

SBC Case Study

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1. Introduction

The World Health Organization (2022) estimates that the COVID-19 pandemic led to a 25% rise in the prevalence of anxiety and depression in 2022 globally. According to these listed mental illnesses, Mentis was established for the urgent need for mental balance services but did not include classifications of other mental medical examination and treatment services. The Mentis project aims to develop an app that builds a digital space that works with Metaverse technology to establish community centers or support groups through stress-relieving activities and mood monitoring. It also enables users to create an online diary to record their feelings, thoughts, and daily activities, which can help them quickly to identify and treat any psychological problems. In order to relieve tension and foster pleasant feelings, the app also offers entertainment elements, including conversation with like-minded others, participating in online activities, and exploring the virtual environment.

A group or organization may employ a range of research methodologies, such as qualitative, quantitative, or mixed methodologies when they want to collect and assess data. While qualitative research focuses on words and their meanings, quantitative research is more interested in data and statistics. We use qualitative methods because we want to verify the habit of customers about sharing their emotions and whether they use journals as a way to express their feelings. The quantitative study was chosen to verify the level of customer interest in the Mentis app and how attractive the app's design is to them. This strategy enables us to quickly comprehend the demands of our clients, resulting in accurate research results based on analytical data. Second, because the study investigates a large number of samples, quantitative analysis is well suited to the scope and objective of the research. Therefore, we design an online survey to collect data from the young generation of Vietnam.

2. Social Issues and Root Causes

2.1 Primary Data and Secondary Data

According to Gratton and Jones (2010), the primary research definition refers to studies that gather unique data relevant to a particular study endeavor. When conducting primary research, the researcher collects data directly from sources rather than relying on information already available in databases and other publications. Primary research differs from secondary research in terms of its level of originality. When conducting secondary research, as opposed to primary research, the researcher summarizes or synthesizes data and literature that has already been collected, edited, and published by others. Researchers use and examine data from primary research sources while conducting secondary research.

2.2 Qualitative research

In qualitative research, non-numerical data (such as text, video, or audio) are gathered and analyzed to comprehend concepts, beliefs, or experiences better. It may be applied to comprehensively understand a situation or develop fresh research concepts (Bhandari, 2020). Based on the information presented above, Mentis is used in practice to identify issues and root causes. For secondary data, this study employs qualitative and quantitative methodologies to assess whether consumers discuss their emotions with others and whether they write about their experiences in diaries. Quantitative research was used to determine the amount of client interest in the Mentis app and its design's appeal to them. An online survey was distributed to the young Vietnamese generation to finish the study. We did quantitative research with more than 400 individuals using the abovementioned methodology, and the findings were quite encouraging. The

MENTIS application's features have sparked much curiosity; participants generally felt "curious" and "trusted" about it. It also received high marks on the idea board. As a result, many of them are prepared to pay for the upgraded version. Additionally, we interviewed 23 customers using the research methodology. The findings indicate that both groups share the experience of feeling stressed out and occasionally struggling to strike a balance between their personal and professional lives. As a result, it results in the inability to express feelings.

2.3 The qualitative process

We establish our goals for the interview in order to accomplish outcomes through qualitative research. Target clients are mostly Ho Chi Minh City students between the ages of 16 and 26. After compiling the responses, we analyze by encrypting the customer's name for information privacy and then group the data into three primary categories to facilitate analysis. Due to the possibility that they may have very diverse purchasing habits, our respondents are divided into two groups: those familiar with using a diary (High Awareness: HA) and those less bothered by the concept (Low Awareness: LA).

