



Mental Health Education for Left-Behind Children in Rural Yunnan: A Qualitative Investigation of Huaxing Primary School from Teachers' Perspectives

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Received 25/02/2026

Revised 27/06/2026

Accepted 14/07/2026

Abstract

Background and Aim: Left-behind children in rural China face complex psychological challenges resulting from prolonged parental migration, while rural schools often have limited capacity to provide systematic mental health support. In Yunnan Province, teachers frequently assume informal caregiving and psychological support roles beyond their formal training. This study focused on Huaxing Primary School in Yiliang County to examine school-level and socio-ecological barriers affecting mental health education for left-behind children. Guided by Bronfenbrenner's Ecological Systems Theory and Noddings' Care Ethics, the study aimed to develop a staged intervention framework grounded in teachers' lived experiences.

Materials and Methods: This study employed a qualitative interpretivist research design. Eight teachers from Huaxing Primary School were selected through purposive sampling and interviewed in Mandarin using a semi-structured interview protocol. Each interview lasted 45–90 minutes and was transcribed verbatim. Data were analyzed using Braun and Clarke's reflexive thematic analysis with the support of NVivo 14. Approximately 320 initial codes were generated and organized into themes reflecting internal school constraints and external socio-ecological barriers.

Results: Teachers reported four recurring forms of psychological distress among left-behind children: excessive academic anxiety, self-blame linked to parental absence, emotional dysregulation, and peer withdrawal. These difficulties became more severe as the duration of parental separation increased. At the school level, key barriers included unclear role boundaries, limited professional training, insufficient time, and the absence of dedicated counseling spaces. Beyond the school, elderly guardians, weak community-based services, and continuing economic pressures further limited intervention efforts. Four mechanisms explained how these barriers interacted: burden displacement, communication breakdown, value–practice contradiction, and temporal compounding. Teachers' responses were categorized into three types: Compassionate Extensionists, Boundaried Pragmatists, and Systemic Advocates.

Conclusion: Improving mental health education for left-behind children requires structural reform rather than continued reliance on teachers' individual care and goodwill. Effective intervention should operate across the classroom, school, family, community, and policy levels. The findings highlight the need for coordinated, staged, and context-sensitive support systems that strengthen rural schools' capacity to promote children's psychological well-being.

Keywords: Left-behind Children; Mental Health Education; Rural China; Yunnan; Teacher Perspectives; Ecological Systems Theory; Care Ethics; Qualitative Research

Introduction

The mental health of left-behind children is the most urgent unaddressed welfare crisis in rural China today. Parental migration has reshaped rural childhood across the country, and the psychological toll it takes on the children who stay behind is only now beginning to receive the attention it deserves. The 2020 Census, compiled jointly by the China National Bureau of Statistics along with UNICEF China and UNFPA China (2023), counted roughly 138 million children touched by population mobility. That is 46.4 percent of all Chinese children. Of these, 66.93 million fall into the category of left-behind children—41.77 million in rural areas and another 25.16 million in urban settings. The sheer scale still surprises me when I see it written out. It should.

China is hardly alone in this. Similar patterns exist wherever labor migration tears families apart: across Southeast Asia, parts of Latin America, Eastern Europe, and Africa (Fellmeth et al., 2018; Graham

[151]

Citation



Zhang, N. (2026). Mental Health Education for Left-Behind Children in Rural Yunnan: A Qualitative Investigation of Huaxing Primary School from Teachers' Perspectives. *International Journal of Sociologies and Anthropologies Science Reviews*, 6 (3), 151-186; DOI: <https://doi.org/10.60027/ijasar.2026.10515>



& Jordan, 2011; Antia et al., 2022). Graham and Jordan's (2011) work in the Philippines, Indonesia, Thailand, and Vietnam showed that children whose mothers had migrated tended to fare worse psychologically, though the pattern varied by country in ways that suggest culture matters. Ruiz-Casares and colleagues (2024) found parallel dynamics in rural Yucatán, Mexico—weakened attachment, reduced oversight, and schools quietly taking over roles that families could no longer fill. A similar picture emerged from Georgia, where Antia et al. (2022) interviewed teachers who described themselves as primary supporters for children whose caregivers ranged from attentive to indifferent. What all this suggests is that the phenomenon Chinese educators face is not uniquely Chinese, even if the HuKou system gives it a particular shape here.

I chose Yunnan Province for this research partly because of its labor-exporting economy and partly because its geography and ethnic composition make it unusual. Yunnan borders Myanmar, Laos, and Vietnam. Much of its terrain is mountainous. Its communities include Yi, Bai, Hani, Dai, and other minority groups, each with its own language and traditions. None of these maps neatly fits into the more homogeneous rural contexts that dominate existing research. Yiliang County sits within Kunming City's administrative boundary, but anyone who visits can see that the county itself remains rural and agricultural. That gap between formal jurisdiction and lived reality is part of what makes Yiliang theoretically interesting rather than just a "typical" rural site. What is distinctive here is the contradiction itself. The county sits inside the administrative orbit of a provincial capital, which means policy reaches it on paper, but the underlying socioeconomic conditions—mountain terrain, subsistence agriculture, ethnic minority villages, persistent labor out-migration—keep it functionally cut off from the resources that policy assumes are available. Most existing studies of left-behind children pick research sites that are either fully urban-adjacent or unambiguously remote. Yiliang sits in between, and that in-between position is exactly where many rural Chinese counties actually live. The administrative-developmental tension matters analytically because it produces a specific kind of implementation failure: policies arrive, but the conditions to enact them do not. Provincial statistics put Yunnan's rural left-behind children at around 334,000 in 2024, or 14.6 percent of its total child population. Agricultural counties like Yiliang carry a heavier share.

The mental health picture emerging from recent Yunnan research is sobering. Xiao and colleagues (2024) surveyed 5,462 left-behind children across the province and found weighted prevalence rates of 4.22 percent for lifetime depression and 3.84 percent for current depression. Girls fared worse than boys. So did children whose parents had separated or divorced. Tian et al. (2019) went further back and reported 48.8 percent self-harm prevalence among left-behind children aged 10 to 17 in Guangan County, Wenshan Prefecture. That number should not be possible, and yet it is. A recent meta-analysis pulling together 78 studies with a combined sample of 394,308 children confirmed the general pattern: higher rates of depression, anxiety, self-harm, loneliness, and bullying victimization when compared with non-left-behind peers (Li et al., 2025). These findings do not really need more evidence piled on top of them. What they need is workable intervention—and that is where things fall apart.

The policy on paper looks reasonable enough. The 2016 State Council document on strengthening care and protection of rural left-behind children lays out governmental responsibility. The Ministry of Education's 2019 guidelines require schools to embed mental health education into the curriculum and meet certain counseling standards. But rural schools, particularly those serving the highest concentrations of left-behind children, often cannot meet these requirements in any meaningful sense. Liu et al. (2024) tracked the rural primary teaching workforce in Yunnan between 2017 and 2021 and found it had shrunk by 8.9 percent—157,563 teachers gone. Nearly 80 percent of the 10,356 rural teachers they surveyed said they would relocate to urban areas if they could. Only 12.3 percent of Yunnan's rural primary and secondary schools have a specialized mental health educator on staff. The national average is 23.8 percent, which is already low.





Teachers are the people who end up holding everything together. They teach classes, monitor behavior, check in on children's moods, and often act as substitute parental figures for kids whose actual parents are hundreds of kilometers away. Positioning teachers as the informants for this study was not a default choice—it was a theoretical one. Micro-system actors, in Bronfenbrenner's terms, carry the experiential knowledge of how macro-level pressures play out in everyday interactions. International work supports this angle: Dabrowski and colleagues (2024) gathered perspectives from 1,500 Australian educators; Antia et al. (2022) interviewed teachers in Georgia; Pi et al. (2024) talked with rural Chinese teachers under the double-reduction policy. All three studies yielded insights that quantitative outcome research would have missed. There are also ethical reasons to focus on teachers rather than on the children themselves. Ellis and colleagues (2023) wrote at length about the blurry boundaries involved in sensitive research with young people, and I took their caution seriously when designing this project.

The implementation difficulties extend beyond school boundaries into family and community dimensions. Grandparent guardians, while providing physical care, often possess limited education, struggle with intergenerational communication, and may hold cultural perspectives that dismiss psychological concerns as weakness. Rural communities lack accessible mental health services. The nearest facilities are usually located in distant county seats, beyond the practical reach of most families. Economic pressures driving labor migration persist, and the HuKou household registration system continues to restrict rural migrants' access to urban public services, making family reunification legally and practically difficult.

The research problem can be stated plainly: What actually stops mental health education from working for left-behind children in rural primary schools, and how do these obstacles interact across different levels of the system? Everything that follows is an attempt to answer that question from inside one school, through the eyes of the people who work there.

Objectives

Four objectives guided the investigation.

First, to identify what I call internal factors—the school-level conditions that get in the way of mental health education. These include unclear teacher roles, thin resources, training gaps, and evaluation systems that reward the wrong things.

Second, to identify external factors—the family and social conditions beyond the school gates. These include guardianship arrangements, weak community support, and the economic and policy pressures driving parental migration in the first place.

Third, to examine how internal and external factors interact, because separating them neatly is an analytical convenience, not a reflection of how teachers actually experience them. This objective also assesses the relative severity of different factor configurations and how they compound across time.

Fourth, to turn these insights into multi-level recommendations that are ordered by feasibility rather than listed as a wish list. The goal here is not to produce an abstract wish-list of “what should happen.” It is to name specific actions, sort them by how soon they could plausibly happen, and point toward the structural changes that matter most.

These four objectives reflect a deliberate analytical shift. Rather than documenting outcomes or cataloging teacher experiences descriptively, the study works toward systematic identification and evaluation of the factors that block effective implementation. Teachers are treated as knowledgeable informants whose perspectives illuminate systemic barriers requiring structural response.

Literature Review

Ecological Systems Theory as the Analytical Foundation

Bronfenbrenner's Ecological Systems Theory (1979, 1994) provides the primary framework here. The theory holds that child development happens through reciprocal interaction between the developing



person and the nested environments around them. Development is embedded. It cannot be understood by looking at the child alone. Five systems sit inside each other like Russian dolls, and each shapes the child in different ways.

The micro-system is the closest layer—the immediate settings containing the developing child. Family, school, peer group, neighborhood. For this study, the school micro-system matters most, particularly the teacher–child relationships that make up the classroom’s daily texture. These relationships constitute what Bronfenbrenner called proximal processes: the everyday interactions through which development actually happens. When they go well, children flourish. When they go poorly or inconsistently, children carry the cost forward.

The meso-system is the connective tissue between micro-systems. Home talking to school. Peer group connecting to family. For left-behind children, the meso-system is usually broken or very thin. Grandparent guardians who cannot read written notices, parents who are 1,500 kilometers away and can only send brief phone messages, and schools that have no mechanism for reaching into the family space—all of this produces a meso-system that exists on paper but not in practice.

The exo-system includes settings the child is not present in, but that shape her life anyway. The factory where her father works in Guangdong. The municipal office decides on rural education budgets. The county mental health clinic is 35 kilometers away. The child never sees these places, but they determine how often her father can call, what services are available when she needs them, and whether her teacher gets any training at all.

The macro-system holds the broad institutional patterns and cultural beliefs that shape all the inner layers. The HuKou household registration system. Cultural values about filial piety, educational achievement, and what it means to be a good child. National policy on mental health in schools. These are invisible to the child daily, but they define the possibility space she lives in.

The chrono-system tracks time. Both developmental time and historical time. A child at age seven experiences parental absence differently from the same child at age twelve. Policy shifts over the decade matter. So does the cumulative effect of prolonged separation. That last system has been strangely neglected in research. Tong and An (2024) reviewed a decade of ecological studies and found that most applications treat the framework as a static structure. They describe layers but not temporal change. I wanted to avoid that in this project, because my interviews kept returning to time—how much worse things get when a child has been apart from parents for years rather than months.

Factor Analysis Framework: Internal and External Dimensions

Building on ecological theory, I developed a factor analysis framework that sorts constraints into two categories, matching how teachers actually talk about their work: internal factors at the school micro-system level, and external factors at the exo- and macro-system levels. This categorization is not meant to imply that the two dimensions operate independently. They do not. But for intervention planning, it matters to know which level a given barrier sits at, because the levers for changing it differ.

