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THE RELATIONSHIP BETWEEN PARENTS' EXPECTATIONS AND MENTAL HEALTH OF HIGH SCHOOL STUDENTS IN HO CHI MINH CITY, VIET NAM

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Abstract:

Mental health has a great influence on the quality of life and learning outcomes of students. This problem is related to many different factors. It is necessary to clarify the current state of mental health and influencing factors, thereby taking appropriate measures to take care of the mental health of students and help them study effectively. This study examined mental health and parents' expectations on a sample of 242 randomly selected students at a number of high schools in Ho Chi Minh City. Through the DASS42 tool and the scale designed by the research team, the research results showed that the level of parents' expectations for students is not high; the percentage of students with stress is 43.7%, anxiety is 38.6%, depression is 35%, in which the percentage of students with severe and very severe problems are: stress 12.3%, anxiety 10.3%, depression 6.9%, students' mental health problems are closely correlated; Parental expectations are correlated with student mental health problems and are likely to report 12.6% to 15% variability in student mental health problems.

Keywords:

Mental Health, Parents' Expectations, DASS 42

Introduction

Mental health plays a very important role, having a great impact on the quality of life and learning outcomes of students in general and high school students in particular (Binh, 2015; Eisenberg, 2017). High school students are a period of strong psycho-physiological development (Hoa, 2008; Dong, 2012), this is a difficult period that requires psycho-social



maturity and pressure learning, future orientation, ... These difficulties put children at risk of facing mental health problems (Phuong&Lam, 2019). Many studies have shown that a large number of students suffer from anxiety disorders (Khanh, 2000; Phuong, 2017), depression (Dat, 2002; Binh&Mai, 2015; Luong&Mai, 2019) or stress (Van, 2014; Hang, 2013; Thao, 2018; Phuong&Lam, 2019); or all three problems: stress, anxiety, depression (Anh et al., 2017; Quynh et al., 2020; Tin et al., 2021). Mental health problems can reduce quality of life, cause difficulties in life, study, and lower student achievement, and can even lead to dropouts or suicide, breaking the law (Eisenberg, 2009; Hoan, 2017; United Nations Children's Fund, 2018). Mental health of students is related to many different subjective and objective factors such as psychophysiological characteristics of age, factors from family and school (Phuong, 2007; Van, 2014; Anh et al. al., 2017). In which, parents' expectations are one of the factors that have a certain influence (Binh & Mai, 2015; Hoan, 2017; Van, 2020).

Parents' expectations for students, mental health, the relationship between them of students in general and high school students in particular in Ho Chi Minh City has not been studied much, this is an issue that needs further research attention. Our research aims to fill this gap.

Literature Review

According to the World Health Organization (WHO), mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Adolescents in general and high school students in particular are at high risk for mental health problems, and authors in the world and in Vietnam have been interested in this issue early on, Several studies have been conducted with mixed findings. There are quite a few studies on student stress, especially academic stress. To clarify this issue, different measurement tools have been used, commonly DASS 21 or DASS 42 (Hinkle, 1987; Cormier, 1993; Pigott et al., 1999; Van, 2014; Hang, 2013; Thao, 2018; Phuong&Lam, 2019). Besides stress, anxiety disorder in students is also a matter of concern to many authors such as Khanh (2000), Phuong (2017). In addition to the DASS 21, DASS 42 scales, some authors have used the Zung scale, STAI or diagnostic criteria in DSM-V, ICD 10 to clarify the percentage of students with anxiety disorders. Most studies have found that a large number of high school students have this problem. Some other studies focus on studying student depression through Beck's scale (Carmen, 2007; Bradley, 2011; Dat, 2002; Binh & Mai, 2015; Luong & Mai, 2019) or stress (Hang, 2013; Van, 2014; Thao, 2018; Phuong&Lam, 2019). While some authors are only interested in a specific issue, others are more systematic, these authors simultaneously study stress, anxiety, depression of students and students. indicates that these issues are related (Anh et al., 2017; Quynh et al., 2020; Thai et al., 2020; Tin et al., 2021). The causes leading to mental health problems of high school students have also been analyzed and clarified by many authors. Cassidy (1999), Ender (2010) said that exams, pressure of grades, anxiety about the future, career choices, exam preparation, knowledge volume, family and personal expectations. Phuong (2007), Van (2014), Anh et al., (2017) mention factors such as age-specific psychophysiological characteristics, family and school factors. Binh & Mai (2015), Hoan (2017), Van (2020) emphasize the expectations of parents, ... Gillispie (2001) said that, in schools and educational institutions, it is necessary to have psychological support for children. Students and facilitators need counseling skills to be able to provide effective support (Anthony, 1993; Egan, 1994).

