

1.

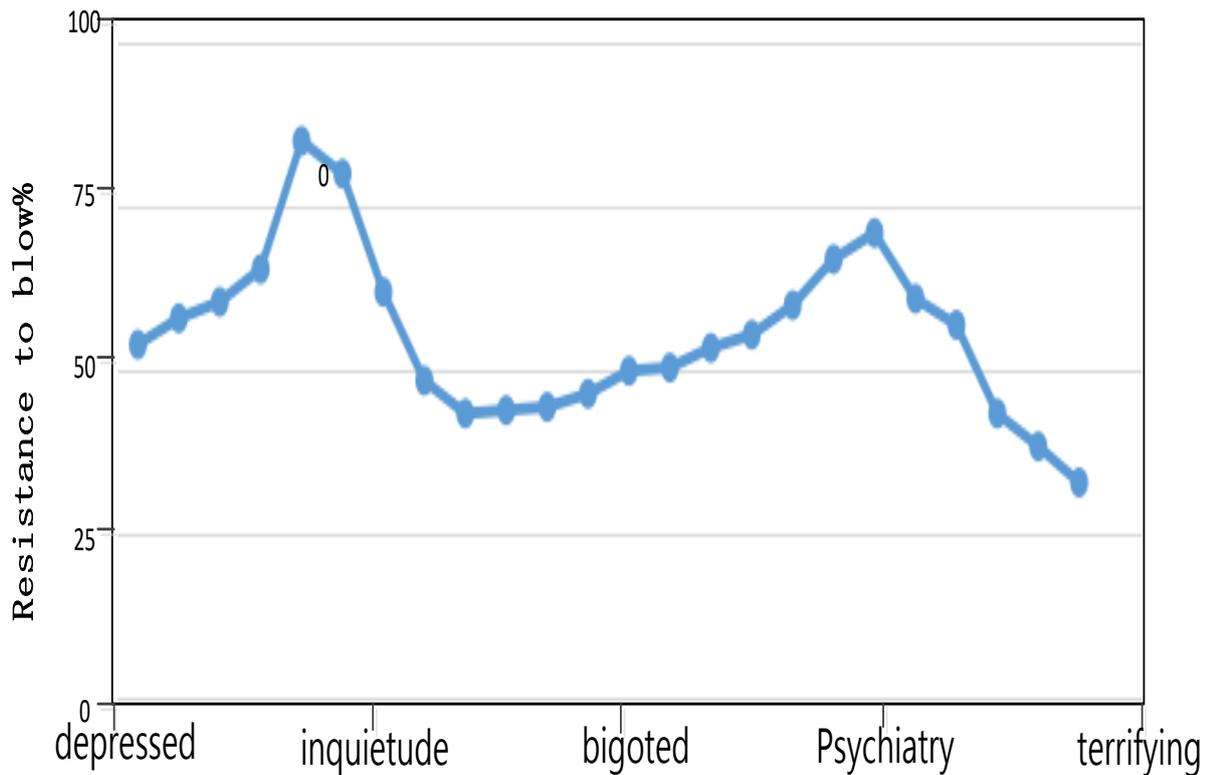


Figure 1. Analysis of psychological resistance among sports students.

Among the 673 people who completed the survey, 41.0% had mild symptoms; 10.7% had moderate symptoms; and 1.2% had severe symptoms. This set of data compares the mental health survey results of 1,267 college students in Fujian Province (mild 61.56%, moderate 24.94%, and severe 1.58%), and the mental health survey results of 5220 college students in a city (moderate 16.51%) are all low. The proportions of college students with moderate psychological problems on each factor in descending order are hostility, compulsion, interpersonal sensitivity, depression, paranoia, psychosis, horror, anxiety, etc., which is similar to domestic related research.

From the comparison of gender, it is found that the psychological symptoms of girls are more extensive and more obvious than that of boys. This is similar to some related studies. Therefore, the psychological health of girls should be paid attention to. From the comparison of majors, it is found that the mental health level of the sports training major is better than that of the other three majors. This is because sports training majors take longer and stronger in sports training. Long-term participation in sports training makes their education more cheerful and outgoing, showing that they can withstand frustration and misfortune.

