The Mental Health Education Management Model of Chinese Universities in Hainan Province

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Abstract

This quantitative investigation elucidated a model for the management of mental health education in colleges and universities in Hainan Province, China. Based on an exhaustive review of relevant literature, this study designed a rigorous questionnaire that explored important models of mental health education management from multiple dimensions. Based on Taro Yamane Fornula's (1973) framework for determining sample size, the present study was conducted on a stratified sample of 420 individuals from 21 Hainan universities, including 297 faculty members (administrators, general faculty, and other staff members) and 123 students, with a total of 105 items in the questionnaire. The method of analysis centered on Exploratory Factor Analysis (EFA) using SPSS software to distill the key factors influencing professional development. The results of the analysis showed that the establishment of the university mental health education center, the faculty (department) mental health workstation, the class psychological support group, and the dormitory psychological informant played an important role in students' mental health education. All variables had high Cronbach's alpha values, proving the construct validity of the survey to be reliable. By analyzing the core elements that promote the management of mental health education in colleges and universities, this study is conducive to optimizing the construction of management teams and improving the management system of mental health education, to optimize and improve the current situation of the management of mental health education in colleges and universities in Hainan Province.

Keywords: mental health education; education management; model; Chinese Universities; Hainan province

Introduction

Mental health is one of the key factors for student success in higher education. With the increase in social pressure, college students are facing more and more mental health challenges, such as anxiety, depression, and stress management problems. Although studies have emphasized the importance of mental health education (Yue, 2022; Lui, 2023), the effectiveness and implementation of mental health education management models have not been adequately researched in Chinese colleges and universities.

This study aims to fill this gap by exploring the current state of mental health education management models in Chinese universities and assessing their impact on students' mental health. Although some studies have explored the provision of mental health services (Lin, 2021), few studies have focused on how these services are integrated and managed, and whether these models can meet the diverse needs of students.

At present, the mental health of Chinese college students is not optimistic, and there are more and more emergencies caused by mental health problems among college students. According to the "Blue Book of Mental Health: China's National Mental Health Development Report (2019–2020)", 18.5% of college students tend towards depression, 4.2% tend high risk of depression, and 8.4% tend towards anxiety (Fu et al., 2021). The "Notice on Strengthening the Management of Students' Mental Health" issued by the General Office of the Ministry of Education clearly states that it is necessary to strengthen the management of mental health by strengthening the four aspects: management of the source, process management, results management, and guarantee management. Management, outcome management, and guarantee management, and focus on improving students' mental health literacy in four areas (Department of Education (DfE), 2021).

In response to the increasingly prominent mental health problems of college students, China began to educate and manage the mental health of college students in the 1980s. A series of measures have been taken, including the subsequent issuance of a series of documents on the management of university students' mental health, the establishment of professional committees for psychological counseling in colleges and universities, and associations for mental health education; the vast majority of colleges and universities have carried out pilot research and practical activities on the education of university students' mental health; and psychological counseling agencies or

offices have been set up in colleges and universities, with specialists and teachers forming the relevant counseling teams to provide the appropriate services for university students.

The core purpose of the Mental health education management model is to provide comprehensive support and resources to help college students develop positive psychological literacy and the ability to cope with stress. The implementation of this service usually involves multiple levels of participants, including students, staff, parents, and social resource providers. Schools play a key role in promoting mental health education by formulating relevant policies and guidelines, providing necessary training and support, and fostering a positive campus environment. Staff also play an important role in the classroom by providing care and support as well as timely guidance for students to seek help. After years of practice, the management of college students' mental health education in China has developed at a relatively rapid pace. By providing timely support and interventions, students can be helped to reduce their stress, improve their mental health, as well as enhance their academic performance and quality of life. Many studies have shown that the mental health education management model in Chinese universities helps create a supportive and inclusive campus environment, reduces dropout rates, improves employment rates, and provides a good foundation for the overall growth and development of students.

