

## **Related Factors with Depression in Patients Interesting Yourself at Home mental illness Dr. Suparto Hardjohoesodo Kendari**

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### **Abstract**

*Depression is a form of psychological disturbance characterized by mood disorders, which are marked by feelings of melancholy, listlessness, a lack of excitement for life, a sense of uselessness, a loss of hope, and other related symptoms. Self-interest, on the other hand, refers to the inability of individuals to form connections with other people or their surrounding environment in a natural and active manner, often leading to an unrealistic perception of themselves. The objective of this study is to understand the factors related to depression in patients with self-interest at the Mental Illness Hospital, Dr. Suparto Hardjohoesodo, Kendari. This study uses a descriptive analytic method with a cross-sectional approach. The population of the study consists of all patients with psychological disturbances at the Dr. Suparto Hardjohoesodo Mental Illness Hospital, numbering 148 patients. The sample was selected using a random sampling technique. The independent variables measured in this study include gender, age, occupation, and education, while the dependent variable is self-interest. Data was collected through questionnaires and presented in the form of tables and narratives, analyzed using chi-square statistics at a significance level of  $p = 0.05$  to determine the connection between the independent and dependent variables. The results of the chi-square test showed significant relationships between gender ( $p = 0.012$ ), age ( $p = 0.034$ ), occupation ( $p = 0.013$ ), and education ( $p = 0.024$ ) with depression in patients experiencing self-interest. Based on these findings, the study concludes that there is a meaningful connection between gender, age, occupation, and education with depression in patients with self-interest at the Dr. Suparto Hardjohoesodo Mental Illness Hospital, Kendari. The study recommends that healthcare professionals should be attentive to the circumstances of patients and provide professional nursing care to aid in the healing of patients suffering from depression and self-interest.*

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## **Introduction**

Problem health soul has very broad and complex scope, so problem health soul is problem nation. Therefore, that effort countermeasures disturbance soul is one of the government programs, as stated in the law Number 23 of 1992 stated that health mental health, prevention and management problem psychosocial and disorders soul as well as growth and recovery sufferer disturbance soul is one of effort in enhancement degrees health public. Disturbance soul or mental disorders are something changes to function the soul that causes exists disruption to function soul, which gives rise to individual sufferers and obstacles in carry out role social (Bizzari, 2023). Mature Today, 1 in 4 people in the world have experience bother me soul inside his life. Like that's WHO report in 2001. Now as many as 450 million people have suffer disturbance soul, so put disease This in the disease list major in the world.

Data obtained by WHO shows 10% of population the world's population needs help or treatment in the field health. According to a *World Bank* study in 1993 in several countries 8.1% of *berden diseases* (diseases consequence burden globalization) is caused by problems

health soul, which shows more impact big from tuberculosis, cancer, heart disease and malaria. Until moment Currently, more than 40% of the world's countries do not has a name Constitution about health souls and around 30% of the country does not have a program about health soul (Pan et al., 2022; Kabat, 2021). Government Alone Still not enough even tend low. Only Only around 25% of countries in the world have its preparation drugs base for handling schizophrenia, depression, and epilepsy (Barnes et al., 2020). When This There is trend sufferer with disturbance soul the amount experience enhancement (Sparby, 2020). Results data Home Health Survey Steps (SK-RT) carried out by the Research and Development Agency the Ministry of Health of the Republic of Indonesia in 2009 showed, estimated there are 264 out of 1000 members House Ladder suffer disturbance health soul. In period time two-year final this, that data can confirmed increase Because crisis economy and turmoil other throughout area. Even international problems too will follow trigger happen enhancement the. Besides disturbance health soul, every WHO (*World Health Organization*) year recorded 100 million case depression. WHO put it as one of the problem great health important in the world. Prevalence lifetime life depression in society reaching 15% in men, and 24% in women

Summary from reference main psychiatry *Kaplan and Sadock's Comprehensive Textbook of Psychiatry* mention that prevalence lifetime lives and throughout year from unipolar depression is 20-25% and 10-15%, respectively in a row (Ahmad, 2023; Williams et al., 2023). The World Health Organization states the figure is 17% of patients who seek treatment to doctor is patient with depression and so on estimated prevalence depression in the population world community is 3%. Numbers This the more increase for future causes Because a number of matters include: (1) age hope life the more increase; (2) stressors biopsychosocial the heavier; (3) various disease chronicle the more increase; and (4) life religious the more abandoned (Baird, 2021).