Thus, it can be seen that the mental health of high school students has been studied quite a lot, many different research tools on this issue have been used. On the basis of inheriting the research results of previous authors, this study focuses on proving the following points:

- 1. Parents have quite high expectations for their children.
- 2. The rate of students having problems with stress, depression and anxiety is quite high. Stress, depression, anxiety of students are correlated with each other.
- 3. Parents' expectations have a relationship and influence on students' stress, depression, and anxiety.

Methodology

Sample

The study was carried out on a sample of 242 high school students randomly selected at 6 high schools in Ho Chi Minh City, including: 104 boys, 138 girls; 85 students in 10th grade, 82 students in 11th grade, 75 students in 12th grade.

Measures

The mental health status of students is measured through the DASS-42 scale, which includes 42 items that are specific manifestations of 3 mental health problems: Stress, Anxiety and Depression. Performances are measured through student self-assessment on a scale of 0-3: 0 - Doesn't look right to me at all; 1- True to me partly, or sometimes only; 2 - True to me most, or most of the time, is true; 3 - Absolutely true for me, or most of the time true. The DASS-42 scale was developed by scientists at the University of New South Wales (University of New South Wales), Australia and has been standardized and used by many researchers on students and students. Vietnam (Thuan, 2011; Van, 2014; Hang et al., 2019). The analysis results show that the scales have good reliability: Cronbach's Alpha of the Depression scale is 0.90, Cronbach's Alpha of the Stress scale is 0.93; Cronbach's Alpha of the Anxiety scale is 0.87.

Parents' expectations for students are measured through a scale we designed ourselves, a scale of 5 items is the specific expectations of parents for students. Items are measured through student self-assessment with 4 levels: 0 - None; 1 - Occasionally; 2 - Quite often; 3 - Very often. Statistical analysis shows that the scale has a good reliability coefficient, Cronbach's Alpha = 0.86, no item of the scale has Cronbach's Alpha < 0.60.

Data Analysis

The survey results were processed by the statistical software SPSS 20.0. The statistics used include:

Descriptive statistics: calculate mean (M), standard deviation (SD), number (N), percentage (%) of the scales: parents' expectations, students' mental health, thereby assessing the level of parents' expectations, students' mental health.

For parents' expectations scale, the lowest score is 0, the highest is 3, the higher the average score, the greater the expectation.

For the mental health scale. Scores for depression, anxiety and stress are calculated by adding up the scores for the component manifestations, then multiplying by a factor of 2 and are rated on 5 levels:

Levels	Depression	Anxiety	Stress
Normal	0 - 9	0 - 7	0 - 14
Light	10 - 13	8 - 9	15 - 18
Fit	14 - 20	10 - 14	19 - 25
Heavy	21 - 27	15 - 19	26 - 33
Very heavy	≥28	≥20	≥34

Inferential statistics: correlation and regression analysis were used to analyze the relationship between depression, anxiety and stress among students; between parental expectations and student mental health.

