Construction and Practice Exploration of the "Four-Line Mental Health Education" Model in Secondary Vocational Schools

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Abstract: Against the macro background of China's march towards high-quality development, mental health education for secondary vocational students is facing new challenges and opportunities. Based on the new ecology of collaborative education involving families, schools, and society, this study addresses the current problems in secondary vocational mental health education, such as static early warning mechanisms, insufficient peer support systems, and single-form activities, and proposes and systematically constructs the "Four-Line Mental Health Education" model. This model takes strengthening the early warning and intervention network as the foundation, building a peer support platform as the path, constructing a mental health curriculum system as the support, and creating characteristic practical activities as the strategy. The four lines work in coordination, aiming to provide a systematic, dynamic, and interconnected educational model for mental health education in secondary vocational schools and shape students' positive psychological qualities and sound personalities.

Keywords: Four-Line Mental Health Education; Secondary vocational schools; Mental health education

1. Introduction

With the transformation and upgrading of China's social economy, the demand for high-quality technical and skilled talents is increasingly urgent. As an important cornerstone of the modern vocational education system, the high-quality development of secondary vocational education has been endowed with new connotations of the times. The mental health status of secondary vocational students is not only related to their personal growth and career development but also directly affects the overall quality of the future labor force and social harmony and stability.

At present, secondary vocational mental health education still faces several bottlenecks, mainly manifested in: in terms of psychological early warning and intervention, most existing research and practices focus on single-line and static descriptions, monitoring content concentrates on current situation and cause exploration,

and intervention mechanisms tend to be theoretical discussions, lacking a dynamic and closed-loop operation system, which reduces the predictive role of psychological census data in crisis prevention and intervention [1]; in terms of peer support mechanisms, although their effectiveness has been confirmed [2], a sound and promotable systematic operation paradigm has not yet been formed; in terms of mental health courses and practical activities, the content and forms are relatively single, and most are student-centered, lacking effective empowerment for teachers and parents, failing to fully reflect the concept of collaborative education. In addition, there are various existing mental health education models in research, such as the full-participation model [3], the "one-two-three" model [4], the "trinity" model [5], the "one center, two wings, and five collaborations" model [6], and the "five-linkage and one-center" system [7], etc. However, most of these projects are parallel, and their operation lacks overall connectivity, making it difficult to form systematic synergy. Therefore, it is very necessary to integrate resources from families, schools, society, and other parties to form educational synergy and build an all-round, multi-level, and three-dimensional educational model.

2. Theoretical basis and definition of core concepts of the "Four-Line Mental Health Education" model

2.1. Theoretical basis

2.1.1. Positive psychology

This study takes positive psychology as the core theory, aiming to move beyond "problem-oriented" to "strength-oriented." Through constructing curriculum and activity systems, it systematically shapes students' positive psychological qualities such as optimism, resilience, and gratitude, and promotes the formation of their sound personalities [8].

2.1.2. Embodied cognition theory

Psychological growth is not only a mental activity but also needs to be realized through specific practical experiences [9]. The strategy of "creating characteristic practical activities" in this study is based on this theory. Through various embodied and contextualized activities, students are allowed to "understand through experience" and internalize psychological knowledge into psychological abilities.

2.1.3. Ecological systems theory

This study considers students within the microsystem and mesosystem composed of schools, families, and society (hospitals). In particular, the design of the early warning and intervention network clearly reflects the idea of tripartite linkage between schools, families, and hospitals, aiming to build a stable and supportive external growth environment for students [10].

2.2. Definition of core concepts

2.2.1. Mental health education model

This study holds that a mental health education model is a relatively stable structural framework, procedure, and method of educational activities adopted to achieve specific educational goals under the guidance of relevant mental health education theories. It is not a simple accumulation of scattered activities but an educational system with internal logic, clear goals, stable structure, and clear procedures.

