

**THE DEPRESSION EXPERIENCED BY MEGAN HIPWELL
IN PAULA HAWKINS' *THE GIRL ON THE TRAIN***

THESIS

By:
Fina Makhlidatus Shulhiyah
NIM 17320140



DEPARTMENT OF ENGLISH LITERATURE

FACULTY OF HUMANITIES

UNIVERSITAS ISLAM NEGERI MAULANA MALIK

IBRAHIM MALANG

2021

**THE DEPRESSION EXPERIENCED BY MEGAN HIPWELL IN PAULA
HAWKINS' *THE GIRL ON THE TRAIN***

THESIS

Presented to

Universitas Islam Negeri Maulana Malik Ibrahim Malang
in Partial Fulfillment of the Requirements for the Degree of *Sarjana Sastra* (S.S.)

By:

Fina Makhlidatus Shulhiyah
NIM 17320140

Advisor:

Dr. Hj. Mundi Rahayu, M.Hum.
NIP 196802262006042001



**DEPARTMENT OF ENGLISH LITERATURE
FACULTY OF HUMANITIES
UNIVERSITAS ISLAM NEGERI MAULANA MALIK
IBRAHIM MALANG
2021**

STATEMENT OF AUTHORSHIP

I state that the thesis entitled “**The Depression Experienced by Megan Hipwell in Paula Hawkins’ *The Girl on the Train***” is my original work. I do not include any materials previously written or published by another person, except those cited as references and written in the bibliography. If there is any objection or claim, I am the only person who is responsible for that.

Malang, September 19th, 2021

The Researcher



Fina Makhlidatus Shulhiyah

NIM 17320140

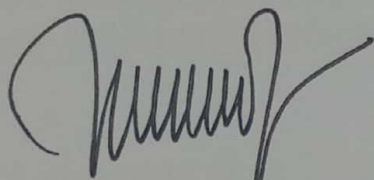
APPROVAL SHEET

This to certify that Fina Makhlidatus Shulhiyah's thesis entitled **The Depression Experienced by Megan Hipwell in Paula Hawkins' *The Girl on the Train*** has been approved for thesis examination at Faculty of Humanities, Universitas Islam Negeri Maulana Malik Ibrahim Malang, as one of the requirements for the degree of *Sarjana Sastra* (S.S.).

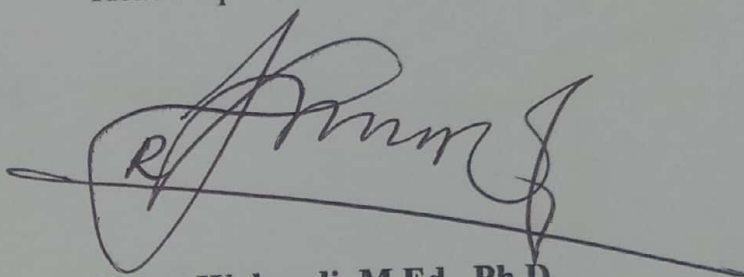
Malang, September 19th, 2021

Approved by
Advisor,

Head Department of English Literature,



Dr. Hj. Mundi Rahayu, M.Hum.
NIP 196802262006042001



Ribut Wahyudi, M.Ed., Ph.D.
NIP 198112052011011007

Acknowledged by
Dean of the Faculty of Humanities,



Dr. M. Faisol, M.Ag.
NIP 197411012003121003

LEGITIMATION SHEET

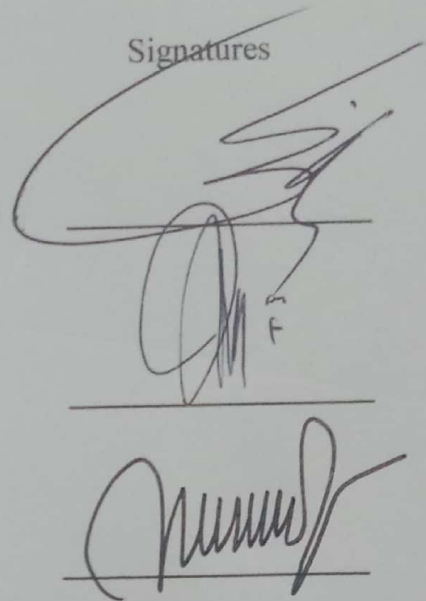
This is to certify that Fina Makhlidatus Shulhiyah's thesis entitled **The Depression Experienced by Megan Hipwell in Paula Hawkins' *The Girl on the Train*** has been approved by the Board of Examiners as one of the requirements for the degree of *Sarjana Sastra* (S.S.) in Department of English Literature.

Malang, October 6th, 2021

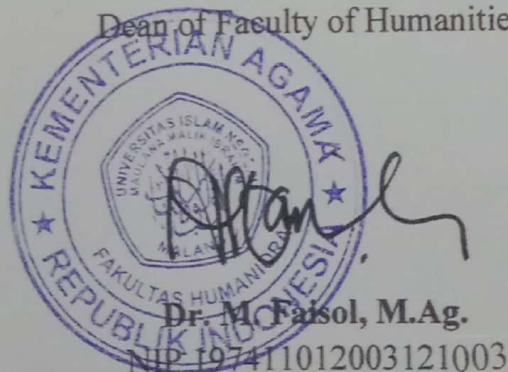
The Board Examiners

Signatures

1. Dr. Muzakki Afifuddin, M.Pd (Main Examiner)
NIP 197610112011011005
2. Asni Furaida, M.A (Chair)
NIP 19880711201802012182
3. Dr. Hj. Mundi Rahayu, M.Hum (Advisor)
NIP 196802262006042001



Approved by
Dean of Faculty of Humanities



Dr. M. Faisol, M.Ag.
NIP 197411012003121003

MOTTO

“Life is not a paragraph, and death is not parenthesis.”

-Paula Hawkins-

DEDICATION

This thesis is dedicated to myself, my beloved parents, Mr. Didik Budi Limansyah and (Almh) Mrs. Nurroniyah, my beloved little sisters, Durrotul Iqomatin Ni'mah and Furoda Taqsila Riyadloh, and for all my friends I am glad to meet you.

Thank you for the endless love and support

ACKNOWLEDGMENTS

Alhamdulillahirobbil'alamin, all praises belong to Allah SWT, the beneficent and the Merciful by Allah's guidance and blessing, the researcher can complete this thesis entitled *The Depression Experienced by Megan Hipwell in Paula Hawkins' The Girl on the Train*. Also, Shalawat and Salam are always extended to Prophet Muhammad SAW, who has guided the people to right path of islam.

Special thanks and gratitude are extended to Dr. Hj. Mundi Rahayu, M.Hum, as my great supervisor. Thank you for all suggestions and patience, which are useful to finish my thesis. Without your guidance, my thesis would mean nothing.

I address my special thanks to my family: my beloved parents Mr. Didik Budi Limansyah and (Almh) Mrs. Nurroniyah, and my beloved sisters Durrotul Iqomatn Ni'mah and Furoda Taqsila Riyadloh. Thanks for your support, love, and pray. You give me power to write this thesis and I apologize for all of my mistakes that I did.

Special thanks belong to my friends who make my life both happy and sad; to all my friends from UKM KSR PMI UIN Malang. My best friends Baiq Rosita Damayanti, Titik Nur Utami, Kuni Kama Liyyah, Siti Nur Khulasoh, English Letters Department 2017, and all that I cannot mention in details. Thank you for all of your time for always keep in touch with me.

Special thanks for someone who always support and crazy with me, Syahrul Mubarak. Thank you for being with me. All laughs, sadness, joys, and sorrows will never forgotten by me.

The researcher does realize that in conducting the thesis, there are still many weakness and mistakes within the thesis. Therefore, all suggestions and advice are welcome.

Malang, September 19th 2021

Fina Makhlidatus Shulhiyah

ABSTRACT

Shulhiyah, Fina Makhlidatus (2021) *The Depression Experienced by Megan Hipwell in Paula Hawkins' The Girl on the Train*. Undergraduate Thesis. Department of English Literature, Faculty of Humanities, UIN Maulana Malik Ibrahim Malang. Advisor: Dr. Hj. Mundi Rahayu, M.Hum.

Key words: Depression, Cognitive, Negative Triad

Depression is a mood disorder that is often characterized by prolonged sadness, feelings of guilt and worthlessness, loss of appetite, sleeping difficulty (insomnia), withdrawal from others, anxiety, sexual desire, and pleasure in daily activities. Depression can worsen and may last for months or even years. The bad risk can negatively influence a person's life, even commit suicide. For that reason, this study is important because it analyzes the problem of depression, specifically cognitions related to negative thoughts about self, world, and the future.

This study uses a literary criticism method to explain and analyze the problems (1) What are the causes of depression experienced by Megan Hipwell in *The Girl on the Train* novel (2) How are the effects of depression experienced by Megan Hipwell in *The Girl on the Train*. The data was obtained from the novel entitled *The Girl on the Train* by Paula Hawkins. The theory used in this study is the cognitive triad of depression. The researcher used a psychological approach as a research design in this study.

This study shows that the cause of depression experienced by Megan is negative thoughts or the cognitive triad of depression through the negative triad of beliefs about themselves, experiences in the world, and in the future. Her past experiences will effect her future life, Megan views herself, the world, and the future in a distinctive way, dominated by negative cognitive patterns. Megan worries about her future because she does not deserve to be a good mother, and she feels like a failure as a wife. That is the reason why her mind always looks at any situation in a negative triad. She also feels some effects of depression, such as affective responses, physiological responses, and behavioral responses that are still related to her depressive cognition mechanism.

ABSTRAK

Shulhiyah, Fina Makhlidatus (2021) *Depresi yang dialami Megan Hipwell dalam The Girl on the Train karya Paula Hawkins*. Skripsi. Jurusan Sastra Inggris, Fakultas Humaniora UIN Maulana Malik Ibrahim Malang. Dosen Pembimbing: Dr. Hj. Mundi Rahayu, M.Hum.

Kata kunci: Depresi, Kognitif, Triad Negatif

Depresi adalah gangguan mood yang sering ditandai dengan kesedihan yang berkepanjangan, perasaan bersalah dan perasaan tidak berarti, kehilangan nafsu makan, sulit tidur (insomnia), menarik diri dari orang lain, kecemasan, hasrat seksual, serta minat dan kesenangan dalam aktivitas sehari-hari. Depresi dapat memburuk dan bisa berlangsung lebih lama selama berbulan-bulan atau bahkan bertahun-tahun. Risiko buruknya dapat berpengaruh negatif pada kehidupan seseorang, bahkan hingga melakukan bunuh diri. Karena alasan itu, penelitian ini penting karena menganalisis masalah depresi, khususnya kognisi yang terkait dengan pemikiran negatif tentang diri, dunia, dan masa depan.

