

Research on The Influencing Factors and Countermeasures of Rural Children's Mental Health Education

Xiaoyan Shui^{1,*}

¹College of Education Science, Neijiang Normal University, Neijiang, Sichuan 610000, China

*Corresponding author

Abstract

The key to achieving a strong country in education lies in the revitalization of rural education, early childhood education is the beginning of all education, children's mental health belongs to the health module, is the core concept in the concept of big health, children's mental health education is the foundation and beginning of the whole education, plays a role in the development of people's life, and will have an impact on people's lives. Therefore, understanding the influencing factors of rural children's mental health education and proposing corresponding strategies are of great importance to improving the mental health literacy of rural children. Therefore, this study used the method of literature research to sort out the research on the influencing factors of mental health education in rural children, and found that educators attach great importance to mental health education. absence of parents; Based on the lack of teachers' professional quality, unclear document guidance and lack of professional teaching materials, this study puts forward some suggestions from three aspects: concepts, teachers and teaching materials, in order to provide some references for the development of rural children's mental health education.

Keywords

Rural, Toddler, mental health education, influencing factors, countermeasure.

1. Introductory

Mental health education refers to the use of psychological methods and theories to cultivate students' mental health literacy and improve students' mental health level according to the characteristics of students' physical and mental development. It is an important core concept in the concept of big health [1]. The 2023 China Mental Health Blue Book points out that during the period of social transition, mental health issues among the population have become prominent and drawn significant attention. Among these, mental health problems within the student population are increasingly severe, with affected individuals trending younger in age. Additionally, 41% of students have taken a leave of absence due to psychological issues. Globally, 700,000 people die by suicide each year due to depression[2]. Due to the increasing trend of mental health issues among younger populations, early childhood—as the initial stage of an individual's educational journey—plays a crucial role in their development. Early childhood education is not only vital for growth but also serves as the foundation and starting point for mental health education. It exerts a lifelong influence and acts as a cornerstone in shaping an individual's overall development[3]. Additionally, as young children transition from home to school environments, their social development often encounters challenges in interpersonal interactions, potentially leading to adjustment difficulties[4]. Developmental theories, including Freud's structural model of personality and Erikson's stages of psychosocial development, highlight the formative significance of early childhood in shaping an individual's growth trajectory. This critical period substantially influences personality formation [5], and

lays the foundation for subsequent development. The sequential yet cumulative nature of psychological development demonstrates that early childhood experiences exert lasting effects on middle childhood, adolescence, and early adulthood. This aligns with the Chinese adage, “At three years old, we see the child; at seven, the adult.” Consequently, enhancing mental health education during early childhood constitutes an indispensable component of realizing the “Healthy China” strategic initiative.

Rural areas (also known as the countryside) have seen their educational development become a top national priority during China’s critical period of social transformation, poverty eradication, and urbanization advancement. In rural education, early childhood education serves as the foundation for all learning. However, the 2021 Report on Mental Health of Rural Children published by People’s Daily revealed alarming findings: rural children face significant challenges with depression and social communication. Compared to non-left-behind children, left-behind children exhibit higher rates in both indicators, with over 3% of rural children even reporting suicidal thoughts. It is evident that rural education remains a weak link in China’s overall education system, with mental health education representing an even more pronounced shortcoming within this already disadvantaged sector [6]. Therefore, focusing on rural education, early childhood education in rural areas, and the mental health education of rural young children can provide valuable insights for the revitalization of rural education. Based on this, this study adopts a literature research method, utilizing a literature review approach to explore the influencing factors of mental health education for rural young children and proposes corresponding strategies. The aim is to provide references for future related research and the development of mental health education for rural young children.

2. Factors Influencing Mental Health Education for Rural Young Children

As mental health issues become increasingly prevalent and manifest at younger ages, the psychological well-being of young children has drawn researchers’ attention. Existing studies indicate that children aged 3–6 in rural areas exhibit more pronounced behavioral and emotional problems[7]. Moreover, data from the seventh national population census reveals that in the 2020 census, the rural population totaled 50979 million, with left-behind children (aged 3-5) alone numbering 7.8 million. This indicates that the number of young children remaining in rural areas far exceeds 7.8 million[8]. Therefore, it is crucial to focus on the mental health of rural preschool children. A review of existing studies reveals that the key factors influencing the implementation of mental health education for rural preschoolers mainly include: Insufficient emphasis on mental health education in rural education systems; Parental absence (due to migration or other factors); Limited professional competence among rural early childhood educators; Weak policy guidance in relevant documents; Lack of standardized teaching materials.