Conclusions: Investigate the relationship between the mental health of college students under physical exercise and educational methods. The symptom self-rating scale and Eysenck education questionnaire survey were conducted on 987 college students under physical exercise. College students with above-medium-level psychological problems accounted for 10.7%; girls' psychological symptoms were more extensive and more obvious than boys; the total scores and factor scores of the sports training major were significantly lower than those of the other three majors. Under physical exercise, the mental health of college students is better than that of domestic college students, and there is a close relationship between mental health and education methods.

Acknowledgement: The research is supported by: the Education Department in Hainan Province of China (NO. Hnjg2018-85).

* * * * *

TRANSLATORS' ANXIETY EXPRESSION ANALYSIS AND RELIEF STRATEGIES IN THE PROCESS OF TRANSLATIONS

Xiangnan Xu

College of Foreign Languages, Jilin Normal University, Siping 136000, China

Background: With foreign companies pouring into China since the Reform and Opening up, more and more demands for related foreign materials, websites, and software being docked with locals, and international trade, international technical exchanges, and international cultural communications being cooperated with locals, a huge translation market has been created. Currently, there are about 60,000 translation professionals and a conservative estimate of 500,000 translation practitioners in China based on the data provided by Translators Association of China.

In the process of Chinese-English translation, translators would feel psychologically anxious due to certain translation barriers they encounter by their own. This unhealthy state, which is either lurking in the heart or appearing on the surface, is extremely detrimental to translators to carry out their translation activities normally and also has serious adverse effects on their physical and mental health.

Objective: It aims to summarize translators' psychological expression of anxiety and the ways of relief in the process of translation, to analyze and evaluate the effectiveness of mainstream relief strategies with the expectation of providing a feasible reference for solving translators' psychological anxiety.

Subjects and methods: An online questionnaire survey is conducted on 2,000 professional translators with 1,436 valid questionnaires collected. For 144 translators who agreed to participate in the test, they were grouped and their stress relief status was tested with the Self-Rating Anxiety Scale (SAS).

Study design: The main pressure relief methods selected by translators are extracted based on the questionnaire survey results. The 144 translators who participated in the test were evaluated for the first time with the SAS scale, and then a second SAS evaluation were conducted ten days later for the translators who took different stress relief methods.

Results: Among the 1,436 questionnaires collected, the coping styles chosen by the translators when facing translation anxiety are shown in Table 1.

Table 1. The coping styles chosen by the translators when facing translation anxiety.

Coping styles	Seeking help	Exercise relaxation	Music or video games	Distracting	Negative coping	Other
Percent/%	12	23	15	18	22	10

According to Table 1, 12% subjects seek help from others to complete the translation task when they feel anxiety in the process of translation; 18% subjects relieve their pressure through music and video games; 15% subjects divert their attention to their personal hobbies. By contrast, exercise relaxation is the main relief method for most translators. However, up to 22% subjects treat anxiety negatively and do not try to improve their mental state.

The 144 professional translators who participated in the test were divided into 5 groups. The first four groups were taken different anxiety relief methods, and the fifth group was the control group. As mentioned in study design, two tests were conducted to translators using SAS scale. The scores of the two tests were calculated and the average value was taken and shown in Table 2.

William W.K. Zung set the SAS standard score of 50 as the threshold for anxiety symptoms based on the test results of subjects. According to the analysis of the evaluation results of 1,158 normal people (normal models) made by Wenyuan Wu et al. from the national collaboration group, the average score of 15 positive questions is 1.29 ± 0.98 ; the average score of 5 negative questions is 2.08 ± 1.71 ; and the average score of 20 questions is 29.78 ± 0.46 . It defines that no anxiety under the score of 50, mild anxiety between 50 to 59, moderate anxiety between 60 to 69, and severe anxiety with 70 and above.

Table 2. Effect evaluation of different anxiety coping styles.

