

RESEARCH ARTICLE

Exploring Mental Health in Ideological and Political Education System during COVID-19 lockdown: Moderating Effect of Ambivalent Sexism and Unconscious Bias

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ABSTRACT

Recently, the COVID-19 lockdown has created many issues for the world's mental health that need a foremost solution and researchers' attention. Thus, the current article analyzes the impact of COVID-19 anxiety on the mental health of Jordan's ideological and political education system. The article also investigates the moderating role of ambivalent sexism and unconscious bias among COVID-19 anxiety and mental health in Jordan's ideological and political education system. The article has applied questionnaires, the primary data collection method, to collect the data from chosen respondents. The data was collected from a population of 5346 college and university students enrolled in Jordan under political and ideological education programs. A sample size of 356 was finally obtained for this research via a self-reported survey. The article has also applied the SPSS-AMOS to check the items and variables' reliability and validity and investigated the association among understudy variables. The results revealed that COVID-19 anxiety has a negative and significant linkage with the mental health of Jordan's ideological and political education system. The findings also revealed that ambivalent sexism and unconscious bias significantly moderated the relationship between COVID-19 anxiety and mental health in Jordan's ideological and political education system. The study is unique in addressing this sensitive issue in the cultural environment of GCC countries. Specifically, studies on such topics are very rare in a setting like Jordan. This study provides guidelines to the policy-establishing authorities on developing policies to improve students' mental health by eliminating COVID-19 anxiety.

INTRODUCTION

The COVID-19 pandemic's rapid spread has harmed the socioeconomic and political structures of the world. Governments originally made the difficult choice to impose lockdowns, which strangely disrupted people's mobility, to control the spread of COVID-19. Scholars and critics have drawn attention to the negative aspects of COVID-19 in every sphere of life, including the education system. However, some scholars pitched the shift toward online education as a positive agenda. This research will focus only on the impact of the pandemic on schools, colleges, and education systems. To remain focused, the study will ignore the negative aspects of the pandemic in other areas of life. The student's activities were also restricted by such confinement measures, which impacted their education and ultimately led to emotional, cognitive, and behavioral traumas (Leguizamo et al., 2021). Everybody's routines have been affected by COVID-19, whether they be in businesses, schools, or national economies (Gautam and Sharma, 2020). In order to draw a line of differentiation between work-life balance and the emerging phenomenon of flexible working (i.e., working from home) became a challenging challenge (Ramarajan and Reid, 2013). Such a transformation led to overwork and fatigue, which caused managers all over the world to experience unjustified delays in their official tasks. These results are also consistent with research on SARS, equine influenza, Ebola, and other diseases (Read, 2004), which showed that in Jordan and Italy, individuals had mental health issues as a result of altered routines and lifestyles brought on by the COVID-19 pandemic (Mazza et al., 2020). Even still, research on the negative impacts of COVID-19 on people's regular work and personal lives is still in its infancy and needs further exploration to produce effective corrective measures. As explained, industries were halted due to COVID-19-bound travel limitations, impeding their regular operations and advancement. The education sector (particularly the students) was one of those most impacted at the same time since it depended on the students who moved from different locations, which was severely limited as a result of the COVID pandemic (Ma et al., 2021). Mental health is a ubiquitous topic in education and psychology literature. Mental health is narrated as

"a state of well-being in which the individual realizes one's abilities, can cope with the normal stress of life, can work productively, and can make a contribution to one's community."

One of the more serious impacts of COVID-19 is thought to be a change in students' study schedules and patterns. Because of the different education methods and timing and the application of strict quarantine protocols, students faced decreased motivation (Tingaz et al., 2021). Because of the considerations mentioned earlier, a decreased level of motivation might have a detrimental impact on a student's performance. As a result, there is an expected connection between this lack of desire and the student's overall performance. COVID-19 is designated as the primary stressor in specific circumstances, and each person reacts to such stresses differently depending on their psychological capabilities. COVID-19, however, has been a distressing experience for the majority of individuals throughout the world (Akhtar, 2017), and it can disrupt people's lives across all professions. In contrast, the negative effects of COVID-19 might be many and still require more research to be fully understood (Ma et al., 2021). Since the present study aims to investigate COVID-19 anxiety's impact on student's performance in Jordan, it is equally important to explore the significant contribution of the education industry to economic and social development.

Ambivalent sexism is a social-psychological term for negative and positive feelings about women (Glick and Fiske, 1996). Researchers (Viki and Abrams, 2003) have found that women who experience more ambivalent sexism report more stress, anxiety, and depression. It is thought that these bad effects on women's mental health come from the complicated interaction between hostile and friendly attitudes toward women, making them feel valued and devalued (Viki and Abrams, 2003). Greenwald and Banaji (1995) define unconscious bias as the automatic activation of stereotypes or attitudes toward members of certain social groups. This can happen without the person being aware of or able to stop it. Researchers (Burgess et al., 2018) have found that unconscious bias can negatively affect mental health, such as making anxiety and depression worse. (Burgess

et al., 2018) think these negative effects come from internalizing negative stereotypes and attitudes about oneself or one's social group, which leads to feelings of worthlessness and insecurity.

