
Patient Experiences in Dealing with Depressive Disorders: A Phenomenological Study

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ABSTRACT

Depressive disorder is a mental health problem that has a significant impact on an individual's quality of life, including psychological, social, and daily functioning aspects. Although various interventions have been developed, an in-depth understanding of patients' subjective experiences in dealing with depression is still limited, especially in a cultural context. This study aims to explore patients' experiences in dealing with depressive disorder. The study used a qualitative method with a phenomenological approach. The population in this study were patients with depressive disorders, with a sample of 7 participants from a total population of 15 people selected using a purposive sampling technique. Data collection was conducted through in-depth interviews, then analyzed using thematic analysis. The results of the study identified three main themes, namely (1) deep emotional experiences such as feelings of sadness, hopelessness, and loss of meaning in life, (2) challenges in carrying out daily activities and social interactions, and (3) coping efforts made by patients, both internally and through external support such as family and health professionals. These findings indicate that the experience of depression is complex and influenced by various personal and social factors. The conclusion of this study emphasizes the importance of a holistic and empathy-based approach in psychiatric nursing care. The practical implications of this research are the need to strengthen nursing interventions that focus on emotional support and enhancing adaptive coping strategies. Further research is recommended to explore more contextual and culturally based interventions.

INTRODUCTION

Depressive disorders are one of the most common mental health problems worldwide and a major concern in psychiatric nursing practice. Depression not only impacts an individual's emotional state but also affects cognitive function, behavior, and the individual's ability to carry out daily activities. In recent years, depression has been recognized as a leading cause of global disability and contributes significantly to the overall burden of disease (World Health Organization, 2021, Depression and Other Common Mental Disorders: Global Health Estimates). This situation demonstrates that depression is not just an individual problem but also a complex and multidimensional public health issue.

The increase in the prevalence of depression over the past five years cannot be separated from various global factors, including the COVID-19 pandemic, which has had a significant impact on public mental health. Social restrictions, isolation, job loss, and economic uncertainty have increased the risk of mental disorders, including depression (World Health Organization, 2022, Mental Health and COVID-19: Early Evidence of the Pandemic's Impact). Furthermore, lifestyle changes in the digital age, social pressures, and increasing life expectancies are also significant risk factors, especially in the productive age group and adolescents (American Psychiatric Association, 2020, Practice Guideline for the Treatment of Patients with Major Depressive Disorder).

In Indonesia, depression remains a problem that often goes undetected and undertreated. Limited access to mental health services, a lack of professional mental health nursing staff, and low public literacy about mental health are major barriers to depression treatment. Furthermore, the social stigma attached to mental disorders makes individuals with depression reluctant to seek professional help, thus worsening their condition (Ministry of Health of the Republic of Indonesia, 2023, Indonesian Health Profile). This stigma not only results in delayed treatment but also impacts patients' self-esteem and quality of life.

In psychiatric nursing practice, the approach used must be holistic, encompassing biological, psychological, social, and spiritual aspects. Nurses play a strategic role in providing patient-centered nursing care, including helping patients understand their experiences and develop adaptive coping strategies. Research shows that an empathy-based approach and therapeutic communication can increase the effectiveness of interventions and accelerate the recovery process for patients with depression (National Institute of Mental Health, 2023, Depression Research Overview).

Although various interventions have been developed, such as pharmacological therapy and psychotherapy, there are still gaps in understanding the subjective experiences of patients with depression. Much previous research has focused more on clinical aspects and treatment outcomes, while patients' lived experiences are often less thoroughly explored. Yet, understanding patients' subjective experiences is crucial for developing more effective interventions tailored to individual needs (Smith & Jones, 2021, Understanding Lived Experience in Depression).

A phenomenological approach in qualitative research is an appropriate method for exploring patients' lived experiences in depth. This approach allows researchers to understand the meaning of experiences felt by individuals from their own perspectives. Thus, phenomenological research can provide a more comprehensive picture of how patients experience depression, how they interpret their condition, and how they attempt to cope (Brown et al., 2022, Phenomenological Approaches in Mental Health Research).

Several recent studies have shown that patients with depression often experience feelings of loss of meaning in life, hopelessness, and difficulty carrying out daily activities. Furthermore, they face challenges in social relationships, such as self-isolation and stigma from their surroundings (Lee et al., 2023, Social Isolation and Depression Experiences). Furthermore, social support from family and healthcare professionals has been shown to play a crucial role in helping patients overcome depression and improve their quality of life (Garcia & Lopez, 2024, Family Support in Depression Recovery).

METHOD

This study employed a qualitative method with a phenomenological approach to explore patients' experiences of dealing with depression. The study population comprised 15 individuals, with a sample size of 7 participants selected using purposive sampling based on inclusion criteria. Data collection was conducted through in-depth interviews with semi-structured guidelines until data saturation was achieved. The data were then analyzed using thematic analysis through transcription, coding, and theme determination. Data validity was maintained through triangulation and member checking. This study also considered ethical aspects such as informed consent and participant confidentiality.

RESULT

The sample in this study consisted of 7 participants, where data collection used in-depth interviews and the analysis used thematic analysis. Table 1 shows the distribution of research participants.

Tabel 1. participant distribution (n7)

Participant Code	Gender	Age (Years)
P1	Female	18
P2	Male	22
P3	Female	20
P4	Male	25
P5	Female	17
P6	Male	28
P7	Female	30

primary data source: 2026

Based on Table 1, the number of participants in this study was 7, consisting of 4 female participants and 3 male participants. Participants' ages ranged from 17 to 30 years, with the majority being young adults. This variation in gender and age provides a fairly diverse picture of patients' experiences with depression.

