

# ‘We feel sad and bored’: Covid-19 impacts on mental health of adolescents in Viet Nam

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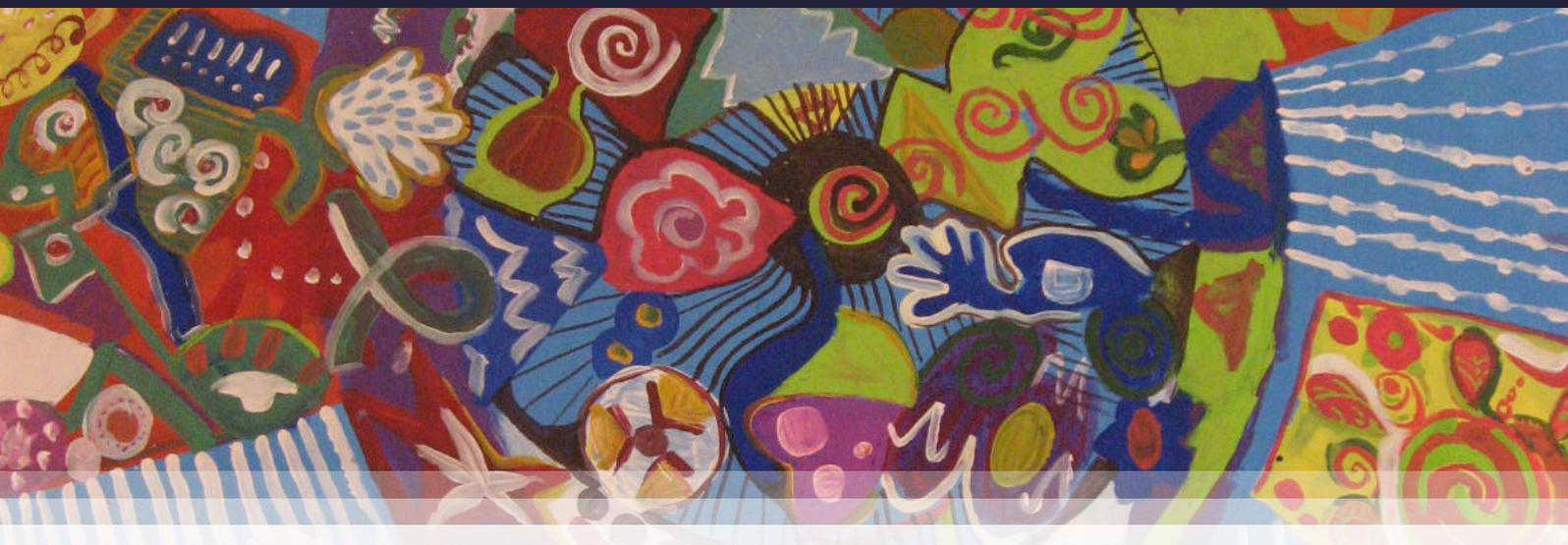
## Key messages

School closures and moving to online learning had the largest impact on adolescents’ mental well-being, affecting all aspects of their life including academic performance and their state of mind.

Increasing online activity exposed adolescents to harmful content, to potential for online addictive behaviours (often gaming-related) and an overload of Covid-19 news, which heightened their feelings of fear and anxiety.

Away from friends, with little opportunity to socialise, school-age youth experienced sadness and depression, as well as social anxiety and negative body-image, especially for girls.

Parents pushed their children even harder to perform academically and were concerned about the quality of online learning, leading to family tensions.