As China's largest special economic zone, Hainan Province has its own unique ecological and cultural background, socio-economic development model, and lifestyle. Currently, during the critical period of building an international free trade port in Hainan Province, it is of great significance to do a good job of mental health education in colleges and universities, which is an important part of accelerating the construction of "Healthy Hainan". What are the characteristics of the management mode of mental health education in colleges and universities in Hainan Province? How can we optimize the mental health management mode of Hainan Province universities? These are all issues worth exploring. However, so far there is no research on the management mode of mental health education in colleges and universities in Hainan. Therefore, this study will make a comprehensive and in-depth investigation of the management mode of mental health education in colleges and universities in Hainan Province, make suggestions for further strengthening the management of mental health education in colleges and universities in Hainan Province, and provide a basis for the

development of policies related to mental health education in colleges and universities in Hainan Province.

Objective

1. To study the current status and desirable mental health education management model of Chinese universities in Hainan province.

2. To study the needs assessment of the mental health education management model of Chinese universities in Hainan province.

3. To propose the guidelines for the mental health education management model of Chinese universities in Hainan province.

4. To determine the appropriateness and possibility of the mental health education management model of Chinese universities in Hainan province.

Literature Reviews

Based on a series of studies, this paper reviews the literature on the mental health education management model of Chinese universities in Hainan province, to understand how much item is related to this model. 1) Concepts and theories related to mental health education. 2) Concepts and theories related to mental health education management. 3) Concepts and theories related to the Mental Health Education Management Model. 4) Related research.

The literature is enriched by theories emphasizing individual growth and systemic collaboration. Humanistic and Maslow's theories guide a needs-based approach, prioritizing student well-being. Achievement motivation theory informs the drive for academic success impacting mental health. System and Contingency management theories align organizational structures with adaptive mental health strategies. Collaborative governance, particularly the SFIC model, envisions a future where university departments as well as student organizations work collaboratively to provide support for comprehensive mental health. These theories anchor my research, offering a multifaceted view on enhancing the mental health education Management model of Chinese universities in Hainan Province.

Research Conceptual Framework

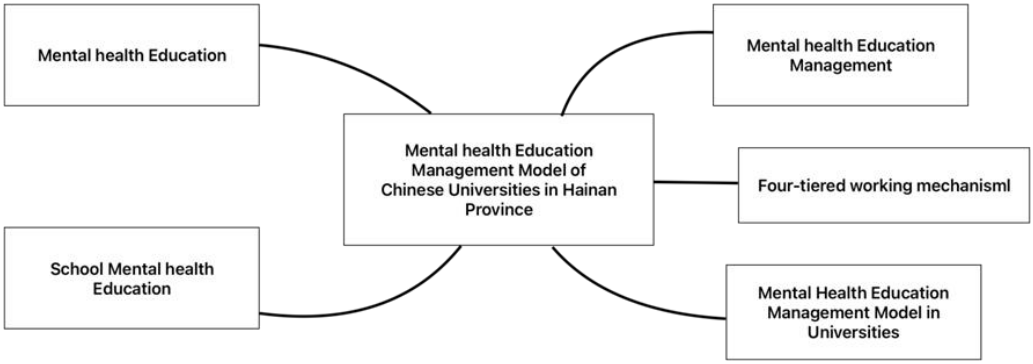


Figure 1 Research conceptual framework

Research Methodology

In the preparatory phase of this study on the 'Mental Health Education Management Model of Chinese Universities in Hainan Province,' a comprehensive approach was adopted. The initial step involved crafting a survey questionnaire, informed by an exhaustive literature review, scholarly articles, and pertinent research, enriched with insights gleaned from interviews with five subject matter experts. This initial instrument underwent a multi-stage refinement process: initial feedback from the thesis advisor facilitated preliminary enhancements, succeeded by validation from three additional experts to ascertain content validity. Following these consultations, the questionnaire was revised accordingly and subjected to a pilot test with a select group of 50 participants, representative of the target demographic across five institutions, to ascertain its reliability, as evidenced by Cronbach's alpha coefficient. Concurrently, an interview protocol was formulated, drawing on factor analyses from the preliminary survey findings. The draft interview instrument was meticulously reviewed by the doctoral advisor for content relevance and linguistic suitability, with amendments made in response to the feedback received. The final interview format was then used in 30-minute structured interviews with selected educational administrators and teachers. To improve the validity of the data, the responses were translated into English and analyzed in detail for content analysis, laying a solid foundation for achieving the research objective of a model for mental health education management of Chinese universities in Hainan province.