Penelitian ini menggunakan metode kritik sastra untuk menjelaskan dan menganalisis permasalahan (1) Apa penyebab depresi yang dialami Megan Hipwell dalam novel *The Girl on the Train* (2) Bagaimana dampak depresi yang dialami Megan Hipwell dalam *The Girl on the Train*. Data diperoleh dari novel berjudul *The Girl on the Train* karya Paula Hawkins. Teori yang digunakan dalam penelitian ini adalah teori kognisi depresi menurut Aaron Beck. Peneliti menggunakan pendekatan psikologis sebagai desain penelitian dalam penelitian ini.

Penelitian ini menunjukkan bahwa penyebab depresi yang dialami oleh Megan disebabkan oleh pikiran negatif atau cognitive triad melalui negatif triad meyakini tentang diri mereka sendiri, pengalaman di dunia, dan di masa depan. Pengalamannya di masa lalu menjadi mempengaruhi kehidupannya di masa depan, Megan memandang dirinya sendiri, dunia, dan masa depan secara ideosyncretic, didominasi oleh pola triad negatif. Megan khawatir tentang masa depannya karena dia tidak pantas menjadi ibu yang baik dan dia merasa gagal menjadi seorang istri. Itulah alasan mengapa pikirannya selalu melihat situasi apa pun dengan cara yang negatif. Ada juga beberapa efek depresi yang dirasakannya seperti respons afektif, respons fisiologis, dan respons perilaku yang masih berkaitan dengan mekanisme kognisi depresifnya.

المستخلص

الاكتئاب ميغان هيبويل في بولا هوكينز الفتاة على متن القطار. اطروحة. قسم الأدب الإنجليزي، 2021. شولها، فينا مخليداس مولانا مالك إبراهيم مالانج. المحاضر المشرف: الدكتور هج موندي راهايو، م. هم UIN كلية العلوم الإنسانية الكلمات المفتاحية: الاكتئاب، الإدراك، اضطراب الشخصية

الاكتئاب هو اضطراب مزاجي يتميز غالبًا بالحزن لفترات طويلة والشعور بالذنب ومشاعر عدم القيمة وفقدان الشهية وصعوبة النوم (الأرق) والانسحاب من الآخرين والقلق والرغبة الجنسية والاهتمام والسرور في الأنشطة اليومية. يمكن أن يتفاقم الاكتئاب وقد تعتبر لهذا السبب، يستمر لأشهر أو حتى سنوات. يمكن أن تؤثر المخاطر السيئة سلبيًا على حياة الشخص، حتى في حالة الانتحار. هذه الدراسة مهمة لأنها تحلل مشكلة الاكتئاب، وتحديدًا إدراك أرون بيك للاكتئاب. وفقًا لبيك يرتبط الإدراك الاكتئابي بالأفكار القطار. تم الحصول على السلبية عن الذات والعالم والمستقبل تستخدم هذه الدراسة أسلوبًا وصفيًا نوعيًا لشرح المشكلات وتحليلها. النظرية المعرفية للاكتئاب البيانات من رواية بعنوان الفتاة في القطار للكاتبة بولا هوكينز. النظرية المستخدمة في هذه الدراسة هي حسب أرون بيك. يستخدم الباحثون نهجًا نفسيًا كتصميم بحث في هذه الدراسة

تستخدم هذه الدراسة طريقة النقد الأدبي لشرح المشكلات وتحليلها. القطار. تم الحصول على البيانات من رواية بعنوان الفتاة في بيك. يستخدم الباحثون القطار للكاتبة بولا هوكينز. النظرية المستخدمة في هذه الدراسة هي النظرية المعرفية للاكتئاب حسب أرون بيك. نهجًا نفسيًا كتصميم بحث في هذه الدراسة

تظهر هذه الدراسة أن سبب الاكتئاب الذي تعاني منه ميغان هو الثالث المعرفي للاكتئاب. تجربتها في أخطاء الماضي لأن إهمالها تسبب في وفاة طفلها وفقدان شقيقها الأكبر وزوجها السابق، ميغان تنظر إلى نفسها والعالم والمستقبل بطريقة خفية، تهيمن عليها الأنماط المعرفية السلبية. ميغان قلقة بشأن مستقبلها لأنها لا تستحق أن تكون أمًا جيدة وتشعر بالفشل كزوجة. هذا هو السبب في أن عقله دائمًا ما ينظر إلى أي موقف بطريقة سلبية. هناك أيضًا بعض تأثيرات الاكتئاب التي يشعر بها مثل الاستجابات العاطفية والاستجابات الفسيولوجية والاستجابات السلوكية التي لا تزال مرتبطة بالية الإدراك الاكتئابي

TABLE OF CONTENTS

THESIS	i
STATEMENT OF AUTHORSHIP	ii
APPROVAL SHEET	iii
LEGITIMATION SHEET	iv
MOTTO	v
DEDICATION	vi
ACKNOWLEDGMENTS	viii
ABSTRACT	ix
TABLE OF CONTENTS	xii
CHAPTER I	1
INTRODUCTION	1
A. Background of the Study	1
B. Problem of the Study.....	8
C. Objective of the Study.....	8
D. Scope and Limitation	8
E. Significance of the Study	9
F. Definition of Key Terms.....	9
G. Previous Studies.....	10
H. Research Methods.....	12
1. Research Design	13
1. Data Source.....	13
2. Data Collection	13
3. Data Analysis.....	13
CHAPTER II	15
REVIEW OF RELATED LITERATURE	15
A. Psychology and Literature	15

B. Types of Depression.....	17
1. Normal Grief Reaction	17
2. Endogenous Depression	18
3. Neurotic depression	18
C. Theory of Depression.....	19
1. Behavioral Theory	20
2. Biological Theory	20
3. Psychoanalytic Theory	20
4. Cognitive Theory	21
5. Humanist Theory	21
D. Depressive Cognition.....	21
1. Cognitive Bias	24
2. Negative Self Schemas	26
3. Negative Triad	26
E. The Effects of Depression	29
1. Affective Responses	29
2. Physiological Response	30
3. Behavioral Response	31
4. Motivation Response	31
CHAPTER III.....	33
FINDINGS AND DISCUSSION.....	33
A. Causes of Megan’s Depression	33
1. Negative view of himself.....	34
2. Negative view about the world	36
3. Negative views about the future	40
B. Effects of Depression	44
1. Affective Responses	45
2. Physiological Response	50
3. Behavioral Response	52

CHAPTER IV	59
CONCLUSIONS AND SUGGESTIONS.....	59
A. Conclusions.....	59
B. Suggestions	60
REFERENCES	62
CURRICULUM VITAE	65

CHAPTER I

INTRODUCTION

This chapter provides background research that explains the reasons for choosing the topic. Then proceed with a statement of the problem and purpose of the topic. After that, it is continued with a description of the problem to be analyzed. The scope and limitations determine the study's boundaries, and the significance of the research will convey the benefits of learning. The research method provides clear information to the reader about the steps of data collection and analysis in this study. Finally, to make it easier for readers to understand the lesson, some key terms are provided in the last section of the sub-chapter.

A. Background of the Study

Depression is a mood disorder often characterized by prolonged sadness, feelings of guilt and feelings of meaninglessness, loss of appetite, difficulty sleeping (insomnia), withdrawal from other people, anxiety, sexual desire, and interest and pleasure in some activities. Some people also experience anxiety sometimes. According to Davidson et al (2006) Depression is often associated with other psychological problems, such as substance abuse, sexual dysfunction, panic attacks, and personality disorders.

A person who is depressed has difficulty understanding what they are reading and what others are saying, and they are filled with self-blaming thoughts. People who are depressed sometimes pay less attention to their appearance. They ignore hygiene and personal appearance and complain of various somatic symptoms without prominent physical disturbances (Simon et al. in Davidson et al., 2006: 372). One type of depression is depressive cognition. Depression theory of cognition proposes that

depression is associated with negative thoughts about oneself, the world, and the future.

According to Beck (1967) that the existence of depression is a result of the way a person thinks about himself. People with depression tend to blame themselves. Due to a cognitive distortion of themselves, the world, and their future, as a result of evaluating themselves and interpreting the things that happen, they tend to draw conclusions that are not enough and have opposing views. Aaron Beck developed a cognitive theory that initially focused on the depressive cognition and has expanded to other areas of psychology. He studied people suffering from depressive cognition and found that they negatively judged events. The cognitive triad is a triad of cognitive patterns that make individuals view themselves, their experiences, and their future in an idiosyncratic way, namely seeing themselves negatively, interpreting experiences negatively, and looking at the future negatively.

Many writers write novels using psychological perspective. *The Girl on the Train* written by Paula Hawkins who was born on August 26th, 1972. Paula Hawkins is a British author best known for her top-selling psychological thriller novel *The Girl on the Train* (2015). The novel debuted in the number one spot on The New York Times Fiction Best Sellers of 2015 list, which deals with domestic violence, alcohol, and drug abuse themes. Hawkins gives perspective about three different characters from relationship troubles (caused by three coercive or controlling men). The researcher chose this novel because of the way it was written, and the language was easy to understand, including the latest literary work (2015); therefore, it is still relevant to discuss. It has a unique storyline, complicated conflicts, and many moral messages.

In this novel, the three female characters have different problems. However, they are intertwined in the story. According to Rahayu (2010) women are happy, harmonious members of society, even when they are repeatedly beaten and barren from every voice in the communal decision-making process and are constantly berated in sayings and proverbs. It seems that in traditional wisdom to behave like a woman is to behave like a lesser being. Hawkins shows the stories about three women in the novel. The first main character is Rachel Watson, an alcoholic and under so much stress after divorced by her husband, Tom Watson. The next main character is named Anna Boyd, wife of Tom Watson, resulting from an affair. Anna Boyd hopes she can be happy after marrying Tom Watson and having children. Yet, her life is filled with worries. The last main character is Megan Hipwell, who has a bad past and a possessive husband.

Rachel, Anna, and Megan are characters who struggle with the problems of their lives. *The Girl on the Train* uses Rachel for the first of three protagonists and narrator. Hawkins shows a lonely woman into Rachel, unemployed woman with drinking alcohol and few attachments. Her ex-husband, Tom, left her a little over a year ago for another woman, and Rachel regularly hears people in her life describe her as a "desperate" alcoholic. Rachel and her ex-husband, Tom, struggled to conceive a child for years. Unable to live up to society's expectations of her becoming a mother, Rachel drinks to cheer herself up, often to the point of passing out. According to Rahayu and Aurita in Wang (2010), there are two types: the image of women in traditional culture. The first type is discriminated womanhood where men are always considered to have power over everything while women are considered inferior to men in everything.

