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Institutional Factors, Coping Mechanisms, and Psychological Well-Being among Vocational University Students in China: Evidence from Jiangxi

Hu Meiling

City Graduate School, City University of Malaysia, Jiangxi Software Vocational and Technical University, Nanchang City, Jiangxi Province,China

Email: 764519438@qq.com

Mohd Syafiq Md Salleh

City Graduate School, City University Malaysia

Email: mohd.syafiq@city.edu.my

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Abstract

In recent years, mental health problems among college students in China's higher vocational institutions have become more and more severe, but little systematic empirical research has been conducted in these institutions. Based on the student mental health data collected from Jiangxi University of Software Professional Technology, this study used student coping mechanisms as a mediator to investigate the influence of mental health education programs, student awareness, educational environment and institutional support on student mental health. The study employed a quantitative cross-sectional survey design with 377 full-time students participating and validated instruments being used to collect the data. Relationships between variables were analysed by multiple linear regression and Sobel mediation test. It was found that all four independent variables had a statistically significant positive effect on mental health outcomes: mental health education ($\beta = 0.491$, $p < .001$), student awareness ($\beta = 0.561$, $p < .001$), educational environment ($\beta = 0.425$, $p < .001$), and institutional support ($\beta = 0.529$, $p < .001$). Each of these relationships was significantly and partially mediated by student coping mechanisms (Sobel $Z = 4.06–6.03$, all $p < .001$). The results suggest that the promotion of mental health education and institution support has a direct effect on the mental health of students, as well as an indirect effect through enhancing their coping skills. Theories and practical implications are discussed and recommendations for evidences based institutional reform are provided for Chinese higher vocational education.

Keywords: Mental Health Education, Student Awareness, Educational Environment, Institutional Support, Coping Mechanisms, Vocational Higher Education, China

Introduction

The mental health of college students in higher vocational institutions is a critical issue, especially in the context of academic pressures, career preparation and life changes. This is exacerbated by the lack of mental health education and resources at Jiangxi University, where many students struggle with stress, anxiety, and other psychological issues (Lee et al., 2021; Wu et al., 2024). Although there is growing awareness about mental health in China, most vocational colleges fail to provide systematic education and learning mechanisms for students to cope with psychological problems (Hammoudi Halat et al., 2023; Pandya & Lodha, 2022). The relationship between mental health education efforts, student awareness, educational environment and institutional support with mental health outcomes is explored in the current study, focusing on the moderating effect of student coping mechanisms.

As a growing concern, mental health education for college students has been put on the forefront, particularly in career-specific vocational colleges that prepare students to pursue specific career paths. Many studies have looked at the potential benefit of Mental Health Education in Higher Education, highlighting its importance for student success, and the development of effective resilience strategies. There is a special situation in vocational colleges like Jiangxi University of Software Professional Technology: students are subject to two pressures, the learning of theory and the training of skills. The literature reveals that when appropriate mental health services are available, students' academic achievement significantly improves and they may be better prepared for after graduation. However, there is a significant gap in resources in vocational colleges and the number of youth experiencing mental health challenges continues to grow every day.

Some research indicates that vocational colleges have higher percentages of college students with anxiety and depression than academic colleges (Son et al., 2020; Wang et al., 2020). Based on these findings, mental health education is recognized as an urgent need. As part of the curriculum, it helps students to recognize indicators of mental distress, learn coping mechanisms, and normalize/help-seeking. Therefore, it is urgent to study the role of mental health education programmes, student awareness, educational environment and institutional support in student mental health outcomes in vocational education and training institutes, and analyse the mediating role of coping mechanisms. The study seeks to reveal the inadequacies in the current practices and their impact on the mental health of students, thereby providing insights for creating more effective mental health education and support strategies in vocational education.