Population and Sampling

The population used in this research was conducted on administrators (headmaster, the director of the Mental Health Education and Counseling Center, the head of the Departmental Mental

Health Education Workstation), teachers (psychological counselors, teachers of mental health courses, teachers of other courses), student cadres (Peer Psychological Supporters, Dormitory Psychological Informants), other staff (counselors, the dormitory administrators), in some Chinese universities in Hainan Province. This study was conducted at 21 universities in Hainan Province, located in the southern part of China. Among these eight institutions, four are public universities, while the remaining four are private universities. The sample group used 441 people related to mental health education management, and the researcher determined the sample size by using the schedule of the sample size of Taro Yamane.

Data collection

A structured survey questionnaire, with five-point Likert scale-based multiple-choice questions, was used as the primary data collection tool. The questionnaire was divided into two major parts:1) Respondent demographics and professional status.2) The mental health education management model of Chinese universities in Hainan province. The questionnaire was pre-tested for clarity and relevance, and necessary adjustments were made based on initial feedback.

Results

The empirical outcomes of this study demonstrate significant correlations between the mental health model in Hainan Province and several key factors. Data analysis, conducted using IBM's SPSS software, focused on exploratory factor analysis (EFA) to identify the underlying dimensions of professional development influences.

Table 1 Basic information of respondents

Variable	Options	Frequency	Percentage %
Identity	Teacher	162	70.7
	Student	123	29.3
Gender	Male	221	52.6
	Female	199	47.4
Age	18–30	169	40.2
	31–40	178	42.4
	41–50	58	13.8
	51 and above	15	3.6
Education	College students	109	26.0
	Bachelor's degree	13	3.1
	Master's degree	201	47.9
	Doctor's degree	97	23.1
Work experience	0–1 year	31	7.4
	1–5 years	226	53.8
	5–10 years	118	28.1
	10 years and above	45	10.7

Frequency analysis is used to study the distribution of categorical data, selecting frequencies and percentages. As can be seen from 1 The frequency analysis of Identity of responses shows that the Teacher frequency is 297, accounting for 70.7% of the total; The frequency of Student is 123, accounting for 29.3% of the total; According to the frequency analysis of 2 The frequency analysis of Gender of responses shows that the Female frequency is 199, accounting for 47.4% of the total; The frequency of Male is 221, accounting for 52.6% of the total; According to the frequency analysis of 3. Age of responses, 50 years or older accounted for 3.6% of the total; 41–50 years old, accounting for 13.8% of the total; 18–30 years old, accounting for 40.2% of the total; 31–40 years old, accounting for 42.4% of the total; According to the frequency analysis of 3 Response's highest educational background, the percentage of Bachelor's degree is 3.1%; Doctor's degree, the percentage is 23.1%; College students, the percentage is 26.0%; Master's degree, the percentage is 47.9%; According to the frequency analysis of 4. The work experience in the management of mental health education of the responses, the frequency of 0–1 years is 31, accounting for 7.4% of the total; the more than 10 years' frequency is 45, accounting for a percentage of 10.7%; the frequency of 5–10 years is 118, accounting for 28.1% of the total; the frequency of 1–5 years is 226, accounting for 53.8% of the total.

Validity and Factor Analysis

Using factor analysis for information concentration research, first, analyze whether the research data is suitable for factor analysis. From the table, it can be seen that the KMO is 0.976, greater than 0.7, and Bartlett's Spherical test value is significant (Sig.<0.001), indicating that the questionnaire data meets the prerequisite requirements of factor analysis.

Table 2 KMO and Bartlett's Test

Kaiser–Meyer–Olkin Measure of Sampling Adequacy.		**.976**
Bartlett's Test of Sphericity	Approx. Chi–Square	41027.622
	df	4950
	Sig.	.000

Table 3 analyzes the factor extraction situation and the amount of information extracted from the factors. From the above table, it can be seen that: the factor analysis extracted a total of 5 factors, the eigenroot value is greater than 1, the variance explained by the rotation of these 5 factors is 24.257%14.932%10.097%9.615%8.783%. The cumulative variance explained by the rotation of the factor analysis is 67.684%.