Hawkins uses Megan to the second character and narrator. Megan seemed like a confident woman; However, in the past is full of trauma, loss, and dark memories. Since she was only 16 years old, she had to fend for herself, and society never protected her. She lost her brother named Ben, then she married Mac and lived together in a small and hidden place until their baby was born, but due to Megan's negligence her baby died and Mac left her. Megan starts her life again with Scott but she never feels happy and feels guilty all the time after what happened in the past, Megan vents her sadness by having an affair with Tom. In her dark past comes to light during an investigation into her disappearance, the detectives working on the case ultimately fail to prioritize Megan and suggest that her murder may be her fault. In other word, her rebellious and picky choices in the life she leads about a tragic ending. Hawkins shows how society has failed to do justice to Megan, both in life and in death.

Anna, Tom's new wife and the narrator of all three novels, show how society women against one another, forcing them to value approval and male friendship over female friendship. Such situations can put women in danger and leave them with little support. Anna remembers how nice it was to be "another woman" in the early days of her affair with Tom. Even though he knows he is married, he finds his attention thrilling and comes to see Rachel as the enemy. Indeed, when Tom left Rachel for Anna, Anna felt like she had won and the feeling of winning. Anna's character shows how women often internalize hatred and distrust of other women they see as competitors or rivals. This phenomenon can exacerbate women's isolation, vulnerability, and proximity to danger.

In this case, Rachel and Megan have the same problem after being abandoned

by their loved ones. However, they face different life problems. Megan has been hiding the wounds in her past for a long time. Rachel sees Megan as the perfect person, but Megan has ruined herself underneath it. She unlike babies because she accidentally killed her daughter, Libby, while asleep.

Moreover, she has abandonment issues because her first boyfriend, Mac, left her and never returned. Moreover, her older brother, Ben, died in an accident when they were teenagers. Nothing good has ever happened to Megan. Megan tends to run away from uncomfortable situations. However, she is also dependent on each other. This internal conflict causes her to make many bad decisions, such as cheating on her husband and getting pregnant.

Meanwhile, Rachel expressed her sense of loss by becoming an alcoholic after her divorce from her husband. Rachel's depression was apparent at first. However, it is rare to see a condition from Megan's past experiences that causes her stress for so long that her life is not going well after marriage. Thus the researcher will analyze the character of Megan Hipwell, who has psychological problems in her life, and this is also the effects on her current life. This bad past is the leading cause of Megan's depression. In this case, the author will describe the causes of depression experienced by Megan and the effects of depression.

Several studies inspired this research with the same object. First, Utami, P. (2017) *Love Affair Reflected in Paula Hawkins' The Girl on the Train (2015): A Psychoanalytic Study*. The researcher focuses on the three main female characters' psychological conditions and reveals the infidelity reflected Paula Hawkins' *The Girl on the Train*. Utami said the psychological condition of the three characters, Rachel, Megan, and Anna, affected the affair between the three characters, infidelity cases,

and the affair's impact.

Secondly, Ati, K.W. (2017) *The Motives of Murder Reflected in Paula Hawkins's The Girl on the Train Novel (2015): A Psychoanalytic Analysis*. The researcher analyzes the psychological conditions of the three main characters. Furthermore, it reveals the motives for the killing, which is reflected Paula Hawkins' *The Girl on the Train*. Ati found two cases of motives for murder in this novel, such as a Motif from Tom for killing Megan and a motive from Rachel and Anna for killing Tom.

Thirdly, Fauziah, K.M. (2018) *Psychological Dynamic of Female Characters Towards Marriage Problem in Paula Hawkins' The Girl on the Train*. The researcher focuses on characterizing each character and their psychological condition when they face problems in marriage. The results of this study indicate characterization changes in each character based on the problems that occur to them. For example, Fauziah found Megan was described as an unfaithful character, and then she turned into an honest character after she experienced problems in marriage.

Fourthly, Alfariji M (2019) *The Depression Experienced by Rachel Watson as the Main Character in Paula Hawkin's Novel The Girl on the Train*. The researcher focuses on the experience of depression experienced by the character Rachel. Researcher have found forms of depression experienced by Rachel, dysthymic, psychotic depression, and bipolar disorder. The researcher also revealed two factors that cause depression: physical and biological factors.

Lastly, other studies discuss the same theory. Fitriyani, D (2014) *Gejala Depresi Tokoh Tristan et Iseut: Sebuah Kajian Psikoanalisis*. The researcher classifies the symptoms of depression shown by Tristan's character through dialogue and

behavior into four manifestations: emotional, cognitive, motivational, and physical and vegetative manifestations. However, based on Fitriyani's research, she found that Tristan's character tends to show symptoms of depression, including emotional manifestations such as anger, sadness, despair, and crying.

Based on the previous studies that have been mentioned, most of the researchers discussed the three main characters in the novel, and some were more specific about Rachel's character. The researchers use the same novel namely *The Girl on the Train* by Paula Hawkins, by applying a different theory. The first previous study used the psychoanalytic theory of Sigmund Freud; the second study used the Psychoanalysis theory of Sigmund Freud, the third study used psychodynamic theory, the fourth study used psychoanalysis from the theories of Corri, Santrock, and Kaplan, and the last one with different objects but using same theories according to the cognitive of Aaron Beck. In this study, the researcher wants to examine *The Girl on the Train* by Paula Hawkins using a psychological approach using Aaron Beck's cognitive theory.

Paula Hawkins' *The Girl on the Train* was chosen as the subject of research in several of Paula Hawkins' works above because the main character in the story experienced several psychological problems, which affect her life. Rachel and Megan share the same sadness after being abandoned by their lover. However, they face different life problems. The researcher aims to choose the main character Megan over other characters because Megan has been hiding a wound in her past for a long time. Rachel sees Megan as the perfect person, but Megan has ruined herself underneath it. Megan tends to run away from uncomfortable situations, but she is also dependent on others. This internal conflict causes her to make many bad decisions, such as cheating

on her husband and getting pregnant.

Meanwhile, Rachel expresses her sense of loss by becoming an alcoholic after divorcing her husband. Rachel's depression was evident at first. However, it is rare to see a condition from Megan's experience that causes her to be stressed so long that her life does not go well after marriage. Thus, the researcher will analyze the character of Megan, who has psychological problems in her life, which is also the effect of her current life. In addition, in previous studies, the previous researcher has investigated Rachel's character using the psychoanalytic theory of Corri, Santrock, and Kaplan. Consequently, the researcher continued to examine Megan's character. This study uses the psychological approach of depressive cognition to examine the main character's psychology.

B. Problem of the Study

1. What are the causes of depression experienced by Megan Hipwell in Paula Hawkins' *The Girl on the Train*?
2. How are the effects of depression experienced by Megan in Paula Hawkins' *The Girl on the Train*?

C. Objective of the Study

1. To find out the causes of depression experienced by Megan Hipwell in Paula Hawkins' *The Girl on the Train*.
2. To find out the effects of depression experienced by Megan Hipwell in Paula Hawkins' *The Girl on the Train*.

D. Scope and Limitation

This research focuses on *The Girl on the Train* by Paula Hawkins from a

psychological perspective on Megan's depression. This study focuses on the causes of Megan's depression and the effects of Megan's depression in Paula Hawkins' *The Girl on the Train*. The researcher did not analyze some other aspects of the study, such as defense mechanisms on the main character. This study only limits to the cause and effect of Megan's depression.

E. Significance of the Study

The researcher contributes to the literature's theoretical and practical development in this study. Theoretically, this research is expected to contribute to literary study and be understandable for readers in analyzing literary works based on Megan Hipwell's Depression in *The Girl on the Train* by Paula Hawkins, especially in analyzing psychological approaches that focus on depression.

The researcher hopes to provide readers with a more comprehensive understanding of the methods for analyzing the causes and the effects of depression experienced by Megan Hipwell. The researcher also hopes that it can provide benefits and lessons for readers.

F. Definition of Key Terms

1. Depression

According to Beck and Alford (2009), the notion of depression is a psychological disorder characterized by deviations in feelings, cognitive, and individual behavior.

2. Cognitive

According to Beck (1967) thoughts effect how feeling, the way behavior and attitudes towards the environment.

3. Negative Triad

According to Beck (1976) the negative triad is negative thoughts about himself, negative about the world and negative about the future.

G. Previous Studies

This study provides several previous studies from the same field. The first research is a thesis entitled *Love Affair Reflected in Paula Hawkins' The Girl on the Train (2015): A Psychoanalytic Study* by Putri Utami (2017). This thesis analyzes the affair in Paula Hawkins' *The Girl on the Train*. This study describes the psychological conditions of the three main characters and reveals the affair reflected in Paula Hawkins' *The Girl on the Train*. The results of the study show differences in the psychological conditions of the three main characters, such as the psychological conditions of Rachel, Megan, and Anna. In addition, the researcher found infidelity between three characters, cases of infidelity, and the impact of infidelity.

The second research is a thesis entitled *The Motives of Murder Reflected in Paula Hawkins's The Girl on the Train Novel (2015): A Psychoanalytic Analysis* by Karlana Widya Ati (2017). This thesis aims to reveal the motive for the murder Paula Hawkins' *The Girl on the Train*. The author also describes the psychological condition of the three main characters and reveals the motives for the murders that are reflected *The Girl on the Train* by Paula Hawkins. The results of the study show the differences in the psychological conditions of the three main characters, such as the psychological condition of Rachel, a woman who is depressed and psychological deterioration, the psychological condition of Megan is a traumatic and seductive woman, and the psychological condition of Anna is an ordinary

woman. In addition, the researcher found two cases of motive for murder in this novel, such as Tom's motive for killing Megan and Rachel's and Anna's motive for killing Tom.

The third research is a thesis entitled *Psychological Dynamic of Female Characters Towards Marriage Problem in Paula Hawkins' The Girl on the Train* by Kun Mar'atul Fauziah (2018). This thesis analyzes the female characters in *The Girl on the Train* by Paula Hawkins. This thesis focuses on characterizing each character and their psychological condition when facing marriage problems. The results of this study indicate a change in the characterization of each character based on the problems that occur to them. For example, Rachel is a grateful and imaginative woman, but after she experiences problems in her marriage, her character becomes insecure, depressed, jealous, and obsessive, and her appearance becomes messy. Anna is described as a selfish and grateful character then, and after having problems in her marriage, she turns into a suspicious character. Megan is an unfaithful character and then turns into an honest character after experiencing marriage problems.

