Results: After 12 weeks of physical rehabilitation exercises, patients have greatly improved their knowledge, beliefs, and behaviors, they have mastered certain knowledge about their own diseases, and their compliance with treatment has increased significantly. The experimental results are shown in Table 1.

Conclusions: Physical rehabilitation exercise can effectively eliminate negative cognition a Table 1 Comparison of rehabilitation between the two groups before and after the experiment.

Table 1. Comparison of rehabilitation between the two groups before and after the experiment.

Group	Boost self-confidence		Improve compliance		Eliminate bad behavior	
	Before the experiment	After the experiment	Before the experiment	After the experiment	Before the experiment	After the experiment
Test group	0	4	0	3	0	3
Control group	0	1	0	1	0	1

In the process of physical rehabilitation exercise, pay attention to follow the principle of individualization and the principle of gradual and orderly progress, embodying people-centeredness and emphasizing the wishes, needs and emotions of patients. Choose appropriate rehabilitation exercise methods and formulate goals according to the specific conditions of the patients, and combine the long-term goals and short-term goals, so that patients can build up confidence. It can effectively improve the compliance of physical rehabilitation exercise, pay attention to establishing a cooperative partnership with patients during the exercise process, and mobilize family members to accompany the training together. Use exercise behavior to intervene to eliminate bad behavior. According to the actual situation of the patients, we use various physical rehabilitation exercise measures to give positive reinforcement in time, increase the initiative of participation, and gradually form stable and lasting health concepts and healthy behaviors, so that the condition of patients with chronic schizophrenia can be alleviated.

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THE IMPACT OF RELOCATION FOR POVERTY ALLEVIATION AND RESETTLEMENT ON THE SOCIAL BEHAVIOR OF RURAL MENTAL PATIENTS

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Background: At present, the incidence of mental illness has reached a relatively high level. Especially, the number of rural patients is relatively large and the distribution is relatively scattered. Due to restrictions on rural medical conditions, economic difficulties, cultural backwardness and other reasons, an effective prevention, treatment and assistance system for mental illness has not been really established so far. Mental illness is one of the main culprits causing disability and death. Mental patients, especially those suffering from severe mental illness, are not only seriously impaired in their own social functions, but also prone to accidents, which have adverse impact on the harmonious development and stable and orderly life of rural society, and cause serious damage to society and others. For rural residents, poverty has always been an unavoidable major problem, and living in a poor environment is more likely to cause mental illness. Compared with urban residents, rural residents live in poor living conditions, fragile ecological environment, frequent natural disasters and other areas for a long time. Relocation and resettlement of rural poor people is an important strategy for precise poverty alleviation. Therefore, it is an important issue to integrate poverty alleviation with improving rural environment and preventing and treating mental diseases of rural residents.

Objective: It is reported that the incidence of mental illness is on the rise at present, but at present mental health resources are relatively scarce, only a small number of mental patients can be treated in a timely manner, the community supervision is deficient, most mental patients are "out of control", some patients under the control of mental illness suddenly have risky sexual behaviors, some cause significant loss of life and property, and mental illness has become a serious public health problem and a relatively prominent social problem. Therefore, it is of great significance to explore the intervention management measures for mental patients in communities, especially in rural areas, to control mental symptoms and prevent and reduce risk behaviors. At the same time, the rural population is often the focus of poverty alleviation, as long as there is a good economic foundation in order to achieve more accurate disease control.

However, the development of ecological poverty areas is seriously limited by resources, which makes it difficult or even impossible for local poor households to obtain enough means of production to ensure production and operation activities, thus making the economic development of the area and the poor households' efforts to shake off poverty and become rich under great pressure. The policy of poverty alleviation through relocation has played a certain role in improving the production and living environment of the poor households, increasing their income and protecting the ecological environment.

Subjects and methods: A total of 458 questionnaires were collected from villagers relocated from 11 resettlement sites for poverty alleviation in a certain county during February 2018. After eliminating the invalid questionnaires, a total of 381 valid questionnaires were obtained, with an effective rate of 83.18%. Most of the interviewees are young adults with low education level, so the author interviewed the relocators and filled in the questionnaires instead of the relocators. The data is true and valid. The questionnaire consists of five parts: basic information of farmers, housing conditions after relocation, surrounding facilities, neighborhood, support measures, rehabilitation of mental patients and social behavior changes.

Study design: Objective conditions, the form of satisfaction with the design of the questionnaire. About the mental illness patient's situation, uses the concise mental illness rating scale, the daily life ability scale. The Personal and Social Functioning Scale assessed psychotic symptoms, ADL activity, and social functioning. Follow-up evaluations were performed at baseline and at intervals of 3 months.

Methods: The measurement and counting data were described by mean±standard deviation, frequency respectively. The statistical test of measurement data was Z test or analysis of variance, and the statistical test of counting data was Chi-square test. The data were analyzed by SPSS15.0.

Results: After statistical analysis, the impact of relocation of rural residents on the social behavior of rural mental patients was analyzed, and the satisfaction of rural residents on relocation of rural residents and the law of changes in social behavior of rural mental patients was analyzed. The results are as follows: Table 1.

Table 1. Statistical results.