2.2.2. "Four-Line Mental Health Education" model

The "four lines" in this study refer to strengthening the early warning and intervention network, building a peer support platform, constructing a mental health curriculum system, and creating characteristic practical activities. These four lines do not exist in isolation but form an interdependent and collaborative organic whole.

3. Systematic construction and practice of the "Four-Line Mental Health Education" model

3.1. Construction of the "Four-Line Mental Health Education" service model

The construction of the "Four-Line Mental Health Education" model follows the logical progressive relationship of "foundation-path-support-strategy", forming a closed-loop system with complete structure and complementary functions, which jointly play the roles of prevention, development, support, and intervention. Its overall structure is shown in **Figure 1** below.
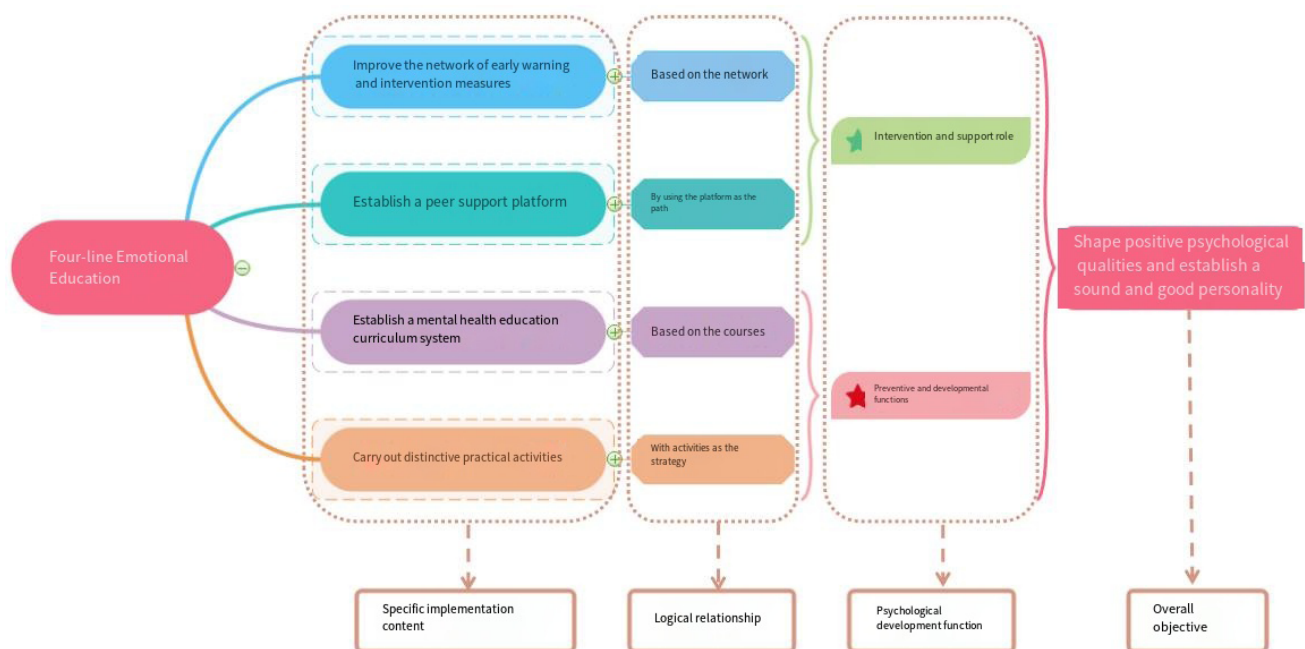

Figure 1. Structure diagram of the "Four-Line Mental Health Education" system.

In this model, the network serves as the foundation, providing a safety bottom line and data support for the entire mental health education work; the platform serves as the path, activating the self-help and mutual assistance energy of the student group; the curriculum serves as the support, providing systematic and scientific knowledge and skill guidance; the activities serve as the strategy, providing experiential learning to nourish the mind. The four lines work together to promote the achievement of the overall goal.

