

Current Situation of Mental Health among Secondary School Students in Hanoi

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Abstract: This study focuses on assessing the current status of mental health literacy, coping skills with mental health among secondary school students in Hanoi. Based on a survey of 450 students from three schools representing different types of institutions and both urban and suburban areas, the study employed the AMHLQ questionnaire, the ACS-SF coping scale, and the SDQ to collect data, followed by descriptive, correlational, and multivariate regression analyses. The results indicate that most students demonstrated relatively good mental health literacy and coping skills; however, a considerable proportion (27.6%) was found to be at risk of or exhibiting signs of mental health disorders. These findings highlight the importance of enhancing mental health literacy and developing coping skills as core intervention strategies for preventing mental disorders in schools, while also providing essential empirical evidence to inform the development of policies and programs that support school mental health tailored to lower secondary students in Vietnam.

Keywords: mental health, literacy, coping skills, secondary school students, Hanoi.

1. INTRODUCTION

Mental health (MH) of secondary school students is an urgent concern for health, education, and social policy in many countries, including Vietnam. According to the World Health Organization (WHO), about 14% of children and adolescents worldwide experience mental health disorders, with many cases beginning during school age (World Health Organization, 2021). In Vietnam, V-NAMHS survey revealed that 21.2% of adolescents (aged 10–17) experienced at least one MH problem within the past 12 months, yet fewer than 10% accessed professional support services (Institute of Sociology et al., 2023). UNICEF (2022) report further indicated that around 26% of Vietnamese students self-reported a medium to high risk of MH problems, especially in major urban areas where students face academic pressure, competition, and disruptions caused by the COVID-19 pandemic (UNICEF, 2022).

In addition to social factors, secondary school is a psychologically sensitive developmental stage, during which students undergo not only physical and cognitive changes but also frequent emotional instability and social difficulties. At this age, they begin to form personal values and self-identity, while remaining vulnerable to academic pressure, family and school expectations, and learning disruptions such as online schooling or pandemic-related interruptions (Ministry of Education and Training & UNICEF, 2023; UNICEF, 2022). Empirical research shows that students at this level often cope with heavy workloads, exam pressure, and competition for admission to specialized schools, while also being at higher risk of bullying, school violence, and difficulties in building relationships with peers and teachers (UNICEF, 2022; Nguyen et al., 2022). These factors contribute to rising rates of anxiety, depression, and mental disorders among students (Nguyen et al., 2022; World Health Organization, 2021).

This study was conducted with the following objectives: (1) To assess secondary school students' MH literacy; (2) To evaluate their coping and preventive skills regarding MH problems; (3) To measure the prevalence of MH issues using the SDQ.

The findings aim to provide empirical evidence for developing comprehensive school-based MH intervention programs and policies tailored to the developmental characteristics of Vietnamese students in the modern context.

2. METHODOLOGY

2.1. Research Design

This study employed a quantitative cross-sectional design. The quantitative approach enabled systematic and objective data collection on students' mental health literacy, coping skills, and current mental health problems using standardized instruments. A cross-sectional design allowed examination of these variables at a single point in time and analysis of their interrelationships within a representative sample, which was appropriate for the study's aim of describing the current situation and testing associations (Creswell & Creswell, 2018). This design also minimized recall bias and facilitated large-scale data collection in a short period.

2.2. Participants and Study Sites

Participants were secondary students from three schools in Hanoi, selected to reflect diverse school types and socio-economic contexts: My Dinh Secondary School (public, urban); Nguyen Binh Khiem Secondary School (private, urban); Hoa Xa Secondary School (public, suburban)

A total of 450 students from grades 6 - 9 was recruited using stratified random sampling by grade, gender, and academic performance. The sample distribution was proportional to school and class size, ensuring representativeness.

2.3. Research Instruments

Mental health literacy: assessed using the Adolescent Mental Health Literacy Questionnaire (AMHLQ, 18 - 20 items) covering knowledge, symptom recognition, attitudes, and help-seeking.

Coping skills: measured with the Adolescent Coping Scale - Short Form (ACS - SF, 18 items), including social support, problem-solving, and emotion regulation.

Mental health status: evaluated with the Strengths and Difficulties Questionnaire (SDQ, 25 items) on emotional, behavioral, hyperactivity, peer, and prosocial domains.

