

EFFECT OF COMMUNITY PENSION ON DEPRESSIVE PSYCHOSIS IN THE ELDERLY

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Background: Community elderly care is a new type of elderly care model. Its essence is a home-based elderly care system based on community service, including life care, housekeeping service, spiritual support and emotional regulation of the elderly, short-term community trusteeship and door-to-door service, combined with the operation experience of professional elderly care institutions. The establishment of community pension system needs to complete the arrangement of dining tables or canteens for the elderly, the establishment of medical service institutions for the elderly, the establishment of activity centers and marriage agencies for the elderly, and the establishment of institutions for the training and employment of elderly talents. Under the community pension model, the elderly can obtain more comprehensive and detailed services and psychological support, which is of great significance for the elderly with depressive psychosis due to widowhood, less contact with their children, introverted or lonely. Because the main clinical symptoms of depressive psychosis are depression, depression, pessimistic way of thinking, cognitive impairment, memory decline, etc., community elderly care services can provide more social activities and spiritual support and comfort for the elderly with depressive psychosis, which is important to alleviate their pessimism, depression Anxiety and other negative psychological activities play a significant role. They can also improve the immunity of the elderly with depressive psychosis, so as to reduce the severity of their illness and chronic diseases, and even reduce their potential risk of self mutilation and suicide.

Objective: To explore the role of community elderly care service in the treatment of depressive psychosis of the elderly, so as to find out the deficiencies existing in China's community elderly care system and institutions and the methods that can be further popularized, so as to provide practical and feasible reference opinions for improving the quality of community elderly care service and improving the construction of community elderly care work process and laws and regulations.

Participants and methods: A sample of elderly people with depressive psychosis was purchased from a professional data processor in China. All samples were divided into young elderly people (aged 60-74 years), medium elderly people (aged 75-89 years) and long-lived elderly people (aged no less than 90 years) according to the standards of the World Health Organization. Logistic regression analysis was carried out on three types of elderly samples, the dependent variable is whether suffering from depressive psychosis, and the independent variable is gender, age, pension mode (home-based pension, institutional pension, community pension), and community pension service level (poor, relatively poor, relatively good, good). To analyze the influence of pension forms on whether the elderly have depressive psychosis in different age groups.

Results: Multivariate logistic regression was performed on the data set, and the statistical results were obtained in Table 1.

Table 1. Multivariate logistic regression results of influencing factors of depressive psychosis in the elderly

| Independent variable | Independent variable subdivision category | Regression coefficient | Standard error | P |
|----------------------|---|------------------------|----------------|-------|
| Age group | Young and old people | 0.346 | 0.151 | 0.258 |
| | Middle aged people | 0.517 | 0.187 | 0.019 |
| | The longevous | 0.968 | 0.235 | 0.007 |
| Gender | Male | 0.415 | 0.289 | 0.006 |
| | Female | 0.512 | 0.221 | 0.538 |
| Pension mode | Home care | 0.880 | 0.317 | 0.297 |
| | Institutional pension | 0.214 | 0.334 | 0.020 |
| | Community pension | -0.637 | 0.152 | 0.005 |

The analysis of Table 1 shows that within the 95% confidence interval, the middle-aged, the long-lived, men, institutional pension and community pension are related to the incidence of depressive psychosis of the elderly (P value is less than the significance level of 0.05), and the middle-aged, the long-lived, men, home pension and institutional pension are risk factors, and the community pension is a protective factor. In addition, the study also found that the older the elderly group, the lower the probability of depressive psychosis among those who take community pension. Specifically, among the young elderly, the middle-aged elderly and the long-lived elderly, the proportion of the elderly with depressive psychosis in the community pension mode is 1.5%, 1.7% and 2.3%, which are 34.2%, 47.5% and 58.6% lower than those in the other two

pension modes of the same age group, respectively.

Conclusions: This study collected the data of the elderly with depressive psychosis and different pension methods, and carried out multi factor logistic regression analysis. The analysis results show that community pension is a protective factor to judge whether they have depressive psychosis, and the older the elderly who take community pension, the lower the probability of suffering from depressive psychosis. The results show that the community pension mode helps to reduce the probability of the elderly suffering from depressive psychosis and improve the quality of life of the elderly. The relevant government departments and social charities should cooperate and integrate with each other, expand the scale of industry talents, increase the investment in social funds and material resources, and promote the community pension mode on a large scale.

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PROMOTING EFFECT OF TRADITIONAL CLASSICAL MUSIC ON THE TREATMENT OF PSYCHOLOGICAL ANXIETY SYMPTOMS

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Background: Psychological anxiety disorder, also known as anxiety neurosis, is a common neurosis. Patients often have anxiety, accompanied by sweating, palpitation, excessive tension, excessive anxiety, shortness of breath, sleep disorders and other symptoms. When the symptoms are serious, it will even affect the social ability of patients, and patients generally cannot independently control the state of psychological anxiety disorder. The main types of a psychological anxiety disorder include panic disorder, agoraphobia, social phobia, specific phobia, generalized anxiety disorder, separation anxiety disorder, etc. The causes of psychological anxiety disorder are generally related to the psychological, physiological, social environment and other factors, including patients' diseases and external injuries, adverse health status, accumulated pressure factors such as misuse of drugs and alcohol are closely related to psychological anxiety. A large number of studies have shown that music therapy can help improve the psychological anxiety symptoms of patients, and it is speculated that the effect of classical music with a more soothing rhythm and beautiful rhythm will be more significant. Therefore, this study designs an experiment based on classical music therapy to test the practical role of classical music in psychological anxiety therapy.

Objective: Based on the data of classical music therapy experiment and the analysis of the relationship between classical music and human psychological emotion, to explore the feasibility and practical effect of using classical music in the treatment of psychological anxiety disorder, to provide practical case support and thinking results from more angles for the treatment of psychological anxiety disorder by music therapy in China.

Participants and methods: 246 volunteers willing to participate in the experiment were randomly selected from domestic volunteers, and divided into a music treatment group and routine treatment group, with 123 people in each group. The basic data related to the experiment were statistically compared between the two groups, and the experiment was started after it was determined that there was no significant difference in the basic data. In the experiment, the routine treatment group was given routine psychotherapy, including drug treatment, emotional guidance, psychotherapy and so on. The music therapy group also received classical music therapy on the basis of the treatment methods of the conventional treatment group. The specific treatment methods are as follows. Establish a music intervention group, which is composed of music therapists, psychologists and nurses with rich clinical experience. The group members need to understand the severity and main symptoms of psychological anxiety of each patient and the music preferences of the research object, and then formulate a classical music treatment plan suitable for the current patients. When performing music therapy measures, it is necessary to require patients to complete urination and defecation in advance, put on headphones to relax and close their eyes, and play classical music tracks set in advance. The volume of the music should be controlled within 25-30 dB. The time of single music therapy should not exceed 50 min and not less than 20 min. The experiment should be carried out twice a week for 3 months. At the same time, in the process of playing music, psychologists should maintain a certain degree of language communication with patients and guide patients to experience