

## Quality of Life of Vietnam People through Education and Health Index



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**ABSTRACT:** The quality of life of the population is a measure of the sustainable development of the country, in which education and health care play an important role. In Vietnam, education and health care have made important strides in improving people's lives, helping to improve the level of education and public health care. The education system is expanding with many good improvement policies, while the health sector is also developing strongly through strengthening facilities and wider access to health services. However, there are still many challenges, quality disparities between regions and overload in hospitals... The article focuses on studying the current status of education, health care, and its impact on the quality of life of the population.

**KEYWORDS:** Quality of life, education, health, Vietnam.

### 1. PROBLEM STATEMENT

In the context of globalization and increasingly deep international integration, people's quality of life has become an important criterion to evaluate the sustainable development of countries. In the world, developed countries always prioritize improving the quality of life, focusing on improving core areas such as education and health. These are factors that directly affect the prosperity of the country, not only in ensuring the basic rights of the people but also creating momentum for economic and social development.

In the Southeast Asian region, many countries such as Singapore, Malaysia and Thailand have made significant achievements in improving education and health indicators, contributing to improving people's lives and enhancing the country's position in the international arena. These countries are all deeply aware of the importance of investing in education to develop high-quality human resources, while building advanced health systems to ensure health for the entire population. The experience of these countries shows that the quality of life of the population is closely linked to the progress in education and health, which is the foundation for sustainable development and successful integration in the region and internationally.

In Vietnam, after decades of socio-economic development, the government has been making continuous efforts to improve the quality of life for the people through education and health policies. Improving the education system, strengthening health facilities and expanding universal health insurance are strategic steps to improve the quality of human resources and public health care. However, Vietnam still faces many challenges, such as quality gaps between regions, hospital overload in big cities, and the need to improve the quality of education in rural areas. Therefore, the issue of people's quality of life through education and health needs to be thoroughly researched and evaluated in order to come up with effective policy solutions.

Researching education and health in relation to quality of life is an important task, not only to assess current real prices but also to propose issues for improvement, building a solid and prosperous society for the future of the country.

### 2. RESEARCH CONTENT

#### 2.1. Quality of life

Quality of life is a feeling of satisfaction or well-being when the elements of life meet important personal needs; it is the agreement, satisfaction with what people achieve ( Thoa, 2003) . The Treasury Board of the Secretariat of Canada (1999) believes that quality of life, in a subjective perspective, is expressed through positive feelings and satisfaction with the overall life. In terms of

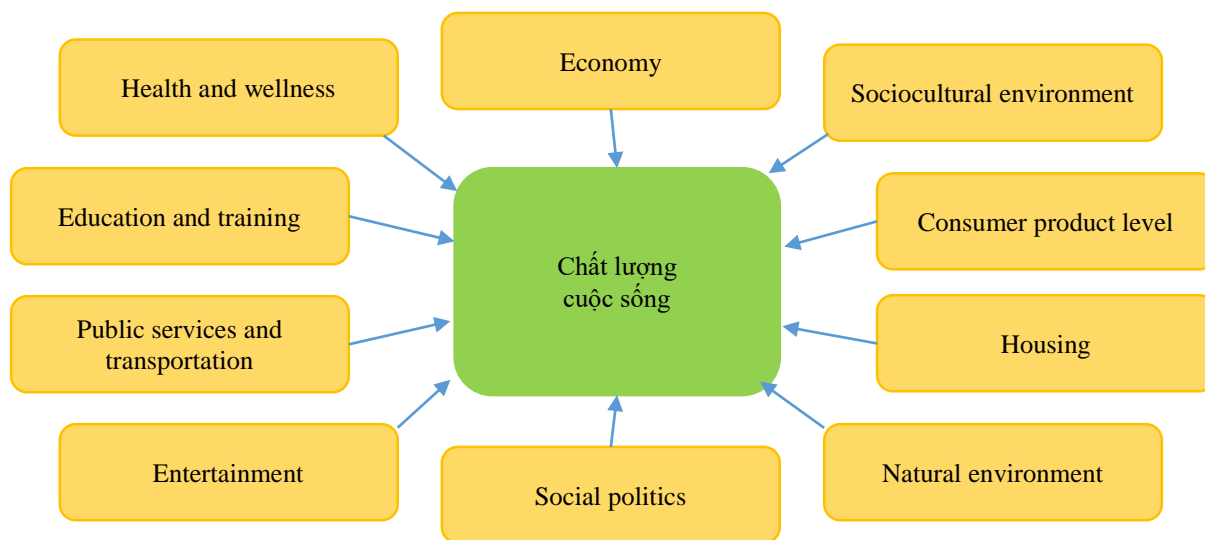
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customers, quality of life should fully meet cultural and social needs, including material assets, social status and physical health ( Treasury Board of the Secretariat of Canada, 1999).