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Cover: Painting featured at the UNiTE circle exhibition organized with the Vietnam Youth Union, Vietnam Women's Museum in Ha Noi, November 2011. Credit: Krista Seddon / Flickr.  
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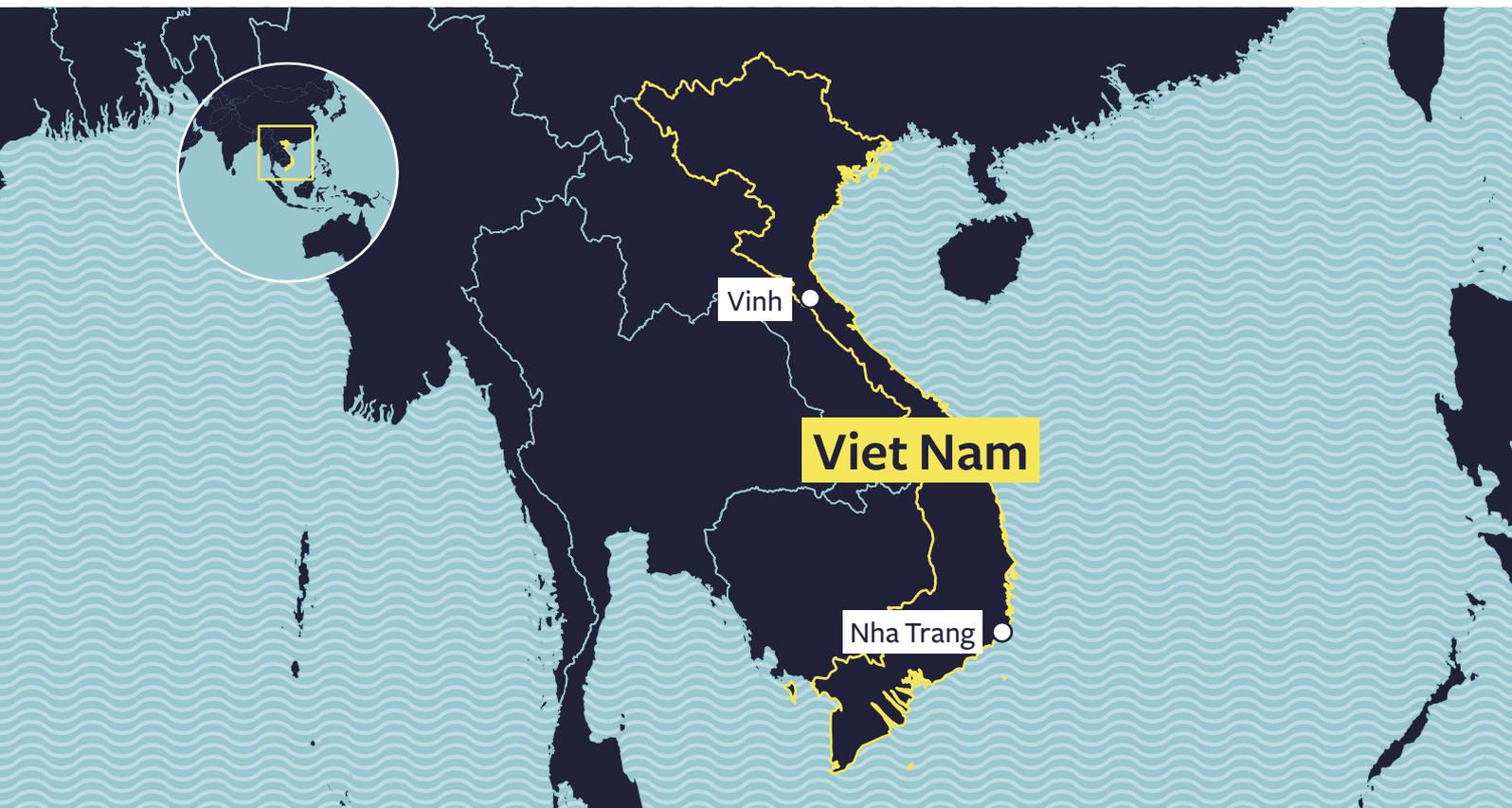
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# 1 Introduction

**Figure 1** Map of project sites in Viet Nam



This country case study examines the impact of Covid-19 on the mental health of adolescents between the ages of 11 and 19, in project locations in Viet Nam (see [Figure 1](#)). The overall research aims are to discern broader drivers of mental ill-health and the preventative factors that protect mental well-being of adolescents (see [Box 1](#)). The project also seeks to capture wider attitudes towards accessing mental health support, rather than charting the impacts on well-being of a particular crisis.

While Covid-19 was not the focus of this project, given that data collection started during the onset of the pandemic,<sup>1</sup> in-country researchers were able to incorporate some questions into the qualitative component of the mixed method baseline study, exploring the effects of Covid-19 on the mental health of adolescents. This project continues to adapt to the new context and will seek to understand the impact of the pandemic where feasible.