All tools are internationally validated and adapted for Vietnamese adolescents (Wei et al., 2016; Frydenberg & Lewis, 2009; Goodman, 2001).

2.4. Data Collection and Analysis

Parental and student consent was obtained before survey administration. Questionnaires were completed at school under teacher and researcher supervision, ensuring privacy and confidentiality. Data were coded and analyzed using SPSS 26.0 with descriptive statistics, Pearson correlations, and multivariate regression to explore associations and predictors of students' mental health outcomes.

3. RESULTS

3.1. Results of Assessing Students' Mental Health Literacy using the AMHLQ Scale

Table 3.1. Students' Awareness of Mental Health Issues

Indicator	Number (n)	Percentage (%)
Overall mean score	14,7 ± 3,2	—
Basic knowledge of mental health	406	90,2
Recognition of disorder symptoms	341	75,8
Positive attitude/reduced stigma	327	72,7
Awareness of seeking support	277	61,6
Willingness to refer friends to professionals when facing psychological difficulties	264	58,7
Considering mental health problems as weakness/stigmatizing	123	27,4
Cronbach's Alpha	0,81	—

The survey results showed that the overall mean score of students' mental health literacy (AMHLQ) was 14.7 ± 3.2 out of a maximum of 20 points, reflecting a fairly good level of awareness in the study sample. Component analysis indicated that the percentage of students correctly answering questions about basic knowledge and identifying mental disorder symptoms was the highest (an average of 82.3% and 78.4%). Meanwhile, the groups of questions on attitudes/stigma and awareness of help-seeking behavior showed lower rates of correct or positive responses (68.5% and 65.1%).

Specifically, 90.2% of students correctly identified basic concepts of mental health, and 75.8% recognized at least two early signs of anxiety or depression. However, 27.4% of students still considered mental health problems as signs of weakness or something to be stigmatized, and only 61.6% knew clearly where to seek help when experiencing psychological difficulties (e.g., school counseling services, homeroom teachers, hotlines...). In addition, only 58.7% of students were willing to encourage friends to seek help from adults or professionals when noticing signs of psychological distress.

Table 3.2. Comparison of Students' Mental Health Awareness by Grade Level

Grade level	Number of students (n)	Mean AMHLQ score \pm SD
Grades 6–7	215	14,1 \pm 3,4
Grades 8–9	235	15,2 \pm 2,9
p-value	—	0,024*

(* $p < 0.05$, statistically significant difference)

Comparison by grade level showed that students in grades 8–9 had a higher mean awareness score than those in grades 6–7 (15.2 ± 2.9 vs. 14.1 ± 3.4 , $p < 0.05$). There was no significant difference between male and female students in the total AMHLQ score ($p > 0.05$). The internal consistency reliability test of the AMHLQ scale in this study reached Cronbach's Alpha = 0.81, indicating a high level of consistency among items.

In-depth interviews with students supplemented and clarified the findings from the quantitative survey. Many students shared that they recognized the important role of mental health in learning and daily life, and were able to name some common signs of anxiety and depression such as prolonged sadness, insomnia, difficulty concentrating, or social withdrawal. "I think mental health is when we feel happy, not sad or worried too much. I've heard about depression on television, but I don't really know the specific signs. If I feel sad or get bullied, I usually don't tell anyone because I'm afraid other classmates will make fun of me, and also I don't know who to talk to besides my parents." (*Male student, Grade 6*)

However, some students still thought that psychological problems were signs of weakness, or hesitated to mention such issues to teachers or friends for fear of stigma. Notably, many students were confused when asked about where or whom they could seek help from, or about the procedures to access support when facing psychological difficulties. Some said they had never participated in communication sessions or extracurricular activities on mental health at school. These findings were consistent with the quantitative data, showing that although most students already had basic knowledge and a more open attitude toward mental health, there remained significant barriers in help-seeking skills and reluctance to face mental health problems in practice. "I think now students are more concerned about mental health, especially in grade 9 when exam pressure is very high. I once joined a communication session on this topic and learned more signs, such as prolonged fatigue and unwillingness to talk to anyone. However, some students still don't dare to go to the counselor because they're afraid of being thought weak. I think schools should encourage more sharing and provide clearer information on how to seek help when needed." (*Female student, Grade 9*)

The above results show that most students have good awareness of mental health, but there remain considerable gaps in help-seeking skills and stigma reduction. This suggests the need to strengthen communication activities, counseling, and psychosocial skills education in schools, particularly targeting younger students and focusing on support and access to psychological services.