Boehnke (2003) stated that: quality of life is related to personal happiness, including many multidimensional emotional aspects. This definition is based on common social goals in Europe, such as ensuring a minimum standard of living, creating employment opportunities and social support. Therefore, quality of life is not only based on factors such as income, education or assets, but also must pay attention to health, family relationships ( Boehnke, 2003).

The World Health Organization (WHO, 1997) defines quality of life as the way individuals evaluate their place in the society and culture in which they live, through values such as goals, expectations and standards. This concept is influenced by many factors, such as physical and mental health, independence, social relationships, beliefs and living environment ( WHO, (1997).

Thus, quality of life is a broad and highly personal concept, each person will have a way of feeling and choosing for their life to bring the most happiness. However, quality of life is also affected by the community, society and surrounding living environment. To improve the quality of life, it is necessary to pay attention to developing its constituent elements, ensuring to meet the increasing needs of people in a positive direction, from increasing income and reducing poverty, to improving education, education and creating the environment. Currently, the Mercer Company's criteria for assessing urban quality of life are very popular in the world, based on 39 criteria, divided into 10 groups:



**Figure 1: Groups of criteria for assessing quality of life**

**Source: (Ha, 2013).**

Quality of life is the sum of people's satisfaction and fulfillment in many different areas. Each aspect not only directly affects the individual but also interacts with each other, creating an overall picture of the ability to live, happiness and development of society.

### 2.2. Education, health care and impact on quality of life of residents

Education, health and quality of life of the population are a closely interacting chain, confirmed in many previous studies, with an important role in the sustainable development of society. Becker (1964) argued that education is an important form of "human capital", helping to increase labor productivity, thereby improving income and quality of life. When people are equipped with better knowledge and skills through education, they are able to be more aware of the factors affecting health, from disease prevention to maintaining a healthy lifestyle, as Lucas (1988) mentioned in the endogenous growth theory.

Education has a profound impact on the quality of life by equipping individuals with the skills and knowledge needed to participate effectively in the labor market and society. Education not only improves economic capacity but also has a positive impact on other social factors such as health and participation in community activities. Cutler and Lleras-Muney (2006) also found that people with higher levels of education tend to have better health and longer life expectancy. This shows that education not only increases income but also contributes to improving the overall quality of life, through improving human awareness and skills. Education and health are closely related, in which people with higher levels of education tend to have better health, creating conditions for individual

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and community development. Furthermore, according to Schultz, education also reflects a country's concern for human development, through indicators of literacy rates, cultural levels, and educational infrastructure.

Along with education, health is a core factor in improving the quality of life through protecting and improving people's health. Good health is the basis for people to participate effectively in economic and social activities. According to Grossman (1972), health is not only an input factor in the economic production process but also an important form of "human capital". A good health system helps reduce disease rates, increase labor productivity and increase life expectancy, thereby directly improving the quality of life. WHO (2008) emphasizes that good health is a fundamental factor for sustainable development and for people to enjoy life to the fullest.

The development of education and health contributes to a healthy, well-educated population, and thus improves the overall quality of life. Inequalities in education and health often lead to inequalities in the quality of life. Therefore, when both systems are improved, it will create a more equitable living environment, reduce poverty and improve human development indicators (UNDP, 2010).