Research Results

Surveying parents' expectations for students, mental health and the relationship between parents' expectations for mental health of high school students in Ho Chi Minh City, we obtained the data below:

Table 1. Parents' Expectations for Students

Order	Expectations	M	SD	Rank
1	My parents expect me to be more talented than others	1.38	1.06	3
2	My parents want me to achieve many high achievements in school	1.51	1.04	2
3	My parents complain and scold me when I get low grades or when I have flaws	1.19	1.09	5
4	My parents compare me to others, especially those with good achievements	1.22	1.15	4
5	My parents want me to be their pride	1.80	1.08	1
	Mean in total:	1.42	0.87	

^{*} Note: the lowest score is 0, the highest is 3; The higher mean, the higher the parents' expectations. (Source: Survey results of the research team)

The data obtained in Table 1 showed that parents' greatest expectation is to want their children to become their pride (M = 1.80/3.0, SD = 1.08), followed by wanting their children to achieve many achievements. high in learning (M = 1.51/3.0, SD = 1.04), want him to become a more talented person than others (M = 1.38/3.0, SD = 1.06). Lower-level expectations include: comparing your child with others, especially those with good achievements (M = 1.22/3.0, SD = 1.15), complaining and scolding when your child gets low marks or when he has flaws (M = 1.19/3.0, SD = 1.09).

Table 2. Prevalence and Severity of Depression, Anxiety and Stress of Students

	Depression	Stress	Anxiety
Levels	N (%)	N (%)	N (%)
Normal	158 (65.0)	139 (57.2)	154 (63.4)
Light	35 (14.4)	20 (8.2)	41 (16.9)
Fit	32 (13.2)	54 (22.2)	22 (9.1)
Heavy	13 (5.3)	17 (7.0)	13 (5.4)
Very heavy	4 (1.6)	13 (5.3)	12 (4.9)
Total:	242	242	242

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(Source: Survey results of the research team)

The survey results in Table 2 showed that:

- About depression: 35% have depression of varying degrees: 14.4% mild, 13.2% moderate, 5.3% severe, 1.6% very severe.
- About stress: 43.7% had different levels of stress: 8.2% was mild, 22.2% was moderate, 7.0% was severe, 5.3% was very severe.
- About anxiety: 38.6% have different degrees of anxiety: 16.9% mild, 9.1% moderate, 5.4% severe, 4.9% very severe.

Table 3. Relationship Between Depression, Anxiety and Stress in Students

	Depression	Anxiety	Stress
Depression	1		
Anxiety	.71*	1	
Stress	.73*	.78*	1

^{*} Note: * với p<0.05

(Source: Survey results of the research team)

The results of analysis in Table 3 showed that students' depression, anxiety and stress are positively correlated: the correlation coefficient (r) between depression and anxiety is 0.71 (p<0.05), the correlation coefficient is 0.71 (p<0.05). The correlation between depression and stress was 0.73 (p<0.05), the correlation coefficient between stress and anxiety was 0.78 (p<0.05).

Table 4. Relationship Between Parents' Expectations and Depression, Anxiety and Stress of Students

	r	\mathbb{R}^2	
Depression	0.39*	0.150**	
Anxiety	0.36*	0.126**	
Stress	0.38*	0.146**	

^{*} Note: * với p<0.05, ** với p<0.001

(Source: Survey results of the research team)

The analysis data in Table 4 showed that parents' expectations for students in the sample are positively correlated with all three mental health problems of students: correlation coefficient (r) between expectations of Parents with depression problems was 0.39 (p<0.05), with anxiety problems 0.36 (p<0.05), with stress problems 0.38 (p<0.05).

Research results in Table 4 also showed that parents' expectations for students in the sample are able to predict between 12.6% and 15% of the change in mental health problems of students. specifically: the ability to report a change of anxiety is 12.6%, of stress is 14.6%, of depression is 15%.



Discussion

The data in Table 1 showed that parents of students in the sample have expectations about their children, but at a low level, most of the expectations are low (table 1). This finding of ours is much different from the results of some authors, Tuan's study (2014) showed that parents' expectations on their children are very high. The results of our research showed that students do not currently face great pressure from parents. This is a positive signal, having this result is because a part of parents is aware of not expecting too much from their children because this can put pressure on them, negatively affect to their mental health and the quality of their learning and life; It may also be because a part of parents are not really interested in their children's learning, development, etc.

