

ABSTRAK

Latar Belakang

Individu yang mengalami depresi dapat menghadapi hambatan dalam berbagai aspek kehidupannya. Hal ini menyebabkan penurunan *Subjective Well-Being* (SWB) dan *Quality of Life* (QoL). Sementara itu, penanganan depresi di Indonesia belum optimal karena keterbatasan fasilitas kesehatan dan tenaga profesional di bidang kesehatan mental. Oleh karena itu, diperlukan intervensi psikologis yang efisien dengan kemungkinan kekambuhan yang rendah. Berbagai studi telah membuktikan bahwa Hipnosis Klinis dapat membantu individu yang mengalami depresi dalam mengelola gejala-gejalanya. Penelitian ini dilakukan untuk menguji efektivitas Hipnosis Klinis dalam meningkatkan SWB dan QoL pada individu dengan depresi, mengembangkan modul yang sesuai untuk praktik klinis, serta menyusun *Standard Operating Procedures* (SOP) bagi pengelolaan layanan di fasilitas kesehatan.

Metode

Penelitian ini menggunakan metode *Randomized Controlled Trial* (RCT), yaitu studi eksperimen dengan prosedur pengacakan untuk menetapkan partisipan ke dalam kelompok intervensi. RCT membandingkan tiga kelompok: Hipnosis Klinis, Relaksasi, dan Kontrol, masing-masing terdiri dari 25 partisipan. Instrumen yang digunakan mencakup PWI, WHOQOL-BREF, PHQ-9, dan pengambilan sampel saliva, yang diberikan sebelum sesi pertama dan sesaat setelah sesi kedua. PANAS-X diberikan sebelum dan sesudah setiap sesi. Pengukuran psikofisiologis seperti HRV dan GSR dilakukan selama sesi. Analisis data dilakukan melalui uji signifikansi intra dan antar-kelompok. Signifikansi intra-kelompok dianalisis menggunakan *paired sample t-test*, sedangkan antar-kelompok menggunakan One-Way ANOVA setelah uji normalitas dan homogenitas. Untuk data non-normal digunakan *Pairwise Comparisons* dan uji Kruskal-Wallis. Analisis korelasi dilakukan untuk melihat hubungan antarvariabel. Analisis tematik terhadap percakapan dalam sesi Hipnosis Klinis juga dilakukan untuk memahami dinamika psikologis partisipan.

Hasil

Skor SWB pada kelompok Hipnosis Klinis meningkat signifikan ($p < 0.001$) dan berbeda secara bermakna dengan kelompok Relaksasi ($p = 0.005$) dan Kontrol ($p = 0.007$). Skor QoL juga meningkat signifikan ($p < 0.001$) dan berbeda secara bermakna dengan kelompok Kontrol ($p = 0.003$), namun tidak dengan Relaksasi ($p = 0.197$). Peningkatan skor QoL terbesar terjadi pada aspek psikologis (MD=2.88), diikuti aspek fisik (MD=2.28), sosial (MD=2.08), dan lingkungan (MD=1.88). Skor depresi menurun signifikan pada kelompok Hipnosis Klinis ($p < 0.001$), berbeda secara bermakna dari kelompok Kontrol ($p = 0.003$), namun tidak dengan Relaksasi ($p = 0.294$). Skor emosi positif meningkat signifikan ($p < 0.001$), berbeda secara bermakna dengan Relaksasi ($p = 0.003$) dan Kontrol ($p < 0.001$). Emosi negatif menurun signifikan ($p < 0.001$), berbeda dari kelompok Kontrol ($p = 0.028$), namun tidak dengan Relaksasi ($p = 0.194$). GSR menunjukkan dinamika pada kelompok Hipnosis Klinis, tetapi tidak terdapat perbedaan signifikan antar sesi ($p = 0.474$) maupun dengan kelompok lain ($p > 0.05$). HRV meningkat signifikan ($p = 0.016$) dan berbeda secara bermakna dengan kelompok Kontrol ($p = 0.048$), tetapi tidak dengan Relaksasi ($p = 0.125$). Kadar kortisol saliva menurun, namun tidak signifikan ($p = 0.526$) dan tidak berbeda secara bermakna antar kelompok. SWB dan QoL berkorelasi positif, dan keduanya berkorelasi negatif dengan depresi serta emosi negatif. Analisis tematik menunjukkan perubahan positif dalam emosi, persepsi, dan gejala fisik pada partisipan Hipnosis Klinis.