### 2.3. Quality of life of Vietnamese people through education and health index

#### 2.3.1. Education

The quality of life in Vietnam has seen many positive changes in recent years thanks to sustainable economic growth, improved infrastructure and improved quality of health and social services. Increasing per capita income, along with the development of social security programs, has helped improve the living standards of the majority of the population. However, some challenges such as environmental pollution and inequality still exist, requiring more comprehensive solutions. In the overall picture of quality of life, education is one of the factors that plays an important role, not only improving the skills, knowledge and values necessary for personal development but also contributing to promoting economic and social development.

##### 2.3.1.1. General education stage

In recent years, the general education system has made great strides, with an increase in both the quantity and quality of schools, facilities and teaching staff. This development not only reflects the efforts of the Vietnamese Party and State in improving learning conditions but also contributes to creating a new generation of intellectuals capable of meeting the needs of the modern labor market.

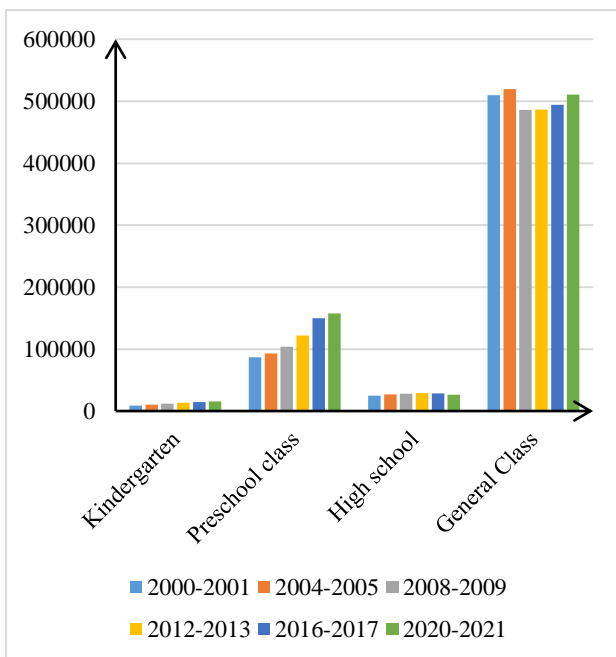


Figure 2. Number of schools and classes at preschool and general education levels in Vietnam

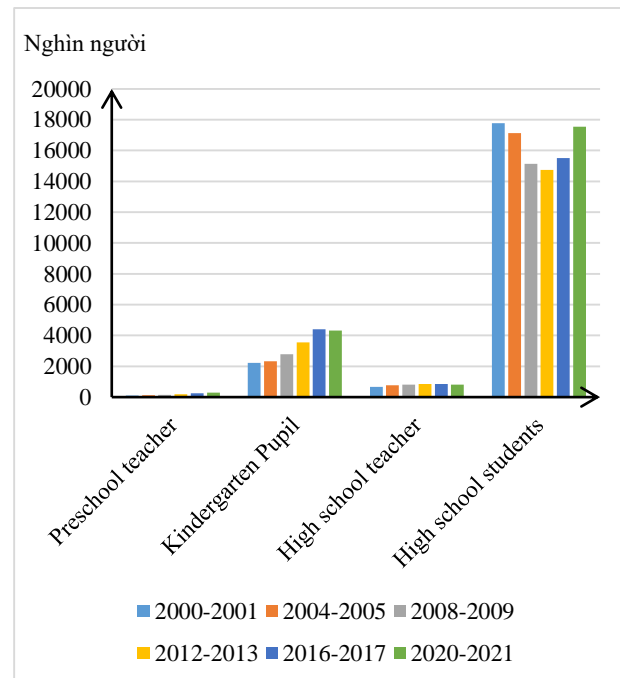


Figure 3. Number of teachers and students in Vietnam

Source: General Statistics Office of Vietnam

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Facilities for the preschool and general education system are increasingly being improved. The number of schools and classes at all levels tends to increase, especially clearly at the preschool level. This reflects more careful preparation for receiving children to preschool. For the general education level, the number of classes has changed unsteadily, in the 2008-2009 school year there was a significant decrease compared to 2004-2005, then increased slightly again in the following years. The decrease in the number of classes, while the number of schools still increased, is due to some previous classes being put into use for other functions, such as libraries, team activity rooms, etc.