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1 This also led to adjusted ways of working (for further details see [Chakraborty et al., 2021](#)).

## Box 1 Key project information

***Addressing the mental health needs of adolescents in Tanzania and Viet Nam through the co-creation of digital and non-digital solutions*** is a project awarded by Fondation Botnar to a consortium led by ODI. The Tanzanian Training Centre for International Health, and the Center of Research, Information and Services in Psychology at the Viet Nam National University are the project's in-country partners. Implementation is focused in eight schools within two provinces of Viet Nam: Nha Trang (four schools) and Vinh (four schools), and in two regions of Tanzania: Morogoro (two schools) and Mwanza (two schools).

Starting in May 2020, this project runs for a period of 2.5 years and involves:

- Research to identify drivers of mental ill-health among adolescents, taking into account underlying social norms that may be driving mental distress.
- Co-design and testing of digital and non-digital applications, and other approaches, with adolescents, teachers, parents and local authorities to support mental health and overall well-being of adolescents.
- Assessment of the effects of digital and non-digital solutions, developed through mixed method baseline and endline study and ongoing feedback loops.
- Informing local decision makers of the effectiveness of digital and non-digital applications documented and tested by the project.

This ODI Country study draws on qualitative findings from Viet Nam, where data was collected between December 2020 and January 2021 in Nha Trang and Vinh (see [Figure 1](#)). A total of 92 interactions took place consisting of: in-depth interviews (IDIs), with adolescent girls and boys aged 11–19; family case studies (FCS), where different members of one household were interviewed separately to explore interactions and dynamics between household members; focus group discussions (FGDs), with parents and adolescents; and key informant interviews (KIIs), with teachers and mental health service providers (see [Table 1](#)).<sup>2</sup>

As of 10 August 2021, 224,894 cases and 3,757 deaths from Covid-19 were confirmed in Viet Nam, with an incident rate of 231.04 per 100,000 people.<sup>3</sup> This remains low compared with other countries in the region, including its neighbours (e.g. the incidence rate is 495.83 per 100,000 people in Cambodia, and 1,140.33 per 100,000 people in Thailand).<sup>4</sup> At the time of writing, in the second half of 2021, numbers are sharply rising and becoming a cause for concern.

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2 For further details of methodology see Samuels et al. (forthcoming) *Mental health and psychosocial well-being among adolescents in Viet Nam: findings from a mixed method baseline study*, ODI Report, London: ODI.

3 Data from the [2019 Novel Coronavirus Visual Dashboard](#) operated by the Johns Hopkins University Center for Systems Science and Engineering.

4 Ibid.

**Table 1** Number of qualitative interviews conducted, by type and site

	Nha Trang	Vinh	Total
IDIs aged 11–14	10	9	19
IDIs aged 15–19	10	11	21
FCS	7	7	14
FGDs	8	8	16
KIIs	11	11	22
<b>Total</b>	<b>46</b>	<b>46</b>	<b>92</b>

Note: IDI, in-depth interview; FCS, family case study; FGD, focus group discussion; KII, key informant interview.

Until mid-2021 (June/July), Viet Nam was considered a success story: it had managed to contain the virus during the first wave of the pandemic with strong preventive measures,<sup>5</sup> and was the only country in Southeast Asia that experienced positive economic growth in 2020.<sup>6</sup> At the time of writing, numbers were rising rapidly with the whole country in a tight lockdown, scrambling to speed up its vaccine roll out rate – the lowest in Southeast Asia.<sup>7</sup>