The COVID-19 pandemic has made workers across all sectors more anxious psychologically. It is also important to remember that the COVID-19 pandemic is unprecedented in terms of the actions taken by nations and governments worldwide. As a result, there aren't many historical examples to draw conclusions about how this restriction will impact people in general, particularly students (Leguizamo et al., 2021). In the current environment, there are a few more causes for social anxiety, including the financial crisis, rising costs, pandemic-related worry, and media coverage. Similar to how social anxiety is a byproduct of the COVID pandemic and affects someone's mental health. By raising enough awareness of the harshness of COVID and the countermeasures available, mindfulness can aid in reducing the social anxiety brought on by COVID-19-bound travel limitations (Mazza et al., 2020). Greater awareness of the COVID pandemic will undoubtedly assist familiar individuals, especially students, to counteract its detrimental effects, assisting in controlling mental health issues. The current study aims to investigate how psychological distress and mindfulness impact students' mental health. The report also addressed a few issues, including how COVID-19's extraordinary lockdowns have affected mental health ([35], 2021).

Jordan's educational system has undergone significant changes due to politico-economic factors over the years. Like its economy, the higher education sector in Jordan has grown rapidly in the past two decades (Ma et al., 2021). The number of students attending higher education institutions in Jordan has been increasing steadily, with over 320,000 students enrolled in 2020. Similarly, the number of universities in the country has increased from 10 in 2000 to 32 by the end of 2020 (Mazza et al., 2020). However, despite these developments, there remain disparities in access and educational outcomes between urban and rural areas and between wealthy and low-income households. The COVID pandemic has further exposed these inequalities, particularly in terms of access to technology and internet connectivity (Ma et al.,

2021). Before the pandemic, only 46% of households in Jordan had internet access, which is even lower in rural areas. The pandemic has underscored the need to address these inequities and ensure that all Jordanians have access to quality education regardless of their socioeconomic background or geographic location (Mazza et al., 2020).

The social psychological theory says that attitudes and stereotypes about women are shaped by cultural and personal factors. Glick and Fiske (1996) say that ambivalent sexism is a complex interaction between these factors. Ambivalent sexism is characterized by hostile attitudes towards women as competitors and threats and benevolent attitudes towards women as objects of adoration and protection (Glick et al., 2000). This ambivalence creates a situation in which women may be simultaneously valued and devalued, negatively affecting their self-esteem and mental health (Viki and Abrams, 2003).

Researchers have found that ambivalent sexism can hurt women's experiences and outcomes in various areas (Viki and Abrams, 2003). For example, women who experience more ambivalent sexism say they feel more stress, anxiety, and depression. Moreover, ambivalent sexism can negatively affect women's job performance and career advancement, as well as their relationships with romantic partners (Glick et al., 2000). Top of Form Bottom of the Form.

The present study will address some gaps, like 1) COVID-19 has affected almost every aspect of society but has especially affected people's mental health. Although one of the most important topics, such as mental health, has been researched, it has not yet reached its pinnacle because many of its aspects remain unexplored. 2) Ma et al. (2021) worked on the effect of COVID-19 on the education and mental health of the Jordanian people, whereas the present study will also work on COVID-19 but with the addition of moderation effects from the Jordanian perspective and the fresh data set. 3) The model consisting of COVID-19 anxiety, ambivalent sexism, unconscious bias, and mental health has not been tested before from the Jordanian perspective with a fresh data set in recent times. 4) Liang et al. (2020) worked on the mental screening of Jordanian health staff due to COVID-19, whereas the present study will work on COVID-19 anxiety on the Jordanian student's

mental health along with the dual moderation effect of ambivalent sexism and unconscious bias by selecting the fresh data set. 5) Wang et al. (2020) worked on adolescent mental health in Jordan, whereas the present study will work on COVID-19 anxiety and mental health in Jordan. 6) Liu et al. (2020) checked the online mental health in Jordan due to COVID-19, whereas the present study will check the effect of COVID anxiety on Jordanian students' mental health. The significance of the present study is that: 1) mental health is the key to a healthy life and has become one of the core issues of not only the developing but also the developed world; therefore, the present study will highlight this issue, particularly in Jordanian university students; 2) the present study will also provide help to professionals in upgrading their policies to uplift the student's mental health in Jordan, which has been affected due to COVID; 3) Although several COVID pandemic effects have been unearthed till now, much remains hidden; thus, the present study will also provide support for future scholars to examine and explore new aspects of COVID effects. Structurally, in the first section, the overall introduction of the study, including the study gap and significance, will be presented. The second phase will present evidence about COVID-19 anxiety, ambivalent sexism, unconscious bias, and mental health in connection with past studies. The third section of the study will provide the methodology, i.e., data collection about COVID-19 anxiety, ambivalent sexism, unconscious bias, and mental health. After that, the validity of the data will be analyzed. The results received after data analysis will be presented in the fourth section. Finally, the study's conclusion, implications, and recommendations will be presented.

LITERATURE REVIEW

Theoretical background

Behaviorism and psychodynamic theory are two of psychology's most influential and widely studied theories. Both theories provide different perspectives on the nature of human behavior, personality, and mental health. This review will compare and contrast the key tenets of behaviorism and psychodynamic theory and their similarities and differences.

Behaviorism theory emerged in the early 20th century and focused on studying observable behavior

(Watson, 1913). Behaviorists believe behavior is learned through conditioning and reinforcement and that external factors play a key role in shaping behavior. According to behaviorism, behavior is a product of the environment, and individuals can be trained to learn new behaviors through positive and negative reinforcement.

Psychodynamic theory was made by Sigmund Freud in 1915. It was first used in the early 1900s. The psychodynamic theory focuses on how thoughts and feelings that aren't conscious can shape behavior and personality. Freud thought that a person has three parts: the id, the ego, and the superego. He also believed that early childhood experiences play a key role in shaping personality and behavior and that unresolved conflicts from childhood can lead to psychological distress and mental illness.