In Indonesia (2000) itself study how much Lots sufferer depression, depression covert and also anxiety (prevalence *rates*, *incidence rates*) yet There is. However, through observation from time over time cases disturbance belonging psychology anxiety and depression the more increase (Dutcher et al., 2022; Arslan et al., 2021). This matter can see from increase amount visit patients seeking treatment at centers service health soul and also those who seek treatment to doctor (psychiatrist). Ascension amount patient with anxiety and or depression can also be seen from increase medicines psychopharmaceuticals (anti- anxiety and anti- depression drugs) prescribed by doctors (Forfang et al., 2023).

Case disturbance the soul is closely related tightly with interesting yourself, where something circumstances experiencing patients' inability for stage connection with other people or with surrounding environment in a way reasonable. In patients with behavior interesting self often do targeted activities for reach satisfaction yourself, where patient do business for protect self so that He So passive and personable stiff, patient interesting I do it myself too restrictions (isolation self), including life emotional, increasingly often patient interesting yourself, increasingly Lots difficulties experienced in develop connection social and emotional with other people (Estave et al., 2021).

Organization (WHO, 2003) states amount patients seeking treatment at home Sick increasingly increase. Results: 28% of patients treated to House Sick from year to year is patient with hallucinations, isolation social and price self-low, and so on estimated prevalence it in the population world community is 3% (Levine et al., 2020).

In Southeast Sulawesi sufferers' disturbance soul classified Enough tall. Based on report part record medical House Mental Illness Dr. Suparto Hardjohoesodo Kendari, Total visit sufferer disturbance soul patient takes care stay tend increasing over the years previously. In 2009 sufferer disturbance caring soul stay as many as 1,389 patients. In 2010 sufferers' disturbance soul as many as 1,258 patients, in 2011-month January until March sufferer disturbance caring

soul stay as many as 148 patients. From the amount disturbance the soul being cared for is one of them is patient interesting self ie in 2009 there were 37 patients, in 2010 it increased to 40 patients. Medium in 2011 in the month January until March A total of 40 patients was treated consequence interesting self (Record medical House Mental illness. DR. Soeparto Hardjohoesodo, 2011).

## Method

The research design used descriptive analytics through cross-sectional surveying to analyze the link between demographic elements and depression among self-isolation patients at Dr. Suparto Hardjohoesodo Mental Illness Hospital Kendari. IT was decided to apply a descriptive analytic method to support data analysis patterns and the cross-sectional design helped researchers assess single-time variable relationships and prevalence.

Every psychiatric inpatient admitted to the hospital in 2011 formed the research population until the researchers' obtained data from all 148 patients. The researchers utilized simple random sampling to select 60 participants from a total 148-member population who were admitted to the hospital during 2011. Each member of the population received the same probability of being included in this study. Simple random sampling techniques were implemented to improve both the research objectivity and generalizability while decreasing selection bias in the findings.

The research analyzed gender along with age as well as occupation and educational background to determine if depression occurred in withdrawn patients. Within this research the operational definition of depression focused on psychological symptoms which included both sad emotional responses alongside loss of interest paired with low energy and reduced social interaction. According to research terminology self-isolation serves as the term "self-interest" which describes the active behavioral withdrawal of people from environmental contacts.

The researchers distributed pre-designed questionnaires through direct interviews to obtain their data. The research instrument supports established mental health assessment tools and has been adjusted to fulfill the requirements of this investigation. The survey included various question types combined to obtain responses about participants' social data as well as their depressive symptomology and social isolation severity.

The research team conducted a pilot screening of the instrument through testing on people outside the main study group. Results from the pilot test helped sensitive unclear statements and improve the language clarity throughout the instrument. All procedures received ethical approval from the proper institutional review board followed by individual or guardian consent for all participants before initiating data collection.

Data processing included descriptive statistics for describing participant characteristics yet the research used inferential statistics to understand independent variable relations with the dependent variables. The chi-square ( $\chi^2$ ) test analyzed essential associations between variables using  $\leq 0.05$  p-value as the cutoff point. The statistical tests enabled researchers to verify whether the detected demographic-depression relationships proved to be statistically important.

