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Practice of Comprehensive Intervention Program for Left-behind Children's Inferiority Complex

-- Taking a Middle School in Xian'an District of Xianning City of Hubei Province as an Example

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Abstract

Starting from the inferiority complex of Left-behind children, this study aims to establish an education mode combining classroom teaching and psychological group assistance for the Left-behind children in junior middle school. Through psychological evaluation, group counseling and other related activities, a comprehensive intervention scheme of inferiority complex under the large class teaching mode is formed to help the Left-behind children reduce their inferiority complex and improve their mental health. In this study, the experimental group and the control group were designed as pre-test and post test, and the experimental group was given comprehensive intervention. The results showed that after the intervention, there was a significant difference in the level of inferiority between the experimental group and the control group. Conclusion: the comprehensive intervention model adopted in this study can effectively reduce the students' Inferiority level, and provide a certain practical basis for inferiority intervention.

Keywords

Left-behind Children; Inferiority Complex; Educational Intervention Program.

1. Introduction

1.1. Overview of Left-behind Children

According to the "Opinions on Strengthening the Care and Protection of Left-behind Children" in Rural Areas released by the State Council in 2016, Left-behind children refer to minors under the age of 18 when both parents go out to work or when one of them goes out to work and the other is not able to take care of their children alone [1]. With the influence of urbanization and labor market demand, the number of migrant workers and Left-behind children is increasing year by year. According to the "Investigation and Analysis Report on Family Education Activities of Left-behind children" jointly issued by the Organizing Committee of the National Heart Series of Activities and other organizations, the number of Left-behind children in rural China has reached more than 58 million, of which about 30% of the Left-behind children's parents have been working outside for more than five years. Due to the prolonged working time of Left-behind children's parents, it will certainly have a significant impact on the psychological development of Left-behind children [2]. Therefore, the psychological problems of Left-behind children need to be concerned. The Left-behind children in this study refer to the special group

of minors whose parents go out to work or one of them goes out to work but the other has no ability to supervise their children, and the working time is more than half a year, while the children under 18 years old stay in the registered permanent residence to study and live.

1.2. Research Status of Left-behind Children

Many studies have shown that the lack of parental companionship and affection leads to the low self-esteem of Left-behind children and a serious sense of inferiority. Hongxia Li believes that inferiority complex is a kind of emotional experience produced by individuals when they compare themselves with others, which makes them lose self-confidence and sense of honor and become more isolated and out of group [3]. Fei Sun believes that inferiority complex will make people lose sight of their own energy, so that their self-evaluation is low. In the long run, it will form a fixed thinking, which will bring a lot of negative effects on life, and even deprive people of their enthusiasm for life when it is serious [4]. According to Freud's theory, most Leftbehind children are at a stage where they are easily affected by family and society. If they lack the care and guidance they need for a long time, they will form unhealthy and unsound psychology and personality [5]. Other scholars have shown that mental health problems of Leftbehind children will not only affect their study and life, but also affect their personality and ability to adapt to the environment. For example, when their thoughts deviate, they may have some behaviors that affect social stability. Therefore, the influence of Left-behind children's inferiority complex can not be ignored.

Zhangqing Shi and other experts found that inferiority complex is universal and harmful to students. Meanwhile, they put forward that improving the way of school aid is the focus of solving these problems, adjusting the appropriate relationship between supply and demand of education, improving the quality of teaching and reasonably managing resources [6]. In addition, Qi Hang believes that the Left-behind children lack the consciousness and ability of creative self, which leads to the emergence of inferiority complex. Left-behind children in rural areas are mostly located in remote rural areas with generally backward economic and cultural development. Therefore, they always subconsciously classify themselves as the bottom of the society, and find it difficult to change their fate. Only a few Left-behind children in rural areas have the determination to change their situation [7]. Weihua Ding mentioned in the discussion that the way to effectively reduce the inferiority level of middle school students is that individuals can accurately and objectively evaluate themselves, accept and like themselves, and learn to adjust themselves [8]. Shumin Yang put forward the preliminary idea of combining individual psychological counseling with group psychological counseling for individuals with inferiority complex [9].