Table 3 Total Variance Explained

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	36.124	36.124	36.124	36.124	36.124	36.124	24.257	24.257	24.257
2	11.299	11.299	47.423	11.299	11.299	47.423	14.932	14.932	39.189
3	8.155	8.155	55.578	8.155	8.155	55.578	10.097	10.097	49.286
4	6.503	6.503	62.082	6.503	6.503	62.082	9.615	9.615	58.901
5	5.602	5.602	67.684	5.602	5.602	67.684	8.783	8.783	67.684
6	.853	.853	68.537						
7	.811	.811	69.348						
8	.788	.788	70.136						
9	.760	.760	70.896						
10	.727	.727	71.623						
11	.710	.710	72.332						
12	.666	.666	72.998						
13	.657	.657	73.655						
14	.642	.642	74.297						
15	.613	.613	74.910						
16	.607	.607	75.517						
17	.595	.595	76.113						
18	.590	.590	76.703						
19	.573	.573	77.276						

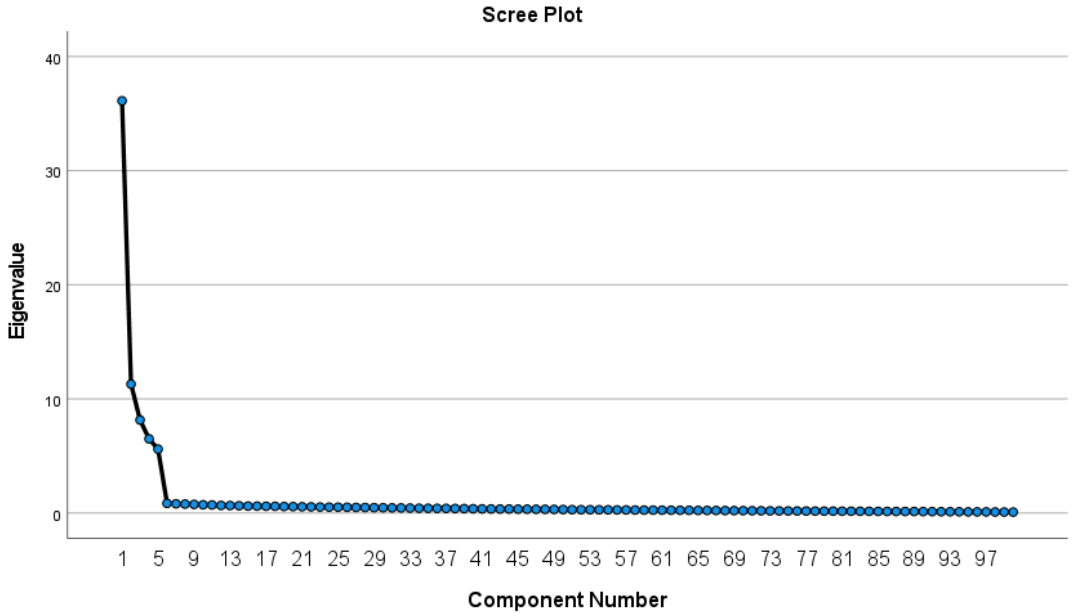
20	.564	.564	77.840
21	.552	.552	78.392
22	.544	.544	78.937
23	.527	.527	79.464
24	.519	.519	79.983
25	.513	.513	80.497
26	.503	.503	81.000
27	.493	.493	81.493
28	.487	.487	81.980
29	.474	.474	82.454
30	.467	.467	82.920
31	.457	.457	83.377
32	.451	.451	83.828
33	.437	.437	84.265
34	.423	.423	84.688
35	.419	.419	85.107
36	.412	.412	85.518
37	.408	.408	85.927
38	.399	.399	86.325
39	.391	.391	86.716
40	.379	.379	87.094
41	.367	.367	87.462
42	.362	.362	87.824
43	.354	.354	88.178
44	.353	.353	88.531
45	.346	.346	88.877
46	.340	.340	89.217
47	.332	.332	89.549
48	.327	.327	89.876
49	.321	.321	90.197
50	.308	.308	90.505
51	.298	.298	90.803
52	.295	.295	91.098
53	.293	.293	91.391
54	.288	.288	91.680
55	.285	.285	91.965
56	.278	.278	92.242
57	.276	.276	92.518
58	.265	.265	92.783
59	.262	.262	93.045
60	.259	.259	93.303
61	.253	.253	93.557
62	.250	.250	93.807
63	.246	.246	94.052
64	.242	.242	94.295
65	.232	.232	94.527
66	.231	.231	94.758
67	.226	.226	94.984
68	.220	.220	95.203
69	.214	.214	95.417
70	.211	.211	95.628