Internal factors cover school-level conditions that directly shape teachers’ capacity to implement mental health education. These include teacher role definitions, workload structures, and professional boundaries; the availability of mental health resources, infrastructure, and specialized personnel; professional development systems and training provision; institutional evaluation mechanisms and achievement priorities; and organizational culture and collegial support systems.

External factors cover family and social conditions that operate beyond school boundaries. These include guardianship arrangements and grandparent caregiving limitations; family–school communication patterns and meso-system linkages; community mental health service availability and accessibility; economic pressures driving parental migration; policy structures such as the HuKou system and migration regulations; and cultural values and beliefs about mental health and child-rearing.



The framework maintains ecological theory's emphasis on multi-level interaction while providing a structure I could actually use in coding. When an interview quote talks about a broken counseling room, that goes into internal resources. When a teacher describes a grandmother who cannot read, that goes into external guardianship. But both codes feed into a shared analytical story about how the levels reinforce each other.

Care Ethics as a Complementary Lens

Care Ethics, developed by Noddings (2013), fills in what ecological theory leaves out. Where ecological theory explains *where* the pressure comes from, Care Ethics explains *why teachers respond the way they do* and what it costs them to respond that way. Noddings reframes teaching as inherently relational work rather than technical knowledge delivery. The teacher is not just someone who transmits content. She is someone who stands in a caring relationship with students, and that relationship carries ethical weight.

Burke and Minton (2019) built on this to describe a “third space” teachers occupy between detached professionalism and full personal involvement. They extend themselves well beyond formal job descriptions, and they do so because the caring relationship demands it. But extension has limits. Goldstein and Lake (2000) pushed the argument further: care, they said, is not just what individual teachers do. It is what the institutional conditions around them make possible or impossible. Asking teachers to care more while giving them less to work with is setting them up to burn out. And that is exactly what rural Chinese teachers of left-behind children are being asked to do.

The two frameworks fit together. Better than they first appear. EST tells you where the structural barriers sit. Care Ethics tells you what those barriers feel like to the people caught inside them. Reading them separately gives you a diagnosis without a pulse. Reading them together shows something different. Teacher burnout is not a personal weakness. It is the predictable outcome when ethical demands outstrip structural support. This integration matters for policy. If burnout is a motivational failure, the fix is pep talks. If it is structural, the fix is resource allocation and institutional reform. The two diagnoses point in completely different directions.

Mental Health Status of Left-Behind Children

Zhao et al.'s (2018) meta-analysis of 36 Chinese studies ($n = 75,870$) found significantly higher depression (Hedges' $g = 0.41$), anxiety ($g = 0.36$), and loneliness ($g = 0.38$) among left-behind children compared with children living with parents. These are moderate effect sizes in statistical terms. But given a population in the tens of millions, the aggregate psychological burden is staggering. The Li et al. (2025) systematic review and meta-analysis I mentioned earlier extended this picture to include self-harm, peer bullying victimization, and general emotional and behavioral difficulties across 394,308 children in 78 studies.

Recent Yunnan-specific research refines the picture. Xiao et al.'s (2024) provincial mental health survey of 5,462 left-behind children found the weighted prevalence rates I already cited—4.22 percent for lifetime depression, 3.84 percent for current. Girls were more affected than boys. Children from families where parents had separated or divorced fared worse than those with intact marital structures. The study also found significant associations between depressive disorders and self-harm behaviors, confirming what Tian et al. (2019) had shown earlier in Guangan County: self-harm prevalence reaches 48.8 percent among left-behind children aged 10 to 17. That figure places the population in a severe mental health crisis by any reasonable standard.

International comparative evidence contextualizes these findings. Fellmeth et al.'s (2018) *Lancet* review pulled together 111 studies from multiple countries and confirmed elevated risks of mental disorders, substance use, and violence exposure among left-behind children globally. But here is the thing to notice: 91 of those 111 studies (82 percent) came from China. Another nine were from other Asian countries, six from Latin America, three from Africa, and two from Eastern Europe. The geographic concentration is striking, and it raises an uncomfortable possibility. We may be mistaking China-specific



dynamics for universal features of left-behind childhood. Graham and Jordan's (2011) four-country Southeast Asian comparison found that children of migrant fathers in Indonesia and Thailand showed poorer psychological well-being than non-migrant households, but the same pattern did not hold in the Philippines or Vietnam. Something cultural mediates how parental absence registers psychologically—perhaps the strength of extended kin networks, perhaps the framing of migration as sacrifice versus abandonment, perhaps something else. More cross-cultural work is needed. Anyone claiming universal patterns now is moving too fast.

Beyond internalizing symptoms, left-behind children also show elevated externalizing behaviors. Wang et al.'s (2024) scoping review of 33 intervention studies documented increased impulsivity, aggression, and rule-breaking. These behavioral patterns usually reflect underlying emotional distress and disrupted attachment rather than primary conduct disorders. That distinction matters for intervention design. Trauma-informed approaches treat disruptive behavior as communication about unmet needs. Punitive disciplinary approaches treat it as a willful violation. The two produce very different outcomes. Academic performance is another concern domain, though Fellmeth et al.'s (2018) review found heterogeneous results, with some left-behind children demonstrating resilience. Parental migration per se does not deterministically produce bad outcomes. It interacts with a range of protective and risk factors, and understanding those interactions is the whole point of ecological analysis.

School-Level Factors: Teacher Roles, Resources, and Training

Chinese teaching culture traditionally treats the teacher–student relationship as holistic. Teachers are expected to be moral exemplars and to take an interest in students' lives well beyond the academic dimension. This cultural expectation sounds supportive on paper. In practice, it generates role strain when the teacher has neither the preparation nor the time to meet those expectations.

Dabrowski et al.'s (2024) Australian mixed-methods study captured perspectives from 1,500 educators and found a telling pattern: teachers felt “left to fend for ourselves” on student mental health. The phrase would probably resonate with most of the Huaxing teachers I interviewed. Pi et al. (2024) documented the same dynamic in rural China through interviews with 16 rural teachers. Educators provide emotional, material, informational, and companionship support to left-behind children despite lacking any formal mental health training. Vulnerable and marginalized children end up at greatest risk when teachers lack adequate support themselves. McGrath and Van Bergen (2023) offer one thin but genuine reason for hope: they showed longitudinally that high-quality teacher relationships can partially compensate for poor early caregiving. Thin because it places the compensation on individual teacher-student pairings. Genuine because it means teachers really do matter, even when the rest of the system fails.

Emotional labor is the part of teaching that rarely shows up in job descriptions. Teachers manage their own emotional reactions to students' distress while projecting professional composure and providing emotional containment for children who cannot regulate their own feelings yet. For rural teachers working with left-behind children, this labor is compounded by witnessing poverty, family disruption, and limited life opportunities—all without adequate organizational support or clinical supervision. Svensson and Warne (2024) documented how school staff experience uncertainty and collaboration challenges when addressing student mental health. Those themes transfer directly to rural Chinese contexts.

Rural schools face persistent resource constraints that urban administrators often do not fully grasp. Liu et al.'s (2024) documentation of Yunnan's teaching workforce decline is one indicator. Another is physical infrastructure. Counseling rooms, screening instruments, referral pathways—most of these are missing from the rural schools I visited and read about. Mental health staffing ratios dramatically underperform national guidelines. Only 12.3 percent of rural primary and secondary schools in Yunnan employ specialized mental health educators, far below the already-low national average of 23.8 percent. Schools trying to comply with mandates often designate one teacher to serve the entire student body while keeping her other teaching responsibilities. This renders individualized counseling practically impossible.



External services are essentially nonexistent in most rural communities. The nearest county mental health clinics are usually 30 to 50 kilometers away, with limited child psychiatry capacity and months-long waiting lists.

Teacher preparation for mental health work is thin to nonexistent. Liu et al.'s (2021) qualitative study with 27 homeroom teachers in Zhejiang and Anhui revealed significant literacy gaps. Teachers confused non-conformist behaviors with pathology. They lacked familiarity with screening tools. They relied on subjective assessments. Only one-third reported ever referring a student for professional help. International evidence confirms that this is not peculiar to China: Maclean and Law (2022) found that only 4 percent of Scottish primary teachers strongly agreed they had enough knowledge for their students' mental health needs. Pre-service teacher education programs typically include one or two general educational psychology courses with minimal content on trauma, grief, attachment disruption, or psychopathology recognition.

A broader debate sits underneath these training and resource gaps. Contemporary scholarship is increasingly split on what "mental health education" should even mean in rural versus urban contexts. The urban model—drawn largely from research in well-resourced settings—treats mental health education as a layered system: universal social-emotional curriculum delivered to all students, targeted small-group support for at-risk children, and individual clinical referral for the most acute cases (Maclean & Law, 2022). This tiered model assumes infrastructure that rural schools simply do not have. There is no clinic to refer to. No school psychologist is running small groups. The urban tiered framework collapses into a single tier: whatever the classroom teacher can manage. Some scholars have begun arguing that rural mental health education needs its own model rather than a downscaled version of the urban one. Pi et al. (2024) and Svensson and Warne (2024), writing from very different national contexts, both make versions of this argument. Rural models would emphasize relational caring, peer support, and community-embedded approaches over clinical referral pathways. They would treat the teacher not as a screening agent for absent specialists but as the actual site of intervention. This study sits inside that emerging debate, and the findings reported in Chapter 4 lend it empirical weight: the teachers I interviewed are the rural mental health education system, whether anyone designed it that way or not.

External Factors: Family Structure and Social Support

Around 90 percent of left-behind children in rural China live with grandparents. A smaller fraction live with other relatives or care for themselves. Grandparent caregiving presents distinctive challenges. Elderly caregivers often have limited education. They may face their own health problems. They struggle with intergenerational communication gaps. They sometimes use indulgent or inconsistent disciplinary approaches because they are exhausted or because their own parenting templates belong to a different era.

Liu, Li, and Ge (2021) conducted a qualitative study with 24 grandparent caregivers in rural China and uncovered complex emotional dynamics. Grandparents described feeling simultaneously devoted to their grandchildren and overwhelmed by the caregiving responsibilities. Many lacked confidence in addressing psychological issues and focused primarily on physical care and academic supervision. Generational differences in child-rearing philosophies—including attitudes that dismiss psychological concerns as weakness or modern indulgence—further impede effective mental health education. These are not caricatures. They are patterns. They show up consistently in the literature and in my own interview transcripts.

Parent-child communication quality matters more than communication frequency. Xie et al.'s (2024) study demonstrated that high-quality communication characterized by emotional support and problem-focused dialogue protects against depression and anxiety even when the frequency is moderate. Conversely, poor-quality communication, even when frequent, shows limited protective effects. But maintaining quality communication proves extremely difficult given parental workplace demands, geographic distance, and limited privacy. A factory worker sharing a dormitory room with seven other workers cannot have a private emotional conversation with her child on the phone, regardless of how much she wants to.



Community support beyond the school is effectively absent in most rural areas. Community-level mental health services are virtually nonexistent. Social stigma around mental health persists, which discourages help-seeking even when services exist. At the macro-system level, China's HuKou household registration system continues to restrict rural migrants' access to urban public services, which is why parents often cannot simply bring their children with them when they move for work. Tong et al. (2019) used ecological theory to analyze nationally representative data and identified macro-system factors, including HuKou, alongside micro-system factors such as caregiving arrangements. Their analysis showed how structural policies interact with proximal relational processes in exactly the ways Bronfenbrenner's framework would predict.

Research Gaps and Study Positioning

Despite the volume of research on left-behind children's mental health outcomes, several things remain underdeveloped. Most studies document outcomes rather than unpack the barriers to effective intervention. Most are quantitative rather than qualitative. Most center on children or outcomes rather than on the educators working within the constraints. Most examine factors in isolation rather than tracing how school-level and social-level barriers interact. And most draw overwhelmingly on domestic Chinese literature without much cross-cultural engagement—a limitation that becomes more significant when 82 percent of a major global review's included studies come from a single country.

This study tries to address each of these gaps, at least partially. It investigates both internal and external factors constraining mental health education implementation. It privileges teachers' lived experiences through qualitative methods. It situates findings within both Chinese and international scholarly discourse. And it uses the factor analysis framework to produce something practically useful—a diagnosis that can inform intervention design rather than just describing the problem.

Conceptual Framework

From the ecological theory discussed above, I built a working framework for this study. I call it a Qualitative Factor Analysis Framework, though the name is less important than what it does. It operationalizes Bronfenbrenner's nested systems into two practical categories that match how teachers actually talk about their work. While Ecological Systems Theory provides the macro-theoretical lens, the conceptual framework translates specific environmental layers into two distinct but interacting dimensions relevant to the school context.