5 See Pollack et al., 2021 and see Chakraborty and Samuels, 2021.

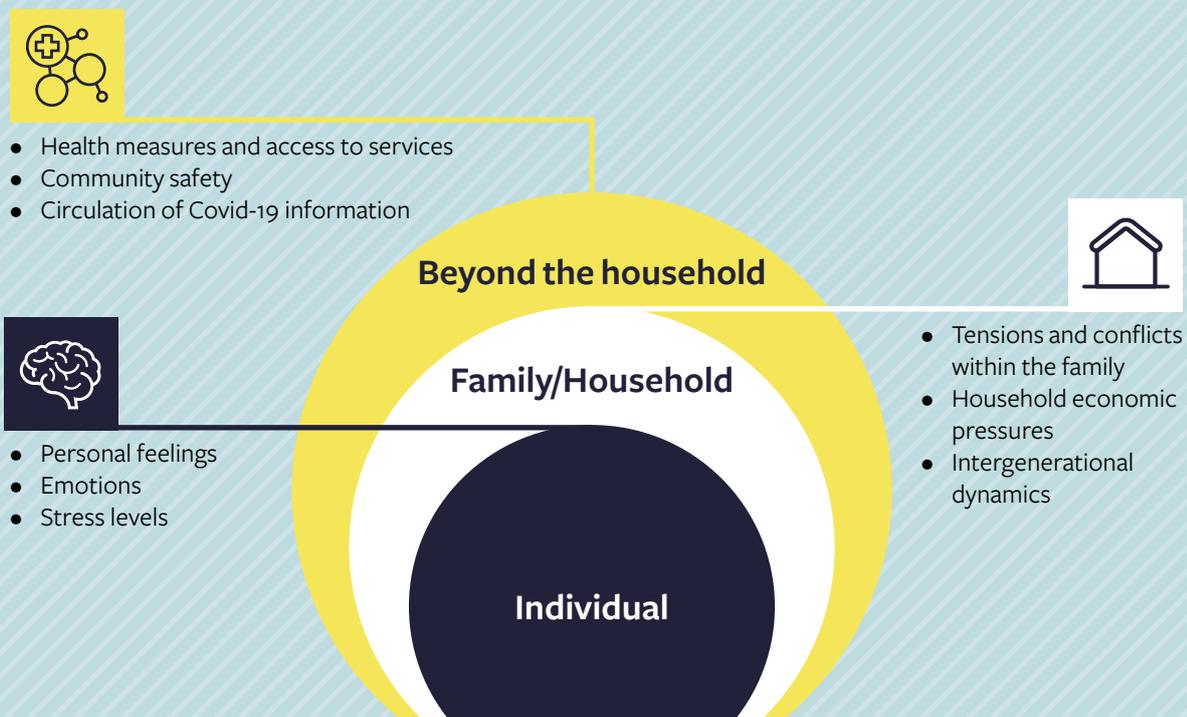
6 See Abuza, 2021.

7 Ibid.

## 2 Findings

We explore the effects of Covid-19 across three closely inter-related dimensions and levels: (1) on individuals; (2) on families or households; and (3) beyond the household. These three levels all contribute to an individual's mental well-being, and different factors at each level interact with each other to have an effect on mental health and broader well-being. The socio-ecological framework (see [Figure 2](#)) represents these different levels, also highlighting and summarizing some of the mental health effects identified in this study.

**Figure 2** Socio-ecological model: dimensions affecting mental health



Source: authors own elaboration.

While this country case study focuses on adolescents (aged 11–19), it also touches on the mental health of adults, mostly parents and community members. Although primary data collection was carried out in different localities, with one urban (Vinh) and one more rural (Nha Trang), no major differences were observed between sites in terms of the effects of Covid-19 on mental well-being. Similarly, while boys and girls of different ages were interviewed, there were no significant differences that emerged in terms of age, but some very important experiences were influenced by gender.



## 2.1 Effects at the individual level

Adolescents mentioned a range of factors that had affected their mental health and well-being. Many are linked to the fact that schools were closed (see [Box 2](#)). Perhaps boredom and sadness emerged as the most frequently mentioned sentiments, by both adolescents and their parents, arising from not going to school, being at home and not seeing friends. Others found Covid-19 restrictions hard, in that they could no longer play sports, or do other extracurricular activities that schools usually organised (e.g. camping expeditions).

More broadly, school-aged boys also felt that their usual routines were disrupted.

- Q** We feel sad and bored.
- Q** We no longer do some of the things we usually do during the day.  
(FGD with 16 and 17-year-old boys, Nha Trang)

Key informants noted that restrictions such as wearing masks and social distancing also caused stress for everyone. Fear of becoming ill was mentioned by a number of adolescents, leading to feelings of anxiety around having to isolate or possibly even dying.

**It gave me anxiety thinking about myself being infected anytime in the middle of the heavily spreading disease. (FGD with 14-year-old boys, Vinh)**

Some adolescent girls mentioned increased anxiety around their body image. This was attributed to overeating and gaining weight. The same group of girls also reported that some relationships or friendships broke down as a result of Covid-19. One key informant also cited noticing a loss of confidence in adolescents, because their interactions with others were limited as their social worlds got smaller. All these factors can have a profound effect on mental health.