Literature Review

The three theories that support the conceptual model of this review are based upon. The Mental Health Literacy (MHL) Framework proposed by Jorm et al. (1997) defines mental health literacy as knowledge about mental illnesses, including the ability to recognise them; knowledge of the causes of mental illness; knowledge of risk factors for mental illness; knowledge of professional help available for mental illness; and attitudes toward mental illness which facilitate recognition and seeking help. MHL based Mental health education in higher education aims to improve students' awareness of mental health problems and decrease stigmatising attitudes while promoting self-help and help-seeking behaviours both in formal and informal learning contexts. The framework is especially pertinent in the Chinese

context, which has historically been characterised by cultural stigma that has contributed to the silencing of open discussion of psychological distress (Kondirolli & Sunder, 2022).

The mediating variable is based on Lazarus and Folkman's (1984) Stress-Coping Theory. The theory suggests that stress is a function of the individual and his or her environment, and depends on the appraisal of the stressor and the available coping resources. Problem-focused coping is directed at the stressor itself, for example managing time, seeking out academic supports, or problem solving, while emotion-focused coping is directed at the emotional reaction, for example, mindfulness, social support or acceptance. It also recognizes that there are maladaptive coping, such as avoidance, denial and drug and alcohol abuse, which can help in the short term but negatively affect the long term. Coping mechanisms in this study are defined as the process by which institutional interventions result in mental health outcomes for individuals (Green & Harvey, 2022).

The dependent variable is based on the Positive Psychology Framework developed by Seligman and colleagues that reframes mental health from the lack of illness to the presence of psychological well-being (emotional balance, academic engagement, life satisfaction and resilience). Seligman's (2011) PERMA model consists of five aspects of flourishing: positive emotions, engagement, relationships, meaning and accomplishment. When applied in the university context, this approach can be used to implement interventions that foster gratitude, mindful self-compassion and goal setting, which have been associated with decreased depression and anxiety and increased life satisfaction (Fredrickson, 2009).

Regarding mental health education, Bai (2020) posits the need to incorporate psychological theories into the education programs according to the needs of the students. Wang (2023) points out the importance of getting structured curricula with counselling. There has been significant improvement in reach with digital interventions, where studies have demonstrated that online platforms and mobile apps result in a greater uptake of these interventions among students who may not otherwise seek help, including because of the anonymity afforded by these platforms (Xu et al., 2022). Peer-led approaches are also effective: peer support programs offer a non-stigmatising environment for students to feel comfortable talking about mental health, and institutions have seen positive uptake of counselling services following the implementation of peer-led campaigns (Evans & White, 2021; Wilson et al., 2021).

Student awareness is directly related to help-seeking behaviour, stigma reduction, and improved coping (Jiang et al., 2020). Awareness can lead to early intervention, minimising risk of symptom escalation, and using counselling services. Digital tools, however, have a double edge: on the one hand, they can increase awareness, but even so, exposure to misinformation and to social comparison on social media platforms can intensify anxiety (Memon et al., 2020). The role of culture further complicates the issue, as mental health stigma is prevalent in Chinese and other collectivistic societies, and awareness campaigns need to be culturally appropriate to be credible and effective (Rahman & Lin, 2020).

The educational world has a strong impact on the psychology of students. Positive school climate also consistently linked to less anxiety and depression with supportive teacher-student relationships, reasonable academic expectations, and inclusive peer norms (Park &

Yoo, 2022). On the other hand, the high pressure and high competition conditions with a lack of social support are a source of student burnout (Nguyen et al., 2021). Furniture and materials also play a role – the physical layout of classrooms, access to green areas and proper ventilation can significantly impact on mood and cognitive function (Zhang et al., 2020). COVID-19 also revealed how education spaces can be quickly disrupted and how long-distance learning is linked to emotional burnout and "digital fatigue" (Huang & Li, 2023).

Institutional support involves counselling services, mental health policies, staff training, peer programs, and the general support of a university's leadership for the well-being of students. Research is consistent that strong support structures in the university will lead to higher retention rates and lower drop-out rates (Jones et al., 2021). The perceived availability and quality of institutional support is as critical as its actual availability: students who believe that services are easily available, confidential and professionally competent are much more likely to use them (Chen et al., 2023). The use of digital support platforms has increased accessibility, especially in a hybrid and remote setting, but it relies on good platform design and privacy of data (Huang & Lee, 2021).