Internal factors (the school micro-system) represent the immediate setting where education takes place. This dimension encompasses teacher role definition, professional competency, school infrastructure, and institutional evaluation systems. These factors directly influence the quality of teacher–student interactions—the proximal processes through which development happens or fails to happen.

External factors (the exo- and macro-systems) encompass the broader environments that teachers cannot directly control but must navigate. This dimension includes family guardianship capacity, particularly the intergenerational caregiving arrangements most common for left-behind children; community support infrastructure, including the near-total absence of accessible mental health services in rural areas; and macro-level policies and cultural values, including the HuKou system and the cultural emphasis on educational achievement as filial duty.

Interaction through the meso-system is the key point most frameworks miss. Internal and external factors do not operate in parallel tracks. They connect through the interface between home and school. A grandparent who cannot read (external limitation) directly creates a teacher's communication barrier (internal constraint). The external “creates” the internal problem, and vice versa. An intervention design that targets only one side of this interaction will fail to address the other.

The chrono-system overlay captures the temporal dimension. A child whose self-blame cognitions go unrecognized in grade two develops deeper, more entrenched patterns by grade five. The barriers do not



stay constant; they compound. This framework guides the data analysis in Chapter 4, serving as the logic for classifying interview themes into internal and external constraints while ensuring findings remain theoretically grounded rather than merely descriptive. A visual diagram mapping these interactions within the nested ecological model would strengthen the presentation and is recommended for the final submission.

Methodology

Research Design

I used a qualitative research design grounded in interpretivist epistemology and constructionist ontology. Interpretivism holds that social phenomena are inherently meaningful and that understanding them requires engagement with participants' subjective interpretations and experiences. Constructionism adds that reality is socially built through language, interaction, and shared meaning-making rather than existing as observer-independent fact. These commitments shaped every analytic decision in this project.

The design specifically focused on identifying and analyzing factors constraining mental health education implementation rather than measuring outcomes or testing intervention effectiveness. The goal was a deep understanding of how teachers perceive and experience the barriers they face at different ecological levels. I should say that the project did not start this way. My original proposal included a quantitative component involving child psychological assessments, but my advisor raised ethical concerns about directly assessing minors and pointed out the mismatch between the research questions I was asking and a positivist methodology. She was right. The redesigned study relies entirely on qualitative interviews with teachers, and I think the final product is sharper for it.

This approach treats teachers as knowledgeable informants whose perspectives illuminate systemic constraints requiring structural intervention. It does not treat them as objective witnesses to something called “the truth” about left-behind children. They are people embedded in a professional context, with their own histories, pressures, and interpretive frames. The analytic task is to take their accounts seriously while reading them through theoretical lenses that help make sense of patterns.

Research Setting

Huaxing Primary School in Dogjie Township, Yiliang County, Kunming City, Yunnan Province served as the research site. The school opened in 1956 and represents a fairly typical rural primary school in southwestern China. During the 2023–2024 academic year, it enrolled 230 students across grades 1 through 6, taught by 18 faculty members. Seventy-three of these students—31.7 percent—are classified as left-behind children. That figure closely matches the Yunnan provincial average of 31.2 percent, which is one reason I chose the site.

Geographically, the school serves eight surrounding natural villages within roughly a 15-kilometer radius. The terrain is mountainous, which matters more than it might sound. It shapes everything from how often grandparents can walk to school for a conference to whether families can reach the county mental health clinic for a scheduled appointment. The catchment area's economy relies primarily on subsistence agriculture, supplemented by labor out-migration. That combination is what produces left-behind children in the first place: families that cannot support themselves on local income send one or both parents to coastal factories, and the children stay behind with grandparents who are themselves often past retirement age. Ethnically, the student body reflects Yunnan's multi-ethnic composition. Most students are Yi, Han, or Hui, with smaller numbers from other ethnic groups. This diversity has implications for home–school communication that show up in the findings, particularly where ethnic minority families speak local dialects as their primary language.

The school participated in Yiliang County's “Care for Left-Behind Children” pilot program launched in 2022. This program mandates that schools establish student mental health files, conduct regular guardian communication, and implement group psychological activities. That policy context is relevant to the study for two reasons. First, it provides real-world ground to examine implementation challenges. Second, it is



part of why the principal was willing to grant research access in the first place: the school was already under pressure to reflect systematically on its own practice.

Participant Selection and Recruitment

Purposive sampling was used to select information-rich participants with direct, substantial experience supporting left-behind children's education. The inclusion criteria were straightforward. Participants needed to be currently employed at Huaxing Primary School with at least one year of tenure. They needed to have direct teaching responsibility for classes that included left-behind children. They had to be willing to participate in audio-recorded interviews discussing their professional experiences. And they had to be able to provide informed consent.

Eight teachers agreed to participate. The sample represents roughly 44 percent of the teaching staff, which is strong coverage for a qualitative study. Table 1 presents their demographics in detail.

Table 1. Participant Demographics

Pseudonym	Role	Gender	Age	Exp.	Education	Ethnicity	Subject Area	Years with LBC
Mr. Zhang	Principal (part-time teaching)	Male	54	28y	Bachelor's	Han	Administration / Math	20+
Ms. Li	Homeroom teacher	Female	43	15y	Bachelor's	Han	Chinese Language	12
Ms. Chen	Homeroom teacher (Grade 4)	Female	36	10y	Bachelor's	Han	Chinese Language	8
Ms. Wang	Homeroom teacher	Female	38	12y	Associate's	Han	Mathematics	10
Ms. Huang	Homeroom teacher	Female	32	7y	Bachelor's	Yi	English	5
Ms. Liu	Mental health teacher	Female	35	8y	Bachelor's	Han	Social Studies / MH	6
Mr. Zhao	Subject teacher	Male	28	3y	Bachelor's	Han	Science	3
Ms. Wu	Subject teacher	Female	41	14y	Associate's	Han	PE / Arts	11

Note: LBC = Left-Behind Children. The ethnic composition—seven Han and one Yi—reflects the teaching staff's actual demographics, but it limits what I can say about cultural and linguistic barriers specifically experienced by ethnic minority families. I return to this limitation in the Conclusion.

Recruitment proceeded through several stages. I first obtained institutional approval from the Yiliang County Education Bureau and from the school principal. Then I introduced the project at a staff meeting where the principal was present, followed by individual information sheets detailing research purposes, procedures, confidentiality protections, voluntary participation, and the right to withdraw at any point. Written consent was obtained before any interviewing began. No participant withdrew during the study.

Data Collection

Semi-structured interviews served as the primary data collection method. This format balances structured inquiry addressing key research questions with the flexibility to let participants introduce



unanticipated themes and elaborate on experiences that matter to them personally. Pure structured interviews risk missing what is actually important. Pure unstructured interviews risk wandering into unrelated territory. The semi-structured format sits in the useful middle.

The interview guide organized inquiry around four thematic domains, aligned with the factor analysis framework.

Domain 1 covered identification and description of left-behind children's mental health challenges. This established the implementation need—what teachers were actually trying to respond to.

Domain 2 covered internal factors: professional preparation, resources, support systems, workload, and evaluation pressures.

Domain 3 covered external factors: relationships and communication with families and guardians, community resources, and policy constraints.

Domain 4 covered adaptive strategies and recommendations—how teachers actually coped with the constraints and what they thought would help.

Interview duration ranged from 45 to 90 minutes, averaging about 65. All interviews were conducted in Mandarin Chinese at private locations the participants chose. Empty classrooms after school hours were the most common setting. All interviews were audio-recorded with permission, generating approximately 520 minutes of recorded material.

Alongside interviews, I kept field notes documenting observational impressions of school facilities, classroom environments, and contextual factors. I also kept a reflexive journal throughout the research process, exploring my own reactions, emerging interpretations, and critical self-examination of how my positionality might be shaping what I was hearing and how I was reading it.

Data Analysis

I transcribed the audio recordings verbatim myself rather than using a transcription service. This is tedious work, but it forces a level of familiarity with the data that you cannot get any other way. Preserving the speakers' original language—including regional expressions and ways of speaking—matters for qualitative analysis. Analysis was conducted in Mandarin to preserve cultural nuances, idiomatic expressions, and semantic meanings. Only after the themes had stabilized did I translate illustrative quotes and analytical summaries into English for international dissemination. Translating earlier risks flattening idiom and stripping meaning.

The analytic process followed Braun and Clarke's (2022) six-phase reflexive thematic analysis, guided by the RTARG evaluation guidelines they published in 2024 rather than by COREQ standards. COREQ was developed for more positivist qualitative traditions and does not fit reflexive thematic analysis well. RTARG, which Braun and Clarke released specifically to address that mismatch, provides criteria that match the interpretive logic of this study. The six phases were structured around the factor analysis framework.

Phase 1 involved familiarization with the data. I read and re-read transcripts, listened to audio recordings while reading along, and jotted initial observations about constraining factors.

Phase 2 generated codes using NVivo 14 qualitative analysis software. Approximately 320 initial codes emerged, capturing interesting features and semantic content related to implementation barriers. Coding attended explicitly to whether factors operated at the school level (potential internal factors) or the social/family level (potential external factors), and to chrono-system temporal patterns that might be visible in how teachers described change over time.

Phase 3 generated initial themes by organizing codes into broader pattern clusters within the internal and external factor categories.

Phase 4 developed and reviewed themes through iterative review against coded data and the entire dataset, ensuring alignment with the ecological systems theoretical framework.



Phase 5 refined, defined, and named the themes. I wrote detailed analytical narratives and developed sub-themes capturing the internal heterogeneity within each category.

Phase 6 produced the report, constructing the coherent narrative that integrates themes with illustrative quotes and relates findings to both the research questions and the integrated theoretical framework.

Throughout analysis, I maintained researcher reflexivity through ongoing journaling, discussing interpretations with advisors, and staying open to alternative explanatory frameworks. The analysis aimed to balance staying close to participants' meanings with moving toward conceptual insights—specifically toward process-oriented explanations of how barriers function rather than merely categorizing them.

Ethical Considerations and Researcher Positionality

The research protocol received ethics approval from the relevant institutional bodies before data collection began. Informed consent procedures emphasized voluntary participation, confidentiality protections, and participants' right to withdraw at any point without consequences. Multiple strategies protected confidentiality: pseudonyms for all participants, masking of institutional identifiers where appropriate, secure storage of audio recordings and transcripts on a password-protected device with backup copies in locked storage. Identifying information about the school and county was retained because Huaxing Primary School and Yiliang County agreed to be named, and anonymizing them would have stripped contextual detail without meaningful privacy gain.

I should say something about my own position in this research, because it shaped everything. I grew up in a city and attended university in another. When I arrived at Huaxing the first time, I was struck by how much I did not know—about rural life, about the daily texture of teaching in a mountain township, about the specific pressures grandparent guardians carry. My urban educational background may have created implicit power differentials with rural teacher participants, potentially eliciting socially desirable responses that emphasized dedication and compassion over frustration or disengagement. My outsider status in the community, while facilitating professional-to-professional dialogue, may also have limited my access to culturally embedded knowledge that a local researcher might pick up more naturally.

I am also a graduate student working within an academic institution that participants might have associated, fairly or not, with educational evaluation. That association could have amplified the tendency toward self-presentation. Ongoing reflexive journaling documented these dynamics throughout the research process, including specific instances where participants appeared to shift toward more “professional” framing—moments when an interviewee seemed to remember she was being recorded and her language tightened. These reflections informed analytical decisions, particularly around how I read teachers' descriptions of their own adaptive strategies. I tried to interpret those strategies as contextually rational responses rather than as professionally deficient improvisation. I cannot claim to have eliminated social desirability bias. I noticed it. I tried to account for it.

Trustworthiness was enhanced through several strategies. I maintained prolonged engagement with the school community across the data collection period, visiting the school multiple times beyond formal interview sessions. Persistent observation of classroom and staff interactions helped triangulate what teachers described in interviews. Peer debriefing with academic advisors provided external checks on interpretation. Member checking was conducted with four of the eight participants, who reviewed preliminary findings and confirmed thematic accuracy while suggesting important nuances I had missed. Thick description is used throughout the findings to enable transferability assessment by readers in different contexts. And a detailed audit trail documents the research progression and analytical decisions so the chain from raw data to final claims can be retraced.





