



# School Social Work in Preventing Suicide Ideation Among Minority Ethnic Boarding Students in Vietnam

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**To cite this paper:**

Hoang Thi Hai Yen, Do Nghiem Thanh Phuong. School Social Work in Preventing Suicide Ideation Among Minority Ethnic Boarding Students in Vietnam. *American Journal of Applied Psychology*. Vol. 10, No. 6, 2021, pp. 156-161. doi: 10.11648/j.ajap.20211006.14

**Received:** October 24, 2021; **Accepted:** November 17, 2021; **Published:** December 24, 2021

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**Abstract:** *Background and objective:* Adolescence is the time of greatest risk for the first onset of suicidal ideation. Suicidal ideation among adolescents is a public health problem in Vietnam, especially among ethnic minority students. This study described the prevalence of suicidal ideation among adolescents in mountainous areas of Vietnam. The paper recommended developing school social work activities to address mental health issues and prevent suicidal behaviours for the students. *Method:* In 2019, a school-based survey based on the GSHS questionnaire was conducted in one boarding school in Dien Bien province, Vietnam, and 164 students were included in the study. *Result and Conclusion:* Analysis revealed that out of a total of 164 students surveyed, 20/164 children have suicidal thoughts, accounting for 12.19%; in which male students intend to commit suicide are 7 (accounting for 35%), and female students with suicidal thoughts are 13 (accounting for 65%). Besides, the study found that schools had diverse activities to prevent student suicide such as directly supporting students through psychological counselling, awareness-raising, life skills education, organizing teacher training, strengthening the connection between families and schools. However, these activities have not achieved the expected effectiveness. This study recommends promoting the role of school social work in preventing and reducing student suicide in the area.

**Keywords:** School Social Work, Suicide Ideation, Ethnic Minority, Vietnam

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## 1. Introduction

Globally, suicide was ranked as the second leading cause of premature mortality among individuals aged 15–29 years and the third leading cause among those 15–44 years old [1, 2]. The United Nations International Convention on the Child's Rights in 1989 and the Vietnamese law on children in 2019 have joint statements about protecting children from situations that endanger their lives. Therefore, child suicide prevention needs to take seriously. According to the World Health Organization (WHO), suicide includes suicidal ideation, suicide attempt, and suicide behavior, in which suicidal ideation is one of the direct causes that motivate adolescents to commit suicide. Recent systematic reviews have shown that there is a significant rate of suicidal ideation among adolescents from these countries by numbers as follows: 17.8% in China, 17.1% in the Philippines, 19.6% in Uganda, 23.1% in Botswana, 27.9% in Kenya, and 31.9% in Zambia, 11.7% in Bangladesh [7]. To alleviate this situation,

member states of the World Health Organization (WHO) have committed to work towards the global goal of reducing suicide rates in countries by 10% by 2020. Depression, another common mental disorder among adolescents worldwide, is defined as a state of low mood and aversion to activity, with an estimated 1-year prevalence in 4%–5% mid- to late- adolescents [3, 4, 13]. In order to support this view, a study of students from Tehran University also showed that depression had the most contribution, along with anxiety, mental health, resiliency, and daily stresses in predicting suicidal ideations [5]. Alcohol abuse, smoking, and mental health issues were more likely to conduct suicide ideation and attempts [1, 2, 11].

Vietnam has had two national surveys, in 2005 and 2010, specifically targeting young people's health (Survey Assessment of Vietnamese Youth—SAVY I and II) [14]. SAVY I and II reported that the percentage of suicidal ideation increased significantly for adolescents in just five years, from 3.4% in 2005 to 4.1% in 2010 [12]. Besides

producing a national report, Vietnam also conducted a school-based student health survey (GSHS) in 2013 that included in a GSHS of Association of Southeast Asian Nations (ASEAN) member states (2007–2013). The results showed that the highest prevalence of suicidal ideation was in the Philippines (17.0%) and Vietnam (16.9%) [11]. In 2012, a cross-sectional study of 1247 students conducted in 3 countries—China, Thailand, and Vietnam—showed that the 12-month prevalence of suicidal ideation was highest in Vietnam [6]. In Vietnam, a school-based survey was conducted in three high schools in 2019 among 661 high students found that the prevalence of 12-month suicidal thoughts, suicide plans, and suicide attempts were 14.2%, 5.5%, and 3.0%, respectively [9, 15]. An independent survey conducted in two mountainous communes in Quang Tri with 171 junior high school students showed 14.2% had suicidal thoughts. Another study showed that the suicidal ideation of high school students in the capital (Hanoi) located in the North was 21.4% among girls and 7.9% among boys [5]. The suicide rate among Vietnamese youth is not concentrated in urban areas but also occurs in remote and ethnic minority areas. A study of UNICEF's research on mental health among young people in Vietnam, but focuses mainly on suicide among ethnic minority girls in Dien Bien, was compiled in 2015 in Dien Bien alone. There were 333 suicides and 73 deaths; women accounted for 48% of suicides, the number of suicides under 20 years old was 170/333, accounting for nearly 50%. Among the means of suicide, suicide by finger leaves accounts for 37%. From January to June 2016, the number of adolescents from 14 to 19 who committed suicide and attempted suicide by using a "la ngon" (*Gelsemium elegans*) which is a toxic plant indigenous to Southeast Asia) was 12 cases, including five deaths [7].