- Q** I was scared of other people judging that I got fatter (because of the pandemic) or sometimes there were boys who said things like...just unintentionally but it... caused... bad impacts... Like I would have the thought that I was becoming very fat.
- Q** Using the phone too much at home makes people afraid to communicate, to socialise... There were also people who broke up in the last Covid, broke off friendships... [or] people who ate too much and then became unconfident about themselves after the pandemic, they put on weight. (FGD with 16-year-old girls, Vinh)

Some adolescents also mentioned that the Covid-19 pandemic had disrupted their sleep patterns and other routines due to staying up late at night, playing games or sleeping during the day.

No, in the pandemic it's true I stayed up the whole night. Usually until morning I slept.  
(IDI with 17-year-old girl, Vinh)

According to key informants, incidents of depression were also on the rise because of Covid-19, with some evidence of more people going to hospitals with depressive disorders. One grandmother also reported having seen on TV that depression had increased as a result of Covid-19, with more cases of suicide ideation and suicide.

For example, if students do not have to go to school, they have to stay at home [and] stay at home for a long time – such as a few weeks of time. They only know that they study via TV or use the internet, to have fun only. They can't exercise, they can't leave the house. I think it's a factor that affects [them] a lot. (KII with community leader, Vinh)

Depression ... I saw it a lot on TV, even with someone old like me, or her father... It happens a lot after Covid... A lot means a lot of people... A lot of people commit suicide because of depression. There are people [who] didn't recognise it after two months... Like the grandpa's friend, he also suffered from depression and then he committed suicide... suicide, depression for several months... they haven't concluded yet... He didn't go for treatment, but staying at home, there was a possibility... He was just alone and then he went to the end, much like depression, much like that. (FCS with 71-year-old grandmother of 13-year-old girl, Vinh)

Closely linked to the transition to online learning, there was a concern around adolescents increasingly using phones and other technologies because of Covid-19. This meant that school-age children were at a greater risk of addictive behaviours (especially with online games) and to negative influences on the internet. At the same time, while acknowledging the bad effects of being on their phones too much, a group of mothers also realised that it would be difficult to ban them completely because they now use them and other online platforms for learning.

Of course these changes [as a result of Covid-19] have several impacts... Such as, often, there are some students searching on the internet more, and are influenced by the internet in their behaviours, the above effects will dominate their behaviours. (KII with school teacher, Vinh)

- Q Back to the Covid break, they have their phones...
- Q Firstly, it affects their study, secondly, it forms their thoughts, turning into a habit.
- Q But honestly, it's impossible to ban them from doing it completely because they study many things online and search for information online. That we have to allow them to do so and prohibiting them completely is impossible.
- Q They still need to use phones for studying, so if we don't allow them to then they don't feel pleased about that.
- Q Yeah that's true. (FGD with mothers of adolescents, Vinh)

At the individual level, a few positive effects of Covid-19 were observed both by adolescents and key informants. For example, some adolescents saw the Covid-19 period as a 'summer holiday' where they were able to entertain themselves online. Similarly, some key informants noted how some students were happy as they could 'stay at home and play.' Being at home also potentially helped some adolescents manage pressures at school (e.g. from teachers and peers).

## Box 2 Spotlight on school closures



Perhaps one of the most visible, widely spoken about and immediate effects of the pandemic for adolescents in Viet Nam were **school closures**. Restrictions on school affected students in multiple ways, including their mental health. School closures generated impacts across the socio-ecological levels, particularly in terms of adolescents and their own mental well-being, exacerbating tensions within families, as well as responding to dynamics beyond the household.

Adolescent boys and girls of all ages mentioned that they were sad because they could no longer go to school as they missed their friends, they had no one to play with, and no one 'to hug,' i.e. they felt socially isolated. Parents confirmed that their children were sad when they had to remain at home.