3.2. Results of Assessing Students' Coping Skills using the ACS-SF Scale

The survey results showed that the overall mean score of students' coping skills on the ACS-SF scale was 60.8 ± 8.7 out of a maximum of 90 points, reflecting a fairly good level of coping skills among the study sample. Component analysis indicated that the highest proportion of students scored well in the domain of seeking social support (81.3%), followed by

problem-solving skills (76.9%) and emotion regulation (69.8%). However, a proportion of students still tended to use avoidance or ineffective coping strategies, accounting for about 18.5% of the total.

Specifically, 84.4% of students reported that they often shared and sought support from friends, family, or teachers when facing difficulties, while 79.1% said they chose to actively think of solutions or make plans to cope with problems. However, only 66.4% of students self-assessed as being able to regulate negative emotions (such as stress or sadness) through positive activities such as sports, listening to music, or resting. In addition, 15.7% of students admitted that they sometimes chose to ignore or avoid problems rather than confront and solve them.

Comparison by grade level showed that students in grades 8–9 had higher average coping skill scores than those in grades 6–7 (62.3 ± 8.1 vs. 59.1 ± 9.2 , $p < 0.05$). There was no significant difference in coping skill scores between male and female students ($p > 0.05$). The internal consistency reliability test of the ACS-SF scale in this study reached Cronbach’s Alpha = 0.83, demonstrating high consistency among items.

Table 3.3. Results of Assessing Students’ Coping Skills using the ACS-SF Scale (n = 450)

Indicator	Number (n)	Percentage (%)
Overall mean score	60,8 ± 8,7	—
Seeking social support	380	84,4
Active problem-solving	356	79,1
Positive emotion regulation	299	66,4
Use of avoidance/unhealthy coping	71	15,7
Students scoring high in social support skills	366	81,3
Students scoring high in problem-solving skills	346	76,9
Students scoring high in emotion regulation skills	314	69,8
Cronbach’s Alpha (internal consistency of ACS-SF)	0,83	—

In-depth interviews revealed that most students were aware of the importance of proactive coping when facing psychological difficulties or academic pressure. Many shared that when feeling stressed, sad, or troubled, they often confided in close friends, family members, or sought advice and support from teachers. “Recently, I felt pressure because of the upcoming final exams. I found myself getting irritable, but I tried to remind myself to stay calm and shared with my parents. They advised me to study in smaller parts and take reasonable breaks. If I get too tired, I’ll ask my homeroom teacher or classmates for more effective study methods. I think sharing is the best way to relieve pressure.” (*Male student, Grade 8*)

Some students reported using positive strategies such as playing sports, listening to music, or reading books to release negative emotions. However, there were also students who admitted that sometimes they chose to remain silent, avoid problems, or endure them alone due to reluctance to share or fear of being judged. In particular, older students tended to be more proactive in finding solutions and seeking support, whereas younger students were sometimes hesitant, not knowing whom to turn to or what to do when facing difficulties. These findings clearly reflect a positive trend among most students in applying coping skills, while highlighting the need to continue educating, guiding, and reinforcing healthy coping skills, especially for those with avoidant tendencies or limited willingness to share.

Overall, these results show that most students have developed and applied positive coping skills, but there remain certain limitations in emotion regulation and proactive coping. This underscores the importance of strengthening life skills education and supporting the development of healthy coping capacities for students, particularly younger ones or those inclined to avoid problems.

3.3. Results of Students’ Mental Health Status According to the SDQ Scale

The results of assessing students’ mental health status using the SDQ scale showed that the average total score of the study group was 14.3 ± 5.1 out of a maximum of 40. Analysis by indicator groups revealed that 72.4% of students were classified as “normal” in terms of mental health, while 17.8% fell into the “at-risk” group, and 9.8% were in the group “with mental health problems requiring special attention.”

Specifically: 18.4% of students showed signs of emotional disorders such as prolonged sadness, anxiety, or insomnia; 14.7% scored high on uncontrolled behavior, such as irritability, easy anger, or conflicts with peers; In the area of hyperactivity/inattention, 13.1% frequently exhibited poor concentration or difficulty controlling impulses; The group with peer relationship difficulties (isolation, vulnerability to bullying) accounted for 11.8%. Meanwhile, the score for prosocial behavior (e.g., sharing, helping friends, showing care for others) among most students was relatively high, averaging 6.7 ± 1.3 out of 10.