In Dien Bien province, Dien Bien Dong district is one of the "hot spots" with many people committing suicide every year, especially the suicide rate among teenagers and young people still in school. According to the data of Dien Bien Dong District Health Center in 3 years (2017 - 2019), 280 people committed suicide by "la ngon." In which, nearly 100 people commit suicide by palm leaf each year, of which the group of teenagers years accounts for a high percentage. Specifically, the number of people from 10 to 18 years old who committed suicide by using their fingers over the past three years (2017, 2018, 2019) was 102 people (accounting for 36.4%), ranking second after the group of people aged 18-30 who committed suicide. With palm leaves (accounting for 39%) locally and typically at the boarding school of Dien Bien Dong district, when surveying 164 students, 12.2% of the surveyed students had suicidal thoughts in 12 previous months. As a result, school support activities such as knowledge equipping, psychological counseling and life skills education for students, teacher training, or strengthening the connection between families and schools have been implemented to prevent and reduce students' suicidal ideation and behavior. However, these activities have not been effective in the support process. Therefore, the paper focuses on researching and proposing social work

activities that prevent and reduce student suicide.

## 2. Method

This study used the World Health Organization (WHO) Global High School Student Health Survey (GSHS). The Vietnamese version of the survey is available online (WHO, 2013) to measure the health behavior of 13-17-year-olds. A total of 164 students studying at Dien Bien Dong boarding high school participated in this survey. The data collection period for this study was early October 2020. Before data collection, students and homeroom teachers received written consent from the school principal. Students are not surveyed if they confirm that they do not wish to participate. The research group was introduced into the survey classes by the homeroom teacher. After informing students about the purpose of the survey and the procedures involved in the research process, students were asked to focus on their responses without discussing them with peers. The survey was completed in a period of 25 to 30 minutes. A member of the research team and a teacher supervise each class during survey responses and answer any concerns if students do not understand. The questionnaire is placed in an envelope and sealed to protect confidentiality and ensure standard management after data collection. Collected data were analyzed with SPSS 25.

## 3. Results

### 3.1. Rate of Suicide Ideation Among Students

At the Ethnic Minority Boarding School in Dien Bien Dong district, the research team surveyed suicidal ideation and causes of suicide risk on 164 students. The survey results showed that out of a total of 164 students surveyed, 20/164 children have suicidal thoughts, accounting for 12.19%; in which male students intend to commit suicide are 7 (accounting for 35%), and female students with suicidal thoughts are 13 (accounting for 65%). The percentage of boarding ethnic minority students who have suicidal thoughts also varies between different ethnic groups, in which the highest concentration is the Thai ethnic group accounting for 50%, the Hmong ethnic group accounting for 45%, the rest other ethnic groups accounted for 5%.

*Table 1. The rate of suicide ideation among gender and equality.*

Gender	Percentage (%)	Ethnicity	Percentage (%)
Male	35	Thai	50
Female	65	Hmong	45
		Others	5

### 3.2. School-based Support Activities to Prevent Suicide Ideation

School has implemented several interventions to improve students' mental health, including psychological counseling, training on the signs of mental health issues, and the harmful effects of "la ngon". In addition, mainly training teachers on

mental health issues among students, strengthening connections between families and schools to educate, care for, and support children.

When asked about equipping students with the knowledge to help them understand and recognize signs of suicide, out of a total of 164 students surveyed, 49.4% of them said that they had been trained the remaining 50.6% of the children said that they have not been educated and do not know about signs of suicide. Therefore, it is clear that many students (50.6%) not learning about the signs of suicide will lead to severe consequences for themselves and their friends. For example, when students learn about signs of suicide, it will prevent them from finding resources and timely support activities to help themselves overcome difficulties. Alternatively, when students do not recognize the signs of the suicide of friends around them, they will not have timely intervention measures (such as sharing, helping, encouraging, encouraging) to help them through the crisis.

