Author’s response to reviews

Title: Health status of children left behind in rural areas of Sichuan Province of China: a cross-sectional study

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Response Letter

Title: Health status of children left behind in rural areas of Sichuan Province of China: a cross-sectional study

Dear editor and reviewers:

Thank you very much for giving us the opportunity to revise and further improve our work!

Now the paper has been revised by fully considering the reviewers’ insightful comments and instructive suggestions. All the changes in the revised manuscript have been highlighted in blue. Specific responses to the comments of two reviewers have presented below.

We would like to take this opportunity to thank you for your precious time and efforts. The manuscript has certainly benefited a lot from your insightful comments and valuable revising suggestions. We hope you will agree with our revision.

Best regards,
Response to Reviewer 1

1. This manuscript conducts an empirical study on the health status and health behaviour of left-behind children in rural China. Left-behind children are generally more vulnerable because they do not have parents to take good care of them. The situation of left-behind children is to a large extent caused by the household registration system, which makes it difficult for migrant workers to take children with them to urban cities. Therefore, this manuscript deals with an important topic. The research design and the methodology employed in this manuscript are tight enough for arriving at the conclusions.

   • Response: Thanks for your encouragement!

2. However, I am not convinced that the results of this manuscript will be of interest to the journal's readership given that the aims and scope of the journal are 'the influence of human rights violations on health' and 'all issues relating to the impact of health policies, programs and practices on human rights', but this manuscript didn't provide sufficient analysis from a human rights perspective. I therefore recommend acceptance, but subject to major revisions. Specific comments follow.

   • Response: Thanks for your professional instructions! In this revision, we have analyzed and revised the manuscript from a human rights perspective to meet the aim and scope of BMC International Health and Human Rights. We believe that this revision will be of interest to the journal audience.

3. Comment 1: On page 3 lines 46-51, the authors mentioned the household registration system. Please elaborate a bit more on this system and its (negative) impact. Line 48 please specify its different access to governmental resources or unequal access?

   • Response: Thanks for your comment! We have clarified the household registration system in further details and analyzed its negative impact. The part has been revised as ‘Household registration (hukou) system which was established officially in 1958 is one of the underlying causes for the left-behind children phenomenon. Under this system, each Chinese citizen was registered according to his/her permanent residential area, based on which the residents were consequently classified into rural or urban categories. This classification led to unequal accessibility to governmental resources between rural and urban residents, including education, healthcare and retirement pension etc. The residents in rural areas usually had less access to employment, education and healthcare resources. Despite the relaxation of this household registration policy over decades, the overall situation was still not favorable for
the migrants relocating their families to urban areas. It is particularly difficult for the migrants’ children to move in order to receive education at urban public schools due to the limitations of the household registration system. Therefore, a large population of children and elderly were left behind in their origin residential areas.”.

4. Comment 2: For readers who are not familiar with empirical research, it would be useful if the authors could briefly explain how the self-administrated questionnaire is developed. For example, the reasons for choosing variables, why such health symptoms are selected than others; why taking sick leave/ the frequency of not going to school due to sickness is relevant for the analysis?

- Response: Thanks for your comment! We have revised the manuscript to report the development of questionnaire, as “In the pilot study, it was found that left-behind children generally felt uncomfortable to fill the questionnaire with standardized scale. Therefore, the research team developed the survey questionnaire according to the field work conducted by the research team in Sichuan Province previously. The measurement items were mainly adopted from the findings from qualitative interviews with local teachers and medical staffs who had taken care of the left-behind children before. While the measurement items are simple questions, they reflect the realistic life of the left-behind children and can be easily comprehended”.

5. Also, it may be clearer if the authors can differentiate health status and health behaviours on table 2 (pages 7-8).

- Response: Thanks for your suggestion! We have revised Table 2 and Table 3 to differentiate health status and health behaviours.

6. Comment 3: This empirical study revealed several significant differences between left-behind children and comparison groups regarding their physical and mental health due to the lack of parental care. However, although the results were correctly analyzed, the analytical parts in the discussion and conclusion sections are not sufficient enough considering the scope of the journal; the results will thereby not advance the field of health and human rights. Please analyze the findings from a human rights perspective in the last two parts. For example, is the different health status between male and female caused by gender discrimination? Does it constitute a violation of the right to health or the rights of the child by taking a longer leave from school due to sickness or not receiving all free vaccines? What are the human rights implications of the findings?
Response: Following your instructive suggestion, we have analyzed the results from a human rights perspective and revised the DISCUSSION sections in a comprehensive way. In particular, we have analyzed the relationships between health of left-behind children with household registration system and discussed how the current household registration system influenced people’s rights to equal employment, education and healthcare. Also, how gender inequity affected the health of female left-behind children was discussed. Specific human rights implications are proposed in this revision. The CONCLUSION was revised accordingly to summarize this study from a human rights perspective.

Thanks again for your professional comments!

Response to Reviewer 2:

1. The topic of this article is very meaningful and is aimed to investigate the influence of being left behind the health on children's physical and mental health in rural areas of China.

   • Response: Thanks for your encouragement!

2. However, there are two important questions to be interpreted. The first, left-behind Children's definition and criteria (in line 146-148) is not described clearly and definitely. For example, above how many months being left behind in the original residence and not living with parents can be called left-behind Children.

   • Response: Thanks for your comment! We have clarified the criteria as “Regarding to left-behind issues, ‘left-behind children’ in this study were defined by the following criteria: 1) children under 16 years old; 2) with rural household registration; 3) being left behind in the original residence for 6 months or longer due to parents’ migration to other place for employment and therefore not being able to live together.”

3. The second is the most important, the physical health and mental health is measured only by several simple questions and not be tested by the standardized scale. For example, the physical health only measured by the cough or respiratory difficulties, diarrhea, Twitch in two weeks is not enough. And to measure the mental health can use the Mental Health Scale for Secondary School Students. Overall, the research topic is important, but the design of data collection and measurement need to be interpreted.
Response: Thanks for your comment! In the pilot study, it was found that left-behind children generally felt uncomfortable to fill the questionnaire with standardized scale. Therefore, the research team developed the survey questionnaire according to the field work conducted by the research team in Sichuan Province before. The measurement items were mainly adopted from the findings from qualitative interviews with local teachers and medical staffs who had took care of left-behind children before. While the measurement items are simple questions, they reflect the realistic life of left-behind children and can be easily understood. We have revised the manuscript to present the information above. In addition, in the limitation part, we added that “Future application of mature standardized scale measuring physical and mental health is needed”.

Thanks again for your professional comments!