

The impact of the COVID-19 pandemic outbreak on the mental health of adolescents in China: A Review of Current Evidence

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Abstract

This study utilizes current evidence to review the impact of the COVID-19 pandemic outbreak on the mental health of adolescents in China. This dissertation is divided into two perspectives. Firstly, based on the literature on the impact of the COVID-19 pandemic on adolescents' mental health in China, a systematic review has been conducted to understand the current evidence of adolescents' mental health in China and investigate the positive and negative effects of the pandemic. The aim was to examine high-quality research that provided insights into strategies to address Chinese adolescents' mental health consequences due to the pandemic. This study reveals that although the COVID-19 pandemic conditions have had some positive factors contributing to the mental health of Chinese adolescents, overall, the mental health problems (such as anxiety and depression) of Chinese adolescents are on the rise. These findings have important implications for health professionals, policymakers, Chinese school leaders, teachers, and parents. The second part of the study utilizes critical discourse analysis to critically evaluate the government policy supporting adolescents' mental health during the pandemic. The study explains the Chinese government's official position on adolescent mental health. The results reveal that the Chinese government policy is not responding to the mental health needs of Chinese adolescents. The Chinese government needs to recognize the impact of the COVID-19 pandemic on mental health in China and introduce policies to strengthen mental health support for adolescents during pandemic conditions when normal social structures are disrupted.

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Table of Contents

Abstract.....	i
Acknowledgements.....	ii
Table of Contents.....	iii
Table of Tables.....	vii
Chapter 1. Introduction.....	1
Chapter 2. Literature Review.....	8
2.1 Introduction.....	9
2.2 Brief history of discourses of social harmony in the Chinese context...9	
2.3 The idea of social harmony under family/society.....	11
2.4 The importance of social harmony in Chinese society.....	12
2.5 Conclusion of Chapter two.....	15
Chapter 3. Literature Review.....	17
3.1 Introduction.....	17
3.2 Who are “adolescents” in China?.....	17
3.3 The definition of mental health in China.....	18
3.4 The importance of mental health to the development of adolescents.....19	
3.5.The literature regarding the impact of COVID-19 pandemic on mental health of adolescents outside of China.....	21
3.6 The development history of adolescent mental health research in China.....	22
3.7 Conclusion of Chapter three.....	26

Chapter 4. Methodology.....	27
4.1 Introduction.....	27
4.2 Systematic review.....	27
4.3 Rationale for a systematic review.....	28
4.4 Data collection.....	29
4.5 Eligibility Criteria.....	30
Chapter 5. Methodology.....	33
5.1 Introduction.....	33
5.2 Critical discourse in policy.....	33
5.3 Selecting policies for inclusion.....	34
5.4 What is critical discourse analysis.....	34
5.5 The process of critical discourse analysis.....	36
Chapter 6. Findings and Results.....	39
6.1 Introduction.....	39
6.2 The current mental health status of Chinese adolescents described in the current articles.....	40
6.3 In these ten articles, what is the mental health status of Chinese adolescents during the COVID-19 pandemic?.....	44
6.4 The main risk factors of COVID-19 affect Chinese adolescents' mental health discussed in the articles.....	46
6.4.1 Lack of family support.....	46
6.4.2 Excessive screen time.....	50
6.4.3 Lack of physical activity.....	52

6.4.4 High academic pressure.....	53
6.5 Conclusion of chapter 6.....	57
Chapter 7: Critical Discourse analysis of China's policy on mental health during the pandemic.....	58
7.1 Introduction.....	58
7.2 The Chinese government's attention on Chinese adolescents's mental health before the COVID-19 pandemic.....	59
7.3 What specific actions and measures have been put forward by the government to address the mental health problems of Chinese adolescents?.....	60
7.4 The Chinese government's (lack of) attention on Chinese adolescents' mental health during the COVID-19 pandemic.....	61
7.5 Discourses of social harmony and social stability in the policy documents.....	66
7.6 Conclusion of chapter 7.....	73
Chapter 8 Discussion and Conclusion.....	75
8.1 Introduction.....	75
8.2 The mental health status of Chinese adolescents during the pandemic.....	75
8.3 Explaining the mental health status of Chinese adolescents during the pandemic.....	78
8.3.1 The lack of effective family support may be related to traditional Chinese parenting style.....	78

8.3.2 The relationship between lack of effective family support and excessive screen time.....	79
8.3.3 Reducing high academic stress can potentially reduce mental health problems among Chinese adolescents.....	79
8.4 Other important factors for Chinese adolescent mental health status during the COVID-19 pandemic.....	81
8.4.1 Does geography matter?.....	81
8.4.2 The effects of cultural values on mental health among adolescents...	82
8.5 Some recommendations for adolescents, parents, schools/teachers, and the government.....	83
8.5.1 Adolescents.....	83
8.5.2 Parents.....	84
8.5.3 Schools/teachers.....	85
8.5.4 Government.....	86
8.6 Limitations and contributions of this study.....	87
8.7 Implications for further studies.....	88
8.8 Conclusion.....	88
References.....	90

Table of Tables

Figure 1. PRISMA flow chart to illustrate the article search and the inclusion process.....	32
Figure 2. Fairclough (1992) Three-dimensional model of discourse.....	36
Table 1. The characteristics of ten empirical studies on the impact of COVID-19 on the mental health of Adolescents in China.....	41
Table 2. Eight relevant policy documents developed by Chinese government departments between January 2020 and August 2020 to address the psychological crisis caused by COVID-19.....	64
Table 3. Chinese mental health policies which contain the discourse of “social stability” / "social harmony during the pandemic.....	72

CHAPTER ONE INTRODUCTION

1.1 Introduction

Mental health is an essential component of an individual human's overall health and has the same importance as physical health. A healthy mind affects how we think and feel, and it also helps determine how we respond to stress. Stable mental health is essential for adolescents because adolescents are transitioning from children to adults and are at a stage in their development towards independence. The outside world easily influences their thoughts and psychological states (MentalHearth.gov, 2022). Unfortunately, 10 % of children and adolescents worldwide suffer from mental disorders, but most do not seek help or receive care (WHO, 2022). The prevalence of anxiety and depression in adolescents has increased internationally by 70% in the past 25 years (Royal Society for Public Health & Young Health Movement, 2017). Adolescence is a critical period for developing and supporting mental health. It is an optimum time for governments to institute policy and resources to support positive mental health outcomes for adolescents in society.

In December 2019, a novel coronavirus, which can cause respiratory infection, was first discovered in Wuhan, China. Because of how the virus spreads, its long incubation period, and other mutating characteristics, the virus spread before the Chinese authorities understood the serious nature of the impact of health outcomes on its citizens. Therefore, the virus spread worldwide for a few months and seriously affected every aspect of human life, including physical and mental health. On 11 March 2020, the World Health Organization (WHO) declared the Novel Coronavirus outbreak a pandemic (WHO, 2020). By the end of March 2020, the COVID-19 pandemic had caused more than 800,000 infections and 40,000 deaths (Ke et al., 2020). During the worst pandemic period, China's significant measure for control of the virus was the closure of schools, educational institutions, and activity venues to slow the spread of novel coronavirus and ensure the health of students and their families were protected where possible. While cities in China, except Hubei, did

not suspend outbound traffic or close cities, residents in those places were confined to their homes under 24-hour gated community management. To be specific, every two or three days, a household could send one person out to buy daily necessities. In contrast, other family members are needed to provide certificates issued by the relevant destination agency before leaving their designated accommodation (Staff., 2020). This coronavirus pandemic has influenced every aspect of human life in the last 18 months in China and worldwide.

The changes to the normal lived experiences of most humans caused turmoil, uncertainty, and new complexities, as almost everyone in the world suffered from the stress caused by the uncertainty created by the outbreak. Although school closure and social distance effectively slowed down the spread of novel coronavirus in Chinese society, the social isolation of individuals often produced negative psychological effects (Liang et al., 2020). The requirement for social distancing and school closures increased mental health problems such as loneliness, depression, and anxiety among Chinese adolescents (Liang et al., 2020). More seriously, stress, social isolation, and violence in the family during COVID-19 affected young children and adolescents' brain health and development (The United Nations, 2020).

Before the pandemic, a scientific study conducted by researchers in the United States in 2013 tested stress and adolescent brain development. The research suggested that stressors experienced during adolescence, a critical stage of development, may influence the trajectory of neural maturation and lead to an increase in psychological disorders such as anxiety and depression (Eiland & Romeo, 2013). Therefore, adolescents impacted by the COVID-19 pandemic must be regarded as a special group and require more attention and support. Researchers in China have conducted studies on the impact of COVID-19 on adolescent mental health. For example, Zhou and colleagues (2020) assessed the state of the mental health of 8,079 Chinese students aged 12-18 years during the

COVID-19 pandemic through a cross-sectional study of online surveys. They found that 43.7% of Chinese high school students were depressed, and 37.4 percent were anxious during the pandemic. Similarly, Qi et al. (2020) found that 44.5% and 38.0% of Chinese adolescents aged 14 to 18 years had at least mild symptoms of depression and anxiety. They compared these figures to previous studies and found that the prevalence of depression was 24.3%, while the prevalence of anxiety was 22% before COVID-19 spread throughout the population. They claim that the pandemic caused a 19.4% rise in depression and a 15.4% rise in anxiety in Chinese adolescents. These alarming yet understandable statistics show the vast impact of COVID-19 and the impact of the measures used to stop the virus from spreading on adolescents' mental health in China. However, the pandemic also had a positive effect on adolescents. A mental health report called "Public Mental Health Insights 2020" investigated Chinese adolescents aged 12 to 18 entering junior high school. 30% of them said they were emotionally uplifted by the positive action of health care workers in China during the pandemic, and their motivation to learn was strengthened (Sohu, 2021). Other respondents from this mental health report explained that they were more concerned about their physical than mental health because of the pandemic, and 21.26% of respondents said they better understand their parents' hard work and difficulties (Sohu, 2021).

To understand how adolescents alleviate mental health problems caused by COVID-19, Qi and his colleagues (2020) studied the relationship between social support and mental health problems among 7202 14-18-year-olds in China. They found that social support is an essential protective factor for adolescents' mental health. Social support from peers plays a critical role in obtaining and maintaining good mental health and preventing and recovering from mental health problems (Topor et al., 2011; UN, 2020; Wang et al., 2018). The less social support an individual receives, the more likely they will suffer from anxiety and depression. Social support providers usually include family members, friends, and significant others. The need for social support varies at different stages of life

(Qi et al., 2020). For Chinese adolescents, parental support is crucial. Strong family support plays a vital role in improving individuals' attitudes towards social distancing requirements and maintaining positive mental health (Li & Xu, 2020). In a survey on the impact of social support on the mental health of Chinese adolescents during the COVID-19 outbreak. The researchers found that 95% of the subjects lived with their parents. Although most Chinese adolescents stay at home life with their parents, only 24.6% of study subjects reported receiving a high level of social support during the COVID-19 outbreak (Qi et al., 2020). Therefore, the lack of adequate social support from families during the COVID-19 pandemic may also be one of the reasons for the aggravation of anxiety, depression, and other psychological problems among Chinese adolescents.

Moreover, effective social support cannot be separated from policy formulation. In a policy brief on the COVID-19 pandemic and the need for action on mental health, the United Nations has identified adolescents as one of the specific groups of concern (the United Nations, 2020). By contrast, policymakers did not integrate adolescent groups into China's COVID-19 Action for Psychological Counseling policy (Bureau for Disease Control and Prevention, 2020). Therefore, although both the international literature and the Chinese academic literature point out that adolescents are a special group and need more mental health support during the pandemic, the Chinese government policy appeared to ignore the particularity of adolescent mental health during the pandemic. This systematic review aims to use available evidence to describe the impact of the COVID-19 pandemic on adolescents' mental health in China. The purpose of this study is:

1. To understand the current mental health status of Chinese adolescents as a result of the pandemic and the extent to which it has had positive and negative effects.
2. To investigate high-quality research that provides insights into strategies to address the consequences of the pandemic on Chinese adolescents' mental health.

3. To provide possible measures and suggestions for Chinese government authorities, health professionals, families, school leaders and teachers to help Chinese adolescents overcome the mental health effects of the measures adopted within society to stop the spread of the COVID-19 pandemic.

Locating myself in the research

Thinking back to my experience in middle and high school, teachers in Chinese schools paid little attention to students' mental health. Academic performance is almost the only criterion teachers use to judge whether students are good or bad. While there were mental health courses in schools, they were minuscule compared with academic programs. I still remember preparing for the college entrance examination, filled with anxiety and depression. However, I did not know how to talk about my anxiety and nervousness with my parents or teachers. Therefore, this research project is designed to investigate these issues, and I hope to arouse the attention of Chinese government departments, health workers, school leaders, teachers, and parents to the mental health of Chinese adolescents through this research.

At the end of 2019, the sudden outbreak of COVID-19 raised my concerns about the mental health of Chinese adolescents. From my personal experience, I was filled with anxiety during the COVID-19 lockdown. As an international student, I could not go back to university because of the pandemic. I kept checking the news every day, hoping that the pandemic would improve so that I could travel to attend university in New Zealand. However, as the number of confirmed cases continued to rise every day, I felt so desperate that I began to worry that I would not be able to go back to university and graduate successfully. This anxiety continued until the beginning of the semester when I was informed that I could continue my studies if I took online courses. At the start of the online course, I found it was a great challenge. I felt lonely and anxious. For example, I could

only ask the professor and classmates by email or WeChat for support when I am in trouble.

Network interruption or lag was also a common occurrence in online classes. There is no doubt that, as a university student, I have enough ability to adjust my mentality, but COVID-19 has profoundly affected my study and psychological state. Compared to me, Chinese adolescents, especially those taking high school and college entrance exams, may suffer more anxiety, stress, and loneliness during the COVID-19 pandemic. However, through several policy documents and media reports, I found that government, school, and family support for adolescent mental health was insufficient during this period. Therefore, I hope this study can draw attention to the mental health of Chinese adolescents.

Currently, my hometown Shanghai is experiencing a new phase of the pandemic. Schools in Shanghai were also forced to close, and all the people living in Shanghai were required to abide by the housebound rules to prevent the transmission of novel Coronavirus. It is my first experience of home quarantine, and it is hard for me to adjust. Because with the closure of supermarkets, it is even more difficult to buy daily necessities, such as food. However, the current spread of the COVID-19 virus in Shanghai has not been effectively suppressed, which has increased my anxiety. Especially adolescents living in Shanghai have to readjust to online learning. They may face the dilemma of not being able to live a normal life due to the shortage of daily necessities. Although there is now a vaccine, the Novel Coronavirus is still mutating and significantly impacts people's lives. Therefore, it is of great practical and timely significance to study the impact of COVID-19 on the mental health of Chinese adolescents.

Conclusion of chapter one

Chapter one has introduced the importance of stable mental health for adolescents and has briefly described the current status of mental health for adolescents in China. The rationale for the study has been explained. It has included a personal researcher perspective regarding the relevance of this study to my own life and that of millions of Chinese adolescents. Since the outbreak of COVID-19, research surveys have shown that mental health problems among Chinese adolescents have increased. Therefore, it is valuable to systematically review relevant literature on the impact of COVID-19 on the mental health of Chinese adolescents.

CHAPTER TWO AND CHAPTER THREE: LITERATURE REVIEW

The literature review is divided into two parts. Chapter two will provide background on China's policies to address the impact of the pandemic on mental health. Chapter three will provide background information for the systematic review of the impact of COVID-19 on Chinese adolescents' mental health. The following research questions guided the literature search and analysis in these two chapters of the study.

1. What is the current mental health status of Chinese adolescents? What are the major risk factors related to the mental health of Chinese adolescents during the COVID-19 pandemic?
2. How have Chinese policies tried to address the impact of COVID-19 on the mental health of Chinese adolescents? How do these “solutions” compare with the impact of COVID-19 on the mental health of Chinese adolescents described in the Chinese academic literature?

CHAPTER TWO

2.1 Introduction

After reviewing the series of interventions that Chinese policymakers have introduced to address the psychological crisis caused by COVID-19, the phrase "maintaining social harmony" appeared in almost every Chinese policy response to the psychological crisis caused by COVID-19. To some extent, the discourse of "maintaining social harmony" reflects the ideology and position of policymakers. Therefore, this chapter will review the ideological formation of the discourse "social harmony" in Chinese society.

2.2 Brief history of discourses of social harmony in the Chinese context.

Harmony is an essential concept of traditional Chinese culture and is regarded as the fundamental cultural value of Chinese society (Chen & Starosta, 1997). The term "harmony" originated from "he" (和), which appeared as a single concept as early as in the oracle bones of the Shang Dynasty, and it has the meaning of "sound harmony" and "music harmony." Therefore, in early Chinese culture, it more often refers to the harmony between various elements of music which are appropriate and beautiful.