The fourth research is a thesis entitled *The Depression Experienced by Rachel Watson as the Main Character in Paula Hawkin's Novel The Girl on the Train* by Muhamad Alfariji (2019). This thesis is more specifically about Rachel Watson's character. The aim is to identify, analyze, and describe forms of depression, depression factors, and analyze the effects of depression depicted by Rachel Watson as the main character in Paula Hawkins' *The Girl on the Train*. The study results found that the forms of depression experienced by Rachel Watson in

The Girl on the Train are dysthymic, psychotic depression, and bipolar disorder. In addition, there are two types of factors that cause Rachel Watson's depression, namely physical factors and psychological factors.

The Last study is entitled *Gejala Depresi Tokoh Tristan et Iseut: Sebuah Kajian Psikoanalisis*. by Diana Fitriyani (2014). The author found several similarities: an analysis of the causes and symptoms of depression experienced by characters in a film and Aaron Beck's cognitive theory, which the author also uses as a theoretical basis. Using this theory, Fitriyani classifies the symptoms of depression shown by Tristan's character through dialogue and behavior into four manifestations: emotional manifestations, cognitive manifestations, motivational manifestations, and physical and vegetative manifestations. However, based on Fitriyani's research, she found that Tristan's character tends to show symptoms of depression, including emotional manifestations such as anger, sadness, despair, and crying.

Previous studies have analyzed Rachel's depression. For these reasons, the researcher wants to analyze Megan's depression. Besides Rachel, Megan is also described as a character who has problems with her mental condition. Megan is described as someone who experiences trauma that is not realized in an unpleasant situation. This unpleasant incident resulted from losing a loved one and her past mistakes, resulting in Megan having a lot of stress, anxiety, and worry about her future. Therefore, this study can provide new insights and further analysis of previous research to complement the topic.

H. Research Methods

In analyzing a novel, the researcher describes the research design, data sources, data analysis, and data collection.

1. Research Design

To study Paula Hawkins' *The Girl on the Train*, the researcher looked at literary works that used a literary method. In conducting this research, the researcher used literary criticism by explaining the results of reading, identifying, and analyzing data.

1. Data Source

The researcher uses the novel as the primary data of this research. *The Girl on the Train* by Paula Hawkins is a psychological thriller novel. *The Girl on the Train* debuted at number one on The New York Times Fiction Best Sellers list of 2015. Riverhead we published it on Januari 13th, 2015 and by Doubleday UK on Januari 15th, 2015, and the book contains 320 pages.

2. Data Collection

The data collection techniques used were textual observation, reading, and note-taking. First, the researcher read Paula Hawkins' *The Girl on the Train* to find out the general identification. Reading carefully is accompanied by the activity of analyzing sentences and paragraphs that contain cognition, recording data from reading results into a data book which in the form of direct quotes without changes from the novel. After collecting the data, the researcher organizes the data and selects the parts that are considered important that are used to answer the analysis.

3. Data Analysis

While all data has been collected, the researcher analyzes data collection such as classifying, finding similarities, and providing critical considerations. The researcher classified the data regarding the study problem to analyze the data. Identify and classify the causes and effects that emerge from Megan through the novel. After classifying the data, the researcher compares it with the theory of cognition. Then look for similarities between the novel's content and aspects of the causes and effects of depression according to cognitive theory. Therefore, the researcher can provide a critical assessment of whether the novel reflects the actual condition. Finally, the researcher concludes and re-examines whether the conclusion is appropriate enough to answer the problem that has been determined.

CHAPTER II

REVIEW OF RELATED LITERATURE

This chapter presents the results of a review of the literature related to the study, including Psychology and Literature, Types of Depression, Theory of Depression, Depressive Cognition, and The Effects of Depression.

A. Psychology and Literature

According to Kartono (1998) Psychology and literature have a deep relationship in human life. Both are concerned with human behavior, expression, thinking, and motivation. Kartono describes psychology as the science of human behavior (Kartono, 1998). Psychology, broadly defined, is scientific study of behavior, both observable external actions and internal thought (Wellek & Warren, 1970). Psychology can be used to explore and explain various things and phenomena of human life by applying psychological principles in literary works. For some conscious artists, psychology may have tightened their sense of reality, sharpened their powers of observation or allowed them to fall into what is patterned. yet, "in itself, psychology is a preparation for the act of creation, and in" the work itself, psychological truth is artistically valuable only if it enhances the coherence of complexity, in short; it is art (Wellek & Warren, 1970) Psychology and literature are analyses involving texts considering the relevance and role of psychological studies. Academic psychology began as a sort of literary study that involved reading and interpreting works of literature. Reading literature will perceive themselves by reflecting on the experiences of others through books. Also, understanding culture leads readers to learn about the bonds that unite people everywhere. people who come to understand and appreciate different cultures are more likely to realize that

people all over the world share the same emotions, experiences, and problems (Rahayu, 2009)

This study uses a psychological approach to analyze the novel because this study deals with psychological aspects. The literary, psychological approach is an approach based on the assumption that literature always talks about human life which consistently shows diverse behaviors (Semi, 1993). The psychological approach has many disorders caused by mental, behavioral, and social factors, such as personal experiences, trauma, conflicts, and environmental conditions. The psychological approach is a unique form of criticism because it refers to psychological theories in its interpretation of a text. Connecting the psychological and literary worlds brings a scientific aspect to literary criticism. Literary psychology studies the psychological conditions of writers, characters and readers of literary works. In general, it can be concluded that there is a close relationship between psychology and literature (Ratna, 2009). Literary works have the function of conveying the ideas or ideas of a writer of poetry, prose, and drama. These ideas can be in the form of social, political, cultural, and defense criticism related to the problems that exist around their place of residence. Efforts to express ideas or ideas through literary works can be said as creative efforts of a writer to invite the reader community to discuss the problems that are happening in life. (Wellek and Warren, 1970).

Wellek and Warren (1970), in *Theory of Literature*, explain that there are several definitions of psychology of literature based on the subject of research:

1. Psychology of literature that studies the author's psychology as an

individual. It means that a writer is a human being who cannot be separated from nature that has the desire and emotion. Based on his passion and emotional background, he can create a literary works.

2. Psychology of literature that studies the creative process. It means that this study looks at how the process of work can be made into a whole literary work.
3. Psychology of literature that studies the types and principles of psychology applied to literary works. This study looks at how topics and cases in psychology are applied to the character of literary works.
4. Psychology of literature that studies the influence of literary works on the reader. It means that this study sees the influence of literary work on the reader, whether it affect the way of thinking and the way of life of the reader or not.

Based on the above academic psychology approaches, this study is included in the psychological literature that studies the psychology of a person. In *The Girl on the Train* by Paula Hawkins, Megan has a bad experience in the past and hides her sadness even though she is married to Scott. The loss of the people she loves makes her think badly about her future.

B. Types of Depression

According to Yuliza in Hadi (2004), there are three types of depression.

1. Normal Grief Reaction

Sadness is a normal reaction to something 'is lost.' This type is also known as exogenous depression (active depression). This depression occurs due to internal

factors, generally such as a reaction to losing something or someone or the death of a loved one.

2. Endogenous Depression

The cause is coming from within but is not yet clear. It could be due to hormonal disorders or chemical disorders in the brain or nervous system. Often occurs in stages cycles.

3. Neurotic depression

This depression occurs after experiencing a sad event but one that is much more severe than usual. Depression at this stage occurs when reactive depression is not completed correctly and completely. Depression is a response to stress and anxiety that have accumulated for a long time. Patients can feel restless, anxious, and at the same time feel, depression.

According to Burn (2000), if depression occurs after a obvious stress, such as illness, death of a loved one, or a business setback, it is called a reactive depression. Sometimes it is difficult to identify the severe events that cause depression. Depression is often referred to as endogenous, because the symptoms that are raised are not clear. Maxmen classifies depression in four models: (1). Endogenous and reactive models of depression Endogenous depression is depression whose source is due to: biological factors while reactive depression is due to psychological factors. (2). Primary and secondary models of depression Primary depression is not preceded by an illness, whereas secondary depression is preceded by a physical illness or mental illness (3). Unipolar and bipolar models of depression. Bipolar depression has a history of episodes of mania or hypomania, whereas unipolar

depression has no history episodes of mania or hypomania. (4). Psychotic depression and neurotic depression Psychotic depression is severe depression whereas neurotic depression is a milder depression.

Based on the explanation above, it can be concluded that Types of depressive disorders can generally be classified There are two types of depression, namely unipolar depression and bipolar depression (Yuliza, 2015). Other types of depressive disorders are derivatives of the two types of depressive disorder mentioned above, which can be distinguished based on the severity, the variety of symptoms and the factors that cause it (Yuliza, 2015).

C. Theory of Depression

Depression is a feeling (affective) disorder characterized by a dysphoric effect (loss of excitement/arousal) accompanied by other symptoms, such as sleep disturbances and decreased appetite. Depression usually occurs when the stress experienced by someone does not go away, and the depression experienced is correlated with a dramatic event that has just happened or happened to someone (Lubis, 2009:13).

Rathus (Lubis, 2009:13) states that people who experience depression in most cases experience disorders that include emotional, motivational, functional, and behavioral movements and cognitions. According to Atkinson (Lubis, 2009:13), depression is a mood disorder characterized by hopelessness and heartbreak, excessive helplessness, inability to make decisions to start an activity, inability to concentrate, lack of enthusiasm for life, and always tense, and trying to kill himself.

According to Bhowmik (2012:37), depression is a brain disease. There are various triggers, including genetic, environmental, psychological, and biochemical

influences. Depression usually begins between the ages of 15 and 30, and it is much more common in women. In winter, some people experience the seasonal affective disorder. Anti-depressants and talk therapy are two effective therapies for depression, and most people do better when they use both. Depression is widespread, affecting about 121 million people worldwide.

From some of the definitions above, it can be concluded that depression is an individual's emotional state with feelings of sadness, hopelessness, constantly feeling guilty, and there is no excessive hope without any rational evidence. There are several theories about depression: behavioral theory, biological theory, stress theory, cognitive theory, and humanist theory.

1. Behavioral Theory

Learning theory assumes that depression results from an imbalance between behavioral output and reinforcement input from the environment (Nevid et al., 2005). Lack of reinforcement for one's efforts can reduce motivation and lead to feelings of depression..

2. Biological Theory

Based on the biological theory, two causes effect of depression: genetics and neurochemistry changes (Davidson et al., 2006). The neurochemical factors are as follows: Factor neurotransmitters: Of the biogenic amines, norepinephrine and serotonin are the two neurotransmitters that most play a role in the pathophysiology of mood disorders..

3. Psychoanalytic Theory

According to Freud (2005), the potential for depression appears in early

childhood. In the oral phase, the child may lack or be too fulfilled in his needs. Therefore he is fixated on this phase resulting independent individuals and low self-esteem. After losing a loved one, the hypothesis is that he identifies with that person as if to prevent loss. After a while, he became angry with himself, feeling guilty. This theory is the basis of the widely accepted psychodynamic view of depression as pent-up anger that attacks itself back (Davison et al., 2004).

