The effect of the integration of higher education into psychological regulation on the psychological state of college students

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Abstract

The goal of this study is to examine the effect of integrating higher education into a psychological adjustment system on the psychological status of college students. The author randomly selected 500 college students from colleges and universities as the research objects. Psychological tests were carried out through the emotional regulation scale and symptom self-rating scale. Firstly, EpiData3.1 was used to input the data, and then the data was imported into SPSS22.0 for the reliability test and correlation analysis test. Finally, Amos22.0 was used to test the hypothesis model. The score of emotion regulation of college students is 57.20, and the average score of the total score of mental toughness is lower than 120. It shows that college students' overall mental toughness level is weak and needs improvement. The average mental health score is 147.96±53.29, which does not exceed 160 points. Higher education benefits students' physical form, function, and quality, but it also helps students' mood, shapes their will, and cultivates their personality.

Keywords: College students, mental health, emotion regulation, psychological regulation

Introduction

As human beings enter the Internet information age in the 21st century, the rapid economic development and the intensification of competition, forcing the pace of people's life and work, has gradually accelerated. China is in a period of economic transformation, such an era background has increased the psychological pressure on the Chinese people, and mental health problems should become a personal concern of everyone. The Chinese Academy of Sciences representative at the 19th National Congress of the Communist Party of China said: "Mental health is a strategic social issue that has drawn great attention in developed countries." (Chen et al., 2021). According to a 2005 report in Global Times-Life Weekly, mental health problems have endangered hundreds of millions of Chinese; more than 90% of college students have experienced psychological distress, according to a 2010-2011 survey report on the mental health of college students released by China University Student Network. The society is developing at high speed, to be able to stand in the community, the learning pressure of college students is increasing day by day, the employment pressure and social competition are also increasing year by year, which can easily lead to some mental health problems (Kolenik & Gams, 2021). Understanding the mental health of college students and using a correct and effective way to guide college students has become a difficult problem for society, schools, and families.

Studies have shown a close relationship between life events and the mental health of college students. Due to the rapid development of society, the learning and living environment of college students has become more complex and diverse, their psychological needs have also increased, not only in terms of academic performance but also in themselves. In addition, there are also needs in interpersonal relationships, comprehensive quality and ability. When college students encounter (negative) life events in their study and life, and their psychological needs are not met, it is easy to feel frustrated, causing mental health problems. Researchers have extended their research to the effects of emotion regulation and mental toughness on mental health. They believe that emotion regulation can individuals achieve psychological recovery, improving their mental health. When individuals are in adversity or (negative) life events, they actively use psychological capital for emotional regulation, it can quickly recover from a negative state to an excellent adaptive state, and this positive adaptive psychology can help individuals improve their mental health. Cognitive reappraisal and expression inhibition are the two most important strategies among emotion regulation strategies (Middleton et al., 2020). According to some proponents of rational emotional therapy, the cause of individual psychological disorders is not an objective event; rather, it is their beliefs that emerge in response to a triggering event. Therefore, in order to assist individuals in adjusting their psychology, they should first be assisted in cognitively reassessing the life events that triggered their emotional

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responses, changing their irrational beliefs, and regulating their emotions (Hamazaki, 2019). According to some studies, cognitive reappraisal is more successful than expression suppression at regulating emotions and is helpful to both physical and mental health. While prolonged inappropriate use of expression suppression strategies may have negative consequences for an individual's physical and mental health, expression inhibition retains its adaptive value, as it enables individuals to effectively conceal their emotions and safeguard interpersonal relationships.

Emotional control skill is a critical indicator of mental health, and emotional disturbance is a common expression of many psychiatric issues. Self-efficacy in emotion regulation refers to an individual's confidence in their ability to regulate their own emotional state effectively. Previous research has demonstrated that a high level of self-efficacy in emotion regulation can improve an individual's subjective well-being and interpersonal relationships and is associated with stress coping, prosocial conduct, and mental health status. There are three foreign views on the definition of emotion regulation: Situational view, process view, and structure view. According to situation-based researchers, emotion regulation is an individual's attempt to alter a situation or eliminate a stressor through problem-solving strategies such as redefining the problem, considering alternative solutions, weighing the relative importance of various options, and so on. When an individual encounters a problem, if he works hard enough, the issue can be resolved, reducing the individual's emotional tension. (Ramírez-Cifuentes et al., 2021). Researchers based on the process view believe that emotion regulation is a process.