"he" also has another meaning, that is, reasonable compromise or reconciliation between these different parts, leading to a peaceful situation of "seeking common ground while reserving differences," which could yield constructive results (Guangming Daily, 2021). It can say that harmony in traditional Chinese culture refers to developing a relatively balanced, unified, coordinated state.

Confucianism has largely influenced the understanding of harmony in Chinese culture. As the leading representative figure of Confucianism, Confucius' thoughts had a profound influence on China and East Asian civilization. In the *Analects*¹, which is one of the classics of Confucianism, Confucius regarded the ideal of harmony as the standard for a junzi— a man of good moral character, like a gentleman. He said “the junzi harmonizes but does not seek sameness, whereas the base person seeks sameness but does not harmonize” (*Analects* 13.23). It means the junzi may be in harmony with his surroundings, but he treats everything with his own independent opinion and does not blindly agree with others. By contrast, other people do not have independent views, although they often align with others but do not focus on real harmony. Therefore, the harmony advocated by Confucius emphasizes the independence of individual personality and the co-existence of different individuals. A wise person should be able to respect different opinions and live in harmony with other people (Wei & Li, 2013, p. 61). As one of the most important representatives of Confucianism, Mencius², thought that harmony is significant for a country or a society. He said, “A good time is not as good as a good situation, and a good situation is not as good as having harmonious people” (*Mencius* 3B.1). A country or society need a good situation, environment, and harmonious people to achieve a goal. The most important of the three conditions is harmony between people. Confucianism is a fundamental belief of Chinese people, and states that harmony is indispensable to the development of man and society, which has far-reaching influence and significance on the development of modern society.

¹ The *Lunyu* (*Analects*), the most-revered sacred scripture in the Confucian tradition, was probably compiled by the succeeding generations of Confucius's disciples. Based primarily on the Master's sayings, preserved in both oral and written transmissions, it captures the Confucian spirit in form and content in the same way that the Platonic dialogues embody Socratic pedagogy.

² **Mencius**, (Latin), Chinese (Pinyin) **Mengzi** or (Wade-Giles) **Meng-tzu**, original name (Wade-Giles) **Meng K'o**, (born c. 371, ancient state of Zou, China—died c. 289 bce, China), early Chinese philosopher whose development of orthodox Confucianism earned him the title “second sage.” Chief among his basic tenets was an emphasis on the obligation of rulers to provide for the common people. The book *Mencius* records his doings and sayings and contains statements on the goodness of human nature, a topic warmly debated by Confucianists up to modern times.

2.3 The idea of social harmony under family/society.

China has always been considered a collectivistic society. In contrast to individualism, collectivist cultures are likely to emphasize the importance of social harmony, respect, and group needs over individual needs (Nickerson, 2021). In China, there is a saying that everything will be successful if a family is in harmony. It means that every citizen should treat and deal with family problems correctly, cultivate good family virtues such as respecting the old and caring for the young, uniting neighbors, and contributing to social harmony and stability.

To realize the harmony between family and society, Confucius formulated the corresponding ethical relationship; the family relationship can be divided into father and son, elder brother and elder brother, and husband and wife. It can be applied to different forms of power hierarchy (Chuang, 2005, p. 275). For example, children should be respectful to their parents in the family relationship. Parents should care more about their children to form a good parent-child relationship, which is more conducive to family harmony. Healthy family relationships appear to be beneficial to preventing mental health problems in adolescents. Just as Robila (2016) stated that “good family relations, with good marital relations and parenting behaviors, are conducive of well- functioning parents and children. In contrast, parental mental health problems, marital conflict, and low-quality parenting determine dysfunctions for children, such as poor academic performance and psychological problems” (p. 10). Therefore, adolescents living in a harmonious family are more likely to be positively affected by the harmonious family atmosphere and receive more effective family support in their physical and mental development. In contrast, adolescents living in dysfunctional families are more likely to have mental health problems (Alm et al., 2019).

Ren et al. (2019) conducted a cross-sectional survey of 3081 middle school students in Ganzhou. The results showed that parental relationships, parent-child relationships, and negative life events

positively correlated with depressive symptoms (p.7). Perales et al. (2017) found the same result, with a higher prevalence of mental disorders among children from single-parent, mixed, and stepchild families compared with children living in original families. Therefore, evidence suggests that a harmonious family plays a positive role in the harmony and stability of society and plays an essential role in the mental health development of adolescents. The Chinese government has noted the vital role of family harmony and the relevance of family support in adolescent mental health policies. This aspect is often cited as one of the most important means of addressing adolescent mental health problems.

For example, National Health Commission (2019) issued a policy named Healthy China Action -- Action plan for Child and Adolescent Mental Health (2019 - 2022). Policymakers attempted to guide parents to pass on good family traditions, pay attention to their own and their children's mental health, create a good family environment, and cultivate a healthy character and good behavior habits through valuable activities. However, there is little mention in the policy of the problems of adolescent mental health caused by family disharmony, such as domestic abuse. Therefore, while policymakers are aware of the importance of family harmony, there are no suggested strategies or solutions to address adolescents' mental health problems in families impacted by adverse situations, such as divorce or separation of parents.

2.4 The importance of social harmony in Chinese society.

The Chinese Communist Party is committed to reducing social conflict and establishing a balance between social classes. At the fourth plenum of the 16th Central Committee of the Communist Party of China in 2004, Hu Jintao, China's former leader, formally put forward the concept of "building a harmonious socialist society" for the first time, and he took "building a harmonious socialist society" as a unified concept. He defined building a harmonious society as "democracy under the

rule of law, fairness and justice, integrity and fraternity, vitality, stability and order, and harmony between man and nature" (Hu, 2005). Harmony is the feeling experienced by individuals interacting with society or social structures. The sense of harmony is evoked through the interaction between structure and the values and judgments chosen by the individuals at a given moment (Han, 2008, p. 150).

Despite the influence of Confucianism, there are several other reasons why Chinese government departments attach so much importance to promoting social harmony. First of all, having a harmonious and stable society is very important to the Chinese people who have experienced social disarray, poverty, and war. China has a history of about five thousand years, but from the Opium War in 1840 to the founding of the People's Republic of China in 1949, China experienced a huge period of war turmoil. Although the war was eventually won, the people and the country paid a high price, and China lagged behind the world technologically for a long time (Morrison, 2013). The current ideal of "harmony" ultimately expresses the weariness of war and reform among many Chinese and is infused with a desire for cooperative, non-confrontational political ideals.

The Central Committee of the Communist Party of China (CCPC) identified building a harmonious society as a strategic priority to address the "economic imbalance between urban and rural areas" (Han, 2008). For example, the imbalance between urban and rural economic development and regional development. The CCPC believed that building a harmonious society played a positive role in solving problems that directly affect people's lives and promoting social harmony as the main vision of China's social and economic development. The reform and opening-up policy have promoted the rapid development of China's economy, but it also caused some social conflicts. Just as Han(2008) stated that "Swift social changes accompany rapid economic growth in China. Social changes are both negative and positive" (p. 160). Since the reform and opening up in 1978, China's

economy has achieved rapid growth for an extended group of people, but the income gap has also widened sharply (Xie & Zhou, 2014). Delury(2008) indicated that "Party documents dealing with harmony openly acknowledge the discord caused by increasing disparities between rich and poor and those living in the city or rural areas. According to a 2006 report by China Economic Monitoring and Analysis, in 2003, the per capita GDP in Shanghai was \$5,649, compared with only \$436 in Guizhou, a province farther west (Pan & Xi, 2006, p. 96).

Due to the unbalanced regional economic development, the income gap of residents keeps expanding, which leads to the widening gap between the rich and the poor and leads to inequality in many aspects of the society, such as uneven access to high-quality education. For instance, some low-income families do not have enough income to pay their children's tuition in rural areas, so their children have to drop out of school and enter work. Economic inequality was also found to be bad for individuals' mental health. Du et al.(2019) selected a representative sample of 3042 adolescents from 20 provinces in China to investigate the relationship between economic inequality and the mental health of Chinese adolescents. The analysis showed that adolescents living in low-income regions had lower levels of happiness and higher levels of psychological stress (p. 1016). Economic inequality has brought inequality in education and mental health problems for adolescents who live in less affluent provinces in China.

Furthermore, the vast wealth gap has created a deep-seated hatred of the new rich among ordinary Chinese. According to Wu (2009), a recent survey released by the Zhejiang Academy of Social Sciences found that "96 percent of the public said they feel resentful toward the newly rich (para.1). Interestingly, the new rich are so unpopular in China because of the widespread perception that their wealth has come at the expense of the poor because they have gained profits through the poor wages and conditions of millions of Chinese workers. There is also a perception that these 'elites'

wealth has been gained through looting former state property, corruption, etc., rather than their hard work (Martin, 2010). Therefore, the Chinese government has introduced the discourse of "social harmony" to alleviate social conflicts caused by economic policies. Martin (2010) said that "this is the real meaning of all the talk about building a 'harmonious society' is an attempt to introduce reforms from above to prevent a revolutionary explosion from below" (p. 36). In brief, the policy discourse of "social harmony" is an essential and relevant entry point to explore the position of Chinese government departments in formulating mental health policies during the COVID-19 pandemic.

2.5 Conclusion of Chapter two.

Chapter two reveals that academic pressure and educational inequality caused by unequal economic development as the main reasons for increasing mental health problems among Chinese adolescents, related to China's economic transformation and competition for limited resources such as education. The Chinese government emphasized the importance of adolescents' mental health for physical and mental development. However, with the COVID-19 outbreak, understanding the extent to which the Chinese government is paying close attention to the mental health of Chinese adolescents needs further discussion.

Compared with the policies of western and developing countries, the discourse of "promoting social harmony" appears many times in Chinese policies. Therefore, this chapter provides the historical background of the discourse of social harmony in the Chinese context and the reasons for the pursuit of social harmony in Chinese society. It is worth noting that while many studies have begun to explore the impact of COVID-19 pandemic conditions on the mental health of Chinese adolescents, no research has examined the extent of the government's focus on the mental health of Chinese adolescents. The level of government's concern reflects the importance society attaches to

the mental health of Chinese adolescents. It is meaningful to use discourse analysis to study the policy discourse adopted by the Chinese government in dealing with the mental health crisis caused by the COVID-19 pandemic.

CHAPTER THREE

3.1 Introduction

In countries across the globe with different political, social, economic, and cultural systems, history, understanding, and definitions of the term "adolescents" and "mental health" is variable. Therefore, this chapter will firstly introduce well-understood definitions of the age of adolescence and mental health used by scholars in the Chinese context. The following chapters will discuss the importance of mental health to the development of adolescents and clarify the history of Chinese adolescents' mental health research to explain the status quo and existing problems of Chinese adolescents' mental health. The outbreak of the COVID-19 pandemic has impacted adolescents' mental health across the globe. For this reason, a brief review of the international literature in this area has been conducted to provide an opportunity to understand the relative impact of COVID-19 pandemic conditions on adolescents' mental health in China compared to other jurisdictions.

3.2 Who are “adolescents” in China?

Adolescence is a crucial period in the transition from childhood to adulthood. During this period, enormous changes have occurred both physically and mentally in adolescents. As Ryan (2017) explains, "adolescence is a crucial period determining how a person will view and interact with the world as an adult. There are issues of general wellness, social wellness, and sexual wellness, all of which are linked. For adolescents, it is important to have the resources, mentorship, and knowledge to make the right choices" (p. 4). Firstly, adolescence is characterized by physical changes, and the main physiological characteristics of adolescence are rapid growth in height, weight, and other morphological aspects. The body's internal organs gradually mature and develop, and sexual function gradually matures. In general, puberty mostly begins at the age of 10-11 for girls and 11-12 for boys (Raising Children Network, 2021). It is noticeable that the physical development of

adolescents is not always accompanied by psychological change. For example, an adolescent may have reached physical maturity but may not have a whole adult state psychologically (Steinberg, L., & Morris, 2001).

Different organizations and countries have different definitions of the age of adolescents. For example, the World Health Organization (2021) clearly states that "adolescents are persons between the ages of 10 and 19" (p.1). However, in New Zealand, 12 to 24 years of age is the generally accepted age range that defines "adolescent" or "young people" (Ministry of Youth Development, 2021, p. 6). In China, adolescents are divided into two stages: 14-17, 18-25. Middle school for 14-17 and university for 18-25 (Baidu, 2021). There is no global definition of adolescent age, and the definition of adolescent age is very expansive in China.

3.3 The definition of mental health in China.

Academic writers often associate mental health with the notion of well-being in the literature. There are similarities and differences between the two. Firstly, mental health refers to a state of positive mental and emotional health. According to Sartorius(2002),

Mental health does not exist in isolation. It is an integral part of holistic health, which can be defined in at least three terms: the absence of disease, the state of an organism in which all its functions are performed to the fullest, or as a state of balance between insides and insides, and one's physical and social environment (p. 16)

In contrast, well-being is much more broadly interpreted. This notion includes mental health and many positive aspects of life, such as feeling happy, healthy, ambitious, etc. In addition to positive emotions, well-being is achieved through optimal development, "meaningful" lives, and the satisfaction of basic human needs for autonomy, competence, and relationships (Ryan & Deci, 2000). We could argue that having good mental health is a key factor in achieving well-being, but

there is no global definition of positive mental health, although many researchers have attempted definitions based on various theories (Carr, 2012; Vaillant, 2012). Different countries may have variable definitions of mental health. For example, the Public Health Agency of Canada (2006) defines mental health as:

Mental health is the ability of each of us to feel, think and act, which enhances our ability to enjoy life and cope with challenges." It is a positive emotional and spiritual well-being that respects the importance of culture, fairness, social justice, interconnectedness, and personal dignity (p. 2).

The Public Health Agency of Canada not only views having good mental health as an ability to respond positively to challenges but also links mental health to emotional health.

In China, the Chinese government issued the Guidance on Strengthening Mental Health Services in China (2016). It gives the official definition of mental health; namely, mental health refers to a complete state of rational cognition, emotional stability, appropriate behavior, interpersonal harmony, and adaptation to change in growth and development (p. 2). The definition of mental health in China focuses on mentally healthy individuals being in a good or normal state in all aspects of development, a state of continuous and positive development. For example, when a person encounters a setback, they will not be disturbed by external factors but can control himself through positive psychological cues and keep a positive mental state.

3.4 The importance of mental health to the development of adolescents.

According to the World Health Organization (2017), the incidence of mental illness among children and adolescents worldwide is about 20%. Globally, the prevalence of non-suicidal self-harm among children and adolescents is about 19.5% (Lim et al., 2019, p. 12). However, in China, the prevalence of psychological and behavioral disorders among middle school students aged 13-18 is

as high as 27.4% (Wang et al., 2020). In China, one in four middle school students has engaged in non-suicidal self-harm behavior.

There is no doubt that good mental health is a vital part of the healthy development of adolescents. Lee (2021) states that "Good mental health can help adolescents build social, thinking, communication and emotional skills and behaviors, and can also lay the foundation for better mental health and well-being" (p.1). Adolescents are in the fastest stage of psychological development but are also the most prone to problems in the critical period of their lives. The so-called "critical period" refers to the crucial period as a behavioral term that refers to a fixed, crucial period in an organism's early development when it can learn things that are essential to survival and the most susceptible to influence (Nickerson, 2021). If the right support and education are implemented during this period, we can double the positive results for an individual's mental health with half the effort. If this is avoided or the opportunity is missed, it might take several years for an individual to make up and improve mental health, and some will never be able to recover.

In addition, adolescents' mental health is essential not only for individual development but also for families. There is some evidence that depressive symptoms in adolescents can affect the parent-child relationship and even disrupt communication between family members, making the whole family system dysfunctional (De Goede et al., 2009, Mastrotheodoros et al., 2020). Moreover, emotional problems (such as anxiety, depression, etc.) are easily spread among family members, which may change the overall atmosphere of the family and reduce its cohesion and adaptability (Weisbuch et al., 2011). If adolescents suffer from destructive emotions for a long time, the disharmonious factors between family members will gradually increase, eventually leading to the breakdown of some families. Therefore, society needs to pay attention to adolescents' mental health and realize that mental health is the foundation of their development and happiness.