Results

This chapter works through what I found. I begin with the psychological patterns teachers observed in students, then move to the internal school factors, then the external factors, and finally to the way these factors interact. Throughout, I try to connect what teachers said to both ecological theory and care ethics rather than treating the frameworks as separate lenses. Each major finding is analyzed through the integrated theoretical lens: as a structural barrier visible through ecological systems analysis, and as a site of moral tension visible through care ethics.

Current Dilemma: Manifestations of Mental Health Problems Among Left-Behind Children

Four patterns came up again and again across my interviews. They were not discrete clinical diagnoses—the teachers were not clinicians, and I am not making diagnostic claims here. But the consistency across eight independently conducted interviews was striking. These patterns establish the implementation need while also revealing why teachers feel compelled to extend themselves beyond their typical professional boundaries despite the systemic constraints discussed in later sections. Teachers also noted, consistently, that severity intensified with the duration of parental absence. That chrono-system dimension permeated their accounts.

Learning Anxiety and Academic Pressure

Teachers noted many left-behind children exhibited severe learning anxiety disproportionate to actual academic performance. Ms. Li, with fifteen years of homeroom experience, explained:

“These children carry such heavy psychological burdens about studying. Even students who perform reasonably well become extremely anxious before exams. I have seen children vomiting before tests, unable to sleep the night before, crying when receiving scored assignments even with decent grades. They tell me things like ‘If I don’t do well, my parents worked so hard for nothing’ or ‘My grandparents will be disappointed.’ The pressure they feel seems unbearable.”

This is not ordinary test anxiety. It is a moral structure the children have built for themselves, in which academic performance equals repayment of parental sacrifice. The cognitive distortion—equating school results with family honor—emerged repeatedly. Teachers described left-behind children interpreting examination results through moral lenses, viewing poor grades as a betrayal of parents who migrated to provide them educational opportunities. Mr. Zhang, the school principal, contextualized the pattern:

“We see children who are utterly convinced that their parents left to earn money for their education, so they must achieve perfect scores to justify this sacrifice. When reality doesn’t match these impossible expectations—because they’re nine or ten years old, because maybe they’re not naturally gifted in mathematics, because they didn’t get enough sleep—they experience crushing guilt.”

The anxiety showed up physically. Teachers described students with headaches, stomachaches, and sleep disturbances clustered around evaluation periods. Ms. Wu told me:

“During examination weeks, I see left-behind children who look exhausted, with dark circles under their eyes. When I ask if they’re sleeping, they admit staying up trying to memorize textbooks or redo practice problems repeatedly. Their grandparents often don’t realize this is happening because the children work quietly in their rooms.”

Reading this through Care Ethics: the teachers witnessed children’s suffering and felt an ethical pull to respond, but the structures around them limited how they could respond. That tension never resolved. It simply accumulated. Ecologically, what Ms. Wu described reveals a meso-system gap. Grandparent guardians were not aware of the nighttime struggle because the communication pattern between home and



child had thinned out. Teachers could see what grandparents could not, but teachers could not intervene at home, and grandparents could not intervene in what they did not know.

Self-Blame Cognition and Internalized Causation

A particularly concerning pattern involved children's causal attributions for parental migration. Teachers described students who internalized responsibility for their parents' absence, believing their own inadequacies had prompted parental departure. Ms. Chen, a homeroom teacher of fourth grade, gave the clearest illustration:

"I'll never forget a girl who told me, 'Maybe if I had been better behaved, Mama wouldn't need to work so far away.' This child was blaming herself for circumstances completely beyond her control. She thought her ordinary childish behaviors—maybe sometimes being noisy, occasionally forgetting homework—drove her mother to migrate. This broke my heart because you could see this belief poisoning her self-worth."

This self-blame extended beyond the initial separation. Children also interpreted infrequent parental communication or missed promised visits as evidence of their own unworthiness rather than as reflections of parents' constrained circumstances. Ms. Liu, the designated mental health teacher, explained:

"Children construct narratives where they are the problem. If parents promise to call Sunday evening but cannot due to workplace demands, the child concludes they don't care enough rather than understanding employment constraints. Or if parents couldn't come home for Spring Festival—which is financially or logistically impossible for some families—children interpret this as 'I'm not important enough for them to visit.' These distorted attributions accumulate, damaging children's sense of being valued and loved."

Teachers struggled to counter these cognitive distortions without inadvertently validating the children's concerns or criticizing parents. The delicate balance between validating feelings and reframing unrealistic self-blame required psychological sophistication many teachers felt they lacked. Here is where the chrono-system matters practically: a cognition that might have been reachable at age seven becomes entrenched by age ten, and what would have required gentle redirection earlier now needs something closer to sustained therapeutic work. The distortions accumulated over developmental time—an effect where the duration of separation deepened cognitive distortions, making them increasingly resistant to intervention.

Emotional Volatility and Dysregulation

Teachers observed that left-behind children frequently demonstrated emotional volatility, with rapid shifts between withdrawal and explosive outbursts. Ms. Wang, a homeroom teacher, described:

"Some left-behind students seem to have difficulty regulating emotions. One moment they're quiet, almost invisible, and suddenly they explode over something minor—perhaps another child accidentally bumps them or takes their pencil. The reaction is disproportionate. Then afterward, they often feel ashamed and withdraw again."

This dysregulation appeared related to inadequate opportunities to process complex feelings about parental separation. Teachers hypothesized that grandparent guardians, while providing physical care, often lacked the emotional vocabulary or psychological frameworks needed to help children identify and manage feelings. Mr. Zhao, a subject teacher, put it this way:

"I think these children carry so much sadness, anger, and confusion that they don't know how to express appropriately. They haven't learned emotion regulation skills because the adults caring for them also struggle with these competencies. So emotions accumulate until they overflow in uncontrolled ways."



The volatility sometimes manifested as unpredictable crying episodes. Multiple teachers described students suddenly tearing up during routine activities. Ms. Li recounted:

“Sometimes a child will be sitting in class and tears just start rolling down their face. Not sobbing dramatically, just silent tears. If I ask what’s wrong, they often can’t articulate it or say ‘nothing.’ I believe certain moments trigger memories or feelings about their parents that overwhelm them temporarily.”

From an ecological perspective, this dysregulation reflects inadequate emotion coaching at the family micro-system level, where grandparents lack the emotional vocabulary to help children name what they are feeling, compounded by the absence of professional support in the community exo-system. The child is left with strong feelings and no one trained to help her understand or regulate them.

Social Withdrawal and Interpersonal Difficulties

Interpersonal challenges represented another significant concern domain. Teachers noted many left-behind children demonstrated social withdrawal, reluctance to participate in group activities, and difficulties forming close friendships. Ms. Chen explained:

“I see left-behind children who seem to protect themselves by not getting too close to others. Perhaps they’ve learned that people they love leave, so maintaining distance feels safer. They participate in required group work but don’t seek playmates during free time. They eat lunch alone or remain on the edges of social groups.”

This withdrawal sometimes reflected social anxiety and fear of rejection. Conversely, some left-behind children displayed demanding or clingy behaviors that alienated peers. Ms. Wang described:

“I have one student who becomes very possessive of any child who shows him kindness. He wants that child’s exclusive attention, becomes upset if they play with others, and might even try to control their behavior. This understandably pushes classmates away, reinforcing his underlying belief that people will abandon him.”

These four manifestations—learning anxiety, self-blame cognition, emotional dysregulation, and social difficulties—establish the urgent need for effective mental health education. They also explain why teachers extend themselves beyond their job descriptions, and they foreshadow the limits of what individual extension can achieve. As the following sections show, numerous internal and external factors constrain teachers’ capacity to address these needs adequately.

Internal Factors: Constraints from the School Environment

Internal factors encompass school-level conditions and constraints that impede effective mental health education implementation. Teachers identified four major categories of internal barriers: role ambiguity and emotional labor burden, resource scarcity and infrastructure deficiencies, professional training inadequacies, and evaluation system pressures that prioritize academic achievement over psychological well-being.

Role Ambiguity and Emotional Labor: Teachers as “Surrogate Parents”

Teachers described profound role ambiguity regarding their mental health responsibilities. They occupied ambiguous positions between educational professionals and compensatory emotional caregivers. Multiple teachers explicitly characterized themselves as partial parent substitutes for left-behind children seeking emotional connection. Mr. Zhang reflected:

“For many left-behind children, teachers represent the most consistent, reliable adult relationship in their lives. Grandparents provide physical care but often cannot offer the emotional attunement and guidance children need. So children look to teachers to fulfill some



parental functions—to notice when they're upset, to encourage them, to care about their experiences beyond academic performance."

This surrogate caregiving role generated substantial emotional labor. Teachers described heightened emotional availability: leaving office doors open during free periods so students could drop in to chat, extending lunch breaks to eat alongside lonely children, staying after school for extended conversations with distressed students. Ms. Li explained:

"I've had left-behind students who linger after the dismissal bell, inventing reasons to remain in the classroom. They'll ask questions they already know answers to, volunteer to clean the chalkboard, or slowly pack their bags. I understand they're seeking adult company, so I try to provide a few extra minutes of attention when I can."

Teachers invested substantial time in private conversations with struggling left-behind children, creating spaces for emotional disclosure that were unavailable in grandparent–child relationships. Ms. Liu described her communication strategy in those conversations:

"I try to create nonjudgmental space where children feel safe expressing difficult feelings. If a child says 'I miss my mother so much it makes me sad,' I validate that sadness rather than immediately trying to fix it or offering platitudes like 'Your mother loves you very much.' I might say, 'Missing someone you love feels painful. It makes sense that you feel sad.' Then we might explore coping strategies or discuss what helps when they're feeling this way."

Teachers recognized the therapeutic potential of these conversations while also acknowledging their limitations. They were not trained counselors and worried about inadvertently causing harm or venturing beyond appropriate professional boundaries. Mr. Zhao reflected:

"Sometimes children share things—traumatic experiences, serious emotional problems—that I don't feel qualified to handle. I listen compassionately, but then I wonder, 'What should I do with this information? How can I help this child beyond my capabilities?' There's no clear referral pathway, no school psychologist I can immediately consult."

Beyond emotional support, teachers' compensatory care extended to practical assistance addressing material needs. Multiple teachers described purchasing school supplies, food, or clothing for impoverished left-behind children using personal funds. Ms. Wang explained:

"I've bought winter coats, shoes, school bags, and lunches for students whose grandparent guardians couldn't afford these necessities. Technically this isn't my responsibility, but when a child is cold or hungry, I cannot ignore their discomfort. So I use my own salary, which isn't abundant, to help where I can."

Teachers also provided basic health care and hygiene support, teaching self-care skills that parents would typically provide at home. This expanded role, while reflecting admirable compassion, created unsustainable burden. Providing compensatory care generated substantial emotional toll. Ms. Wu reflected:

"It's emotionally exhausting to witness children's pain daily while feeling inadequate to truly address their suffering. I lie awake some nights thinking about particular students, worrying whether they're safe, wondering if there's more I could do. The caring doesn't end when I leave school—these children occupy space in my heart and mind constantly."



Teachers grappled with boundary questions. How much personal involvement is appropriate? When does care become unhealthy enmeshment? How can teachers sustain caring without experiencing burnout? Mr. Zhang articulated the tension:

“Teachers must balance compassionate engagement with professional boundaries. If I become too personally invested in every struggling child, I risk emotional exhaustion that ultimately diminishes my effectiveness. But maintaining complete professional distance feels morally wrong when children desperately need care. Finding this balance is challenging, especially without organizational support or guidance.”

Some teachers reported experiencing secondary traumatic stress from prolonged exposure to children’s suffering. Ms. Liu, who heard the most distressing disclosures in her mental health role, described:

“I carry stories of abuse, neglect, and overwhelming sadness that children share with me. These stories affect my own mental health—I experience vicarious trauma, have intrusive thoughts about children’s circumstances, and sometimes feel hopeless about our capacity to make meaningful differences. I don’t have anyone to debrief with about this psychological burden.”

A typology of teacher adaptive orientations. Analysis revealed that teachers’ responses to role ambiguity were not uniform. They reflected distinct adaptive orientations grounded in how each teacher negotiated the tension between caring imperatives and structural constraints. I want to be clear that these are adaptive orientations rather than fixed personalities. The same teacher might shift between them depending on energy, institutional conditions, and the specific child in front of her. But across the eight interviews, three patterns emerged clearly enough to name.

The *Compassionate Extensionists*—Ms. Li, Ms. Wang, and Ms. Wu in my sample—consistently extended themselves beyond professional boundaries driven by relational caring. They accepted personal costs including financial expenditure, sleep disruption, and emotional exhaustion, often while experiencing cumulative burnout. Their frustration, when it surfaced, tended to turn inward as exhaustion rather than outward as systemic critique.