First, from the point of view of neuroscience, Li (2021), they believe that emotion regulation includes implicit and automatic emotion generation and active emotion regulation processes. Taghvaei, Masoumi, and Keyvanpour (2021) believe that emotion regulation refers to "how individuals influence what kind of emotions they have when emotions occur, and how to experience and express emotions". Wartberg, Thomasius, and Paschke (2021) hold the belief that emotion regulation is a collection of automated and regulated psychological processes., including emotional activation, maintenance and correction of emotional state intensity and duration. Zhang (2021), including changes in emotion itself and changes in other psychological and physiological processes. Most Chinese researchers regard emotion regulation as a process. The meaning and types of emotion regulation are expounded, and emotion regulation is defined as how individuals manage and change their own or others' emotions. Zhao and Tang (2021)'s definition of emotion regulation tends to agree with Gross. They believe that emotion regulation refers to how individuals influence the occurrence, experience and expression of emotions. According to external stimuli, Jiang et al. (2021) believe that emotion regulation is how individuals regulate their internal affairs, physiological responses, and behavioural performance. According to the preceding definition of emotion regulation, the author defines emotion regulation as an individual's deliberate and active processing procedures aimed at enhancing, reducing, or maintaining previously experienced positive or negative emotions in order to achieve a reasonable benefit, the process of better adapting to the developmental needs of social life (Jiang et al., 2021). Emotion regulation demonstrates its social plasticity during this process. The mental health status of college students is depicted in Figure 1.

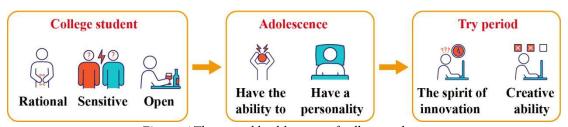


Figure. 1 The mental health status of college students

In Chinese studies, Professors Coyne and others believe mental health is a continuum. At one end of the continuum is the worst mental health state, a state of mental disorder or mental illness. At the other end is the state of optimal mental health, the state of sound personality (Coyne et al., 2021). In 2002, McDuff et al. (2019) summarised the concept of mental health and found that mental health has broad and narrow senses. In

a narrow, limited understanding, mental health refers to not having a certain mental illness or morbid mentality; Mental health, in a broad sense, refers to a person with good psychological qualities and a sound personality. Xu et al. (2019) believe that mental health must meet at least four conditions: Good psychological adaptability, self-acceptance ability, ideals and pursuits, and a constant new mentality. In compiling the Mental Resilience Scale,

researchers either started from typical cases or the perspective of the connotation of the concept of Mental Resilience. The connotation of mental toughness and internal and external protection factors were extracted, and many scales and questionnaires were compiled. These measurement tools either emphasise internal and external protective factors, or focus on the internal structure of mental toughness.

The following are some of the most widely used scales and questionnaires: First, Miller et al. (2019) compiled the Resilience Scale in 1993 based on the perspective of ability traits, which is the earliest and most widely used; Secondly, the Resilience Scale (CD-RISC) compiled by Wartberg et al. (2021) is also widely used; Finally, Ireland et al.'s resilience scale are highly authoritative, with simple questions, this scale is popular because of its small number of items (14 items) and its ability to be used in conjunction with other personality scales. In the early days, the measurement of mental health in China was mainly based on translation and revision of foreign scales, and SCL-90 and 16PF were used more often. The SCL-90 symptom self-rating scale is currently a widely used self-rating scale for measuring mental health. At the moment, when Chinese researchers assess the mental health of college students, they will also use self-created questionnaires, such as the "College Student Service Needs Questionnaire" developed by Acı, Kaya, and Mishchenko (2019), which contains 44 questions and includes a 6-factor model. The results verified the questionnaire's rationality and validity through exploratory factor analysis, confirmatory factor analysis, and reliability and validity tests. Russo et al. (2021) used an empirical method to develop a mental health scale for college students, establish a norm for Chinese college students, and test the scale's reliability and validity. The results indicate that the scale has a high degree of reliability and validity and can be used to assess the mental health status of Chinese college students. China's study techniques for measuring mental health are maturing, and the scales developed are more in tune with Chinese culture and are easier to grasp and respond to. It is critical to promote college students' physical and mental health. And higher education plays a critical role in promoting students' physical and mental health, which is also the purpose of this article. The hope is that this detail will help people, particularly college students, better understand the role of higher education in assisting with their own development and encourage them to participate actively in higher education, thereby improving their physical and psychological quality and promoting their development. As a result, it is critical to investigate the function of higher education in boosting college students' physical and mental health.