COVID-19 has surpassed all other factors as the main cause of concern for people worldwide. Government restrictions on social gatherings were necessary owing to the unprecedented spread of disease (Fadus et al., 2020). This decreased people's opportunities to have fun and, as a result, increased psychological distress and mental health problems (Borgogna & Aita, 2020). The link between reported heart rate rises and psychological stress. All factors that can upset the psychological equilibrium and harm mental health must be controlled. At the same time, psychological anxiety is seen to typically rise in persons under stressful situations (Fadus et al., 2020). Psychological anxiety that contributes to mental health is typically brought on by a stressful atmosphere and people's anxieties in their thoughts. Additionally, it investigated the phenomena and evaluated the causes of psychological distress, cognitive impairments, and mental health issues (van Rijsbergen et al., 2019). Internal emotions and ideas that are connected to anxiety harm several bodily organs. People's ideas and feelings are significantly impacted by COVID-19, which might result in unstable mental health. The uncertainty grew along with the strained atmosphere brought on by COVID-19 and shook people's lives (Borgogna and Aita, 2020). People's emotions and sentiments are disrupted by rising psychological anxiety, which worsens mental health problems. The link between psychological discomfort and anxiety sensitivity is

also noteworthy since both are hypertensive factors exacerbating mental health problems (Ugwu et al., 2021). Certain illnesses in people's brains and bodies are brought on by the rise in mental health problems. COVID-19 has an impact on people's bodies around the entire world. Students were no different from other members of society in that they had to follow demanding routines that were already stressful due to performance requirements. Serious anxiety problems were linked to people worldwide, including Jordan, and were detrimental to mental health. The detrimental effects on mental health that are unjustifiably disproportionate and exposed due to psychological worry are also listed (Zhai and Du, 2020).

People who are entirely aware of the issue and capable of dealing with it are deemed vital during the disaster. Some people have the human aptitude to operate in any setting and live long lives. Exercise helps patients recover and enhance their awareness, which helps them cope with COVID anxiety (Borgogna and Aita, 2020; Araújo et al., 2022). The ailments had a connection to incorrect worries and thoughts that had an effect on one's physical and mental well-being. Globally, individuals felt uneasy and were unable to meet their immediate family members during COVID-19. The mental health of individuals has been damaged by this restriction on social distance and movement.

Additionally, BinDhim et al. (2021) worked on the depressing tendencies in mental health that have been seen in the population during COVID-19 due to increased psychological anxiety. A balanced education system also positively impacts mental health, in addition to organizations and social networks. Therefore, psychological concern among people rose, resulting in unstable mental health due to trying to prevent the indecent effects of COVID-19. Even though fever was also reported by individuals with significant psychological worry, they felt weak and exhausted (Borgogna and Aita, 2020). The high psychological anxiety, worriedness, and rising blood pressure directly impacted mental health. The primary cause of people's damaged mental health was their growing, erratic emotions and thoughts. It was also thought that COVID-19's growing effects were causing people to become psychologically anxious.

Even though COVID-19 travel limitations greatly impacted people's mental health, (Sadeghi et al., 2021) proposed the inverse link between psychological discomfort, anxiety, depression, and psychological anxiety. The psychological aspects of worry grew when individuals were prevented from relocating to other nations. The social and emotional well-being of people was affected by this rise. Psychology is typically linked to actions and feelings that have a beneficial influence on people's development. Travel limitations brought on by the unfortunate incidence and dissemination of COVID-19 were the major factor contributing to the rise in mental health problems. Thus, the hypothesis derived from the above debate is as follows:

H1: Covid anxiety significantly influences mental health.

There are two types of sexist beliefs: hostile and friendly. There is less focus on the elements related to mental health, despite the fact that several studies have shown interpersonal issues linked to both types of sexist ideas. According to beliefs about the strain on gender roles, psychological disorder is linked to strict adherence to conventional gender norms (Fadus et al., 2020). Following this logic, sexist attitudes should be connected to mental health issues. However, there is still little evidence to support this particular link between sexist ideas and mental illness. Borgogna and Aita (2020) checked the association between ambivalent sexism and mental health in this context. The data sample of 2 years, from 2017 to 2019, was collected and tested. The study's results proposed that male and female sadness, anxiety, and stress are significantly predicted by hostile sexism. At the bivariate level, benevolent sexism was significantly positively related to stress and anxiety in males and anxiety symptoms in women; however, these associations vanished when hostile sexist attitudes were considered. Analyses of structural invariance were unable to detect any gender-related moderating effects.

Similarly, Gil Bermejo et al. (2021) also explored the effect of ambivalent sexism on women's healthcare. The study was conducted in Spain. The data set of 400 young people who fall in the age bracket of 14 to 16 years was collected and tested. The study's results proposed that sexism starts to

manifest itself throughout adolescence in the southern Spanish group studied. Through social networks like Instagram and Snapchat, a digital gender gap was encouraged by this. As mentioned earlier, there was evident rising sensitivity to and criticism of the discrimination on the side of women, especially those from metropolitan backgrounds.

Moreover, Cutroni and Anderson (2020) investigated the moderating role of ambivalent sexism. The study was conducted in The data set of 220 individuals was collected and tested. The study's results proposed that across a range of male and female jury and defendant gender combinations, hostile and benign sexism affected various sentence result factors, indicating that these types of sexism are important in causing forensic gender biases. This study adds to the literature about male victims of intimate relationship abuse committed by women being consistently treated unfairly in legal proceedings.