Coping styles	Seeking help	Exercise relaxation	Music or video games	Distracting	Control group
SAS average score (first test)	64.2	63.0	59.9	62.8	63.2
SAS average score (second test)	49.1	53.5	54.0	54.4	64.5
Value change	-15.1	-9.5	-5.9	-8.4	+1.3

According to Table 2, the four methods have positive effects on anxiety relief with variable degree and all of them help translators achieve improvements from moderate anxiety to mild anxiety. Among them, the method of seeking help from others has the most obvious effect; the effect of relaxing though music or

video games is relative weak; and the effects of exercise relaxation and distracting are close to each other. By contrast, the anxiety value of the control group without taking any relief method increases slightly.

Based on the analysis of above data, most translators try to find ways to relief their anxiety in the translation process. A few translators treat the anxiety negatively. Among the alternative relief strategies, the method of seeking help has the most obvious affect, which just confirms the latest research results of Kelly McGonigal, psychology professor of Stanford University: Interpersonal relationship can relieve people's stress, and the stress can also be relieved by seeking help and helping others. The response to stress will therefore make people excited and full of fighting spirit. However, among the 1,436 respondents, only 12% translators take this method. It is related to the relative isolation of work environment in the post-pandemic era, and Chinese characteristics of being introverted and rarely seeking help from others. Exercise relaxation has become the most popular method due to its excellent effects and various benefits. Translators without taking any relief method are always in the state of anxiety, and their anxiety level increases in the two tests. If this happens ad continues, it may induce serious mental illness.

Conclusions: In summary, it will bring about positive effects of variable degree to take different anxiety relief strategy. Based on the comparative analysis of each strategy, the strategies of social-oriented seeking help and personal promotion-oriented exercise relaxation have excellent effects and should be advocated vigorously; the strategies such as developing personal hobbies and relaxing through music also have obvious effects and can be used as supplements.

* * * * *

IMPROVEMENT OF HUMAN RESOURCE MANAGEMENT BASED ON SUBJECTIVE WELL-BEING

Xiangjing Meng

Southampton Business School, University of Southampton, Southampton SO17 1BJ, UK

Background: Subjective well-being (SWB) is how people evaluate their lives based on their own standards, that is, the well-being based on the individuals' subjective evaluation. It is an important comprehensive indicator to measure individual's quality of life, which includes life satisfaction, marital satisfaction, lack of depression and anxiety, and many factors such as positive mood and emotions. In the case of doctors, the subjective well-being has its own characteristics in the industry. As frontline staff in hospital, doctors' work pressure is high and their working hours are unstable, which makes them a prone group of job burnout. Job burnout has a great negative impact on individuals' physical and mental health, their work, family, and the organization and society where they work and live. Subjective well-being is a positive psychological feeling and cognition, which relates to doctors' mental health. As practice shows, it is effective to start from the perspective of pursuing doctors' subjective well-being to relieve doctors' job burnout.

Subjects and methods: An anonymous questionnaire survey using the self-made "Doctors' Subjective Well-Being Scale" was carried out in 500 doctors who were randomly selected from Zhengzhou, Anhui, and Beijing. With 459 questionnaires being returned and 61 invalid questionnaires being removed, there are a total of 398 valid questionnaires and the rate of validity is 87%. The analysis of current doctors' subjective well-being consists of several dimensions in this survey: work satisfaction experience, work-family relationship experience, family emotional support, harmonious working atmosphere, doctor-patient relationship trouble, self-satisfaction, negative emotional experience, physical and mental health experience. Each dimension covers different questions.

"Work satisfaction experience" includes questions relating to satisfaction experience of work promotion space, self-worth expression, salary, incentive mechanism, leadership management, and organizational recognition. "Work-family relationship experience" mainly involves questions about conflicting relationship between work and family. "Family emotional support" involves questions about the support of close relationships including relatives, spouses and lovers. "Harmonious working atmosphere" involves questions about the harmonious relationship of mutual assistance and care between colleagues. "Doctor-patient relationship trouble" is mainly about questions relating to the relationship between doctors and their clients-patients. "Self-satisfaction" is mainly self-evaluation, including questions about positive emotions such as self-approval, self-acceptance, and self-confidence. "Negative emotional experience" mainly involves questions about recent emotional state, including negative emotions such as meaninglessness, depression, inferiority and so on. "Physical and mental health experience" mainly includes questions about recent physical and mental states, including physical fatigue, mental tension, anxiety for physical health