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Ха В.Х., Фам Т.К.Д.

Ха Ван Хоанг, доктор социологических наук, Университет Дананга, Университет науки и образования, Вьетнам, 059000, Дананг, улица Тон Дук Тханг. E-mail: hvhoang@ued.udn.vn.
Фам Тхи Киеу Дуен, магистр социальной работы, Университет Дананга, Университет науки и образования, Вьетнам, 059000, Дананг, улица Тон Дук Тханг. E-mail: ptkduyeng@ued.udn.vn.

Качество услуг социальной работы во вьетнамских начальных школах с точки зрения географических различий

Аннотация. В данном исследовании оценивается качество услуг школьной социальной работы в начальных школах в регионе Южного Центрального побережья Вьетнама с акцентом на географические различия. Количественные данные были собраны у 1072 участников, включая 594 учащихся, 238 учителей и 240 родителей из провинций Дананг, Куангнгай и Фуьен. Результаты указывают на общий высокий уровень удовлетворенности услугами, при этом медицинская поддержка ($M=4,02$) и защита интересов учащихся ($M=4,01$) получили наивысший рейтинг, в то время как психологическое консультирование получило самый низкий балл ($M=3,75$). Анализы Т-теста и ANOVA выявили статистически значимые различия ($p<0,05$) между городскими и сельскими районами, а также между тремя провинциями с точки зрения качества услуг. В исследовании также предлагаются рекомендации, направленные на улучшение качества услуг и обеспечение равного доступа к услугам школьной социальной работы для всех учащихся.

Ключевые слова: социальная работа, услуги социальной работы, учащийся, качество, удовлетворенность, начальная школа, Вьетнам.

Ha V.H., Pham T.K.D.

Ha Van Hoang, Doctor of Sociology, The University of Danang, University of Science and Education, Vietnam, 059000, Danang, Ton Duc Thang Street. E-mail: hvhoang@ued.udn.vn.
Pham Thi Kieu Duyen, Master of Social Work, The University of Danang, University of Science and Education, Vietnam, 059000, Danang, Ton Duc Thang Street E-mail: ptkduyeng@ued.udn.vn.

Quality of Social Work Services in Vietnamese Primary Schools from the Perspective of Geographical Differences

Abstract. This study evaluates the quality of school social work services at primary schools in the South Central Coastal region of Vietnam, with a focus on geographical disparities. Quantitative data were collected from 1072 participants, including 594 students, 238 teachers, and 240 parents across Da Nang, Quang Ngai, and Phu Yen provinces. The findings indicate an overall high level of satisfaction with the services, with medical support ($M=4,02$) and student advocacy ($M=4,01$) rated the highest, while psychological counseling received the lowest score ($M=3,75$). T-Test and ANOVA analyses revealed statistically significant differences ($p<0,05$) between ur-

ban and rural areas as well as among the three provinces in terms of service quality. The study also proposes recommendations aimed at improving service quality and ensuring equitable access to school social work services for all students.

Key words: social work, social work services, student, quality, satisfaction, elementary school, Vietnam.

Introduction.

School social work is one of the key tools for improving school policies, identifying various strategies and providing early intervention in different areas to ensure that every student has equal opportunities for progress in both academic and social contexts [3]. School social work focuses on students within the school environment and its activities aim to create conditions that allow the educational process to achieve the best results by addressing difficulties, barriers or inequalities [6, p. 285-292]. Therefore, various departments within the school play a significant role in implementing intervention plans for all students in a collaborative approach (with experts and other services both inside and outside the school). This process includes assessing needs and designing, implementing, coordinating and evaluating intervention activities (such as discipline, conflict resolution, bullying, racism and xenophobia, mental health, etc.) [2, p. 82].

However, there exists a gap between the practice choices of school social workers and research on school-based prevention and intervention, as well as the modern educational models developed to guide the organization of school social work services [8]. Furthermore, school social workers encounter certain challenges when implementing school social work activities. The majority of their time is spent on counseling, paperwork, case management, and consultation. Major barriers to their work include a lack of time, insufficient resources and a lack of recognition of the role of social work [4].