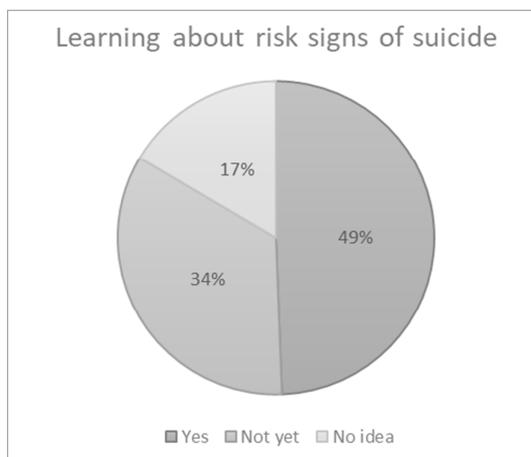


Figure 1. Response on learning about risk signs of suicide.

The participants reported that schools had diverse activities to prevent student suicide. Among them, 99.4% reported that school had life skills education. In addition, 95.1% reported that school provided school violence prevention, and 50.6% reported school counseling. Additionally, the school also organized teacher training and parents meeting (89.6%) to improve the awareness of teachers and parents awareness of students' mental health issues.

Those are the school's efforts to prevent and reduce student suicide, but these activities are ineffective. The results of the evaluation of the effectiveness of support activities clearly show this, with the scale from 1 to 5 (in the scale of 1 is "very ineffective," that scale is "5". very effective"), 164 children rated the effectiveness of support activities as 2.46, which means that these activities have not been practical.

With life skills education activities for students, although 163 children (accounting for 99.4%) have been educated on life skills, they are not appreciated when asked about the effectiveness of these activities. "The school teaches us life skills through school-wide activities or extracurricular activities, but we do not get to practice to consolidate our

skills, so we forget about it when we finish studying." (in-depth interview, 10<sup>th</sup>-grade student). Another student reported that "The school teaches us basic life skills such as living skills, communication skills, and self-care skills...but we do not use it much when we have a problem or when we want to help our friends when they are in trouble"(in-depth interview, 11<sup>th</sup>-grade student).

With teacher training activities on suicide prevention, the survey results show that 89.6% of teachers participated in the training, 10.4% of teachers have not been trained on suicide prevention and mental health issues for their children. However, when asked about the training content, one teacher responded that "The training contents mainly revolved around issues such as signs of suicide, the harms of toenails, methods of timely first aid or increased risk of death and strengthening activities to connect families, schools. However, activities such as psychological counseling for students and families, mobilizing support resources, connecting services to support students themselves and their families, we do not get much training" (in-depth interview, male teacher). Another reported that "the participants in the training are mainly teachers. It is necessary to have the student's participation, the whole family of students, the prevention and mitigation of this trait. Student suicide is effective" (in-depth interview, female teacher). Stemming from those shortcomings, in the support activities of social work, social workers have proposed to build a group model to train awareness, value orientation, and enhance skills for the group of students, besides. It also focuses on the target group of teachers and children's families through sharing sessions, training sessions, communication sessions, handing out materials or visiting to provide more knowledge about psychobiology age management, about the problematic issues students face, about how to support them when they have suicidal thoughts and behaviors. Thereby also helping to strengthen and further strengthen the connection between the school and the family because 10.4% of the families and the school do not have the connection to join hands to support students, repel their suicidal intentions and behaviors.

## 4. Discussion

From the survey results on the current situation and the evaluation of the effectiveness of activities to reduce suicidal behavior of boarding ethnic minority students in Dien Bien Dong, it is necessary to promote the role of school social work in preventing and reducing student suicide in the area.

First of all, social work activities for groups of students at risk of suicide are based on models of child protection systems in general and introductory social work methods. According to the child protection system model, there are services for children expressed at three levels: prevention, early detection, early intervention, and reintegration assistance. Accordingly, the level of prevention includes protective measures applied by social workers to the community, family, and themselves of boarding ethnic

minority students who have suicidal thoughts. These were to raise awareness, further strengthen life value orientation, and practice life skills, thereby helping children have the right attitude and behavior, helping to reduce their suicidal intention and behavior. Besides, at this level, social workers also focus on propaganda and training activities to help change the perception of families and schools and strengthen the interaction between families and schools to work together. Furthermore, it is recommended that activities support life value orientation such as caring for love and happiness in children's hands and life skills such as identification skills, emotional management; seeking help, thereby helping them to have the right attitude and behavior to live with themselves, with friends and those around them.