Preschool level, along with the increase in school facilities, the number of teachers and students tends to increase significantly. In the 2020-2021 school year, compared to the 2000-2001 school year, the number of preschool teachers increased by 272%, the number of students increased by 196%. Thus, the number of teachers increased faster than the number of students. That proves that child care will be more attentive, the quality of life in this indicator will be improved. If in the 2000-2001 school year, the average number of students per teacher was 21.4, then in the 2020-2021 school year it was only 15.4. The average number of children per teacher decreased, which is a good opportunity for teachers to take better care of children, creating conditions for children to develop comprehensively in terms of physical, intellectual and spiritual aspects.

For general education, from the 2000-2001 school year to the 2020-2021 school year, the number of general education teachers was relatively stable, but the number of students fluctuated strongly: from 2000-2001 to 2012-2013, there was a sharp decrease, then a sharp increase in the following years (this increase and decrease is a result of the population growth rate). However, the average number of students per teacher still shows a positive trend: in the 2000-2001 school year it was 26.9, then in 2020-2021 it decreased to 21.5. This once again reflects that student care tends to be more positive, and the quality of life in education indicators tends to improve. That is also what made the high school graduation rate in Vietnam increase sharply from 2000 to 2020, from 89.84% to 97.94%.

As the quality of life improves, the number of years of schooling of the population also increases.

**Table 1. Average years of schooling in Vietnam**

	2012	2014	2016	2018	2020	2021
Average years of schooling	7.45	8.3	8.49	8.64	9.1	9.2

*Source: General Statistics Office of Vietnam*

Thanks to the increase in the number of years of schooling, combined with the implementation of the literacy strategy in remote areas, in 2020, the literacy rate for people aged 15-60 in Vietnam reached 97.85%, of which the age group from 15-35 reached 99.3%. The literacy rate is an important indicator to assess the accessibility and quality of basic education in a country. It shows the percentage of the population that can read and write, thereby reflecting the level of cultural and economic development of a society. With these achievements, Vietnam's general education is equivalent to the OECD group of developed countries, in the top 40 (Center for Educational Communication, 2021).

### 2.3.1.2. Higher education

Higher education is a level of education that aims to provide in-depth knowledge and practical skills in various fields, from natural sciences, engineering, social sciences, to arts, medicine and management. The goal of higher education is not only to develop knowledge but also to train high-quality human resources, meeting the needs of specialized labor in the market, contributing to economic development. Along with general education, Vietnamese higher education has achieved remarkable achievements, contributing greatly to socio-economic development.

**Table 2. Number of schools, lecturers and students of Vietnamese higher education**

	2000	2004	2008	2012	2016	2020
School	178	230	393	421	235	242
Lecturer	32,300	47,600	60,700	87,700	72,790	76,580
Student	899,500	1,319,800	1,719,500	2,178,600	1,767,880	1,905,960
Graduates	162,500	195,600	222,700	425,200	318,070	242,380

*Source: General Statistics Office of Vietnam*

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The table shows that Vietnam's higher education has grown strongly in scale, with the number of universities, students, and lecturers constantly increasing over the past two decades. From 2000 to 2012, the number of schools, lecturers, and students all increased significantly, reflecting the increasing demand for high-quality human resources in society. The number of university students increased from nearly 900,000 (in 2000) to more than 2.1 million (in 2012). The number of schools also increased from 178 (in 2000) to more than 421 (in 2012), demonstrating strong investment in infrastructure and education.