On the other hand, factors such as economic status, geographical location and family conditions influence the ability to access these services. Students from low-income families or rural areas often face

greater difficulties in accessing school social work services [5]. There is a disparity in access to school social work services between urban and rural areas in many countries, primarily due to inequalities in resources, professional staff and community awareness. Studies show that schools in urban areas in the United States have higher ratios of dedicated social workers, along with the ability to connect students to medical, psychological, and legal services, whereas in rural areas, these services are often either lacking or severely limited. Additionally, cultural barriers and geographical distance further restrict rural students' ability to access services [1]. This is consistent with the findings of Nguyễn Thị Bích Thủy (2018), who analyzed the state of school social work in Vietnam and highlighted the disparity in service access between urban and rural areas. According to the author, in major cities such as Hanoi and Ho Chi Minh City, school social work has been initially implemented with support from school counseling departments or pilot projects. In contrast, in rural and mountainous areas, these services are either not implemented or exist only in a superficial form due to a lack of specialized personnel, insufficient awareness from schools and parents and a lack of financial investment [7].

Based on these theoretical and practical foundations, this study was conducted to evaluate the quality of school social work services at primary schools in the South Central Coastal region of Vietnam. At the same time, the study also analyzes the differences in service quality assessments across geographical factors, in order to propose practical solutions to enhance access to school social work services for students in different living areas.

Methodology.

The school social work services in this study are measured across five types of services: Case management services; Counseling and psychological consultation services for students; Medical support and healthcare services for students; Resource connection

and mobilization services for students; Advocacy, legal defense, and protection of students' rights. The study evaluates the level of satisfaction with the quality of these services using a 5-point Likert scale, with the following average score ranges as the standard:

Table 1. Average scale convention

Conventional score	Average score	Satisfaction level
1	1,00-1,80	Completely dissatisfied
2	1,81-2,60	Dissatisfied
3	2,61-3,40	Slightly satisfied
4	3,41-4,20	Satisfied
5	4,21-5,00	Completely satisfied

A quantitative study was conducted to measure the quality of school social work services in primary schools through a survey method using questionnaires. The survey involved 600 students from grade 4 and grade 5, 240 teachers and 240 parents of students from primary schools in the South Central Coastal region of Vietnam, representing three provinces: Da Nang City,

Quang Ngai Province and Phu Yen Province. The results obtained from the survey included 1072 valid responses, comprising 594 student questionnaires, 238 teacher questionnaires, and 240 parent questionnaires, which were used for data analysis. The collected data were entered, cleaned and processed using SPSS 27 software.

Table 2. Characteristics of the survey sample

Characteristics	Classification	Students (n=594)		Teachers (n=238)		Parents (n=240)	
		N	%	N	%	N	%
Sex	Male	290	48,8	71	29,8	78	32,5
	Female	303	51,0	167	70,2	161	67,1
	Other	1	0,2	0	0	1	0,4
Living location	Rural	286	48,1	112	47,1	121	50,4
	Urba	308	51,9	126	52,9	119	49,6
Ethnic composition	Kinh	586	98,7	234	98,3	235	97,9
	Ethnic Minorities	8	1,3	4	1,7	5	2,1
Place of residence	Da Nang	223	37,5	89	37,4	80	33,3
	Quang Ngai	136	22,9	74	31,1	80	33,3
	Phu Yen	235	39,6	75	31,5	80	33,4
Age	Under 25	-	-	18	7,6	2	0,8
	25-35 years old	-	-	77	32,4	54	22,5
	35-45 years old	-	-	54	22,7	123	51,2
	45-55 years old	-	-	89	37,4	45	18,8
	Over 55 years old	-	-	18	7,6	16	6,7

Table 2 shows that, in terms of gender, the distribution of students is relatively balanced between males (48,8%) and females (51,0 %), while the female proportion is notably higher in the teacher

and parent groups (70,2 % and 67,1 % respectively). The residence locations of the survey participants are nearly evenly distributed between rural and urban areas. The majority of the sample belongs to the

Kinh ethnic group (over 97 % across all three groups). Geographically, the participants are primarily from three provinces: Da Nang, Quang Ngai and Phu Yen, with relatively equal representation. Regarding age, teachers are predominantly in the 25-35 and 45-55 age groups, while most parents are in the 35-45 age range (51,2 %). Thus, the study sample is sufficiently large and relatively evenly distributed across the participant groups

(students, teachers, and parents), ensuring reliability when analyzing and generalizing the results within the survey population.