The *Boundaried Pragmatists*—Mr. Zhao was the clearest example in my data—recognized their limitations and provided support within their perceived competence. They expressed frustration at systemic inadequacy rather than at personal insufficiency, and they actively worked to distinguish between problems they could address and those that required professional intervention which was simply unavailable. Mr. Zhao was not less caring than the Extensionists. He held a different belief about what unpaid compensatory labor should reasonably be asked of a teacher.

The *Systemic Advocates*—Mr. Zhang and Ms. Liu—combined individual caring with articulated critique of structural conditions. They channeled their moral distress into advocacy for institutional change and explicit identification of policy contradictions. Both held some formal authority (principal, mental health teacher) that gave their critique a professional register. They talked about individual children with real tenderness, but they also talked about the need for fundamental reform.

These orientations were not fixed personality types but contextual responses shaped by professional experience, role positioning, and individual resources for sustaining care. I want to name what this typology is doing, because I think it matters. It pushes against the implicit expectation that all teachers should respond to the same structural problem with the same level of self-sacrifice. Different responses reflect different readings of the ethical situation, and all three readings have merit. Training programs that treat all teachers as potential Extensionists risk accelerating burnout among exactly the people most likely to leave the profession.



Analysis. Role ambiguity represents a critical internal factor constraining effective mental health education. Teachers extend themselves beyond typical professional boundaries driven by genuine care and the evident needs of their students, yet this extension occurs without clear institutional definitions, adequate training, or systemic support. The resulting emotional labor proves unsustainable and risks teacher burnout that ultimately harms both educators and students. This factor illuminates the tension between individual teacher dedication and inadequate organizational infrastructure. Schools depend on teachers' discretionary extraordinary effort rather than establishing sustainable support systems. Reading this through the integrated framework: ecological constraints at the exo- and macro-system levels produce impossible demands at the micro-system level, and Care Ethics reveals that those impossible demands are not morally neutral. They impose costs that individual teachers absorb because the system has no other way to respond.

Resource Scarcity and Infrastructure Deficiencies

The most fundamental internal constraint teachers identified was the absence of adequate mental health infrastructure. Although Huaxing Primary School employed one designated mental health teacher, Ms. Liu served 230 students across all grades while also teaching social studies classes. This ratio proved dramatically insufficient for addressing complex psychological needs. Ms. Liu explained:

"I am the only person with any mental health training serving this entire school. I conduct occasional group activities about emotions or friendship skills, but individualized counseling is impossible. If I spent 30 minutes with every student showing significant psychological difficulties, I would need literally 10 hours per day just for counseling, leaving no time for my other responsibilities. The demand vastly exceeds my capacity."

The school lacked basic counseling infrastructure including private office space, assessment tools, and documented referral procedures. Ms. Liu described conducting limited individual support in borrowed spaces:

"I don't have a dedicated counseling room. I use empty classrooms when available, the teacher lounge when colleagues are teaching, or the library corner. These improvised spaces lack privacy and psychological safety. Children know other people might overhear conversations, which prevents full disclosure."

External mental health services were essentially nonexistent. The nearest county mental health clinic was 35 kilometers away with limited child psychiatry capacity, and most families lacked both transportation and financial resources for accessing services. Mr. Zhang confirmed:

"If we identify a child needing mental health intervention beyond what our school can provide—severe depression, trauma requiring specialized treatment—there's nowhere realistic to refer them. The county clinic has one pediatric psychiatrist with months-long waiting lists. Most grandparent guardians cannot navigate that system or afford medications. So children with serious mental health conditions essentially go untreated."

Teachers also described overwhelming workloads that precluded devoting sustained attention to individual children's psychological needs. Beyond classroom instruction and preparation, they assumed substantial administrative responsibilities including documentation, reporting, meeting attendance, and compliance with numerous governmental mandates. Ms. Li explained:

"My typical day begins at 7:00 AM and ends around 6:00 PM, filled constantly with teaching, grading, documentation, supervising lunch and recess, meeting with other teachers or administrators, and completing required reports. After school hours, I prepare lessons and grade assignments. There's virtually no time designated specifically for addressing students' mental health or conducting individualized support, even though I recognize these needs as critical."



Rural teacher shortages exacerbated workload pressures. Teachers frequently covered colleagues' classes during sick leave or managed oversized classes when teaching positions remained unfilled. Mr. Zhang described the staffing situation:

"We are perpetually understaffed. When teachers resign, which happens regularly as younger teachers seek urban positions, replacing them takes months or doesn't occur at all. Remaining teachers absorb increased responsibilities. This chronic understaffing makes providing individualized attention to struggling children nearly impossible despite our intentions."

Administrative documentation requirements consumed substantial time. Teachers described completing detailed records about left-behind children's situations, regular reporting to authorities about care services provided, and participating in meetings ostensibly supporting left-behind children but actually focused on compliance verification. Ms. Wu expressed frustration:

"So much time goes to documenting that we're helping left-behind children—completing forms, writing reports, attending meetings about procedures—but little time remains for actually helping them. The bureaucracy designed to support these children sometimes feels like it primarily generates paperwork rather than meaningful assistance."

Analysis. Resource scarcity and infrastructure deficiencies constitute fundamental internal barriers preventing effective mental health education implementation. Schools cannot provide adequate support without sufficient specialized personnel, appropriate facilities, reasonable teacher-student ratios, and protected time for mental health work. Current conditions force teachers to choose between competing demands—academic instruction, administrative compliance, and student psychological support—inevitably resulting in inadequate attention to mental health despite recognition of its critical importance. This factor highlights the inadequacy of policy mandates unaccompanied by corresponding resource allocation. It also converges with international evidence from Georgia (Antia et al., 2022), Australia (Dabrowski et al., 2024), and Scotland (Maclean & Law, 2022), suggesting that the gap between mental health mandates and resource allocation is a transnational pattern rather than a uniquely Chinese problem.

Deficiency in Professional Training and Mental Health Competencies

Teachers universally identified inadequate professional preparation as a major barrier to effective mental health education. Most teachers' psychological knowledge derived from general educational psychology courses taken years earlier during normal university education, with little specific content about trauma, grief, attachment disruption, or psychopathology recognition. Ms. Wang described:

"I took one educational psychology course in university that covered child development theory. That's the extent of my formal mental health training. I've learned informally through years of experience observing children, but I don't feel truly competent to assess psychological problems or implement evidence-based interventions. I mostly rely on intuition and common sense."

Available professional development prioritized academic instruction, curriculum implementation, and examination preparation rather than social-emotional learning or mental health education. Teachers described occasional workshops on classroom management or parent communication, but these rarely addressed the specific challenges of supporting left-behind children. Ms. Chen reflected:

"The Education Bureau offers professional development courses, but they focus on teaching methods for mathematics or Chinese language arts. I've never attended training specifically about supporting children experiencing parental separation, recognizing symptoms of depression or anxiety, or conducting mental health interventions. This knowledge gap undermines my effectiveness."



Teachers expressed strong desire for specialized training. When asked what professional development would be most valuable, every single teacher mentioned mental health topics. Mr. Zhao articulated what the others only implied:

"I want training helping me recognize when a child needs help beyond what I can provide, when behaviors indicate serious mental health problems versus normal development or temporary reactions to stress. I want strategies for having difficult conversations with children about sensitive topics. I want practical classroom techniques for building resilience and social-emotional competencies. I don't expect to become a therapist, but foundational knowledge would dramatically improve my confidence and capability."

The training deficit manifested in teachers' uncertainty about appropriate responses to concerning behaviors. Teachers described relying on subjective judgment rather than systematic assessment, unsure when behaviors warranted intensive intervention versus monitoring. Ms. Liu, despite being designated mental health teacher, acknowledged her own limitations:

"I completed a brief training program, but it provided only superficial overview. I lack deep understanding of child psychopathology, trauma-informed practice, or evidence-based interventions. When faced with complex cases, I often feel uncertain about appropriate responses and worry about making situations worse through inappropriate actions."

This lack of preparation extended to specific skills needed for supporting left-behind children. Teachers lacked knowledge about attachment theory and how parental separation affects attachment security. They lacked strategies for addressing self-blame cognitions and cognitive distortions. They lacked techniques for teaching emotion regulation to children who had never developed these skills. And they lacked approaches for collaborating effectively with grandparent guardians who held very different beliefs about child-rearing.

Analysis. Professional training deficiencies represent a critical internal factor undermining mental health education quality. Teachers cannot provide effective support without foundational knowledge, practical skills, and confidence in their competencies. Current preparation systems fail to equip educators with specialized knowledge required for supporting traumatized, attachment-disrupted children. This gap means well-intentioned teacher efforts may prove ineffective or inadvertently harmful, while teachers experience professional stress from being expected to address needs beyond their preparation. The finding converges with Maclean and Law's (2022) Scottish evidence—only 4 percent of primary teachers felt adequately prepared for mental health work—suggesting training deficits represent a universal challenge requiring structural solutions rather than localized fixes.

Evaluation System Pressure: Academic Achievement Priority Over Well-Being

Teachers described institutional evaluation systems that prioritized academic achievement and examination performance, effectively marginalizing mental health education despite official policies emphasizing its importance. School performance assessments, teacher evaluations, and resource allocations centered on academic metrics. This created systemic pressure that constrained the time and attention teachers could devote to students' psychological well-being.

Ms. Chen explained how evaluation pressures shaped daily priorities:

"We are evaluated primarily on students' examination scores. My professional advancement, salary bonuses, and reputation depend substantially on my class's academic performance. While administrators verbally emphasize caring for students' mental health, the actual reward systems incentivize focusing on test preparation. When I must choose between extra test review and a social-emotional learning activity, the pressure to prioritize academics is enormous."



This evaluation structure created tension between competing professional responsibilities. Teachers recognized left-behind children's psychological needs as critical, yet institutional incentives drove focus toward academic outcomes. Mr. Zhang acknowledged the systemic contradiction:

"We tell teachers to support students' mental health and well-being, but then we evaluate schools and teachers primarily on test scores. This sends contradictory messages. Teachers face impossible choices—spend time addressing a child's emotional crisis or maintain instructional pace to ensure examination readiness? The evaluation system effectively answers that question by rewarding academic results regardless of psychological costs."

The prioritization of academic achievement manifested in time allocation. Examination preparation consumed increasing proportions of instructional time, particularly as assessment periods approached, leaving minimal space for activities promoting social-emotional competencies. Ms. Wang described:

"As examinations approach, pressure intensifies to dedicate every minute to test preparation. Activities like class meetings discussing feelings, group projects building collaboration skills, or individual conversations with struggling students get eliminated as 'luxuries' we cannot afford when test scores are at stake. This happens despite knowing these children desperately need non-academic support."

Teachers also noted that mental health education lacks formal curricular status and structured instructional time. Unlike mathematics or Chinese language arts with designated class periods, mental health education exists as supplementary activity teachers implement informally when possible. Ms. Liu explained:

"Mental health education has no protected time in our schedule. I'm supposed to conduct group activities, but when academic demands intensify, administrators ask me to reduce or eliminate these sessions to provide more test preparation. Without formal curricular standing, mental health work is perpetually vulnerable to being deprioritized."

Analysis. Evaluation system pressure represents a powerful internal factor constraining mental health education implementation despite official policy emphasis. Institutional incentive structures that reward academic achievement while failing to recognize or incentivize mental health education inevitably shape teacher behavior and school priorities. Teachers face impossible choices between competing demands, with evaluation pressures systematically driving focus toward measurable academic outcomes regardless of students' psychological suffering. This factor illustrates how macro-system cultural values prioritizing educational achievement penetrate micro-system teacher-child interactions through institutional evaluation mechanisms. It is not merely an administrative problem at the school level. It is a manifestation of deeply embedded cultural priorities operating through institutional channels that ecological theory's macro-system level captures precisely.

External Factors: Constraints from Society and Family

External factors encompass social and family-level conditions operating beyond school boundaries that constrain effective mental health education implementation. Teachers identified three major categories of external barriers: family dysfunction and guardian limitations, social support system deficiencies, and economic and policy pressures driving family separation.

Family Dysfunction and Guardian Limitations: Intergenerational Caregiving Challenges

Communication and collaboration with grandparent guardians presented persistent challenges that fundamentally shaped teachers' capacity to support left-behind children effectively. Teachers described



multiple dimensions of guardianship limitations impeding coordinated home–school mental health education.