Research methods

Research objects

Using random sampling, 500 college students from multiple schools were chosen as research subjects; 480 scales were retrieved with a recovery rate of 96 percent; 475 valid scales were finally acquired with an effective rate of 95 percent after removing the invalid scales. There are four grades of pupils in total, ranging from freshman to senior year. The basic situation of the research object is shown in Table 1 below.

 Table 1

 Basic information about the research subjects

	Erechman	Sophomore	junior	senior	total	
	TTCSIIIIaii	Sophomore	year	year		
boys	56	60	58	17	223	
girl	106	46	35	41	261	
missing	0	0	0	1	1	
gender						
total	173	116	104	71	507	

Emotion Regulation Scale (ERS)

Rvdk. has compiled the Emotion Regulation Scale. However, the emotion regulation scale used in this study was adapted from Wang Li's Gross emotion regulation process model. The adapted scale is more suitable for Chinese adolescents. There are 14 items, of which the scale is divided into two dimensions, cognitive reappraisal (or reappraisal) and expression inhibition, and both dimensions contain 7 items. A 7-point scoring method was used, with 1 being "completely disagree" and 7 being "completely agree". Studies have shown that the scale has good psychometric quality. In this study, the reliability coefficient of the Emotion Regulation Scale (ERS) is shown in Figure 2.

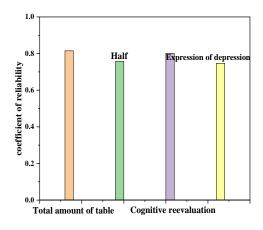


Figure. 2 Reliability coefficient of emotion regulation

From Figure 2, we can see that the reliability coefficients of the Emotion Regulation Scale (ERS) and its subscales are high, with a minimum of 0.858 and more excellent than 0.80, indicating that the Emotion Regulation Scale (ERS) has high reliability.

(1) Emotional Regulation Self-Efficacy Questionnaire: The Caprara Emotional Regulation Self-efficacy Scale adopted the Chinese version. A total of 12 items were included in three dimensions: expressing positive emotional efficacy (POS), regulating depression/pain efficacy (DES), and regulating anger/anger emotional efficacy (ANG). Using Likert 5-level scoring method (1 point means very unsatisfactory, 2 points means not very agreeable, 3 points means - - average, 4 points means quite agreeable, 5 points means very agreeable), out of 60 points, the higher the score, Indicates a higher level of efficacy. (2) Self-made questionnaires on the general situation of college students: including gender, grade, college, whether they are only children, etc. (3) Interview: The main tool is a semi-structured interview outline.

Analysis

To begin, data are entered into EpiData3.1. They are then imported into SPSS22.0 for reliability and correlation analysis. Finally, the hypothesis model is tested using Amos22.0. Additionally, in controlling and inspecting common method bias, implement the proposal of Bremer (2020) to control common method bias. To begin, the programme is tightly controlled; research subjects are drawn from various schools and grade levels; measurements are separated in time and space; and the idea of confidentiality is emphasised, ensuring measurement anonymity.

Second, statistical tests and controls eliminate common method bias as possible. All variables were subjected to an exploratory factor analysis using Harman's univariate test method; unrotated factor analysis results indicate that the eigenvalues of multiple factors exceed 1, and the first factor can only account for 27.73 percent of the variance, meaning that there is no apparent standard method bias problem.

Results and Discussion

Comparison of various factors of mental health with the Chinese norm

 Table 2

 Comparison of various factors of mental health with the Chinese norm (M±SD)

	The new norm					effect size effect size	
factor	Youth group	for college	research	t1	t2	Cohen's	Cohen's
	norm(n=781) _s	tudents(n=9941)	ents(n=9941) sample(n=508)			d1	D2
somatization	1.34±0.46	1.46±0.48	1.53±0.59	7.094	2.817	0.411	0.146
Obsessive-compulsive symptoms	s 1.69±0.64	1.98 ± 0.65	1.87 ± 0.74	6.029	-3.359	0.322	0.155
interpersonal sensitivity	1.77 ± 0.68	1.87 ± 0.61	1.73 ± 0.67	-1.889	-6.015	0.094	0.284
depression	1.59 ± 0.62	1.78 ± 0.66	1.67±0.71	4.023	-1.655	0.198	0.083
anxiety	1.51±0.56	1.66 ± 0.57	1.68±0.66	8.033	1.574	0.559	0.094
hostility	1.54 ± 0.55	1.65±0.66	1.64±0.65	4.453	0.754	0.229	0.033
fear	1.32 ± 0.49	1.74 ± 0.63	1.55±0.66	8.266	6.507	0.511	0.384
paranoid	1.55±0.61	1.55±0.59	1.58±0.65	1.959	-5.276	0.084	0.239
psychotic	1.37 ± 0.48	1.56±0.55	1.54±0.68	6.985	-1.389	0.403	0.077