2.1. The implementation of early childhood mental health education in rural areas is influenced by educators’ prioritization of psychological well-being

Scholarly observations indicate that China’s early education system continues to emphasize cognitive development over psychosocial well-being, with mental health education for young children remaining a relatively neglected area[9]. The educational development of young children primarily occurs within two spheres: the familial and institutional (school) contexts. As the dominant ecological system, the family environment—encompassing parenting approaches and parental educational values—exerts bidirectional effects on both children’s psychological well-being and caregivers’ behavioral patterns. Persistent traditional pedagogic orientations in rural communities manifest as disproportionate emphasis on cognitive skill acquisition at the expense of affective bonding and emotional support in child-rearing practices[10]. The Seventh National Population Census reveals that a majority of rural children

live with their grandparents. In the caregiving process, grandparents tend to prioritize children's physical safety while frequently overlooking their needs for respect and affection, which to some extent hinders children's social development[11]. Moreover, Zhang Zhiqin also points out that the prevalence of intergenerational parenting in rural areas often leads to excessive doting on young children[12]. Such excessive doting is more likely to exacerbate mental health issues in young children and hinders caregivers from effectively implementing mental health education. Consequently, the improper parenting approaches within families—particularly the emphasis on academic knowledge at the expense of emotional and affective development—impede the practice of mental health education for rural preschoolers in home settings.

Apart from the family, another primary setting where young children receive mental health education is school. Although mental health education is not explicitly listed as a separate domain among the five major domains of early childhood development, it falls under the health domain. Integrating mental health into the health domain for young children is crucial. However, most rural teachers lack awareness of the need to deeply understand the psychological characteristics of young children or to structure their teaching around mental health literacy[13]. Moreover, many aspects of early childhood mental health education have not even been incorporated into general health education programs. As a result, mental health education for young children has failed to garner sufficient attention from teachers[14]. Even when health-related knowledge is included in teaching, educators primarily focus on physical health, reflecting a one-sided understanding of health education, a lack of integration, and a neglect of children's interests, among other issues[15]. For example, in kindergartens of some cities, 83.13% of them have 2-3 health courses per week. However, in the content of health courses, people mostly focus on physical exercise, healthy behavior practices, and the transmission of pathogenic microorganisms[16]. And they have neglected the attention to children's mental health, thus failing to carry out mental health education.

In summary, the concept of focusing on knowledge and neglecting psychology by educators has hindered the development of mental health education for young children.

2.2. The Absence of Parents Affects the Development of Mental Health Education for Rural Children

The most prominent feature of rural early childhood education in China is the absence of parental involvement. According to the results of the seventh national population census, in 2020, the proportion of left-behind children aged 0-17 in rural areas nationwide was 22.5%, with 3-5-year-olds accounting for 18.7% of that total, reaching a total of 7.8 million children. This underscores a significant gap in parental presence in rural early childhood education [8]. Therefore, the large number of left-behind young children in rural areas is evident, not to mention the overall situation of young children in rural areas. Lin Chuanding, a Chinese psychologist, believes that the differentiation of children's emotions includes three stages: generalization stage (0-1 years old), differentiation stage (1-5 years old), and systematization stage (after 5 years old). This indicates that the early stage of childhood is a critical period for the development of individual emotions[17]. They learn socialization and ways of emotional regulation and management through imitating their caregivers. However, the absence of parents changes their imitation objects, which hinders the learning of emotional regulation. Additionally, brain science research shows that early parental absence can impede the establishment of secure attachment in children, leading to abnormalities in the brain-pituitary-adrenal axis, oxytocin, and brain development, which can affect their emotional development and socialization. The lack of maternal love can affect the brain development of young children. Maternal love plays an important role in the development of the hippocampus and amygdala in young children. The hippocampus is responsible for learning, memory, and integrating