Educational Limitations and Literacy Barriers. Many grandparent guardians possessed minimal formal education, creating communication obstacles. Teachers estimated approximately 40 percent of grandparents had elementary school education or less, with some functionally illiterate. This impeded written communication through notices or assignment books and limited grandparents' capacity to assist with homework or reinforce academic expectations. Ms. Wang explained:

“When I send written notices home about school events, parent-teacher conferences, or behavioral concerns, many grandparent guardians cannot read them independently. They must find literate neighbors or wait for older grandchildren to read aloud. This delays communication and sometimes means important information never reaches guardians. I try to communicate verbally when possible, but reaching 30+ families requires significant time.”

Educational limitations also affected grandparents' understanding of children's developmental needs. Teachers described grandparents focused primarily on physical well-being—adequate food, clothing, shelter—while less attuned to psychological, social, or educational requirements. Mr. Zhao reflected:

“Grandparents ensure children are fed and safe, which is certainly important. But they may not recognize signs of emotional distress, understand the importance of peer relationships, or appreciate how parental absence affects psychological development. They think if a child eats regularly and attends school, everything is fine, even if the child is deeply unhappy.”

Physical and Practical Constraints. Elderly grandparents faced mobility limitations preventing school visits. Teachers described grandparents in their sixties and seventies who could not easily travel several kilometers to school for conferences or activities, especially given the mountainous terrain and limited transportation options. Ms. Chen noted:

“When I suggest a grandparent come to school to discuss a child's behavioral or academic concerns, they often cite difficulty traveling. Perhaps they don't have transportation, or the walk is too difficult given health problems like arthritis or heart conditions. So communication defaults to brief conversations when they drop off or collect children, which doesn't allow for substantive discussion.”

Economic constraints shaped grandparents' priorities and capacity to respond to school recommendations. Grandparents managing subsistence agriculture while caring for multiple grandchildren had limited time and financial flexibility. If teachers suggested interventions requiring resources—purchasing books, arranging tutoring, seeking medical or psychological consultation—grandparents often lacked means to comply. Ms. Liu explained:

“I can recommend that a child would benefit from counseling or that purchasing certain educational materials would support learning, but these recommendations are meaningless if grandparents cannot afford them. I sometimes feel I'm identifying problems without realistic solutions given families' economic realities.”

Generational Differences and Cultural Perspectives. Generational differences in child-rearing philosophies created friction. Teachers trained in contemporary educational approaches emphasizing social-emotional learning, positive discipline, and children's psychological needs sometimes clashed with grandparents' traditional approaches prioritizing obedience, physical punishment, and academic pressure. Ms. Wang described:



"I try to explain to grandparents that harsh punishment or excessive pressure can harm children's mental health, but they sometimes view these concerns as modern indulgence. They might say things like 'We raised our own children with strict discipline and they turned out fine,' or 'Children today are too soft.' Bridging these different understandings requires patience and cultural sensitivity."

Attitudes toward mental health and psychological problems reflected generational and cultural perspectives. Some grandparents dismissed psychological concerns as weakness or self-indulgence rather than legitimate health issues, hindering help-seeking. Mr. Zhang explained:

"I've encountered grandparents who don't believe in mental health problems, especially for children. They might say a depressed child is just 'lazy' or 'spoiled' rather than recognizing psychological distress. This perspective prevents them from taking appropriate actions or seeking help, leaving children without necessary support."

Language and communication style differences also emerged. Some grandparents spoke local dialects or ethnic languages as primary languages, requiring children to translate during school communications. Additionally, some grandparents demonstrated deferential attitudes toward teachers as authority figures, agreeing verbally to suggestions without genuine understanding or commitment to follow through. Verbal agreement disguised incomprehension, and the teacher only discovered the gap later when nothing had changed.

Occasional Resistance and Defensiveness. Some grandparents responded defensively when teachers raised concerns about children's well-being, interpreting feedback as implicit criticism of their caregiving. Teachers described walking delicate lines between advocating for children and maintaining positive relationships with guardians. Ms. Chen recounted:

"I once tried to discuss with a grandmother that her granddaughter seemed very sad and withdrawn, suggesting the child might benefit from extra emotional support. The grandmother became quite upset, saying 'Are you saying I'm not taking good care of her? I cook every meal, keep her clothes clean, make sure she gets to school!' She interpreted my concern as accusation of neglect, which wasn't my intention. After that interaction, she avoided contact with me."

This defensive dynamic complicated efforts to mobilize family resources for supporting children's mental health. Teachers learned to frame concerns diplomatically, emphasizing collaboration and shared interest in children's well-being, but even careful communication sometimes triggered defensiveness.

Chrono-system dimension. Teachers noted that guardianship challenges intensified over developmental time. Initially, grandparents managed adequate care for younger children whose needs were more physical and visible. But as children entered pre-adolescence, the gap between their increasingly complex emotional needs and their grandparents' caregiving capacity widened. What worked for a seven-year-old did not work for an eleven-year-old. This temporal escalation pattern is consistent with developmental theory and shows up clearly in the teachers' accounts.

Analysis. Family dysfunction and guardian limitations constitute a critical external factor constraining mental health education effectiveness. Grandparents' educational limitations, physical constraints, generational perspectives, and occasional defensive reactions impede the home-school meso-system collaboration essential for coordinated child support. Teachers cannot effectively address children's psychological needs without active family partnership, yet current guardianship arrangements create substantial barriers to such collaboration. This factor illustrates how family micro-system deficits constrain school micro-system interventions, demonstrating the meso-system linkage importance emphasized in ecological systems theory.



Social Support Deficiencies: Community and Professional Resource Gaps

Teachers consistently identified the absence of community-based mental health services and professional resources as a fundamental external constraint preventing effective response to left-behind children's needs. Rural communities lacked robust support infrastructure that could complement school-based efforts.

Absence of Professional Mental Health Services. External mental health services were essentially nonexistent within practical geographic and financial reach of most families. The nearest county mental health clinic was located 35 kilometers distant, requiring transportation most families did not possess. Even when families could reach the clinic, services proved inadequate. Mr. Zhang described:

"The county mental health clinic has one pediatric psychiatrist serving the entire county. Waiting lists extend months. The clinic also lacks child-friendly spaces and age-appropriate assessment materials. Most importantly, treatment costs exceed most families' financial capacity, especially given that migrant parents send limited remittances and grandparents survive on minimal pensions or agricultural income."

This service absence meant children with serious mental health conditions—severe depression, trauma disorders, self-harm behaviors requiring intensive intervention—essentially went untreated. Teachers felt helpless recognizing that children needed specialized care beyond school capacity yet having nowhere to refer them. Ms. Liu reflected:

"I sometimes identify children who clearly need professional psychiatric or psychological intervention. But there's no realistic referral pathway. I can suggest to grandparents they seek professional help, but they look at me with confusion because they don't know where such help exists or how they would access it. So children continue suffering without appropriate treatment."

Community Support System Gaps. Beyond professional mental health services, communities lacked broader support infrastructure that could assist vulnerable children. After-school programming, youth centers, mentorship programs, or structured activities providing supervised time, skill development, and positive adult relationships were virtually absent in rural areas. Ms. Chen explained:

"In cities, children can participate in after-school programs, community centers, sports leagues, or other organized activities. These provide supervision, structure, and additional adult mentorship. Our rural children have no such options. After school, they go home to elderly grandparents or are left unsupervised. They miss opportunities for guided skill development, positive peer interaction in structured settings, and relationships with caring adults beyond family and school."

Community-level awareness and capacity for supporting vulnerable children remained limited. Village governance structures, while theoretically positioned to identify at-risk children, typically lacked mental health expertise or resources to provide meaningful support. Social workers, case managers, or community health workers who might conduct home visits, coordinate services, or provide family support did not exist in most rural communities.

Social stigma around mental health persisted in rural communities, discouraging help-seeking even when services existed. Teachers described families fearful of negative judgments, worried about children being labeled as "problematic," prioritizing concealing difficulties rather than seeking assistance. This stigma created an additional barrier to connecting children with needed support.



Geographic Isolation and Transportation Barriers. Geographic isolation itself constituted a significant barrier. Mountainous terrain, dispersed settlements, and limited transportation infrastructure meant that even services existing in county seats proved practically inaccessible. Ms. Wu described:

“Some families live in villages 15 to 20 kilometers from the county town, connected by rough mountain roads. They lack personal vehicles and public transportation is infrequent or nonexistent. Even if free mental health services existed in the county seat, many families couldn’t realistically access them. Geographic isolation effectively cuts off rural populations from services urban residents take for granted.”

Analysis. Social support deficiencies represent a fundamental external factor preventing effective mental health intervention. Schools cannot independently address complex psychological needs requiring specialized professional care, family support services, and community infrastructure. Current conditions leave rural teachers as the sole mental health resources for vulnerable children—a responsibility they are neither prepared nor positioned to fulfill adequately. This factor demonstrates how exo-system-level resource gaps constrain micro-system-level interventions, highlighting the necessity of multi-level ecological interventions rather than sole reliance on school-based efforts.

Economic and Policy Pressures: Structural Drivers of Family Separation

Teachers identified macro-system-level economic and policy factors as fundamental drivers of family separation, constituting external constraints beyond any individual school’s capacity to address yet profoundly shaping children’s psychological well-being and teachers’ support challenges.

Economic Necessity of Labor Migration. Teachers universally recognized that parental migration reflected economic necessity rather than parental choice or inadequate commitment to children. Substantial urban-rural income disparities made migration economically imperative for many families seeking basic security. Mr. Zhang explained:

“Parents don’t want to leave their children. Every parent I’ve spoken with expresses sadness about separation and wishes they could remain together. But rural agricultural income cannot support families adequately. Parents migrate not by preference but by necessity—to earn money for food, school fees, medical care, and basic survival. We cannot address left-behind children’s problems without acknowledging the economic forces compelling family separation.”

Teachers described understanding parents’ impossible choices between economic security and physical presence with children. This understanding generated sympathy for both migrant parents and left-behind children while also highlighting the systemic inadequacy of relying on individual families to resolve what are essentially structural economic problems. Ms. Chen reflected:

“When I see a child suffering from parental absence, I don’t blame the parents. They’re trapped by circumstances beyond their control. The problem isn’t individual families making poor choices—it’s an economic system where rural areas lack sufficient livelihood opportunities, forcing families into impossible decisions. Until rural economic development creates local employment, migration will continue and children will continue being left behind.”

Policy Structures: The HuKou System. Teachers demonstrated awareness of how China’s HuKou household registration system created structural barriers to family reunification. The system restricts rural migrants’ access to urban social services including public education, healthcare, and social welfare, effectively preventing many families from bringing children to cities despite parental desire for reunification. Ms. Liu explained:

“Parents cannot simply bring children to cities where they work. Without urban HuKou, children cannot access public schools and parents must pay expensive private school tuition or send children to lower-quality migrant schools. Healthcare access is limited. Housing is



prohibitively expensive. The HuKou system essentially forces families to separate—parents can work in cities but cannot establish stable family life there. This policy structure creates the left-behind children phenomenon at massive scale.”

Teachers noted that policy reforms since 2014 have gradually relaxed these restrictions, particularly in smaller cities, but substantial barriers remain in major metropolitan areas where employment opportunities concentrate. While appreciating policy evolution, teachers emphasized that current restrictions continue preventing family reunification for most migrant families.

Parental Workplace Conditions. Exo-system-level factors including parental workplace conditions in distant cities determined frequency of home visits and availability for phone communication, thereby affecting parent-child relationship quality. Teachers described understanding that parents working in manufacturing, construction, or service sectors faced demanding schedules, limited personal time, and sometimes employer restrictions on personal phone use that constrained parent-child contact. Ms. Wang explained:

“I’ve spoken with parents who work 10 to 12 hour days, six days per week in factories or construction sites. They’re exhausted during limited free time and may share dormitory rooms with multiple other workers, lacking privacy for meaningful conversations with children. Some employers restrict phone use during work hours. These workplace conditions make maintaining high-quality parent-child communication extremely difficult, regardless of parental motivation.”

Cultural Values and Educational Pressure. Macro-system cultural values around educational achievement intensified psychological pressure on left-behind children. Teachers described how cultural narratives linking children’s academic success to family honor, filial piety, and justification for parental sacrifice created impossible expectations. This cultural context, while not causing the left-behind phenomenon directly, substantially shaped children’s psychological responses to separation. The same cultural force that drove parents to migrate in the first place also amplified the guilt children felt when their grades did not meet impossible standards.