Similarly, Acar and Sümer (2018) also investigated the moderating role of ambivalent sexism in the relationship between gender differences and leadership. The study was conducted in Canada. A sample of 378 students' data was collected and tested. The study's results proposed that the Glass Cliff was accessible only through the hostile sexism dimension. The choice of leadership was unexpectedly impacted by benevolent sexism. It addresses how the two forms of sexism differ and how each kind affects the desire for male and female leadership (Borgogna and Aita, 2020). Evaluations for leadership roles are influenced by the perceived leader's gender and sexist sentiments. Thus, the hypothesis derived from the above debate is as follows:

H2: Ambivalent sexism significantly moderates the relationship between COVID-19 anxiety and mental health.

The effects of COVID have not completely ended yet, so discussing mental health is a delicate subject. Finding the best type of therapy may greatly influence the stability and quality of life of people with mental health illnesses, including depression, anxiety, schizophrenia, and other conditions. Unconscious biases are social stereotypes about certain groups of people that individuals form outside their conscious awareness (Borgogna and Aita, 2020). Everyone holds unconscious beliefs about various social and

identity groups, and these biases stem from one's tendency to organize social worlds by categorizing. The unconscious bias strongly influences mental health, either positively or negatively. In this context, Marcelin et al. (2019) worked on unconscious bias in the healthcare system. The study was conducted in the USA by healthcare professionals. The study's results proposed that patients treated by healthcare professionals represent the growing diversity of the US population. Unfortunately, healthcare workers' demographics don't often reflect this variety. Unintentional cognitive biases stemming from cultural preconceptions can negatively impact patients from underrepresented groups in the US and contribute to ongoing health disparities.

Healthcare workers may experience unconscious prejudice in various ways, including in recruiting and promotion decisions as well as in their inter-professional encounters. Diagnostic diagnosis of mental problems in children and adolescents is partly based on clinicians' subjective interpretations of the material. To provide an accurate diagnosis, clinicians must analyze and contextualize information acquired from family, careers, and educators. On the other hand, environmental and sociocultural factors can make diagnosing psychiatric diseases difficult and understanding these impacts should be a focus in academic psychiatry. Accordingly, Fadus et al. (2020) also investigated the effect of unconscious bias on behavioral disorders. The study was conducted on African, American, and Hispanic youth. The study's results proposed an association between unconscious bias and mental health in terms of disruptive behavior disorder. The unconscious bias causes affects the student's mental health. In this context, George et al. (2019) explored the effect of unconscious bias on students' mental health. A sample of 77 nursing students was collected and analyzed. The study's results proposed that unconscious bias strongly affects the mental health of nursing students in the USA. The unconscious is caused due to anxiety, but many times, it influences mental health. Thus, the hypothesis derived from the above debate is as follows:

H3: Unconscious bias significantly moderates the relationship between COVID-19 anxiety and mental health.

The study has taken one independent construct such as COVID-19 anxiety (CAN), while the study has also applied two moderating variables named ambivalent sexism (AMS) and unconscious bias (UNB), and the study has used only one predictive variable, such as mental health (MH). The study has used two theories to develop the theoretical framework: behaviorism theory and psychodynamic theory. The behaviorism theory reveals that good behaviors and health are attained through conditioning, while conditioning occurs through environmental interaction. This

theory deals with the association between COVID-19 anxiety and mental health because students' mental health and behavior depend upon the environment affected by COVID-19. In addition, psychodynamic theory helps users understand their unconscious patterns of behavior. This theory deals with the unconscious bias and ambivalent sexism behavior of the students toward mental health. Hence, based on these theories, the researchers have developed the framework given in Figure 1.

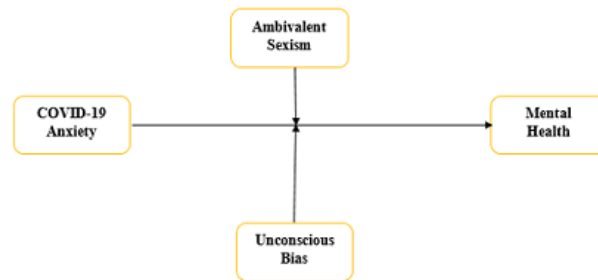


Figure 1: Theoretical model

RESEARCH METHODOLOGY

The article analyzes the impact of COVID-19 anxiety on the mental health of Jordan's ideological and political education system. Also, it investigates the moderating role of ambivalent sexism and unconscious bias among COVID-19 anxiety and mental health in the ideological and political education system there. The article has

applied questionnaires, the primary data collection method, to collect the data from chosen respondents. The items of the variables have been used to measure the variables in the study. Mental health has been taken as the dependent variable and measured with five items extracted from the article by Berwick et al. (1991). These items and statements are mentioned in Table 1.

Table 1: Measurement of mental health

Items	Questions	Sources
MH1	“Have you been a very nervous person?”	(Berwick et al., 1991)
MH2	“Have you felt calm and peaceful?”	
MH3	“Have you felt downhearted and blue?”	
MH4	“Have you been a happy person?”	
MH5	“Have you felt so down in the dumps that nothing could cheer you up?”	