The study also showed that high school students in Ho Chi Minh City are currently experiencing various mental health problems (table 2). The number of students with mental health problems such as stress, anxiety, depression at different levels is quite high (43.7%, 38.6%, 35% respectively), in which the number of students significant and very severe problems (stress: 12.3%, anxiety: 10.3%, depression: 6.9%). This is a number worth paying attention to. The results of our study have certain differences with the research results of the authors in the world and in Vietnam, but not much: Research by Bradley et al. (2011) indicated that the rate of depression among 18-year-olds is about 20-25%, according to Ryan (2005) this figure is 30%. A study by the Vietnam Institute of Psychology in 2000 found that 22.5% of students showed signs of anxiety and depression (Dat, 2003). Research by Anh et al. (2017) concluded that high school students have different levels of mental health problems: mild stress is 37.8%, moderate is 43.2%, severe is 17.6%, very severe 1.4%. Mild anxiety was 22.6%, moderate was 50.5%, severe was 16.1% and very severe was 10.8%. Mild depression is 53.7%, moderate depression is 14.8%, severe is 25.9%, very severe is 5.6%. Phuong (2019) studied on anxiety in high school students through the Zung scale found that 13.14% of students suffered from anxiety disorders, specifically 7.72% mild anxiety, 4.49% moderate anxiety and 0.9% pathological anxiety. Luong & Mai (2019) research on depression in high school students showed that about 20% of students have some degree of depression. Among the students with depression, most of them are mildly depressed, the rate of major depression is only about 1% of the total study population. Quynh et al. (2020) research on depression and anxiety on 497 students through the DASS-21 tool, found that students showed signs of depression at 38.2%, anxiety was 39.2%. Research by Tin et al. (2021) on the prevalence of stress, anxiety and depression disorders among students, they came to the conclusion that the rate of stress in students is 52.1%, the rate of anxiety is 63.8% and the rate of depression is 42, first%. In which, the moderate level of all three disorders is quite high, ranging from 20.3% to 31.2%. The rate of very severe severity of stress disorder and depression was lowest at 0.4% and 1.1%. Meanwhile, the severity of anxiety disorder is quite high at 10.6%. In particular, our research results have many similarities with the results of some studies on mental health of high school students in Ho Chi Minh City: the study of Truc et al. (2020) showed that there are more than 35% stressed, nearly 60% anxiety and nearly 39% depression at various levels. Thai et al. (2020) found that the rates of stress, depression and anxiety disorders among students were 36.1%, 39.8% and 59.8%, respectively.

In our study, mental health problems (stress, anxiety, depression) of high school students in Ho Chi Minh City were found to be positively correlated with each other quite closely (r = 0.71-0.78, p<0.05, table 3). This means that when a student's mental health problem increases or decreases, another problem increases or decreases. This result shows that it is necessary to pay attention to comprehensive mental health care for students.

Parental expectations were correlated with students' mental health problems, but not significantly (table 4). From this result, we believe that parents' expectations are not the main cause of students' mental health problems but also one of the influencing factors. Further studies are needed to clarify the main causes of student mental health problems.

Conclusion

The research results showed that the arguments in our 3 arguments, 2 and 3 are correct. High school students in Ho Chi Minh City currently have mental health problems: Stress, Depression and Anxiety. The proportion of students with severe and very severe mental health problems is relatively high (Stress is 12.3%, Anxiety is 10.3%, Depression is 6.9%). Students' mental health problems are positively correlated. Parents' expectations are positively correlated and have a certain influence on the mental health of students. These results show the need to care and support students to deal with mental health issues. To protect students from mental health problems, teachers and high schools in Ho Chi Minh City need to advise parents on knowledge about mental health care for students, especially the group of senior students; it is necessary to equip students with life skills, knowledge and self-care skills for mental health; care and early detection of students with mental health problems; effectively organize psychological counseling activities for students in schools; organize favorable learning environment and conditions for students.

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