Analysis. Economic and policy pressures constitute fundamental external factors creating the left-behind children phenomenon and constraining intervention effectiveness. These macro-system-level structural conditions operate beyond any individual school’s control yet profoundly shape micro-system-level teacher-child interactions and children’s psychological well-being. Teachers recognized that truly addressing left-behind children’s needs requires macro-system structural reforms—rural economic development, HuKou policy modifications, improved migrant worker conditions—not solely micro-system interventions within schools. This factor demonstrates ecological systems theory’s emphasis on multi-level analysis and intervention necessity.

Synthesis: Dynamic Interaction Between Internal and External Factors

Separating internal from external factors was analytically useful, but it risks creating a false impression that the two dimensions operate on parallel tracks. They do not. They interact in specific, identifiable ways that compound to create self-reinforcing implementation failure. Four mechanisms kept appearing in the data, and I want to name each one because I think naming them matters for intervention design.

Mechanism 1: Burden displacement. When community mental health services are absent (external gap), the resulting need does not disappear—it lands on teachers (internal overload). Ms. Liu is effectively doing the work that a county clinic with functional staffing would be doing, minus the training, the time, and the professional supports. The absence of one thing creates the overload of another. This is the clearest example of how an exo-system failure transforms into a micro-system crisis.





Mechanism 2: Communication breakdown. Teachers lack training in collaborating with grandparent guardians (internal gap); grandparents lack literacy and cultural schemas for home–school partnership (external gap). Put these two gaps together and you get a meso-system that barely functions. Home and school operate as parallel tracks that should be intersecting. Each gap, taken alone, would be manageable. Together they produce a near-total breakdown in coordinated support.

Mechanism 3: Value–practice contradiction. The same macro-system cultural value—educational achievement as filial piety—simultaneously drives parental migration (which produces left-behind children) and shapes school evaluation systems (which prevent teachers from addressing the resulting psychological needs). The cause of the problem and the obstacle to the solution are the same cultural force, operating at different levels of the ecological system. This is why piecemeal reform tends to fail. You cannot fix the school-level evaluation pressure without also grappling with the macro-level cultural beliefs that produced it.

Mechanism 4: Temporal compounding. Unaddressed needs do not stay constant; they deepen. A grade-two child’s mild self-blame becomes a grade-five child’s entrenched cognitive distortion. The interventions that would have worked two years earlier no longer suffice. And the system’s capacity to respond has not grown in the meantime—if anything, it has shrunk as teachers have left for urban positions. The gap between what the child needs and what the system can offer widens over developmental time. This mechanism particularly argues for early intervention over later intensive remediation.

Teachers’ descriptions revealed clear awareness of these multi-level interactions. Ms. Liu pulled the whole picture together in one sentence near the end of her interview:

“We face problems at every level—I personally lack training, our school lacks resources, grandparents lack capacity to support children emotionally, communities lack mental health services, and families are torn apart by economic necessity and policy restrictions. These problems reinforce each other. Addressing any single factor would help but cannot solve the overall situation. We need reform across multiple levels at once simultaneously.”

That is the finding in its clearest form. The implementation failure is not localized. It is distributed across every level of the ecological system, and the levels reinforce each other. This systems perspective, consistent with ecological theory, suggests that effective interventions require coordinated multi-level efforts rather than isolated changes at single ecological levels. The subsequent chapter proposes strategies addressing both internal and external factors simultaneously.

Discussion

I want to highlight what I think this study contributes and where it needs to be read with caution.

The main theoretical contribution is the integration of Ecological Systems Theory with Care Ethics as a single analytical argument rather than two parallel lenses. EST tells you where the pressure comes from. Care Ethics tells you what it costs the people in the pressure’s path. Neither alone captures what rural teachers of left-behind children experience. Together, they reveal that teacher burnout is not a motivational failure but a predictable outcome of structural–ethical misalignment. Systems demand care at the micro-system level while denying the conditions for sustainable caring at the exo- and macro-system levels. This is not a complaint; it is a diagnosis. And diagnoses matter because they point toward different interventions. If burnout is a motivational problem, the fix is pep talks and workshops on resilience. If it is a structural problem, the fix is resource allocation and policy reform. The two diagnoses point in completely different directions. Mistaking one for the other wastes scarce intervention resources on symptoms rather than causes.

The factor analysis framework, by distinguishing internal micro-system factors from external exo-/macro-system factors while explicitly modeling their meso-system interactions, operationalizes ecological



theory for intervention planning. This analytical structure is not specific to left-behind children research. It applies to any context where school-based implementation faces multi-level constraints. Future studies on rural education, disadvantaged populations, or cross-cultural educational interventions could use the same framework to diagnose where barriers sit and at what level they need to be addressed.

The typology of teacher adaptive orientations—Compassionate Extensionists, Boundaried Pragmatists, Systemic Advocates—is a modest contribution, but I think it has practical value. It captures qualitatively different negotiation strategies with distinct implications for sustainability. Extensionists risk burnout. Pragmatists risk moral guilt. Advocates may face institutional resistance. Training programs that treat all teachers as potential Extensionists risk accelerating burnout among exactly the people most likely to leave the profession. Training that recognizes Pragmatist and Advocate orientations as legitimate expands the space of sustainable engagement with the work. This is not an abstract point. Given that nearly 80 percent of rural Yunnan teachers expressed a desire to leave their posts (Liu et al., 2024), any intervention that accelerates burnout among the most committed teachers works against the entire policy goal of improving mental health education in rural schools.

The four interaction mechanisms—burden displacement, communication breakdown, value–practice contradiction, and temporal compounding—push ecological analysis beyond structural description toward dynamic explanation. Tong and An’s (2024) review noted that most EST applications underuse the chronosystem and treat the framework as a static map of nested environments. The temporal compounding mechanism in particular responds to that gap. It matters because it argues for early intervention over later intensive remediation, and that argument has real resource-allocation implications. A counseling conversation in grade two is cheap compared to the trauma therapy a child may need in grade eight because no one noticed in grade two. The math favors early intervention even if the political and institutional pressures favor visible remediation of acute crises.

One finding I want to flag is the convergence between this study and international evidence. Resource scarcity in rural Yunnan schools matches resource gaps in rural Georgian schools (Antia et al., 2022), under-supported Australian teachers (Dabrowski et al., 2024), and Scottish primary teachers who feel unprepared for mental health work (Maclean & Law, 2022). The gap between mental health mandates and resource allocation is not a Chinese peculiarity. It is a transnational pattern. What varies is the cultural and policy context in which the gap sits. Graham and Jordan’s (2011) Southeast Asian findings remind us that cultural mediators shape psychological manifestations, and cross-cultural work on intervention barriers would be valuable.

I do want to caution against overgeneralizing from this study’s Chinese context to other settings. The value–practice contradiction mechanism is especially culturally inflected. China’s particular linkage between educational achievement and filial piety intensifies the psychological pressure on left-behind children in ways that may not translate directly to other contexts. Fellmeth et al.’s (2018) *Lancet* review found that 82 percent of included studies came from China, which raises the risk of treating China-specific dynamics as universal features of left-behind childhood. More cross-cultural qualitative work is genuinely needed before any of these findings can be claimed as universal patterns.

Practical Implications

Practical implications span multiple levels and stakeholder groups.

For educational administrators, the findings suggest prioritizing mental health staffing, professional development, workload adjustment, and organizational culture changes that value whole-child education alongside academic achievement. One designated mental health teacher for 230 students is not a functioning mental health system. It is a policy checkbox. Real support requires real staffing.

For policymakers, the findings point toward addressing the evaluation system contradiction, rural investment inadequacies, and structural barriers to family reunification. Telling teachers to support mental





health while rewarding them only for test scores sends a contradictory message that the incentive structure resolves in favor of the scores. Any reform that changes teacher behavior has to change what teachers are evaluated on.

For teacher educators, the findings argue for integrating trauma-informed practice, attachment theory, family collaboration with diverse guardian types, boundary-setting skills, and vicarious trauma recognition into both pre-service and in-service programs. The current one-or-two-courses approach to educational psychology is insufficient for the demands rural teachers face daily.

For school-community partnerships, the findings suggest developing grandparent education programs, community liaison positions employing local young adults, and formalized peer support systems. Teachers at Huaxing had already invented informal versions of several of these. The task is to make them official and sustainable.

Most fundamentally, the findings demonstrate that multi-level coordinated interventions addressing internal school factors and external social-family systems simultaneously are necessary. Isolated single-domain reforms prove insufficient because the problems are distributed across levels and reinforce each other. A training program without resource allocation cannot work. A resource allocation without cultural reform cannot work. Each level's reform is necessary but not sufficient. All levels need to move together.

Conclusion

This study started with a question: what stops mental health education from working for left-behind children in rural primary schools, and how do the obstacles interact?

The answer, as it emerged from eight teachers at Huaxing Primary School, is that the obstacles are distributed across every level of the ecological system and interact in ways that amplify each other. Internal factors—unclear roles, thin resources, training gaps, evaluation pressures—combine with external factors—guardianship limits, absent community services, structural economic and policy pressures—to produce a self-reinforcing pattern of implementation failure. Four mechanisms carry the weight of the interaction: burden displacement, communication breakdown, value–practice contradiction, and temporal compounding. Teachers navigate these constraints through three adaptive orientations, each with its own sustainability profile. None of these adaptive orientations can substitute for the structural reforms the situation actually requires.

Teachers at Huaxing demonstrated remarkable professional dedication. They extended themselves beyond traditional boundaries to provide compensatory emotional care for vulnerable students experiencing parental separation. They purchased supplies with personal funds. They listened to traumatic disclosures without access to clinical supervision. They lay awake at night worrying about particular children. Simultaneously, they navigated overwhelming constraints that systematically undermined their effectiveness despite genuine dedication. The gap between what teachers are willing to give and what the system enables them to give is the real story of this research.

What teachers cannot do alone, they should not be expected to do. That is the short version of my argument. The longer version fills the recommendations section below.

Limitations

I want to be explicit about what this study cannot claim.

First, the geographic focus on a single rural school in Yunnan limits transferability to other regions, urban contexts, or settings beyond China. Huaxing is not Yunnan, Yunnan is not rural China, and rural China is not the global left-behind phenomenon. Other settings will look different, and claims about findings should be made cautiously.

Second, the eight-teacher sample is appropriate for qualitative research objectives and consistent with empirical evidence that nine to seventeen interviews typically achieve code saturation for homogeneous populations (Hennink & Kaiser, 2022). But it cannot capture the full range of teacher experiences across





career stages, philosophical orientations, or institutional contexts. A larger sample might have revealed additional adaptive orientations beyond the three I identified, or refined the boundaries between the three.

Third, the sample is ethnically skewed. Seven of the eight participants are Han, in a province where ethnic minorities make up a substantial portion of the population. I have almost nothing to say about the specific linguistic and cultural barriers facing Yi, Hani, or Bai families, and this is a real gap given how central ethnic diversity is to Yunnan's educational landscape. A follow-up study recruiting specifically from schools serving predominantly ethnic minority populations would address this gap.

Fourth, relying exclusively on teacher interviews gives one stakeholder's perspective. Grandparents, administrators, and the children themselves would each see the same situation differently. Triangulation with these perspectives would enhance comprehensiveness, though ethical and practical considerations shaped my decision to focus on teachers. Ethical considerations about involving children in research on sensitive topics (Ellis et al., 2023) are particularly important here, and I do not think those considerations should be set aside lightly.

Fifth, **social desirability bias** is a real concern. Teachers may have over-reported their caring efforts and dedication while under-reporting frustrations, disengagement, or moments of professional inadequacy, given my perceived association with educational evaluation and academic institutional authority. My urban background and outsider status may have amplified this tendency. Reflexive journaling documented specific instances where participants appeared to shift toward more "professional" presentation—moments when an interviewee seemed to remember she was being recorded and her language tightened. But the extent to which this influenced the overall findings cannot be fully determined. Readers should keep this possibility in mind when interpreting claims about teacher caring and professional commitment.

Sixth, the internal–external categorization, while enabling systematic organization, necessarily simplifies complex ecological interactions. Strict classification proves somewhat artificial given how deeply factors interconnect. The framework serves analytical organization rather than implying factors operate independently. In reality, the line between "internal" and "external" is porous, and the interaction mechanisms I identified reflect this porousness.

Future Research Directions

Several directions would extend this study's contributions.

Longitudinal investigations following teachers over multiple years would illuminate how professional development, experience, and organizational changes shape capacity to support left-behind children across time. A three- or five-year panel study could capture how adaptive orientations evolve and whether interventions actually produce the intended shifts.

