

# Counseling Services in Mental Health Care for Older Adults in The Community from A Social Work Perspective

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## ABSTRACT

This paper examines the provision of counseling services in community-based mental health care for older adults from a social work perspective. The study highlights the growing demand for psychosocial support among the elderly as they face challenges related to aging, social isolation, and mental health risks. Counseling services, delivered within the framework of community social work, play a crucial role in early intervention, emotional support, and resource mobilization for older adults. However, the development of these services remains limited due to inadequate resources, fragmented coordination, and a lack of trained social work professionals. The findings underscore the need to strengthen community-based counseling services, integrate them into the broader health and social care system, and adopt holistic, person-centered, and culturally sensitive approaches. Such efforts are essential to enhance the mental well-being of older adults and promote their active social participation.

**Keywords:** older adults, mental health, counseling services, social work, community

## INTRODUCTION

In the context of Vietnam's rapidly aging population, statistical data from 2024 indicate that the number of older adults (aged 60 and above) has reached 14.2 million, an increase of 2.8 million compared to 2019. Projections suggest that by 2030, this figure will approximate 18 million, representing a rise of nearly 4 million compared to 2024 (General Statistics Office, 2023). This demographic trend poses significant challenges for ensuring comprehensive health care for older adults. Elderly care has become a pressing priority in the social welfare policies of many countries, including Vietnam. Beyond physical health needs, mental health is increasingly recognized as an essential aspect of ensuring quality of life and psychological well-being for the elderly.

In practice, older adults often encounter multiple psychosocial challenges such as loneliness, bereavement, declining social roles, and coexisting chronic illnesses. These factors place them at heightened risk of mental health disorders, including anxiety, depression, cognitive impairment, and dementia. According to the World Health Organization (WHO), approximately 14% of individuals aged 60 years and older are living with a mental health disorder, with depression and anxiety accounting for the highest proportions. The disease burden of these conditions contributes up to 10.6% of total disability-adjusted life years (DALYs) among older adults globally (WHO, 2017).

International studies have highlighted the effectiveness of community based counseling and care models, including reminiscence therapy, group activities, and collaborative or stepped care models, which have been shown to reduce symptoms of depression and anxiety while enhancing the overall quality of life for older adults (Wang et al., 2020; Gutiérrez et al., 2021). Some models, such as Intergenerational Self-Help Clubs (ISHCs), have demonstrated feasibility in integrating psychosocial support, though they remain constrained by limited resources and expertise (HelpAge International, 2020). Collectively, both international and domestic evidence underscores the widespread and urgent need for mental health counseling services for older adults. Developing such services at the community level not only facilitates older adults' access to professional support but also

promotes social awareness, reduces stigma related to mental health issues, and strengthens the role of social work in early screening, counseling, and resource mobilization for elderly care.

In Vietnam, the Vietnam Aging Survey (VNAS) reported that up to 20.2% of older adults exhibited depressive symptoms according to the Geriatric Depression Scale (GDS-15) (Nguyen et al., 2017). Other studies recorded prevalence rates of depression among the elderly ranging from 17.2% to 39.6%, reflecting the widespread nature of the problem (Pham & Nguyen, 2019). Although Vietnam's social work service system has made initial progress, psychological counseling and mental health support services for older adults remain fragmented, lack systematic organization, and are hindered by weak intersectoral coordination, thereby failing to meet the growing needs of this demographic (Nguyen, 2016; Nguyen Hang Nguyet Van et al., 2021). Consequently, access to services is constrained for older adults an increasingly large and vulnerable group in the context of rapid population aging.

Ba Diem Commune, officially established on July 1, 2025, following the merger of Xuan Thoi Thuong, Trung Chanh, and Ba Diem communes of the former Hoc Mon District (Ho Chi Minh City), exemplifies these challenges. According to 2024 statistics, the commune had 11,360 older adults, accounting for approximately 5.84% of the population (Hoc Mon People's Committee, 2024). In the face of mounting social pressures stemming from environmental changes and socio-economic conditions, many older adults in the locality are experiencing common mental health issues such as anxiety, depression, loneliness, and diminished social connectedness. These factors negatively affect their psychological well-being and substantially reduce their quality of life. While local authorities have shown preliminary attention to elderly mental health care, investment levels, support service systems, and social work service networks at the grassroots level remain limited and inadequate relative to the increasing needs of this population group.

Therefore, research on the needs, accessibility, and development orientation of mental health counseling services for older adults at the community level carries both theoretical and practical significance. Such efforts contribute to strengthening the social welfare system and ensuring comprehensive care that addresses both the physical and psychological dimensions of elderly well-being.

## **LITERATURE REVIEW / THEORETICAL FRAMEWORK**

### *Literature Review*

Older adults frequently face a range of psychosocial issues such as loneliness, sadness, depression, and anxiety factors that not only diminish cognitive functioning but also severely affect their quality of life. According to the World Health Organization (WHO, 2017), approximately 15% of older adults worldwide suffer from mental health disorders, with depression being the most common, yet often underdiagnosed and undertreated.