information, while the amygdala is responsible for regulating visceral activity and emotions. The size of both structures can be influenced by maternal love[18].When individual brain mechanisms change, providing mental health education becomes less effective. Therefore, the lack of maternal love affects the brain development of young children, which in turn slows down the effectiveness of mental health education. This is also a weakness in mental health education for rural children[19]. For left-behind children in rural areas, most of them are taken care of by single parents or grandparents, who are already in a relatively isolated state with less social interaction. This makes it harder for young children to have opportunities to interact and model others, which is not conducive to their social development and mental health education. Moreover, in the family education involving grandparents, children often form multiple attachment relationships: cognitive dependency, emotional dependency, and behavioral dependency. Children with a strong cognitive dependency tend to lack their own thinking, choices, and decision-making when doing things; children with emotional dependency on grandparents often show a tendency to be clingy and require constant companionship, experiencing a sense of insecurity and anxiety if separated from them, and being unable to be alone. Children with behavioral dependency on grandparents tend to show extremely poor independence in their daily lives, praying for their grandparents to help solve any problems they encounter[20]. So we can see that the absence of parental education not only affects the children's role models but also affects the development of their emotional management skills in the brain. Both factors hinder the implementation of mental health education for rural children to some extent. At the same time, the dominance of grandparental education is also unfavorable for the development of mental health education for rural children.

2.3. The professional literacy of rural kindergarten teachers affects the development of children's mental health education

Psychological health education is an educational activity conducted by educators based on the physiological and psychological development characteristics of students. It uses relevant psychological theories, methods, and techniques to prevent psychological problems, promote students' mental health, cultivate good psychological qualities, and facilitate the comprehensive and harmonious development of students' physical and mental health and overall quality improvement. This requires that teachers engaged in mental health education need to understand the physiological and psychological development characteristics of students, and they must be knowledgeable in mental health theories, methods, and techniques. For rural kindergarten teachers, most of them hold a college degree or lower, with a smaller number holding a bachelor's degree. Additionally, many teachers are non-education majors, indicating that their reserves of educational knowledge are relatively limited. On the other hand, some teachers are transferred from primary and secondary schools without professional preschool knowledge, making it difficult for them to adapt to preschool education work and hindering the improvement of rural preschool education quality. The lack of preschool professional knowledge from transferred teachers joining the kindergarten teacher team further intensifies the primary school-oriented characteristics of early childhood education[21].Moreover, most rural kindergarten teachers do not understand the psychological development characteristics of rural children, lack basic theoretical knowledge of mental health education, and have an incomplete understanding of the content, methods, and techniques of child mental health counseling. They use relatively single teaching methods that do not focus on improving the core literacy of children's mental health, and they lack professional training [13]. This results in a significant reduction in the effectiveness of mental health education for rural children, or even a complete absence of such education. For example, Li Jing and others studied rural preschool teachers in Chongqing and found that the overall professional ability of rural preschool teachers in Chongqing is generally weak. They have a

certain amount of knowledge and culture, but it cannot meet the needs of current education[22]. In summary, teachers lacking a normal education background, lacking corresponding preschool education skills, and lacking theoretical knowledge related to mental health education hinder their ability to conduct mental health education for children to some extent.

As we all know, in the process of cognitive and skill formation, especially in young children, individuals mainly imitate significant others around them, so the people around them are very important to their growth. For young children, teachers are the “significant others” for their character building and social-emotional development[23]. During the educational process, teachers of young children need to invest more labor in responding to the emotional needs of young children and some suddenly occurring behaviors[24]. This requires early childhood teachers to have strong internal motivation and internal nuclear energy. However, according to studies showing an upward trend in the rates of depression detection and obsessive-compulsive detection among early childhood teachers over the years 2000-2022 [25], And a study also noted a significant positive correlation between preschoolers' behavioral problems and early childhood teachers' mental health levels[26], This suggests that the mental health of early childhood teachers can have an impact on the psychological and behavioral problems of young children. Moreover, some teachers with psychological problems may even engage in “child abuse”, which is even more detrimental to the healthy development of young children's mental health, not to mention the mental health education of young children. Therefore, the professionalism of rural kindergarten teachers in terms of psychological knowledge influences the development of mental health education for young children.

2.4. The Other factors affecting the development of mental health education for young children in rural areas

2.4.1. Poorly guided documentation affects rural early childhood mental health education

Although many guiding documents have been issued on mental health education for young children, they are not operational, for example, in the Kindergarten Work Regulations, it is mentioned that “mental health is promoted and good living habits are cultivated”, but it is not known how to promote mental health, and the documents do not provide good guidance on this. The document does not provide good guidance on this[27], This further reinforces the fact that early childhood teachers do not know how to carry out mental health education for young children, which in turn makes many schools simply and roughly categorize the mental health of young children as ideological and moral education, and replace it with moral education work [28] thus hindering the development of mental health education for young children in the countryside.