| Category | Interviewee Profile No. | Code | Gender | Age | Profession |
|------------------------|-------------------------|------|--------|-----|------------|
| Low concept awareness | 1 | LA1 | Female | 19 | Student |
| | 2 | LA2 | Female | 19 | Student |
| | 4 | LA3 | Female | 33 | Marketer |
| | 5 | LA4 | Male | 19 | Student |
| | 6 | LA5 | Male | 17 | Student |
| | 7 | LA6 | Female | 32 | Worker |
| | 9 | LA7 | Male | 24 | Unemployed |
| | 11 | LA8 | Male | 21 | Student |
| | 17 | LA9 | Female | 23 | Student |
| | 18 | LA10 | Male | 21 | Student |
| | 19 | LA11 | Male | 20 | Student |
| | 22 | LA12 | Male | 22 | Student |
| | 20 | LA13 | Female | 19 | Student |
| High concept awareness | 3 | HA1 | Male | 33 | Marketer |
| | 8 | HA2 | Female | 23 | Student |
| | 10 | HA3 | Male | 18 | Student |
| | 12 | HA4 | Female | 23 | Student |
| | 13 | HA5 | Female | 22 | Student |
| | 14 | HA6 | Female | 20 | Student |
| | 15 | HA7 | Female | 23 | Student |
| | 16 | HA8 | Female | 22 | Student |
| | 21 | HA9 | Female | 19 | Student |
| | 23 | HA10 | Female | 22 | Student |

In addition, we developed three key themes from the interview scripts that we used as the foundation for our classification analysis.

Theme 1: Perception of research subjects in the emotional release?

| Theme 1: Perception of research subjects in the emotional release? | | | | | | | | | | | | | | |
|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|
| Low emotional awareness | | | | | | | | | | | | | | |
| LAE1 | LAE2 | LAE3 | LAE4 | LAE5 | LAE6 | LAE7 | LAE8 | LAE9 | LAE10 | LAE11 | LAE12 | LAE13 | LAE14 | LAE15 |
| Feeling stressed/overwhelmed | Not too much stress | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed | Feeling stressed/overwhelmed |
| Depressed/overwhelmed in studying | The subject is highly cognitive | Overwhelmed/overwhelmed in studying | The fact of studying is not an obstacle | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying | Overwhelmed/overwhelmed in studying |
| Not too much stress | Only sharing feelings with close friends | Only sharing feelings with close friends | Not in the habit of sharing feelings | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends | Only sharing feelings with close friends |
| Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet | Not used yet |

Theme 2: Journaling behavior of research participants

| Theme 2: Journaling behavior of research participants | | | | | | | | | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Low emotional awareness | | | | | | | | | | | | | | |
| LAE1 | LAE2 | LAE3 | LAE4 | LAE5 | LAE6 | LAE7 | LAE8 | LAE9 | LAE10 | LAE11 | LAE12 | LAE13 | LAE14 | LAE15 |
| No | No | No | No | No | No | No | No | No | No | No | No | No | No | No |
| Writing | Do not talk with friends | Writing on a notebook | Do not talk with friends | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook | Writing on a notebook |
| Self-reflective | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues | Identify security issues |
| Feeling stressed/overwhelmed in a relationship | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues | Security issues |
| Average 10 minutes in this journaling | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes | 10 minutes |

Theme 3: Social media to connect with audiences

| Theme 3: Social media to connect with audiences | | | | | | | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Low emotional awareness | | | | | | | | | | | | | | |
| LAE1 | LAE2 | LAE3 | LAE4 | LAE5 | LAE6 | LAE7 | LAE8 | LAE9 | LAE10 | LAE11 | LAE12 | LAE13 | LAE14 | LAE15 |
| Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook | Facebook |
| Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram | Instagram |
| Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter | Twitter |
| LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn | LinkedIn |
| YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube | YouTube |

Due to primary research, "Mental health problems, also known as mental disorders, refer to a range of conditions that affect an individual's thinking, behaviour, mood, and overall well-being." However, the United Nations claims: Mental diseases afflict 1 billion individuals globally. Since COVID-19, there has been a 25% increase in anxiety and depression, and 800,000 people commit suicide each year, making it the second leading cause of death for young people. After exploring the ODI report, we identify four impact levels, including individual, family, school, and community, resulting from negative internal and external influences. In relation to our main study, our qualitative research has also uncovered the underlying reasons. Nearly 92% of our clients acknowledge that there are challenges in their lives, primarily at the individual and societal levels, which contribute to mental health problems. But 48% of them don't express their emotions due to four primary factors: Lack of trust, fear of judgment, the belief that others cannot assist, and a lack of sharing behaviour resulting in a variety of harmful effects.

