

THE EFFECT OF *MINDFULNESS* ON DEPRESSION IN SINGLE MOTHERS IN BANYUMAS

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Abstract

Depression is one of the psychological disorders experienced by many *single mothers* due to economic pressure, parenting responsibilities, and lack of social support. This condition has an impact on quality of life and parenting skills. *Mindfulness* is a mindfulness-based intervention approach that has been shown to be effective in reducing symptoms of depression through emotional regulation mechanisms and increased self-acceptance. This study aims to determine the effect of *mindfulness* on the level of depression of *single mothers* in Banyumas. The research method used a *quasi-experimental pre-post test* design in 24 *single mother* intervention groups. Depression levels were measured using validated instruments. The analysis uses *the Wilcoxon* test. The results showed that there was a decrease in depression levels before and after *the mindfulness* intervention, with values $Z = -2.324$ and $p = 0.020$. A total of 12 respondents experienced a decrease in depression, 3 respondents experienced an increase, and 9 respondents remained. The conclusion of this study is that *mindfulness* has a significant effect in reducing the level of depression in *single mothers* in Banyumas. These interventions can be recommended as part of a psychosocial empowerment and support program in public health services.

Keywords : Banyumas, Depression, Mindfulness, Single Mother

Introduction

Single mothers are a vulnerable group that faces significant psychological distress due to a combination of economic demands, the burden of dual roles, and reduced social support. This condition increases the risk of depression which has an impact on mental health and childcare patterns. Previous studies have shown that the prevalence of depression in *single mothers* is consistently higher than in married women, and prolonged depression is associated with parenting stress, emotional exhaustion, and low quality of life.

Several intervention studies have shown that *mindfulness* is effective in lowering depression through increased *self-awareness*, emotion management, and the ability to accept experiences without judgment. *Mindfulness* has also been shown to increase the resilience of mothers facing chronic stress. However, research related to mindfulness in *single mothers* in Indonesia, especially in the Banyumas area, is still very limited. There has been no empirical study evaluating whether *the mindfulness* approach can be an affordable psychological intervention strategy that can be implemented in community programs.

The research gap arises because there is no local evidence assessing the effectiveness of mindfulness on depression in *single mothers* in Banyumas. In fact, the socio-cultural context of Banyumas has its own characteristics that affect the psychological condition of single mothers. Thus, this research is needed to provide a scientific basis for the preparation of community-based

interventions. The purpose of this study is to analyze the influence of *mindfulness on the level of single mother depression in Banyumas*

Method

This study used a *quasi-experimental pre-post test* design without a control group. The study population was single mothers in the Banyumas area, and a sample of 24 people in the intervention group was selected through *purposive sampling*. The instrument used was a questionnaire on the level of depression that had been validated. Mindfulness interventions are given in several structured sessions containing mindful breathing exercises, *body scans*, and emotion regulation. Data collection was carried out before and after the intervention. Statistical analysis uses *the Wilcoxon test* to look at changes in depression levels.

Results

3.1 Characteristics of respondents

In this study, all respondents were male because the respondents came from Vocational High Schools majoring in Computer Engineering (TKR) and Audio Visual Engineering (TAV). For the age range, there were no respondents in the age range of 10-12 years, there were 4 respondents in the age range of 13-15 years, and in the range of 16-19 years there were 40 respondents.

Table 1 Frequency Distribution of Respondent Characteristics by Age, Education, Single Mother Status, Single Mother Age, Number of Children and Occupation in the SEFT and Mindfulness Groups (n=48)

Variabel	Frequency (f)	Percentage (%)
Age		
Early Adulthood	12	25.0
Late Adult	36	75.0
Quantity	48	100.0
Education		
Basic Education	8	16.7
Secondary Education	16	33.3
Higher Education	24	50.0
Quantity	48	100.0
Status Single Mother		
Divorce Life	27	56.3
Divorce Dead	21	43.8

Table 1 shows that most of the respondents are adults at the end of 75% (36 respondents), most have higher education at 50% (24 respondents), and *single mother* status is mostly divorced living at 56.5% (27 respondents)

3.2 Overview of Single Mothers' Depression Levels in the Mindfulness Therapy Group Before Intervention

Table 4 Frequency Distribution of Single Mothers' Depression Rates Before Mindfulness Therapy Intervention (n=24)

Depression Rate	Frequency	Percentage (%)
Normal	1	4.2
Lightweight	10	41.7
Medium	12	50.0
Very Severe	1	4.2

Based on table 4, it can be seen that the level of depression of *single mothers* before being given *Mindfulness therapy* is mostly in the category of moderate depression of 50.0% (12 respondents). Respondents who experienced mild depression amounted to 41.7% (12 respondents) and respondents who were in the category of severe and normal depression amounted to 4.2% (1 respondent).