Note: 1. * indicates that the correlation is significant when the confidence level (two-sided) is 0.05; ** indicates that the correlation is important at a confidence level (two-sided) of 0.01; ***When the confidence level (two-sided) is 0.001, the correlation is important, the same below. 2. t1 and t2 respectively represent the difference test t value between the mean of the research sample and the norm of the Chinese youth group in 1986 and the new norm of Chinese college students in 2008, 3. Cohen's d1 and d2 represent the mean of the research samples and the norm, the difference test effect size of the new norm for college students nationwide. From the statistical test of significance, it can be seen from Table 2 that: Except for interpersonal sensitivity, the scores of college students

on all factors were significantly higher than the norm of the Chinese youth group (18-29 years old) constructed by Jinhua in 1986 (p<0.05); The scores of college students on somatisation and terror factors were significantly higher than the new norm for Chinese college students constructed by Zhong Wenshan in 2008 (p<0.01, p<0.001), in obsessive-compulsive symptoms, interpersonal sensitivity, and paranoid factors, the scores of college students were significantly lower than the new norm of Chinese college students (p<0.001), and in terms of depression, anxiety, hostility, and psychotic factors, there was no significant difference between the new norm of college students and Chinese college students (p>0.05).

In terms of effect size, it can be determined that college students have higher scores for depression and paranoia than the Chinese youth group norm, higher scores for somatisation than the new Chinese college student norm, and lower scores for obsessive-compulsive symptoms than the new Chinese college student norm. However, these findings are only statistically significant and have no

practical significance. (d<0.2). In addition, as mentioned above, although the mental health score of college students was 147.96 ± 53.29 , which did not exceed 160 points, however, it was significantly higher than (t=7.612, p<0.001, d=0.464) 129.96 ± 38.76 of the SCL-90 statistical index of 1388 normal Chinese people, indicating that the mental health level of college students is low.

Gender difference test of each variable

Table 3
Gender difference test results for each variable (M±SD)

	boys(n=234)	girl (n=272)	t	p	effect size Cohen's d
interpersonal relationship	7.91±3.18	8.21±3.06	-1.096	0.277	0.094
study-induced stress	8.49±3.24	9.32±3.37	-2.770	0.006	0.244
punished	9.72±3.92	8.92 ± 2.84	2.579	0.011	0.234
Family, friends and property damage	4.46±2.25	4.33±1.95	0.697	0.488	0.063
health and adaptation issues	6.15±2.41	6.03±2.05	0.568	0.577	0.052
other events	4.80±2.09	4.32±1.63	2.825	0.006	0.256
life events	41.45±14.31	41.38±11.75	0.056	0.955	0.004
cognitive reappraisal	30.16±10.05	30.98±7.73	-1.019	0.313	0.092
expression inhibition	27.40±9.36	25.97±7.30	1.886	0.063	0.173
emotion regulation	57.56±18.76	56.95±13.20	0.411	0.677	0.037
controllability	44.95±12.95	45.41±9.46	-0.456	0.655	0.042
persistence	25.45±7.95	24.71±5.95	1.176	0.243	0.106
efficacy	22.33±7.16	23.90±5.32	-2.754	0.007	0.253
independence	17.25±5.34	17.52 ± 4.01	-0.631	0.527	0.049
mental toughness	109.99±30.79	111.55±21.66	-0.655	0.514	0.058
somatization	18.24±7.38	18.29±6.65	-0.067	0.948	0.003
Obsessive-compulsive symptoms	17.28±6.75	20.04±6.89	-4.528	0.001	0.403
interpersonal sensitivity	14.58±5.76	16.00±5.98	-2.697	0.006	0.244
depression	20.73±8.44	23.03±8.97	-2.964	0.002	0.263
anxiety	16.02±6.52	17.03±6.5	-1.719	0.089	0.155
hostility	9.58±4.07	9.98 ± 4.02	-1.117	0.259	0.102
fear	9.58 ± 4.02	11.30±4.39	-1.838	0.068	0.163
paranoid	9.51±4.08	9.39 ± 3.48	0.344	0.734	0.033
psychotic	15.41±6.56	15.64±5.87	-0.415	0.683	0.041
other	11.07±4.77	11.57±4.77	-1.222	0.233	0.105
mental health	143.00±54.78	152.27±51.88	-1.946	0.054	0.169