1.3. Research Deficiency and Purpose

To sum up, a good intervention model can reduce the level of inferiority and improve the overall level of mental health. Most of these intervention programs are in the form of group counseling or individual counseling, and only for individuals with a higher level of inferiority. In schools, curriculum intervention will be more conducive to the development of intervention model, and the scope of application is wider, the benefits are wider. In the economically backward areas of China, due to the lack of conditions and environmental reasons, the mental health of students has not been paid enough attention. Especially for Left-behind children, long-term lack of parents accompanies, school also ignored the development of their mental health level. Therefore, this study focuses on the mental health curriculum intervention, taking the class as the unit, through the comprehensive intervention mode of course teaching method, group counseling and so on, to improve the Left-behind children's inferiority level and improve their mental health level.

2. Research Methods

2.1. Objects

As a special group in today's society, Left-behind children cannot be directly distinguished from the crowd when they are taken as the research object to collect data. After discussion with the school's psychological experts, two parallel classes of Tingsi Middle School in Tingsiqiao Town, Xian'an District, Xianning City were selected as the experimental subjects. As a non-key junior middle school, Tingsi middle school has a higher proportion of left behind children than the key junior middle school in Xianning City, and the middle school has no mental health curriculum. In this study, the inferiority scale was used to measure the inferiority of two classes of children in grade one of the middle school. The pre-test and post-test experimental design of the experimental group control group was used to implement the comprehensive mental health education intervention program for the experimental group, while the control group did not receive any intervention. The data obtained before and after the intervention of the experimental group and the control group were compared respectively. A total of 150 questionnaires were sent out for the initial test. After eliminating the invalid questionnaires, 137 valid questionnaires were finally returned, including 61 children with left behind experience, 27 boys and 34 girls.

2.2. Research Design

This study adopts the experimental design of pre-test and post-test of the experimental group and the control group. One of the two classes is the experimental group and the other is the control group. The experimental group was given comprehensive mental health education intervention, while the control group was not given any intervention. Before the intervention, the psychological inferiority level of the students in the experimental group and the control group was initially measured with the sense of deficiency scale. After one semester of intervention, the psychological inferiority level of the students in the experimental group and the control group was re-measured with the sense of deficiency scale. The dependent variable was the level of inferiority complex of the pre-test and post-test individuals.

2.3. Tools and Processes

2.3.1. Tools

The scale used in this study is the deficiency scale revised by Fleming and Courtney [10]. The scale includes five dimensions (self-esteem, social self-confidence, academic ability, appearance and physical self-confidence) and 36 items, of which 4 items are scored in reverse. The scale uses a 7-point score, and the higher the score, the higher the level of inferiority. The scale has been revised several times and has high reliability and validity. The Cronbach Alpha coefficient is 0.89. In this experiment, the Alpha coefficient of Cronbach is 0.879.

2.3.2. Intervention Process

In order to ensure the systematicness, integrity and pertinence of the intervention program, theselection of the intervention content is centered on the three factors of self-esteem, social confidence and academic ability in the five dimensions of the FIS scale, to design the mental health course. When the intervention program is initially implemented, 12 interventions are expected, including 4 interventions in the self-esteem dimension and 6 interventions in the other three dimensions, with two interventions in each dimension and a duration of 40 minutes for each intervention. In order to ensure the intervention activities to achieve the desired effect, the intervention activities should be carried out twice a week, and the intervention activities of the same dimension should be carried out continuously in the same week.

After the intervention, the intervention program was evaluated by three psychological experts with psychological intervention experience (who had taught for more than 5 years), and

suggestions were put forward for the revision and guidance of the intervention plan in the future.

3. Results

3.1. Statistical Methods

SPSS25.0 software was used for data analysis and processing. Independent sample T-test and one-way ANOVA were used for statistical analysis.

3.2. The Influence of Demographic Variables on Children's Inferiority Level

With gender as the independent variable, the independent sample T-test was conducted to examine the influence of gender on the total score and dimensions of inferiority complex. The statistical results showed that: the total score of inferiority complex of boys and girls t = 0.262, self-esteem t = -0.500, social confidence t = 1.151, academic ability t = 0.218, appearance t = -0.530, physical fitness t = -0.158, t = -0.158, t = -0.158, total uses were less than 1.96, there was no significant difference in each dimension (t = -0.05). Boys score lower than girls in all dimensions.