Diskusi

Hipnosis Klinis terbukti lebih efektif dalam meningkatkan SWB dan QoL pada individu dengan depresi dibandingkan Relaksasi maupun tanpa intervensi. Hipnosis Klinis juga menurunkan gejala depresi, meningkatkan emosi positif, serta mengurangi emosi negatif, yang dapat dikaitkan dengan kemampuannya memfasilitasi relaksasi, kesadaran diri, dan kontrol emosi. Perubahan nilai GSR dan HRV menunjukkan peningkatan keseimbangan sistem saraf otonom. Penurunan kadar kortisol saliva menunjukkan pengaruh terapi terhadap stres fisiologis. Namun, terdapat variasi respons individu terhadap terapi yang dipengaruhi faktor internal dan eksternal. Sesi pemeliharaan atau latihan mandiri diperlukan untuk mempertahankan hasil terapi dalam jangka panjang.

Kesimpulan

Hipnosis Klinis efektif dalam meningkatkan kesejahteraan subjektif dan kualitas hidup individu dengan depresi, serta menunjukkan efek positif terhadap aspek fisiologis stres. Hasil ini menegaskan perlunya sesi penguatan (booster) dan pendekatan individualisasi dalam penerapannya. Penelitian lanjutan dibutuhkan untuk menguji daya tahan efek dan integrasi optimal dalam praktik klinis.

Kata kunci: Hipnosis Klinis, depresi, *Subjective Well-Being*, *Quality of Life*, GSR, HRV, RCT

ABSTRACT

Background

Individuals suffering from depression can experience impediments in various aspects of their lives. This leads to a decline in their *Subjective Well-Being* (SWB) and *Quality of Life* (QoL). Meanwhile, the handling of depression in Indonesia has not been optimal due to limited health facilities and professional mental health personnel. There is a need for efficient psychological treatment with a low possibility of relapse to address this need. Numerous studies have proven that *Clinical Hypnosis* can aid those suffering from depression in managing their symptoms. This research was conducted to test the effectiveness of *Clinical Hypnosis* in improving the *Subjective Well-Being* and *Quality of Life* of individuals with depression, developing appropriate modules for use in clinical practice, and the development of Standard Operating Procedures (SOP) in healthcare facility management.

Methods

This study employed the Randomized Controlled Trial (RCT) method, an experimental study utilizing randomization procedures to allocate various levels of the study to participants. The RCT compared three groups: the *Clinical Hypnosis* group, the Relaxation group, and the Control group, each consisting of 25 participants. PWI, WHOQOL-BREF, PHQ-9, and Saliva Collection were administered to all three groups right before the first session and immediately after the second session was conducted. PANAS-X was given right before and after each session. Psychophysiological data measurements, such as HRV and GSR, were performed during the sessions. Data analysis was done using significance tests for within-group and between-group differences. Within-group significance was assessed by comparing pretest, posttest, and follow-up values through a paired sample t-test, whereas between-group differences were examined by comparing pretest-posttest gain scores across groups through One-Way ANOVA after conducting



homogeneity and normality tests on the data. Non-normal data were analyzed using Pairwise Comparisons & Kruskal-Wallis. Correlation analysis is performed to see the relationship between two variables. Thematic Analysis of conversations during sessions was also carried out to understand the psychological dynamics of participants receiving *Clinical Hypnosis*.