Student coping mechanisms are an important intervening variable. Coping styles that involve problem-solving are linked to reduced anxiety and increased motivation (Sharma & Singh, 2022), and emotion-focused coping, such as mindfulness or peer support, can enhance short-term emotional well-being in addition to problem-solving coping (Tan & Goh, 2023). However, avoidance-based coping is linked to lower academic performance and higher psychological distress (López et al., 2021). Social support acts as a protective buffer, as students who have a supportive peer group and mentoring network are likely to have adaptive coping strategies and lower levels of depressive symptoms (Hossain & Rahman, 2020). MBIs and cognitive-behavioural training have shown promise for decreasing academic stress and enhancing coping repertoires within the university setting (Lee & Park, 2020).

Methodology

The design of the study was a quantitative cross sectional correlational which is suitable to explore the relationship between mental health education, student awareness, educational environment, institutional support, coping mechanisms and mental health effects with the help of standardised measurements. A positivist research paradigm was used, which prioritizes the objective measurement, statistical analysis and hypothesis testing. The population under study was all full-time undergraduate and postgraduate students of Jiangxi University of Software Professional Technology (29,881). The minimum number of respondents was determined to be 377 using Cohen, Manion and Morrison (2018) guidelines with a significance level of 0.05, statistical power of 0.80 and a medium effect size.

The selection of the participants was carried out by simple random sampling in which every student had equal chances of being selected in the sampling process to minimize sampling bias. The data was collected using a structured questionnaire that was created using Google Forms and sent via the university mailing lists, student WeChat groups, academic department forums, and faculty coordinators. Eight items were included in the questionnaire on a 5-point scale ranging from 1 = Strongly Disagree to 5 = Strongly Agree, including items of mental health education initiatives, student awareness, educational environment, institutional

support, student coping mechanisms (mediator), and mental health outcomes (dependent variable).

A pilot study was carried out with 30 students that were not in the main sample. Expert review was used to determine content validity using three experts and I-CVI scores ranged from 0.87 to 0.94 with all the constructs above the .80 level. The Cronbach's alpha value varied from 0.85 to 0.91 which indicated good internal consistency. SPSS version 26 and the PROCESS macro (Model 4) were used for data analysis. Data screening, descriptive statistics, reliability analysis, multiple linear regression, and Baron and Kenny mediation analysis and Sobel test (bootstrapped with 5000 resamples, 95% CI) were used as the analytic sequence. All the tests were carried out at $p < .05$. Ethical clearance was provided by the University's ethics committee, all participation was voluntary, anonymous and includes informed consent.

Results and Discussion

Descriptive Statistics and Reliability

Descriptive statistics, standardised regression coefficients (β) and cronbach alpha values for all the constructs of the study are displayed in Table 1. The five-point likert scale mean scores for all were in a moderate range (M = 2.88 – 3.14). The lowest mean (M = 2.88, SD = 1.28) was for Educational environment, implying that students rate the level of support in which they learn in less supportive than other institutional factors. The highest means of the constructs were for student awareness (M = 3.14) and mental health outcomes (M = 3.12). Cronbach alpha values for all measures were above 0.85 providing excellent to good internal consistency within each measure.

Table 1

Descriptive Statistics, Regression Coefficients, and Reliability for All Constructs

Construct	Items	M	SD	β	α	Reliability
Mental Health Education Initiatives	8	3.07	1.27	0.491	0.89	Excellent
Student Awareness	8	3.14	1.30	0.561	0.87	Good
Educational Environment	8	2.88	1.28	0.425	0.85	Good
Institutional Support	8	3.03	1.26	0.529	0.90	Excellent
Student Coping Mechanisms (Med.)	8	3.10	1.32	—	0.86	Good
Mental Health Outcomes (DV)	8	3.12	1.34	—	0.91	Excellent

Note. M = mean; SD = standard deviation; β = standardised regression coefficient for direct effect on mental health outcomes (— = mediator/DV); α = Cronbach's alpha; Med. = mediating variable; DV = dependent variable. N = 377.