With single parent family as the independent variable, the independent sample T-test was conducted to examine the influence of single parent family on the total score and various dimensions of inferiority. The statistical results show that: the total score of inferiority t = 0.800, self-esteem t = 0.871, social confidence t = 0.558, academic ability t = 0.542, appearance t = 0.217, physical fitness t = 0.515, t values are less than 1.96, there is no significant difference in each dimension (P > 0.05). The scores of subjects in single parent families are higher than those in non single parent families.

Taking the parents' educational level as the independent variable, the influence of parents' educational level on the total score of inferiority complex and its dimensions was investigated by one-way ANOVA.

The results showed that there were significant differences in fathers' educational level in the total score of inferiority complex (F = 3.754, P < 0.05), self-esteem (F = 4.244, P < 0.05), social self-confidence (F = 2.845, P < 0.05) and academic ability (F = 3.285, P < 0.05); The higher the father's educational level, the lower the children's sense of inferiority. In the other two dimensions, there was no significant difference in appearance (F = 0.835, P > 0.05) and physical fitness (F = 1.412, P > 0.05). In addition, the higher the mother's educational level, the lower the children's sense of inferiority. There were significant differences in the total score of inferiority complex (F = 2.855, P < 0.05) and social self-confidence (F = 3.407, P < 0.05) of mothers' cultural level, but there were no significant differences in other dimensions (P > 0.05).

Taking the income level as the independent variable, through one-way ANOVA, this paper examines its influence on the total score of inferiority complex and each dimension. The statistical results showed that: there were significant differences in the total score of inferiority complex (F = 2.546, P < 0.05) and social confidence (F = 3.580, P < 0.05) in family monthly income; The total scores of inferiority complex and social self-confidence of the subjects with monthly income of 3000 or less were significantly higher than those of the individuals under other conditions. There was no significant difference in other dimensions (P > 0.05).

3.3. Analysis of Intervention Effect

3.3.1. Data Analysis before Intervention

In order to explore whether the experimental group and the control group are homogeneous, the differences of inferiority level between the experimental group and the control group in the initial test results were examined by independent sample T-test. The results are shown in Table 1

Table 1. Initial test results of experimental group and control group

Dimension	Category	Mean	Std.Deviation	Т	Sig.
Self-esteem	CG	23.8	7.120	-1.441	0.153
	EG	25.75	7.006		
Social self-confidence	CG	47.74	13.269	0.274	0.785
	EG	47.10	10.290		
Academic ability	CG	29.13	6.120	-0.014	0.989
	EG	29.15	6.389		
Appearance	CG	18.74	4.768	0.335	0.738
	EG	18.40	6.104		
Physical self-confidence	CG	19.85	4.957	-0.338	0.736
	EG	20.21	6.335		
Totol	CG	139.26	25.014	-0.923	0.358
	EG	144.13	31.143		

Note: EG: experimental group; CG: control group

The results showed that there was no significant difference in the inferiority complex level and dimensions between the experimental group and the control group in the preliminary survey.

3.3.2. Data Analysis after Intervention

In order to investigate the effect of the intervention program, and to exclude whether there are other factors in the process that cause the increase or decrease of the psychological inferiority level of the subjects, independent sample t-test was conducted for the retest of the experimental group and the control group, and the results are shown in Table 2

Table 2. Inferiority complex scores of the experimental group and the control group

Dimension	Category	Mean	Std.Deviation	Т	Sig.			
Self-esteem	CG	26.28	6.514	1.117	0.267			
	EG	24.88	6.778					
Social self-confidence	CG	48.41	8.839	1.294	0.200			
	EG	45.67	12.682					
Academic ability	CG	28.20	6.786	-0.436	0.664			
	EG	28.75	6.596					
Appearance	CG	17.67	5.690	0.355	0.723			
	EG	17.33	4.445					
Physical self-confidence	CG	19.59	6.811	1.003	0.318			
	EG	18.40	6.017					
Totol	CG	143.83	28.374	2.128	0.036			
	EG	131.83	31.044					

Note: EG: experimental group; CG: control group

The results showed that there was no significant difference in the five dimensions of self-esteem and inferiority between the experimental group and the control group. Only in the total score, the total score of inferiority complex in the experimental group was significantly lower than that in the intervention group.

