

Study on the Intervention Plan for Constructing College Students' Positive Mentality under the Normal Epidemic Prevention and Control

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Abstract

The outbreak of the COVID-19 epidemic has brought great changes to college students' studies and lives. With the stability of the domestic epidemic, college students' school life has also entered a state of normal control. Since the COVID-19 epidemic, universities have paid close attention to students' mental health and developed a series of psychological intervention measures. From the perspective of positive psychology, this study explores the mental health intervention plan and working mechanism of college students under the normal epidemic prevention and control, proposing a growth group counseling intervention program to promote the improvement of the mental health level of college students and provide a scientific basis for the mental health services of college students under the influence of public health emergencies.

Keywords

Normal epidemic prevention and control
College students
Mental health
Intervention program

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1. Introduction

The COVID-19 epidemic has brought great challenges to people's lives and people may face the challenge of living with the novel coronavirus for a long time ^[1,2]. With the progression of the epidemic, universities have implemented regular epidemic prevention and control management, and the constantly changing teaching

mode and management measures may cause college students to face more psychological problems such as anxiety and depression ^[3-5]. Based on the previous investigation on the current situation of college students' mental health under the normal epidemic prevention and control management measures, this study formulated a group guidance plan for college

students' psychological growth from the perspective of positive psychology^[6,7], to help college students explore "positive advantage," cultivate "positive emotion," establish "positive relationship," "positive response," and promote "positive growth," in order to effectively intervene and guide the mental health problems of college students.

2. Study participants

60 volunteers with problems related to empathy, interpersonal communication, and social relations quality were selected as the experimental group. Four groups were formed, with 13–16 people in each group, and they received growth group counseling once a week for 12 weeks. At the same time, another 60 respondents were selected from the survey subjects as the control group, and did not participate in any intervention plan.

3. Assessment scales

3.1. Generalized Anxiety Disorder 7-item scale (GAD-7)

The Generalized Anxiety Disorder 7-item scale (GAD-7)^[8] consists of seven test items, which are scored using the Likert 4-point scale (0–3 means "not at all" to "almost every day"), and the total value is between 0 and 21 points, the higher the score, the higher the anxiety level of the respondent.

3.2. Depression Symptom Group Scale/Patient Health Questionnaire (PHQ-9)

The Depression Symptom Group Scale/Patient Health Questionnaire (PHQ-9)^[9] consists of nine test items, which are scored using the Likert 4-point scale (0–3 means "not at all" to "almost every day"), and the total value is between 0 and 27 points, the higher the score, the higher the depression level of the respondent.

The above measurement tools were compared before and after the intervention.

4. Interventions

4.1. Theoretical basis

The formation of relationships has cognitive, emotional, and behavioral components, which are formed and developed in the process of interpersonal communication^[10,11]. For college students from single-parent families, it is very important to improve the social adaptability of the quality of their relationships by emphasizing the unity of cognition, emotion, and behavior^[12]. Therefore, the group counseling program is designed based on the following basic ideas:

- (1) Enhancing interaction: Focusing on the verbal and nonverbal expressions of individuals to each other helps to improve the level of mentalization in the interpersonal relationships of group members, that is, the ability to increase self-awareness, empathy, and nonverbal communication.
- (2) Promoting empathy: Empathy is the ability to understand the internal state of oneself and others. It is an imaginative psychological activity that involves feeling and understanding the psychological state of behavior by being aware of emotions, ideas, intentions, and motives of oneself and others, and regulating emotions and behaviors.
- (3) Enhancing self-awareness: We acquire information about objects, events, or other people in our environment through perception, which is the embodiment of everyday experience. Perception has three meanings in interpersonal interaction: self-perception, knowing what one says, behaves, and how others perceive it; detection of the reactions of others; meta-perception, we try to understand how others perceive the message we send. Through perception, individuals obtain clues to interpersonal interaction.
- (4) Promoting nonverbal communication and skills: Nonverbal communication, in contrast to language communication, occurs through

body movements, posture, and tone, as well as spatial distance and the process of information exchange. It also includes variations in pitch, volume, rhythm, intonation, and even hesitations in speech, all of which convey significant information. In interpersonal relationships, we should pay attention to our body language and paralingualism in order to convey appropriate information.

Based on these basic ideas, the following intervention programs were developed.

4.2. Intervention strategy

The experimental group received the intervention of growth group counseling. Each group counseling consisted of two parts: the first part was a group activity led by the group leader, which adopted a fixed group activity plan (about 30 minutes); in the second

part, one team member volunteered to share his/her own confusion and problems related to communication, and all team members participated in sharing and discussion (about 60 minutes). After 12 interventions, all the enrolled subjects were assessed with relevant questionnaires and other tools, and a comparative analysis was made before and after. The control group did not receive any intervention.

Specific intervention strategies are shown in **Table 1**.

5. Intervention outcome

The scores of the experimental group and the control group on the depression and anxiety scale were compared before and after the intervention, and the results were shown in **Tables 2** and **3**.

As shown in **Tables 2** and **3**, there were significant differences in anxiety and depression in the

Table 1. Group activity plan

Stage	Time	Target	Activity content
Initial stage	1st time	Group establishment	Group members get to know each other; Leading team members to participate actively; Clarifying group goals and objectives; Working together to establish group norms; Guiding group members to express; A psychological test.
Transition stage	2nd time	Better understanding among members	Increasing impression and understanding among group members; Strengthening members' teamwork consciousness and improving team cohesion.
Working stage	3th–11th times	Cognitive, emotional, and behavioral training	Positive advantages, positive emotions, positive coping, positive growth, and active organization of relevant group activities.
End stage	12th time	Group ending	Summarizing activity experience and apply it in work and life; Encouraging blessings; Psychological test.

Table 2. Comparison of anxiety and depression before and after test in experimental group ($n = 60$, $\alpha = 0.05$)

Variable	Pre-test	Post-test	<i>P</i>
Anxiety	9.87 ± 5.66	6.33 ± 4.29	< 0.001
Depression	11.48 ± 6.94	9.57 ± 5.97	< 0.001

Table 3. Comparison of anxiety and depression before and after test in control group ($n = 60$, $\alpha = 0.05$)

Variable	Pre-test	Post-test	<i>P</i>
Anxiety	8.45 ± 5.33	5.55 ± 5.02	0.041
Depression	11.32 ± 5.79	10.21 ± 6.94	0.322

experimental group before and after the intervention. The anxiety level of the control group was significantly different, but the depression level was not significantly different.

6. Discussion

The results of this study showed that there were significant differences in the post-test scores between the experimental group and the control group, and the mental health problems in the experimental group were significantly improved after the implementation of the intervention program. This shows that under the normal epidemic prevention and control, the implementation of appropriate psychological intervention measures for the mental health of college students can play a certain role in promoting the adjustment of college students' emotions and the construction of positive mentality, which is consistent with the results of most studies^[13-15]. Effective group and training programs can provide participants with necessary social support and enable participants to release their emotions in the group, increase self-efficacy, establish positive and good cognition, emotions, and behaviors,

and thus effectively improving their mental health and environmental adaptability.

7. Suggestions

- (1) All colleges and universities should be aware of the importance of psychological work in public emergencies, do a good job in crisis intervention as well as daily screening and intervention, explore effective intervention measures for different groups, formulate appropriate intervention programs, and improve the mental health level of students.
- (2) A scientific and lasting evaluation of psychological intervention should be done to ensure the effectiveness of intervention.
- (3) The promotion of psychological education should be increased, which can not only help students build their own resistance and store enough psychological capital but also effectively improve the effectiveness of school mental health work.

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