This study established a systematic methodology which identified complete patterns regarding how population characteristics affect depression risks in patients prone to self-isolation. The study combined proper sampling techniques with ethical research protocols and statistical analysis to produce observational evidence helping professionals formulate tailored depression intervention platforms and policy decisions during clinical practice.

## Result and Discussion

To examine the relationship between various demographic factors namely gender, age, occupation, and education and the presence of depression in patients with tendencies of social withdrawal or self-isolation at the Dr. Suparto Hardjohoesodo Mental Illness Hospital in Kendari. Understanding these relationships is essential, given the increasing prevalence of mental health issues, particularly depression, as a public health concern. Identifying which groups are more susceptible allows for targeted interventions and the development of more effective mental health services. The results that follow are based on a cross-sectional analysis of 60 patients, utilizing chi-square tests to determine the statistical significance of each variable's association with depression in the context of self-withdrawal behavior.

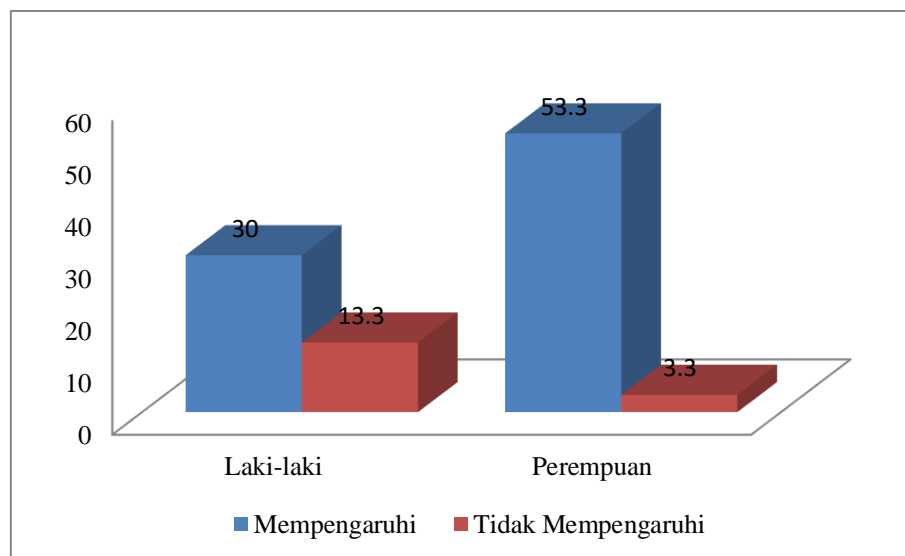
### Connection between type sex with depression in patients interesting yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari

Type sex is influencing characteristics spread something problem health. Problem more health Lots found in the group Woman only and there are some problems lots of health found in the group man course, presented in table 6.

Table 1. Distribution respondents' connection type sex with depression on influence patient interesting self

Type Sex	Interesting Self				Amount		<i>p</i>
	Influence		No Influence				
	n	(%)	n	(%)	n	(%)	0.011
Man	18	30.0	8	13.3	26	43.3	
Woman	32	53.3	2	3.3	34	56.7	
<b>Total</b>	<b>50</b>		<b>10</b>		<b>60</b>		

Source: Primary data 2011



Based on Table 6, among the 60 respondents studied according to sex, 26 male patients (43.3%) showed an interest in depression-related self-care. Of these, 18 people (30.0%) were affected by influencing factors, while 8 people (13.3%) were not influenced by these factors. On the other hand, 34 female patients (56.7%) expressed interest in depression-related self-care. Among them, 32 people (53.3%) were affected by the influencing factors, and only 2 people (3.3%) were not influenced by these factors.