3.5 The literature regarding the impact of COVID-19 pandemic on mental health of adolescents outside of China.

As there are few systematic reviews of the impact of the COVID-19 crisis on the mental health of adolescents in China, this section provides a brief review of some international studies on the effects of the COVID-19 pandemic crisis on adolescents' mental health from a global perspective. Indeed, several international studies have been carried out to examine the impact of the COVID-19 crisis on adolescents' mental health. For example, a systematic review of 16 eligible adolescent mental health studies found "evidence supporting the potential negative impact of the pandemic on adolescent mental health" (Jones et al., 2021). To explore the specific reasons for the potential negative impact of the pandemic on adolescent mental health, Ellis et al. (2020) conducted an online survey of 1316 adolescent high school students in Canada. Results showed that 43% of Canadian adolescents who participated in the survey were apprehensive about the COVID-19 crisis, particularly about schooling and peer relationships.

Additionally, research in Canada regarding COVID-19-related stress has been linked to more loneliness and depression, especially for adolescents who spend more time on social media (Ellis, p. 182). A study in North America revealed that the adolescent years are a time of heightened motivation for peer relationships (Brown & Larson, 2009). However, because schools in North America were closed and adolescents had to stay at home, they were forced to reduce face-to-face contact with their peers. Participants reported that they received less and less effective support from their peers. In contrast, social media became the main way adolescents communicate and obtain information during the COVID-19 pandemic. There is evidence that heavy use of social media can increase the emotions of anxiety and depression in adolescents (Bailey et al., 2022). Adolescents experience the same stressors as adults, such as fear for their own and their family's health and safety, leading to increased feelings of loneliness and depression (Wang et al., 2020).

On the other hand, some studies suggested that the effects of the pandemic were not all negative. For instance, Maximum City (2021) surveyed more than 2,000 Canadian children and adolescents aged 9-16. The result showed that more adolescents felt bored (34%), anxious (27%), and depressed (15%) before rather than during the pandemic. More than a quarter of surveyed youth (26%) believed the pandemic had some positive effects on their lives, including more time to spend with their families and more time to pursue their interests. The result is the same as a study from the United States. Penner et al. (2021) surveyed 322 adolescents (mean age 11.99 years) and showed a decrease in mental health problems among some adolescents who had problems before the pandemic. The reason found that COVID-19 stay-at-home rules may have had a protective effect on adolescents' mental health. Specifically, these adolescents may have received effective family support during home isolation, such as effective communication with parents' who eased their concerns. In brief, while some international surveys have shown some positive effects of COVID-19, most have shown a negative impact of COVID-19 on adolescent mental health issues. Therefore, every jurisdiction must investigate how to help adolescents overcome mental health issues as the contexts for the social restrictions differed between countries, as did the death rates and hospitalizations.

3.6 The development history of adolescent mental health research in China.

The research on adolescent mental health in China is relatively lagging behind western countries, and the development history of mental health studies is short. According to Li and Han (2016),

The developed countries led by the United States started researching and practicing adolescent mental health in the 1940s. In contrast, China's adolescent mental health research started late, in the 1980s. Until the 21st century, China's adolescent mental health was further emphasized and strengthened, p.2; p.3)

In China, adolescent mental health research development has experienced four different stages: imitation stage, initiation stage, development stage, and maturity stage (Deng, 2019). In the early 1980s, China was in the early stages of reform and opening up the country to external influence. Reform and opening-up is an economic policy that China began to carry out in terms of internal reform and opening up to the outside world, a significant turning point with far-reaching significance in Chinese history (Sohu, 2018).

Reform and opening to the outside world have also profoundly influenced the school education system and structure. Traditionally, school education in China was described as students being "spoon-fed." Spoon-fed education emphasizes students being delivered knowledge to remember by teachers to pass examinations focusing on academic studies. Teachers were required to directly tell students everything they needed to know about the requirements of a particular task, rather than emphasizing independent thinking (Smith, 2008). However, with reform and opening up, educational ideas have changed. In 1999, the State Council issued a decision on deepening educational reform and comprehensively promoting quality-oriented education, which aims to cultivate talents with the overall development of morality, intelligence, physique, aesthetics, and so on (The State Council, 1999). Coupled with changed attitudes in education delivery to adolescents, the literature and knowledge of adolescent psychology in China is also increasing year by year, especially after entering the 21st century (Wang et al., 2015, p. 2).

The research on the mental health of Chinese adolescents is still controversial. Fan and Zhang (2005) reprocessed 31 research reports on mental health problems of middle school adolescents from 1993 to 2003 and analyzed the data of the reports using a meta-analysis method. The results showed that the mental health of middle school adolescents was poor and declining compared to adolescents or adults (p. 1425). This study revealed that middle school adolescents in China need

more mental health attention than youth and adults during that period. Hou et al. (2006) tested 1379 middle school adolescents in Beijing and found that 24.98% had mild adverse reactions to their mental health, and 6.73% had obvious mental health problems (p.789). The findings indicated that adolescents in different age groups face different mental health problems. For example, middle school adolescents scored significantly higher on hostility and fear than high school adolescents. The scores of obsessive-compulsive symptoms and depression factors in high school adolescents were higher than in middle school adolescents. These results show that middle school adolescents and their older peers need targeted mental health support according to the different characteristics of different age groups. Chen et al. (2010) also tested the mental health level of 585 rural adolescents in Chongqing with an only child, gender, and grade as variables. The results show that the mental health problems of rural adolescents in Chongqing are concerning. The mental health level of adolescents in a one-child family was generally lower than that of the non-only child adolescents. The study also revealed that rural adolescents need special attention from society, family, and school, and intervention measures should be targeted, especially for those adolescents with severe psychological problems (Chen et al. 2010).

By contrast, some studies show that although there are some problems in the mental health of Chinese adolescents, the overall situation is stable (Shi et al., 2007). For example, Zhang (2006) surveyed 545 middle school adolescents aged 12 to 18 from rural China. Their findings revealed that the mental health characteristics of rural middle school students in northwest China are generally good, but there are mild mental health problems in specific individuals. Parents' support and attention are crucial to adolescents' mental health (p. 182). Ye et al. (2006) also showed the same result that the overall mental health of middle school students is good, and adolescent psychological problems were significantly associated with good family functioning, such as communication and problem-solving in the parent-child relationship (p. 387). As can be seen from

the above two studies, effective family support positively impacts the mental health of Chinese adolescents, and adults in families need to understand their ability to positively influence the mental health of their adolescents and children.

The sudden COVID-19 pandemic in 2019 caused catastrophic damage worldwide, resulting in over 2 million deaths and forcing billions of people into quarantine under stay-at-home orders (World Health Organization, 2020). It is noticeable that COVID-19 may have severe and lasting effects on mental health, leading to adverse mental health outcomes and negative physical health outcomes, such as the development of cardiovascular disease (Gavin, 2020). The psychological cost of this impact is a more significant challenge for adolescents, as this age group (characterized by adolescents aged 14-17) lacks psychological resilience and coping ability and lacks adult physical development (Gavin, 2020). Due to a long time, prolonged isolation, and the spread of the virus, the mental health consequences associated with the COVID-19 crisis internationally were enormous (Ornell et al., 2020, p. 232). However, Chinese researchers were paying more attention to this rapidly evolving effect on the mental health of the elderly (Chen et al., 2020; Yan et al., 2022). Little attention was being paid to the psychological impact of COVID-19 on adolescents' mental health in China (Chen et al., 2020). Therefore, it is necessary to understand the impact of COVID-19 on the health of adolescents in China compared to other countries. In addition, the study will focus on understanding the mental health status of Chinese adolescents and provide current and future strategies for preventing adverse mental health outcomes such as anxiety and depression.

3.7 Conclusion of Chapter three.

This chapter explained the definition of adolescents and mental health in the Chinese context and compared these definitions to other countries. Chapter three has reviewed adolescent mental health research development history in China. The results show that compared with western countries, the

research on adolescent mental health in China started late. In general, adolescents' mental health problems are on the rise year by year. In addition, this chapter provides a brief review of international literature on the impact of the COVID-19 crisis on adolescent mental health, finding that COVID-19 has negatively impacted the mental health of most adolescents worldwide.

CHAPTER FOUR AND CHAPTER FIVE : METHODOLOGY

This research will adopt two methods: a systematic review and critical discourse analysis.

Chapter four will explain the process of using systematic reviews in this study. Chapter five will explain the process of using critical discourse analysis.

CHAPTER FOUR

4.1 Introduction

Currently, some researchers have noted the possible impact of COVID-19 on the mental health of Chinese adolescents. Due to the short history of COVID-19, there is presently no systematic literature review on the impact of COVID-19 on the mental health of Chinese adolescents in China. This study seeks to contribute to knowledge by systematically reviewing the evidence on the impact of COVID-19 on the mental health of Chinese adolescents.

4.2 Systematic review

Systematic reviews originated in medicine in the late 1970s, though they are now used in various fields. Archie Cochrane (1979) points out that "it is surely a great criticism of our profession that we have not organized a critical summary by specialty or subspecialty, adapted periodically, of all relevant randomized controlled trials" (p.11). Compared to the traditional literature review, the systematic review aims to summarize the best research related to a particular question, which is achieved by combining the results of several studies. It focuses more on evidence, impact, validity, and causality (University of Texas Libraries, 2021). A systematic review is not a simple summary but a critical evaluation and reflection on relevant research. In other words, a systematic review is a literature review that is relevant to a clearly stated research question, using a systematic and explicit approach to identify, select from, and critically evaluate previously published studies that are relevant to the current issue (The Cochrane Collaboration, 2005). This study investigates evidence of the impact of Chinese adolescents' mental health during the COVID-19 pandemic to understand

the current mental health status of Chinese adolescents and the different factors affecting their mental health during the COVID-19 pandemic.

4.3 Rationale for a systematic review

As I mentioned before, mental health is as essential as physical health. Especially for adolescents who are in a critical period of physical and psychological development, it is easy for them to be affected by changes in external things. A famous saying in Chinese education: "Don't let your children lose at the starting line." (DayDayNews, 2020). It means that children should start to develop their intellectual development at an early age and be competitive. Therefore, Chinese parents send their children to various educational training classes at a young age and often neglect their mental health (Zhao et al., 2015). Some Chinese adolescents are more prone to anxiety and depression when facing unfavorable situations because they have not received the correct guidance or mental health support.

During the COVID-19 pandemic, educators and policymakers became aware of the importance of adolescent mental health issues. They provided effective advice to guide teachers and parents on effective mental health education and counseling for children during the COVID-19 pandemic. Fortunately, since the outbreak of COVID-19, many researchers have examined the potential impact of COVID-19 on adolescent mental health from different perspectives and conducted a series of investigations. Most relevant studies have used internet-based cross-sectional surveys to investigate the effect of COVID-19 on adolescents' mental health. Widespread survey findings show a significant increase in anxiety and depression among adolescents during the COVID-19 pandemic. However, due to the short history of COVID-19, it is difficult to find a critical summary of the impact of COVID-19 on the mental health of Chinese adolescents. Because China is still experiencing the effects of the pandemic, it is difficult to carry out fieldwork safely and ethically.

Therefore, this study draws on a desk review of existing research and policies to bring together a range of evidence on the state of adolescent mental health issues during the COVID-19 pandemic and identify current research gaps and understanding in this area. Systematic reviews are beneficial to this type of research.

Firstly, systematic reviews provide a clear and comprehensive overview of the available evidence on a specific topic (Poklepović Peričić & Tanveer, 2019). This method can also help researchers identify research gaps in the literature and build their current understanding of an area (Tina and Sarah, 2019). Finally, the researcher can use a systematic review to identify questions for which the available evidence can provide definitive answers without further research (Chalmers & Glasziou, 2009). In the present study, the available evidence offers a clear picture of the mental health risks of Chinese adolescents during the pandemic, which requires more attention from government departments, health workers, school leaders, teachers, and parents.

4.4 Data collection

However, systematic reviews have some challenges in research, which largely relate to the data collection process. Firstly, systematic reviews require access to extensive databases and peer-reviewed journals, which can be difficult and expensive for non-academic people. Search agency websites may undermine the objectivity of the search and retrieval process, and researchers are confronted with a biased review process. Therefore, this study avoided searching proxy websites to ensure the objectivity of the data searching and recovering process. There are also subjective factors that may influence the systematic review process. For example, researchers may have different standards for inclusion. Therefore, this study pre-set the inclusion and exclusion criteria to screen for potentially relevant studies to achieve objectivity and used as many keywords as possible. For example, the research subjects of this paper are Chinese adolescents. Therefore, keywords were

expanded to include "Chinese youth" and "Chinese adolescents" when relevant literature was searched. Furthermore, the Meta-Analysis (PRISMA) guidelines (2009) were used as a guide to record the review process (Moher et al., 2009)

There are several steps to conducting a systematic review:

1. Framing clear, explicit, and structured research questions for a review;
 - 1) For this study, the research questions were “What is the current mental health status of Chinese adolescents? What are the major risk factors related to the mental health of Chinese adolescents during the COVID-19 pandemic?”
 - 2) The search for studies should be extensive, and the reason for inclusion and exclusion should be recorded.

4.5 Eligibility Criteria

"Inclusion and exclusion criteria set the boundaries for the systematic review. They are determined after setting the research question, usually before the search is conducted" (The University of Melbourne, 2021). Inclusion and exclusion criteria help ensure that investigators' questions are focused and prevent bias in study selection. Selected abstracts are reviewed to ensure they are eligible for inclusion. Full-text articles with qualified abstracts were retrieved and evaluated to ensure if they answered the research questions and met the inclusion criteria.

For the first question of research question one: "What is the current mental health status of Chinese adolescents?". The following databases were utilized to identify specific studies, literature reviews, dissertations, online academic journals to provide the researchers with an understanding of the current situation of Chinese adolescents' mental health: (a) Google Scholar, (b) the University of

Auckland Library, (c) Academic OneFile, (d) ProQuest and (d) Baidu³. The keywords used to identify relevant searchers were: (a) Chinese adolescents, (b) Chinese teenagers, (c) Chinese young people, (d) Chinese youth, (e) mental health, and (d) COVID-19. The inclusion criteria for this question were: (a) articles and journals include adolescents, especially Chinese adolescents between 12 and 18 years old; (b) articles and journals had a focus on the current situation of mental health issues among adolescents in China, especially during the COVID-19 outbreak; (c) articles and journals were published in English or Chinese between December 2019 and 2021 to show adolescents' recent mental health; (d) full-text articles, and (e) peer-reviews articles. The exclusion criteria for this question were: (a) articles and journals only referred to a particular group (for example, the subjects were nurses and doctors on the front lines of the pandemic, older people, children under the age of 12, etc.); (b) articles and journals focused on Chinese adolescent's mental health issues but not during the COVID-19 pandemic; (c) articles and journals focused on other aspects of the COVID-19 pandemic affecting adolescents, but not mental health.

For the second question of research question one: "How does the academic literature describe the major factors of the COVID-19 pandemic influencing the mental health of Chinese adolescents?"

The same databases and search terms were utilized in the first research question to understand the significant impact of the COVID-19 pandemic on Chinese adolescents in the academic literature.

The inclusion criteria for this question were the same as the previous questions. However, while examining the literature for the impact of COVID-19 on the mental health of Chinese adolescents, the researcher explored additional terms such as (a) risk factors and (b) psychological problems to understand the risk factors of COVID-19 on the mental health of Chinese adolescents.

³ Baidu is China's largest and most widely used search engine, with google-like features and services. Its search bar, which includes web pages, news, videos, pictures, and more, has been dubbed the "Google of China." As of February 2021, Baidu maintained its leading position in China's Internet search market with a 78.4 percent share (Fang et al., 2021). Since Baidu mainly serves Chinese Internet users, in the search process on Baidu, the keywords such as COVID-19, Chinese Youth, and Mental Health were entered in simplified Chinese to get more information.

Research Information System (RIS) format is exported from the database, and studies are automatically screened according to inclusion criteria and then imported into CADIMA. Forty studies imported by CADIMA were retrieved by title and abstract. Two proofreadings were conducted of the studies, and forty studies were selected for further screening according to inclusion criteria to be selected for the full review. In the second stage of screening full-text articles and excluded review articles, another 30 articles were excluded because they did not meet the inclusion criteria. Because 18 of the articles did not meet the eligibility criteria, 12 of them did not have full text. Therefore, ten articles were finally included in the systematic review. The PRISMA flowchart (**Figure 1**) shows the system reviews' search and inclusion process.