A study by Chanitta Soommaht et al. (2008) on the development of a community participation-based health care management model for older adults in the Isan region of Thailand, implemented in August 2008 across seven northeastern provinces (Maharakham, Roi-et, Sakon Nakhon, Nakhon Ratchasima, Buriram, Surin, and Khon Kaen), employed qualitative methods to analyze aspects of both physical and mental health care management for the elderly through community engagement. The findings indicated that community organizations' involvement in managing elderly mental health care is an effective approach, contributing to the sustainability of services. This model offers valuable lessons for Vietnam in developing social work services for older adults, particularly in mobilizing community resources for mental health care at the grassroots level.

In Vietnam, research reports have pointed out multiple limitations in the development of social work services in this field. Specifically, resource constraints, a shortage of specialized social workers, and insufficient training in mental health knowledge have hindered progress. Counseling offices at nursing homes or within communities often remain spontaneous in nature, lacking standardized operational procedures, while intersectoral collaboration has been ineffective (Nguyen, 2016; Truong Thi Yen, 2022; Nguyen Thi Hue & Tran Thi Quynh, 2024). These shortcomings directly affect both the quality and accessibility of services for older adults.

A study by Nguyen Thi Trang et al. (2020) revealed that the prevalence of depression among community-dwelling older adults ranged from 25% to 35%, with particularly high rates among those living alone or lacking family care. These findings highlight the urgent need for policy interventions to bridge gaps between public health, health care systems, and social services. Enhancing the quality of care in nursing homes, families, and communities has been recommended as a feasible direction, while also providing important insights for the development of social work services in elderly mental health care in Vietnam (WHO, 2017; Nguyen Thi Trang et al., 2020; Terry Fulmer et al., 2021).

Other studies on social work services for older adults have identified a variety of supports, including psychological counseling, mental health consultation, legal aid, medical care assistance, rehabilitation, personal support, group activities, and comprehensive social support services. A key theme across these studies is the emphasis on the role of specialized social workers in service provision and resource mobilization (Hooyman & Tompkins, 2019; Che et al., 2020; Nguyen Thi Cuc Tram, 2021).

Models of social work service delivery for older adults have been diverse, ranging from community-based models, home care, day care centers, and health–social care collaborations to self-help groups and locally driven initiatives (Moyer et al., 1999; Nguyen Van Dong, 2019; Nguyen Van Hieu, 2020; Hanh et al., 2022). Community-based models emphasizing intersectoral collaboration and empowerment of beneficiaries are increasingly valued for their sustainability and long-term effectiveness (Bulsara, Petty, & Power, 2022; Truong Thi Yen, 2022).

In many countries, integrated, multi-sectoral service models centered on older adults—combining social work, health care, rehabilitation, and psychological counseling—have proven effective in improving quality of life, reducing social isolation, and enhancing self-care capacity (Heng, 2017; Andersson & Kröger, 2018; Leung et al., 2022; Zhang, Zhang, & Wang, 2022). In Vietnam, models such as Intergenerational Self-Help Clubs, day care centers, and elderly resettlement support programs have demonstrated certain effectiveness but continue to face challenges related to resources, financing, and professionalization (General Department of Population – Ministry of Health, 2020; Ngo Dinh Tuan, 2021; Nguyen Minh Thu, 2023).

A broad consensus across studies underscores that social work plays a central role in the mental health support system for older adults, through activities such as counseling, screening, networking, multi-sectoral coordination, and personalized support (Dabelko-Schoeny, Anderson, & Guada, 2013; Harper, 2014; Rathbone-McCuan, 2001; Ivbijaro & de Mendonça Lima, 2019; Cassidy-Eagle, 2020).

Within this context, social work is crucial in providing services that help older adults maintain mental health through early intervention, awareness-raising communication, counseling, psychotherapy, resource linkage, and community mobilization. Social work services not only focus on individual interventions but also extend to families, groups, and communities, thereby creating sustainable support networks (NASW, 2021). Guided by ecological systems theory in social work, it is recognized that individual, family, community, and societal factors all influence the mental health of older adults. Therefore, interdisciplinary collaboration and a holistic approach are essential in providing community-based mental health care for the elderly (Bronfenbrenner, 1979; Saleebey, 2008).

## **Theoretical Framework**

### ***Concept of Older Adults***

Older adults are a demographic group with specific biological, psychological, and social characteristics, often associated with declining bodily functions, health limitations, and changes in social roles (Nguyen Van Tai, 2018). The aging process is typically accompanied by physical frailty and reduced adaptability, while older adults also face psychosocial challenges such as loneliness, depression, anxiety, cognitive decline, bereavement, and shrinking social networks (WHO, 2017; Le Thi Hong, 2020). These factors negatively affect their quality of life, social participation, and mental well-being.

## ***Mental Health Care***

Mental health care for older adults is a continuous and holistic process aimed at maintaining, improving, and restoring a positive psychological state. It not only focuses on preventing and treating disorders such as depression, anxiety, and dementia but also helps strengthen coping abilities, improve quality of life, and promote social engagement among older adults.