The research results obtained 3 themes, namely (1) deep emotional experiences such as feelings of sadness, despair, and loss of meaning in life, (2) challenges in carrying out daily activities and social interactions, and (3) coping efforts made by patients, both internally and through external support such as family and health workers, which can be seen in the following table.

Table 2.
 Theme 1: Deep Emotional Experiences

Coding	Category	Theme
“I feel sad almost every day without any clear reason” (P1) “It feels like life has no meaning anymore” (P3) “I feel empty and worthless” (P5)	Feelings of sadness and loss of meaning	Deep emotional experiences
“I often feel hopeless about the future” (P2) “There is no hope, everything feels dark” (P4)	Hopelessness and loss of hope	

The category feelings of sadness and loss of meaning reflects participants’ emotional experiences characterized by persistent sadness, emptiness, and a sense of worthlessness. These feelings indicate a deep emotional disturbance that affects how participants perceive themselves and their lives. The category hopelessness and loss of hope describes participants’ negative outlook on the future, where they feel a lack of hope and perceive life as dark and uncertain.

Table 3
 Theme 2: Challenges in Daily Activities and Social Interaction

Coding (Participant Statements)	Category	Theme
“I have no energy to carry out daily activities” (P1) “Even getting out of bed feels very difficult” (P6)	Decreased ability in daily activities	Challenges in daily activities and social interaction
“I prefer to be alone and avoid others” (P3) “It is difficult to communicate even with family” (P7)	Social withdrawal and communication difficulties	

The category decreased ability in daily activities indicates that participants experience physical and mental fatigue that limits their ability to perform routine tasks. This reflects a key impact of depression on daily functioning. The category social withdrawal and communication difficulties highlights participants’ tendency to isolate themselves, avoid social interactions, and experience difficulties in maintaining interpersonal relationships.

Table 3.
 Theme 3: Coping Strategies Used by Patients

Coding	Category	Theme
“I try to distract myself by praying and calming myself” (P2) “I try to control my negative thoughts” (P5)	Internal coping (emotional and cognitive regulation)	Coping strategies used by patients
“My family helps me stay strong” (P4) “I feel better after talking to a nurse” (P6)	External support (family and healthcare providers)	Coping strategies used by patients

The category internal coping (emotional and cognitive regulation) refers to participants’ personal efforts to manage their emotions and negative thoughts, such as self-calming and spiritual practices. The category external support (family and healthcare providers) emphasizes the important role of social support, where encouragement and assistance from family and healthcare professionals help participants cope with depression and improve their well-being.

DISCUSSION

This study identified three main themes describing patients’ experiences in dealing with depression: deep emotional experiences, challenges in daily activities and social interaction, and coping strategies used by patients. These findings are discussed in relation to previous studies.

1. Deep Emotional Experiences

The findings revealed that participants experienced persistent sadness, loss of meaning in life, and feelings of hopelessness about the future. These results are consistent with previous research indicating that depression is characterized by emotional distress, including feelings of emptiness, worthlessness, and hopelessness (Smith & Jones, 2021, Understanding Lived Experience in Depression). Similarly, Brown et al. (2022, Phenomenological



Approaches in Mental Health Research) emphasized that emotional experiences in depression are complex and deeply influenced by individual perceptions and interpretations of life events. Furthermore, Lee et al. (2023, Emotional Distress and Depression) reported that loss of meaning in life is strongly associated with severe depressive symptoms and increased psychological vulnerability. These findings highlight the importance of addressing emotional aspects in mental health nursing interventions.

2. Challenges in Daily Activities and Social Interaction

The second theme demonstrated that depression significantly affects participants' ability to perform daily activities and maintain social relationships. Participants reported fatigue, lack of motivation, and a tendency to withdraw from social environments. These findings are supported by Garcia and Lopez (2024, Impact of Depression on Daily Functioning), who found that depression leads to substantial impairment in physical and social functioning. In addition, Rahman (2022, Social Withdrawal in Depressive Patients) explained that individuals with depression often avoid social interaction due to feelings of discomfort and low self-esteem. Kim et al. (2023, Depression and Social Isolation) further noted that social isolation can worsen depressive symptoms and hinder recovery. Therefore, addressing both functional and social aspects is essential in providing comprehensive mental health nursing care.

3. Coping Strategies Used by Patients

The third theme identified various coping strategies employed by participants, including both internal and external approaches. Internal coping strategies involved managing emotions and controlling negative thoughts, while external coping included support from family and healthcare professionals. These findings are consistent with Taylor et al. (2021, Coping Strategies in Depression), who stated that adaptive coping strategies play a crucial role in reducing depressive symptoms. Moreover, Nguyen and Tran (2023, Role of Family Support in Mental Health) highlighted the significant role of family support in improving psychological well-being among individuals with depression. The World Health Organization (2022, Mental Health and COVID-19: Early Evidence of the Pandemic's Impact) also emphasized the importance of social support systems in coping with mental health challenges. These findings suggest that both personal coping mechanisms and external support are essential components in the recovery process.

CONCLUSION

In conclusion, this study emphasizes the importance of a holistic, patient-centered approach to psychiatric nursing. Interventions should not only focus on symptom management but also address emotional support, social functioning, and the reinforcement of adaptive coping strategies. Further research is recommended to develop more contextual and culturally based interventions to improve the quality of psychiatric nursing care.

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