71	.206	.206	95.835
72	.202	.202	96.036
73	.194	.194	96.231
74	.192	.192	96.422
75	.187	.187	96.609
76	.183	.183	96.792
77	.178	.178	96.970
78	.173	.173	97.143
79	.169	.169	97.312
80	.168	.168	97.479
81	.162	.162	97.641
82	.160	.160	97.802
83	.155	.155	97.956
84	.152	.152	98.108
85	.147	.147	98.255
86	.143	.143	98.398
87	.139	.139	98.537
88	.138	.138	98.675
89	.137	.137	98.813
90	.129	.129	98.941
91	.127	.127	99.068
92	.121	.121	99.189
93	.116	.116	99.305
94	.113	.113	99.418
95	.105	.105	99.523
96	.105	.105	99.628
97	.103	.103	99.730
98	.094	.094	99.825
99	.090	.090	99.915
100	.085	.085	100.000

Extraction Method: Principal Component Analysis.

The scree plot is used to assist in determining the number of factors to extract. Based on the principle of eigenvalue greater than 1, the first common factor has the largest eigenvalue with a value above 30, and the sixth common factor has an eigenvalue value of less than 1. Therefore, based on the change of eigenvalue of each factor in the gravel plot and the value of greater than 1, the initial extraction of 5 common factors.

Table 4 Scree Plot



The principal components extracted by principal component analysis represent multiple raw indicator variables, where the raw indicator variables are used to explain the individual principal component meanings in detail. In the initial loading matrix for factor rotation, the maximum variance method is used to carry out orthogonal rotation to extract principal components, so that the difference in the loading value of each indicator under each principal component is maximized, which makes each principal component more representative.

According to the rotated component matrix, the higher the loadings of each principal component on the synthesized indicator, the more representative the indicator is of the principal component, according to the principle that the factor loadings are greater than 0.5 vertically and maximum horizontally, the horizontal indicators included in the principal components are extracted, as shown in the following table: the factor loadings of each measurement item are greater than 0.5, and the cross-loadings are less than 0.4, and each question item is falling into the corresponding factor, which has good structural validity. It has good structural validity.

Table 5 Rotated Component Matrix

	Component				
	1	2	3	4	5
EACC25	.802	.059	.123	.122	.097
EACC20	.798	.091	.070	.074	.124
EACC22	.790	.149	.064	.085	.109
EACC26	.778	.174	.082	.121	.119
EACC36	.776	.140	.123	.123	.136
EACC8	.776	.151	.054	.126	.141
EACC3	.772	.075	.102	.068	.109
EACC38	.771	.100	.079	.140	.145
EACC23	.769	.120	.092	.095	.101
EACC11	.767	.096	.151	.107	.082
EACC41	.763	.145	.117	.108	.085
EACC14	.762	.136	.068	.044	.048
EACC35	.761	.145	.052	.077	.181
EACC21	.757	.048	.170	.089	.066
EACC33	.755	.115	.081	.069	.099
EACC5	.752	.074	.076	.144	.110
EACC27	.749	.106	.065	.135	.123
EACC1	.748	.152	.062	.104	.101
EACC12	.748	.125	.147	.118	.025
EACC30	.747	.153	.043	.099	.100
EACC4	.742	.147	.058	.079	.108
EACC24	.736	.125	.077	.131	.128
EACC40	.733	.141	.116	.148	.167
EACC7	.733	.056	.067	.081	.118
EACC18	.733	.144	.119	.106	.080
EACC15	.732	.152	.113	.101	.049
EACC32	.732	.133	.086	.090	.132
EACC13	.720	.064	.072	.082	.104
EACC9	.712	.103	.104	.094	.158
EACC17	.707	.088	.087	.078	.114
EACC37	.707	.080	.092	.108	.089
EACC39	.706	.187	.125	.079	.139
EACC19	.700	.099	.099	.110	.077
EACC28	.698	.167	.108	-.011	.106
EACC29	.685	.129	.172	.064	.121
EACC31	.685	.084	.129	.056	.169
EACC34	.684	.138	.084	.134	.106
EACC2	.679	.104	.121	.103	.143
EACC16	.679	.123	.181	.140	.110