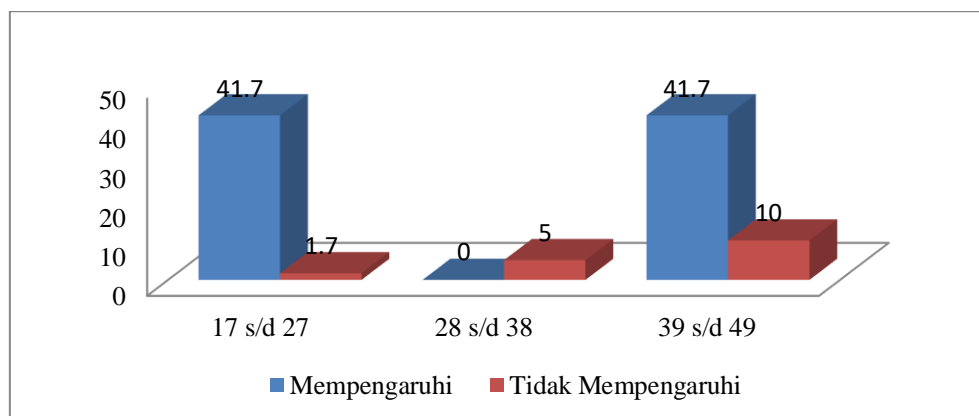
Statistical test results were obtained  $p = 0.011$  because  $p \leq 0.05$ :  $H_a$  then connection between type sex with depression on influence patient interesting self-accepted. This means exists connection between type sex with depression in patients interesting self.

### Connection between age with depression in patients interesting yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari

Table 2. Distribution respondents' connection age with depression in patients interesting self

No	Age	Interesting Self				Amount		P
		Influence		No Influence				
		n	(%)	n	(%)	n	(%)	0.034
1	17 to 27	25	41.7	1	1.7	26	43.3	
2	28 to 38	0	0	3	5.0	3	5.0	
3	39 to 49	25	41.7	6	10.0	31	51.7	
Total		50		10		60		

Source: Primary data 2011



Based on Table 7, among the 60 respondents studied according to age, 26 patients aged 17 to 27 (43.3%) showed an interest in depression-related self-care. Of these, 25 people (41.7%) were affected by influencing factors, while 1 person (1.7%) was not influenced by these factors. For patients aged 28 to 38, 3 people (5.0%) showed an interest in depression-related self-care. None of them (0%) were affected by the influencing factors, and all 3 people (5.0%) were not influenced by these factors. Meanwhile, 31 patients aged 39 to 49 (51.7%) showed an interest in depression-related self-care. Of these, 25 people (41.7%) were affected by influencing factors, while 6 people (10.0%) were not influenced by these factors. The results indicate that respondents aged 17 to 27 and 39 to 49 are particularly vulnerable to depression, with 25 people (41.7%) being affected by influencing factors. The statistical test revealed a p-value of 0.034, which is less than or equal to 0.05, leading to the acceptance of the alternative hypothesis ( $H_a$ ). This suggests a significant connection between age and depression in patients with an interest in self-care.

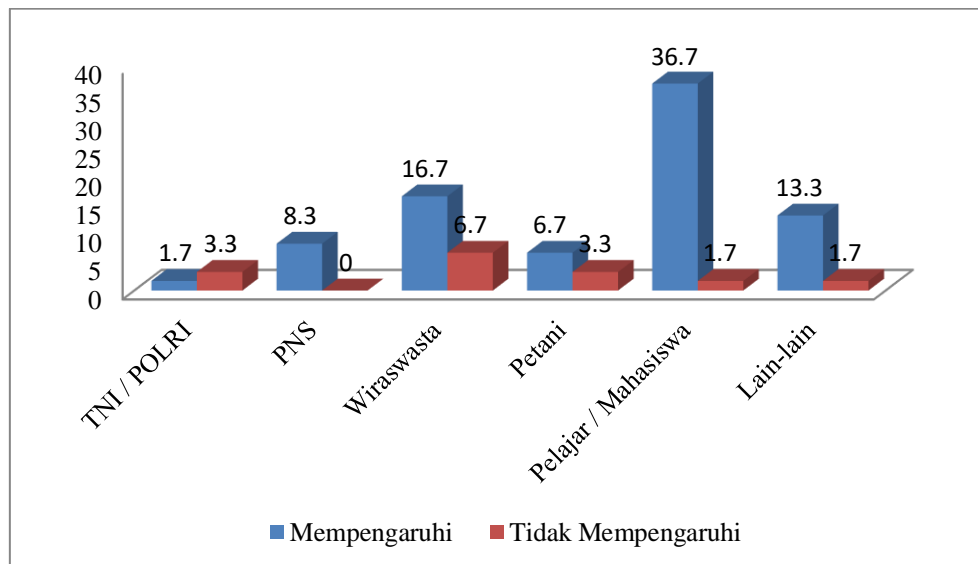
### Connection between employment status with depression in patients interesting yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari

Table 3. Distribution respondents' employment status relationship with depression in patients interesting self