Table 2: Measurement of COVID-19 anxiety

Items	Questions	Sources
CAN1	“I felt dizzy, lightheaded, or faint when I read or listened to news about the coronavirus.”	(Lee, 2020)
CAN2	“I had trouble falling or staying asleep because I was thinking about the coronavirus.”	
CAN3	“I felt paralyzed or frozen when I thought about or was exposed to information about the coronavirus.”	
CAN4	“I lost interest in eating when I thought about or was exposed to information about the coronavirus.”	
CAN5	“I felt nauseous or had stomach problems when I thought about or was exposed to information about the coronavirus.”	

In addition, COVID-19 anxiety has been taken as the independent variable and measured with five items extracted from the article by Lee (2020). These items and statements are mentioned in Table 2.

Moreover, unconscious bias has been taken as the moderating variable and measured with five items extracted from the article by Gonzalez et al. (2014). These items and statements are mentioned in Table 3.

Table 3: Measurement scale for unconscious bias

Items	Questions	Sources
UNB1	“Teachers treat all students equally, no matter their group.”	(Gonzalez et al., 2014)
UNB2	“The education system is fair and equitable and provides “blinded” care.”	
UNB3	“I have observed teachers who treat students differently based on race, ethnicity, or other similar factors.”	
UNB4	“I have observed tutors who treat students differently based on race, ethnicity, or other similar factors.”	
UNB5	I have personally observed managerial staff who treat students differently based on race, ethnicity, or other similar factors.”	

Finally, ambivalent sexism has been taken as the moderating variable and measured with twelve items

extracted from the article by Kuchynka et al. (2018). These items and statements are mentioned in Table 2.

Table 4: Measurement scale for ambivalent sexism

Items	Questions	Sources
AMS1	“How often have you been subjected to offensive comments?”	(Kuchynka et al., 2018)
AMS2	“How often have you been treated in an insulting manner?”	
AMS3	“How often have you been harassed or threatened.”	
AMS4	“How often have you been the target of obscene sexual comments or gestures?”	
AMS5	“How often have you been the target of insulting jokes?”	
AMS6	“How often have you been accused of using your gender to your advantage?”	
AMS7	“How often have you been treated angrily?”	
AMS8	“How often have you been treated as if you need more assistance than men?”	
AMS9	“How often have you been treated as if you are weaker than men?”	
AMS10	“How often have you been treated as needing a man’s help?”	
AMS11	“How often have you been treated as if others expected you to be sweet and friendly?”	
AMS12	“How often have you been treated as if you are more morally pure than men?”	

Students at government universities in Jordan were chosen for the study because of their ideas and political education. The researchers have chosen fifteen top-ranking government universities. According to the university databases, around 5342 students are enrolled in government universities' ideological and political disciplines. According to Morgan's sampling criteria, the study's sample size is 359. Thus, around 611 survey questionnaires were sent to the respondents via personal visits to the selected government universities. The survey was distributed to the ideological and political students using simple random sampling. After a few days, around 356 valid surveys were received that the researchers used for analysis. These valid surveys

have a 58.27 percent response rate. The article has also applied the SPSS-AMOS to check the items and variables' reliability and validity and investigated the association among understudy variables. This is a suitable statistical tool for primary data analysis. In addition, it can deal with large and small data sets equally (Hair et al., 2014). Moreover, it also can deal effectively with complex models. It analyzes the measurement model and structural model. While analyzing the measurement model, it checks the items and variables' reliability using Alpha, which should be more than 0.70 (Hair et al., 2014), using average variance extracted (AVE), which must be bigger than 0.50, using factor loadings, which must be higher than 0.40, using average shared

variance (ASV) as well as maximum shared variance (MSV), whose values must be lower than AVE (Hair et al., 2014), and using Fornell-Larcker, which must have a first value that is bigger than the rest of the figures in the same column (Hair et al., 2017); Finally, the Tucker-Lewis index (TLI), comparative fit index (CFI), and root mean square error of approximation (RMSEA) were used to examine the fitness of the model. The minimum threshold criteria for TLI and CFI should be larger than 0.90, while the minimum threshold criteria for RMSEA must be lower than 0.10 (Ringle et al., 2015). The standard values for TLI and CFI must be higher than 0.90, while the standard value for RMSEA should be less than 0.10 (Ringle et al., 2015).

In contrast, the structural model assessment includes checking relationships among variables. For the variables to be significant, t-values must be larger than 1.96, and probability figures must be less than 0.05

(Hair Jr et al., 2020). In addition, the positivity and negativity of the results depend on the beta values. If the beta values have a negative sign, there is a negative association among variables and vice versa.

RESULTS OF THE STUDY

The study has checked the correlation among items, called convergent validity. The convergent validity has been checked using Alpha, which should be more than 0.70, and the results show the same. In addition, it also checked using an AVE that must be bigger than 0.50, and the results show the same. Moreover, it also examined factor loadings that must be higher than 0.40, and the results show the same. Finally, it also investigated using ASV and MSV, and values must be lower than AVE, and results show the same. These values indicated valid convergent validity. These figures are mentioned in Table 5.

Table 5: Convergent validity

Constructs	Items	Loadings	CR	AVE	MSV	ASV
Unconscious Bias	UNB1	0.758	0.929	0.728	0.253	0.171
	UNB2	0.997				
	UNB3	0.964				
	UNB4	0.752				
	UNB5	0.759				
COVID-19 Anxiety	CAN1	0.994	0.897	0.650	0.389	0.413
	CAN2	0.891				
	CAN3	0.413				
	CAN4	0.783				
	CAN5	0.827				
Mental Health	MH1	0.859	0.953	0.836	0.374	0.412
	MH2	0.816				
	MH3	0.986				
	MH5	0.984				
Ambivalent Sexism	AMS1	0.857	0.873	0.752	0.253	0.150
	AMS2	0.434				
	AMS4	0.516				
	AMS5	0.463				
	AMS7	0.993				
	AMS8	0.982				
	AMS9	0.623				
	AMS10	0.608				
	AMS11	0.648				
	AMS12	0.629				

The study has also examined the correlation among variables, called discriminant validity, using Fornell-Larcker, which must have a first value bigger than the rest of the figures in the same column, and the

results show the same. These values indicated valid discriminant validity. These figures are given in Table 6.