2.4.2. Lack of harmonized teaching materials affects the delivery of early childhood mental health education

The importance of teaching materials in education cannot be overstated. Zhang Jianren has pointed out that the country has not yet developed a monograph on early childhood mental health, except for a small number of books on early childhood mental health, behavioral and emotional problems, and so on[14], And many schools carry out mental health education by searching online or adapting themes to obtain programs in the form of thematic education[29], which to a certain extent makes teachers who lack theoretical knowledge related to mental health education not dare to easily try to carry out mental health education for students, thus hindering the development of mental health education for young children in villages.

3. Coping Strategies for The Development of Mental Health Education for Young Children in Rural Areas

3.1. Adjusting concepts and emphasizing psychology

Concepts are the basis for action, and in order for educators to emphasize mental health education for young children in rural areas, the first step is to change the concept of education. To this end, from a family perspective, parents, as the direct bearers of young children's upbringing, need to adjust the concept that material support for young children's education is more important than any other support. According to Maslow's hierarchy of needs, when physiological needs are satisfied or partially satisfied, individuals will pursue a higher level of needs, security needs, belonging and love, respect and self-actualization needs. For young children, the most important needs to be satisfied in the family are the need for safety and the need for belonging, love and respect. Therefore, in the process of parenting, parents need to let young children feel safe and pay attention to the emotional needs of young children, for example, when the child cries, give timely feedback and support, so that he or she will feel your support and care, which is not only beneficial to the psychological growth of young children, but also has a certain effect on the development of his or her amygdala and hippocampus. This is not only beneficial to the psychological growth of young children, but also to their amygdala and hippocampus development. Instead of letting the child alone to deal with it when it cries, or directing frustration education and saying I am doing it for your own good. Therefore, as the direct responsible person for the growth of young children parents should adjust the previous concepts, pay attention to the psychological needs of young children, emotional needs. On the other hand, one of the most prominent features of early childhood education in the countryside is the absence of parents, with more grandparents raising young children, and grandparents are often very spoiled for the education of young children, taking care of everything for young children, and focusing on the safety of young children while neglecting the emotional needs of young children. Therefore, the grandparents need to adjust their own concepts, the raising of young children is not only concerned about their safety, but also need to pay attention to the needs of young children's love and respect.

School is the main position for young children to receive education, if the teachers' educational concepts are biased, then their behavior will also have great deviations, so as a school educators need to recognize the importance of mental health education in education. Early childhood is a period of rapid development of individual body and mind, and the way they deal with things in this period is obtained through imitation of significant others, and the influence of teachers as significant others on the growth of young children is crucial. Therefore, as educators, we should firstly "model behavior" from ourselves; secondly, as educators, we need to change the concept of education is to teach knowledge, we need to pay attention to the mental health education of young children, not just talk about it, but to put it into action, and pay attention to young children's emotional needs, young children's behavioral performance, and to give young children the appropriate support.

3.2. Enhance Teachers' Literacy

The professionalism of rural kindergarten teachers not only affects the level of mental health of young children, but also influences the development of mental health education for young children. Therefore, as kindergarten administrators, we need to provide teachers with training and professional development opportunities in mental health education. For example, in order to benefit more schools and avoid wasting resources, nearby rural kindergartens can jointly organize and provide mental health education training courses and seminars for teachers from several neighboring schools, providing them with the necessary professional knowledge and skills, and helping them to master both the theoretical and practical methods and techniques of

mental health education[30].A mental health education alliance has been set up to hold regular psychological salons, inviting front-line teachers with relevant experience to share their insights in the process of early childhood mental health education and their own methods of educating young children about mental health. Regular online psychological knowledge training is organized to enhance the psychological health knowledge of rural early childhood teachers so as to improve their professionalism. On the other hand, the professionalism of kindergarten teachers is evaluated regularly, and support is given according to the evaluation results, so as to improve the professionalism of kindergarten teachers. In recent years, there have been numerous incidents of child abuse, which to a certain extent reflects that the psychological health of early childhood teachers is in urgent need of attention, so it is extremely important to pay attention to the psychological health of early childhood teachers on a regular basis and provide them with corresponding support for the growth of early childhood mental health. At the same time, regular assessment of the degree of psychological knowledge of early childhood teachers, and according to the results of the corresponding support, which can not only enhance the psychological level of early childhood teachers themselves can also improve their relevant professionalism.