Providing mental health care for the elderly involves delivering interdisciplinary, continuous, and person-centered support services to protect, maintain, and enhance their psychological well-being. This process goes beyond prevention, early detection, and treatment of common disorders (such as depression, anxiety, or dementia) to include enabling older adults to adapt to psycho-physiological changes, maintain social connectedness, and improve mental quality of life in the context of rapid population aging (Vu Thi Minh Phuong, 2025).

### ***Counseling Services in Mental Health Care***

Psychosocial counseling services are among the most important forms of support in mental health care, focusing on listening, accompanying, problem-solving, and strengthening coping skills in the face of stress (Corey, 2017). For older adults, counseling not only aims to detect early signs of mental disorders such as depression or anxiety but also helps them sustain social relationships, enhance self-esteem, and preserve a sense of meaning in life (Nguyen Thi Trang et al., 2020).

At the community level, counseling acts as a bridge connecting older adults with the health care system, their families, and other social resources (WHO, 2021).

### ***Social Work and Counseling Services for Older Adults' Mental Health***

Social work is a professional discipline grounded in theories of human behavior and social systems, aiming to promote social change, resolve relational problems, empower individuals, and enhance quality of life (IFSW, 2014).

Older adults often face the burden of “dual morbidity” and typically live with multiple chronic diseases on average three to six conditions along with increased risks of disability due to aging and high treatment costs. Therefore, counseling services for mental health care among older adults play a crucial role, not only for the individuals themselves but also for society, by facilitating early detection, reducing treatment costs, and improving recovery prospects. When physical, psychological, and social health are ensured, older adults are better positioned to continue contributing to society.

Counseling services for older adults primarily aim to enhance their capacity and that of their families to address mental health challenges. Social workers act as counselors who provide information, knowledge, and skills while facilitating positive change. For counseling to be effective, social work practitioners must possess comprehensive knowledge, strong skills, and readiness to support older adults and their families in addressing mental health concerns and coping with life situations.

Social workers provide information regarding causes, symptoms, early prevention, and basic treatment approaches for mental health issues faced by older adults and their families. They also respond to concerns, share information on medical facilities, and deliver skills training in conflict resolution, stress management, confidence-building, and assertiveness. Such interventions are particularly meaningful for older adults as they enable proactive mental health care, enhance independent living, improve social interactions, and gradually facilitate recovery. This, in turn, supports social functioning and reintegration for those experiencing mental health difficulties within family and community settings.

Depending on specific needs, social workers may also connect older adults with mental health specialists to ensure accurate information and tailored guidance regarding the psychological changes associated with aging. This equips older adults with the foresight to anticipate challenges and develop preventive strategies to manage personal difficulties effectively.

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Additionally, counseling services for elderly mental health cover guidance on relevant policies and entitlements, nutrition advice, health examination and treatment, relationship management within family and society, and addressing psychological needs. By identifying the issues and expectations of older adults, social workers can provide encouragement, motivation, and companionship, helping them restore psychological balance and reduce feelings of loneliness and isolation.

In mental health care, social workers play a key role in counseling for older adults, including:

- Counseling on mental health care methods and nutrition for older adults.
- Counseling on meaningful activities to promote mental well-being.
- Counseling on managing family and social relationships.
- Counseling on self-care skills for mental health, in collaboration with higher-level health facilities to organize regular health check-ups for older adults.

## **RESEARCH METHODS**

### ***Document Research Method***

In this study, the primary method employed was a combination of literature review and the collection of both primary and secondary data. Based on secondary data from available sources, the research team conducted a survey using questionnaires and in depth interviews to gather information on counseling services in mental health care (MHC) for older adults (OAs). To assess the current situation and effectiveness of such services, the study developed a five point Likert scale (ranging from 1: Completely ineffective to 5: Highly effective). After completion, the questionnaire was pilot-tested to verify its reliability, with Cronbach's Alpha used to evaluate the internal consistency of items related to counseling services in MHC for OAs.

In parallel with the quantitative approach, the study also adopted qualitative methods through in-depth interviews with five groups of participants, including OAs, social workers, representatives of local associations/agencies, and other stakeholders directly involved in providing counseling services in MHC for OAs. The in depth interviews not only offered multi dimensional perspectives and complemented the survey data, which is often limited in depth, but also provided participants with the opportunity to share their views in an open and voluntary setting. This contributed to enhancing the authenticity and reliability of the research findings.

### ***Research Participants***

To clarify the current state of counseling services in MHC for OAs, the study was conducted using a cross-sectional design, combining both quantitative and qualitative methods. Quantitative data were collected through a survey of 395 OAs residing in Ba Điem Commune, Ho Chi Minh City. The sample was selected using a convenience sampling method, combined with purposive sampling, to ensure diversity in demographic characteristics, including gender, age, educational attainment, and marital status.

The survey results indicated that male OAs accounted for 30.6%, while female OAs made up 69.4%. This proportion reflects the general demographic pattern in Vietnam and aligns with the 2023 General Statistics Office report, which recorded an average life expectancy of 73.6 years, with 71.1 years for men and 76.2 years for women (General Statistics Office & UNFPA, 2023). Although the social role and status of women have improved significantly in recent years, a considerable number of older women continue to face gender inequalities. Notably, women in general, and older women in particular, tend to pay greater attention to health care, especially MHC. However, longer life expectancy also means that older women are more likely than their male counterparts to encounter health challenges such as osteoporosis, dementia, and the burden of family caregiving (Nguyen & Tran, 2022).