Along with the expansion, the quality of teaching and research has also improved. Many universities in Vietnam have made significant investments in research staff, equipment, and training programs. Many lecturers have achieved doctoral degrees or higher in countries with developed education systems, contributing to improving the quality of education. In addition to improving content, universities have begun to apply many advanced technologies and teaching methods such as online learning (e-learning), learning management systems (LMS), and artificial intelligence (AI) in teaching. In particular, the trend of using technology in education has increased sharply in the context of the COVID-19 pandemic, opening up many new facilities to access and improve the quality of teaching and training.

Along with advanced learning, universities have been perfecting scientific research, international cooperation and innovation activities. Some universities have published international scientific publications, helping to enhance the position of Vietnamese education in the international arena. Many universities in Vietnam have promoted international cooperation programs, linking with prestigious universities in the world to offer high-quality training programs, attracting students. These joint programs not only help improve the quality of training but also create opportunities for students to access advanced global education and improve foreign language skills. With these changes, Vietnamese higher education has contributed significantly to training high-quality human resources for the economic, technological and social sectors. Supporting this development, graduates from Vietnamese universities have been actively participating in important fields such as information technology, engineering, medicine, education, business management, and social sciences. The number of graduates increased significantly from 2000 to 2012, with more than 425,200 students graduating in 2012, reflecting the efforts of the education system in providing human resources for society.

Thus, the period from 2000 to 2012 was a period of strong growth in the number of schools, students, and graduates. Then, from 2012 to 2020, there was a significant decline in these numbers. This decline is related to education and admissions policies, vocational training trends, and international education.

Despite many achievements, Vietnamese higher education still faces a number of major challenges such as: uneven training quality among universities; international competition and integration, requiring the education system to improve quality and competitiveness.

Thus, it can be seen that Vietnamese education has achieved many significant successes in improving and ensuring the quality of life for the people. However, in order to continue to contribute more effectively to social development, education needs to continue to innovate, improve the quality of training and ensure equal learning opportunities for all classes. At the same time, the education system needs to adapt to changes in the labor market and society to create high-quality human resources, contributing to improving the quality of life and sustainable development.

### 2.3.2. Health

Health is one of the important criteria reflecting the quality of life of the people, because it is directly related to health, life expectancy and people's access to health care services. Good health is the foundation for people to participate in all economic and social activities and improve the quality of life of individuals as well as the community.

Along with socio-economic development, the Party and State's deep concern for people's lives, especially in the field of health care, medical facilities are constantly invested and expanded.

**Table 3. Number of medical examination and treatment facilities**

	2000	2004	2008	2012	2017
Total	13117	13149	13460	13523	13583
Hospital	835	856	974	1042	1085
Nursing and rehabilitation hospital	92	53	40	59	60
Regional clinic	936	881	781	631	579
Commune and ward health stations	10271	10516	10917	11049	11120

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Medical station of agencies and enterprises	918	789	710	710	710
Other facilities	65	54	38	32	29

*Source: General Statistics Office of Vietnam*

The data table shows that the medical facilities are very diverse and rich, including specialized medical facilities such as hospitals, or supporting medical facilities such as clinics, health stations, etc. This reflects that the medical system is moving towards specialization, focusing on providing medical services at many levels, from emergency treatment to post-treatment care, helping to increase the effectiveness of health care and improve the quality of life. The diversity of the medical system aims to ensure that people have better access to medical services, helping to reduce the burden on large hospitals and improve medical care.

The table also shows that the total number of medical examination and treatment facilities in Vietnam has continuously increased from 2000 to 2017, from 13,117 to 13,583 (an increase of 466 facilities, an average increase of 27.4 facilities per year). Among the medical facilities, the number of commune and ward health stations accounts for the largest number (in 2017, the number of commune and ward health stations accounted for 81.9% of the total number of medical facilities). Following the number of commune and ward health facilities is the number of hospitals (in 2017, the number of hospitals accounted for 8.0% of the total number of medical facilities). Although only behind the number of commune and ward health stations, the number of hospitals tends to increase faster: the growth rate of the number of hospitals from 2000 to 2017 was 129.9%, while commune and ward health stations increased by 108.3%. This proves that the State has paid more attention to developing more specialized medical facilities, and the quality of medical care for the people is focused on with better quality. The number of remaining medical facilities accounts for a smaller proportion, and tends to shrink and decrease gradually. This shrinking and decreasing is due to the fact that these facilities have been upgraded to a higher level of expertise, that is, upgraded to hospitals (for example, general clinics, nursing and rehabilitation hospitals upgraded to general or specialized hospitals).