- Q We are sad because we can't go to school, meet our friends and have to stay at
- Q home. It's very boring, it's like being under quarantine at home.  
(FGD with 13-year-old girls, Nha Trang)

My son said: ‘Staying at home is boring. I prefer to go to school, [laughing]... You always keep me at home.’ He was sad at home. He didn’t meet friends, go out. They were sad. He asked me to let him go to school and why I kept him at home.  
(FGD with mothers of adolescents, Nha Trang)



As a result of school closures, for most adolescents, learning went online. This online learning **affected school performance** which in turn led to stress amongst adolescents as well as their parents. Thus several adolescent boys and girls explained that their school performance was worsening due to the pandemic, school closures and the challenges of online learning. On one hand, they were distracted by constant news about the pandemic, leading to lower grades and fears of infection; on the other, they were tired mentally and struggled to concentrate on studying.

- Q** It affected studying, if you were busy keeping up with the pandemic’s news updates.
- Q** Like you’d be affected mentally when hearing about the increased number of patients, or online studying wasn’t very effective that your grades decreased, which also affects students’ mentally. (FGD with 14-year-old boys, Vinh)

But now because of the pandemic, because of my sickness. I don’t study anymore. My school performance has gotten worse. (IDI with 14-year-old girl, Vinh)

Some students also expressed concern that perhaps they had lost the ability to study, concentrate and learn, and that they would have difficulty getting used to it again when they returned to school. This also caused them stress given their parents’ expectations of good academic performance.

I feel like I’m more distracted from studying. Like I’m studying, and then I have to take a long break. Then when I come back to school, I cannot concentrate. This is because I got used to relaxing. When I go to school, I’m not used to such a pace of learning. It’s like when I come back to school, I won’t get used to [it]. And then, when I don’t study well, my parents will ask ‘what’s wrong?’ (FGD with 16–18-year-old adolescents, Nha Trang)



**Online study** itself also was challenging. Adolescents expressed that while some peers were able to study online, others did not because they ‘don’t like studying online’. Some found it harder to concentrate on their online classes, and others complained about difficulties with connectivity or internet delays.

Since teachers were not there to check on students, they would reportedly quickly resort to playing online games rather than studying. This affected their mental health, as too much online gaming led to lack of sleep as well as addictive behaviours (among other things).

**Q** It was more troublesome to study online because it was harder to concentrate and sometimes the internet was lagging, so...

**Q** Some turned off their cameras while studying so they could play games [online].  
(FGD with 14 year-old boys, Vinh)

The negative effects of online learning were also mentioned by key informants who suggested that online learning had made students ‘lazier’ from spending too much time on the internet. However, another key informant observed that not only did online learning make children ‘passive,’ but that it led to them studying too much and not having enough time to relax.

This suggests that online learning and leisure time merged into one, or had blurred. Similarly, given the multiple purposes of online activity (i.e. for leisure, studying, searching for information) this jumping between usages distracted children and potentially impacted their mental health.

Covid also causes their activity to be limited, [so] it will also make them become passive. Then their study time is too much, they don’t have time for themselves to relax... They usually only have a little free time. (KII with medical expert, Nha Trang)

Parents variously noted that their children did not study much or understand their lessons well (compared with before), and were distracted by technology – especially their phones. Some also remarked that while online learning could work for older students such as those at university, adolescents still needed guidance and support. Yet, they were not receiving such support from the teachers as a result of distance learning.

Q They did not study much, they just went through the lessons and then finished it and submitted it to their teachers.

Q Online learning makes children distracted. They do not understand the lessons well. (FGD with parents of adolescents, Nha Trang)

I think online learning is not effective. It works well with university students because they are self-conscious and then research, but at this age, learning online is not effective... Teachers can't just look at one time dozens of screens to know if they're studying or not. Sometimes they [students] keep opening the computer but their eyes are on the phone. (FGD with parents of adolescents, Vinh)



An increase in online studying also resulted in more **exposure to harmful material online**, as noted by a group of adolescent girls. This worry was also confirmed by a key informant who acknowledged that online learning challenged students to adapt to a new way of learning ('using laptops'), and then through this they did 'become curious' and start to search around on the internet, coming across harmful material.