3.2. Practice of the "Four-Line Mental Health Education" service model

3.2.1. First line: Strengthen the early warning and intervention network

The early warning and intervention network is the cornerstone of the entire model. Its core goal is to achieve dynamic monitoring of students' mental status, early identification of crises, and timely intervention, constructing a closed-loop work system of "screening – assessment – intervention - tracking."

The core of this system lies in the "two-way monitoring" and "school-family-hospital linkage" early warning and intervention model led by the school. It specifically includes three links:

(1) Precise psychological census: Conduct regular psychological censuses of students every year, establish a three-level psychological file of "individual-class-grade," conduct early warning classification screening through data analysis, and realize the transformation from "static description" to "dynamic monitoring."

(2) Hierarchical intervention mechanism: Divide early warning levels and activate corresponding intervention plans. Early warning levels can be divided into: Level I early warning, Level II early warning, Level III early warning, and Level IV early warning. For general early warnings, universal interventions such as group counseling and thematic education are adopted; for high-risk early warnings (including Level I, II, and III early warnings), a refined intervention chain with systematic collaboration, such as school-family collaborative intervention, professional medical diagnosis, and individual counseling and intervention, is activated.

(3) Professional consulting services: Professional psychologists provide continuous one-on-one psychological and behavioral counseling and intervention for students in need to ensure the professionalism and effectiveness of intervention.

3.2.2. Second line: Build a peer support platform

Peer support is an important bridge connecting professional intervention and daily life observation, and an effective path to "decentralize" mental health education and achieve wide coverage [11]. This model is committed to building an online-offline integrated peer support platform.

(1) Online platform: Relying on mutual assistance mini-programs or APPs, provide functions such as "popular science knowledge," "psychological assessment," and "consultation appointment," breaking the constraints of time and space, providing students with a convenient and private entry for psychological support, and playing the role of independent mental health maintenance.

(2) Offline system: Take psychological committee members and dormitory supervisors as the main body of offline peer support, carry out training to empower backbone students to cultivate their support and mutual assistance capabilities, guide dormitory supervisors and psychological committee members to conduct daily observations and regular summary reports, forming a closed-loop of peer support of "discovery-feedback-support". Studies have shown that the psychological assistance paradigm of peer support is in line with the psychological development characteristics of secondary vocational students. Nanning No.3 Vocational School has greatly improved the psychological quality of secondary vocational students by improving the management mechanism of psychological peer associations [12], and Shanghai Commercial School has helped secondary vocational students establish self-confidence, learn communication, and develop sound personalities through a series of peer support activities [13], laying a solid practical foundation for this study.

(3) Student autonomous management: Encourage students to participate as student assistants in psychological counseling rooms and mental health volunteers, independently plan and carry out various rich and colorful experiential activities, enhance mutual assistance and support among students, achieve self-growth in serving others, and cultivate psychological energy for self-service and self-growth.

3.2.3. Third line: Construct a mental health curriculum system

Curriculum is the fundamental guarantee for the scientization and systematization of mental health education.

Based on the concept of collaborative education, this model constructs a hierarchical and classified curriculum matrix for three groups: students, teachers, and parents [14].

(1) Student development curriculum: Establish a three-dimensional system of "compulsory courses + elective courses + grade-specific characteristic courses." Compulsory courses (such as Mental Health and Career Development) ensure basic coverage; elective courses (such as Interesting Psychological Potential Development, Sunshine Psychology, Cognitive and Behavioral Ability Improvement) meet personalized needs; grade-specific characteristic courses (such as freshman adaptation, adolescent growth and development, interpersonal communication, and pre-college entrance examination stress reduction) accurately align with the characteristics of students at different development stages.

(2) Teacher mental health education curriculum: Empower all teachers, construct a curriculum system covering modules such as "identification and intervention of psychological crisis cases," "practice of positive mental health education methods," and "discussion on common psychological and behavioral problems of students," improve teachers' practical abilities, and make them an important force in mental health education.