Table 6: Discriminant validity

	MH	UNB	CAN	AMS
MH	0.764			
UNB	0.362	0.853		
CAN	1.004	0.360	0.646	
AMS	0.312	0.503	0.318	0.657

Finally, the TLI, CFI, and RMSEA were used to examine the model's fitness. The minimum threshold criteria for TLI and CFI should be larger than 0.90, while the minimum threshold criteria for RMSEA must be lower

than 0.10, and the results showed the same. The results indicated that the model is a good fit; these values are given in Table 7.

Table 7: Model Good Fitness

Selected Indices	Result	Acceptable level of fit
TLI	0.900	TLI > 0.90
CFI	0.911	CFI > 0.90
RMSEA	0.003	RMSEA < 0.05 good; 0.05 to 0.10 acceptable

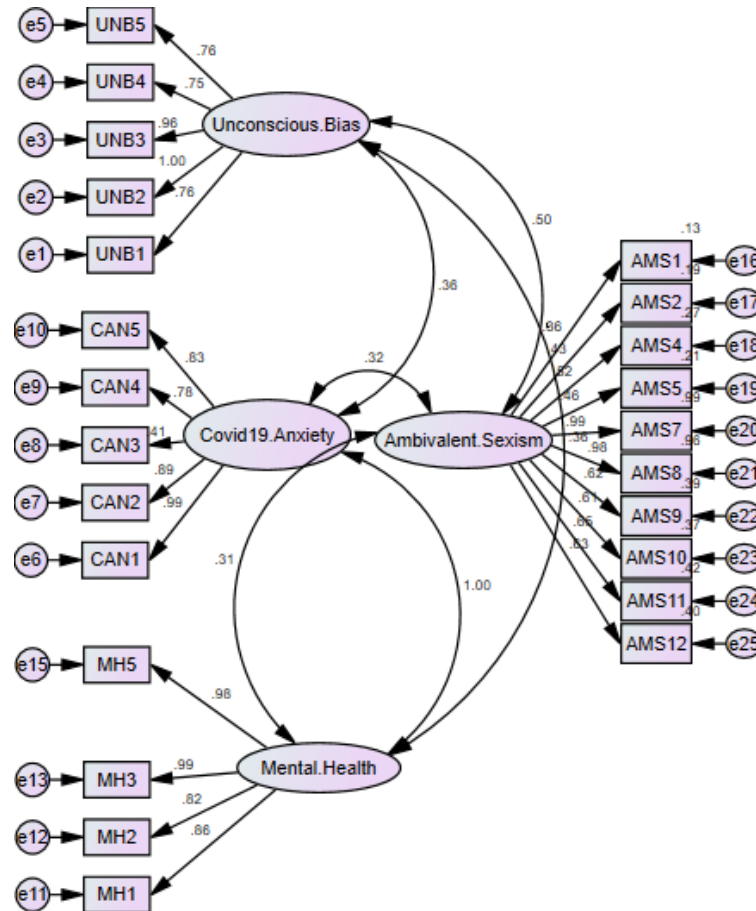


Figure 2: Measurement model assessment

The results revealed that COVID-19 anxiety has a negative and significant linkage with the mental health of Jordan's ideological and political education system and accepts H1. The findings also revealed that ambivalent sexism and unconscious bias significantly

moderated the relationship between COVID-19 anxiety and mental health in Jordan's ideological and political education system and accepted H2 and H3. These relationships are given in Table 8.

Table 8: Path analysis

Relationships	Std. Beta	Beta	S.E.	C.R.	P
Mental Health <--- COVID-19 Anxiety	-0.686	-0.574	0.022	-26.609	***
Mental Health <--- Unconscious Bias	-0.219	-0.168	0.020	-8.510	***
Mental Health <--- Ambivalent Sexism	-0.139	-0.143	0.027	-5.381	***
Mental Health <--- Interaction 2	0.298	0.038	0.003	11.558	***
Mental Health <--- Interaction 1	0.369	0.051	0.004	14.305	***