3. Impact Gaps

3.1. Challenge mapping

3.1.1. Challenge landscape

Many people are affected by mental disorders. According to the UN (2022), 1 billion people suffer from mental disorders worldwide. Over 264 million people are affected by depression, the leading cause of disability worldwide (WHO, 2021). Moreover, the global economy's caused a \$1 trillion annual loss in productivity resulting from mental health problems (WHO, 2021).

3.1.2. Obstacles to change

There are numerous obstacles in addressing the current challenge. The two most notable are related to communication and financial resources. Specifically, people nowadays are more self-isolated and do not express their feelings or interact with others often. Moreover, due to low-income levels, people struggle to pay bills, enter healthier environments, or acquire mental health treatment.

3.1.3. History and Future of the Challenge

The challenge has always been worrisome and is projected to remain so. According to WHO (2021), 800,000 people die by suicide yearly as one of the effects of mental disorders, the second leading cause of death among 15-29-year-olds globally. Furthermore, there was a 25% rise in anxiety and depression worldwide after COVID-19 (WHO, 2022), underscoring the problem's severity even more.

3.1.4. Challenge learning log and opportunities

Many resources have been utilised to gain a deeper understanding of the challenge. First, a systematic review of mental health disorders and related topics has been conducted using secondary resources such as reports (from WHO, UN, and more) and research papers (from <>). Second, primary research was also conducted, with roughly 400 ordinary people, more than 100 stakeholders, and about 20 psychological specialists participating.

3.2. Solution Mapping

3.2.1. Solution Landscape

Currently, many actions have been taken to address the mental health challenge. For instance, governments have sponsored mental health-related programs, schools have educated teenagers about the adverse effects of bullying, families have taken more excellent care of their children's mental health, and businesses have created tools to enhance social well-being. However, the challenge remains severe.

3.2.2. Models for Change

The available solutions mainly focus on education or solving the problem when it occurs. For example, governments and schools are trying to raise people's awareness through messages and learning courses, which can be ineffective due to a lack of engagement. Moreover, current solutions mainly address an individual's mental health problem when it has already occurred.

3.2.3. Future Impact Scope and Scenarios

In the future, the advancement of technology and the increasing severity of the challenge will affect the mental health challenge. Specifically, technology can help create more effective solutions and reach out to many people in need. Furthermore, the mental health problem is becoming more potent, which requires an immediate response.

3.2.4. Solution Learning Log and Opportunities

We also sought help from many parties to learn about the available solutions. First, we asked for ordinary people's and specialists' perceptions about the discussed solutions. Second, we investigated

these solutions in detail from various sources such as students in school, regulators, mobile app distributors, et cetera.

3.3. Gaps

3.3.1. Landscape gaps

Although many actions have been taken to address the mental health challenge, the problem remains unsolved. For instance, 12% of the child population (over 3 million young people and adolescents) suffer from mental disorders. However, only about 20% receive the necessary medical support and treatment.

3.3.2. Unaddressed Obstacles

Communication:

Education is one of the main tools for raising awareness about mental health issues. However, current methods are often ineffective and need more engagement. People need more interactive and personalized approaches to learn about mental health and develop healthy habits. Mobile applications are often used for this purpose, but they focus on solving problems when they occur rather than building healthy habits.

Financial resources:

Accessing mental health resources is often limited due to high fees and a lack of free trials. Many individuals cannot afford mental health treatment or enter a mentally healthier environment.

3.3.3. Impact opportunities

Technology and community: Technology can play a significant role in filling the gaps in mental health. For example, mobile applications can be designed to focus on building healthy habits rather than just addressing problems when they occur. Furthermore, communities can be created to support individuals in their mental health journey and provide accessible and affordable resources.

3.3.4. Key insight

Less talking, more doing: To address the mental health challenge, there needs to be a shift from just educating about the problem to taking action. Effective and engaging education methods should be developed to promote healthy habits and raise awareness. Moreover, letting people start building their habits is very effective.

Let it be right by their side: Mental health resources should be readily available and accessible to individuals, whether it be through mobile applications, community support, or affordable treatment options. Healthy habits and maintaining mental well-being should also be integrated into daily life.