No	Job status	Interesting Self				Amount		<i>p</i>
		Influence		No Influence				
		n	(%)	n	(%)	n	(%)	

1	TNI / POLRI	1	1.7	2	3.3	3	5.0	0.013
2	Civil servants	5	8.3	0	0	5	8.3	
3	Self-employed	10	16.7	4	6.7	14	23.3	
4	Farmer	4	6.7	2	3.3	6	10.0	
5	Student / Students	22	36.7	1	1.7	23	38.3	
6	Etc	8	13.3	1	1.7	9	15.0	
<b>Total</b>		<b>50</b>		<b>10</b>		<b>60</b>		

Source: Primary data 2011



Based on Table 8, among the 60 respondents studied according to their work status, 3 patients (5.0%) working as TNI/POLRI showed an interest in depression-related self-care. Of these, 1 person (1.7%) was affected by influencing factors, while 2 people (3.3%) were not influenced. For those working as civil servants, 5 people (8.3%) showed an interest in depression-related self-care, with all 5 people (8.3%) affected by the influencing factors, and none (0%) not influenced. Among those working as self-employed, 14 people (23.3%) showed an interest in depression-related self-care. Of these, 10 people (16.7%) were affected by influencing factors, and 4 people (6.7%) were not influenced. For those working as farmers, 6 people (10.0%) showed an interest in depression-related self-care, with 4 people (6.7%) affected by influencing factors and 2 people (3.3%) not influenced. Among students/college students, 23 people (38.3%) showed an interest in depression-related self-care, with 22 people (36.7%) affected by influencing factors and 1 person (1.7%) not influenced. Finally, 9 people (15.0%) working in other occupations showed an interest in depression-related self-care, with 8 people (13.3%) affected by influencing factors and 1 person (1.7%) not influenced. The results indicate that the group with the most influence on depression in patients interested in self-care is students/college students, with 22 people (36.7%) affected by influencing factors. The statistical test revealed a p-value of 0.013, which is less than or equal to 0.05, leading to the acceptance of the alternative hypothesis ( $H_a$ ). This indicates a significant connection between employment status and depression in patients interested in self-care.

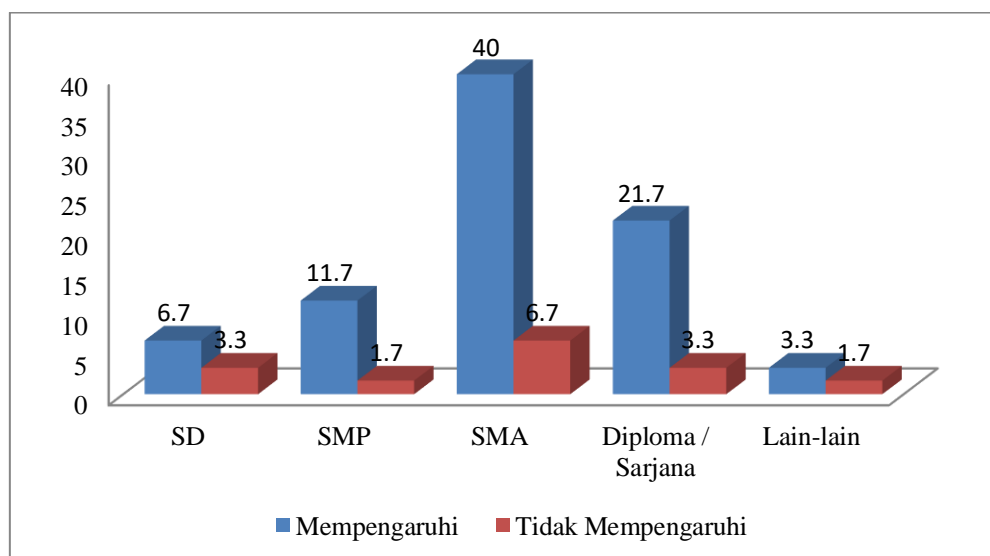


# **Connection between education with depression in patients interesting yourself at home** **Mental Illness Dr. Suparto Hardjohoesodo Kendari**

Table 4. Distribution respondents' connection education with influence patient interesting self