Category		Percentage of population/%
Satisfaction of Relocation and Resettlement for Poverty Alleviation	Dissatisfied	0
	A little dissatisfied	7.3
	General	20.6
	Relatively satisfactory	56.8
	With great satisfaction	15.3
Changes in social behavior of rural psychotics	To recover	25.4
	Notable progress	46.2
	Progress	19.7
	Invalid	8.7

Through investigation and analysis, it is found that the majority of residents are satisfied with the resettlement and the number of dissatisfied residents is 0, and only a few of them get a "somewhat dissatisfied" result. The reason for analyzing this result may be that there are many factors that need to be considered in the resettlement and some residents may not be able to meet all their individual needs. However, the social behavior of the rural mental patients has been obviously improved after the relocation and resettlement, which is mainly due to the better settlement and treatment of the patients in the surrounding environment, the improvement of the living environment, and the great changes of their body and mind.

Conclusions: In rural areas where transportation is limited, people living with mental illness are often separated from each other, and limited medical and rehabilitation resources are not sufficient to support intensive rehabilitation activities. Therefore, it is found that the mental state of the rural mental patients can be improved to a certain extent by resettlement, which is feasible and effective in the rural areas with a large population, relatively poor health resources and weak economic base.

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ANALYSIS ON THE INFLUENCING FACTORS OF COLLEGE STUDENTS' ANXIETY DISORDER

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Background: Anxiety Disorder is a psychological disease easily produced in the context of great mental stress, which is very harmful and common in life. Now college students' anxiety is the most common in society, many college students because of a variety of factors leading to anxiety. College students' anxiety can be divided into many types, such as employment anxiety, social anxiety and test anxiety, which are the concentrated embodiment of typical College students' anxiety.

It is normal for college students to have some anxiety and depression in the process of employment. Mild anxiety has a certain positive effect, which can arouse their potentiality and sense of urgency. Once excessive anxiety, up to the "anxiety disorder" should be given timely attention and psychological intervention, so as not to aggravate the disease, resulting in excessive disappointment of depression and anxiety, resulting in excessive behavior. Social anxiety disorder: The development of college students' social anxiety to the extreme is social anxiety disorder or social phobia. Performance for emotional tension, anxiety, worry and even fear, accompanied by autonomic dysfunction, such as: rapid heartbeat, sweating, face red, trembling, dyspnea, urinary frequency, urgency and other physiological performance. Behavior is accompanied by avoidance. Test anxiety: The examination room on the brain is very chaotic, the original review of the content cannot remember, anxious sweating, panic, reluctantly handed in the examination papers, the examination results failed. Test anxiety as the center of psychological disorders, accompanied by sleep disorders, mainly due to too heavy psychological burden. Above several kind of university student's anxiety sickness type. If found to have emotional changes or physical abnormalities, should be timely to the regular hospital for examination, cannot be ignored, to avoid more serious consequences.

Objective: College students are a special group in the critical period of physical and mental development. With the increasingly fierce social competition, more and more college students suffer from anxiety disorders. Anxiety is a significant and lasting depression as the main feature of the syndrome, when encountered setbacks, stress and other negative life events, many people will have emotional depression, showing anxiety symptoms. Moderate anxiety is helpful for students to work hard and generate positive energy. However, inappropriate communication will lead to anxiety, thus affecting the progress of students, only timely adjustment, to continue to be successful. In addition, patients with anxiety disorders should pay more attention to prevention and pay more attention to it. Therefore, it is very important to analyze the influencing factors of college students' anxiety disorders.

Subjects and methods: By stratified and cluster sampling, 300 college students were selected from a certain university. 293 valid questionnaires were collected. The effective recovery rate was 97.67%, and the average age was 22±1.5 years.

Study design: Counselors shall organize students to fill in the Depression Self-Rating Scale (SDS) and the Anxiety Self-Rating Scale (SAS) at a unified time and place. Answer them in 20 minutes. In order to understand the evaluation results of the College Students' Anxiety Self-Rating Scale SAS), the data were analyzed by the χ^2 test in the nonparametric test.

Main Indicators: The screening criteria for SAS are: "no anxiety" if the SAS standard score is less than 50; "mild anxiety" if the SAS standard score is ≥ 50 but less than 70; "moderate anxiety" if the SAS standard score is ≥ 70 but less than 85; and "severe anxiety" if the SAS standard score is ≥ 85. One is the comparison of the mean of the self-rating anxiety scale among different groups. Second, the detection rate of anxiety symptoms among different groups was compared and analyzed.

Methods: All data were input into SPSS13.0 statistical software package and established database. Carries on the statistical analysis to each data. Draw with an excel table.

Results: The statistical results of the questionnaire are shown in Table 1. The results showed that there was no significant difference in the prevalence of anxiety among the students in different grades. Academic achievement and interpersonal relationship were important factors affecting college students' mental health. These conclusions have yet to be confirmed. Therefore, it is necessary to strengthen the pertinence of mental health education for college students and use limited resources to solve the common psychological problems among students.

Conclusions: To sum up, the mental health status of college students is not optimistic. Academic performance and interpersonal relationship are important factors affecting college students' mental health. Studies have shown that cognitive style and sports games have a positive effect on college students with anxiety tendency. Relevant data also show that anxiety is related to the decline of brain function in frontal lobe and temporal lobe. Psychological intervention methods such as relaxation therapy and biofeedback therapy can also obtain better effect. It is suggested that effective measures should be taken to improve