In terms of age distribution, the largest proportion of respondents were in the 70–79 age group (40.0%), followed by the 60–69 age group (33.9%), and those aged 80 and above (26.1%). These findings are consistent with the

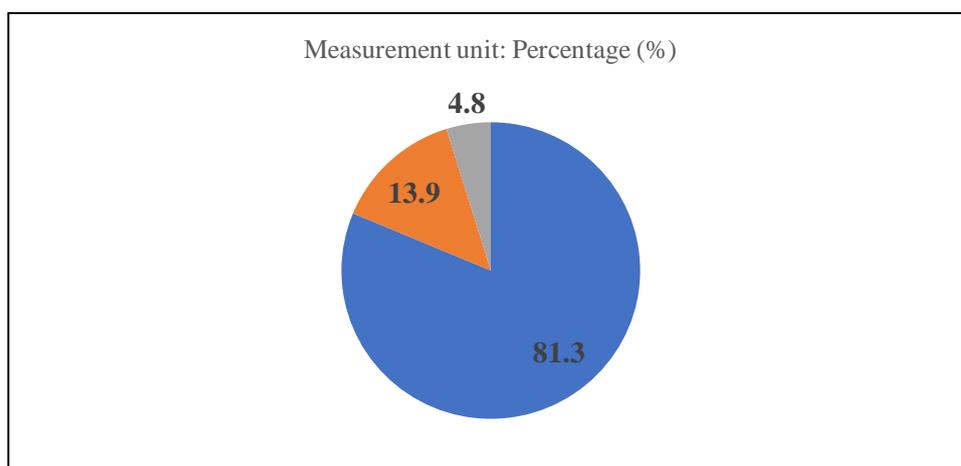
global aging trend documented in international studies. According to the World Health Organization (WHO, 2019), the global average life expectancy for women was 74.2 years, higher than that of men (69.8 years). In Vietnam, average life expectancy reached 74.5 years in 2023, an increase of nearly one year compared to 2022. Between 2019 and 2022, Vietnamese life expectancy fluctuated between 73.6 and 73.7 years, with the gender gap maintained at 5.3 years. Particularly in 2023, the average life expectancy of Vietnamese women rose to 77.2 years, compared with 72.1 years for men (General Statistics Office & UNFPA, 2023).

## RESULTS AND DISCUSSION

### The Need for Counseling Services in Mental Health Care for Older Adults

The findings of this study indicate that older adults (OAs) have a very high demand for social work services in community-based mental health care. Specifically, 81.3% of respondents expressed a need for counseling on mental health care. In reality, OAs have experienced a long period of engagement in both family and societal labor. Upon retirement, many face economic difficulties and declining health, which increases their demand for counseling services that support mental health care, helping them improve well-being and cope with life's challenges. Consequently, the need for OAs to access mental health services is substantial and widespread, closely associated with common psychological difficulties such as anxiety, depression, insomnia, memory decline, and loneliness in later life.

Qualitative data further illustrate this demand. One OA stated: "I am 70 years old and have been retired for nearly ten years. Since I no longer work, I have much more free time, but sometimes I feel sad and often overthink. My children are at work all day, so I mainly take care of myself at home. There are times when I suffer from persistent insomnia and low mood, but I hesitate to share because I don't want my children to worry. Honestly, I really want someone to talk to, to listen, and to guide me on how to stay mentally relaxed. Up until now, we usually only go for check-ups for heart or blood pressure problems, and few people think about seeking counseling for mental health. If psychological counseling services were available locally or through the older adults' club, I would definitely participate, because having someone who understands and accompanies me would make me feel much lighter. What I wish for is not only treatment for physical illness but also mental care, so that I can live happily, healthily, and meaningfully." (In-depth interview, male OA, 70 years old).



**Table 1.** *The need for counseling services in mental health care among Oas; (Source: Actual survey data)*

Mental health has become one of the most pressing concerns among OAs. This demand is not confined to a small subgroup but is prevalent across the majority of older adults. Nevertheless, 13.9% reported no demand, and 4.8% provided no opinion. This indicates that a portion of OAs either have no need or are not yet ready to share, which may stem from limited awareness, the influence of societal stigma surrounding mental health, or psychological reluctance and self-endurance.

This situation underscores the need for social work not only to provide counseling services but also to focus on raising community awareness, reducing stigma, building local psychological support networks, and developing

a workforce of social workers specialized in mental health. Thus, the research results not only confirm the urgency of psychological counseling services for OAs but also suggest important directions for policy-making and the organization of community-based counseling networks, ensuring that OAs receive holistic care for both physical and mental health.

Further qualitative interviews also revealed limitations in existing services. As one representative of the OA Association noted: “Every year, the local authority and the OA Association coordinate with the commune health station to organize periodic health check-ups and screening for symptoms of mental disorders among OAs. However, the number of OAs receiving examination and counseling is still limited. Since these activities are not conducted regularly, only those who are already ill and listed by village sub-associations are prioritized. Therefore, the current efforts have not yet met the demand for mental health care among OAs in the community.” (In-depth interview, OA Association representative).