4. Social Solutions

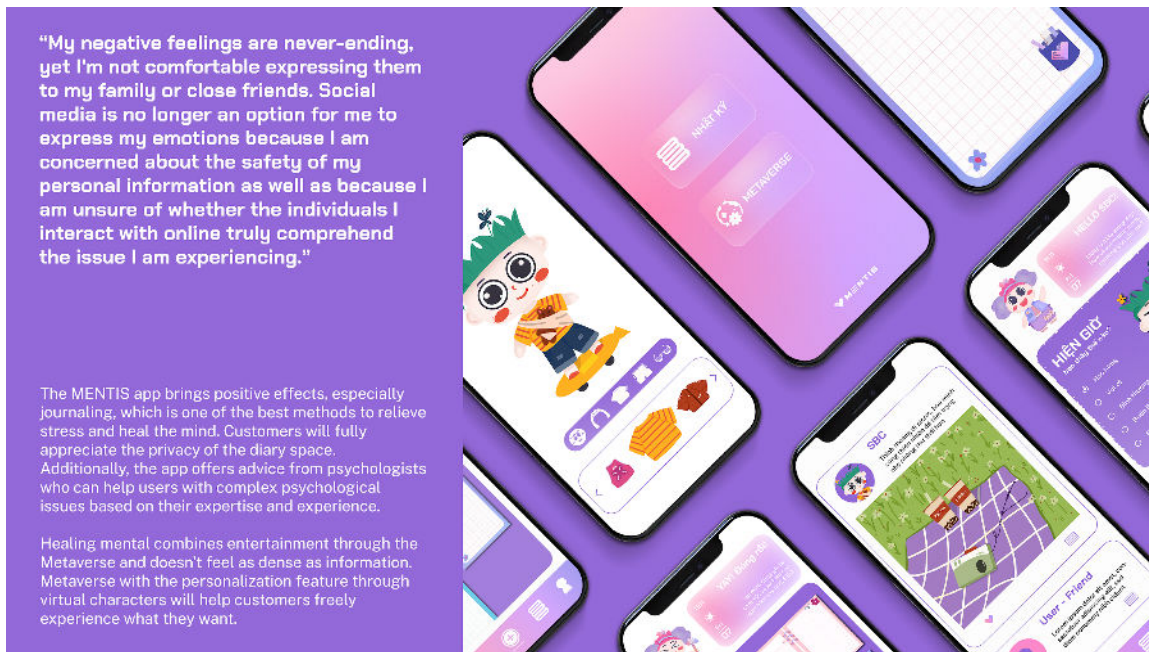
The MENTIS Project is designed as a Social Constructionist model based on the mentioned gaps. It is crucial to address mental health issues and promote individual and societal well-being to fill those gaps. As identified, Social constructionism is a theory that suggests that the meaning and understanding of the world around us are socially constructed through language, culture, and social interactions. It emphasizes the role of social context and discourse in shaping our perceptions and beliefs about reality. Social constructionists believe there is no objective truth or reality outside these social constructions and that knowledge and understanding are constantly negotiated and re-negotiated through social interactions. In other words, social constructionism suggests that our

understanding of the world is shaped by the social context in which we live rather than being determined by objective, universal facts or laws. Therefore, we offer solutions including:

| App Mentis | Mentis Workshop |
|---|---|
| <p>The MENTIS app was designed to empower young people aged 16-26 to enhance their psychological well-being and better understand themselves. Through a combination of digital diary, consultation features with psychologists, and Metaverse functions, we aim to provide personalized, direct interactions and a variety of realistic experience spaces and functions to users.</p> | <p>MENTIS Project offers art therapy workshops to promote healing and stress relief. Through art creation, individuals can express themselves nonverbally and healthily and process their emotions. Mentis can be beneficial for individuals with difficulty verbalizing their feelings or experiences.</p> |

We also designed our Concept Board to highlight three key features that set it apart from others in the market. These include:

- High-security methods using AES encryption and Secure Login features on devices
- Credible lessons and advice from psychologists
- And integration with the Metaverse to offer personalized experiences through virtual characters.