Results and Discussion

In order to assess the current implementation of school social work services in primary schools, the study surveyed the quality levels of five main types of services. The results are presented in Table 3.

Table 3. Results of quality assessment of social work services in primary schools

Types of services	M	SD	Level
Case management services	3,96	0,91	4
Counseling and psychological counseling services for students	3,75	0,96	5
Health and medical support services for students	4,02	0,88	1
Connection and resource mobilization services for students	3,90	0,95	3
Advocacy, advocacy, and protection of students' rights	4,01	0,87	2

The research findings from Table 3 indicate that school social work services in primary schools are generally rated at a relatively high level, with all average scores ranging from 3,75 to 4,0. This reflects that the social work service system has initially met the needs of students. Medical support and healthcare services ($M = 4,02$) and advocacy services ensuring students' rights ($M = 4,01$) received the highest ratings, suggesting that schools and social work staff have prioritized addressing students' fundamental needs and essential rights. This aligns with the context of primary schools, where physical health and children's rights are top priorities. Particularly, in the post-COVID-19 pandemic context, ensuring the physical and mental health of students has become a significant concern for primary schools, which partially explains the positive evaluations these services received. However, counseling and psychological consultation services for students received the lowest rating ($M = 3,75$; $SD = 0,96$), despite being considered a cornerstone in supporting students' holistic development. Not only does this service have the lowest average score, but it also has the highest standard deviation ($SD = 0,96$), indicating

inconsistency in the quality of implementation and varying levels of satisfaction among different groups or schools. This may stem from various factors, such as a shortage of professional school psychologists, students' reluctance to access the service, or a lack of awareness among parents and teachers regarding the role of mental health care in schools. This is an area that requires more attention and investment, particularly in the current context where students' mental health has become an increasingly urgent issue. In addition, case management services ($M = 3,96$) and resource connection and mobilization services ($M = 3,90$) also received relatively good ratings, indicating that the capacity for personalized support and linking external resources has been initially implemented. However, there are still existing issues, and therefore, it is necessary to improve the quality and systematization of these services.

Thus, based on the research results, it can be observed that services related to basic needs (health, rights) received higher satisfaction ratings regarding quality than services requiring specialized expertise (case management, psychological counseling).

This indicates that school social work in primary schools currently meets immediate and visible needs well, while more complex and nuanced needs, such as psychological support and personalized assistance, still face certain limitations.

School social work services play a crucial role in supporting the holistic development of students. However, the quality of these services may be influenced by local factors such as resources, local education policies and socio-economic

characteristics. Therefore, analyzing the differences between residential areas is essential to identify shortcomings and provide directions for improvement. The study analyzes the differences in the quality assessment of social work services across three residential areas: Da Nang, Quang Ngai, and Phu Yen. One-way ANOVA analysis of variance is used to determine the statistically significant differences between the groups (table 4).

Table 4. Differences in assessment of social work service quality between residential areas

Types of services	Da Nang (n=392)		Quang Ngai (n=290)		Phu Yen (n=390)		F(2, 1069)	p
	M	SD	M	SD	M	SD		
Case management services	4,16	0,66	4,11	0,69	3,63	1,17	41,13	0,001
Counseling and psychological counseling services for students	3,84	0,91	3,83	0,78	3,61	1,09	7,27	0,001
Health and medical support services for students	4,27	0,70	4,11	0,69	3,70	1,06	46,66	0,001
Connection and resource mobilization services for students	4,07	0,89	3,99	0,73	3,67	1,09	19,66	0,001
Advocacy, advocacy, and protection of students' rights	4,18	0,70	4,15	0,67	3,77	1,06	27,9	0,001