Comparative studies across schools with varying resource levels, policy contexts, or cultural settings would clarify which findings generalize versus which reflect site-specific conditions. Comparing a Huaxing-like school with a better-resourced school would test whether the interaction mechanisms I identified persist when internal factors improve, or whether external factors alone can produce the same barriers.

Multi-stakeholder perspectives including grandparents, children, administrators, and community members would provide the full 360-degree ecological view that the study's framework initially promises. My framework promises more than my data delivers, and this gap is worth closing.

Mixed-methods designs incorporating child-reported outcome measures alongside teacher interviews would enable triangulation while managing ethical considerations through age-appropriate, researcher-administered protocols (Ellis et al., 2023). This is a way to include children's voices without putting them in positions that ethical research practice would prohibit.

Cross-cultural investigation comparing left-behind children phenomena across China, Southeast Asia, Latin America, and Eastern Europe would help distinguish culture-specific dynamics from universal



patterns. Given Fellmeth et al.'s (2018) finding that 82 percent of included studies came from China, this kind of comparative work is genuinely urgent.

Intervention research designing and evaluating programs addressing identified factors would build the evidence base for specific solutions. The recommendations I offer below are grounded in teachers' experiences and theoretical analysis, but they need empirical testing before they can be claimed as effective. Implementation process studies examining real-world policy implementation would illuminate practical barriers and facilitators that remain invisible in the current literature. Chinese rural education policy has been through numerous reform cycles, and understanding what actually happens when policy hits the ground would help future reforms land better.

Concluding Reflections

Rural primary school teachers in Yunnan Province occupy critical yet profoundly under-supported positions in addressing left-behind children's mental health needs. These educators are deeply committed professionals who extend themselves substantially beyond traditional boundaries to provide compensatory emotional care for vulnerable students experiencing parental separation. At the same time, they navigate overwhelming constraints—inadequate preparation, insufficient resources, unclear role definitions, challenging family collaboration, absent community services, and systemic pressures prioritizing academic achievement—that undermine their effectiveness despite genuine dedication.

The factor analysis framework reveals that supporting left-behind children requires coordinated ecological interventions spanning internal school-level improvements and external social-family system enhancements. Internal optimizations including clarified teacher roles, embedded mental health curriculum, professional development reform, and evaluation system modifications prove necessary but insufficient without external enhancements including strengthened home-school partnerships, developed rural mental health infrastructure, and macro-level policy reforms addressing structural drivers of family separation.

China's 66.93 million left-behind children deserve educational environments responsive to their developmental needs and supportive of their psychological well-being. Teachers represent frontline agents capable of providing critical relational support, but only if equipped with adequate preparation, resources, institutional backing, and external service systems. Continued reliance on individual teachers' discretionary extraordinary efforts rather than robust institutional infrastructure proves neither sustainable nor just. The imperative remains clear: vulnerable children's well-being depends on adults collectively creating conditions enabling their healthy development, not on expecting individual teachers to compensate indefinitely for systemic inadequacies.

Recommendation

Teachers at Huaxing gave me a great deal of practical wisdom about what might actually help, mixed with clear-eyed skepticism about what is feasible. What follows builds on their suggestions and organizes them by implementation horizon rather than by importance. All of the items matter. Some can happen next year. Others will take a decade or more. Listing them by timeline makes the difference between aspirational and operational clearer.

Optimizing Internal School Factors

Clarifying Teacher Role Boundaries and Standardizing Compensatory Care. Teachers need clear institutional guidance defining the appropriate scope of their mental health responsibilities, establishing sustainable boundaries between professional caring and personal over-involvement. Currently, teachers navigate role ambiguity individually, which leads to inconsistent practice and burnout risk. Formal role definitions from educational authorities should distinguish between three categories of intervention: universal preventive efforts appropriate for all teachers, targeted interventions requiring consultation or specialized training, and intensive clinical interventions requiring referral to mental health professionals.



These definitions should acknowledge teachers' relational caring roles without making unsustainable demands.

Boundary-setting support should be built into professional development. This includes training on recognizing signs of vicarious trauma, strategies for sustaining emotional engagement without enmeshment, and self-care approaches that protect teacher well-being. Workload adjustment should formally recognize time invested in mental health education as legitimate professional responsibility rather than extra labor. Right now, the time teachers spend on this work comes out of their personal reserves. It should come out of their official workload.

Peer support and supervision systems would distribute emotional burden. Establishing regular case consultation meetings where teachers can discuss challenging situations with colleagues and ideally with mental health professionals would address the isolation Ms. Liu described when she said she has no one to debrief with. Teacher well-being programs should implement explicit teacher mental health care, including access to counseling services for educators experiencing secondary traumatic stress or burnout.

Embedding Mental Health Education in Formal Curriculum. Mental health education requires formal curricular status with protected instructional time that cannot be sacrificed during exam preparation periods. Curriculum integration would establish systematic rather than improvised mental health education. Education authorities should develop evidence-based social-emotional learning curriculum appropriate for primary grades. Schools should designate specific weekly time periods for mental health instruction, protected by policy from encroachment by academic test preparation.

Integration across subjects would systematize teachers' informal innovations. Literature lessons can address themes of loneliness, friendship, and coping with difficult feelings. Science lessons can discuss brain-emotion connections in age-appropriate ways. Physical education can teach stress management through movement. Morning meeting structures implementing brief daily check-ins provide emotional grounding and community building without requiring major curricular upheaval. Teachers' informal innovations documented in this study—peer support network facilitation, strategic strength recognition, color-coded communication systems, friendship benches—represent low-cost, culturally appropriate strategies worthy of systematic scaling across schools.

Comprehensive Professional Development Reform. Professional development systems require fundamental reform to equip teachers with mental health competencies matching the needs they actually face. Pre-service education reform should enhance normal university curriculum to include substantial mental health content: child psychopathology recognition, trauma-informed practice, attachment theory and its implications, evidence-based classroom interventions, and strategies for family collaboration with diverse guardian types.

Specialized in-service training should develop intensive programs addressing left-behind children's specific needs. These programs should cover recognition of psychological distress signs, appropriate response strategies, referral protocols, and the specific challenges of working with grandparent guardians. Practical skill development should employ active learning pedagogies—role plays, case-based discussions, supervised practice—rather than relying on didactic lectures. Purely didactic lectures prove insufficient for developing practical competencies. Teachers need opportunities to practice skills in safe settings before applying them with vulnerable children.

Ongoing consultation access should establish systems enabling rural teachers to consult with mental health professionals by phone or video conferencing when facing complex cases. This does not require every school to have a full-time mental health specialist. It requires regional specialists willing to provide remote consultation. Learning communities should facilitate formation of professional learning groups connecting rural teachers across schools, reducing isolation and enabling peer learning. Resource development should create centralized repositories of practical materials, curricula, and case examples teachers can draw on.



Reforming Evaluation Systems to Recognize Holistic Education. Evaluation systems must evolve to recognize and reward teachers' mental health work alongside academic achievement. Multidimensional evaluation should assess teacher and school performance on multiple criteria including social-emotional learning outcomes, student well-being metrics, classroom climate quality, and family engagement alongside academic achievement. Process recognition should reward teachers' efforts and adaptive strategies in addressing student mental health, not just measurable outcomes.

Longitudinal evaluation perspectives should recognize that psychological development improvements manifest gradually rather than appearing in end-of-semester test scores. Teachers should be permitted to submit qualitative case documentation demonstrating professional growth and reflective practice. This does not replace quantitative metrics entirely, but it broadens what counts as good teaching to include the work that mental health education actually requires.

Enhancing External Social Support Systems

Strengthening Home–School Communication Protocols for Grandparent Guardians.

Home–school communication needs to be redesigned for the guardians who actually exist, not for the literate, middle-class parents that standard communication systems assume. Simplified communication methods should be systematized across schools: color-coded written notices, face-to-face communication during drop-off times, pictorial guides explaining school expectations, audio messages sent through smartphones for grandparents who cannot read. Several teachers at Huaxing had already invented pieces of this informally; the task is to make these practices official rather than individual.

Grandparent education programs should be locally delivered, practically focused, culturally sensitive, peer-learning oriented, and sustained over time rather than one-time workshops. Short modules addressing common concerns—recognizing emotional distress, responding to school recommendations, understanding developmental needs—would give grandparents tools they currently lack. Transportation assistance, community liaison positions employing educated local young adults as bridges between families and schools, and modified parent-teacher conference formats held in village locations rather than at school would address access barriers that keep elderly, mobility-limited grandparents from participating in school life.

Leveraging Peer Support Systems. Structured peer mentoring programs can provide left-behind children with additional supportive relationships without relying solely on teacher extension. Older students can be trained to provide appropriate peer support to younger ones. Explicit friendship skills instruction helps children who struggle with social withdrawal develop the competencies they need. Collaborative learning pedagogies build peer relationships as a byproduct of academic work. Systematic community-building activities, such as class meetings that allow children to share experiences and feelings, create space for peer connection. Anti-stigma education reduces the shame that keeps left-behind children from seeking help from classmates or adults.

Developing Rural Mental Health Infrastructure. County-level mental health centers need expansion with adequate child-friendly services, including specialists trained to work with children and adolescents, age-appropriate assessment tools, and waiting list management that does not leave families waiting months for urgent appointments. Mobile mental health units traveling to rural schools on regular schedules would bring services to families who cannot travel to county centers. Tele-medicine can extend service access using existing infrastructure at lower cost than building new facilities everywhere.

School-based mental health clinics serving clusters of schools represent another promising model. One professionally staffed clinic serving four or five schools can provide deeper support than distributing inadequate resources across each school individually. Task-shifting models training community health workers in basic screening, brief interventions, and referral protocols would extend workforce capacity beyond the small number of specialists available. After-school programming should address the unstructured time vulnerability that leaves left-behind children with no supervised activities and no



supportive adult interaction outside school hours, while also reducing the burden on elderly grandparents who cannot realistically supervise children through afternoon and evening hours.

Policy Advocacy and Macro-Level Reforms. Continued HuKou reform enabling family reunification remains the most fundamental long-term solution. Rural economic diversification creating local employment would reduce the pressure that drives parental migration in the first place. Migrant worker support policies enabling better parent-child communication—regulated phone access, paid leave for annual family visits, affordable housing that accommodates family reunification—would reduce harm for families who still need to migrate. Income support for grandparent guardian families would reduce the economic precarity that compounds other challenges. Coordinated inter-departmental service systems integrating education, health, civil affairs, and community sectors would address the fragmentation that currently leaves left-behind children falling through institutional cracks.

Implementation Priorities and Sequencing

Rather than treating all of the above as a simultaneous wish-list, I organize recommendations into three implementation tiers based on feasibility, resource requirements, and political viability.

Immediate priorities (1 to 2 years). These are actions that could plausibly happen in the near term without requiring fundamental policy restructuring. Intensive professional development for current rural teachers in mental health competencies tops the list. Simplified communication system development for grandparent collaboration should follow immediately. Formal social-emotional learning curriculum adoption with protected instructional time can be implemented within current curricular frameworks if given political backing. Teacher workload adjustment recognizing mental health responsibilities requires administrative will but not major new resources. Digital literacy training for grandparent guardians can be built on existing community education infrastructure. Establishment of teacher peer-support networks costs little and can begin in any school where administrators support it.

Medium-term priorities (2 to 5 years). These require more substantial investment and institutional change. Substantial expansion of rural school-based mental health staffing requires sustained hiring budgets. Grandparent education program development and scaling requires curriculum development, trainer preparation, and delivery infrastructure. Pre-service teacher education reform incorporating mental health content requires changes at the university level. County mental health center expansion with active school collaboration requires health system investment and inter-sector coordination. Establishment of teacher peer supervision systems with mental health professionals requires regional workforce planning.

Long-term priorities (5+ years). These are the structural reforms that take years or decades but matter most fundamentally. Broad evaluation system reform recognizing the full range of educational work requires changing what counts as educational success at the policy level. Mobile mental health service development requires sustained investment. Rural economic development initiatives reducing migration necessity are generational work. HuKou reform enabling family reunification is outside education ministry authority but central to the problem. Coordinated inter-departmental service systems require governance reform at multiple levels.

This sequencing balances immediate implementability against systemic impact. Immediate priorities matter because they can happen now and produce near-term improvements. Long-term priorities matter because without them, the immediate priorities will continue fighting upstream against structural currents. Both matter. Neither alone is sufficient.

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