During the Covid-19 pandemic, we have to study online. First, we cannot make progress in learning. Although there is much free time at home amid the Covid-19 pandemic, [and] we can use our computers to do many useful things, most of us do our own work while studying online. During the Covid-19 pandemic, we are exposed to the bad things on the internet, which leads to negative changes. (FGD with 15-year-old girls, Vinh)

Key informants noted that Covid-19 had some positive effects on adolescents when it came to learning. According to some, Covid-19 allowed adolescents to concentrate on their studies 'rather than going to the internet shops,' and some reported that their students were happy with online classes. A few adolescents also noted that they mostly focused on studying during the pandemic, as it was a form of distraction, so arguably they may also have progressed in their studies.



## 2.2 Effects within the family/household

Covid-19 led to tensions and conflicts within the family and/or household which also affected the mental health of adolescents. Related to schooling, parents were concerned that the online learning was not effective and that children were spending too much time online doing things other than studying. Our broader study, as well as other studies,<sup>8</sup> show one of the main drivers of stress and anxiety amongst adolescents is pressure to perform well academically from parents – and the Covid-19 situation appears to have exacerbated this.

Parents suggested that for online learning to be effective, they would need to sit with their children and monitor them during their classes, but given their paid work commitments, did not have time to do so. They expressed frustrations with the education sector and teachers thinking online classes can work, given the they did not seem to, resulting, in reduced academic achievement.

**Q** But it's not only harmful now, but many years later. A very bad habit is always using [their] phone and computer all day, but [they] can't study anything. Parents can't sit by their side all day because they have to go to work. So, they have to earn money, so they can't sit with their children from 8:30 a.m. to 11:00- 12:00 pm. The whole education sector says that it's beneficial, but students can't gain anything, except for [the] university students.

**Q** After the Covid pandemic, the elementary school students' grades will all be below average because they studied nothing. (FGD with parents of adolescents, Vinh)

Increasing internet usage among adolescents, often resulting in addictive behaviours, led to tensions and conflict within households, with some adolescents according to key informants, being increasingly querulous or defiant. At the same time, key informants suggested that there may have been resentment towards parents who were not staying at home looking after them, either to support their studies or play with them.

Along with likely parental anxieties and stress from uncertainties due to Covid-19, all of this exacerbated tensions, generated conflicts within families, and affected the well-being of adolescents, as well as other family members.

8 See Samuels et al., forthcoming and for an overview of other literature see [Plank et al., 2020](#).

Addiction to gamings has developed due to Covid and the restrictions in movements, as well as more conflict within households. The second thing was that children had many behavioural disorders, especially students. They stayed at home too much, which made them regularly have access to entertaining activities, [and made them] addicted to games more. Moreover, parents didn't stay at home to play with them. Conflicts happened and children had defiant behaviours. (KII with medical expert, Vinh)

The worsening economic situation caused by Covid-19 manifested in some adults losing work, which had a knock-on effect on household tensions. According to adolescents and key informants, parental unemployment meant less money within households. This resulted in fewer learning opportunities for the adolescents: some had to cut out or reduce the extra classes they had been taking to get better grades at school (though on the plus side, this may have placed less pressure on them in terms of studying time), or to stop studying altogether. All of this affected their quality of life, as well as their mental health and broader well-being.

The economic situation presents significant difficulties for students. The most direct impact is that if the economic situation deteriorates, learning opportunities [and] quality of life will be reduced too. It is likely that many students can't continue studying, or be provided better conditions for learning. (KII with secondary school teacher, Vinh)

My parents' finances started to decline [as a result of Covid-19] but that's also the time that I was in grade 9, and I was preparing for the high school entrance exam. So, I wanted to take extra classes like chemistry, physics, maths, literature, English. Those cost a lot of money, like every time I studied then, I had to ask [for] the amount of money... The amount of money was so that, if they aren't able to pay the fees, then I'll have to quit classes like chemistry, [or] physics to focus on English literature. I also had to think a lot about money for my parents. (FGD with 16-year-old girls, Vinh)



## 2.3 Effects beyond the household

When asked whether Covid-19 had an effect on access and provision of mental health and other services, one key informant noted that while more people (both adults and students) were feeling anxious and depressed, it was unclear whether more were seeking mental health services. One key informant specifically said that they did not think that more mental health services were being accessed. They also noted that there had been no changes in the cost of mental health-related services as result of Covid-19. Some did report, however, that fewer people were accessing health services more generally because of fears of catching Covid-19.