3.3. Integration of practice and development of teaching materials

Textbook is the main medium of education and also the main carrier of knowledge, it is an important material and way to realize the teaching goal, and it is very important to improve the mental health literacy of young children. However, regarding the mental health education of young children, although there have been many documents pointing out that we should attach great importance to the mental health education of young children[31], However, there is no monograph on mental health education for young children[14],which makes educators not know how and where to start mental health education for young children, so most kindergartens do not provide mental health education for young children. Although some educators will be based on their own experience, or the Internet to find appropriate examples of mental health education for young children to teach[29],but this is fragmented, unsystematic, and it is difficult for educators to know whether the teaching of this kind of teaching is correct, so the compilation of mental health education of young children related teaching materials is urgent. The educational authority should convene experts in mental health education to discuss the content and framework of early childhood mental health education, and complete the formulation of teaching materials for early childhood mental health education. In addition, kindergarten administrators can lead teachers to compile school-based teaching materials based on the basic conditions of the children in their schools, taking into account the physical and mental development of the children. This will enable teachers to know how to carry out mental health education for children in the process of education.

4. Conclusion

In summary, in the existing research, the influencing factors of rural young children's mental health education are mainly, educators' attention to mental health education; parents' absence; teachers' lack of professionalism; unclear guidance of documents and the lack of professional teaching materials. In order to strengthen the development of early childhood mental health education, firstly, educators need to adjust their concepts and pay attention to psychology; secondly, kindergartens need to build teachers and improve their qualifications; and finally, it is necessary to combine the actual situation with the preparation of teaching materials and improve the guidance system of early childhood mental health education.

Acknowledgements

Research on the Path of Rural Early Childhood Mental Health Education in the New Era by
Sichuan Higher Education Key Research Base of Humanities and Social Sciences - Rural Early
Childhood Education Research Center (NYJ20240606)

References

- [1] CAO Ying,SUN Liming,CHEN Xi: Health education: Practical exploration to comprehensively improve children's core literacy,Journal of Studies in Early Childhood Education, (2024) No.3, p.87-90.
- [2] Information on: <https://health.gmw.cn>.
- [3] Fang Wenyan: Analysis on Issues Concerning the Enhancement of Early Childhood Mental Health Education,Shanghai Educational Research, (2007) No.10, p. 66-67.
- [4] Huang He, Wang Xiaoying: The Relationship Between Mindful Parenting and Preschool Children's Problem Behaviors: The Chain Mediating Role of Parent-Child Relationship and Psychological Resilience, Psychological Development and Education, (2024) No.04, p.533-541.
- [5] Jiang yanni: The influence of early experience in Freud's psychoanalytic theory on children's personality development,Journal of Gansu Normal Colleges,Vol. 22, (2017) No.07,p. 58-60.
- [6] Information on:<http://edu.people.com.cn>.
- [7] Yu Shihua, Rao Shuyuan: Investigation and Analysis of Emotional and Behavioral Problems in Preschool Children Aged 3-6: A Case Study of Huizhou City ,Journal of Shaanxi Xueqian Normal University, Vol. 36, (2020) No.09, p. 91-97.
- [8] Lü Lidan, Mei Ziyang, Li Rui, et al: The Latest Status and Changing Trends of Left-Behind Children in Rural China: 2010-2020 ,Population Research,Vol. 48, (2024) No.01, p. 103-117.
- [9] Shi Qingyan, Wang Xingfeng: Practical Issues and Improvement Strategies in Early Childhood Mental Health Education, Basic Education Forum, (2022) No.31, p. 77-78.
- [10]Li Wei: Practices of Rural Early Childhood Mental Health Education , Academia, Vol. 17, (2024) No.09, p. 75-77.
- [11]Zhou Nianli, Xu Fangfang: The Impact of Parental Absence on Rural Children's Social Development: A Psychological Survey of 958 Preschoolers Aged 3-4 in Hunan Province, Studies in Early Childhood Education, (2012) No.11, p. 26-30.
- [12]Zhang Zhiqin: A Brief Analysis of Mental Health Education for Left-Behind Rural Preschool Children, Life Education, (2013) No.05, p. 99-100.
- [13]Huang Saihe: Strategies for Mental Health Education in Rural Kindergartens, Parents, (2022) No.16, p. 49-51.
- [14]Zhang Jianren: Major Issues in Current Mental Health Education in Kindergartens, Journal of Studies in Early Childhood Education, (1998) No.03, p. 12-13.
- [15]Wang Juan: Effective Implementation of Early Childhood Health Education from the Perspective of Home-School Collaboration, Journal of The Chinese Society of Education, (2019) No.10, p.87-90.
- [16]Wang Bo, Wang Ping: Construction of Health Curriculum in Kindergartens against the Background of COVID-19 Epidemic, Basic Education Curriculum, (2022) No.14, p.65-72.
- [17]Wu Yaoyao: The Connection between Preschool Children's Emotional Development and Critical Period, Luliang Education College Journal, Vol. 34 (2017) No.04, p.22-24.
- [18]Huang Renzhi: Research on the Current Status and Countermeasures of Mental Health of Rural Left-behind Children Aged 3-6 (Postdoctoral dissertation,China National Institute of Education Sciences,China 2016).
- [19]Li Yanwei, Feng Ziyu, Zhou Xuan, et al: The negative impact of parental absence on early attachment in children: Evidence based on educational neuroscience, Journal of Preschool Education Research, (2023) No.01, p.19-28.

