



Mental Health Literacy Levels Among Vietnamese Adolescents and Associated Mental Health Disorder Prevalence

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Abstract

Mental disorders pose a profound challenge around the world, given the massive and continuously rising number of people experiencing them. The global increase in the prevalence of mental health disorders has been seen even more starkly in Vietnamese society. An alarming number of adolescents (14.9% of the Vietnamese population) have experienced pressing concerns related to mental health. This research aims to investigate the correlation between mental health literacy levels and the prevalence of mental disorders among Vietnamese adolescents. By looking through Vietnamese mental health conditions and proven effective interventions, this research focuses on how improved education programs and access to care can reduce the prevalence of mental health disorders among Vietnamese adolescents in the future. Secondary data collection methods were applied. Drawing on sources such as journals, scientific articles, and websites, the research assembled relevant information concerning mental health in general and in Vietnam for a tailored analysis aligned with the study's goal. Poor literacy is likely to be responsible for the high prevalence of mental disorders, which can be recognized as one factor contributing to high rates of mental issues among Vietnamese adolescents. Their link is articulated in terms of several aspects in this research, focusing on literacy's effects on hindering prevention and treatment. In addition, this research discusses the impacts of education programs and healthcare accessibility on individuals' mental health, emphasizing the need for a holistic approach that integrates both measures. The findings call for targeted interventions to reduce the rates of mental health disorders. In response to today's aggravating rise in mental health disorders among Vietnamese adolescents, it is vital to take action promptly.

Introduction

According to the World Health Organization, the term "mental disorder" refers to a notable impairment in a person's thinking, emotional management, or behavior [1]. Mental disorder is a broad category encompassing various specific disorders that indicate different anomalies in an individual's mental state. Additionally, "mental disorder," "mental illness," and "mental disease" are often used interchangeably in different settings, but the literature in this field distinguishes between these three terms. They all define adverse health conditions that negatively affect a person, as the mentioned definition denotes. However, "mental illness" and "mental disease" are more specific, with an emphasis on disruptions in a person's ability to function in their daily life. These three words are used interchangeably in this paper. In addition, it will primarily use the term "mental disorder" to apply to all three circumstances since the focus is on incidents in which individuals are experiencing mental difficulties rather than the severity of each case.

Diagnoses of mental health disorders are increasingly common and anyone can suffer from them regardless of age, gender, ethnicity, or other socioeconomic factors. These disorders can detrimentally affect individuals on a wide spectrum of severity, from disruption of appetite and concentration to more severe symptoms, such as exacerbating heart disease and digestive issues including stomachache, acid reflux, bloating, constipation, and heartburn [2]. An estimated 970 million people worldwide were experiencing a mental disorder in their daily lives in 2019. Anxiety disorders were found to be the most common, accounting for 31% of this

patient population, especially prevalent in children and adolescents [3]. While mental health awareness has increased in recent years as a result of media coverage, celebrity endorsement, and easier access to therapeutic resources, these alarming statistics emphasize that mental disorders are a significant global challenge [4]. In particular, among 10 to 19-year-olds, one in seven experiences a mental health illness, with anxiety disorders also the most common [5].

The youth of Vietnam are no exception. The most recent data from 2023 illustrates that approximately 15 million citizens (14.9% of the population) grapple with at least one mental illness in their lifetime [6]. Out of Vietnamese adolescents, one in five currently faces a mental health problem (21.7%), and one in thirty meets the defined criteria for a diagnosed mental disorder (3.3%). Mirroring the global statistics, anxiety disorders are the most prevalent mental health concerns among them [7]. Critically, investigations in the past decade by Do et al. (2014) and Le et al. (2020) identified a low mental health literacy among the young Vietnamese population, which they suggest is a possible factor contributing to the increased prevalence of mental health disorders [8], [9].

Building upon the concept of health literacy, Jorm et al. introduced to the public the term "Mental Health Literacy", which was defined as "knowledge and beliefs about mental disorders that assist in their recognition, management, or prevention" [10]. The characteristics of mental health literacy include "knowledge that benefits the mental health of a person or others", consisting of six components, including (1) the ability to recognize specific disorders or different types of psychological distress; (2) knowledge and beliefs about risk factors and causes; (3) knowledge and beliefs about self-help interventions; (4) knowledge and beliefs about professional help available; (5) attitudes which facilitate recognition and appropriate help-seeking; and (6) knowledge of how to seek mental health information. A low literacy level in this research is viewed as a deficiency in one or several aspects listed above.