For ethnic minority students, especially students who have suicidal thoughts at school, social workers will guide them to live in a group environment with activities that help support their self-esteem. Group work with 20 students having suicide ideation might be built based on specific activities as follows:

*Session 1: Meet, get acquainted, determine the rules, goals, and objectives of life*

1. Meeting, the group members introduced themselves.
2. Understand and assess the needs of group members.
3. Define group activity goals.
4. Discuss and develop collaborative group operating principles.
5. Unify the group's goals and objectives.
6. Announce the content and program of the following activities.

*Session 2: Psychological consultation*

Social workers directly consult and support students with psychological support to help them overcome feelings of anxiety and loneliness (the main psychological difficulties that children face through survey results). Counseling for students' families to accompany them in caring for, thereby helping parents better understand their psychological difficulties and share more with them. Counseling with friends, teachers, and schools to share, help, motivate and encourage children to give up self-will and have appropriate attitudes and behaviors.

*Session 3: Orientation of life values*

Social workers organized two life value orientation sessions: Session 1: "Caring to love"; Session 2: "Happiness in your hands." Here is an example of a group activity to orient the life value "Happiness in your hands."

1. Purpose: To help students understand that what happiness is and have a positive attitude to life.
2. Active content:
  - Content 1: Introduce the new paper;
  - Content 2: Happy Hands: The social worker asks students to use pens to paint/redraw their hands on A4 paper. Then ask students to think of things that can make them happy, writing each one on one finger. Finally, ask some students to share their hands in front of the whole class.
  - Content 3: Sharing Happiness; Social workers ask

students to work in pairs, telling each other a recent story that made them feel happy and happy. The social worker invited a few students to retell the story that made their friends happy in front of the class. The social worker summarizes: "*Many things around can make me happy and happy. It happens every day, and there is perfect happiness that makes us always remember it. So please pay attention to your surroundings so that you can feel much happiness*".

Content 4: Who brings you happiness?: Social worker shows students a clip of True Happiness + Let us give: <https://www.youtube.com/watch?v=U5R6OZXFeBU> (from the beginning – 7.00s). First, the social worker asked: "What is the characters' happiness in the film?" Then, "Who brings them happiness?". Finally, the social worker concludes, "*People who bring us happiness are usually loved ones in family, friends, and teachers. Having the happiness of those around is very precious. Nevertheless, if we can make those we love, those around us who are difficult, happy, we will feel even greater happiness.*"

Content 5: Bring happiness to other people around. Social workers divide students into different groups: Grandparents group; Parent group; Group of teachers; Group of friends; Ask students to discuss and list all the things they can do to make their grandparents, parents, teachers, friends happy and happy. The groups present the results of the discussion. Next, the social worker asks each group member to choose an action that they will do immediately to make others (grandparents, parents, teachers, friends) happy. Have students take turns telling their choices. The social worker summed up that students could make others happy with simple things. Making loved ones around they feel happy is a significant thing worth doing. When loved ones around are happy, they would also feel happy.

Content 6: Conclusion "*Happiness always exists around each of our lives.*" Social workers focus on the content that all deserve happiness when students always expect happiness from students. So take the initiative to create happiness for everyone around them, because then they will be happy. Moreover, when they are happy, everyone around them will be happy too, and they will all live in a positive, joyful environment.

*Session 4: Life skills*

1. Session 1: The ability to identify and control emotions;
2. Session 2: Skills to seek help when facing difficulties;
3. Session 3: Practice and strengthen life skills through specific case exercises.

Below is an example of a group activity session to educate ethnic minority boarding students to identify and control their emotions.

*Target:*

1. Educating children to understand that each student is a particular person, each person has their own identity, no one is the same. Therefore, the students are well aware of themselves, identify the factors that affect the

formation of their identity and personality.

2. Students understand themselves well with their personality traits, interests, dreams, advantages, and disadvantages. Students recognize their strengths and weaknesses, thereby promoting their positive points to communicate with the environment and people around them confidently, and at the same time learn how to improve their weak points;

Students had chances to practice self-awareness, self-evaluation and apply self-perception and value-determination skills to life;

*Implementation activities:*

Activities 1: Organize the game "Looking in the mirror" to realize what kind of person you are;

Activities 2: Learn the concepts: perception and self-awareness;

Activities 3: Social workers with group members learn and define the meaning of self-perception and build self-image. The social workers explained that everyone has strengths and weaknesses, and no one is perfect. The students are encouraged to recognize their strengths and weaknesses and build self-awareness and self-esteem.