- [20] Chen Chuanfeng, Sun Yutian, Wang Yingjie, et al: The influence of rural children's reliance on their grandparents on their mental health: the moderating role of intergenerational caregiving types and the starting stage of children's acceptance of intergenerational caregiving, *Journal of Shaanxi XueQian Normal University*, Vol. 39 (2023) No.06, p.54-62.
- [21] Li Yang and Chen Xi: The Current Status and Promotion Strategies of Rural Kindergarten Teacher Teams, *Journal of Studies in Early Childhood Education*, (2018) No.09, p.61-63.
- [22] Li Jing and Yang Bing: A Study on the Current Situation of Professional Quality of Rural Preschool Teachers: A Case of Rural Areas in Chongqing. *Journal of Southwest University of Agriculture (Social Sciences Edition)*, Vol.10 (2012) No.06, p.254-258.
- [23] Rodriguez,V., Rojas,N. M., Rabadi-Raol, A., Souto-Manning,M. V., & Brotman,L.M: Silent expectations: An exploration of women pre-kindergarten teachers' mental health and wellness during COVID-19 and beyond,*Early Childhood Research Quarterly*, Vol.60 (2022), p.80-95.
- [24] Stone,K. J., Schnake,K.,& Moreland, A. D: Adverse childhood experiences among early childhood educators and improving teacher health and well-being: Changes in teacher affect, *Early Childhood Research Quarterly*, Vol.65 (2023), p.195-204.
- [25] ZHAO Chengjia,HUANG Xiaoxia,YU Guoliang. A meta-analysis of the detection rate of mental health problems among early childhood teachers in China's mainland: 2000-2022, *Psychological and Behavioral Research*, Vol.22 (2024) No.02, p.145-153.
- [26] Liu E: A study on the correlation between behavioral problems of preschool children and mental health level of early childhood teachers, *Journal of West China Normal University (Philosophy and Social Science Edition)*, (2006) No.04, p.91-95.
- [27] Tan P: The Dilemma and Way Out of Early Childhood Mental Health Education, *Journal of Kaifeng Culture and Art Vocational College*, Vol.40 (2020) No.07, p.188-189.
- [28] Zhang Meijun: Discussion on mental health education of young children, *Journal of Jilin Radio and TV University*, (2013) No.02, p:60-61.
- [29] Liu Haijia,Sun Wei: Research on the Integration of Early Childhood and Primary School Mental Health Education, *Journal of Chongqing Second Normal College*, Vol.37 (2024) No.03, p.81-86.
- [30] Yang Hong: Exploring the Path of Mental Health Education in Rural Schools, *Gansu Education*, (2024) No.04, p.30-32.
- [31] Yao Benxian, College of Educational Science, Anhui Normal University, Xing Guanrong, et al: A preliminary study of mental health education strategies for young children, *Chinese Journal of Education*, (2004) No.05, p.47-49.