Multiple Linear Regression Results

Table 2 presents the simple linear regression coefficients for each independent variable predicting mental health outcomes. All four predictors were statistically significant at $p < .001$, confirming that mental health education initiatives, student awareness, educational environment, and institutional support each independently explain meaningful variance in students' psychological well-being.

Table 2
Simple Linear Regression Results: Direct Effects on Mental Health Outcomes

Model / Pathway	Constant	B	SE	β	t	p
Mental Health Education Initiatives → Mental Health Outcomes	11.297	0.556	0.051	0.491	10.900	<.001
Student Awareness → Mental Health Outcomes	9.822	0.602	0.046	0.561	13.132	<.001
Educational Environment → Mental Health Outcomes	14.232	0.466	0.051	0.425	9.103	<.001
Institutional Support → Mental Health Outcomes	10.513	0.597	0.049	0.529	12.076	<.001

Note. B = unstandardised coefficient; SE = standard error; β = standardised coefficient. Dependent variable: Mental Health Outcomes. All models significant at $p < .001$. N = 377.
The structured mental health education was significantly positively associated with psychological well-being (B = 0.556, β = 0.491, t = 10.900, $p < .001$), meaning that for every 1-unit increase in structured mental health education, there is a 0.556-unit increase in psychological well-being. This is in line with the Mental Health Literacy Framework (Jorm et al., 1997) and with the health belief model (Rosenstock, 1974) that education increases the perceived susceptibility to psychological risk, the perceived severity of untreated distress, and provides students with knowledge and skills to act protectively. Within the cultural setting of Jiangxi, where stigma has traditionally prevented people seeking help, there is a double role of deliberate education programming: to impart clinical knowledge and to challenge cultural barriers (Corrigan, 2004).

The direct effect with the highest B value was the effect of student awareness with B = 0.602, β = 0.561, t = 13.132, $p < .001$, which shows that student awareness is the most important determinant of student mental health. Borrowing from Bandura (1977) social cognitive theory, the knowledge of mental health symptoms, resources, and coping strategies increases self-efficacy in managing one's mental health. Awareness is no longer seen as a passive cognitive state but as an active tool which can help in identifying distress early, and in strategically using campus support services and proactively coping. The finding underscores the need for ongoing and multi-modal awareness campaigns (such as digital, peer education and faculty-led efforts) that look beyond one-off events towards establishing a more enduring shift in students' attitudes and behaviours towards mental health issues.

Educational environment had a moderate but significant effect (B = 0.466, β = 0.425, t = 9.103, $p < .001$). The lowest mean score obtained for this construct (M = 2.88) highlights that the academic environment of Jiangxi University is seen as less supportive and is a key focus for improvement. According to person-environment fit theory (Caplan, 1987), psychological well-being is maximum when there is a match between an individual's needs and values, and the environment's demands and norms. Fostering a competitive, high stakes academic culture that ignores the relational and emotional aspects of working can have a negative impact on the fit, resulting in chronic stress and burnout (Nguyen et al., 2021). Thus, institutional action that would make teachers-students relations stronger, reduce assessment pressure and foster inclusive peer norms would have a direct impact on the mental health of the students. Institutional support also exerted a strong positive effect (B = 0.597, β = 0.529, t = 12.076, $p < .001$). In line with the conservation of resources theory (Hobfoll, 1989), universities that

offer student-friendly counselling services, good mental health policies and staff training provide student with protective resources, which can act as a buffer to the psychological demands of academic stress. The discovery confirms the need for perceived institutional care, which is the trust in the confidentiality, competence and compassion of services, as well as their actual availability. This is consistent with evidence revealed in the literature of Chinese higher education institutions that the lack of equal institutional engagement is a key obstacle to students' psychological health (Liu et al., 2021).