This needs to be contextualised within a policy environment which is generally supportive of mental health, with efforts over the years to develop appropriate laws and policies.<sup>9</sup> But gaps remain, including limited provision of mental health services across the country, which are also not age and gender sensitive, focusing mainly on severe mental disorders (e.g. schizophrenia and psychosis). This is to the neglect of the much more widespread common mental disorders such as depression and anxiety.<sup>10</sup>

During the Covid outbreak in the first months of the year, our hospital received fewer patients because of social distance and tight transportation control. After directive No.16, our hospital continued to examine and evaluate. However service provision was limited to prevent Covid. Patients' families were afraid of going to the hospital as they worried that they could be infected. (KII with medical expert, Vinh)

It was also noted that the pandemic had increased online services and consultations. This was seen as a positive step as Covid-19 had, in a sense, galvanised them into realising the importance of online services and increasing their provision. The use of online services was also promoted by the government who used social media platforms to carry out mass media campaigns to raise awareness about Covid-19.<sup>11</sup>

9 See also [Vuong et al., 2011](#).

10 See [Samuels et al., 2018](#).

11 For further details see [Minh et al., 2020](#) in [Chakraborty and Samuels, 2021](#).

Actually it's because of Covid that we realised the importance of information technology, it's like a boost, we realise that we have been ignoring this for too long. It's actually so. So, through this, the government has done the digital transformation. We can do things like online consultation, between central hospital and province hospital, or even the commune hospital can have online consultations with the central hospital. (KII with Government representative from Department of Health, Vinh)

From a supply side perspective, one key informant noted that the training of mental health practitioners had been affected by the pandemic, with classes being reduced because people were not attending. At a wider society level, there was a sense that people were sharing misleading news and information, including exaggerating Covid-19 infection rates.

There is misleading news and information everywhere and they're widely shared. It's hard to tell whether it's trustworthy or not. (IDI with 16-year-old girl, Nha Trang)

Some students noted that Covid-19 had led to higher levels of vandalism in their school – this could be explained by both empty schools and people venting their frustrations at the situation. There was also the sense that because of Covid-19, people could not interact, learn and communicate with people from outside their area, thus they were missing out. Others spoke of discrimination faced by those visiting them from other areas of Viet Nam, fearing that they were carrying the virus.

The effects are really serious. When there was an outbreak in Ha Noi, a few days before that, my sister who got married in Ninh Binh went back to our home with her two children. And then she had to stay here for two months. One time I drove them to town, my niece spoke and she has a Northern accent, everyone looked and said 'that girl has a Northern accent' and thought that we just got back from Ha Noi (at that time, Ha Noi was in a Covid wave). People around thought that 'they had just returned from Ha Noi', so they discriminated. (FGD with parents of adolescents, Vinh)

Many respondents spoke about the effects of Covid-19 on the wider economy, notably job loss, which in turn affected families and adolescents and ultimately their mental health and broader well-being. Key informants spoke about adults being anxious and depressed as they started to 'fall into unemployment,' and one mentioned that the tourism industry in particular was severely affected: '80% of people do not have a job because of the impact of tourism' (KII with government representative from the Department of Labour, Nha Trang).

## 3 Conclusion

Based on adolescent, adult and key informant reports of their own situation and their communities, this brief case study has shown that Covid-19 has affected the mental health of adolescents, and the adults in their lives in numerous ways. The most visible channel, as reported by respondents in all our categories, is through school closures. This has affected adolescents' academic performance as well as their state of mind – leading to boredom and sadness from not being able to socialise and mix with friends.

Adolescents also reported fears of getting Covid-19, of 'getting fat,' as well as spending too much time online, which had mental health consequences for individuals. Within families, adult household members and key informants perceived that tensions increased due to adolescents becoming increasingly querulous, largely from: spending too much time online, especially gaming; parents putting even more pressure on their children to perform academically (fearing their children had lost focus and were themselves unhappy with the quality of online teaching); and parents also not being available for their children.

At a wider level, while service availability and provision did not appear much affected by Covid-19 (yet it is not clear how this translated into mental health provision), the economic situation and loss of jobs impacted both the mental health and well-being of adults and adolescents.

Find the latest information on this project here:  
[Addressing the mental health needs of adolescents  
in Tanzania and Viet Nam through the co-creation  
of digital and non-digital solutions](#)