Table 3.4. Results of students’ mental health assessment according to SDQ (n = 450)

Indicator	Number (n)	Percentage (%)
Average total SDQ score (out of 40)	14,3 ± 5,1	—
Normal	326	72,4
At risk	80	17,8
With mental health problems requiring special attention	44	9,8
Emotional disorder (with symptoms)	83	18,4
Uncontrolled behavior (with symptoms)	66	14,7
Hyperactivity/inattention (with symptoms)	59	13,1
Peer relationship difficulties (with symptoms)	53	11,8
Prosocial behavior score (mean ± SD)	6,7 ± 1,3	—
Cronbach’s Alpha (SDQ reliability)	0,79	—

When compared by grade level, students in grades 6–7 had a higher rate of psychological difficulties than those in grades 8–9 (the proportion in the “at-risk” and “problem” groups was 32.1% and 22.5%, respectively; $p < 0.05$). There was no significant difference between male and female students in total SDQ score, but females had a higher rate of emotional disorders than males (20.9% vs. 15.7%). The internal consistency reliability of the SDQ in this study was Cronbach’s Alpha = 0.79.

Table 3.5. Comparison of mental health results by grade level

Grade level	Number of students (n)	“At-risk” and “problem” group (%)
Grades 6–7	215	32.1
Grades 8–9	235	22.5
p-value	—	0.031*

These results indicate that although the majority of students have normal mental health status, a considerable proportion still face psychological difficulties in various aspects. This highlights the need for early detection and implementation of psychological support programs, enhancement of coping skills, and timely interventions within the school environment.

Our findings showed that 27.6% of secondary school students fell into the “at-risk” and “problem” groups according to the SDQ, while 72.4% were in the “normal” group. This rate is consistent with UNICEF’s (2022) report, which found that about 26% of Vietnamese school students were at medium to high risk of mental health problems (UNICEF, 2022). The V-NAMHS study (Institute of Sociology et al., 2023) also reported that the proportion of students and adolescents showing signs of mental health disorders ranged from 21% to 24%, with emotional disorders common at 15% to 20%, closely matching the 18.4% emotional disorder rate recorded in our study sample.

When compared with international studies, Goodman (2001) summarized that the proportion of students in the “at-risk” and “problem” groups through the SDQ typically ranged from 10% to 25% in the UK and other European countries, while the “normal” group accounted for about 70–80%, which is consistent with our findings (Goodman, 2001). Some Asian studies, such as those in China, Japan, and Malaysia, also reported that the proportion of lower secondary students at risk of emotional disorders ranged from 15% to 22% (Youthinmind, 2023). Compared to these results, the rates of psychological difficulties, emotional disorders, and hyperactivity/inattention in our study all fall within the ranges of both domestic and international studies, confirming the representativeness and reliability of our survey results. This also strengthens the practical value and applicability of using the SDQ scale in assessing the mental health of Vietnamese students.

4. CONCLUSION

The study demonstrated that mental health literacy and coping skills play an important protective role in the mental health status of secondary school students. Most students from the three selected schools, representing different types and geographical areas of Hanoi, had relatively good basic knowledge of mental health and fairly good coping skills. However, the proportion of students at risk or exhibiting symptoms of mental disorders remained notable (27.6%), particularly concerning emotional difficulties, behavioral problems, hyperactivity, and peer relationship challenges. The analysis results indicated that good mental health literacy and effective coping skills are independent predictors of reduced risk of psychological difficulties among students.

Alongside these positive findings, the study also identified limitations in help-seeking skills, stigma-reducing attitudes, and hesitation in accessing school-based psychological services among a subset of students. These findings highlight the urgent need to strengthen communication efforts, life skills education, and the development of comprehensive intervention models within schools, while ensuring close collaboration between schools, families, social work professionals, and relevant organizations to protect, support, and promote students' overall mental health in the current context.

The study's results not only shed light on the current situation and factors related to the mental health of secondary school students but also provide important practical evidence for the formulation of policies and implementation of effective prevention and intervention programs within Vietnam's educational environment. Future research should expand the scope and adopt longitudinal or intervention-based designs to better establish causal relationships and assess the effectiveness of school-based mental health support models.

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