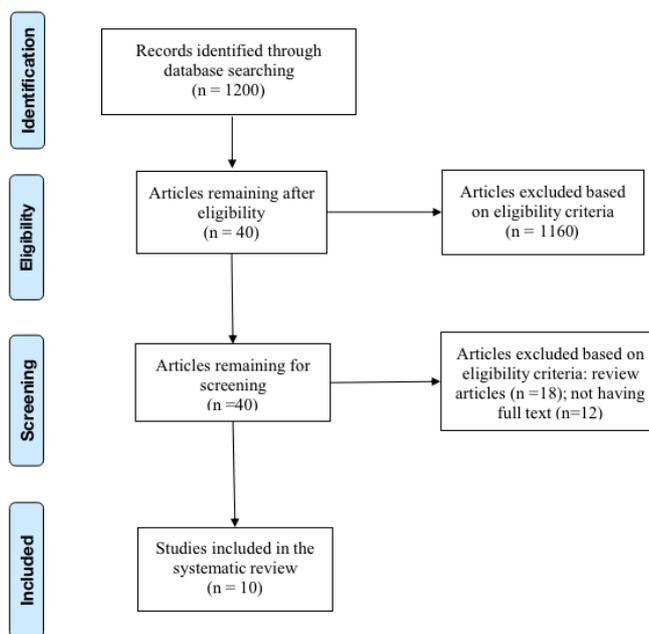


Figure 1. PRISMA flow chart to illustrate the article search and the inclusion process.

CHAPTER FIVE

5.1 introduction

During the COVID-19 pandemic, the Chinese government introduced psychological crisis intervention policies to deal with COVID-19 (Ju et al., 2020). This chapter will focus on discourse analysis that impacted the government's policy toward adolescents' mental health during the pandemic. Therefore, Chapter five will explain using “critical discourse analysis” in this research.

5.2 Critical discourse analysis in policy

During the COVID-19 pandemic, the Chinese government introduced many COVID-19 emergency psychological crisis intervention policies. One purpose of this study is to use discourse analysis (CDA) to analyze the public policies introduced in China to address the pandemic's mental health consequences and compare them with the existing experience of Western countries and organizations. The other two objectives are (a) understanding the Chinese government's national mental health policy during the COVID-19 pandemic. (b) the Chinese government's position and attitude towards safeguarding adolescents' mental health during the pandemic. Therefore, first, I will explain the rationale for using critical discourse analysis (CDA) in this research. The second part outlines the definition and functions of discourse analysis in policy analysis. The third part describes the selection and assessment of document sources. The fourth part outlines the data analysis process.

5.3 Selecting policies for inclusion

This paper aims to systematically review the existing literature on the impact of COVID-19 on adolescent mental health and conduct a discourse analysis of existing COVID-19 counseling work plans and policies. As the target audience for this article is Chinese adolescents, Baidu has become one of the main methods of searching for data to collect more literature on the mental health of

Chinese adolescents during the COVID-19 pandemic. Some authoritative websites in China, such as the National Health Commission, have published some plans and policies on COVID-19 psychological counseling, which were retrieved in the search process. However, there is no in-depth analysis of the relevant literature related to these work plans and policies. There is no doubt that COVID-19 has had an impact globally, and different countries have adopted various practices and advice on the effects of COVID-19 on adolescents' mental health. To support the identification of important discourses in Chinese mental policies, this thesis compares policies in China with that of selected western countries or international organizations. However, Baidu was limited in finding literature and policies in western countries. Therefore, Google was used in the data collection process to search for literature and policies in western countries about the impact of the COVID-19 pandemic responses on adolescents' mental health.

5.4 What is critical discourse analysis

The term "critical discourse analysis" was introduced in the 1980s to distinguish it from purportedly descriptive discourse analysis (Flowerdew, 2017, p. 165). Compared with descriptive discourse analysis, critical discourse analysis does not simply describe the content and meaning of a text but reveals hidden social problems. Mullet (2018) pointed out that "critical discourse analysis is a qualitative analytical approach for critically describing, interpreting, and explaining how discourses construct, maintain, and legitimize social inequalities" (p. 1). Language can represent a speaker's beliefs, positions, and ideas. Critical discourse analysis can help us analyze the implied meaning of words, explain the problems, and contribute to understanding, exposing, and ultimately resisting social inequality (van Dijk, 2001, p. 352). Critical discourse analysis aims to uncover ambiguous relationships between written texts, events, or oral speech and cultural structures, relationships, and processes (McGregor, 2010, p. 4; Mogashoa, 2014, p. 106). In this study, CDA provides a critical

perspective to investigate the discourse of mainstream news media and expose the ideologies that influenced the understanding of adolescent mental health policies during the COVID-19 pandemic.

Critical discourse analysis can be used in policy analysis to explore social problems. It can identify explicit, marginal, antagonistic, or alternative discourses in policy texts such as policy documents and speeches (Cummings et al., 2020, p. 99). Policy documents are not formed by accident; they are formed in a complex chain and web of events (Fairclough, 2013, p. 244-245). It means that policy formulation is not accidental but an action plan designed to solve a social problem effectively. Policy documents can state facts through their authors and editors or conceal, omit, or embellish facts (Freeman & Maybin, 2011). In this research, the most pressing issue is the impact of the COVID-19 pandemic response measures on the mental health of China's adolescents. Using Fairclough's Three-Dimensional Model(1989) (**see Figure 2**) as a theoretical framework, this paper seeks to facilitate a critical understanding of the Chinese government's national mental health policy during the COVID-19 pandemic and the Chinese government's position and attitude towards safeguarding the mental health of adolescents during the pandemic. The following section briefly introduces the research tool, eligibility criteria, and the process of critical discourse analysis (CDA) in this study.

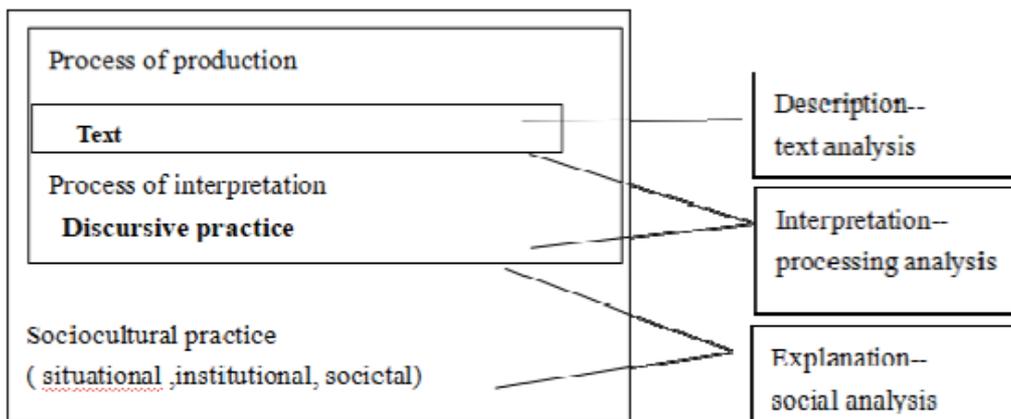


Figure 2. Three-dimensional model of discourse(Fairclough, 1992, p. 63)

5.5 The process of critical discourse analysis

The policies formulated by the government during the pandemic are also an effective means of providing psychological support to Chinese adolescents. Therefore, this study will review and analyze the Chinese government's mental health policies during the pandemic period to determine the extent to which the Chinese government paid attention to the mental health of Chinese adolescents and whether the support measures provided were effective. This section will discuss the selection and assessment of document sources and justify the rationale of each document for this study.

This research applies a modified Fairclough's Three-Dimensional Mode (1989) approach to CDA. In stage one, I located and prepared the data sources. I found relevant policies related to mental health during the COVID-19 pandemic on the official website. In searching policies, I found the Guidelines of psychological crisis intervention for coronavirus disease 2019-2020. It is the first policy adopted by the Chinese government to address the mental health crisis brought about by COVID-19 during the COVID-19 pandemic on January 27, 2020.

Then, I found the Notice on Establishing a Psychological Assistance Hotline for pandemic response and the Notice on Strengthening the Management of Treatment of Patients with Severe Mental Disorders during the COVID-19 pandemic. The Chinese government formulated these two documents in February 2020 to provide psychological support for the general public, especially those with severe mental illness, to maintain social stability. In March and April 2020, the Chinese government introduced four more policies: the Notice on strengthening mental health and social services in response to Covid-19 outbreak 2020; Work plan of mental support during COVID-19 pandemic 2020; Notification on the issuance of programs for counseling and social work services for COVID-19 patients, quarantined persons and their families and the Notice on the issuance of technical guidelines on COVID-19 prevention and control in key places, key units and key populations. The four policies are mental health policies formulated by the Chinese government for key groups to access during COVID-19. I also found The Work Plan on Psychological Counseling for COVID-19 Patients Undergoing Regular COVID-19 Prevention and Control was published on 25 August 2020. This policy aims to reduce public discrimination against COVID-19 patients and promote social harmony and stability.

In stages two and three, I analyzed the underlying discourse of the policy based on the above policy timeline. I found a policy called "Mental Health in Canada: Covid-19 beyond Canada" and a policy from the United Nations called "Policy Brief: COVID-19 and the Need for Action on Mental Health". Comparing Chinese policy documents with those issued by the United Nations, I became interested in whether Chinese adolescents have been listed as a key group in the mental health policy response to COVID-19. The extent to which the Chinese government is so concerned about social stability and harmony when formulating a mental health policy response to COVID-19.

Chapter seven presents the results of the critical discourse analysis from the exploration of mental health policies formulated in China during the COVID-19 pandemic.

CHAPTER SIX AND SEVEN: FINDINGS AND RESULTS

CHAPTER SIX

6.1 Introduction

The sudden COVID-19 pandemic outbreak in late 2019 in China significantly impacted the world's population and the ways people have been able to live their lives. Access to commerce, education, health services, and travel are just some of the disruptions that have impacted people's lives because of the associated lockdown conditions. Although authorities in China took immediate measures to isolate the virus, the virus' high infectivity and fatality rate continue to impact citizens' quality of life even with increased vaccination rates. The spread of anxiety, fear, depression and other negative emotions has influenced public psychology. This impact has been profound for adolescents, as they are in a critical transition period from childhood to adulthood. The change experienced in the wider world impacts their psychological state. Since the outbreak of the COVID-19 pandemic, relevant academic literature and policies have documented the investigations into the impact of COVID-19 on adolescents' mental health. Chapter six will answer the following research questions through a systematic review:

What is the current mental health status of Chinese adolescents? What are the major risk factors related to the mental health of Chinese adolescents during the COVID-19 pandemic?

6.2 The current mental health status of Chinese adolescents described in the current articles

October 10, 2021, marked the 30th World Mental Health Day. China's Mental Health Day theme is "Young in mind, young in youth," encouraging adolescents to strive for a healthy and positive mental state. However, a recent meta-analysis of community-based studies showed that the prevalence of general depression increased seven-fold to 25% following the COVID-19 outbreak, reflecting the significant impact of the COVID-19 pandemic on mental health (Bueno-Notivol et al.,

2021). Among the patients with depression in China, the prevalence rate of depression was 2.1%, and the prevalence rate of anxiety disorder was 4.98% (National Health Commission, 2020). Adolescents and people with high stress were the most susceptible groups. The COVID-19 pandemic has impacted the rate of depression and anxiety among Chinese adolescents, rising sharply (Zhou et al., 2020). This chapter presents results from a systematic review of the current evidence describing the impact of the COVID-19 pandemic outbreak on the mental health of adolescents in China. It seeks to answer research question one: What is the current mental health status of Chinese adolescents? What are the major risk factors related to the mental health of Chinese adolescents during the COVID-19 pandemic?

Table 1: the characteristics of ten empirical studies on the impact of COVID-19 on the mental health of adolescents in China.

Author (Publication year)	Title of the article	participants	Impact on Mental health	Major findings	Major risk factors
Chen et al. (2020)	Risk factors for adolescents' mental health during the COVID-19 pandemic: a comparison between Wuhan and other urban areas in China.	n= 7,866 students in grades 7-12 from Wuhan, Beijing and Hangzhou.	Negative	Anxiety symptoms of adolescents in Wuhan are significantly higher than those in other cities, while depression symptoms are significantly lower than those in other cities.	Lack of family support; High academic pressure.
Chen et al. (2021)	Depression, anxiety and associated factors among Chinese adolescents during the COVID-19 outbreak: a comparison of two cross-sectional studies.	n=9,554 adolescents participated in the first surveys from February 20 to February 27; n= 3,886 adolescents participated in the second surveys from April 11 to April 19, 2020,	Negative	In the original survey, the prevalence of depression was 36.6% and the prevalence of anxiety was 19%. In the second survey, the rates of depression and anxiety increased to 57.0% (and 36.7%), respectively.	Excessive screen time; Lack of outdoor activities; Loss of close peers.
Chi et al. (2021)	Mental health problems among Chinese adolescents during the COVID-19: The importance of nutrition and physical activity.	n=1794 Chinese adolescents with an average age of 15.26.	Negative	The prevalence of insomnia, depression and anxiety among Chinese adolescents during the pandemic was 37.80%, 48.20% and 36.70%, respectively.	Lack of outdoor activities

Author (Publication year)	Title of the article	participants	Impact on Mental health	Major findings	Major risk factors
Duan et al. (2020)	An investigation of mental health status of children and adolescents in china during the outbreak of COVID-19.	n= 359 Chinese children; n=3254 Chinese adolescents	Negative	22.8% of respondents suffered from depression; Certain factors have been associated with COVID-19 related outcomes from depression and anxiety.	Excessive screen time
Li et al. (2020)	Association of Home Quarantine and Mental Health Among Teenagers in Wuhan, China, during the COVID-19 Pandemic.	n=7,890 adolescents in Wuhan, China.	Negative	The prevalence of anxiety was 21.7%; The prevalence of depression 24.6%.	Lack of family support
Qi et al. (2020)	The Effect of Social Support on Mental Health in Chinese Adolescents During the Outbreak of COVID-19.	n= 7,202 Chinese adolescent aged 14-18.	Negative	About half (44.5 percent) reported symptoms of depression; 38% reported symptoms of anxiety; Only 24.6% of adolescents reported high levels of social support.	Lack of family support; High academic pressure
Kang et al. (2021)	Is Physical Activity Associated with Mental Health among Chinese Adolescents during Isolation in COVID-19 Pandemic?	n= 4898 Chinese adolescents aged(16.3±1.3 years old).	Negative	Girls and students in Grade 3 Senior High School had higher level of mood disturbance.	Lack of outdoor activities

Author (Publication year)	Title of the article	participants	Impact on Mental health	Major findings	Major risk factors
Tang et al., (2021)	Mental health and its correlates among children and adolescents during COVID-19 school closure: The importance of parent-child discussion.	n= 4342 primary and secondary school Chinese adolescents.	Negative as well as positive	Senior students were at greater risk of poor mental health conditions, such as anxiety (24.9 percent), depression (19.7 percent) and stress (15.2 percent) due to the pandemic. Children and adolescents do benefit from family isolation and parent-child discussions.	High academic pressure
Zhang et al. (2020)	The Psychological Impact of the COVID-19 Pandemic on Teenagers in China.	n= 493 junior high school adolescents; n= 532 senior high school adolescents.	Negative	Depressive symptoms (20.9 percent for middle school students and 29.7 percent for high school students); Anxiety symptoms (25.4 percent for middle school students and 28.4 percent for high school students).	High academic pressure
Zhou et al. (2020)	Prevalence and socio-demographic correlates of psychological health problems in Chinese adolescents during the outbreak of COVID-19.	n= 8,079 Chinese adolescents aged 12-18 participated in the study.	Negative	The prevalence of depressive symptoms, anxiety symptoms and symptoms combined with depression and anxiety in Chinese high school students was 43.7%, 37.4% and 31.3%, respectively.	High academic pressure

A summary of the characteristics of findings, the impact of COVID-19 on mental health in Chinese adolescents, and the major risk factors of the studies are presented in Table 1. Of the ten articles reviewed, all the studies were conducted in China. All of the 10 studies utilized a quantitative methodology (Chen et al., 2020, Chen et al., 2021, Chi et al., 2021, Duan et al., 2020, Lei et al., 2020, Li et al., 2020, Qi et al., 2020, Kang et al., 2021, Tang et al., 2021, Zhang et al., 2020, Zhou et al., 2020). The research subjects were all Chinese adolescents, and all the studies were conducted in China. The sample size ranged from 1,025 to 9,554 participants, and the mean age range of participants was from 7 to 18 years in ten studies. The studies were conducted between February 2020 and May 2020, and one of the studies did not report data collection dates. All the studies were quantitative studies conducted using online questionnaires. Seven (70%) of the surveys were distributed to adolescents, and three (30%) investigated the views of children and adolescents. This study evaluated only the data on adolescents. In terms of standardized tools, eight studies (80%) used standardized tools, and two studies (20%) did not.