It can be seen from Table 3: In life events, the learning stress score of girls was significantly higher than that of boys (t=-2.780p<0.01), while the score for punishment events of boys was significantly higher than that of girls (t=2.580, p<0.05), and the scores of other events in boys were also significantly higher than those in girls (t=2.824, p<0.01); In emotion regulation, there was no significant difference between boys and girls (p>0.05); In terms of mental toughness, the efficacy score of girls was significantly higher than that of boys (t=-2.750,

p<0.01); In terms of mental health, the scores of obsessive-compulsive symptoms of girls were significantly higher than those of boys (t=-4.529, p<0.001), and the scores of interpersonal sensitivity and depression were also significantly higher than those of boys (p<0.01); The gender differences in other variables were not significant (p>0.05). Concerning the criteria for determining effect size given by Limbu et al. (2019), the findings in Table 3 are statistically and practically significant.

The regulatory effect test of expression inhibition

Table 4

According to the previous correlation analysis results, we first tested the moderating effect of expression inhibition between learning pressure and somatisation. All variables were standardised and converted into Z-scores before analysis, and then tested sequentially using multiple linear regression analysis.

Test of the moderating effect of expression inhibition between learning pressure and somatisation

	regression equation	R2	Changes in R2
first step	Y=0.337X-0.35U	0.106	_
second step	Y=0.002+0.337X-0.041U-0.021XU	0.107	0.001

Note: 1. Y in the table means somatisation, X means learning pressure, and U means expression inhibition; 2. Since the product term is not involved in the first step, the standardised solution is used below. The estimated equation in Table 4 is divided into two steps: The first step is the regression of somatisation on learning pressure, expression inhibition, the second step is the regression of somatisation on learning pressure, expression inhibition, learning pressure*expression inhibition, significance of learning pressure*expression inhibition coefficient. It can be seen from Table 4 that: The regression coefficient of the product term XU in the second step was not significant (t=-0.729, p>0.05, the change of R2 was only 0.001), so the moderating effect of expression inhibition on the relationship between somatisation and learning pressure was not significant.

Comparison of various factors of mental health with the Chinese norm

The author calculated the mean of each mental health factor in the sample. They are the norm of the Chinese youth group (18-29 years old) established by Jinhua in 1986, compared with the norm of Chinese college students established by Zhong Wenshan in 2008, which got different results. College students' ratings in all categories (except interpersonal sensitivity) were statistically considerably higher than the norm for the Chinese youth group in 1986. However, compared with the norm of Chinese college students in 2008, only the scores on somatisation and terror factors were significantly higher than the norm, while the scores on obsessive-compulsive symptoms, interpersonal sensitivity, and paranoia were significantly lower than the norm, in depression, anxiety, hostility, and psychotic factors, there was no significant difference with the norm.

In terms of effect size, it can be concluded that college students have higher scores for depression and paranoia than the Chinese youth group norm, a higher score for somatization than the new norm for Chinese college students, and a lower score for obsessive-compulsive symptoms than the new norm for Chinese college students. However, the findings of these studies have only statistical

significance and no practical significance. (d<0.2). The average score of mental health score was 147.96±53.29, which did not exceed 160 points, but was significantly higher than (t=7.612, p<0.001, d=0.464) 129.96±38.76 of the SCL-90 statistical index of 1388 normal Chinese people. As times are changing, China has undergone several massive reforms, bringing about dramatic changes, on the one hand, the rapid development of society has promoted economic prosperity, but on the other hand, it has also brought about realistic pressures such as job competition, the pressure of employment and survival of the new generation of college students is gradually increasing, which may be the main reason for the gradual decline of the mental health level of today's college students. With the development of the Internet age, most teenagers have basically developed bad habits such as excessive use of entertainment media tools (such as smartphones and computers), especially for college students, staying up late to sleep has become their normal daily phenomenon, somatisation, anxiety, hostility, terror, psychosis, obsessive-compulsive symptoms, etc, studies have shown that, nocturnal (late sleep and late rise) circadian rhythms have been linked to mental illnesses such as mood disorders.