Activities 4: Learn about the value. The students listen to the song "Aspiration." The social worker emphasized that "Defining values is to clearly define and understand one's life views, beliefs, and life goals so that there is unity in behavior and self-expression."

Activities 5: Students learn about their positive life values such as love, good friendship, peace, cooperation, and happiness;

Activities 6: Forming and practicing self-awareness skills. The social worker encouraged students to determine the value of life for themselves; respect the unique characteristics of others, and build self-awareness step by step;

Activities 7: Social worker asked about each student's feelings after participating in group activities. Social workers summarize, learn from experience and schedule another topic group meeting.

*Session 5: Evaluation*

Social workers evaluate the participation and change of members after group activities. Social workers and members draft a plan so that children can actively deal with complex problems without trying to commit suicide. Social workers maintain interaction and support remotely to have more strength and resources to maintain activities.

*Secondly, activities target other subjects participating in the school environment, including friends, teachers, and especially their families of the student having suicide ideation.*

Social workers need to organize activities to disseminate basic knowledge to teachers and parents about psycho-physiological characteristics of their age, about complex problems that children may face. Not all teachers and parents understand students' psychophysiology and methods of taking care of their mental health. Therefore, teachers and parents need to be provided with knowledge

and skills to care for, encourage and help children overcome complex problems, especially psychological difficulties. Organizing this activity for teachers is more convenient than organizing it for parents. School social workers can organize talks, seminars, and exchanges with teachers for about 1-2 hours combined with professional group meetings. The organization of knowledge sharing and exchange with parents is also entirely possible through the school's parent committee and all grades, through strengthening the connection and exchange between the school and the family through Through classes, parents or even social workers can visit their homes to talk directly with their families.

Besides, it is also necessary to organize training activities for target groups such as parents, teachers, and school administrators. Training has great significance in the prevention and intervention of mental health problems of students in general and the suicidal situation of boarding ethnic minority students in particular. The training will provide students' families, friends, teachers, and community groups with knowledge related to their education, nurturing, and care so that everyone can join hands to support them. In addition, address and prevent student risk factors for suicidal ideation and behavior. Therefore, some primary contents need to be included in the training, such as:

1. Understanding suicide and suicide in adolescents and students – Signs to recognize.
2. Understanding mental health issues.
3. Activities to help prevent and reduce student suicide.
4. Support resources.
5. Some skills are needed in supporting and taking care of students who have attempted suicide or committed suicide but failed.

Some methods are commonly used in training, such as presentations, seminars, group discussions, pictures, handouts, leaflets, and videotapes. Teachers and students' families need to guide related to the harms of "la ngon" and signs of suicide with materials, pamphlets. Furthermore, ways and resources to support students when they intend to commit suicide. These documents and leaflets need to be vividly and attractively designed in form, clear and concise in content, ensuring that parents quickly implement them. When developing/designing these documents, it is also necessary to consider the awareness level, cultural characteristics, and customs of each region and ethnic group to suit a wide range of parents.

In addition, social workers also need to conduct communication sessions so that families, schools, and the community can join hands to support students. Communication activities can be directed to the core group (such as homeroom teachers, school administrators, students' families) or to the whole community to overcome barriers leading to danger—student suicide. In particular, the issue that needs to be focused on communication is the necessary information (including the areas of knowledge and skills) directly related to raising awareness about suicide prevention and control in the Dien Bien Dong district, especially for

boarding ethnic minorities students. The objectives set for communication activities include: to help raise awareness, change behavior and attitudes towards suicide by "la ngon"; enhance their ability to cope, solve their problems when the subject encounters.

## 5. Conclusion

Based on the prevalence, the school had prevention and mitigation activities such as directly supporting students through psychological counseling, awareness-raising, life skills education, organizing teacher training, strengthening the connection between families and schools. However, these activities have not achieved the expected effect.

Therefore, to prevent and minimize the above situation, besides the activities that have been implemented, it is necessary to promote social work through private activities effectively. For example, professional psychological counseling, life value orientation, life skills education for students; organize communication and training for teachers and students' families and community. Thereby helping them improve their awareness, have appropriate attitudes and life skills, and adapt to deal with difficulties in living, studying, and friendly relations. Furthermore, teachers and families also improve their knowledge and skills in supporting students and their children and strengthening the connection between family and school to join hands to prevent suicide—students.

## Acknowledgements

This research was supported by the project "Study on building a school social work model to prevent the suicide of boarding ethnic minority students in Dien Bien Dong district, Dien Bien province" Hanoi National University of Education, Code: SHPN 20-09.

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