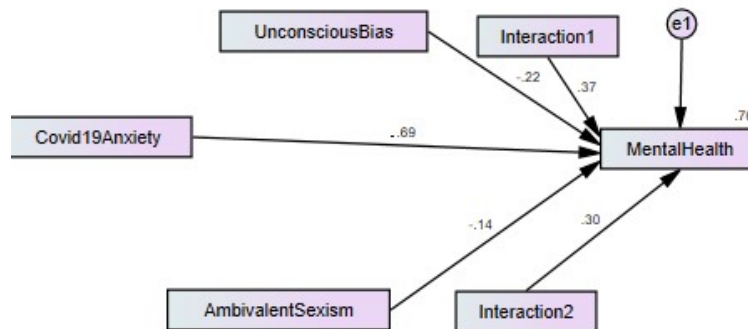


Figure 3: Structural model assessment

DISCUSSION

The study findings have stated that COVID-19 anxiety negatively affects students' mental health. These results agree with the previous study by Faisal et al. (2022), which examined the COVID-19 effects on students' education and mental health. This study posits that during COVID-19, the education of the students has been adversely affected because they cannot attend classes regularly because of the ban on general transportation facilities within the city. In this situation, the students worry about their studies, learning performance, and preparation for their next professional life. These anxieties destroy their happiness and satisfaction, badly affecting the students' mental health. These results are also in line with the study of Lee et al. (2021), which states that within educational institutions, a proper teaching-learning environment is developed where the students not only learn from the books but also from the lectures delivered by the teachers and observe their jesters and facial expressions. In this way, they can better and more conveniently learn the subject. But, since the COVID-19 pandemic is so prevalent, this is impossible, and students can only rely on their books at home for learning. This COVID-19 anxiety pressures students' minds and

damages their mental health. These results are also in line with Aqeel et al. (2021), which state that in educational institutions, students are provided with effective sources of learning based on computers, the internet, and other profession-related machines or equipment. Whenever COVID-19 is prevalent, students are restricted to the boundaries of their houses and are not allowed to go to school and attend regular classes; they are deprived of all these learning facilities. And therefore, they have to face hardships in learning. These anxieties impart a harmful influence on the mental capacity of the students and their mental health. These previous studies claim that COVID-19 anxiety negatively affects students' mental health.

The study results showed that ambivalent sexism significantly moderates COVID-19 anxiety and students' mental health. These results are supported by the previous study by Conrad et al. (2021), Altakhayneh (2022), which highlights that during the COVID-19 pandemic, there is a ban on transportation and restriction on carrying on regular classes, the education plans may be postponed. If there is discrimination among people based on gender and women have acquired permission for education with difficulty, their anxiety is worst during the COVID-19 pandemic, and females get more worried. In

this condition, the female students' mental learning capacity becomes weak. These results are also supported by the study of Baloran (2020), who discusses mental health in education during the COVID-19 pandemic. The impact of COVID-19 anxiety on schooling has been worse in countries where ambivalent sexism is prevalent, and women already have fewer basic rights, freedom of expression, possibilities for success, and freedom to live their lives as they choose. The female students' mental anxiety grows under this circumstance, impacting their mental health. Therefore, the effects of COVID-19 anxiety on students' mental health are made worse by ambiguous sexism. These results also align with the past study by Fu et al. (2021), which examined students' mental health during COVID-19. The study claims that when there is benevolent sexism, and men feel responsible for protecting the women and keeping them home, the female students find it hard to attend the regular learning classes at school. They are mentally disturbed. If the COVID-19 pandemic breaks out, it will be impossible for students to continue their education in regular classes, and sexism itself greatly makes COVID-19 anxiety worse for female students. In cases of ambivalent sexism, COVID-19 anxiety more severely affects the students' mental health.

The study results indicated that unconscious bias significantly moderates COVID-19 anxiety and students' mental health. These results are supported by the previous study by Husky et al. (2020), which states that people in a community are not treated equally, which is an unconscious bias. The people are considered superior or inferior instead of equal based on race, creed, area, and religion. Because of unconscious bias, people are deprived of their rights, living facilities, and success opportunities. In the COVID-19 pandemic prevalence, where people are worried about the health and disease barriers to transportation, unconscious bias creates more problems for students from minorities. At the same time, unconscious bias causes worries, hardships, and anxiety, destroying the peace of mind. Hence, in cases where unconscious bias exists in society, COVID-19 anxiety increases and affects mental health more severely. These results are supported by Kim et al. (2021), which examine the COVID-19 impact on student's mental health. The study implies that when

the people of a society practice unconscious bias and think the opposite of one another, they destroy their mental peace. When COVID-19 pandemic outbreaks bring a bundle of worries for common people, the unconscious bias adds to these worries and can allow students to develop cognitive abilities. In this way, unconscious bias enhances COVID-19 anxiety and destroys students' mental health. These results are also supported by Alyoubi et al. (2021). According to this previous study, unconscious bias enhances COVID-19 anxiety by creating more worries and disturbances, and unconscious bias, causing unjust behavior, distrust, and a lack of communication, also harms students' mental health. Hence, unconscious bias affects COVID-19 anxiety and students' mental health and determines their relationships.

Theoretical implications

The current study has much for scholars and academics to learn and apply in their literary studies. This is possible because of the study's contributions to literature. The current study sheds light on how COVID-19 anxiety impacts mental health in education. In the past literature, several authors have discussed the COVID-19 adversities and their impacts on human health. But very few studies have specifically addressed COVID-19 anxiety and its impacts on human mental health. The current study analyzes the COVID-19 anxiety influences mental health in education. But these studies have taken general education to discuss the relationship between COVID-19 anxiety to mental health. The present study adds to the literature by analyzing COVID-19 anxiety and mental health relations in ideological and political education.

Moreover, the direct relationship between ambivalent sexism and unconscious bias toward mental health has been discussed in different studies. But, the research has not paid much attention to checking the ambivalent sexism and unconscious bias as moderators between COVID-19 and mental health. The current study removes this literary gap by exploring the moderating role of ambivalent sexism and unconscious bias between COVID-19 and mental health. Likewise, the current study examines the influences of COVID-19 anxiety, ambivalent sexism, and unconscious bias on mental health in ideological and political education.