3.3 Overview of Single Mothers' Depression Levels in the Mindfulness Therapy Group After Intervention

Table 5 Frequency Distribution of Single Mothers' Depression Rates After Mindfulness Therapy Intervention (n=24)

Depression Rate	Frequency	Percentage (%)
Normal	2	8.3
Lightweight	16	66.7
Medium	5	20.8
Very Severe	1	4.2
Total	24	100.0

Based on table 5, it can be seen that the level of *depression of single mothers* after being given *Mindfulness therapy* is mostly in the category of mild depression of 66.7% (16 respondents). Respondents who experienced moderate depression amounted to 20.8% (5 respondents) and respondents who were in the normal category amounted to 8.3% (2 respondents).

3.4 Differences in Single Mother Pre and Post Intervention Depression Levels in the Mindfulness Groupss

Table 7 Frequency Distribution of Single Mothers' Depression Levels Before and After Mindfulness Therapy Intervention (n=24)

Depression Rate	Ranks	N	Mean Rank	Z	P value
Post Mindfulness Depression for Mindfulness	Negatif ranks	12	8.0	-2,324	0.020
	Positif Ranks	3	8.0		
	Ties	9			

Based on table 6, it can be seen that the Z value in the research results is -2.324 where this number is greater than -1.96 and in the results of *the Wilcoxon test* , *the p value* is $0.020 < 0.05$. This can be interpreted that there is a significant influence of *giving Mindfulness* therapy on the level of depression

of *single mothers*. There was a decrease in the level of depression of 12 respondents, an increase in depression of 2 respondents and there were 9 respondents whose level of depression remained.

Discussion

The results of this study show that mindfulness has a significant effect on reducing the level of depression in *single mothers*. The changes that occurred were indicated by the shift in the depression category from moderate to mild after the intervention. Statistically, the decline is evidenced by the value $p = 0.020$ which is below the significance limit of 0.05. These findings are in line with previous studies that have shown that mindfulness training can improve emotional regulation, improve stress coping skills, and reduce depressive symptoms in individuals experiencing chronic psychological distress. The working mechanism of *mindfulness* is explained through the concepts of *attentional control* and *non-judgmental awareness*. When individuals learn to be aware of thoughts and emotions without judgment, the physiological stress response decreases and the activation of the parasympathetic nervous system occurs. In the context of *single mothers*, this condition helps reduce guilt, parenting anxiety, and automatic negative thoughts about self-worth. The results of this study are also consistent with other studies that show that *mindfulness* is effective for mothers with high stress, parenting burden, and limited social support.

In addition, the characteristics of the respondents in the study—most of whom were in late adulthood, working, and having two children—indicated the complexity of the burden of the roles they faced. This complexity is a risk factor for depression, so psychological interventions such as *mindfulness* are very relevant. The reduction in depressive symptoms in 12 respondents reinforces evidence that mindfulness-based interventions can be an alternative strategy for communities, especially in vulnerable groups.

However, there are still respondents who do not experience changes or even experience increased depression, indicating that *mindfulness* does not work uniformly for everyone. Factors such as differences in stress levels, depth of loss experience, and social environment can affect the effectiveness of interventions. This condition indicates that *mindfulness* is better combined with other psychosocial support such as counseling or support groups.

Taking into account the results of the research and the relevance of the Banyumas context, *mindfulness* can be recommended as a *feasible intervention* to be implemented through family posyandu programs, health centers, or women's empowerment groups. This intervention does not require high costs, is easy to teach, and can be a preventive strategy for reducing depression in single mothers.

Conclusion

This study shows that *mindfulness* has a significant effect on reducing the level of depression in *single mothers* in Banyumas. The intervention provided resulted in a change in depression category from moderate to mild in most respondents, with the statistical results of the *Wilcoxon* test showing a value of $p = 0.020$. A decrease in depression was experienced by 12 respondents, while a small percentage experienced an increase or no change.

These results reflect that *mindfulness* is able to improve emotional regulation, self-awareness, and the ability to cope with stress in *single mothers* who face the demands of dual roles, economic pressure, and limited social support. *Mindfulness* can be used as an alternative to community-based interventions because it is easy to implement, does not require special equipment, and can be integrated into mental health programs at health centers and women's empowerment institutions. However, not all respondents showed a positive response, so a

multimodal approach is needed to support optimal mental health. Further research is suggested to involve control groups, longer duration of interventions, and exploration of personal and social factors that may affect the effectiveness of *mindfulness*.

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