6.3 In these ten articles, what is the mental health status of Chinese adolescents during the COVID-19 pandemic?

The COVID-19 crisis has had a severe impact on adolescents' mental health. The prevalence of anxiety and depressive symptoms has risen sharply among adolescents (OECD, 2021). To understand the mental health status of Chinese adolescents during the pandemic, Duan et al. (2020) conducted an online survey of 3,254 Chinese adolescents, and the results showed that 22.8% of respondents suffered from depression, indicating that the pandemic had a significant psychosocial impact on Chinese adolescents. Li et al. (2020) showed similar results, with the prevalence of anxiety and depression among adolescents during the pandemic being 21.7% and 24.6%, respectively. To further understand the mental health status of Chinese adolescents during different periods, Chen et al. (2021) compared two cross-sectional studies on depression, anxiety, and related

factors among Chinese adolescents during the COVID-19 pandemic. The results revealed that the prevalence of depression and anxiety was 36.6% and 19% in the initial survey. In the second survey, rates of depression and anxiety rose to 57% percent and 36.7%, respectively. These results reveal that the rates of anxiety and depression among Chinese adolescents showed a trend of rapid increase during the COVID-19 pandemic. Although most of the studies in Table 1 show that COVID-19 harms the mental health of Chinese adolescents, the research of Tang et al. (2021) indicates that COVID-19 has both negative and positive impacts on mental health of Chinese adolescents. For example, adolescents benefited from time with their family during isolation and more frequent parent-child discussions (Tang et al., 2021).

To explore the risk factors for the rapid increase of anxiety and depression among Chinese adolescents during the COVID-19 pandemic, Chen et al. (2020) conducted an online survey of 7,866 students in grades 7-12 to explore risk factors for adolescent mental health during the COVID-19 pandemic. The results show that lack of family support and high academic pressure are the main reasons for the rapid rise of mental health problems (such as depression and anxiety) among Chinese adolescents. Qi et al. (2020) share certain similarities in their studies, that lack of family support and high academic pressure were the two main factors affecting the mental health of Chinese adolescents during the COVID-19 pandemic. Mental health problems such as depression and anxiety were reported as being more common among senior adolescents in China during the COVID-19 pandemic. The reason may be that this group of students is under more academic pressure (Tang et al., 2021, Zhang et al., 2020, Zhou et al., 2020). In addition to the two risk factors mentioned above, Chi et al. (2021) and Kang et al. (2021) explored the correlation between physical activity and mental health among Chinese adolescents during the COVID-19 pandemic. The results showed that lack of physical activity is also one of the main factors leading to increasing mental

health problems among Chinese adolescents. Excessive screen time also increases the risk of mental health problems among Chinese adolescents (Chen et al., 2021; Duan et al., 2020).

Although the lockdown conditions caused by the COVID-19 pandemic may have some potential positive effects on mental health, most studies showed that COVID-19 had a significant negative impact on Chinese adolescents' current mental health situation. Therefore, it is valuable to study the main risk factors affecting adolescents' mental health in China to understand the specific problems and causes of mental health problems.

6.4 The main risk factors of COVID-19 affect Chinese adolescents' mental health discussed in the articles.

As the section above shows, there has been a significant increase in depression and anxiety among Chinese adolescents during the COVID-19 pandemic. Table 1 shows the risk factors evident in the literature that were significantly associated with an increased risk of anxiety during the COVID-19 pandemic. The four major risk factors that significantly increased depression and anxiety among Chinese adolescents during the COVID-19 pandemic included the lack of family support, excessive screen time, limited physical activity, and academic pressure. Therefore, it is meaningful to explore why these four risk factors significantly increase depression and anxiety among Chinese adolescents. The following section will focus on four risk factors affecting the mental health of Adolescents in China during the COVID-19 pandemic.

6.4.1 Lack of family support

Lack of family support is one of the main risk factors contributing to the increased mental health problems among Chinese adolescents during the COVID-19 pandemic. Social support providers include family members, friends, and significant others (Qi et al., 2020, p. 517). Studies show that

family has a critical influence on adolescents' lives, and effective family support plays a fundamental role in people's success (Robinson, 2006). It is especially true for adolescents in the transition and critical period of human development, as they require the more effective and active support and help from families. Research conducted before the pandemic reveals that parental support is the most important of the different social supports available (van Harmelen, 2016; Garipey, 2016). A study on the relationship between daily life characteristics and anxiety and depression showed that the more time communicating with family members, the lower anxiety and depression levels of adolescents (Li et al., 2021). Although peer support becomes more important during adolescence, parental support can still be beneficial (Robinson, 1995) because parents play an essential role in their children's adolescence. They provide adolescents with opportunities to exercise autonomy and support them through the trials and tribulations of adolescence and early adulthood (Chentsova Dutton et al., 2020).

However, it does not mean that the mental health risks of adolescents were significantly lowered during the pandemic since adolescents spent most of their time at home with their families. Qi et al. (2020) showed that adolescents with medium and low levels of social support had a higher prevalence of mental health problems during the COVID-19 pandemic in China. On the other hand, the more social support adolescents receive, the lower their risk of mental health problems.

However, for many adolescents, time at home did not necessarily translate into social support. To prevent the spread of the virus, authorities in China had to close schools and a range of activities during the peak of the COVID-19 pandemic. Therefore, many adolescents were at home most of the time. However, "home" did not always mean time with family. Some adolescents do not have families in China, such as left-behind children. "Left-behind children" refer to children under 18 whose parents work in rural areas.

In many cases, these children are cared for by their extended family, usually grandparents or family friends who remain in rural areas (Zhang, 2018). In China, there are about 69.7 million left-behind children who have experienced many of the effects of poverty. Many left-behind children in China are physically and mentally unhealthy due to a lack of proper education and parental support (Tong, 2019). It can be said that China has many adolescent groups, such as left-behind children, who may not have social support because they are far away from their families.

For adolescents living with their families, lockdowns and school closures meant more time at home. Although most adolescents who stayed at home lived with their parents, only 24.6 percent of the study subjects reported high levels of social support (Qi et al., 2020, p. 517). While parents and children spent more time together, relationships or parenting during the pandemic were fraught with challenges (Fontanesi et al., 2020; Prime et al., 2020). There is evidence that school closures have led adolescents to be confined to their homes and take online classes under parental supervision. These changes to parents' daily lives and their adolescent children increased parental stress and made it possible for parents to rely on negative parenting styles, such as scolding (Jiang, 2022, p. 17). Studies reveal that parents' family support and warmth for their children were fragile during the COVID-19 pandemic when family members faced stress and uncertainty themselves (Chung et al., 2020; Spinelli., 2020). For instance, during the global recession of 2008, a natural experiment found that more economic turmoil was associated with less warmth from mothers and harsher parenting (Brooks-Gunn, Schneider, & Waldfogel, 2013; Schneider et al., 2015). Evidence shows that the COVID-19 crisis and its impact have created unprecedented economic distress since the 1930s, resulting in the loss of jobs or a significant reduction in family income (Kalil et al., 2020. p. 2). China is no exception. China's urban unemployment rate rose to 6.2% in February 2020 from 5.2% in December 2019 (Kemp & Spearritt, 2021). Some families in China may lose income because of

COVID-19, which puts families under pressure. Some parents may become vulnerable and unable to give their children the support and warmth of the family.

Parents are not the only source of family support, but unfortunately, most Chinese adolescents currently have no siblings due to the one-child policy. The one-child policy (OCP) was a family planning policy implemented in China in the mid-20th century to control the rapid population growth. In most cases, families are only allowed one child. In 2015 China repealed its one-child policy and introduced a two-child policy (Zeng et al., 2016). Most Chinese adolescents are currently the only child in their families. However, a previous study noted that children with siblings under China's one-child policy had higher levels of anxiety and depression than only children (Yang et al., 1995, p. 1301). The finding runs counter to Chen et al. (2020) study, which revealed that "during the COVID-19 period, it appears that having siblings became a protective factor. However, most Chinese families only have one child. In 2015, 45 percent of China's 410 million households had children aged 0-17. Of all families with children, 65.6 percent had only one child, while 28.4 percent had two children, and families with three or more children made up the remaining 6.0 percent (UNICEF, 2015). Therefore, parents were the only source of family support for most adolescents in China during the pandemic.

Li et al.(2020) pointed out that during the pandemic, various stressors such as loneliness, fear of infection, depression, and boredom may have adversely affected adolescents' mental health (p. 316). Adolescents with siblings had a lower risk of anxiety and depression during the COVID-19 pandemic, which may be due to a reduction in loneliness (Chen et al., 2020, p. 9). However, siblings' lack of family support in many Chinese families meant that adolescents were likely to feel lonely during lockdowns. Overall, the lack of family support during the pandemic was a significant

risk factor for anxiety and depression among Chinese adolescents. These adolescents could not access the support they usually received from their peers by attending school.

6.4.2 Excessive screen time

Excessive screen time has been reported as another risk factor contributing to increased mental health problems among Chinese adolescents during the COVID-19 pandemic. The development of hand-held portable digital technology allows adolescents to spend extended amounts of time looking at screens (Saunders et al., 2014; Rideout, 2016). In China, weekend screen time was reported to be over 2 hours for 41.5% of adolescents (Wu et al., 2016). Screen time refers to various activities and time spent online using digital devices (DataReportal, 2020). For example, screen time includes using digital devices for work, study, leisure, and entertainment, such as engaging with social media and gaming. However, many studies have shown that excessive screen time is associated with negative mental health outcomes such as psychological problems, emotional instability, and a greater risk of depression or anxiety (Allen et al., 2019; Aziz Rahman et al., 2020).

During the lockdowns caused by the pandemic, people turned to social media, messaging apps, and video conferencing platforms. These platforms allow people to keep in touch (Kietzmann et al., 2011). Chinese adolescents had to turn to online learning to ensure their studies were not interrupted by the pandemic. As a result, device usage increased dramatically in China. For example, Guo et al. (2021) conducted an online survey of 10,933 students, and the result showed that 44.6% of respondents said they spent more than 5 hours of screen time on e-learning, especially high school students (81.0%). 76.9 percent of students reported increased screen time compared to pre-pandemic, revealing that screen time among almost all Chinese adolescents rose during the COVID-19 pandemic.

To explore excessive screen time among Chinese adolescents during COVID-19, Duan et al. (2020) conducted a survey of 3,613 children and adolescents in China (**Table 1**). The result showed that Chinese adolescents using the Internet for more than five hours /day during COVID-19 increased from 10.12% to 29.58% during the pandemic, suggesting that the mental health of Chinese adolescents is likely to have suffered (Duan et al., 2020, p.114). Although only 6.03% of adolescents in Duan et al.'s study reported being addicted to the Internet, increased anxiety and depression caused by excessive screen time are potential risk factors for Chinese adolescents during the COVID-19 pandemic. During the COVID-19 pandemic, many studies noted the influence of the extent of excessive screen time on adolescent mental health. Adolescents using social media for more than 3 hours reported a threefold increase in distress compared to pre-pandemic (Reans, 2021). A survey on the relationship between the characteristics of daily life and anxiety and depression showed that the more screen time used, the higher the level of anxiety and depression of Chinese adolescents during the COVID-19 pandemic (Li et al., 2021). Although the use of screen time increased during the pandemic in part to help students cope with their studies, Chen et al. (2021) also acknowledged that excessive screen time (such as internet and smartphone use) during the pandemic might increase the risk of anxiety and depression (p. 7).

However, this does not mean that screen time (such as internet and smartphone use) can only harm adolescents' mental health. The impact of the Internet on adolescent health may depend on the type of social media users and the purpose of the activity (Maheus, 2021, p. 741). For example, a recent study found that while more frequent use of social media during the pandemic was associated with negative outcomes for some adolescents, regular direct online communication with friends was associated with lower loneliness (Ellis et al., 2020). Therefore, reasonable control of screen time use helps reduce the mental health problems of Chinese adolescents.

6.4.3 Lack of physical activity

Lack of physical activity is also a risk factor contributing to increased mental health problems among Chinese adolescents during the COVID-19 pandemic. Regular physical activity has been shown to help prevent and control non-communicable diseases, prevent hypertension, and maintain a healthy weight. It can improve mental health, quality of life, and well-being (WHO, 2021).

Research by Biddle and Asare (2011) suggests that "physical activity has a potentially beneficial effect on reducing depression and anxiety, and there is a consistent negative correlation between mental health and sedentary behavior" (p. 1). It means that although physical activity is not directly associated with better mental health or reducing symptoms of mental health disorders, physical activity has the potential to reduce symptoms of depression and anxiety.

However, recent studies have shown that physical activity levels in the general population declined during the COVID-19 pandemic (Puccinelli et al., 2021; Bennett et al., 2021). It means that physical activity levels have dropped during social distancing compared to before the pandemic. For adolescents, these long periods of home isolation and online learning have drastically reduced the amount of time they spend doing physical activity, such as walking, playing sports, riding bikes, etc. Similarly, city lockdowns and social distancing have been essential measures to reduce the virus's rapid spread in China. In China, strict lockdown measures include:

- Closing the airport.
- Suspending all public transport.
- Banning anyone from entering or leaving their home or place of work.

In addition, to reduce the very high population movement, all public places except supermarkets and pharmacies have been closed (AlTakarli, 2020, p. 46). For adolescents isolated at home, access and sites for opportunities for suitable physical activity are limited.

Many researchers have mentioned the potential link between physical activity and mental health among adolescents during the pandemic. For example, Chen et al. (2021) conducted two surveys on 13400 Chinese adolescents to understand the changes in depression and anxiety among Chinese adolescents during the COVID-19 pandemic. One result showed that adolescents who exercised for more than 30 minutes a day significantly reduced their risk of depression and anxiety. By contrast, adolescents who spent more time sitting had higher levels of depression (p. 7). Another study with 4898 Chinese adolescents between the age of 15 and 18 on the relationship between daily life characteristics and anxiety and depression showed similar results. If adolescents were more physically active during the pandemic, their levels of anxiety and depression were lower (Kang et al., 2021). In sum, the lack of physical exercise due to government measures to contain the pandemic is a crucial factor contributing to high levels of depression and anxiety among Chinese adolescents during the COVID-19 pandemic.

6.4.4 High academic pressure

High academic pressure is one of the main risk factors contributing to increasing mental health problems among Chinese adolescents during the COVID-19 pandemic. Mainland Chinese citizens value academic achievement because long-standing cultural values link education to economic success and social status (Hesketh & Ding, 2005). To improve the efficiency of middle school education and adapt to economic development, the Chinese government carried out large-scale education reform in the mid-1980s to introduce a "competition mechanism" into middle school education (Zhao, 2015). The gaokao is taken by Chinese students in their third and final year of high school and is usually held between June 7 and June 8 or 9. It is the only criterion for admission to Chinese universities (Wu, 2021). In other words, the academic performance of Chinese high school students at gaokao directly affects their access to high-quality high schools and universities. It significantly influences their future career development and potential socioeconomic status.

As a result, in China, the final year of high school is often spent preparing for the make-or-break college entrance exam, a long and arduous process. One high school student from China told *The New York Times*, "If you combine all the practice tests I have taken in the past three years, they cover the whole world." (Wu, 2021). A Chinese saying likens gaokao to "thousands of troops and horses crossing a single-plank bridge." The point is that a Chinese high school student faces tremendous academic pressure, especially during the gaokao year. The high academic pressure on Chinese adolescents is related to the competitive educational environment supported by Chinese traditional values and the strict and competitive examination system. Chinese adolescents not only have to bear the academic pressure of gaokao but also their parents' expectations. Under the influence of collectivism, Chinese traditional culture attaches great importance to the interdependence between family members and the responsibility of children to their parents (Triandis et al. 1990). When a child receives an honor, it represents the same honor for the entire family. For Chinese adolescents, entering a prestigious university not only changes their (students) destiny but also brings honor to their whole family. Therefore, Chinese adolescents' high academic pressure has become a significant cause of increasing psychological distress and can contribute to suicide.

Studies dating back several years have shown that Chinese adolescents experience high levels of psychological distress associated with various academic challenges (Sun, Dunn, Hou, & Xu, 2013). According to researchers, suicide is the leading cause of death among adolescents aged 15-34 in China (Phillips, Li & Zhang, 2002). In China, a meta-analysis study found that 17.7% of adolescents had suicidal ideation, 7.3% planned suicide, and 2.7% attempted suicide (Dong, Liu, & Liu, 2014). Students have cited the gaokao as a contributing factor to Chinese adolescents' psychological distress and suicidal behavior (Fu, 2021). As a result, China's government has devised policies to ease the pressure on students to study. For example, China's Ministry of

Education introduced a so-called "double cut" policy in July 2021, requiring schools to reduce the amount of time students spend on homework each night and imposing strict new measures to rein in private tutoring agencies (Yan, 2022).