No	education	Interesting Self				Amount		<i>p</i>
		Influence		No Influence				
		n	(%)	n	(%)	n	(%)	
1	Elementary School	4	6.7	2	3.3	6	10.0	0.024
2	Junior High School	7	11.7	1	1.7	8	13.3	
3	Senior High School	24	40.0	4	6.7	28	46.7	
4	Diploma / Bachelor's degree	13	21.7	2	3.3	15	25.0	
5	Etc	2	3.3	1	1.7	3	5.0	
Total		50		10		60		

Source: Primary data 2011



Based on Table 8, among the 60 respondents studied according to their education level, 6 people (10.0%) with elementary school education showed an interest in depression-related self-care. Of these, 4 people (6.7%) were affected by influencing factors, while 2 people (3.3%) were not influenced. For those with junior high school education, 8 people (13.3%) showed an interest in depression-related self-care, with 7 people (11.7%) affected by influencing factors and 1 person (1.7%) not influenced. Among those with high school education, 28 people (46.7%) showed an interest in depression-related self-care. Of these, 24 people (40.0%) were affected by influencing factors, while 4 people (6.7%) were not influenced. For those with a diploma or bachelor's degree, 15 people (25.0%) showed an interest in depression-related self-care, with 13 people (21.7%) affected by influencing factors, and 2 people (3.3%) not influenced. Lastly, 3 people (5.0%) with other education showed an interest in depression-related self-care, with 2 people (3.3%) affected by influencing factors, and 1 person (1.7%) not influenced. The results indicate that individuals with high school education are most affected

by depression-related self-care. This may be because people at the high school level are still in the process of self-discovery, a stage where behaviors and thoughts are often unstable, contributing to greater vulnerability to depression. The statistical test revealed a p-value of 0.024, which is less than or equal to 0.05, leading to the acceptance of the alternative hypothesis (Ha). This indicates a significant connection between education and depression in patients interested in self-care.

Gender plays a significant role in the spread of health problems. Health issues are more commonly found in women compared to men (Levine et al., 2020). This difference can be attributed to several factors: (a) anatomical and physiological differences between women and men, (b) differences in lifestyle habits, and (c) differences in the level of awareness regarding healthcare between women and men. Based on the data analysis of 60 respondents, the current study aimed to investigate the connection between gender and depression in patients seeking care at the Mental Illness Clinic at Dr. Suparto Hardjohoesodo Hospital in Kendari. According Turhan (2020) The study used the chi-square test to examine the relationship between the independent and dependent variables, with a significance level of  $p \leq 0.05$ . The results of the study show that 26 male respondents (43.3%) and 34 female respondents (56.7%) were involved in the study. The chi-square test revealed a p-value of 0.011, which is less than 0.05, indicating that the null hypothesis (H0) is rejected and the alternative hypothesis (Ha) is accepted. This means there is a significant connection between gender and the influence on self-care behaviors in patients (Lerma et al., 2021). Women are more prone to depression due to factors such as genetics, hormonal influences, and social-cultural influences (Saraswat et al., 2021). Social and cultural factors are particularly relevant, as women are often expected to express their emotions, whereas men are typically expected to suppress them. Depression in women is also linked to hormonal changes, such as during the menstrual cycle or after childbirth, a phenomenon known as "baby blues."

Age is one of the most important characteristics of a person. The distribution of age in the population can be easily observed through population curves or pyramids (Pomazkin & Filippov, 2022). Age is a significant variable in studying health problems because: (a) it is related to physical strength. Generally, the adult body is stronger than that of babies or children; (b) it is related to health risks. Adults, due to their work and other factors, are more likely to face greater health threats than children; (c) it is connected to lifestyle habits. Compared to children, adults are more likely to have certain habits, such as smoking or drinking alcohol, which increase the risk of various diseases (Barnett, et al., 2022). In this study, 26 patients (43.3%) aged 17 to 27 years were found to be interested in self-care for depression, 3 patients (5.0%) were aged 28 to 38 years, and 31 patients (51.7%) were aged 39 to 49 years. From this, it is evident that patients aged 39 to 49 years are more susceptible to depression-related self-care. This is because older individuals face higher health risks compared to other age groups. The results of the chi-square test showed a p-value of 0.034, which is less than 0.05, indicating that the alternative hypothesis (Ha) is accepted. This means there is a significant connection between age and the influence on self-care behaviors in patients (RobatSarpooshi et al., 2020).