There have been several studies around the world conducted on this possible link between mental health literacy levels and mental health disease prevalence: deficiency of awareness and understanding of mental health diseases frequently results in delayed or inadequate interventions, potentially creating conditions for the occurrence of mental health diseases [11]–[13]. However, there is limited research on this topic that focuses on the Vietnamese adolescent population. In light of those studies, this research aims to connect mental health literacy levels among Vietnamese adolescents and the prevalence of mental health disorders. It incorporates past trends and strategies successfully implemented in other contexts, such as education programs and improved access to care in different countries, to predict how today's literacy levels might impact the prevalence of mental health diseases in the future. It is important to note that this study utilizes secondary data collection methods, drawing from existing limited sources to analyze and interpret information related to young Vietnamese people. Recognizing mental health issues early and having sufficient knowledge to seek appropriate help in today's hectic world is of great importance, as mental health disorders may soon become a profound problem. Ultimately, this research calls for more resources to be put into educating Vietnamese adolescents about mental health and enhancing access to health care.

Methodology

In this study, a secondary data-gathering approach was employed to explore the mental health literacy levels of Vietnamese adolescents and their relevant mental health issues. Existing data, including past and present literacy levels and present mental conditions, were assembled. Google Scholar was the primary search engine used in this research.

A systematic literature review was also performed, using keywords such as "mental health literacy," "mental health disorders," and "Vietnamese adolescents." The study also used combinations of these using Boolean operators, such as "mental health literacy" OR "mental health education" and "mental health disorders" AND "mental health literacy" AND "Vietnamese youth". Results were included if they were published from 1990-2013 for past values and 2014-2023 for recent and present values.

Discussion

The link between mental health literacy levels and the prevalence of mental health disorders is the main focus of this research. Below-average literacy may be a significant factor in the increasing incidence of mental health disorders among Vietnamese adolescents.

A population-based study conducted on Chinese high school students in 2013 investigated the relationship between adolescent literacy and mental health [14]. The study tested the mental health literacy of this demographic using a self-reported questionnaire, which included depression vignettes, and assessed their depression using the Depression subscale of the DASS [15]. The authors identified that only a minor proportion of surveyed adolescents (16.4%) demonstrated sufficient mental health literacy. A similar proportion of respondents (14.8%) reported symptoms of depression. Critically, multiple logistic regression analysis demonstrated that these young people who reported having signs of depression were 1.52 times more likely to have an inadequate level of literacy than those who did not have depressive symptoms. As depicted in this referenced source, having an adequate mental health literacy level correlates to an accurate recognition of mental health problems and a willingness to seek appropriate assistance. In other words, individuals with an adequate understanding of mental health are more likely to recognize the signs of mental health issues and proactively seek the necessary support. As a result, their mental health conditions are addressed timely and improved.

Overall, this finding substantiates the primary argument of this research that young people who lack fundamental knowledge and sensible attitudes toward mental health are more prone to mental disorders. In resemblance to the Vietnamese context, this is also the case for adolescents and therefore should be closely examined to understand surrounding factors better [16]. In the research on Chinese students, the conclusion advocates for the implementation of well-constructed and evaluated programs, emphasizing that such initiatives may lead to improved mental health outcomes by facilitating early help-seeking behaviors. Given all this evidence, this research strongly recommends increased resources dedicated to educating Vietnamese adolescents about mental health.

Literacy Impact on Mental Health Disorder Prevalence

The impact of low mental health literacy on the high prevalence of mental health disorders extends across various dimensions [17], [18]. Failures in recognizing mental disorders, a crucial

factor of mental health literacy, may lead to drawbacks in receiving on-time and proper treatment [19]. They restrain individuals' ability to identify the mental health symptoms they are experiencing as signs of mental disorders. As a result, they may not reach out to professionals promptly for health care. For example, a mental disorder, if mistaken for a physical disorder, can result in the overlooking of complexities of the case and underutilization of other important mental treatments such as psychotherapy. Also, since patients cannot reflect comprehensively on their symptoms, they cause communication issues with health practitioners, making it challenging to take effective action at the outset or potentially resulting in improper diagnosis.