Results

Subjective Wellbeing scores in the *Clinical Hypnosis* group showed a significant increase ($p < 0.001$) and were meaningfully different from the Relaxation ($p = 0.005$) and Control ($p = 0.007$) groups. *Quality of Life* scores in the *Clinical Hypnosis* group significantly improved ($p < 0.001$) and differed significantly from the control group ($p = 0.003$), but not from relaxation ($p = 0.197$). The largest change in *Quality of Life* scores in the *Clinical Hypnosis* group was in the Psychological Aspect (MD=2.88), followed by physical (MD=2.28), social (MD=2.08), and environmental aspects (MD=1.88). Depression scores in the *Clinical Hypnosis* group decreased significantly ($p < 0.001$) and were meaningfully different from the Control group ($p = 0.003$), but not from the Relaxation group ($p = 0.294$). Positive Emotion scores in the *Clinical Hypnosis* group increased significantly ($p < 0.001$) and differed meaningfully from the Relaxation ($p = 0.003$) and Control ($p < 0.001$) groups. Negative Emotion scores in the *Clinical Hypnosis* group significantly decreased ($p < 0.001$) and differed meaningfully from the control group ($p = 0.028$), but not from relaxation ($p = 0.194$). There was a dynamic in GSR values in the *Clinical Hypnosis* group in each session, however, no significant change in gain scores between session one and two ($p = 0.474$) was observed, nor was there a meaningful difference with the Relaxation ($p = 0.197$) and Control ($p = 0.622$) groups. HRV scores in the *Clinical Hypnosis* group significantly increased ($p < 0.016$) and differed meaningfully from the control group ($p = 0.048$), but not from relaxation ($p = 0.125$). Salivary cortisol levels in the *Clinical Hypnosis* group decreased, though not significantly ($p = 0.526$), and did not differ meaningfully with the Relaxation ($p = 0.178$) and Control ($p = 0.085$) groups. SWB and QoL are positively related, while both are negatively related to depression and negative emotions. Thematic analysis of conversations during *Clinical Hypnosis* sessions showed positive changes in emotions, perception, and physical symptoms.

Discussion

Clinical Hypnosis has been proven to be more effective in improving *Subjective Well-Being* and *Quality of Life* in individuals experiencing depression compared to Relaxation and nondelivery of the intervention. *Clinical Hypnosis* also significantly reduced depression symptoms, enhanced positive emotions, and reduced negative emotions, which can be associated with its ability to facilitate relaxation, achievement of self-awareness, and improved emotional control. Positive changes in GSR and HRV values indicate an improvement in the balance of the autonomic nervous system due to relaxation. The decrease in salivary cortisol underscores the therapy's influence on reducing physiological stress. However, there is variability in individual responses to therapy affected by internal and external factors. Booster sessions or homework are necessary to maintain therapy outcomes over an extended period.

Conclusion

Clinical Hypnosis is effective in enhancing the well-being and *Quality of Life* of individuals with depression, highlighting the need for booster sessions for long-term results. Responses are influenced by individual factors, emphasizing the adaptation of personalized interventions. This therapy also shows positive effects on stress physiology, reinforced by decreased salivary cortisol levels and changes in GSR and HRV values. Further research is needed to assess the durability and optimal integration into clinical practice.

Keywords: *Clinical Hypnosis*, depression, *Subjective Well-Being*, *Quality of Life*, GSR, HRV, RCT



UNIVERSITAS
GADJAH MADA

Clinical Hypnosis Untuk Meningkatkan Subjective Well-Being (Swb) dan Quality Of Life (Qol) Pada Individu Dengan Depresi

DANANG SETYO BUDI BASKORO, Prof. Dra. Kwartarini Wahyu Yuniarti, M.Med.Sc., Ph.D., Psikolog
Universitas Gadjah Mada, 2025 | Diunduh dari <http://etd.repository.ugm.ac.id/>