(3) Family-school series courses: Promote through dual tracks of family mental health guidance and family-school collaborative education courses, provide parents with guidance on "modern family education concepts," "parent-child communication skills," and "identification and response to children's psychological problems," improve family education capabilities, and build a family-school psychological education community. Chen Li's research shows that family-school collaborative education is effective in intervening in the psychological problems of secondary vocational students [15], which provides strong theoretical support for this study.

3.2.4. Fourth line: Create characteristic practical activities

Practical activities are the "catalyst" for transforming theoretical knowledge into internal qualities and an important carrier for creating a positive campus psychological culture. The innovation, experience, and branding of activities are particularly important.

(1) Large-scale psychological activities: Taking the Student Mental Health Publicity and Education Month as an opportunity, hold large-scale psychological theme garden parties, set up a series of interesting projects, help students release pressure and enhance team collaboration through gamified experiences, and make it a brand activity of campus psychological culture.

(2) Psychological comic creation: Regularly carry out psychological four-panel comic competitions every year, encourage students to express their inner world through artistic forms, exhibit excellent works, and build a mental health education ecological environment of positive expression and sharing.

(3) Student-specific psychological salons: Organize psychological salon activities that meet students' needs according to the characteristics of different grades, focusing on topics such as emotion management, interpersonal relationships, life education, career development, and positive learning, guiding students to think in depth through case analysis and activity experience, and improving their independent psychological development capabilities.

(4) Immersive psychological drama: Psychological drama is a unique, action-oriented group psychological healing method and a professional healing process. Through immersive experience, students can deepen and reshape cognition, stimulate empathy, acquire skills for self-regulation and improvement, and vent and heal themselves.

4. Practical value and future outlook of the "Four-Line Mental Health Education" model

The construction and practice of the "Four-Line Mental Health Education" model is not only the optimization and integration of existing secondary vocational mental health education models but also an in-depth exploration at the conceptual and operational levels.

4.1. Practical value

4.1.1. Systematicness and connectivity

The greatest value of this model lies in breaking the barrier of "parallel operation" in previous mental health education work, organically connecting the four lines of early warning, mutual assistance, curriculum, and activities, forming an interconnected system of "foundation-path-support-strategy," and realizing a systematic effect of $1 + 1 + 1 + 1 > 4$.

4.1.2. Dynamicness and closed-loop nature

The design of the early warning and intervention network shifts from static census to dynamic monitoring, establishing a closed-loop of "screening-assessment-intervention-tracking," which greatly improves the timeliness and accuracy of psychological crisis prevention and intervention.

4.1.3. Collaboration and comprehensiveness

This model incorporates students, teachers, parents, and society into the mental health education system, and integrates social professional resources through the school-family-hospital linkage mechanism, reflecting the advanced concept of collaborative education and building a more comprehensive psychological support network.

4.1.4. Developmentalness and preventiveness

This study not only focuses on "intervention and support" for problems but also focuses on the "prevention and development" of positive qualities, promoting students' potential development and personality improvement.

4.2. Future outlook

The in-depth research on the theoretical framework of the "Four-Line Mental Health Education" model can be carried out from the following two aspects in the future.

4.2.1. Combination of quantitative and qualitative research

Future research can design more rigorous experimental schemes to quantitatively evaluate the specific impact of this model on students' psychological qualities (such as psychological resilience, self-efficacy, and sense of happiness). At the same time, combined with qualitative methods such as in-depth interviews and case studies, it deeply explores the psychological mechanism of the model's role.

4.2.2. Digital and intelligent empowerment

Explore how to use big data, artificial intelligence, and other technologies to optimize dynamic psychological monitoring and improve the accuracy of early warning; develop more intelligent peer support platforms and online courses to achieve personalized push and precise services.

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