### Counseling Services on Mental Health Care for Older Adults in the Community

Population aging is a global issue, and Vietnam is among the countries with one of the fastest aging rates worldwide. By 2030, the elderly will account for approximately 17% of the total population. According to expert projections, Vietnam will officially enter the aging population phase in 2036, and this proportion could reach 25% by 2050 (Đuc Tran, 2024). Therefore, the need for health care in general and mental health care in particular for older adults in the community is increasingly essential.

Community based mental health counseling services play a key role in supporting the general population, particularly vulnerable groups such as older adults, by raising awareness, promoting proactive prevention, improving coping with mental disorders, and fostering positive mental health. In the current social context where factors such as population aging, socioeconomic pressures, and changing family structures profoundly affect the mental health of older adults the demand for access to psychological support, counseling, and mental health care services continues to rise.

Research data related to counseling services on mental health care for older adults, with an average score (Mean) = 3.24, indicate that participants’ evaluations were moderately positive, reflecting a relatively favorable perception of the effectiveness of counseling services currently implemented in the community. However, the responses also revealed some variation among participants. Among the surveyed services, counseling on regulating family and social relationships received the highest average score (Mean = 3.30). This finding suggests that respondents recognized social relationships as an important protective factor for mental health.

**Table 1: Counseling Services on Mental Health Care for Older Adults**

No	Counseling services on mental health care	Participants’ responses					M	S.D
		1. Very poor; 2. Poor, 3. Average, 4. Good, 5. Very good						
		1	2	3	4	5		
1	Counseling on mental health care methods and nutrition for older adults	5,3	15,2	45,1	25,6	8,9	3,17	0,87
2	Counseling on activities to improve mental health for older adults	7,1	7,3	53,2	21,5	10,9	3,22	0,80
3	Counseling on regulating family and social relationships	6,8	8,1	47,6	22,8	14,7	3,30	1,02
4	Counseling skills for older adults in mental health care	6,1	12,9	43,8	24,6	12,7	3,25	0,94

<b>Mean Score</b>	<b>3,24</b>	<b>1,01</b>
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(Source: Actual survey data).

When applying the ecological systems theory, it becomes evident that the quality and effectiveness of mental health counseling services are influenced by multiple levels in maintaining emotional stability and reducing the risk of social isolation among older adults. At the most immediate level (microsystem), the relationship between the elderly and counselors plays a crucial role in building trust, which serves as a foundation for cognitive and behavioral change. Meanwhile, the interconnections among community stakeholders, such as local health stations, mass organizations, and the Elderly Association (mesosystem), can either facilitate or hinder older adults' access to counseling. At broader levels, systemic factors such as supportive policies, local budgets, and mass media (exosystem) provide a structural foundation but remain inconsistent. In addition, cultural and social factors (macrosystem) such as stigma surrounding mental illness, prejudice, and limited understanding of the value of counseling continue to act as barriers, particularly for older adults, who are often more sensitive to change and reluctant to share mental health concerns. Therefore, improving the quality of community based mental health counseling services cannot rely solely on strengthening human resources but requires a comprehensive, multi-layered approach that addresses content, organizational methods, and supportive social contexts. Building and expanding user-friendly, accessible counseling networks that are integrated with local socio - political organizations, while simultaneously reducing community stigma, represent practical interventions in the current stage to help older adults maintain psychological stability and quality of life.

Regarding counseling on skills for older adults to manage their own mental health, participants' evaluations were moderately positive, with a mean score of 3.25. Specifically, only 37.3% rated the service as good, while 43.8% assessed it as average, and 19.0% considered it poor. This reflects relative agreement, yet still some divergence in participants' perceptions of service quality. Community-based counseling on mental health skills plays an important role in alleviating the burden on the specialized health system. Compared with previous studies, early interventions in community mental health care for older adults through individual counseling, group sessions, or psychoeducational activities can reduce hospitalization rates while strengthening intersectoral collaboration between health care, social work, and civil society organizations at the local level. The current findings demonstrate a positive step in recognizing the role of counseling services for older adults. However, other studies have pointed out that most older adults in the community have never accessed mental health counseling, and many still confuse conventional medical advice with psychosocial support. In practice, as age increases, older adults face not only physical health challenges but also psychological issues such as sadness, loneliness, helplessness, pessimism, and prolonged anxiety. Yet, health staff or social workers often only provide casual support such as asking, encouraging, or comforting rather than structured, professional counseling or therapy (Nguyen Thi Minh Nguyet, 2020). This highlights a critical policy concern: the urgent need to strengthen the community-based workforce of trained social workers and psychologists with skills in delivering social work services in mental health care for older adults, ensuring timely detection and intervention.