4. Cognitive Theory

This cognitive-based theory of depression is most often used in research on depression. The cognitive approach has so far been very effective in treating depression. The theory states that someone who thinks negatively about himself will explore further that they make wrong interpretations and deviate from reality. One of the cognitive theories is Beck's theory of depression (Atkinson, 1991). The theory states that a person prone to depression has developed a general attitude to evaluate events in terms of negative and self-criticism.

5. Humanist Theory

The existential theory focuses on the loss of self-esteem as a significant cause of depression. Loss of self-esteem can be natural or symbolic, for example, loss of power, social status, or money. The humanistic theory emphasizes the difference between a person's self and real circumstances as a source of depression and anxiety. According to this view, depression occurs when the difference between the ideal self and reality is too significant (Nevid et al., 2005).

D. Depressive Cognition

One of the psychological theories that consider thought processes

contributing to depression is Aaron T Beck. The basis of this theory is the idea that the same experience can affect two people in different ways. This difference is caused by a person's perspective on an event (Beck, A. T., & Young, J. E, 1985). Beck says depression can be described as a cognitive triad of negative thoughts about oneself, the environment, and the future. A person who is depressed will make the wrong interpretation of reality negatively, namely focusing on the negative aspects of each situation and pessimistic and hopeless hopes about the future. A person who is depressed will associate his misfortune with a lack of self and a sense of inferiority. This situation causes a positive self-concept to be masked (Beck, A. T., & Young, J. E, 1985).

According to Beck (2005) developed cognitive theory with the idea that experiences experienced by an individual produce a cognition or thoughts. These cognitions are related to schemas, namely basic beliefs that continue to develop from the beginning of life, to create our judgments about the world and determine our emotional states and behavior. Beck believes that emotional disturbances are created by negative attitudes as well as distorted thinking (Beck, 2005). Viewpoints or interpretations of cognition often mistaken involve a harmful distortion of life experience, self-assessment negativity, pessimism, and hopelessness. This learned negative view subsequently causes feelings of depression (Kaplan, 1997). As a result, depressed always associated with cognitive distortions (Baron et al., in Ronen, 2004; Louis et al., 1996). Depression is preceded by confusion or disturbance in mind, which underlies the disorder in feelings. They expect more failure than success, tend to highlight and magnify loss and minimize the meaning

of success, and like to blame themselves alone in a situation that is less right (Atkinson et al., 1999). Besides, it is because of the lack of positive reinforcement to support this attitude.

Burn (1988) explains that not the actual event but self-perception results in mood swings. More emotions are caused by the way someone is looking at things. When an individual is sad, his mind will show a realistic interpretation of adverse events. In people with depression, thoughts that arise will always be illogical, twisted, not real, or simply false. This matters because their understanding of what happened is not correct, not based on objective facts, but more based on current emotions. If a sense of what is going on happens right, emotions or feelings will also be expected. Before someone can experience any event, he has to process it with his mind and give meaning to it; understanding comes before feelings.

Beck (Kendall et al., 1982) stated that the central aspect of depression is the wrong cognitive set. This cognitive system consists of three parts, namely: (1) Viewing ourselves negatively, the concept of low self, (2) Seeing the world negatively seems to be attacking him (offensive), (3) Looking at the future negatively.

The first cognitive system causes the mind to become unpatterned, thus perceiving all experiences in a negative form, someone who has depression always interprets relationship with the environment as a matter of concern. Life is seen as dependent and is a traumatic situation that the individual does not want to live. The second cognitive system causes someone always perceives himself as unfavorable. Individuals see themselves as always lacking, feeling unable, feeling not valuable,

and attribute experience worse due to incompetence physically, mentally, and morally. This matter causes the individual to reject himself (Beck, A. T., & Young, J. E, 1985).

The tendency to exaggerate the importance of small failures is an example of a mistake in thinking that Beck calls cognitive (Beck, A. T., & Young, J. E, 1985). Beck believes that cognitive distortions set the stage for depression when dealing with personal loss or adverse life events. Depressive disorders can be seen as activation of these three cognitive mechanisms, cognitive bias, negative schema, and negative triad. Beck identifies three mechanisms he thinks are responsible for depression:

1. Cognitive Bias

Beck found that depressed people were more likely to focus on the negative aspects of the situation while ignoring the positive. They are prone to distorting and misinterpreting information, a process known as cognitive bias. A cognitive bias is a worldview. Some systematic errors in reasoning that lead to wrong assumptions and misconceptions are called cognitive distortions (Beck, 1967). Further explains that there are seven cognitive errors found in depressed people, namely:

- a. Create a disaster or think of the worst-case scenario and outcome for most situations. It is a cognitive distortion in which a person tends to blow things out of proportion. In other words, they made things happen worse than they should. They always make problems more significant than life, which of course makes them very difficult to deal with.
- b. Selective abstraction consists of forming conclusions based on the details of an

event. In this case, other information is ignored, and the significance of the whole context is overlooked. The assumption is that the critical events are those that deal with failures and shortcomings.

c. Overgeneralization is holding extreme beliefs based on incidents and applying them inappropriately to different events. Thinking in a way that overgeneralizes means that one will often see one unpleasant event or event as evidence of all that is terrible and negative and a sign that now things will go wrong.

d. Magnification and reduction consist of perceiving a case or situation in a greater or lesser light than is feasible. A person may make cognitive errors and assume that even a tiny mistake in advising a client can easily create a crisis for the individual and result in harm.

e. Personalization is the tendency of individuals to attribute external events to their own, even when there is no basis for making these connections. A person engaged in personalization will automatically assume responsibility and blame for adverse events that are not under their control.

f. Labeling and mislabeling involve portraying a person's identity based on imperfections and mistakes made in the past and enabling them to define a person's true identity. Instead of saying they made a mistake, someone attaches a negative label to themselves: I am a loser. They might as well label themselves stupid or failure.

g. Dichotomous thinking (all or nothing) involves categorizing experiences in either extreme or reasonable terms. With such polarized thinking, events are labeled black or white terms. This distortion manifests as an inability or reluctance to see Gray

Shadows. In other words, one sees things from an extreme point of view –something fantastic or terrible.

2. Negative Self Schemas

Beck uses the term schema to refer to the primary structural components of the cognitive organization through which humans come to identify, interpret, categorize and evaluate their experiences (Beck, 1967). Schemas are 'packages' of knowledge that store information and ideas about ourselves and our world. These schemas are developed during childhood which may stem from negative experiences, for example, criticism from parents, peers, or even teachers. Individuals will tend to believe that they are lacking, incapable and worthless in seeing themselves. According to Beck, depressed people tend to develop experiences of failure, poverty, deprivation, and humiliation (Radiani, 2016).

Schemas are used to organize current knowledge and provide a framework for further understanding – predicting what will or should happen in the future. It affects attention and absorption of knowledge. It also represents core beliefs and values. Schemas are like lines of code that run through the brain, giving instructions on interpreting things, perceiving events, and reacting. People with negative self-schemas tend to interpret information about themselves negatively, which can lead to cognitive biases, as described above.

3. Negative Triad

Beck explains that thought processes are a contributing factor to depression. The central thought is that people with depression interpret events or experiences negatively. This results in a person experiencing an opposing view or schema of

himself, the world, and the future.

Negative attitudes and beliefs experienced by the subject caused by cognitive distortions, negative interpretations of experiences received, negative self-evaluation and negative expectations for the future. The source of the problem can come from the early development period as seen psychoanalysis (Beck, 2008). According to Fu'ady (2011) Cognition can effect feelings and actions and will be effect a person's physical condition. A negative cognition system will make individuals have negative patterns that are repeated, repetition of negative thinking patterns is what then makes individuals have negative beliefs. The existence of this negative belief is then locked and frozen into the cognition system which then affects the individual's physical condition and causes many diseases (Fu'ady, 2011). What is this negative view? Beck calls the negative cognitive triad, and there are three negative aspects (Davidson et al, 2006).

a. Negative view of himself.

When depressed, someone feels that he is useless and worthless. Furthermore, they see themselves as unpleasant and tend to reject themselves. They will criticize and blame themselves for the mistakes and weaknesses they made.

b. Negative views about the world

A person who is depressed feels unable to deal with demanding environments and feels that the world is unfair. Individuals see the world as a presentation beyond their capabilities and present obstacles to achieving goals. They will gather facts that match their negative thoughts, exaggerating the meaning of each loss and obstacle. People who are depressed are usually susceptible to any obstacles in their activities to achieve their goals.

c. Negative views about the future

Someone who is depressed will feel pessimistic about the future. Anticipation of the future is usually an extension of his view of the current situation. If these depressed individuals perceive themselves as rejected or weak, then they describe the future as someone who is rejected or weak. For example, depressed individuals view themselves as powerless, worthless, and inadequate. They interpret events in the world unrealistically, cruelly, and relentlessly, and they see the world as an insurmountable obstacle. Finally, they see the future as entirely hopeless because their helplessness will prevent their situation from improving.

According to Beck, A. T., & Young, J. E (1985), individuals who tend toward depression show depressogenic schemata. These depressogenic schemata are latent and, when activated by an event that emphasizes, lead to a deviation in the mindset, which will lead to depressive symptoms. In people with depression, information or incoming stimuli are processed distortedly, and they tend to conform to their negative self-schema. Some stressful or stressful events can revive the belief in the loss that once was experienced in the past.

The conclusion from Beck's view is that depression is a series of related stimulus-cognition-response and forms a kind of stimulus-cognitive-response network in the human brain. Cognitive processes will be the determining factor in explaining how humans think, feel, and act. Humans have the potential to absorb rational and irrational thinking. This irrational thinking can cause psychological disorders. In depressive disorders, cognitive factors play a decisive role. Cognitive acts as an intermediary for events experienced with depressive symptoms. Cognitively depressed sufferers have negative thoughts about themselves, the

environment, and the future therefore it can be affected affective, behavioral, and physical factors.

E. The Effects of Depression

Depression as an individual condition that feels so depressed that her life seems meaningless and hopeless (Beck, A. T., & Young, J. E, 1985). That is, depression is also a complex disorder that includes disorders of affect, cognition, motivation and behavioural components. McDowell & Newel (1996) defined depression as an abnormal state of the organism manifested by signs of effects such as decreased subjective mood, pessimistic and nihilistic attitude, loss of spontaneity and vegetative symptoms (such as weight loss), sleep disturbances. If this condition is not immediately addressed, the level of depression experienced by individuals will increase.