Regardless, the outbreak of the pandemic, especially the sudden move to online learning, still contributed to heightened Chinese adolescents' academic stress. With the explosion of COVID-19, the educational environment has been forced to shift from traditional classroom teaching to online learning. Chinese adolescents found themselves using online software at home to maintain their academic performance. Traditionally, the Chinese classroom teaching method is transactional and teacher-centered. The teacher usually controls the dynamics of the classroom. By contrast, online learning requires more self-regulation from students and for them to actively participate in their learning process (Zimmerman, 2013). This sudden switch in learning mode was a big challenge for Chinese adolescents who were used to the traditional teacher-centered approach. To explore the dilemma of online compulsory education for Chinese adolescents under the COVID-19 pandemic, Liu et al. (2022) surveyed 60 adolescents at a school in Xi'an China. The results showed that although unreliable internet connections are rarely mentioned, most students have low grades and poor academic performance in online education. The average score for online learning satisfaction was 6.0 out of 10. Many adolescents struggle to adapt to online, independent learning without teachers or peers. Excessive worry about academic performance lead to anxiety and depression because of the fear and understanding of how reduced academic performance may impact their future opportunities.

The stress of not being able to catch up on their academic learning is heightened for vulnerable groups, such as rural learners who lack electronic equipment and a good, reliable internet network. According to the China Development Research Foundation study, only half of the rural students had

access to formal online courses in China during the pandemic (Liu, 2020). A study in Wales found that adolescents from low-income backgrounds were more likely to experience more isolation, hunger, and sedentary behavior during the summer holidays (Morgan et al., 2019). While schools are rapidly shifting to distance learning, there are still huge differences in access to the internet and digital devices and quiet places to study. Some vulnerable youngsters may even be forced to interrupt their studies and find paid employment because they do not have good internet or digital devices. It exacerbates widening inequality in education and increases the stress level of vulnerable adolescents struggling to improve their lives through education. As a result, Chinese adolescents living in rural areas were more likely to experience depression and anxiety during the COVID-19 pandemic than those living in urban areas. This result is supported by Zhou et al. (2020) and Qi et al. (2020), whose findings suggest that this is closely related to the poorer economic conditions in rural areas (p. 755; p. 516).

For high school students taking gaokao during the pandemic, the anxiety was likely worsened because no accommodations were made in the examination system, and the 2020 gaokao was delayed by only a month (The People's Daily, 2020). It was a huge challenge for Chinese adolescents entering their final year of high school to overcome the effects of COVID-19, the sudden switch to online learning, and continue preparing for the gaokao. It is probably no surprise that Zhang et al. (2020) found that the symptoms of depression and anxiety varied between grades. The proportion of students with symptoms of depression and anxiety increased with each rise (P. 753). It is very likely related to adolescents in their final year of high school facing more pressure to get into a high-ranking university or college in the Chinese education system. Zhou et al. (2020) also confirm Zhang et al.'s view that "high school is a risk factor for depression and anxiety symptoms because they (students) face greater academic pressure" (p. 751).

6.5 Conclusion of chapter six

Chapter six systematically reviews the existing literature on mental health among Chinese adolescents during the COVID-19 pandemic and finds that psychological problems, mainly depression and anxiety, have increased due to the imposed changes to the physical living and educational conditions imposed during the pandemic. The findings indicated that lack of family support, social isolation, internet addiction, lack of physical exercise, and high academic pressure led to the rapid rise of mental health problems such as anxiety and depression among Chinese adolescents during the pandemic. Therefore, this study suggests that the Chinese government, schools, teachers, and parents should understand the risk factors and pay attention to ways the system and society can reduce pressures and create an environment that supports the well-being of Chinese adolescents during the pandemic.

CHAPTER SEVEN: CRITICAL DISCOURSE ANALYSIS OF CHINA'S POLICY ON MENTAL HEALTH DURING THE PANDEMIC.

7.1 Introduction

The policy is essential for society to function effectively. As Rahimi and Noruzi (2011) said, "Policy is just like a bulb in the dark" as it lights the way forward in the country's direction. If countries do not maintain a systematic policymaking process, they will not be successful" (p. 175). Amid these uncertain and challenging times created by the COVID-19 pandemic, effective policies can help organizations or countries make evidence-informed decisions and achieve their goals. This chapter will describe the official position of the Chinese government regarding policy related to adolescent mental health introduced by the Chinese government during the COVID-19 pandemic.

Since the outbreak of the COVID-19 virus, Chinese policymakers have introduced a series of interventions to address the psychological crisis caused by the COVID-19 pandemic effects and control measures. Chinese adolescents' mental health problems were common before the COVID-19 pandemic (China Youth and Children Research Center, 2005). Therefore, it is necessary to review the policies of the Chinese government regarding the mental health of Chinese adolescents established during the outbreak of the COVID-19 virus. A review of eight relevant policy documents (*See table 2*) developed by the Chinese government departments between January 2020 and August 2020 are presented in the following section. This chapter will use critical discourse analysis to answer the following research questions:

How have Chinese policies tried to address the impact of COVID-19 on the mental health of Chinese adolescents? How do these "solutions" compare with the impact of COVID-19 on the mental health of Chinese adolescents described in the Chinese academic literature?

7.2 The Chinese government's attention on Chinese adolescents' mental health before the COVID-19 pandemic.

With the deepening of educational reform and promotion of quality education policy, the Chinese government noticed that good psychological quality is an essential part of people's overall quality of life and outcomes and became part of their education policy mandates. The Chinese Education department issued the "Guidance on Mental Health Education in Primary and Secondary Schools" in 2002. It aimed to improve the psychological quality of all students, fully develop their potential, cultivate students' optimistic psychological quality, and promote the sound development of student's personalities, to comprehensively promote quality-oriented education (Ministry of Education of the People's Republic of China, 2002). To help school leaders and teachers carry out effective mental health education, the Ministry of Education proposed methods to carry out mental health education. For example, mental health education permeated the educational process for young people by requiring them to attend mental health elective courses, activity classes or special lectures, individual counseling, consultation, and simultaneous implementation of mental health education at home and school. Unfortunately, although the Ministry of Education noticed the importance of mental health for Chinese adolescents and has taken corresponding measures, the proportion of adolescents with mental health problems has been on the rise. For instance, at least 30 million Chinese young people aged 7 to 18 have experienced emotional or behavioral issues, including ADHD, depression, or self-harm, according to a 2005 report by the China Youth and Children Research Center (Sohu, 2018). Therefore, in 2019, to further strengthen the mental health work of children and adolescents, the promotion of mental health and overall quality development was strengthened. The National Health Commission issued a notice on developing a Healthy China Action Plan on The Mental Health of Children and Adolescents (2019-2022). In its policy, the government acknowledged that "With the rapid economic and social development in China, the incidence of psychological and behavioral problems and mental disorders among children and

adolescents was gradually increasing. It has become an important public health problem concerning the country and the nation" (p.1).

The main reason the rapid development of China's economy has led to the increase in Chinese adolescents' psychological and behavioral problems is that China's economic transformation after the reform and opening-up⁴ has strengthened competition and challenges for adolescents. As Zhang (2007) stated, while the market economy has brought new opportunities, it has also brought challenges to the Chinese population, especially the young. The main challenge is the pressure imposed on the Chinese adolescents to compete for limited resources and opportunities" (p. 9).

7.3 What specific actions and measures have been put forward by the government to address the mental health problems of Chinese adolescents?

The government has put forward some concrete actions and measures to solve Chinese adolescents' growing psychological behavior problems and mental disorders. In 2019, the Chinese government issued the Healthy China Action plan on the mental health of children and adolescents. In this action plan, mental health promotion initiatives were introduced. For example, schools at all levels and of all types were required to implement the "two and one" action of listening for 15 minutes and exercising for one hour (China Health Commission, 2019). This policy guides adolescents and their families to participate in at least one hour of physical activity and communicate with family for 15 minutes to help adolescents get effective family support and maintain suitable sports activities to alleviate the emergence of psychological problems.

⁴ China's reform and opening-up policies introduced private business and market incentives to what was a state-led communist system.

The Healthy China Action Program on Child and Adolescent Mental Health (2019) was a government project that launched a mental health care initiative. For example, school leaders and teachers were encouraged to conduct psychological counseling for junior and senior students and their parents who faced mental health pressures (China Health Commission, 2019). In terms of safeguards, the government stressed the need to strengthen organizational leadership and departmental coordination, ensure funding for the work on children and adolescents' mental health, strengthen scientific research on children and adolescents' mental health and improve monitoring, evaluation, and intervention mechanisms (China Health Commission, 2019). This document and program indicate that the Chinese government has noted the importance of mental health to adolescents' physical and mental development. However, it is worth exploring whether the actions and measures proposed by the Chinese government in its policies have been realized since the outbreak of the COVID-19 pandemic.

7.4 The Chinese government's (lack of) attention on Chinese adolescents' mental health during the COVID-19 pandemic.

Two weeks before the outbreak of COVID-19, the National Health and Disease Control Department issued a special policy aimed at promoting the mental health and overall development of adolescents. It points out that the mental health problems of Chinese adolescents have become a significant public health issue concerning the future of the country and the nation (China Health Commission, 2019). With the outbreak of the COVID-19 pandemic, the Chinese government introduced a series of policies related to mental health problems caused by COVID-19. In late 2019, the COVID-19 virus had registered in China, and it became clear that many citizens were becoming very sick. To reduce the psychological harm caused by the pandemic, the Chinese government issued many policy documents to address the psychological crisis caused by the COVID-19 virus. On January 26, 2020, the Chinese government issued a Guidelines for psychological crisis

intervention for coronavirus disease 2019-2020 to provide mental health services for the affected population. The policy identified four groups of people affected by the COVID-19 virus, with adolescents classified within the general population. To prevent and mitigate the psychological stress and extreme events caused by the pandemic, the Chinese government issued a Notice on the establishment of mental health hotline for Covid-19 epidemic situation 2020 on February 2, 2020. This notice classified Chinese adolescents as part of the general population rather than a specific group, requiring special intervention and support. It is worth noting that the Chinese government issued a special Notice on strengthening treatment and management of patients with severe mental disorders during the Covid-19 outbreak 2020 on February 18, 2020, to enhance the treatment and management of patients with severe mental disorders during the pandemic. This approach suggests that the Chinese government was more concerned about particular groups potentially harming social stability and harmony, such as patients with severe mental disorders.

In March, the Chinese government issued a Notice on strengthening mental health and social services in response to COVID-19 outbreak 2020 and Work plan of mental support during Covid-19 pandemic 2020. The aim was to provide psychological counseling for key groups and strengthen psychological assistance and social work services in COVID-19 prevention and control. The policy enhances mental health support for patients and their families, families of the deceased, and frontline medical staff and does not mention adolescent groups. To promote the orderly return to normal production and life order, the Chinese government issued a Notification on the issuance of programs for counseling and social work services for COVID-19 patients, quarantined persons and their families in April 2020. The aim was to promote synchronous physical and psychological rehabilitation of patients, maintain the mental health of isolated personnel and their families and create a social environment of mutual care. In the same month, the Chinese government issued a Notice on the issuance of technical guidelines on COVID-19 prevention and control in key places,

key units and key populations. The aim was to control key geographic areas, places, and populations and minimize the pandemic risk in particular people. The key groups stated in the two policies were the elderly, pregnant women, children, and frontline workers. When China's COVID-19 prevention and control entered a normalization phase to promote the entire physical and mental recovery of COVID-19 cured patients, the Chinese government issued a Work Plan on Psychological Counseling for COVID-19 Patients Undergoing Regular COVID-19 Prevention and Control. It was published on August 25, 2020, with little attention paid to the mental health of Chinese adolescents during the pandemic.

Table 2: Eight relevant policy documents developed by Chinese government departments between January 2020 and August 2020 to address the psychological crisis caused by COVID-19.

Title of policy / year published / link	Ministry in charge	Objectives	Key target groups	Are adolescents mentioned?
Guidelines of psychological crisis intervention for coronavirus disease 2019-2020 (27 January 2020)	Joint Prevention and Control Mechanism of the State Council	<ol style="list-style-type: none"> 1. Mental health services for the affected population; 2. Provide psychological crisis intervention for those in need; 3. Actively prevent, mitigate and minimize the psychosocial impact of the epidemic; 4. Continue to do a good job in the management and treatment of serious mental disorders. 	<p>Level 1: Novel coronavirus patients, front-line medical personnel in epidemic prevention and control, etc</p> <p>Level 2: mild patients isolated at home.</p> <p>Level 3: People related to level 1 and level 2</p> <p>Level 4: susceptible group, general public.</p>	Yes (the phrase “general public”, but not specific mentioned the word “adolescent”)
Notice on the establishment of mental health hotline for Covid-19 epidemic situation 2020 (2 February 2020)	Joint Prevention and Control Mechanism of the State Council	<ol style="list-style-type: none"> 1. Prevent and alleviate psychological distress caused by the epidemic. 2. Prevent extreme events caused by psychological stress 	General public	Yes (the phrase “general public”, but not specific mentioned the word “adolescent”)
Notice on strengthening treatment and management of patients with severe mental disorders during the Covid-19 outbreak 2020 (18 February 2020)	Joint Prevention and Control Mechanism of the State Council	Strengthening management, treatment and community care for hospitalized and home-based patients with severe mental disorders to reduce the risk of accidents and accidents.	Patients with severe mental disorders.	No

Notice on strengthening mental health and social services in response to Covid-19 outbreak 2020 (5 March 2020)	Joint Prevention and Control Mechanism of the State Council	To strengthen psychological assistance and social work services in the prevention and control of COVID-19.	COVID-19 infected people, quarantined people, frontline workers.	No
Work plan of mental support during Covid-19 pandemic 2020 (18 March 2020)	Joint Prevention and Control Mechanism of the State Council	1. Provide psychological counseling, psychological intervention and other psychological services for key groups. 2. To safeguard public mental health and promote social harmony and stability.	Patients and their families, family members of the deceased, frontline staff.	No
Notification on the issuance of programs for counseling and social work services for COVID-19 patients, quarantined persons and their families (7 April 2020)	Joint Prevention and Control Mechanism of the State Council	Promote synchronous physical and psychological rehabilitation of patients, maintain the mental health of isolated personnel and their families and create a social environment of mutual care.	Senior citizens, pregnant women, children, students, frontline workers	Yes (the word “student”, but not specific mentioned the word “adolescent”).
Notice on the issuance of technical guidelines on COVID-19 prevention and control in key places, key units and key populations (8 April 2020)	Joint Prevention and Control Mechanism of the State Council	To effectively prevent the occurrence of clusters of cases, minimize the risk of the epidemic and promote the orderly resumption of normal production and life order.	Elderly, pregnant women, children, students, medical personnel, police, etc	Yes (the word “student”, but not specific mentioned the word “adolescent”).
The Work Plan on Psychological Counseling for COVID-19 Patients Undergoing Regular COVID-19 Prevention and Control was published (25 August 2020)	Joint Prevention and Control Mechanism of the State Council	To further strengthen psychological counseling for those who have been cured and promote their full recovery.	Patients cured of COVID-19.	No

Interestingly, despite concerns about adolescent mental health before the pandemic and evidence-based on the risk factors the pandemic has brought to bear on adolescents in China. As Chapter four

highlights, the evidence base showed that mental health problems (such as anxiety and depression) among Chinese adolescents had increased significantly during the pandemic (Chen et al., 2020, Chen et al., 2021, Chi et al., 2021, Duan et al., 2020, Lei et al., 2020, Li et al., 2020, Qi et al., 2020, Kang et al., 2021, Zhang et al., 2020, Zhou et al., 2020). Despite the academic literature highlighting the mental health issues adolescents faced during the pandemic (see Chapter four for a summary of the academic literature) and the corresponding risk factors, the adolescent group seemed to be de-emphasized in mental health policies issued during the pandemic. Indeed, Chinese policymakers did not identify adolescents as a key target group to focus on during the pandemic. As shown in Table 2, the term "key target group" is mentioned in almost all the policy documents addressing Chinese people's mental health during the pandemic. In these documents, the term "key target group" refers to populations with special physical and psychological characteristics or those living in a specific environment that is vulnerable to various harmful factors and has a high prevalence of the virus spread. For example, in the COVID-19 Counseling Work Program launched on March 18, 2020, COVID-19 patients and their families, family members of the deceased, and front-line workers were listed as key groups for mental health counseling and intervention. The word "adolescent" was not used in any of the documents listed. Instead, the Chinese policymakers focused more on groups directly affected by the infection of the COVID-19 virus, and adolescents were categorized as part of the general population.