Survey results on participants' evaluations of the two remaining counseling services counseling on beneficial activities to improve mental health, and counseling on mental health care methods and nutrition also revealed relatively positive trends, with mean scores of 3.22 and 3.17, respectively. Although not rated very highly, these results suggest that beneficiaries recognized these services as moderately effective, reflecting an initial acknowledgment of their role in improving mental health. Notably, both services showed lower standard deviations, indicating higher consensus among participants, which suggests alignment with the general needs of older adults. This implies that access to mental health counseling services in the community is gradually becoming more universal, though the content and delivery methods may still be somewhat simplistic, inflexible, or insufficiently tailored to the specific needs of older adults.

For counseling on mental health care methods and nutrition, more than half of respondents (53.2%) considered the service average, while nearly 32.4% rated it as good or very good. Similarly, counseling on beneficial activities to improve mental health received good or very good ratings from around 34.5% of respondents. However, the proportion rating these services as "average" exceeded 45% in both cases, suggesting that a significant segment of older adults has not yet fully experienced the benefits or found these activities effective.

This may stem from the reality that many older adults have limited exposure to preventive or health promotion interventions, or that the available counseling content may not adequately reflect their cultural context, educational background, or accessibility needs.

By contrast, international research particularly from countries with advanced social welfare systems such as Japan, Canada, and the Nordic nations consistently emphasizes the central role of counseling services in community-based mental health care strategies for older adults (Geriatric Mental Health Foundation, 2020). According to the World Health Organization (WHO, 2021), effective models focus on integrating individual counseling, group counseling, and community psychoeducation into primary health care systems. Compared with these models, our findings suggest that counseling services in Vietnam, and specialized services more broadly, remain at an early stage of development, with relatively modest effectiveness and significant disparities in users' perceptions.

When applying the ecological systems theory, it becomes evident that the quality and effectiveness of mental health counseling services are influenced by multiple levels in maintaining emotional stability and reducing the risk of social isolation among older adults. At the most immediate level (microsystem), the relationship between older adults and counselors plays a crucial role in building trust, which serves as a foundation for changes in perception and behavior. Meanwhile, linkages among community stakeholders such as local health stations, mass organizations, and the Elderly Association (mesosystem) also contribute to either facilitating or hindering access to counseling. At a broader level, structural factors such as supportive policies, local budgets, and mass media (exosystem) provide a foundation but remain inconsistent. In addition, cultural and social factors (macrosystem) such as prejudice, stigma toward mental illness, and limited awareness of the value of counseling remain barriers that prevent older adults from proactively seeking services. This group is particularly sensitive to change and reluctant to share mental health concerns. Therefore, improving the quality of community based mental health counseling services cannot rely solely on increasing human resources; it requires a comprehensive, multi-layered approach that simultaneously enhances content, organizational methods, and supportive social contexts. Building and developing user friendly, accessible counseling networks integrated with local socio-political organizations, while addressing community stigma, represent practical interventions to help older adults maintain psychological stability and quality of life.

Regarding counseling on skills for older adults to care for their own mental health, participants' evaluations were moderately positive, with a mean score of 3.25. Specifically, 37.3% rated the service as good, 43.8% as average, and 19.0% as poor. This reflects relative agreement but also certain variations in assessment. Skill based counseling services for older adults at the community level also play a critical role in reducing the burden on specialized health care systems. Compared with earlier studies, early mental health interventions for older adults at the primary care level through individual counseling, group sessions, or psychoeducational programs have been shown to reduce hospitalization rates and improve intersectoral collaboration among health care, social work, and civil society organizations. The present findings indicate a positive step toward greater recognition of the role of counseling services for older adults. However, other studies have shown that most older adults in the community have never accessed mental health counseling, and many confuse routine medical advice with psychosocial support. In reality, as older adults age, they not only experience physical health issues but also psychological challenges such as sadness, loneliness, helplessness, pessimism, and prolonged anxiety. Yet health staff or social workers often provide only casual support asking, encouraging, and comforting rather than structured, professional psychological counseling (Nguyen Thị Minh Nguyệt, 2020). This highlights an important policy concern: the need to strengthen the community-based workforce with trained social workers and psychologists who are capable of delivering professional social work services in mental health care for older adults, ensuring timely detection and intervention.

Survey findings on participants' assessments of the two remaining services counseling on beneficial activities to improve mental health, and counseling on mental health care methods and nutrition showed relatively positive perceptions, with mean scores of 3.22 and 3.17, respectively. Although not rated very highly, these figures reflect beneficiaries' moderate recognition of the services' effectiveness, signaling an initial acknowledgment of their role in improving mental health. Importantly, both services had low standard deviations, indicating higher levels of agreement among respondents, which suggests that these services align relatively well with the universal needs of older adults. This implies that access to community-based counseling services is gradually becoming

more widespread, though the content and delivery methods may still be simplistic, inflexible, or insufficiently tailored to the specific needs of older adults.

For counseling on mental health care methods and nutrition, more than half of respondents (53.2%) considered the service average, while 32.4% rated it good or very good. Similarly, counseling on beneficial activities to improve mental health was rated good or very good by about 34.5% of respondents. However, in both cases, the proportion selecting “average” exceeded 45%, indicating that a large segment of older adults has not yet fully experienced or perceived the effectiveness of these services. This may stem from the fact that many older adults have limited exposure to preventive and health promotion activities, or that the existing counseling content is not sufficiently adapted to their cultural background, education level, or accessibility conditions.