In some rural areas of Vietnam, mental disorders are considered taboo or a source of shame [20]. People with these conditions are thus often associated with stereotypes of insanity, unpredictability, instability, and danger. Inhabitants of many remote regions in Vietnam would rather attribute it to supernatural phenomena than practical environmental factors, thus rejecting evidence-based medicine in favor of alternate approaches to curing the disorder [20], [21]. For example, a shaman may be invited to "examine" the illness in a form similar to fortune-telling [22]. Believers think that these disorders are spiritual punishment for poor karma in current or previous lives. As such, the shaman is the connection and communication link with gods and demons and a logical individual to consult. After examining the patient, the shaman will inform the family why the family member is sick. Depending on the severity of the illness, the shaman will specify an animal that must be worshiped for the patient to recover. This indigenous technique, along with numerous others, is not peer-reviewed and medically vetted and thus may contribute to increasing occurrences of mental disorders - and potentially exacerbate patients' conditions by delaying or preventing necessary interventions. Normally, specialists consider certain reputable techniques in treating patients, namely pharmacologic treatments (SSRIs/SNRIs/TCA and other antidepressants) as well as evidence-based psychotherapy (like CBT, cognitive behavioral therapy). In emergency situations, treatments can even include very cool yet still reliable approaches such as electroconvulsive therapy (ECT, where someone with treatment-resistant depression is put under anesthesia and a non-dangerous seizure is induced, a highly effective treatment that saves many lives) or transcranial magnetic stimulation (TMS, an advanced technique involves inducing an electric current to stimulate parts of the brain). Indeed, without proper insight into the root causes of these symptoms or efficacious, proven treatments, the prevalence and morbidity of these disorders increase [23].

Furthermore, poor mental health literacy may foster misconceptions of mental health disorders as illustrated above and stigma around them tends to discourage individuals from help-seeking behaviors [24]. Adolescents are in a vulnerable phase of life and may feel ashamed or fear social judgment and discrimination if their mental health struggles become public. Consequently, some young individuals resort to enduring their difficulties in silence, thereby increasingly contributing to higher incidences and more severe manifestations of mental health disorders. Poor mental health literacy is further exacerbated by insufficient access to resources even when individuals seek treatment. In Vietnam, there is a shortage of psychological counselors in schools and many lack extensive expertise in treating the adolescent population, instead urging students to equip themselves with necessary self-help tools for self-protection and prompt implementation of coping mechanisms when needed [25]. For this reason, poor understanding

of self-help strategies due to a low mental health literacy level tends to limit individuals' ability to manage their mental well-being proactively.

The influence of low mental health literacy on the high prevalence of mental health disorders is noticeable. Acknowledging specific areas where this deficit exists in the community is crucial for designing targeted measures to improve mental health literacy.

Need for Education Programs

The investment in mental health education requires urgent implementation because the reported data on the prevalence of mental disorders in Vietnamese teenagers still shows no signs of halting [20], [26], [27]. Parents and teachers have an important role in this instance for two reasons: (1) the literacy level of adolescents is largely shaped by their home and school environments, and (2) low- and middle-income countries like Vietnam have a scarcity of mental health resources [20]. In particular, teachers with sufficient mental health literacy can benefit students [26].

In a 2010 cluster randomized trial, a group of teachers in Australia was given specially tailored Mental Health First Aid (MHFA) training on how to help people with mental health problems [28]. The course has proven effective in increasing mental health literacy and delivering appropriate support to those with mental health concerns [29]. Specifically, the MHFA program was applied among undergraduates from universities in Switzerland [30]. A randomized control trial reported an approximate 9.1% and 36.3% improvement from the baseline for participants' knowledge and confidence to help people with mental health disorders, respectively. In this study, "baseline" referred to the initial measurement taken before any intervention was introduced. It also reflected respective decreases of 19.3% and 12.6% compared to the baseline levels in terms of stigma and social distance. A review including more than 15 studies related to the Mental Health First Aid program also showed MHFA's effectiveness [31]. The course improved knowledge and confidence in assisting a person with a mental health problem while declining stigmatizing and social distance attitudes.

Regarding the 2010 research, in the beginning, teachers' literacy was assessed individually. They were tested on knowledge of mental health problems, such as recognition of depression, stigma towards depressed students, attitudes toward depression treatment aligning with those of healthcare professionals, their level of confidence in assisting, and intentions to assist in a student mental health crisis. In the post-training evaluation, teachers reported increased knowledge of mental health, heightened intention and confidence in supporting students with mental concerns, and awareness surrounding mental health. The survey also extended to students whom these teachers taught. The primary finding indicated that those students were more inclined to report receiving information about mental health problems after their teachers completed their training.