Additionally, the subjects chosen for the study live in a high-altitude, cold-climate, hypoxic environment. Because college students' psychological adaption is inextricably linked to their physical health, it is more likely to appear as somatic symptoms when psychological distress occurs. Therefore, these reasons may be why the somatisation score of college students is significantly higher than the norm of the Chinese youth group in 1986. College students' interpersonal sensitivity and paranoia scores were significantly lower than the new norm for Chinese college students in 2008. This may be due to the gradual improvement of college students' interpersonal communication skills, and the emergence of the term "Buddhist youth" in recent years reflects a shift in the mentality of this group of college students; they are no longer paranoid about certain fixed things, nor are they obsessed with some specie.

Countermeasures and suggestions

(1) Pay attention to the life events and mental health of college students

According to research, college students' life circumstances can considerably and positively influence their mental health. Among life events, the three types of life events that cause the most stress and psychological sensations in college students are study pressure, interpersonal connection problems, and health and adaptability concerns. Thus, researchers in psychology and education should pay close attention to the life events of college students and the resulting mental health concerns, particularly the learning pressures experienced by firstyear students and seniors, as well as freshman relationships. Through group counselling, we may assist first-year students in adapting to new learning styles, learning environments, and interpersonal connections, and we can assist senior students in reducing academic pressure through individual counselling, promoting their mental health growth.

(2)Establish a new norm for college students' mental health

The overall mental health of college students has changed over time, and many psychological researchers have raised concerns about the 1986 mental health standard's applicability in the modern era. A reliable reference standard can improve the accuracy of research results and reflect the rigour of scientific research. However, there is still a dearth of current, credible investigations. As a result, it is critical to developing a new mental health standard for average Chinese and college students. Psychologists have a long way to go in their studies.

(3) Focus on cultivating the mental toughness of college students

Mental toughness is an essential factor affecting mental health, and the mental health education of college students should focus on cultivating their mental toughness. University of California, Davis, Research Individual Development Petrova et al. (2020), some argue that mental toughness is not constant. On the one hand, too many adverse events can deplete an individual's mental toughness, just like a spring, which loses its elasticity with too much pressure. But on the other hand, mental toughness can be acquired through learning, individuals with a low level of mental toughness can gradually gain mental toughness after they learn to deal with their own negative events. Therefore, college students' mental health education courses should cultivate their mental toughness and self-improvement personality. Create a positive school

culture atmosphere, exercise willpower for college students, develop their "perseverance and perseverance" persistence, and cultivate their independence and sense of efficacy through the teaching form of activity tasks.

Conclusion

According to the data and conclusions obtained from the research, the author analyses the impact of mental health education courses on improving college students' ability to regulate emotions. Using a comparative analysis of emotional attribution, emotional expression, and other questionnaires, the author determines that the emotional regulation score of college students is 57.20. (t=13.626, p<0.001, d=0.605), and the average score of the total mental toughness score was lower than 120 points, which shows that college students' overall mental toughness level is weak and needs to be improved. The average score of mental health total score was 147.96±53.29, which did not exceed 160 points, indicating that the positive screening was not considered in general. The average score of mental health score was 147.96±53.29, which did not exceed 160 points, but was higher than the statistical index results of SCL-90 of normal Chinese people. As a critical component of ideological and political education, mental health education has expanded the research perspective on ideological and political education through in-depth research, enriched the content of ideological and political education, broadened the channels of ideological and political education, and infused new vitality into the development of a socialist education power with Chinese characteristics in the new era, contributing to the power of curri College students had a greater sense of selfconfidence when it comes to properly controlling their emotional state, but a lower sense of self-confidence when it comes to efficiently regulating negative emotions. As a result, in emotional management education, we should place a greater emphasis on the therapy of negative emotions. Emotion management education in colleges and universities should be carried out according to the characteristics and needs of different groups of college students.

There are also some shortcomings in this study, such as limited personal strength and survey time, failure to report the reliability and validity of small scale test after selecting certain items in the questionnaire, and failure to introduce more Angle difference analysis to the questionnaire data to obtain more accurate comparison results before and after. In addition, due to the particularity of education and time constraints, it is not possible to carry out in-depth follow-up research on courses and survey objects. If there is an

opportunity, I hope my younger brothers and sisters can carry out a more in-depth investigation and analysis based on this research. At the same time, I found that my theoretical level and practical experience are relatively limited in this research. I hope to strengthen my theoretical accomplishment, improve my practical teaching level, and accumulate relevant teaching experience for further research in my future study and work.

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