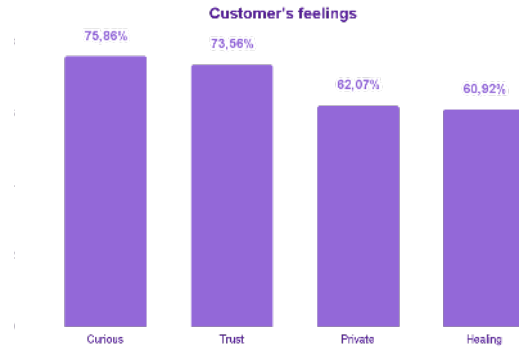
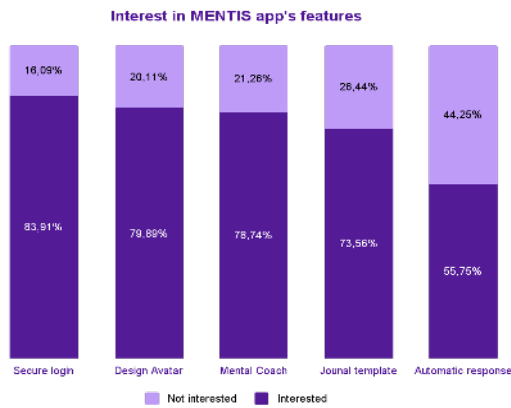
We are based on research that involves consulting with stakeholders and is informed by both science and customer insights. To ensure its reliability, we conducted quantitative research with over 400 participants, and the results are promising.

RESULTS FROM QUANTITATIVE RESEARCH

- Sample size: 412
- Method: Online survey form (Google form)
- Duration: 2 months

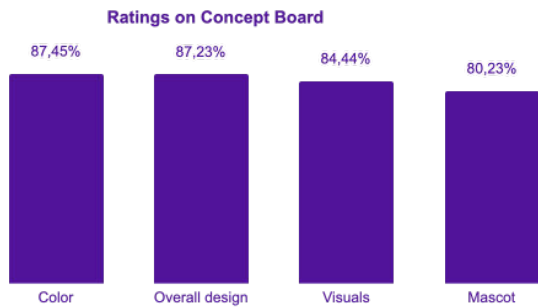
Many people are interested in the MENTIS app's features

Participants mostly felt "curious" and "trusted" the MENTIS app

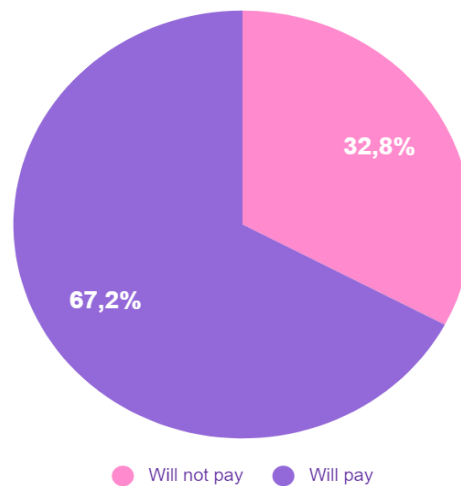


Ratings on the concept board were positive

As a result, many of them are willing to pay for the premium version.



Willingness for paying premium packages



We also defined our project mission and vision:

- Our mission: Mentis promotes awareness and understanding of mental health concerns while providing evidence-based therapy and support to those with mental health difficulties.
- Our vision: MENTIS Vietnam will become a project that envisions a society where mental health is a priority, and everyone has access to mental health care and support by utilizing the most recent scientific developments and cutting-edge technology to help people live better, more fulfilling lives.

Therefore, our social mantra is to provide "Comprehensive and stigma-free services to improve the young generations' mental well-being for a quality life."

5. Conclusion

To conclude, our process follows these steps:

1. Primary research through published reports/news / UN data, etc., to find out the root causes
2. Secondary research through interviews with customers and experts to define the compatibility of our findings.
3. Based on the mentioned report, we designed our Concept Board with three distinct points to fill the gaps that recent competitors can not fill.
4. We tested our designed Concept Board through quantitative research with over 400 participants, and the results are promising, which can strengthen our future work.
5. We involve nearly 200 stakeholders to support our value proposition through online campaigns.

We are dedicated to ongoing research and development to enhance effectiveness and improve mental health for all. We are seeking funding and beginning communication campaigns to promote our product. We plan to use our fan page to discuss mental health topics and build a community to accelerate awareness of young people.

Our app will be released in Vietnam in 2023, and we hope that later on, it will expand to Southeast Asia and other regions.

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