7.5 Discourses of social harmony and social stability in the policy documents.

This study evaluated the goals of the mental health policies launched during the pandemic. As shown in Table 3, the phrase "maintaining social stability" and "maintaining social harmony" has been mentioned many times in these Chinese policies during the COVID-19 pandemic. (See table 3).

Due to China's pandemic strict prevention and control, the control of the virus is gradually improving. In March 2020, the Chinese government issued two policies: A Notice on strengthening mental health and social services in response to Covid-19 outbreak 2020 and a Work plan of mental support during Covid-19 pandemic 2020 to reduce psychological damage and social impact (especially in hard-hit areas like Wuhan), to promote social stability and social harmony. In August of the same year, the Chinese government paid more attention to the public. It issued a work plan on Psychological Counseling for COVID-19 Patients Undergoing Regular COVID-19 Prevention and Control, hoping to reduce discrimination and marginalization of COVID-19 patients and achieve social harmony by strengthening the dissemination of COVID-19 knowledge and scientific communication. The discourse of social stability and harmony in mental health policies seemed to be unique to China and indicates the belief that there is a close relationship between preventing psychological crises and maintaining social harmony and stability during the COVID-19 pandemic.

China's approach differs from other countries. A scan of the psychological support policies developed by Western governments, Canada, and the United Nations does not mention a link between mental health and social stability and harmony. For example, in 2020, the United Nations produced a policy brief on COVID-19 and the need for mental health action. The policy (2020) brief noted that "it is essential to ensure people and societies are better protected from the mental health impact of COVID-19" (p. 4). After reviewing the policy, it can be found that the notions of social stability and harmony as being linked to psychological illness are not included. Similarly, a review of the mental health policy - Mental Health in Canada: Covid-19 and Beyond, 2020 reveals that Canadian policies focused on individual mental health rather than social stability and harmony. Mental Health Canada (CAMH) pointed out that this policy aims to call on governments and policymakers to support the mental health of Canadians during COVID-19 and beyond. The policy(2020) notes that "despite other financial pressures that governments are facing at this time. It

must also expand to meet the variety of mental health needs magnified and brought on by the pandemic" (p. 5). There is more emphasis in this policy on the need for the Canadian government to strengthen individual rights and address the mental health issues of different individuals than on maintaining social stability and harmony. China's approach is unique in focusing on social stability and harmony as the important goal.

The absence of identification of adolescents in China's mental health policies during the pandemic could be related to the focus on using COVID-19 mental health policies to address social stability and harmony. Social stability can be understood as a state of life structure and stability whose function is to protect people from further danger and help people keep in touch with social expectations (German & Latkin, 2012, p. 21). In China, "social stability" has become a vague, all-encompassing concept that advocates for a "people-centered" and "service-oriented" government that addresses "the legitimate and reasonable demands of the masses" (Lee & Zhang, 2013, p. 1483). Additionally, social stability is seen as the foundation of social harmony, and social harmony is the core of China's development. CPC Central Committee's Decision on Major Issues concerning the Construction of a Harmonious Socialist Society discusses social harmony as the key to realizing this government mission.

Social Harmony is the underlying nature of socialism with Chinese characteristics. It is an essential guarantee for the prosperity of the country, revitalization of the nation, and well-being of the people (The People's Daily, 2006).

Indeed, in China, the word "harmony" has become an appropriate name in recent years. It represents a clear discourse of rationalizing, maintaining, and strengthening stability and order by the state in response to the rapid economic, political, and socio-cultural changes brought about by national modernization and globalization (Wang et al., 2016, p. 300). The notion of social harmony as the core of China's development can be traced to 2004 when Hu Jintao proposed to build a

society of democracy, the rule of law, fairness, justice, integrity, friendship, vitality, stability, order, and harmony between man and nature. "Harmonious Society" embodies an effort to construct a culturalism and humanist national image by re-cherishing the core Chinese values embodied in the Confucian concept of "harmony" and transforming them into new rhetoric to "cope with and correct the increasingly unbalanced and unfair domestic environment" (Yu, 2008).

Thus, there were two major reasons why China is especially concerned about social stability/harmony. First, with the rapid development of China's economy, its GDP had increased almost five times, and it became the second-largest economy in the world (Wang et al., 2016, p. 305). However, China's wealth gap is also widening at an alarming rate. The Chinese government is eager to alleviate the contradictions and conflicts caused by inequality by introducing the discourse of social harmony to cope with and correct the increasingly unbalanced and unfair domestic situation. Since the second half of the 20th century, China has been a socialist country, and an essential feature of socialist ideology is the worship of collectivism (Li, 2001). Compared with individualistic culture, collectivist culture emphasizes social harmony, the priority of society over individuals, and the priority of collective interests over individual interests. Individual identity is based on group membership, and the group is responsible for the well-being of its members (Gong et al., 2021, p. 2). It means that collectivism requires every member of the collective to put the interests of the collective first and to safeguard the overall interests of the country as the highest embodiment of social morality. It can be argued that the spirit of collectivism underpins the expression and rationale of Chinese policymakers, and building a harmonious socialist society has always been a significant task and goal of the Chinese government.

It is not surprising then that during the COVID-19 pandemic, Chinese authorities seemed more concerned about key target groups that could spark "social unrest." Jovanović et al. (2012) stated

that "Social unrest seems to be likely in cases in which people are extremely dissatisfied with their situation and probably fear for their health, lives or livelihood" (p. 17). Recent studies have shown that the likelihood of social unrest events (i.e., riots or protests) increases by 21 percent in areas where pandemics occur (Science Node, February 15, 2021). For example, Wuhan native Yang Min's only daughter, from Wuhan, contracted the virus in a hospital on January 16, 2020. She died of COVID-19 on February 6, 2020. Yang started a sit-down protest outside a local government building to seek answers and accountability (Akihito, 2020). There is no doubt that when social unrest occurs, it will threaten the regular social order and life. Therefore, after the authorities realized the potential hazard of novel Coronavirus, they first focused on the groups most likely to cause social unrest and targeted psychological crisis intervention to mitigate the occurrence of social unrest.

As shown in Table 3, in policies developed and published between January 2020 and March 2020 (the early stages of the COVID-19 pandemic), the discourse about "promoting social stability" or "preventing extreme events" repeatedly appeared in the work goals of Chinese policymakers in formulating the psychological intervention policies for the emergency response to the pandemic. For example, Guidelines of psychological crisis intervention for coronavirus disease 2019-2020 was released on 27 January 2020. The basic principle of the policy is to integrate psychological crisis intervention into the overall deployment of pandemic prevention and control to reduce psychological harm caused by the pandemic and promote social stability (Bureau for Disease Control and Prevention, 2020).

As China's COVID-19 prevention and control situation improves, there has been a shift in language in the policy. In policies put in place from March 2020 to August 2020, the discourse about "eliminating discrimination" and "promoting social harmony" appeared in the work goals of

Chinese policies. For example, in the Work Plan on Psychological Counseling for COVID-19 Patients Undergoing Regular COVID-19 Prevention and Control released on 25 August 2020, the content emphasizes the importance of strengthening publicity and education, introducing harmonious neighborhood relationships, promoting the significance of the comprehensive physical and mental recovery of patients, guiding the public to understand the characteristics of COVID-19 correctly and reducing discrimination and exclusion of patients (Joint Prevention and Control Mechanism Integrated Group, 2020). Chinese policymakers have always taken social stability and harmony as the premise and goal rather than the mental health of special groups such as adolescents when formulating the principles of COVID-19 related psychological crisis intervention. As a result, while adolescents are at risk of developing anxiety or depression due to COVID-19, they are less likely to cause much social unrest at the public level. The private nature of adolescent psychological problems meant that Chinese adolescents were not considered a key prioritized group for support because, generally, their distress was less visible outside the family home. It can be said that policymakers have played down the mental health of Chinese adolescents during the pandemic, as they pose a lower risk to overall social stability and harmony.

Table 3 Chinese mental health policies which contain the discourse of “social stability” / "social harmony during the pandemic.

Title of policy	Quotes related to social stability/ Quotes related to social harmony	Keywords related to social stability/ social harmony
Guidelines of psychological crisis intervention for coronavirus disease 2019-2020(27 January 2020)	“Psychological crisis intervention should be included in the overall deployment of pandemic prevention and control, to reduce the psychological harm caused by the pandemic and promote social stability”.	promote social stability
Notice on the establishment of mental health hotline for Covid-19 pandemic situation 2020 (2 February 2020)	“Prevent and alleviate psychological distress caused by the pandemic, and prevent extreme events caused by psychological stress”.	prevent extreme events caused by psychological stress
Notice on strengthening treatment and management of patients with severe mental disorders during the Covid-19 outbreak 2020 (18 February 2020)	“Strengthen management and treatment of patients with severe mental disorders during the pandemic to reduce the risk of patients causing accidents”.	reduce the risk of patients causing accidents
Notice on scientific and precise prevention and control of COVID-19 in accordance with the law (25 February 2020)	“Strengthen publicity and guide the public to feel the positive trend of the pandemic, so as to further rally the hearts of the people, strengthen their confidence and stabilize them”.	stabilize people
Notice on strengthening mental health and social services in response to Covid-19 outbreak 2020 (5 March 2020)	To support and assist wuhan and other severely affected areas in Hubei province to reduce the psychological damage and social impact caused by the pandemic.	reduce the psychological damage and social impact.
Work plan of mental support during Covid-19 pandemic 2020 (18 March 2020)	To safeguard public mental health and promote social harmony and stability.	promote social stability and social harmony.

Title of policy	Quotes related to social stability/ Quotes related to social harmony	Keywords related to social stability/ social harmony
The Work Plan on Psychological Counseling for COVID-19 Patients Undergoing Regular COVID-19 Prevention and Control (25 August 2020)	To strengthen publicity and education, all regions will carry out scientific popularization of COVID-19 related knowledge through authoritative media in a form popular with the masses, introducing the significance of a united and harmonious neighborhood relationship in promoting the physical and mental recovery of patients.	reduce discrimination and marginalization.

7.6 Conclusion of chapter seven

Chapter seven uses critical discourse analysis to analyze ten emergency psychological crisis intervention policies issued by the Chinese government from January 2020 to August 2020 in response to COVID-19. The results showed that the discourse of "promote social stability and harmony" has been repeated many times within the goals of these ten mental health policies. As a collectivist country, the Chinese government's first consideration when making policies is maintaining social stability and harmony during the COVID-19 pandemic and prioritizing groups that pose a potential threat to social stability and harmony, such as COVID-19 patients and those with severe mental disorders. In contrast, the "key group" discourse does not include adolescents as a separate group. Instead, adolescents are subsumed as students or the general population. In the wake of the COVID-19 outbreak, the government lacks emergency psychological assistance for adolescents. Even their classification as a group of the general population means that the particularities of the adolescent population have been overlooked during the COVID-19 pandemic. Because it is not enough to include adolescents as students or the general population in mental health policies to respond to COVID-19. According to the United Nations's policy document (2020),

Adolescents and young people are an at-risk group in the present crisis, as most mental health conditions develop during this period of life. The main sources of distress included concerns about their family's health, school and university closures, loss of routine, and loss of social connection. The provision of mental health services must consist of specific actions tailored to this population (p. 13).

Therefore, the Chinese government needs to recognize the impact of COVID-19 on mental health in China and introduce policies to strengthen action and mental health support for adolescents during COVID-19 to help them effectively cope with the adverse impact on COVID-19 mental health. Adolescents require timely mental health support, particularly during the pandemic.

CHAPTER 8 DISCUSSION AND CONCLUSION

8.1 Introduction

In this study, systematic review and critical discourse analysis were utilized to analyze the impact of the COVID-19 pandemic measures on the mental health of Chinese adolescents. Chapter seven undertook a systematic review of ten relevant academic research projects and in-depth analysis to discover the main factors describing the impact of the COVID-19 pandemic on the mental health of Chinese adolescents. The results showed a significant increase in rates of depression and anxiety among Chinese adolescents during the COVID-19 pandemic. Lack of family support, excessive screen time, limited physical activity, and academic pressure were the four major risk factors in increasing Chinese adolescents' depression and anxiety. In chapter seven, discourse analysis was utilized to understand China's policies to support the mental health of Chinese citizens and, in particular, adolescents during the COVID-19 pandemic. These findings suggest that relevant government authorities largely ignored the mental health of Chinese youth during the COVID-19 pandemic in China. Therefore, this chapter will summarize the research results and discuss further relevant studies. Then, I will discuss what these findings might mean for researchers in the field, researchers in other areas, and the general public to summarize and propose implications for practice. Finally, I will describe the limitations of this study and make further recommendations for future studies.

8.2 The mental health status of Chinese adolescents during the pandemic.

The systematic review of ten studies, which included 34,142 Chinese adolescent participants, revealed a clear link between COVID-19 and mental health problems among Chinese adolescents. The findings indicated that COVID-19 had a significant negative impact on the mental health of Chinese adolescents because of the disruption to their pandemic lives and associated routines. In nine studies, depression and anxiety were the two most commonly measured outcomes. Rates of

depression were the highest they had ever been in these studies (Chen et al., 2021, Chi et al., 2021, Li et al., 2020, Qi et al., 2020, Zhou et al., 2020). While studies have explored different aspects of the impact of COVID-19 on the mental health of Chinese adolescents, the review results found that major risk factors for depression and anxiety among Chinese adolescents increased rapidly during the COVID-19 pandemic. The main reasons were lack of effective family support, internet addiction, limited physical activity, and high academic pressure.

Similarly, some studies from the West have also shown that COVID-19 has impacted adolescents' mental health. For example, Ellis et al. (2020) investigated 1054 Canadian adolescents to determine adolescents' psychological adjustment and stress in the early stages of the COVID-19 crisis. The results showed that COVID-19 stress was associated with loneliness and depression, especially for teens who spent more time on social media. In addition, more time with family and physical activities could help reduce loneliness and depression in adolescents during the pandemic. Fish et al. (2020) surveyed 159 adolescents in the United States to explore the impact of COVID-19 on adolescents' mental health. They found the same result: American adolescents had trouble staying mentally healthy due to being isolated by unsupportive or distracted working and possibly sick parents and losing self-identity due to a lack of face-to-face social engagement. It is fair to say that the COVID-19 pandemic has had some negative effects on adolescents' mental health worldwide and that adolescents need more social support during the pandemic.

By contrast, some studies from the West show that the mental health of some adolescents has improved during the COVID-19 pandemic. For example, a study in New Zealand found that 17.5% of participants with pre-existing mental health conditions (ages 18-75+) reported improving their mental health during the pandemic. The reason is that they prefer to work from home, spend more time with their families and enjoy a quieter, less polluted environment (Every-Palmer et al., 2020, p.

9). To understand the impact of the COVID-19 pandemic on the well-being of adolescents in the UK during school closures from May to July 2020, the Oxford University Schools Survey 2020 collected data from 19,000 children and adolescents aged 8 to 18. The results also showed that 35 percent of 13-year-olds surveyed felt happier during the lockdown. Talking to parents or caregivers and connecting with friends are the main ways these children and adolescents seek mental health support during lockdown (Mansfield, 2020, p. 5, p. 6). These studies indicate that adolescents with a good family atmosphere can effectively reduce the risk of mental health problems such as anxiety or depression due to COVID-19 lockdown.

However, they may also be indicative of an unsafe school environment. Some studies stated that the shift to virtual schools might also benefit some students -- especially those who had experienced peer bullying (Michael, 2021). These students are at greater risk for serious mental health challenges, even extending into adulthood. A Boston University research team found that searches for bullying and cyberbullying dropped about 30 to 40 percent in 2020, around the transition to distance learning. However, as face-to-face learning resumes in US schools, bullying trends are returning to pre-pandemic levels (Carrozza & Gianni., 2022). It is worth noting that bullying is not only happening in American schools but is a global problem. According to an OECD report(2015),

a quarter (26 percent) of New Zealand students surveyed had experienced at least one of the six bullying behaviors a few times a month or more. It was higher than the OECD average of one in five students (19 percent) experiencing any bullying a few times a month or more. (p. 24).

Therefore, for adolescents who have experienced bullying in school, switching to virtual schools may have benefited their mental health during the pandemic.