* $p < 0,05$

The research findings from Table 4 indicate a significant difference in the level of satisfaction with service quality between the residential areas, reflecting the inconsistency in the organization and provision of social work services at primary schools. Specifically, the differences across each service type are quite distinct. For case management services, the analysis reveals a substantial difference among the three study areas, with $F(2, 1069) = 41,13$; $p = 0,001$. Da Nang city ($M = 4,16$) and Quang Ngai province ($M = 4,11$) rated this service significantly higher than Phu Yen province ($M = 3,63$). This suggests that in Phu Yen, case management services may still face limitations in terms of professional staff or the process of providing personalized support for students has not been

implemented systematically. At the same time, psychological counseling services also showed a significant difference ($F(2,1069) = 7,27$; $p = 0,001$) between the surveyed areas. Although the level of difference is not as large as in other services, this service in Da Nang city ($M = 3,84$) and Quang Ngai province ($M = 3,83$) was still rated higher than in Phu Yen province ($M = 3,61$). This suggests that psychological support services for students in Phu Yen need more attention and investment to meet the growing demand for students' mental health. In particular, the medical support and health care services for students received the highest level of discrepancy in ratings ($F(2, 1069) = 46,66$; $p = 0,001$). Specifically, Da Nang city ($M = 4,27$) received the highest rating, followed by Quang Ngai province ($M = 4,11$), while

Phu Yen province ($M = 3,70$) received a significantly lower score. These results reflect discrepancies in infrastructure, medical equipment, or the health care staff at schools in Phu Yen, which continue to face certain challenges. For the service of resource connection and mobilization, a statistically significant difference was observed between the surveyed areas ($F(2,1069) = 19,66$; $p = 0,001$). Specifically, Da Nang city ($M = 4,07$) received the highest rating, while Phu Yen province ($M = 3,67$) was rated the lowest. This reflects the disparity in the ability to connect and mobilize community-based resources to support students across the regions. The advocacy, defense, and ensuring of students' rights services also showed a significant difference ($F(2, 1069) = 27,90$; $p = 0,001$). Respondents from Da Nang city ($M = 4,18$) and Quang Ngai province ($M = 4,15$) rated the service higher compared to respondents from Phu Yen province ($M = 3,77$). This indicates that the advocacy, defense and rights protection services for students in

primary schools in Phu Yen face certain challenges compared to the other two regions.

Thus, respondents from Da Nang and Quang Ngai tended to rate all types of school social work services higher than those from Phu Yen. This may stem from differences in socio-economic conditions, educational support policies, human resource availability, and the level of investment in social work services in each locality. Notably, the greatest disparity was observed in the medical support and case management services, indicating that these services require a high level of specialized support and adequate material resources, which are more likely to be distinctly divided according to local conditions.

Not only does a difference exist in the evaluation of the quality of school social work services across residential areas, but the results of the T-Test also indicate a significant difference in service quality between rural and urban areas (table 5).

Table 5. Differences in evaluating the quality of social work services with living area

Types of services	Rural (n=473)		Urban (n=599)		t(1070)	p
	M	SD	M	SD		
Case management services	3,86	1,03	4,03	0,80	3,00	0,003
Counseling and psychological counseling services for students	3,59	1,04	3,88	0,87	4,90	0,001
Health and medical support services for students	3,92	0,95	4,10	0,81	3,20	0,001
Connection and resource mobilization services for students	3,82	1,02	3,97	0,88	2,58	0,010
Advocacy, advocacy, and protection of students' rights	3,93	0,91	4,10	0,82	3,10	0,002