Concentrating on their personality can be tiring for people with depression, and they cannot easily understand what they are reading and what people tell them. Every moment becomes very heavy, and their heads continue to be filled with thoughts of self-blame. People who are depressed can neglect personal hygiene and appearance and complain of various somatic symptoms without obvious physical disturbances (Simon et al. in Davidson et al., 2006:372). Very discouraged and completely devoid of hope and initiative, they feel worried, anxious and pessimistic most of the time. According to Beck and Young (1985) there are four kind responses toward depression.

1. Affective Responses

Affective responses are expressed in the form of emotions: feelings of sadness, anger, anxiety, low self-esteem, helplessness, apathy, feeling guilty and

useless, and emotions are described by type, duration, and intensity. Varcarolis and Halter (2010) state that effect is an attitude that is displayed as a reflection of a person's internal condition and is objective with reflections that appear in the form of feelings of hopelessness and disappointment; sad facial expressions; weak posture, monotonous; and limited response. Based on this, it can be concluded that the affective response to depression is in the form of emotions that are expressed in various types, which are negative.

2. Physiological Response

Depression is a nonspecific and complex response of the human body subject to stress, which responds to adaptive functions. It is described as generalized anticipation of adaptation (Selye, 1950) and is divided into three stages: the initial alarm stage, followed by the stress resistance stage, which progresses and the human body must adapt, and the final stage of recovery. A stressor characterizes any situation that activates a stress pathway, regardless of its nature, depth and duration (Selye, 1950). a person will be forced by changes in the environment, or generated automatically by negative influences or valence thoughts, especially anxious thoughts. Physiological response reflects the interaction of several neuroendocrine axes involving hormones and other neurotransmitters in the brain. Physiologically, individuals with depression usually complain of abdominal pain, anorexia, back pain, chest pain, constipation, dizziness, fatigue, headaches, insomnia, menstrual changes, nausea, frigid, overeating, impotence, and fatigue.

When properly regulated (eustress), stress expresses physiological mechanisms managing acute and chronic biological costs. A burnout situation will

occur if the stressor is too intense and/ or too long, or if the individual's capacity to respond to stress is not adjusted (distress). There is strong inter-individual variability in psychobiological reactions to stressors, and it is identical within the same individual for physical or psychological stressors (McEwen, 2007). The stress response, whatever the stressor, forms part of the mundane body whose boundaries are influenced by the genome and history of the subject. The factors inherent in each of these subjects are endogenous limitations, which reveal a more or less greater efficiency of biological systems to cope with the demands imposed by stressors.

3. Behavioral Response

Behavioral responses are the result of physiological and emotional responses. Describes four phases of an individual's behavioral response to stress, namely: (1) behavior changes a stressful environment; therefore, individuals can be free from it; (2) behavior that can make the personal changes to the external environment; (3) the intrapsychic behavior that enables the individual to withstand the surge of unpleasant emotions; and (4) intrapsychic behaviors that help individuals readjust internally. Behavior in depression is displayed in various responses due to a combination of physiological and emotional. Individuals with depression typically display aggressive behavior, agitation, changes in activity level, intolerance, lack of spontaneity, high dependence, self-care deficits, social isolation, frequent crying, and withdrawal (Selye, 1950).

4. Motivation Response

What is meant by the motivational aspect here is a change in motivation,

such as lack of motivation or finding it difficult to carry out daily activities, or even excessive laziness to get out of bed. This change in motivation also causes a lack of interest in activities in a social environment, even in fun activities. It will also cause a decrease in interest in sex and do not respond when there is praise or reward (Selye, 1950).

CHAPTER III

FINDINGS AND DISCUSSION

In chapter III, the researcher presents the research results and the discussion. The researcher used the object of *The Girl on the Train* by Paula Hawkins. The research results on depressive cognition experienced by Megan in *The Girl on the Train* used Beck's cognitive triad of depression. The discussion of research results is adjusted to formulate the problem and research objectives. The research results are then displayed with quotes taken from *The Girl on the Train* by Paula Hawkins, as well as the result of the researcher's analysis of these quotes. The results of the research are explained in the discussion chapter.

A. Causes of Megan's Depression

Based on the theory causes of depression, according to Beck, A. T., & Young, J. E (1985), depressive cognition is the leading cause of depression or exacerbates and maintains the condition. Thus, a person who has a negative view of himself, the world, and the future is more likely to suffer from depression than a person who has a more positive outlook.

Beck explains that depressed individuals have negative views about themselves, their world, and their future (Beck, 1967). Negative is a view that defines as the unfavorable triad: Negative thoughts about ourselves, Negative thoughts about the world, Negative thoughts about the future. This individual interpretation of events can cause a person to become depressed.

In *The Girl on the Train* by Paula Hawkins, Megan Hipwell lost her brother. After the grief of losing her brother, Megan meets a man named Mac, and they live together. However, the presence of their baby named Libby makes them often

quarrel and make mistakes until Libby dies. After the baby died, Mac disappeared without a word. Because of events in the past, Megan blamed herself. Her world and future are viewed negatively, which causes her to experience depressive cognition.

Megan's negative bias is when she blames herself for past events, remembers past events and regrets what happened. Starting losing Ben became the starting point of her sadness. After that, she lost her baby and Mac. The cause of this loss Megan kept blaming herself. Before losing Ben, Megan thought her life was fine. However, after the incident, Megan felt confused.

According to Beck, the existence of depressive cognition disorders is the result of a person's thinking about himself (Beck, 1976). Depressed people tend to blame themselves, and that is because of the cognitive distortion of themselves and their environment. In evaluating themselves and interpreting what happens, they tend to draw inadequate conclusions and have negative views (Lubis, 2009) and there are three negative aspects.

1. Negative view of herself

In this novel, Megan, the main character, has a psychological problem, and she is Scott's wife. Megan once owned a gallery. After that, the gallery was closed, and her life was boring just sitting at home. The incident in the past made Megan not want to have children. Therefore her husband suggested she become a babysitter for her neighbours named Tom and Anna. Megan felt disinterested in the job and quit.

Megan often cannot sleep, thinks about her past, and misses Ben. Her sadness for losing Ben continues; with this, Megan is not satisfied with her current life. Her

sadness at losing her brother made her not enjoy life and regret her actions in the past, and this is shown in the quote below:

“I want to run. I want to take a road trip, in a convertible, with the top down. I want to drive to the coast – any coast. I want to walk on a beach. Me and my big brother were going to be road trippers. We had such plans, Ben and I. Well, they were Ben’s plans mostly – he was such a dreamer. We were going to ride motorbikes from Paris to the Côte d’Azur, or all the way down the Pacific coast of the USA, from Seattle to Los Angeles; we were going to follow in Che Guevara’s tracks from Buenos Aires to Caracas. Maybe if I’d done all that, I wouldn’t have ended up here, not knowing what to do next. Or maybe, if I’d done all that, I’d have ended up exactly where I am and I would be perfectly contented. But I didn’t do all that, of course, because Ben never got as far as Paris, he never even made it as far as Cambridge. He died on the A10; his skull crushed beneath the wheels of an articulated lorry.”
(p.30)

This quote shows that, even though the events of Ben's death are very long time ago, her regrets and sorrows continue to this day. Megan sees her life as chaotic and cannot think positively; therefore, bad thoughts often arise and make her often wake up at night. She is married to Scott, who loves her very much. However, Megan still imagines what happened in the past with Ben.

“I remember screaming at him to turn the light off. I didn’t want to see; I didn’t want to look at her like that. I don’t know – I don’t know what happened then. He was shouting at me, he was screaming in my face. I gave her to him and ran. I ran out of the house into the rain, I ran to the beach. I don’t remember what happened after that. It was a long time before he came for me.” (p.210)

The data above shows that when Megan lost her baby, she felt hopeless and left everything to Mac. Megan ran into the water, in this case showing her helplessness and regretting her actions. In this incident, Megan negatively convinced herself that she felt like a failure as a mother. While according to Davison G Neale (2002) explains that depression is an emotional state characterized by intense sadness, feelings of worthlessness and guilt, and withdrawal from others. This deep sorrow continued for a long time.

“In the early days, I used to see him all the time. Like, in the street, or I’d see a man in a bar and be so sure it was him that my heart would start racing. I used to hear his voice in crowds. But that stopped, a long time ago. ‘Now – I think he might be dead’” (p.211)

The data above shows that she was telling her experience to Dr Kamal. Megan says she has been looking for Mac for a long time and cannot find it. Therefore Megan thinks Mac is dead. Megan's negative thoughts are due to Mac's absence in her life, and Megan has been waiting for a long time and cannot find Mac. Meanwhile, according to Beck, depression results from the way a person thinks about her. The mistake of thinking here is to be a cognitive triad.

“It was the first time it had happened since she was born – the first time he’d just gone off and left me. She was just a few months old. The roof was leaking. I remember that: the sound of water dripping into buckets in the kitchen. It was freezing cold, the wind driving off the sea; it had been raining for days. I lit a fire in the living room, but it kept going out. I was so tired. I was drinking just to warm up, but it wasn’t working, so I decided to get into the bath. I took Libby in with me, put her on my chest, her head just under my chin.’ The room gets darker and darker until I’m there again, lying in the water, her body pressing against mine, a candle flickering just behind my head. I can hear it guttering, smell the wax, feel the chill of the air around my neck and shoulders. I’m heavy, my body sinking into the warmth. I’m exhausted. And then suddenly the candle is out and I’m cold. Really cold, my teeth chattering in my head, my whole body shaking. The house feels like it’s shaking too, the wind screaming, tearing at the slates on the roof” (p.169-170)

After their baby was born, their bickering continued. Mac leaves Megan and the baby. After that, bad things started happening. Because of negligence, Megan made her baby lose her life. After that, Megan regretted it for the rest of her life and will remember this incident for the rest of her life. This incident made her also blame herself. However, this incident is not entirely her fault. Because of the emotions of sadness that Megan experiencing, she continues to remember what happened and feels like she failed to be a good mother.

2. Negative view about the world

According to Beck, depressed people have a negative self-scheme, which may stem from negative experiences, negative beliefs about the environment, such as constant exposure to failure and loss and demands from the environment that is impossible to achieve. This idea is defended by the data below

“I miss him every day. More than anyone, I think. He’s the big hole in my life, in the middle of my soul. Or maybe he was just the beginning of it. I don’t know. I don’t even know whether all this is really about Ben, or whether it’s about everything that happened after that, and everything that’s happened since. All I know is, one minute I’m ticking along fine and life is sweet and I want for nothing, and the next, I can’t wait to get away, I’m all over the place, slipping and sliding again.”
(p.30)

When Megan misses Ben, she begins to recall some of her memories. Apart from blaming herself. She also thought about the cause of the chaos all this time. Megan feels that she is the cause of the chaos in her own life, she keeps remembering herself as a bad person. These bad thoughts continued to effect, to blame herself. The fact is that negative thinking is not balanced with positive thinking. Although her life is getting better, Megan never feels comfortable and looks forward to a good future. Depression that is preceded by a disturbance in her thoughts then underlies the disturbance in her feelings. They expect failure more than success, tend to accentuate and magnify failure and minimize the meaning of success, and blame themselves for inappropriate situations (Atkinson et al., 1999). In addition, the lack of positive reinforcement also supports this attitude.