8.3 Explaining the mental health status of Chinese adolescents during the pandemic.

8.3.1 The lack of effective family support may be related to traditional Chinese parenting style.

This study suggests that lack of effective family support is one major risk factor for the rapid rise in depression and anxiety among Chinese adolescents during the COVID-19 pandemic. Under lockdown and stay-at-home measures, Chinese officials forced Chinese adolescents to stay at home and continue their studies via the internet. The conditions of confinement made the support of family members the only source of social support for adolescents. However, the results show that only 24.6% of surveyed Chinese adolescents reported high levels of social support (Qi et al., 2020, p. 517). Although parents and adolescents in China had more time and opportunity to communicate during the pandemic, adolescents felt less support from their families, given that parents were also trying to work from home.

One reason may be related to the traditional Chinese parenting style. Due to the influence of traditional Chinese culture and ideology, most Chinese parents tend to play the role of authority in the dynamics of their relationship with their children. "Tiger mother" has become a term with special meaning. It has been described as a strict parenting style in which parents are highly engaged to ensure their children's success. Specifically, tiger parents push their children to achieve at a high level academically or to succeed in high-status extracurricular activities like music or sports (Kim, 2013). While Chinese adolescents have had more time communicating with their parents during the pandemic, parents may pay more attention to adolescents' academic performance than their mental health. Western parenting is generally considered a more tolerant and flexible approach. It focuses on allowing children to express their feelings and opinions openly. Parents do not force their children to make decisions and teach them independence early (Azhar, 2021). Western adolescents have more freedom of choice and less study pressure than their Chinese

counterparts. Therefore, although Chinese parents think they have been as supportive and caring as possible to their children during the pandemic, this support may not be what their children need when experiencing emotional turmoil.

8.3.2 The relationship between lack of effective family support and excessive screen time.

This study also suggests that excessive screen time (such as no control of online games, overuse of social media, and entertainment) may contribute to depression and anxiety among Chinese adolescents during the COVID-19 pandemic. There is a relationship between lack of effective family support and excessive screen time. According to Davis's cognitive-behavioral model (2001), lack of social support can lead to over-reliance on the internet when seeking the same kind of help in the virtual world (p. 187). A study has also proved a direct negative correlation between family support and excessive screen time, and effective family support can prevent excessive screen time (Wang et al., 2020). Therefore, to address the problem of excessive screen time, it is essential to provide adequate social support to improve the resilience of adolescents, thereby reducing the symptoms of post-traumatic stress disorder and excessive screen time. For example, parents can provide help to adolescents through good communication skills. In communication, parents can try to play the role of a listener rather than a judge. When adolescents find their parents willing to listen, they also let down their psychological defense mechanisms and are eager to share more (Summers & LMFT, 2016).

8.3.3 Reducing high academic stress can potentially reduce mental health problems among Chinese adolescents.

Other significant findings of this review suggest that high academic stress is a major risk factor for increased rates of depression and anxiety among Chinese adolescents during the COVID-19 pandemic (Chen et al., 2020; Qi et al., 2020; Zhang et al., 2020; Zhou et al., 2020). The results were

similar to previous studies (Sun et al., 2012; Chen, 2017). An earlier survey showed that nearly 70% of Chinese adolescents think academic pressure is their most significant source of stress, especially in junior middle school to high school and high school to the college transition stage. Because the two-phase mark the transition of two important exams that directly determines whether they can enter a good high school and university (WENR, 2019). As a Chinese saying goes, "Knowledge changes destiny." The high academic pressure on Chinese adolescents is more influenced by the external environment, such as traditional Confucianism, social atmosphere, and policies. A study on families with only one child in China confirmed that 77% of respondents said repaying their parents motivated them to learn.

In contrast, only 33% of respondents chose "cognitive needs" as their motivation for learning (Chen, 2012). Adolescents with immature physical and mental development have difficulty adapting to online learning at home after leaving the traditional campus environment. Academic anxiety and depression have increased during the pandemic. There is no doubt that it is urgent to reduce the study pressure on adolescents, which requires the cooperation of China's education authorities, schools, teachers, and families.

To some extent, implementing the double reduction policy is the beginning of helping Chinese students reduce academic pressure. Still, it is challenging to break the traditional education system formed over decades. Therefore, support from school teachers and families is also crucial for Chinese youth to alleviate anxiety and depression caused by school stress during the COVID-19 pandemic. For example, schools should be equipped with more professional psychological teachers, start relevant mental health courses, and other ways to help adolescents with timely psychological counseling. Parents need to be encouraged to create a family environment with realistic expectations instead of focusing only on their children's academic performance. It is necessary to

relieve adolescents' depression and anxiety by reducing academic stress. We should know that the purpose of education is not to cultivate learning machines but to realize the overall development of people through education.

8.4 Other important factors for Chinese adolescent mental health status during the COVID-19 pandemic.

8.4.1 Does geography matter?

Other than the four major risk factors mentioned above, other factors may have indirectly influenced the mental health of Chinese adolescents during the COVID-19 pandemic. First, anxiety and depression rates among Chinese adolescents vary by region. This finding is supported by the research of Chen and his team (2021) indicated that adolescents in Wuhan have anxiety levels much higher than those in other parts of China. At the same time, depressive symptoms are significantly lower than children in other cities (p. 6). The results were similar to Jiao et al. (2020), that “fear, anxiety, and other emotions were higher in children living in high-incidence areas” (p. 265). The reason may be that adolescents in high-risk areas are more worried about infection or death, social isolation, and regional discrimination than adolescents in other areas and are more prone to anxiety. Besides, Chinese adolescents living in rural areas were more likely to experience depression and anxiety during the COVID-19 pandemic than those living in urban areas. This result is supported by Zhou et al. (2020) and Qi et al. (2020), whose findings suggest that this is closely related to the poorer economic conditions in rural areas (p. 755; p. 516). The result echoes previous research before the Covid 19 pandemic showing that mood disorders are almost twice as common among the poor as among the rich in some countries (Slobodskaya & Semenova, 2016). In particular, the sudden outbreak of COVID-19 has disrupted the original pace of global economic development. Unemployment is rising rapidly. Some families in poor areas may lose their family income, and adolescents may find it more difficult to maintain their education or even risk dropping out of

school. In addition, there are few trained psychotherapists and counselors in China, and almost none in rural areas (Hesketh & Ding, 2005). Rural adolescents find it difficult to seek professional help when anxious or depressed. Therefore, the Chinese government and education departments should strengthen timely psychological service and counseling for adolescents in high-risk and poor areas and provide appropriate financial support and professional psychological therapists to relevant schools.

8.4.2 The effects of cultural values on mental health among adolescents

Finally, cultural values may have a subtle influence on adolescents' mental health. An individualistic culture emphasizes the expression and satisfaction of individual needs rather than the conformity to public norms. Personal independence and freedom are essential (Oyserman & Lee, 2007).

Therefore, counseling is considered an acceptable form of therapy for minor and major problems in individualistic cultures. In western cultures, asking for help from outside is often better than asking for help from family members (Morris, 2011, p. 105). By contrast, for Chinese adolescents living in a collectivist culture, the distress of Chinese adolescents was not visible outside the family home. In traditional Asian families, parents set rules and expect their children to comply with their demands. There is a belief that it is essential to be filial or respectful to parents and elders. In traditional Asian families, strong willpower is considered a virtue, and individuals should show inner endurance and the strength to withstand a crisis (Carteret, 2010). Asians may be reluctant to acknowledge strong emotions, sadness, or pain in healthcare settings because of their family and cultural values (Carteret, 2010). Therefore, in a collectivist culture centered on the family, members are close-knit. If individuals have a mental health problem, they tend to turn to family members or elders for advice and support rather than professional psychological services (McCarthy, 2005). Because a person does not want to disgrace their family and wants to show a high degree of emotional control, they are less likely to seek professional counseling (Morris, 2011, p. 106). Therefore, adverse

mental health problems may go unnoticed in Chinese society. For adolescents who do not receive effective family support and do not actively seek professional psychological counseling during the COVID-19 pandemic, their mental health condition could worsen.

8.5 Recommendations for adolescents, parents, schools/teachers, and the government.

Overall, the evidence reveals that the impact of the COVID-19 pandemic measures by society to slow the spread of the virus has had a detrimental effect on the mental health of Chinese adolescents. Therefore, it is necessary to provide suggestions to support the reduction of mental health problems among Chinese adolescents during the COVID-19 pandemic.

8.5.1 Adolescents

The COVID-19 virus has affected people throughout the world in every aspect of their lives, including their mental health. It is common for adolescents to have negative emotions such as anxiety and depression (UNICEF, 2020). Experts suggest that in the face of negative emotions, adolescents should first calmly face emotional changes, accept the emergence of negative emotions, and recognize that anxiety is completely normal (UNICEF, 2020). Because adolescents only positively understand and take the existence of negative emotions to regulate emotions better. Secondly, physical exercise to keep the body in good shape is essential during a pandemic or regular times. In China, many places suitable for exercise have been closed to prevent the spread of the virus. Adolescents need to be encouraged to do some physical activities at home to keep their bodies healthy: for example, mat push-ups, sit-ups, planks, aerobics, etc. Proper exercise can eliminate fatigue and help improve sleep quality, resulting in a positive mental state. Thirdly, positive talk with parents and friends is essential to eliminate tension, anxiety, depression, and other negative emotions. For instance, adolescents have more time communicating face-to-face with their parents during home isolation. Fourthly, they can also share with their classmates and keep in touch

with their relatives and friends through telephone, SMS, WeChat, and other online communication platforms. Mutual encouragement and support can reduce loneliness and enhance confidence and friendship in overcoming the pandemic.

Furthermore, there is evidence that children and adolescents who can better maintain regular daily rhythms are less likely to suffer from depression during home isolation (Ren et al., 2020).

Therefore, adolescents must keep a reasonable schedule and a good balance between study and social life during home isolation. For example, adolescents can make an effective family study and life checklist and plan to implement it to reduce destructive behaviors such as staying up late and being addicted to the internet. In general, adolescents should keep a positive mental state during home isolation and seek help from parents, teachers, and professionals if negative emotions cannot be resolved by themselves.

8.5.2 Parents

There is no doubt that adequate family support is critical in supporting positive mental health for adolescents, particularly during the COVID-19 pandemic. Therefore, parents can model and maintain emotional stability and not be too anxious and nervous. Creating a safe and harmonious family atmosphere to ensure children's inner sense of security is helpful (Lee, 2020). Secondly, parents should maintain reasonable behavior guidelines and good habits and set a good example for their children. For instance, parents and children work together to develop family calendars and routines, such as mealtimes, bedtimes, and school and work times, consistently maintained. Family calendars can help family members keep an average pace of life to sustain energy and a good mental state. Thirdly, home quarantine means parents and children can spend more time together. Parents, while paying attention to their children's achievements, should also actively communicate with them (UNICEF, 2020), such as reading books, exercising, and doing housework together, to

disperse the negative psychological effects of the pandemic. For adolescents with abnormal emotional performance such as irritability, anxiety, and fear, parents can hug, accompany and care for them by enhancing the parent-child relationship to rebuild the sense of security. Overall, parents should provide as much support as possible to their children during the pandemic to help adolescents mitigate the negative psychological effects of COVID-19.

8.5.3 Schools/teachers

With the pandemic outbreak, traditional school education has been interrupted. Still, to effectively control the psychological crisis events of students, school leaders and teachers are important people who can help provide mental health education during the pandemic. First of all, listen to adolescents' concerns. The COVID-19 and school closures have affected the mental health of many adolescents. Therefore, as a teacher, it is necessary to listen to your students' concerns, show understanding and empathy, and provide timely help to adolescents who need mental health support during school closures (UNICEF, 2021). Secondly, the school should popularize the relevant knowledge of psychological protection and provide children with accurate information about COVID-19 (UNICEF, 2021). For example, schools should popularize psychological protection knowledge and precise details on COVID-19 through school official accounts, WeChat groups for parents, and online parent meetings, and strengthen psychological counseling for teachers, students, and other groups. Thirdly, schools should support psychological aid services, such as using new media platforms, psychological assistance public welfare hotlines, and online consulting services to provide psychological counseling services for parents and adolescents in urgent need of psychological support.

Furthermore, teachers should strengthen coordination and cooperation with parents. For example, teachers can regularly organize online parent meetings, telephone, network, and other ways to fully

understand the students' psychological, physical, emotional, and other aspects. Particular attention should be paid to high-risk groups such as primary and secondary school students in high-risk areas, a family of COVID-19 patients, patients with various psychological diagnoses, and students with a poor or distant parent-child relationship. School leaders and teachers should pay attention to signs of students' mental health changes, with less focus on students' academic performance.

8.5.4 Government

In addition to the efforts of parents, school leaders, and teachers, governments also have an indispensable role to play in promoting adolescent mental health. Unfortunately, although the Chinese government has made many efforts to improve public mental health, there are no national guidelines for interventions in response to major public health crises affecting adolescents' mental health and well-being since COVID-19. Therefore, it is time for the Chinese government to develop effective policies or national guidelines to invest in adolescents. It can achieve by addressing the inconsistencies in providing mental health support with highly trained professionals within the school context. It is essential in poor rural schools to provide effective psychological support for adolescents where there is currently limited personnel to provide mental health support.

Furthermore, government departments need to ensure that all adolescents know where and how to find psychological support and that psychological services are confidential and openly available. Strengthening the media messages, news, and school communications to parents and using publicity platforms to promote critical messages regarding how individuals and families can create safe environments that support positive mental health outcomes for adolescents would be critical. It is essential as the pandemic continues to impact and create psychological damage and negative social impacts.

8.6 Limitations and contributions of this study

This study used a systematic review of the existing literature and critical discourse analysis of policy to explore the impact of the COVID-19 pandemic on the mental health of Chinese adolescents. There are some limitations of this current study. First of all, due to the strict selection criteria, short data collection time, and the restricted use of electronic databases in the research, it is possible to omit relevant, valuable research. Most of the studies selected were cross-sectional, meaning that most of the studies capture the psychological changes of adolescents at a particular point in time. It is noted in the scientific literature that the COVID-19 virus has a long-term impact on some people's health, and this, in turn, will impact adolescents' mental health. However, there are few longitudinal studies on the long-term effects of COVID-19 on the mental health of Chinese adolescents, which means relevant longitudinal studies were not included. In addition, due to a severe outbreak of the virus in Shanghai, China, everyone was forced to stay at home. It required secondary data analysis and no ability to collect primary data during this period.

There is no doubt that this research contribution is valuable as it provides up-to-date information on this phenomenon for both a Chinese and western English-speaking audience. Although many Chinese researchers have noted the impact of COVID-19 on the mental health of Chinese adolescents, there has been no systematic review of this topic. This study fills in research gaps in this area and provides some targeted recommendations to support Chinese adolescents coping with the adverse mental health effects of the COVID-19 pandemic. Furthermore, there is little critical analysis of mental health policies in Chinese academic literature. This study uses critical discourse analysis to analyze the mental health policies of the Chinese government and their impact during the pandemic. This study provides a unique perspective from a Chinese researcher living in China and writing in English for both Chinese and Western audiences. This study undoubtedly fills this gap and provides a platform for future research, including fieldwork.

8.7 Implications for further studies

Most current studies use cross-sectional designs, which do not provide strong evidence of causality. Therefore, one recommendation is that future studies should adopt a longitudinal design. Most studies have focused on depression and anxiety, and few have explored other crucial mental health issues such as fear, mania, personality disorders, etc. Thus, further research should examine other variables associated with COVID-19 that influence adolescents' mental health. There is considerable scope to investigate the phenomenon through case studies and interviews, which move beyond the current quantitative methodologies and surveys being used.

8.8 Conclusion

In conclusion, the research reveals that anxiety and depression among Chinese adolescents rose sharply during the COVID-19 pandemic. The four main risk factors for increased depression and anxiety among Chinese adolescents are lack of family support, internet addiction, limited physical activity, and academic pressure. Therefore, parents, schools, and teachers should provide timely and effective support for adolescents to recognize these four risk factors. In addition, attention should be paid to the changes in the psychological status of adolescents during the pandemic to help them overcome the negative mental health effects. Furthermore, these findings suggest that governments should pay more specific attention to adolescents' mental health as they develop strategies for dealing with the negative impacts of the COVID-19 virus. Fortunately, the Chinese government has provided some psychological health services, including hotlines, online consulting, and news propaganda. Still, more attention should be paid to the adolescent group in the future. China now faces the third year of the COVID-19 pandemic. Despite the development of effective vaccines, strains are still mutating, and the world is still suffering from the novel coronavirus pandemic. In some hard-hit areas of China, adolescents are being forced to suspend school education and turn to online education to slow the spread of the virus in schools. Changes in learning styles, fear of the

virus, and other factors can negatively impact adolescents' state of mind. Overall, the COVID-19 pandemic has taught us many valuable lessons, and now is the time to pay attention to the mental health of China's adolescents to safeguard them for their futures.

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