* $p < 0,05$

The research results indicate that all types of social work services exhibit statistically significant differences between urban and rural areas. The T-Test results for case management services show a significant difference between the two residential areas ($t(1070) = 3,00$, $p = 0,003$). The evaluation of case management services in urban areas ($M = 4,03$, $SD = 0,80$) is

higher than in rural areas ($M = 3,86$, $SD = 1,03$). This difference can be explained by factors such as the more developed infrastructure systems and social work service centers in urban areas, as well as easier access to support resources from government and non-government organizations. For psychological counseling and consultation services for students, there

is also a statistically significant difference ($t(1070) = 4,90, p = 0,001$) in the satisfaction levels between the two residential areas of the surveyed subjects. Specifically, respondents living in urban areas ($M = 3,88, SD = 0,87$) rated the service higher than those in rural areas ($M = 3,59, SD = 1,04$). This can be explained by the superior development of psychological support programs in primary schools in urban areas, where there are more experts and facilities offering psychological services for students, whereas in rural areas, these services are still limited. Meanwhile, for medical support and healthcare services for students, the difference between the two areas is also statistically significant ($t(1070) = 3,20, p = 0,001$), with higher ratings for this service in urban areas ($M = 4,10, SD = 0,81$) compared to rural areas ($M = 3,92, SD = 0,95$). This reflects the development of school healthcare in urban areas, with more advanced facilities and equipment, as well as easier access to high-quality medical services for students in these areas. The analysis results indicate a significant difference in the evaluation of resource connection and mobilization services ($t(1070) = 2,58, p = 0,010$). Specifically, survey participants living in urban areas ($M = 3,97, SD = 0,88$) expressed higher satisfaction with the quality of this service compared to those in rural areas ($M = 3,82, SD = 1,02$). This difference can be explained by the fact that urban areas have a broader social network and greater capacity to mobilize resources from community organizations, NGOs and international projects. In contrast, rural areas face a lack of resources and limited opportunities for connection. For the advocacy and protection of students' rights service, the T-Test results also indicate a significant difference ($t(1070) = 3,10, p = 0,002$). The service was rated lower in rural areas ($M = 3,93, SD = 0,91$) compared to urban areas ($M = 4,10, SD = 0,82$). This difference can be explained by several factors. In urban areas, schools are better equipped with more structured support systems, both in terms of infrastructure and the capacity of staff

implementing this service. Additionally, urban primary schools benefit from a strong network of social organizations, whereas in rural areas, limited resources and lower community awareness reduce the effectiveness of advocacy and students' rights protection services.

Conclusion.

The study on the quality of social work services in primary schools in the Central Coastal region of Vietnam has provided important findings regarding the level of satisfaction as well as the disparities in service implementation between different living locations and residential areas. The results indicate that, overall, the quality of social work services in primary schools is rated with a high level of satisfaction, particularly for services that address the essential needs of students, such as medical support, healthcare and advocacy to ensure students' rights. However, there are still significant differences in the quality of social work services between rural and urban areas, as well as between the surveyed locations (Da Nang, Quang Ngai, Phu Yen). Primary schools in urban areas and large cities tend to provide higher-quality social work services compared to schools in rural areas, reflecting disparities in resources, awareness and the capacity to organize services.

These findings suggest that while school social work has made some initial achievements in supporting primary school students, there are still certain gaps that need to be bridged, particularly between different geographical areas and service types. The inequality in access to quality services between rural and urban students, as well as between regions, highlights the urgent need for policy planning and comprehensive resource investment to enhance the effectiveness of social work in primary schools in Vietnam. Therefore, to improve the quality of social work services in primary schools in general and reduce the disparities in access to these services among students, comprehensive measures are needed, such as:

– Make stronger investments in resources for primary schools, particularly in rural areas and provinces facing many challenges to improve the quality and standardize school social work services.

– Develop a specialized social worker in school through in-depth training programs skill-building workshops and enhanced understanding of children's rights for teachers and school social workers.

– Promote school psychological counseling activities by establishing professional counseling centers or units

within schools to meet the growing psychological support needs of students.

– Strengthen connections with social organizations and community resources to mobilize external support in providing student protection and care services.

– Establish a monitoring and evaluation mechanism to regularly assess the quality of school social work services, while encouraging feedback from students, teachers, and parents to promptly adjust and improve service delivery effectiveness.

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