relationship is 4.35. The results are shown in Table 1.

Table 1. Mental health level of two groups of students

Group	Correct self-evaluation	Harmonious interpersonal relationship	Normal social adaptation
Experience group	4.21	4.35	4.67
Control group	3.26	3.62	3.89

Conclusions: The mental health problems of college students are widespread in colleges and universities, which affect their daily life and study. There are many learning contents, heavy learning pressure, fear of failing the exam and failing to get credits, which leads to anxiety among college students. Or the unsatisfactory learning methods of college students bring a sense of frustration, which makes students feel anxious and uneasy. In the long run, they are prone to anxiety disorder. Some college students can't deal with emotional problems well, which leads to psychological abnormalities, self-mutilation and hurting others. Integrating film and television music appreciation into mental health education, through film and television music appreciation, college students' mental health problems have been significantly improved and their hearts have been purified.

* * * * *

STUDY ON THE IMPACT OF THE CONSTRUCTION OF HOME-BASED ELDERLY CARE SERVICE SYSTEM ON THE MENTAL HEALTH PROBLEMS OF THE ELDERLY

Meihui Jiang[*] & Yanyan Li

Jilin University, Changchun 130000, China

Background: In psychology, anxiety, tension, anger, depression, sadness, pain and other emotions are collectively referred to as negative emotions. People's experience of such emotions is not positive, and their bodies will feel uncomfortable, even affect the smooth progress of work and life, which may cause physical and mental damage. At present, some citizens in China have different degrees of mental diseases. Mental diseases have seriously threatened the lives of citizens, and patients with mental diseases may have suicidal tendencies. Depression and anxiety disorder are common mental diseases, which have a very high incidence rate and disability rate, and will bring a great burden to patients and their families. As China gradually enters the aging era, more and more elderly people have psychological problems. In addition to their own diseases, many family problems also increase the mental pressure of elderly patients, such as disability, living alone and other problems, so that the psychological problems of the elderly cannot be solved. In addition, the social adaptability of the elderly is also weakening, resulting in a large number of elderly people unable to enjoy a comfortable life in their later years. Anxiety has a serious impact on their quality of life and psychology. At present, China's medical level is higher and higher, the average life expectancy of the people is also increased, and the proportion of the elderly population in the total population is also higher and higher. Today, the number of elderly people in China is very large, far exceeding some developed countries in Europe and America. At the same time, the growth rate is also very fast, which has affected the existing political, economic, social and people's lives to a certain extent. The home-based elderly care medical care service continues the traditional home-based elderly care model, but it is different from the traditional model in connotation. The home-based medical service system includes the establishment of personal health management for the elderly, family health management, health management of community medical institutions, health education and communication, chronic disease management for the elderly, third-party medical services and health intervention for the elderly. The home-based elderly care service system includes home-based service management system, home-based service system innovation, home-based medical service system and home-based care service system. Therefore, the elderly can provide for the aged in their familiar environment, which increases the harmony of family and community, and further improves the psychological anxiety of the elderly.

Objective: Home care needs to be combined with medical care, care, housekeeping and psychological services. At present, there are still many problems in home services in China, such as paying attention to life care and ignoring medical and psychological services. Therefore, this study establishes a high-standard and high-quality home-based elderly care service system, in order to explore the impact of the service system on the mental health problems of the elderly.

Subjects and methods: The subjects were 400 elderly people in three communities in an urban area. All

subjects were given home-based elderly care services for 2 months. After 2 months, the improvement degree of mental health problems of all subjects was compared. After the intervention, the self-designed Self-rating Anxiety Scale was used to evaluate the effect before and after the intervention. The scale includes 30 questions. Among them, the negative items were scored by 5-level scoring method, with a score of 1-5. The lower the score, the more inconsistent with their own feelings, and the higher the score, the more consistent with their own feelings. Positive items are scored in reverse, with a score of 30-150. The higher the score, the higher the degree of anxiety of the elderly. The relevant data are in Excel and SPSS20.0 software for calculation and statistics.

Results: As shown in Table 1, the number of high, medium and low anxiety groups before intervention was 150, 150 and 100 respectively. After learner training, the number of people with high anxiety level decreased to 74 and the number of people with low anxiety level increased to 182.

Table 1. The anxiety level of the elderly before and after the intervention was compared

Anxiety level	High	Secondary	Low	General situation
Score	91-150	76-90	30-75	-
Before intervention	150	150	100	400
After intervention	74	44	182	300

Conclusions: The home-based medical service system includes the establishment of personal health management for the elderly, family health management, health management of community medical institutions, health education and communication, chronic disease management for the elderly, third-party medical services and health intervention for the elderly. Widely popularize the knowledge of disease prevention and treatment for the elderly, actively carry out lectures on mental health for the elderly, popularize the problems of common diseases for the elderly, and promote the early detection and treatment of diseases for the elderly. Give play to the standardized management and control of chronic diseases of the elderly in community hospitals. Through the medical information platform, the elderly and large comprehensive medical institutions can cooperate in medical treatment. The elderly can realize convenient service functions such as online reservation, health consultation, emergency rescue and informing their families at the same time. Carry out health education for the elderly through the community medical and health management platform, guide the healthy and scientific living and eating habits of the elderly, and popularize some common disease prevention and first aid methods to the elderly.

* * * * *

APPLICATION OF URBAN LANDSCAPE COLOR DESIGN IN THE TREATMENT OF RESIDENTS' MOOD DISORDERS

Tao Wu & Xin Tao*

College of Horticulture and Plant Protection, Yangzhou University, Yangzhou 225000, China

Background: Mood disorder can also be called affective mental disorder. It is a disease that leads to obvious and lasting mood and emotional changes due to a variety of reasons. Its clinical manifestations are usually continuous depression and high mood, accompanied by psychotic symptoms such as hallucinations, cognitive and behavioral changes. At present, the etiology of affective disorder has not been confirmed. The possible pathogenesis is related to social psychological factors, neural development, neuroimaging, neuroelectrophysiology, neuroendocrine, neurobiochemistry, heredity and other factors. At present, the common effective treatment methods are related to neurobiochemical abnormalities, including neurotransmitter systems such as dopamine and norepinephrine. According to different clinical forms, patients can be divided into depression, mania, manic depression, cyclic mood disorder and dysthymic disorder. Depression is usually characterized by decreased will activity, slow thinking, low mood, physical symptoms, cognitive impairment and other main characteristics. The vast majority of patients still have anxiety. Manic disorder is characterized by increased activity, runaway thinking, high mood, abnormal cognitive function and other symptoms. In severe cases, it can be manifested as disturbance of consciousness. Manic depressive disorder refers to the characteristics of both mania and depression, but this phenomenon is rare in clinic.

With the acceleration of urbanization and the rapid development of national economy, residents are prone to varying degrees of psychological problems in the increasingly competitive environment. In recent