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### Comparison of Gender and Educational Attainment in Perceptions of Mental Health Counseling Services for Older Adults

Quantitative research data reveal notable differences between men and women regarding satisfaction with counseling services on mental health care and nutrition for older adults. Specifically, women scored higher than men in both counseling on mental health care and nutrition ( $M = 3.21$  vs.  $3.09$ ;  $p < 0.01$ ) and counseling on beneficial activities to promote mental health ( $M = 3.26$  vs.  $3.13$ ;  $p < 0.01$ ). Although the mean differences were relatively small, these findings reflect a consistent trend across multiple contexts in which older women tend to pay greater attention to issues related to mental health and nutrition, are more active in participating in social activities, and are more inclined to seek emotional support. In contrast, older men often appear more passive, showing greater interest in regulating social relationships and maintaining their roles within the family and community (Chou & Chi, 2002; Wang et al., 2019; Carmel, 2019; Kiely et al., 2019).

This finding aligns with Yu et al. (2021), who argued that older women tend to use psychological counseling services related to health and nutrition more frequently than men. Similarly, several studies in Vietnam also suggest that men place greater emphasis on maintaining social relationships, while women prioritize direct health care services. Thus, the design and implementation of counseling services for older adults must take gender into account to enhance both effectiveness and accessibility (Nguyen Thi Hang, 2022).

**Table 2: Perceptions of Counseling Services in Mental Health Care for Older Adults by Gender**

Content	Gender	N	Mean	Std. Deviation	Std. Error Mean	Sig
Counseling on mental health care and nutrition for older adults	Male	121	3.09	1.155	.105	0,001
	Female	274	3.21	.881	.053	
Counseling on beneficial activities to promote mental health	Male	121	3.13	1.169	.106	0,008
	Female	274	3.26	.886	.054	
Counseling on regulating relationships	Male	121	3.42	1.160	.105	0,006
	Female	274	3.25	.979	.059	

Counseling on skills for older adults to care for their mental health	Male	121	3.22	1.122	.102	0,160
	Female	274	3.26	.992	.060	

(Source: Actual survey data).

Qualitative data further reinforce this trend: one older woman shared, “I enjoy attending talks and listening to advice on how to stay relaxed and eat properly to live happily,” while an older man emphasized, “I just want the doctor to tell me specifically about diet and exercise; I am not used to talking much.” This finding resonates with domestic studies, which consistently highlight that gender and educational attainment significantly influence older adults’ help seeking behaviors in mental health care. Thus, the study suggests that the design of counseling services should be both gender-sensitive and education sensitive, addressing women’s needs for social connection and sharing, while tailoring content to the practical concerns of men (Nguyen Thi Minh Chau, 2021).

Meanwhile, older men rated higher on counseling related to relationship regulation ( $M = 3.42$  vs.  $3.25$ ;  $p < 0.01$ ), reflecting their need to maintain social and familial roles and interest in community connectedness. This may be linked to changes in family roles in later life, where men may recognize needs only when they manifest as relationship conflicts rather than abstract psychological symptoms (Przybylko et al., 2021). These findings are consistent with earlier studies showing that older men often prioritize social status and external relations (Nguyen Huu Minh & Le Thi Quy, 2018). For counseling on skills in mental health care, no statistically significant gender difference was observed ( $M = 3.22$  for men and  $3.26$  for women;  $p > 0.05$ ), indicating a common need acknowledged by both genders but not yet prominent. This suggests that gender-sensitive counseling services are required: for women, prioritizing nutritional education, preventive strategies, and mental health promotion activities; for men, focusing on programs that support relationship regulation, social connection, and role maintenance in family and community life. Such approaches would not only improve service effectiveness and relevance but also contribute to the goals of healthy aging and social inclusion among older adults in Vietnam.

To further clarify group differences in perceptions of mental health counseling services, a one-way ANOVA test was conducted. Results (Table 3) reveal significant differences in evaluations across educational attainment groups. For instance, in counseling on beneficial activities to enhance mental health, the differences were pronounced ( $F = 4.231$ ;  $Sig = 0.001$ ), suggesting that older adults with higher education levels tended to rate preventive and developmental services more positively. This indicates that those with higher educational attainment often show more favorable views toward counseling content such as nutrition, mental health promotion, and self care skills. Educational capital and information accessibility appear to underpin these differences, enabling more educated older adults to better recognize the benefits of such services. Conversely, those with lower education tend to focus more on direct, immediate support rather than preventive or skill development services.

**Table 3: Perceptions of Counseling Services in Mental Health Care for Older Adults by Educational Attainment**

Counseling Services in Mental Health Care for Older Adults		Sum of Squares	df	Mean Square	F	Sig.
Counseling on beneficial activities to enhance mental health	Between Groups	19.238	5	3.848	4.231	.001
	Within Groups	353.709	389	.909		
	Total	372.947	394			
Counseling on beneficial activities to promote mental health	Between Groups	18.334	5	3.667	3.952	.002
	Within Groups	360.942	389	.928		

	Total	379.276	394			
Counseling on regulating relationships	Between Groups	17.987	5	3.597	3.434	.005
	Within Groups	407.558	389	1.048		
	Total	425.544	394			
Counseling on skills for older adults to care for their mental health	Between Groups	16.536	5	3.307	3.191	.008
	Within Groups	403.150	389	1.036		
	Total	419.686	394			

(Source: Actual survey data).