Health care for the people has also gradually improved, clearly reflected in the average number of hospital beds per ten thousand people and the average number of doctors per ten thousand people.

**Table 4. Number of hospital beds and number of doctors per 10,000 people**

	2015	2016	2017	2018	2019	2020	2021	2022
Average hospital beds per 10,000 people (Beds)	26.5	27	27.5	28	28.5	31	31.2	31.7
Average doctor per 10,000 people (People)	8.0	8.2	8.4	8.6	8.8	8.6	11.1	10.0
Average number of doctors per hospital bed (people)	0.2	0.2	0.2	0.3	0.3	0.3	0.3	0.3

*Source: Author's calculation*

From 2015 to 2022, the indicators of the average number of hospital beds per 10,000 people, the average number of doctors per 10,000 people, and the average number of doctors per hospital bed all increased continuously. In 2022, the average number of hospital beds per 10,000 people increased by 5.2 beds compared to 2015, the average number of doctors per 10,000 people increased by 2, and the average number of doctors per hospital bed increased by 0.1. Although the increases are very small, they are also manifestations of progress in people's health care and an improvement in quality of life.

Improvements in healthcare have led to health indicators showing increasing progress: average life expectancy has increased; child mortality has tended to decrease.

**Table 5. Average life expectancy and child mortality rate in Vietnam**

Year	2012	2014	2016	2018	2020	2022	2023
Average life expectancy (years)	73.05	73.23	73.39	73.49	73.7	73.64	74.5
Child mortality rate (%)	23.2	22.4	21.8	21.4	22.3	18.93	17.35

*Source: Vietnam Statistical Yearbook*



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Average life expectancy has a steady increase, from 73.05 years (2012) to 74.5 years (2023), while the child mortality rate has decreased significantly, from 23.2% (2012) to 17.35% (2023). This change reflects the clear effectiveness of investment and development in health care and community health care.

Thus, in recent years, Vietnam's healthcare has made remarkable progress, gradually improving the quality of service and enhancing the quality of healthcare for the people. However, there are still some limitations such as:

- There is a clear difference in the quality of health services between urban and rural areas. In remote areas, the health system lacks facilities, equipment and skilled human resources, making it difficult for people in these areas to access high-quality health services.

- Overcrowding in major hospitals, especially in big cities like Hanoi and Ho Chi Minh City, remains a serious problem. Patients often have to wait long to be examined and treated, leading to reduced quality of care and increased risk of cross-infection in the hospital environment.

- The number of highly qualified doctors, nurses, and medical staff is limited, especially in medical facilities outside of major cities. This leads to a shortage of care and treatment capacity, especially for complex and high-tech diseases.

- Although health insurance has covered the majority of the population, the cost of specialized medical services, herbal medicine and long-term treatment is still quite high for a segment of the low-income population. This makes it difficult for many people to access good health care services, causing delays in treatment.

Thus, to improve the overall quality of health care, it is necessary to improve management, resource allocation and quality of health services.

### 3. CONCLUSION

The quality of life of Vietnamese people has improved significantly in recent years, especially through education and health indicators. The education system has developed in scale and quality, contributing to improving the intellectual level of the people, meeting the needs of modern society. However, there are still major challenges, especially in the era of integration and digital technology, that require efforts to overcome.

In the health sector, the health care system has made significant progress, with an increase in the number of hospitals and improvements in medical services. However, overcrowding in major hospitals, a shortage of highly skilled medical personnel, and disparities in facilities between regions remain issues that need to be addressed.

Thus, to achieve sustainable development goals, Vietnam needs to continue to improve and perfect its education and health systems, promoting protection so that all people have access to education and care services.

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