“I’d just walk around those dark rooms and I’d hear her crying, I’d smell her skin. I saw things. I’d wake in the night and be sure that there was someone else – something else – in the house with me. I thought I was going mad. I thought I was going to die. I thought that maybe I would just stay there, and that one day someone would find me. At least that way I wouldn’t have left her.” (p.210)

The data above shows that Megan is in a dangerous state of staying awake

with her baby. Megan almost gave up, thinking it was over. This fear of something happening is the result of negative thinking. She tried to survive with negative feelings. In this defence, she felt she failed. This evidence is in according to Santrock (2003) explains the term depressed mood when a person experiences sadness and several other negative affections in a not too long period because she failed to carry out certain tasks. Depression shows symptoms such as the emergence of behaviours and emotions that reflect negative affect.

“We were both so stupid,’ I tell him. ‘We didn’t really even acknowledge what was happening, we just carried on. I didn’t go to see a doctor, I didn’t eat the right things or take supplements, I didn’t do any of the things you’re supposed to. We just carried on living our lives. We didn’t even acknowledge that anything had changed. I got fatter and slower and more tired, we both got irritable and fought all the time, but nothing really changed until she came.” (p.168)

The data showed instances in the past when Megan and Mac had a hard time. Their unplanned pregnancy makes it difficult for both of them. They both do not even care about the baby's condition when it is still in the womb. The two of them are often not objects. When Megan was pregnant, she did not get a comfortable space, and this was also stressful during pregnancy. They do not do the things people do when she is pregnant. The incidents like this continued until their baby was born.

“But in the end I didn’t have the courage to stay. I think I waited about ten days, and then there was nothing left to eat – not a tin of beans, nothing. I packed up my things and I left.” (p.211)

The data above shows that Megan has tried to survive to stay, but the circumstances do not support her to stay, and she chooses to give up and leave. While surviving this, Megan hoped that something would help her, but Megan could not do this; therefore, she made her leave. This evidence is in according to Kendall et al. (1982), depression results from previous experiences with uncontrolled

aversion conditions. The experience of helplessness causes individuals to be unable to control their lives, resulting in apathy and a depressive lifestyle. Besides, after a few years, Megan did not see Mac again. This past incident has not been resolved, thus making Megan blame herself and continue to think negatively. This idea is evidenced in the quote below:

“Did you try to contact him?” I shook my head. ‘No. I was too frightened, at first. I didn’t know what he would do if I did get in touch. And I didn’t know where he was – he didn’t even have a mobile phone”
(p.211)

In the quote, Megan rejects the suggestion from Dr Kamal to call or meet with Mac to sort things out. Megan was afraid to see Mac because she felt guilty about what happened earlier. Even though the incident at that time was not entirely Megan's fault, individuals with depression have low self-esteem, pessimism, self-blame, difficulty making decisions, and errors in assessing their physical appearance. In childhood and adolescence, depressed people learn through the loss of a parent or loved one, sad events, peer rejection, teacher criticism, parental depression and the emergence of negative schemes. This negative scheme will be active if the situation is negative. The new one she enters is similar to the state she was in when she learned the scheme and is reinforced by illogical errors, resulting in a breakdown of reality. Negative schemas about oneself are always reminiscent of one's worthlessness, self-blame due to arbitrary conclusions, selective abstraction, over-generalization, exaggeration and underestimation (Davidson et al, 2006). In addition, this also be proven in the quote below.

“... I can’t shift the blame on to him. This is one thing I have to take as my own.” (p.212)

The quote above shows that Megan said she could not blame Mac for what

had happened and blamed herself. They fought before the baby died, and Mac left Megan and the baby. After the baby died, Mac also left Megan. However, Megan assumes everything that has happened is the result of her fault. The habit of having negative thoughts like this further adds to and expands the negative experience of the individual who is depressed, and they will blame themselves more than they should. This evidence is in according to Louis et al. (1996), based on the results of their research, stated in their conclusion that depression is correlated with the appearance of distortions in individual cognition. A person who suffers from depression usually always insults himself and feels guilty because of many shortcomings.

“We were both so stupid,” I tell him. “We didn’t really even acknowledge what was happening, we just carried on. I didn’t go to see a doctor, I didn’t eat the right things or take supplements, I didn’t do any of the things you’re supposed to. We just carried on living our lives. We didn’t even acknowledge that anything had changed. I got fatter and slower and more tired, we both got irritable and fought all the time, but nothing really changed until she came.” (p. 168)

The data shows that when Megan and Mac had a hard time, Megan was pregnant, and they were not planning a pregnancy in the past. As a result, it makes it difficult for both of them. Megan and Mac do not pay attention to their baby's condition, which also makes Megan and Mac often fight. When Megan was pregnant, she did not get a comfortable space, which made her stressed during pregnancy. They also did not do the things that people do when pregnant. This kind of incident continued until the baby was born.

3. Negative views about the future

Aaron Beck's cognitive theory of depression links the development of depression to the adoption of a negatively distorted way of thinking early in life.

This concept is known as the 'cognitive triad of depression. Aspects of the triangle are a negative view of oneself, a negative view of the environment and a negative view of the future. One cognitive distortion associated with depression is hasty in making conclusions, forming negative interpretations of events despite a lack of evidence. Beck explains that depressed individuals have negative views about themselves, their world, and their future (Beck, 1967). Negative is a view that defines as the negative triad: Negative thoughts about yourself, Negative thoughts about the world, Negative thoughts about the future. This individual interpretation of events can cause a person to become depressed (Beck, 1967).

From the explanation above, it can be related to the quote from the following data, Megan feels that she is not capable of being a good wife for Scott. What happened in her past had a negative impact on her future. As a result, she gave up on being a better wife. Even though the events of the past, she cannot fix it when she married Scott. In this case, Megan's negative thoughts have a bad impact on her future.

“I’ve given him cause in the past and probably will again. I am not a model wife. I can’t be. No matter how much I love him, it won’t be enough.” (p.54)

After being married to Scott for a long time, Megan did not want to have children after the events in the past. Even though Scott wanted children, Scott never knew what happened to Megan's past. Scott also suggested that Megan be her neighbour's babysitter. Therefore, Megan had the desire to have a baby. The quote shows that events in the past have influenced Megan to this day. Negative thoughts blame yourself for being the cause of depression. These thoughts result in negative

thinking in the future, assuming mistakes will happen again. However, Megan does not view her mistakes as learning as negative thoughts that she cannot fix in the future. Stated that those who are depressed show low self-control, namely negative self-evaluation and low-performance expectations, like punishing themselves and giving little rewards to themselves, as Beck (1976) and (Santrock, 2003) argue that individuals who experience depression because at the beginning of their development they acquire cognitive schemas with characteristics such as low self-assessment and lack of confidence about their future. The habit of having negative thoughts like this further adds to and expands the negative experience of the individual who is depressed, and they will blame themselves more than they should. This idea is presented in the quote below.

“I’m scared,” I tell him. “What if I do it all wrong again? What if there’s something wrong with me? What if things go wrong with Scott? What if I end up on my own again? I don’t know if I can do it, I’m so afraid of being on my own again – I mean, on my own with a child ...”
(p.280)

In the quote, Megan does not believe in her future, and fear and anxiety from events in the past make her unable to make choices and her future. According to him, the mistakes he had made could be repeated. Beck formulated cognitive theories for depressive disorders and conducted clinical observations and empirical studies of the thoughts and beliefs of people with depression. Beck notes that a negative view of themselves characterizes the mindset of people who are depressed, others and their environment. Beck states that these negative thoughts result from bias in the information process which ultimately leads to biased conclusions.

“I don’t say anything, but I can’t help wondering whether it is, because if I close my eyes I can conjure up the feeling that comes to

me when I'm on the edge of sleep, which jolts me back into wakefulness. It's the feeling of being alone in a dark house, listening for her cries, waiting to hear Mac's footfall on the wooden floors downstairs and knowing that they're never going to come." (p.281)

In the quote above, Megan is thinking about everything she has done so far in her life. She thought everything she did was failure, useless, death. She blamed herself. She did not think of any other positive things she might have done either. She only saw a negative view of herself. Because of that view, she thought she would not be a good wife and mother. She already saw herself as a failure, and it was impossible to have such a good life in these few years. That means she blames the future. Megan saw the things that happened because of her mistakes in the past. She felt herself a failure. It is how Megan blames the world.

"I lay there and I thought of what that teacher said, and of all the things I'd been: child, rebellious teenager, runaway, whore, lover, bad mother, bad wife. I'm not sure if I can remake myself as a good wife, but a good mother – that I have to try." (p.282)

The quote shows that Megan is not sure about her future. However, this uncertainty she tried to fix. From the very beginning, these mistakes in the past resulted in negative thoughts about the future that would not necessarily happen. Although she was used to blaming herself and finding those negative thoughts at first, Megan has made her choice and is trying to be a good mother.

Because Megan sees herself, the world, and her future, she believes she will fail to make her suffer from cognition depression. The sight made her always sad, annoyed, insecure, and lost interest in everything. When depressed, a person feels useless and useless, and also, she is afraid that she will not succeed in life. Analysis of the cognitive elements of Megan's depression showed that the wrong thinking that prevented Megan from thinking realistically could be a factor in her depression.

In contrast to people who are not depressed. She still thinks optimistically in a realistic way, and it made her feel worried about her situation until she realized she was depressed. The negative triad is Megan's way of seeing herself, the world and the future, mostly feeling fear, worry, and failure for everything she has done. Without seeing the good side, she might have other than she did not notice.

Based on the analysis above, it can be concluded that depression is an abnormal individual condition caused by the gap between expectations and reality in life, where a person has negative feelings (such as withdrawing from others, pessimism, guilt, and worry). Also, Megan does not show her motivation to do better or think positively. Individuals with low motivation and fear of failure, their minds are always filled with the fear of failure. They see their future as pessimistic, which they see only as a possibility of failure. Her self-interpretation is negative, pessimistic, afraid of failure, and has no desire to succeed. Thoughts about possible failure and pessimism can lead to depression.