EACC6	.668	.122	.176	.121	.137
EACC10	.653	.157	.073	.137	.102
FMHEW8	.206	.858	.099	.072	.061
FMHEW14	.174	.854	.059	.129	.127
FMHEW10	.177	.851	.153	.083	.096
FMHEW9	.160	.846	.115	.082	.097
FMHEW5	.131	.844	.069	.084	.106
FMHEW4	.148	.842	.128	.070	.105
FMHEW12	.190	.839	.053	.062	.137
FMHEW15	.149	.834	.102	.177	.107
FMHEW20	.215	.829	.132	.074	.073
FMHEW17	.142	.828	.128	.094	.094
FMHEW3	.170	.826	.132	.121	.111
FMHEW16	.140	.818	.166	.126	.045
FMHEW2	.168	.818	.107	.139	.124
FMHEW18	.170	.811	.080	.137	.073
FMHEW11	.205	.803	.086	.066	.109
FMHEW1	.186	.802	.156	.089	.049
FMHEW19	.149	.802	.111	.083	.028
FMHEW13	.148	.788	.132	.094	.084
FMHEW7	.115	.784	.103	.078	.125
FMHEW6	.136	.778	.116	.149	.174
UMHWLG9	.205	.144	.831	.044	.109
UMHWLG11	.106	.152	.830	.090	.098
UMHWLG5	.158	.066	.829	.142	.115
UMHWLG6	.140	.136	.828	.150	.131
UMHWLG3	.179	.153	.824	.133	.109
UMHWLG10	.174	.084	.821	.118	.148
UMHWLG12	.216	.138	.820	.116	.150
UMHWLG7	.152	.162	.809	.108	.113
UMHWLG13	.176	.155	.794	.069	.103
UMHWLG14	.192	.141	.781	.161	.128
UMHWLG1	.140	.173	.758	.140	.114
UMHWLG2	.159	.168	.755	.052	.098
UMHWLG4	.157	.117	.744	.115	.147
UMHWLG8	.145	.127	.736	.137	.151
CPSG11	.189	.141	.092	.862	.086
CPSG10	.170	.076	.130	.846	.082
CPSG4	.146	.118	.117	.826	.096
CPSG2	.147	.104	.160	.822	.111
CPSG13	.192	.146	.183	.817	.110
CPSG8	.174	.102	.094	.811	.126

CPSG7	.159	.143	.124	.807	.127
CPSG9	.182	.152	.105	.806	.083
CPSG6	.175	.203	.092	.806	.100
CPSG1	.227	.099	.097	.802	.062
CPSG5	.148	.124	.157	.787	.099
CPSG3	.175	.175	.094	.783	.184
CPSG12	.224	.114	.102	.775	.135
DPSI9	.240	.087	.142	.076	.839
DPSI10	.259	.135	.102	.136	.836
DPSI2	.189	.139	.115	.126	.820
DPSI7	.240	.161	.163	.113	.818
DPSI3	.262	.141	.129	.131	.811
DPSI5	.193	.168	.159	.132	.810
DPSI1	.206	.123	.142	.104	.810
DPSI8	.188	.153	.171	.147	.803
DPSI6	.199	.125	.168	.108	.798
DPSI12	.275	.158	.163	.143	.770
DPSI11	.256	.145	.171	.094	.733
DPSI4	.256	.142	.150	.150	.723

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 6 iterations.

