

there was no significant difference in anxiety index between the experimental group and the control group, the anxiety index of the experimental group was significantly improved. This shows that mathematical modeling can alleviate the anxiety of college students to some extent. In the application of mathematical modeling to college students with anxiety, we should continuously improve the teaching countermeasures, make full use of information resources and explore a new teaching mode. Reform curriculum assessment methods, mobilize the subjective initiative of college students for the relief and treatment of anxiety disorders in college students to provide some help.

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INVESTIGATION AND ANALYSIS OF TRAVELING PSYCHOSIS AND TOURISTS' MENTAL HEALTH

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Background: Journey psychosis refers to a transient psychotic disorder that occurs during travel. Traveling psychosis is also called traveling mental disorder, which is a common sudden mental disorder during travel. This disease is more common among passengers on railway trains and can cause serious personal injury and death accidents. The symptoms of travel disorder are diverse, with varying degrees of severity, and generally have the following characteristics: 1. The onset is more rapid, the duration is short, and can be completely relieved; 2. The basic symptoms are manifested by varying degrees of consciousness disorder, and the understanding and judgment are reduced. Lack of reason, behave naively, behave close to primitive instinct, forget or partially forget afterwards, etc.; 3. Persecution delusion is its most prominent and common symptom; 4. Traveling mental disorders also show psychomotor excitement or anxiety, such as increased speech and movement, loss of laughter, yelling, walking around, inexplicable tension, feeling of imminent disaster, restlessness, etc. Travelling mental disorder is a transient mental illness that generally can be recovered without special treatment. The average recovery time is 8 hours.

There are three reasons for the onset of travel psychosis: 1. Speech gap caused by poor language knowledge; 2. Reduced vitality caused by fatigue; 3. Pre-illness schizophrenic or hysterical personality. The occurrence of travel psychosis is related to pre-ill dependence or withdrawn personality, mental fatigue caused by continuous insomnia, and recurrent physical weakness. Most people with mental illness on the journey are traveling by car for the first time, with low education level, and most of them are farmers and migrant workers. Due to the serious overcrowding of the train and the high concentration of CO₂ in the car, most patients have no seats in the hard-seat car. They are either standing or trapped in a corner, with limited physical activity, and they are bound to be extremely fatigued. The patient has no food or little food for a long time, and the number of times of water supply in the compartment is less, and the amount of heavy drinking water is reduced. Under the above conditions, the patient's internal environment is decompensated and abnormal physiological indicators (such as white blood cell count, blood sugar, blood potassium), Hematocrit, etc.). The patient has an introverted or paranoid personality, manifested as silent, withdrawn, pessimistic, hostile to others, etc., and has a certain psychological quality of susceptibility. Patients often have an unpredictable and anxious mood before getting on the bus, most of them go out for the first time, carry hard-earned entrepreneurial capital with them, are in an unfamiliar vehicle, and lack interpersonal communication.

Objective: According to domestic and foreign survey data, long-distance train travel is the most common cause of mental illness during travel, followed by long-distance navigation, intercontinental aviation flights, and long-distance bus travel. Most patients with mental illness during travel are young and middle-aged, most of whom are men. Most of them are farmers or migrant workers. Most of them are below elementary school. Their education level is low. The vast majority of patients have no family or personal history. Therefore, it is of practical significance to investigate and analyze travel mental illness and the mental health of tourists.

Subjects and methods: The clinical manifestations of travel psychosis are fully in line with the characteristics of transient psychotic disorders, and its manifestations are diverse, mainly depression, anxiety, hostility, terror and paranoia. In the survey results, five levels of 1-5 are used to quantify the impact value of specific factors. 1 represents irrelevant, 2 represents slight impact, 3 represents general impact, 4 represents significant impact, and 5 represents sufficient impact. In order to reduce the impact Individual subjective causes a large error. A test was conducted on 500 traveling psychosis, and the average was finally selected, and the result was determined by rounding.

Results: By investigating travel mental illness and the mental health of tourists, specific impact values can be obtained. The results of the investigation are shown in Table 1. Anxiety and depression not only affect the quality of life of patients, but also affect the course and recovery of the disease, which should arouse our attention.

Table 1. Survey results of travel psychosis and the mental health of tourists.

Factor	Depression	Anxiety	Hostile	Fear	Paranoid
Tourist	5	5	3	3	4

Conclusions: As a special kind of mental disorder, travel psychosis is the result of multiple factors that combine physiological, psychological and social medical models. The onset of travel psychosis has a certain geographical and time distribution law: the geographical environment is the most on the Lanxin line from the inland to Urumqi. This section is located in the Gobi, with rare populations and trees, and belongs to the dry plateau climate, which easily leads to travel psychosis. In terms of time, the peak period of Spring Festival travel from January to March is the most, because during this period the number of people who take the train is the most, and it is prone to travel mental illness.

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THE INFLUENCE OF THE INNOVATIVE DEVELOPMENT OF TRADITIONAL HANDICRAFT ART ON STABILIZING THE MOOD OF PATIENTS WITH MENTAL ILLNESS

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Background: Patients with mental illness often show obstacles in behavior, thinking, cognitive function, and emotion. The course of the disease is long, recurring and difficult to heal, and the prognosis is poor. Depression may occur at all stages of mental illness, and the symptoms may vary in severity. Depressive symptoms obviously affect the daily life of patients. Patients often show passive laziness due to depression and loss of interest, which affects the recovery of illness. A number of studies have found that depressive symptoms of mental illness play an important role in the occurrence of suicidal behavior. Traditional manual art Training is a branch of work and entertainment therapy, which enriches patients' spiritual life, mobilizes patients' subjective initiative, and cultivates their life and social adaptability. Traditional manual art training can alleviate and improve the symptoms of depression in patients with mental illness, enhance hands-on ability, improve defense capabilities, and help the recovery of mental illness.

Objective: Traditional manual art training can alleviate the mental symptoms of patients with mental illness and improve their mood. Mental illness may involve obstacles in behavior, thinking, perception, and emotion, and incoordination of mental activity. Patients with this disease have lateralization damage to the brain, and are manifested as hyperfunction of the right hemisphere and hypofunction of the left hemisphere, which can easily lead to emotional apathy, Loss of conversational ability, etc. For patients with mental illness, it is possible to achieve very good therapeutic effects with art therapy on the basis of drug therapy. Traditional manual art training requires the cooperation of the patient's hands, eyes, and brain to improve the patient's perception, observation and creativity, and exercise their coordination.

Subjects and methods: People are not unfamiliar with the art of origami. The operation is simple and easy to learn. You can learn all kinds of origami through short videos. The image is vivid, and the works that people with mental illness like can learn through short videos at any time. A random selection of female convalescent patients with mental illness who were hospitalized in a tertiary A-level mental illness specialist hospital from January to December 2019. A total of 64 cases met the entry criteria, and were divided into the experimental group and the control group according to the random number table method, each with 32 cases. The average age of the experimental group was (37.97±13.01) years, and the course of disease was (7.9±2.8) years. The average age of the control group was (43.63±11.61) years, and the course of disease was (8.6±2.1) years. There was no statistically significant difference between the two groups of patients in terms of age, course of disease, education level, etc. ($P > 0.05$), and they were comparable.

In the survey results, five levels from 0 to 4 were used to quantify the impact of specific factors. 0 means