Similar studies conducted in Vietnam and Cambodia entailed secondary school teachers who attended *The Guide Mental Health Literacy* program and subsequently implemented the curriculum in their classrooms [32]. *The Guide*, short for the "Mental Health & High School Curriculum Guide", is an evidence-based mental health curriculum resource that is effective in enhancing the mental health literacy of teachers and students in high school settings [33]. It

provides educators with resources to integrate mental health education into their classrooms effectively. In the referred study, the assessment of mental health knowledge and attitudes of both teachers and students took place before and after the completion of the classroom curriculum. Results indicate that a mental health literacy intervention teachers provide can lead to observable improvements in mental health literacy for both educators and students.

Indeed, teachers' mental health literacy has been recognized to be associated with that of their students [34]. The findings underscore the effectiveness of school-based mental health literacy education that is delivered through a cost-effective and teacher-friendly program and integrated into classrooms to address students' needs. By educating teachers about enhancing their mental health literacy and instructing them on promoting mental health literacy within their lessons, students can also benefit in terms of their mental health literacy. However, these referenced articles do not report on the support students receive when they experience mental health symptoms. Improved support could reduce the prevalence of disorders by proactively addressing and removing triggers of mental health disorders. Limitations in these sources prompt an investigation into a combination of education and access to care, which may be vital in addressing the prevalence of disorders.

Need for Accessible Care

Well-established provisions of mental health services are effective in reducing cases of mental illnesses and promoting mental health awareness [35]. This means that individuals are better equipped to understand available assistance, locate appropriate resources, and be more willing to contact mental health professionals with fewer or no concerns about social judgment.

A recent research study ranked Denver as the top city for mental well-being among the fifty most populated cities in the US, achieving an impressive score of 40 out of 50 [36]. These cities were analyzed and rated according to seven weighing factors, including "therapy session rate by state, total prescription charges by state, mandatory treatment laws grade by state, criminalization of mental illness by state, number of residents per one mental health provider by county, poor mental health days by county, and overall community wellbeing."

One of the fundamental factors contributing to Denver's success in mental health care is its emphasis on accessibility. On average, therapy sessions in the US cost \$100 to \$200 each [37]. However, the state of Colorado, of which Denver is a part, has a notably low average therapy session rate of \$115. In addition, the data shows that one mental health provider in Denver was available for every 170 residents, ensuring accessibility for the public. Denver serves as an exemplary city for mental health, primarily owing to its great accessibility to health care. Plenty of attempts have been made in Colorado to facilitate mental disease diagnosis and treatment, increase the availability of medical services for people living with mental disease, and minimize the stigma associated with seeking care [38].

By including health care costs and the ratio of residents to mental health providers as key ranking elements for determining the mental health of a city, alongside the specific statistics of Denver depicted above, this study reinforces the importance of care in addition to education in shaping the mental well-being of the Vietnamese adolescent population. Greater access to health care in communities allows the public to engage with mental health services for education

and intervention effectively. People are more likely to acknowledge the importance of mental health and seek professional support when experiencing signs of mental illnesses.

Future Impacts

Before 2013, studies found that mental health was a concerning issue among Vietnamese adolescents [39], [40]. For example, the prevalence rates for depression, anxiety, and psychological distress stood at 26.3%, 16.2%, and 36%, respectively in a 2010 study of secondary school students conducted in Ho Chi Minh City [41]. Mental health literacy levels among adolescents were also poor since false and outdated perspectives predominantly influenced beliefs on mental health [21], [42]. From 2013 up to the present time, although no studies were found to feature changes in those two factors (disorders prevalence and mental health literacy), there are still data showing low literacy levels and high prevalence of mental disorders in Vietnamese adolescents [43]–[45]. Considering these findings and analyses mentioned above, the integration of education programs and improvement of access to health care has promise in decreasing the prevalence of mental health disorders and equipping young people with tools to more effectively manage their mental health. By analyzing the correlation between mental health literacy, mental disorders prevalence, and the effectiveness of educational and clinical interventions, this paper aims to provide insights into the mental health of Vietnamese adolescents and measures that should be considered to improve the well-being of this young generation in the future.

Conclusion

This literature review reaffirms that the low mental health literacy levels among Vietnamese adolescents may contribute to the observed high prevalence of mental health disorders in this population. To cope with the high prevalence of disorders, it is advisable to invest in education programs and accessible health care. Prioritizing adolescent mental health is of significance, not only for the overall well-being of individuals but also for the development of societies at large. For this reason and many more, significant measures must be implemented promptly.

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