Empirical implications

The study's implications are confined to its theoretical foundation. But the study has great significance in the empirical world when almost all the countries have a threat from the prevailing ailment COVID-19 and its adverse effects because the study's main concern is whether COVID-19 impacts human health. Specifically, this literary workout has much significance in the education sector and the unity of a nation because it checks how mental health can be improved and sustained in education, especially ideological and political education, which requires good mental health. The study presents guidelines on social and institutional levels on how to ensure people's mental health. During COVID-19, students have to face anxiety because of the physical health dangers caused by the spreading virus, the ban on free transportation from one place to another, and the stress of regular study because of the disclosure of the education institutions. The study conveys that the educational institution should try to control COVID-19 anxiety with effective changes in their policies and strategies so that the student's mental health can be maintained and they can focus on their ideological and political education. The study guides education institutions and social reformers to plan strategies to overcome ambivalent sexism to reduce COVID-19 anxiety and help maintain people's mental health. Therefore, the reduction of ambivalent sexism reduces the damaging impacts of COVID-19 anxiety on mental health. This study provides guidelines to the policy-establishing authorities on developing policies to improve students' mental health by eliminating COVID-19 anxiety. The study also guides education management and social reformers in forming policies and strategies to overcome unconscious bias, reduce COVID-19 anxiety, and help maintain people's mental health. Thus, reducing the prevalence of unconscious bias helps reduce the adverse impacts of COVID-19 anxiety on mental health.

Limitations and Future Research Directions

Even though this study is helpful, a few things should be kept in mind. First, the sample size was small and only included people from one group, so the results may not apply to other groups or cultures. Second, the study used self-report measures, which may be subject to biases or inaccuracies in reporting. Third, the study

only examined the moderating effect of ambivalent sexism and unconscious bias on the relationship between the ideological and political education system and mental health during the COVID-19 lockdown, while other potential moderators were not explored. Finally, this study was cross-sectional, limiting the ability to establish causality and not providing information about changes over time.

Despite these limitations, this study provides insights into the relationship between the ideological and political education systems, ambivalent sexism, unconscious bias, and mental health during the COVID-19 lockdown. Future research can expand on these findings by addressing the limitations mentioned above. For example, future research can use larger and more diverse samples to enhance generalizability, employ more objective measures of ambivalent sexism and unconscious bias, examine the moderating effects of other potential variables, such as coping strategies, social support, or personality traits, and employ longitudinal designs to examine the changes over time.

Furthermore, future research can also explore the effectiveness of interventions to reduce the negative effects of the ideological and political education system, ambivalent sexism, and unconscious bias on mental health during the COVID-19 lockdown. Such interventions could include cognitive-behavioral therapy or other psychotherapeutic interventions aimed at changing maladaptive thoughts and behaviors associated with ambivalent sexism and unconscious bias, as well as interventions aimed at promoting positive coping strategies, social support, and resilience in the face of stressors associated with the COVID-19 pandemic and the ideological and political education system.

CONCLUSION

The study objective is to check COVID-19's impact on student's mental health. The study objective is also to analyze the role of ambivalent sexism and unconscious bias in the relationship between COVID-19 and mental health. The authors have surveyed the Jordanian education system and collected information on COVID-19 anxiety in students, ambivalent sexism, unconscious bias, and mental health from institutions that provide ideological and political education. The

study results are found based on the empirical education acquired from the Jordanian education system. These results indicated that there is a positive linkage between COVID-19 anxiety and the mental health of students. During COVID-19, there was fear among people of being affected by the virus, and there was road blockage, a ban on physical contact, and the closure of social and commercial organizations. These circumstances create disturbances in the whole education system. The students have to face mental anxiety, which affects their peacefulness, mental activity, and cognitive abilities. Hence, in areas where COVID-19 anxiety is high, the students are found to have lower mental health. The results of the study also showed that ambivalent sexism and unconscious bias play a moderating role between COVID-19 anxiety and mental health. The results stated that in societies where ambivalent sexism prevails and women are already given fewer basic rights, freedom of expression of thoughts, freedom of getting success opportunities, and living according to their own will, the impacts of COVID-19 anxiety on education have worsened the situation. The mental anxiety of the female students increases in this situation and their mental health is also affected. So, ambivalent sexism worsens the impacts of COVID-19 anxiety on student mental health. The study reveals that when there is unconscious bias prevailing in society, there is an increase in COVID-19 anxiety. The increasing COVID-19 anxiety for students enhances mental distress. Hence, unconscious bias mediates the relationship between COVID-19 anxiety and mental health.

Limitations and future directions

There are many limitations associated with the current study, despite its significance in the literature. These limitations are to be removed by future authors. The study examines only how COVID-19 anxiety impacts students' mental health. The student's mental health also depends on parental support, institutional culture, teaching methods, sources of learning, etc. It is recommended to future authors that they expand the study scope and examine at least three or four factors other than COVID-19 anxiety. This validity is also limited in that it is valid only in those countries where the education system is affected by the COVID-19 pandemic and still facing its adversities. The future

authors must also examine the impacts of social issues and anxiety on the student's mental health.

Moreover, this study examines the role of two moderators, ambivalent sexism and unconscious bias, between COVID-19 anxiety and mental health. And no mediator between COVID-19 anxiety and mental health has been examined. Therefore, a future author is expected to examine mediators and moderators between COVID-19 anxiety and mental health. The present study checks the hypotheses about the relationship between ambivalent sexism and unconscious bias, COVID-19 anxiety, and mental health in ideological and political education in Jordan. So, the study's validity is limited to Jordan alone. For general validity, empirical information must be collected from diverse economies.

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