In the execution of this research, all interviews were conducted online in Mandarin, the native language of the respondents, to guarantee that their responses were both articulate and unprompted. Each session, averaging 30 minutes in duration, was meticulously audio-documented for future transcription and coding. The transcribed dialogue was subsequently scrutinized by the participants to confirm its veracity. Adherence to stringent ethical protocols was paramount, and the interviews were conducted confidentially, predicated on the receipt of informed consent from the participants, who also affirmed their lack of any vested interests conflicting with those of the researchers.

Discussion

The results of research objective 1 found that the current status and demand for the management model of mental health education of Chinese universities in Hainan Province consisted of five main components: university mental health leadership group, university mental health education and counseling center, faculty (department) mental health education station, classroom

psychological support group, dormitory psychological informant, which is consistent with the research of Wang Fei and Xiao Xingan, studying Research on mental health education management of university students in newly-established undergraduate universities.

The results of the second objective research found that the needs assessment of the mental health education management model of Chinese universities in Hainan Province had the following number of descriptive variables related to each factor: Factor 1: 14 variables; Factor 2: 41 variables; Factor 3: 20 variables; Factor 4: 13 variables; Factor 5: 12 variables. The factor loadings for each component were: Factor 1: from 0.736 to 0.831; Factor 2: from 0.653 to 0.802; Factor 3: from 0.778 to 0.858; Factor 4: from 0.775 to 0.832; Factor 5: from 0.723 to 0.839. The factors for each item were measured at a value greater than 0.5. Each item was in the corresponding factor with good construct validity. This is consistent with the research of Wang Fei and Xiao Xingan, studying research on mental health education management of university students in newly-established undergraduate universities.

The results of the third objective study showed the guidelines for the management model of mental health education in Chinese universities in Hainan Province. From the statistical synthesis of the results in the documents, the establishment of the university mental health leading group and the university mental health education and counseling center are also consistent with the view of Xiao and Chen (2007): university management model. The management model of mental health education refers to the relatively stable and acceptable management model of university mental health education. The operation methods of university mental health education are diverse, but the operation models of schools with the most prominent impact on performance are mainly characterized by clear responsibility, focus, multi-party cooperation, overall promotion, and comprehensive and coordinated development.

The results of objective 4 found that to consider the suitability and feasibility of the management model of mental health education of Chinese universities in Hainan Province, in terms of the faculty (department) mental health education situation, it is consistent with the view of Niu et al. (2023) that university secondary colleges are directly responsible for the daily management of students, and the effectiveness of mental health education work is directly related to the quality of talent cultivation in school. The statistics of classroom psychological support groups and dormitory psychological informants are consistent with the view of Kirsch et al. (2014) that the establishment of a student support network, using students' natural tendency to help classmates have better

mental health education outcomes, which Billingsley and Hurd 2019) also reflected that students' participation in extracurricular activities in universities can lead to more emotional and informational support, may counteract harmful discrimination, and have positive effects on students' mental health and academic achievement.

New Knowledge

The knowledge from the synthesis of research on the Mental Health Education Management Model of Chinese Universities in Hainan Province can enable those who study or are about to develop education to use the mental health education management model to further develop the education system for maximum efficiency. This study is the first systematic and in-depth research on the management of mental health education in colleges and universities in Hainan Province, using Hainan Province as a case study within China, which will be an important addition to the development of mental health education management in China, as well as a possible new research direction. Hainan Province is a representative of the economically developed provinces along the southern coast of China, and the study of its experience in the management of mental health education in colleges and universities is of great significance in providing suggestions and ideas for the improvement and popularization of the management of mental health education in colleges and universities in China, and in further enriching and perfecting the management of mental health education in Chinese colleges and universities.

