

# Studies support Vietnam's mental health licensure policy and pagoda-based depression treatment

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Bahr Weiss. Credit: Vanderbilt University

Research Professor of Psychology and Human Development Bahr Weiss is helping to lead efforts to develop Vietnam's licensure criteria for

clinical psychologists, and as part of his primary efforts at capacity development, he and his team are adapting, implementing, and evaluating a mindfulness-based program for adults with depression within Buddhist pagodas.

Since 2001, Weiss has spearheaded programs to develop and improve clinical psychological services and research capacity throughout Vietnam and across broader Southeast Asia, with funding from the National Institutes of Health. He has helped build the country's mental [health](#) research, training, and clinical infrastructure, particularly in support of the development and dissemination of evidence-based treatments, [prevention programs](#), and assessment methods. At Vietnam National University, he helped launch Vietnam's first master's and Ph.D. programs in [clinical psychology](#), which also were the country's first research-focused, evidence-based mental health training programs.

That said, psychology remains a relatively new field in Vietnam, where licensure requirements for psychologists have not existed, and where seeking [mental health services](#) is stigmatized—as it is throughout much of the world. Weiss' latest work in the country seeks to address both obstacles.

For the past 10 years, Weiss has worked with colleagues at Vietnam National University and other institutions to advocate for Vietnam to list psychology as an official health-related field and to require a license to practice psychology. In response to these concerns, Vietnam recently passed a law, scheduled to take effect in about five years, that will require psychologists to become licensed. Weiss is centrally involved in developing the country's licensure requirements, consulting with the Vietnamese Ministry of Health on structuring requirements for psychologists and for clinical programs' training and accreditation. As former director of the Ph.D. clinical psychology program at Vanderbilt Peabody College of education and [human development](#), Weiss is

familiar with developing and overseeing mental health licensure programs.

According to Weiss, until Vietnam's new law takes effect, anyone can provide "psychological" mental health services and refer to themselves as a "psychologist." That is why, as the country prepares to transition to a licensure requirement, his team also is assessing the quality of psychotherapy services throughout the country.

"We're investigating the extent to which treatments are evidence-based and implemented following an evidence-based intervention (EBI) structure. We're also investigating providers' credentials, and how patients find providers, whether through internet searches, word of mouth, or seeing a TV show or advertisement. As part of this project, we will interview providers to assess their understanding of EBI factors and psychotherapy. Moving toward licensure has taken some time, but we are very excited at the prospect of improving mental health services in Vietnam," Weiss said.

Even as mental health services improve, they are often stigmatized, leaving many people hesitant to seek treatment. However, in preliminary studies, Weiss and his colleagues have found that people are much more comfortable receiving treatment for depression and other mental health problems through non-traditional mental health sites, such as schools or pagoda, as compared to traditional settings, such as hospitals or clinics.

"One interesting issue is that mindfulness-based programs, which are strongly EBI, originated from Buddhist meditation, but have been intentionally developed as non-religious. The goal of mindfulness interventions is to focus one's attention on the [present moment](#)—how your body feels, what thoughts are going through your head—but without judging or evaluating these experiences, seeing them simply as 'experiences.'" This helps reduce automatic acceptance of negative

thoughts and feelings such as those linked to rumination, one underlying causal factor of depression," Weiss said.

He and his colleagues are piloting the mindfulness-based program with Buddhist monks and [community leaders](#) so that they can help treat adults with depression. This approach—commonly known as task-shifting—trains non-professionals to provide a limited, targeted mental health program, which research has shown to be effective for extending mental health services. Importantly, the [program](#) should be able to support people with depression who might otherwise not seek mental health services.

Provided by Vanderbilt University

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