The connection between work and the spread of health problems has been recognized for a long time (Giorgi et al., 2022). Work can be one of the biggest obstacles in overcoming health issues. Every job carries certain risks, and as a result, the types of diseases a person may suffer from can vary depending on the nature of their occupation (Hite & McDonald, 2020). In this study, 3 patients (5.0%) were found to be employed as TNI/POLRI, 5 patients (8.3%) were civil servants, 14 patients (23.3%) were self-employed, 6 patients (10.0%) were farmers, 23 patients (38.3%) were students, and 9 patients (15.0%) were employed in other sectors. The results of the chi-square test showed a p-value of 0.013, which is less than 0.05, indicating that



the alternative hypothesis (Ha) is accepted. This means there is a significant connection between occupation and the influence on self-care behaviors in patients.

Education can generally be depicted as a system of subsystems that interact to form a complete and cohesive structure (Tamim, 2020). The functional interaction between these subsystems is known as the educational process. The educational process is a transformative one, where the potential abilities of an individual are changed into real capabilities, thereby improving their inner and outer life. Through this process, the outcomes of education are achieved, and graduates are equipped with the knowledge and skills based on the objectives set by the education system. In this study, of the 60 samples, 6 patients (10.0%) were found to have completed elementary school, 8 patients (13.3%) had a junior high school education, 28 patients (46.7%) had a high school education, 15 patients (25.0%) had a diploma or bachelor's degree, and 3 patients (5.0%) had other types of education. The results of the chi-square test showed a p-value of 0.024, which is less than 0.05, indicating that the alternative hypothesis (Ha) is accepted. This means there is a significant connection between the level of education and the influence on self-care behaviors in patients.

## Conclusion

Based on results research and description in discussion so researcher take conclusion that ; (1) There is a relationship between type sex with depression in patients interesting yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari with found  $\alpha$  value = 0.011; (2) There is a relationship between age with depression in patients interesting yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari with found  $\alpha$  value = 0.034; (3) There is a relationship between employment status with depression on pulling yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari with found  $\alpha$  value = 0.013; (4) There is a relationship between education with depression in patients interesting yourself at home Mental Illness Dr. Suparto Hardjohoesodo Kendari with found  $\alpha$  value = 0.024; (5) There are factors depression in patients interesting yourself at home Mental Illness Dr. Soeparto Hardjohoesodo Kendari.

## References

- Ahmad, S. (2023). *Kaplan and Sadock's pocket handbook of psychiatric drug treatment*. Lippincott Williams & Wilkins.
- Arslan, G., Yildirim, M., & Zangeneh, M. (2021). Coronavirus anxiety and psychological adjustment in college students: Exploring the role of college belongingness and social media addiction. *International journal of mental health and addiction*, 1-14. <https://doi.org/10.1007/s11469-020-00460-4>
- Baird, A. (2021). *A Faithful Man Suffering in Illness: Religious and Medical Perspectives on the Book of Job* (Doctoral dissertation).
- Barnes, T. R., Drake, R., Paton, C., Cooper, S. J., Deakin, B., Ferrier, I. N., ... & Yung, A. R. (2020). Evidence-based guidelines for the pharmacological treatment of schizophrenia: updated recommendations from the British Association for Psychopharmacology. *Journal of Psychopharmacology*, 34(1), 3-78.
- Barnett, L. M., Webster, E. K., Hulteen, R. M., De Meester, A., Valentini, N. C., Lenoir, M., ... & Rodrigues, L. P. (2022). Through the looking glass: A systematic review of longitudinal evidence, providing new insight for motor competence and health. *Sports Medicine*, 52(4), 875-920. <https://doi.org/10.1007/s40279-021-01516-8>
- Bizzari, V. (2023, April). Which kind of body in “mental” pathologies? Phenomenological insights on the nature of the disrupted self. In *The Journal of Medicine and*

*Philosophy: A Forum for Bioethics and Philosophy of Medicine* (Vol. 48, No. 2, pp. 116-127). US: Oxford University Press.