Similarly, counseling on mental health care and nutrition also showed significant differences ( $F = 3.952$ ;  $Sig = 0.002$ ), indicating that those with higher education levels demonstrated better awareness of comprehensive nutrition and health care. For counseling on relationship regulation ( $F = 3.434$ ;  $Sig = 0.005$ ) and mental health care skills ( $F = 3.191$ ;  $Sig = 0.008$ ), results also revealed the influence of education: less educated groups tended to focus on concrete support, while better-educated groups emphasized skills, autonomy, and social relationships.

These findings are consistent with Lee & Park (2020), who confirmed that educational attainment is a critical predictor of older adults' reception and utilization of mental health counseling services, as more educated individuals are more proactive in seeking information and engaging in mental health-promoting activities. Chou & Chi (2021) also found in Hong Kong that higher-educated older adults maintain stronger social networks, thereby facilitating greater participation in and benefits from psychological counseling services. In Vietnam, Pham Thi Lan (2021) reported similar patterns: highly educated older adults often engage more actively in community activities and value evidence-based counseling, while less educated groups tend to rely on family support or social workers.

From a theoretical perspective, the link between education and counseling evaluations can be explained through concepts of health literacy and information processing capacity: higher educated older adults are more capable of understanding preventive counseling content, more willing to engage in educational activities, and hold higher expectations of service quality. Consequently, they tend to rate mental health promotion and nutritional counseling more positively (Chesser et al., 2016). Conversely, lower educated groups may face barriers due to limited vocabulary, technical jargon, or difficulties processing complex information, thus preferring practical guidance, visual aids, and concrete support.

Overall, these findings reinforce the argument that educational attainment is a key factor influencing older adults' mental health care perceptions and behaviors. This highlights the need for differentiated content and delivery methods tailored to varying education levels ensuring accessibility for those with limited education while fostering proactive participation among the highly educated.

The analysis also reflects a familiar socio-cultural reality: older women tend to prioritize maintaining both physical and mental health, more readily engage in counseling activities, whereas older men particularly those with lower education are more passive in emotional expression and mainly focus on straightforward, practical guidance. This aligns with in depth interviews, where women stressed the importance of conversation and group activities, while men sought simple instructions on exercise and diet. These results are consistent with both international research (Chou & Chi, 2002; Wang et al., 2019) and domestic studies (Nguyen Thi Minh Chau, 2021), which emphasize the significant influence of gender and education on access to and use of mental health care services.

Thus, combining quantitative and qualitative findings, and corroborating with prior studies, the present research provides strong evidence that demographic factors especially gender and education play a critical role in shaping older adults' reception of mental health counseling services. This underscores the necessity of tailoring counseling content, methods, and formats to specific groups, thereby enhancing the effectiveness and sustainability of social work services in community based mental health care for older adults.

### **Policy Implications**

**Develop specialized counseling services and diversify content:** Counseling programs should take into account differences in gender, age, and educational level among older adults, thereby creating service packages tailored to practical needs such as nutrition, emotional management skills, family and social relationships. Counseling activities must also be adjusted according to educational attainment to ensure appropriateness and enhance the health of older adults in the community.

**Strengthen the capacity of social workers and community health staff:** Policies are needed for regular training and capacity building in psychosocial counseling skills for grassroots-level staff to ensure professionalism and sustainability, while enabling comprehensive access and effective delivery of mental health counseling services for older adults.

**Expand networks and counseling service points:** Encourage the establishment of counseling points at health centers, older adult associations, or through models such as "Healthy Aging Clubs," combining both in-person and online services to increase accessibility.

**Integrate mental health counseling into comprehensive health care policies for older adults:** The government should include psychosocial counseling as a key component of the National Action Program on Older Adults, ensuring stable and long term budget allocation.

**Promote socialization and resource mobilization:** Strengthen cooperation among the state, social organizations, businesses, and communities in investing and operating counseling services to share costs and improve quality.

### **CONCLUSION**

The study revealed that counseling services for mental health care of older adults in the community are currently rated only at a relatively moderate level, insufficient to fully meet the diverse needs of different groups of older adults. Differences across gender and educational levels highlight that the needs of older adults are not homogeneous, requiring stratified and personalized services. The findings indicate that older adults' needs are diverse, ranging from nutrition counseling, psychological support, to skills for prevention and maintaining social relationships. This necessitates the design of tailored and tiered counseling services. Strengthening the capacity of social workers, expanding community counseling networks, and ensuring adequate resource allocation are key solutions. Accordingly, the development of mental health counseling services should focus on designing appropriate service packages for different groups, enhancing the capacity of social workers, and integrating services into the existing health and social care network. This will be a crucial pathway to improving quality of life and promoting healthy and sustainable aging in Vietnam.

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