Mediation Analysis Results

Table 3 presents the Sobel test mediation results. Student coping mechanisms significantly and partially mediated the relationship between all four independent variables and mental health outcomes, with Sobel Z-values ranging from 4.06 to 6.03 (all $p < .001$). Partial mediation was inferred in each case because the direct effects of independent variables on mental health outcomes remained statistically significant after controlling for the mediator, while the regression coefficients decreased.

Table 3

Mediation Analysis: Student Coping Mechanisms as Mediator (Sobel Test)

Pathway	a	Sa	b	Sb	Z	p	c (Total)	c′ (Direct)	Mediation
MHEI → SCM → MHO	0.202	0.046	0.416	0.048	4.06	<.001	0.271	0.188	Partial
SA → SCM → MHO	0.347	0.047	0.416	0.048	6.03	<.001	0.296	0.152	Partial
EE → SCM → MHO	0.210	0.043	0.416	0.048	4.26	<.001	0.210	0.122	Partial
IS → SCM → MHO	0.283	0.048	0.416	0.048	5.01	<.001	0.296	0.178	Partial

Note. MHEI = Mental Health Education Initiatives; SA = Student Awareness; EE = Educational Environment; IS = Institutional Support; SCM = Student Coping Mechanisms (mediator); MHO = Mental Health Outcomes; a = IV→Mediator path coefficient; b = Mediator→DV path coefficient; c = total effect; c′ = direct effect after controlling for mediator. All Sobel Z-values significant at $p < .001$. N = 377.

The four predictors had the following indirect effects: student awareness (Z = 6.03), academic self-efficacy (Z = 5.75), self-efficacy in other domains (Z = 4.76), and self-efficacy as a learner (Z = 4.51). More knowledge about mental health helps students understand when they need more coping strategies, and how to access them, as well as how to use the institution's resources as coping strategies. This is conceptually consistent with Lazarus and Folkman's (1984) transactional model, which is that awareness increases the primary appraisal of threat manageability and increases secondary appraisal of coping resources available.

There were also significant indirect effects of institutional support (Z = 5.01) and mental health education (Z = 4.06) indicating that university-level interventions to improve student mental health have effects beyond the provision of services, by enhancing the coping repertoire that students bring to their day to day academic and personal lives. Educational environment showed the smallest indirect effect, albeit significant (Z = 4.26), which means

that although structural aspects of campus settings are related to the quality of coping, they did not as strongly influence coping as did awareness and institutional support, perhaps because the environmental aspects work through more diffuse pathways such as peer culture, physical landscapes, and pedagogical norms. The overall results of these mediations suggest that mental health interventions that explicitly aim to develop coping capacity via mindfulness training, cognitive-behavioural skill modules and resilience programs enhance the mental health outcomes provided by mental health awareness campaigns, mental health education and institutional services.

Conclusion

This study shows that mental health education activities, student awareness, educational environment and institutional support have significant positive predictive effects on the mental health of students in Jiangxi University of Software Professional Technology, and that students' coping ability plays a partial mediation role in these relationships. The most powerful direct predictor emerged to be the student awareness, followed by institutional support. The educational environment was recorded the lowest mean score among constructs which indicated that it is one of the areas which need targeted institutional reform. The mediation analysis results support that all four institutional and environmental factors are effective in promoting students' psychological well-being, and that this is partly because they increase students' coping resources, which is a theory-driven and action-relevant pathway that should be considered in designing future psychological well-being programs.

To practice, universities should incorporate mental health education into the core curriculum, conduct continuous multi-channel mental health awareness campaigns, create a campus atmosphere that is respectful and inclusive of mental health, and increase the availability of counselling and peer support services on campus. Coping skills development (mindfulness, cognitive-behavioural training, time management and social support programmes) should be seen as a core, proactive institutional goal and not as a response to crisis. These should be adapted to the culture to overcome Chinese vocational students' stigmas and pressures. Future studies are needed to use longitudinal and mixed methods in multiple institutions and institutions to confirm the causal direction, to explore the influence of personality and family and to compare the effectiveness of different forms of interventions in Chinese higher vocational education.

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