Conclusion

The mental health education management model of Chinese universities in Hainan Province covers four levels: school, department, class, and dormitory, forming a three-dimensional education and management network that ensures the comprehensiveness and depth of mental health education work. The mental health education management model in Chinese colleges and universities is a well-structured, comprehensive, and dynamically developing mental health education and service system designed to provide all-around mental health support for college students. The conclusion of this study is to examine the mental health education management model of Chinese universities in Hainan Province, and explore the construction of a clearer and more rational management model of mental health education in universities, aiming to promote and influence the

management of mental health education in colleges and universities to be more scientific, efficient, standardized and orderly.

Suggestions

Based on these findings, the following recommendations are made:

1. Cooperate and build together. The team cannot be built without cooperation and support between departments. University departments, units, and faculties must be in close contact and familiar with their respective divisions of labor in crisis intervention duties, so that they can provide efficient services when necessary, e.g., in cooperation with the university hospital, the security office, and so on.

2. Comprehensive publicity. In addition to those within the mental health education management model, all faculty members must familiarize themselves with the knowledge of psychological crisis intervention. Crisis intervention knowledge for the faculty and staff groups will be carried out from time to time: publicity and training will be provided to improve the knowledge of identifying suicidal tendencies, how to persuade students with suicidal tendencies, and how to get help.

3. Staffing. China's Ministry of Education stipulates that the ratio of psychological teachers should be 4,000:1, but many colleges and universities have difficulty in realizing this requirement. In addition to increasing the number of psychological teachers, counselors need to continuously improve their professional skills, receive regular supervision, and improve their professional knowledge.

References

Billingsley, J. T., & Hurd, N. M. (2019). Discrimination, mental health, and academic performance among underrepresented college students: the role of extracurricular activities at predominantly white institutions. *Social Psychology of Education: An International Journal, 22*(2), 421–446. https://doi.org/10.1007/s11218-019-09484-8

Chen, B., Zhang, J., Zhang, Z., & Tang, X. (2020). The application of the “four methods” education model in college students’ mental health education. *China Health Industry, 17*(13), 112–113+116.

Fu, X. (2007). Coordinated management in school mental health education. *Education Exploration, 12,* 122–123.

Fu, X., Zhang, K., & Chen, X. (2021). *Mental health blue book: report on the development of China's national mental health (2019–2020).* Social Science Literature Press.

General Office of the Ministry of Education. (2021). *Notice on strengthening the management of students' mental health.* General Office of the Ministry of Education.

Kirsch, D. J., Pinder–Amaker, S. L., Morse. C. ... et al. (2014). Population–based initiatives in college mental health: students helping students to overcome obstacles. *Current Psychiatry Reports, 16*(12), 525.

Lin, X. (2023). Research on the standardization of college students' mental health education and psychological counseling services. *Journal of Hubei Open Vocational College,* (6), 34–35+41.

Liu, W. (2006). *Implementation and management of school mental health education.* Chongqing University Press.

Lui, X. (2023). Realistic dilemma and historical reflection of psychological parenting system in colleges and universities. *Social Science,* (2), 13–23. DOI: 10.13644/j.cnki.cn31–1112.2023.02.007

Ma, J., & Ouyang, S. (2019). On the construction of mental health education model in colleges and universities with Chinese characteristics. *Thought Theory Education, 11,* 96–100.

Ministry of Education. (1999). *Opinions on strengthening mental health education for primary and secondary school students.* Ministry of Education.

Niu, R., Tian, T., & Liu, P. (2023). Exploration of psychological crisis intervention and management mechanism for post–00 college students in secondary colleges. *China Journal of Multimedia and Network Teaching,* (1), 99–103.

World Health Organization. (1978). *Almaty declaration.* International Conference on Primary Health Care.

Wu, Z. (2011). New exploration on the construction of mental health standard for college students. *School Party Building and Ideological Education, 2,* 78–79.

Yao, B. (2008). *School mental health education.* Anhui University Press.

Yue, T. (2022). Discussion on the importance of psychological education to the management of college students in colleges and universities. *Industry and Technology Forum,* (2), 251–252.

Xiao, X., & Chen, Z. (2007). *Environmental theory of mental health education.* University of Electronic Science and Technology Press.