4. Discussion

4.1. The Influence of Demographic Variables on Inferiority Level

The results show that there is no significant difference in inferiority between genders, but the scores of boys are lower than girls in all dimensions, which indicates that girls have stronger inferiority than boys. Consistent with previous experimental results, Mana Huang conducted a survey on junior high school students' inferiority complex, and found that in terms of gender, there is a very significant difference between male and female middle school students in the total sense of inferiority. The degree of inferiority of female students is higher than that of male students[11].

Some researchers have proposed that the main reason for left behind children's inferiority complex is the lack of family affection and parent-child education [9]. In this study, there is no significant difference in some dimensions on whether left behind children and single parent families, which may be due to the less sample differences in this experiment. However, the statistical results show that the subjects in single parent families have higher scores in each dimension than those in non single parent families.

In addition, family social capital theory and ecosystem theory provide a theoretical basis for how family socio-economic status affects children's self-esteem development [12]. According to the concept of self-esteem development, family socio-economic status and other resources are important and stable factors affecting individual self-esteem [13]. The results of this study show that there are significant differences in the total score and some dimensions of inferiority between family income level and parents' educational level. The higher the parents' educational level is, the lower the inferiority level is. The results of this study are consistent with some of the results. For example, the family economic level composed of parents' educational level and family economic income has a significant positive predictive effect on children's inferiority complex, indicating that family economic level has an important impact on children's inferiority complex [14]. A large number of studies have found that there is a positive correlation between individual inferiority complex and socio-economic status, in families with lower socioeconomic status, the level of inferiority complex is significantly higher than that of individuals with higher socioeconomic status [15]. This shows that family economic status is one of the important factors affecting the development of individual self-esteem. Because the superior economic conditions create a superior living and learning environment for children [16]. This kind of environment is easier to create conditions for children's healthy growth, build children's selfconfidence, conducive to psychological development, so as to have a lower level of inferiority.

4.2. Effect of Comprehensive Intervention Model

In this study, through the experimental design and statistical test of the experimental group and the control group before and after the test, it was found that the total score of inferiority in the experimental group after the intervention was significantly lower than that in the control group, but there was no significant difference in other dimensions. It shows that the comprehensive intervention mode has certain effect on inferiority intervention, but has little influence on each dimension, which may be caused by the short intervention time.

In terms of intervention methods, in recent studies, Xinxin Li proposed that Orff teaching method has a certain intervention effect on Left-behind children's inferiority, lack of security, loneliness and other negative psychology [17]. Mengfan Lv proposed that under the guidance of Satya theory, group counseling of Satya model can significantly improve the level of self-esteem and effectively reduce the level of inferiority. The intervention of inferiority has the same effect as cognitive behavioral group counseling, which can be promoted as a new method of inferiority intervention [18]. In addition, Jin Yan's positive psychotherapy combined with mindfulness cognitive therapy from the perspective of positive psychology has improved the

psychological problems of adolescents with low self-esteem, improved their mental health level, provided a new perspective and practical basis for solving their psychological problems, helped adolescents form a positive self-concept, improved their self-identity, and formed a virtuous circle, Improve the mental health level of teenagers [19]. It provides some guidance for the future intervention model.

4.3. Expectation

Through interviews and feedback from the three experts, they mainly focus on the following three points.

First, on the overall integrity of the intervention program. On the whole, it focuses on the three main factors that affect the inferiority of middle school students. Considering that middle school students have ushered in the second peak of physical development, they gradually begin to pay attention to their appearance, which should be supplemented in the later stage.

Second, in terms of the needs that intervention programmes meet. This study has made sufficient preparation for the intervention program, and expects to carry out the intervention in the form of group counseling, games and classroom to intervene the inferiority complex of middle school students. This study intervenes from three aspects, but the intervention content of academic ability is less. In the later stage, we should balance the time of several factors in the improvement of the intervention program.

Finally, in the estimation of the buyer's compliance. The implementer should have good classroom control ability, guide students to participate actively, and ensure the effect of intervention. In the later stage of the intervention program implementation, teachers with practical experience are required to implement the intervention program or assist from the side.

5. Conclusion

The intervention program through the practice of testing and expert evaluation, the intervention of inferiority complex can play a good effect. The large class education mode, which combines traditional mental health course teaching with group counseling, has incomparable advantages and is suitable for the requirements of today's society.

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