their religious contemplation into brave practical actions that alleviate the suffering of marginalized bodies, and show the world that the differences in ideologies and beliefs are just diverse variations of the ultimate reality that we all seek. Catholic nuns commit themselves in the service of patients and families to promote human dignity, so that peace can stay among us. The Sisters, in this perspective, show us that religion should not be manipulated as a source of conflict but a powerful defender of human dignity and peace.

Project Proposal: Our main objective for this project is preparing the next generation of Catholic women religious as leaders in the more humane healthcare in Vietnam. We seek to support the Sisters’ mission in holistically healing the community and fostering peace through providing the young Sisters with professional healthcare education so that they can get licensed and practice legally in Vietnam. We aim to focus our work in the Diocese of Baria in Southern Vietnam, where the social relief office Caritas just opened the first Catholic clinic in 2022. This Caritas clinic provides a variety of free medical services to the fishing community and the factory-worker migrants, especially in the field of chronic pain management. The clinic serves all people, regardless of religious affiliations. This clinic is staffed with lay Catholic care providers and other health professionals from two congregations of women religious: Lovers of The Holy Cross of Baria (MTG) and Dominican Sisters of Mary Immaculate (OP). The Sisters serving the clinic are trained in professional nursing, physical therapy, and Eastern medicine. However, many of the Sisters will reach their retirement age in the next 10 years, and only a few younger Sisters are in schools to continue their healing works. Many of these slow preparations and lack of qualified staff resources stem from
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systematic injustice when Catholics were looked upon with suspicion, and therefore, were prohibited from entering public professional schools for years. With around 200 patient visits/day while staffed with four nurses, three physicians, and two acupuncturists, the clinic is at risk of high burnout rates for staff, reduced care quality, and unsustainable development.

The communities of religious women in the Diocese of Baria (both MTG and OP) are still benefiting from a large number of young women seeking religious life. Many of these young Sisters choose the traditional track of becoming kindergarten teachers to staff their own schools. Because of the rising needs of caring for the community at the Caritas clinic, several young Sisters are also contemplating about pursuing a medical profession. We want to make effective use of this new opportunity to advocate for the Sisters’ leadership in healthcare. That is, in providing the Sisters with advanced skills and higher education, we aim to change the perception that the Sisters are just the meek assistants, but extraordinary women that can lead the healthcare field now and the future. Through the Sisters’ future healing services to the community, deeper conflicts and misunderstanding between Catholics and non-Catholics could find resolution and peace. Investment in human resources, that is, in equipping the Sisters with more advanced medical knowledge, will enable the underserved community to be better cared for in a sustainable way. The acts of caring selflessly and healing indiscriminately is peace in its most practical form.

Project Implementation and Timeline:

Phase 1: Preparation (May 20- May 30):

We communicated with the Caritas clinic office and the convents about the potential education funding for the Sisters during Winter Break 2022, and the organizations show full support; indeed, this is also their vision but has not been accomplished due to lack of financial resources. We would work with Sister superiors through virtual meetings to prepare for interviews and personal statements from the Sisters interested in receiving nursing scholarships. We would like to provide funding for Sisters interested in nursing, because this profession is essential to the clinic’s function, especially in performing chronic pain management procedures. In order to emphasize the Catholic mission of humanitarian values in healthcare, we will work with professors from Catholic seminaries to provide courses of ethics and spiritual/pastoral care to the Sisters. Additionally, we aim to form a board between us, the convents, and the clinic that has the role of managing and promoting education of Sisters, as well as facilitating the process of communication and financial clarity. This advisory board will then research about potential schools and education methods suitable for the Sisters.

Phase 2: Communication with Universities (May 27- June 2):

We will work with both public and private universities in Saigon to inquire about their admission requirements, curriculums, fees, and special fees program if we will enroll groups of Sisters and more Sisters in the long term. We will also ask them if accommodations for the Sisters could be made, such as prayer times and sacred days activities.

Phase 3: Selecting the Applicants (June 3- June 14):

Because staff that are skillful in their profession and have a mission with their service would correlate higher care efficiency, we want to ensure that the applicant must show high commitment to caring for the underserved through healthcare. We welcome both female Catholics on the novice level and those who have already taken their vows to apply to the program. The application process includes reviewing personal statements, interviewing the applicants, and a service program in which we will invite the applicants to stay and volunteer at the clinic for four days. This method helps us to monitor the commitment of the applicant to selfless serving and professional nursing. After this, the advisory board will make the decision. Results are not made by Sister superiors alone but other members on the board as well. The outcomes are as follows:

- Seven Sisters from two different orders will be chosen to receive the scholarships
- The Sisters show commitment to the three-year nursing education program
- Scholarships cover the entire program’s tuition fees
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- To form a new nursing sisterhood of the Sisters, Catholic Mass and blessing will be offered, as well as feasts for Sisters’ families, Caritas clinic staff, and patient community will be hosted.

Phase 4: Finalizing Enrollment in Nursing School (June 16- June 20):

Nursing Sisters will be enrolled in schools, as these do not need entrance exams. The Sisters will start schools full-time in early August, and complete their schools in three years (2026). The convents’ branches in Saigon will provide free room, board, and transportation for the Sisters. The advisory board will continue to monitor the Sisters’ progress and provide them support throughout their studies.

Phase 5: Ensuring Sustainability of The Program (June 21- June 23):

The advisory board members will meet again to discuss plans to train the next cohort of Sisters with the clinic's independent finances when this first group graduates. Options for the clinic's responsible financial investments, community fundraising, accepting donations from benefactors, and requesting funds from the diocese will be discussed. Our goal is to not only educate the next generation of truly caring healthcare professionals, but also pave the way for a more skilled and humane health system. Other plans of expanding the works of the Sisters to both public and private medical facilities to care for the broader population, and more services such as palliative care and hospice will be discussed as well.

Personal commitment: Both Daniel (biochemistry, pre-med) and Duong (nursing) are passionate about pursuing careers in healthcare advancement. Grounded in the liberal arts education, we seek to explore the intersections between medical science and human life as in this project, when human life transforms medical science and medical science glorifies human dignity. With this approach, we are able to reaffirm the urgently essential peace and quality of life that the community is deprived of. We are not affiliated with the Catholic Church, but seek to promote dialogues between different religious traditions and political ideologies in order to foster and advance sustainable peace for a nation torn by conflicts.