- Dutcher, J. M., Lederman, J., Jain, M., Price, S., Kumar, A., Villalba, D. K., ... & Creswell, J. D. (2022). Lack of belonging predicts depressive symptomatology in college students. *Psychological science*, 33(7), 1048-1067. <https://doi.org/10.1177/09567976211073135>
- Estave, P. M., Beeghly, S., Anderson, R., Margol, C., Shakir, M., George, G., ... & Wells, R. E. (2021). Learning the full impact of migraine through patient voices: A qualitative study. *Headache: The Journal of Head and Face Pain*, 61(7), 1004-1020. <https://doi.org/10.1111/head.14151>
- Forfang, D. L., Crabtree, B., Gee, P., Solomon, J., Bologna, P., Nelson, T., ... & McCowan, P. (2023). How Do the ASCEND Study Findings Help Us as Dialysis Patients? *Clinical Journal of the American Society of Nephrology*, 18(6), 689-690. <https://doi.org/10.2215/CJN.0000000000000158>
- Giorgi, G., Lecca, L. I., Alessio, F., Finstad, G. L., Bondanini, G., Lulli, L. G., ... & Mucci, N. (2020). COVID-19-related mental health effects in the workplace: a narrative review. *International journal of environmental research and public health*, 17(21), 7857. <https://doi.org/10.3390/ijerph17217857>
- Hite, L. M., & McDonald, K. S. (2020). Careers after COVID-19: Challenges and changes. *Human Resource Development International*, 23(4), 427-437. <https://doi.org/10.1080/13678868.2020.1779576>
- Kabat-Zinn, J. (2021). The liberative potential of mindfulness. *Mindfulness*, 12(6), 1555-1563. <https://doi.org/10.1007/s12671-021-01608-6>
- Lerma, C., Lima-Zapata, L. I., Amaya-Aguilar, J. A., Leonardo-Cruz, I., Lazo-Sánchez, M., Bermúdez, L. A., ... & Cadena-Estrada, J. C. (2021). Gender-specific differences in self-care, treatment-related symptoms, and quality of life in hemodialysis patients. *International Journal of Environmental Research and Public Health*, 18(24), 13022. <https://doi.org/10.3390/ijerph182413022>
- Levine, D. M., Ouchi, K., Blanchfield, B., Saenz, A., Burke, K., Paz, M., ... & Schnipper, J. L. (2020). Hospital-level care at home for acutely ill adults: a randomized controlled trial. *Annals of internal medicine*, 172(2), 77-85. <https://doi.org/10.1016/j.annemergmed.2009.07.023>
- Martínez, N., Connelly, C. D., Pérez, A., & Calero, P. (2021). Self-care: A concept analysis. *International journal of nursing sciences*, 8(4), 418-425. <https://doi.org/10.1016/j.ijnss.2021.08.007>
- Pan, S. Y., Nie, Q., Tai, H. C., Song, X. L., Tong, Y. F., Zhang, L. J. F., ... & Liang, C. (2022). Tea and tea drinking: China's outstanding contributions to the mankind. *Chinese medicine*, 17(1), 27. <https://doi.org/10.1186/s13020-022-00571-1>
- Pomazkin, D., & Filippov, V. (2022). Demographic resource for data analysis and visualization. *Population and Economics*, 6(3), 117.
- RobatSarpoooshi, D., Mahdizadeh, M., Alizadeh Siuki, H., Haddadi, M., Robatsarpoooshi, H., & Peyman, N. (2020). The relationship between health literacy level and self-care behaviors in patients with diabetes. *Patient related outcome measures*, 129-135.

- Saraswat, N., Wal, P., Pal, R. S., Wal, A., Pal, Y., & Roohi, T. F. (2021). A detailed biological approach on hormonal imbalance causing depression in critical periods (postpartum, postmenopausal and perimenopausal depression) in adult women. *The Open Biology Journal*, 9(1). <http://dx.doi.org/10.2174/1874196702109010017>
- Sparby, T. (2020). Body, soul, and spirit: an explorative qualitative study of anthroposophic meditation and spiritual practice. *Religions*, 11(6), 314. <https://doi.org/10.3390/rel11060314>
- Tamim, S. R. (2020). Analyzing the complexities of online education systems: A systems thinking perspective. *TechTrends*, 64(5), 740-750. <https://doi.org/10.1007/s11528-020-00538-9>
- Turhan, N. S. (2020). Karl Pearson's Chi-Square Tests. *Educational Research and Reviews*, 16(9), 575-580.
- Williams, E. R., Moskowitz, L., Boland, R., & Verduin, M. L. (2023). *Kaplan & Sadock's Study Guide and Self-Examination Review in Psychiatry*. Lippincott Williams & Wilkins.