B. Effects of Depression

Rathus (1991 in Lubis, 2009:13) states that people with depression generally experience disorders that include emotional states, functional motivation, and cognition. According to Atkinson (1991 in Lubis, 2009:13), depression is a mood disorder characterized by hopelessness and heartbreak, excessive helplessness, inability to make decisions to start an activity, inability to concentrate, and lack of enthusiasm for life, always tense, and tried to commit suicide. According to Satriawan and Rahayu (2020) the response to individual memories that happen because of the chemical changes inside someone's brain after experiencing threatening events. this can be subject to changes in individual

feelings, habits, and thoughts. Thus it can be said that depression is a mood disorder characterized by depression and sadness that is deep and continuous until the loss of enthusiasm for life and a sense of hopelessness.

Megan's depression shows that faulty thinking that keeps Megan from thinking realistically could be a factor in her depression. In contrast to people who are not depressed, they can still think optimistically in a realistic way. Megan's negative schema made her worry about her situation until she realized she was depressed. The negative triad is Megan's way of seeing herself, the world and the future, mostly feeling afraid, worried, and failing for everything she has done. She might have other than she does not realize without seeing the good side.

1. Affective Responses

Affective responses are expressed in the form of emotions: feelings of sadness, anger, anxiety, low self-esteem, helplessness, apathy, feeling guilty and useless, and emotions are described by type, duration, and intensity. Varcarolis and Halter (2010) state that effect is an attitude that is displayed as a reflection of a person's internal condition and is objective with reflections that appear in the form of feelings of hopelessness and disappointment; sad facial expressions; weak posture, monotonous; and limited response. Some of the emotional changes that may be experienced by individuals with depression, namely feelings of sadness, negative feelings towards themselves, feelings of dissatisfaction, loss of emotional attachment to others, increased intensity of crying, and loss of sense of humour. These changes in emotions can usually cause a person to cry often and be irritable, and always feel restless or lose consciousness.

As the individual's depression worsens, these increasingly become monotonous and unpleasant. Beck also found that those who suffer from depression tend to concentrate on the negative side of a situation, thus completely ignoring the positive.

“But even if he could tell someone, I don't think he would. I trust him, I really do. It's funny, but the thing that's been holding me back from telling him everything is not the fear of what he'd do with it, it's not the fear of judgement, it's Scott. It feels like I'm betraying Scott if I tell Kamal something I can't tell him. When you think about all the other stuff I've done, the other betrayals, this should be peanuts, but it isn't. Somehow this feels worse, because this is real life, this is the heart of me, and I don't share it with him.” (p.63)

The data above shows that, as a result of the events she has experienced, Megan shuts herself off and hides her sadness and guilt. As a result of this self-blame, Megan becomes reluctant to share their problems, including her husband, Scott. The fear of this mistake has limited her confidence and also the people closest to her.

“... It matters how they make me feel. Stifled, restless, hungry. Why can't I just get what I want? Why can't they give it to me? Well, sometimes they do. Sometimes all I need is Scott. If I can just learn how to hold on to this feeling, this one I'm having now – if I could just discover how to focus on this happiness, enjoy the moment, not wonder about where the next high is coming from – then everything will be all right.” (p.63)

The data above shows that Megan feels uneasy and cannot enjoy her life. The result of the past makes Megan feel unhappy enjoying her life and is still burdened by her past. Even though this incident happened long ago, her sadness continued until she married Scott. The fact is that when the events in the massacre had not happened, Megan was still able to enjoy her life after Ben's death. However, after the death of her baby and the abandonment of her loved ones, her emotional changes

occur. That is, depression affects a person's emotions.

"I know. I know that. But I can't start over with someone else. I can't. We got so far. We were so close. I just have to tell you. Just once. And then I'll be gone, I promise. I won't ever bother you again." (p.165)

The data above shows that Megan told the past incident to her therapist, but she made a mistake and unkind action toward her therapist, kissing her therapist without consent. Because of this, Dr Kamal decided to stop being Megan's therapist. It is a problem for Megan. At first, Megan was very difficult to start telling her experiences in the past to anyone. However, she managed to tell Dr Kamal. After the mistake she made, Megan regretted her actions because she had not yet reached the end of the story; because of this, Megan did not have the confidence to tell other people, including her husband. This unconfident attitude, because they see themselves negatively and completely blame themselves; consequently they are afraid of not being accepted by others.

"I can't. What if he still hates me? What if it just brings it all back, or if he goes to the police?" What if – I can't say this out loud, can't even whisper it – what if he tells Scott what I really am?" (p.212)

People with negative self-schemas tend to interpret information about themselves negatively. Megan could not think positively. The impact of this past incident made Megan no longer believe in good things. She is not sure to start anything because she sees herself badly and is not confident. As a result of blaming herself, Megan has a hard time believing in herself. According to her, everything that happened in the past was caused by his fault. This bad belief becomes an effect for Megan from her experience.

"I can't hate her, but she scares me. I'm afraid of what she'll do to me, or what I'll do to her. It's that fear that woke me just after five this

morning ...” (p.279)

New problems came when Megan was pregnant with the fetus. From the previous story, Megan does not want to have children because of the trauma of her past events. The data shows that Megan is already pregnant with her baby. The data also shows that Megan is afraid of the presence of her baby. She is worried about making similar mistakes in the past, and she is not ready to start again. As a result of past events, Megan is afraid to start new things when she has children.

“I go after him, walking quickly at first and then running, and when I get close enough I shove him in the back. I’m yelling at him, screaming, trying to scratch his fucking smug face and he’s laughing, fending me off with ease. I start saying the worst things I can think of. I insult his manhood, his boring wife, his ugly child.

I don’t even know why I’m so angry, because what did I expect? Anger, maybe, worry, upset. Not this. It’s not even rejection, it’s dismissal. All he wants is for me to go away – me and my child – and so I tell him, I scream at him, I’m not going away. I am going to make you pay for this. For the rest of your bloody life you’re going to be paying for this.” (p.299)

Having made a good decision, she discussed it with Tom. However, what she was expecting did not match Tom's answer. Therefore she was angry, disappointed and shouted at Tom. Megan vented her emotions, and she did not accept Tom's answer. Megan started to do good things and try to correct her past mistakes. However, unknowingly, Tom destroys everything.

“I thought about him leaving in the middle of the night, telling me, once again, that this was the last time, the very last time, we can’t do this again. He was getting dressed, pulling on his jeans. I was lying on the bed and I laughed, because that’s what he said last time, and the time before, and the time before that. He shot me a look. I don’t know how to describe it, it wasn’t anger, exactly, not contempt – it was a warning” (p.68)

The data above shows. When Megan was not around Scott, she started to get restless, and she started having panic attacks and feeling guilty. Megan often

experiences things that make her uneasy and scared. Depression can cause anxiety disorders. As a result, it can be easy to panic and become phobic about many other things. As a result of the depression experienced, Megan is not easy to live her life.

“I plotted revenge on my way home. I was thinking of all the things I could do to him. I could get him fired, or worse. I won’t though, because I like him too much. I don’t want to hurt him. I’m not even that upset about the rejection any more. What bothers me most is that I haven’t got to the end of my story, and I can’t start over with someone else, it’s too hard. I don’t want to go home now, because I don’t know how I’m going to be able to explain the bruises on my arms.” (p.137)

Megan gets into trouble with Dr Kamal and regrets what she did. Megan acts inappropriately on Dr Kamal because she feels rejected by Tom, and therefore she takes it out on Dr Kamal. After that, she realised that what she had done was wrong. She also realized that she had not yet finished telling her experience at the therapy session with Dr Kamal, and she could only tell her experience to Dr Kamal.

“I feel as though I’m going mad. And yet just a few months ago, I was feeling better, I was getting better. I was fine. I was sleeping. I didn’t live in fear of the nightmares. I could breathe. Yes, I still wanted to run away. Sometimes. But not every day” (p. 164)

The data shows that Megan often experiences the fear she feels every night. From her data, it was shown that Megan was not doing well. She still remembers what happened in the past. Often she felt like giving up, but she tried to hold on. After the events in the past, Megan is haunted by feelings of guilt, making her uneasy and scared. From this past incident, Megan's depression caused Megan to feel uneasy enjoying her life, and she often experienced feelings of sadness, fear and guilt.

“... That’s my fault, of course, because I behaved stupidly, like a child, because I didn’t like feeling rejected. I need to learn to lose a little better. I’m embarrassed now, ashamed. My face goes hot at the thought of it. I don’t want that to be his final impression of me. I want

him to see me again, to see me better. And I do feel that if I went to him, he would help. He's like that." (p.164)

The data shows that the presence of Dr Kamal makes Megan better. Megan, who has been unable to share her feelings and experiences, Megan, who was initially closed about her situation, becomes comfortable when she tells what she feels and the events she has experienced. Megan began to feel better after being able to talk to Dr Kamal. However, Megan spoils everything after she commits a bad act on Dr Kamal. Megan admits that she has made mistakes and bad actions, and she felt sorry for having done it to Dr Kamal. The fact is that Megan still needs Dr Kamal to continue to talk about her past experiences. Dr Kamal's character becomes very important in Megan's life when depression, Dr Kamal makes changes to Megan.

It is difficult for someone who is depressed to start talking and sharing her experiences with other people. Like Megan, it is not easy to start a story with other people, including her husband. Megan is afraid that she will feel cornered and blame herself even more, and she is not ready to be judged for her past mistakes.

2. Physiological Response

According to Selye (1950) the physiological response is divided into three stages: the initial alarm stage, followed by the resistance stage to the stressor, which takes place and the human body must adapt, and the last stage of recovery. A stressor characterizes any situation that activates a stress pathway, regardless of its nature, depth and duration (Selye, 1950). It can be external to the subject, imposed by changes in the environment, or generated automatically by negative valence influences or thoughts, especially anxious thoughts. Individuals with depression usually complain of abdominal pain, anorexia, back pain, chest pain, constipation,

dizziness, fatigue, headache, insomnia, menstrual changes, nausea, frigidity, overeating, impotence, and fatigue. In this novel, Megan often experiences insomnia from the unresolved past that caused him to always stay up at night and think about it. In addition to mental physical also an impact on someone who is depressed. This idea is proven by the data below.

“he asks me what the trouble is and I tell him about the panic attacks, the insomnia, the fact that I lie awake at night too frightened to fall asleep. He wants me to talk a bit more about that, but I’m not ready yet. He asks me whether I take drugs, drink alcohol. I tell him I have other vices these days, and I catch his eye and I think he knows what I mean. Then I feel as if I ought to be taking this a bit more seriously, so I tell him about the gallery closing and that I feel at a loose end all the time, my lack of direction, the fact that I spend too much time in my head. He doesn’t talk much, just the occasional prompt, but I want to hear him speak, so as I’m leaving I ask him where he’s from.” (p.32)

The data above shows that in his therapy session with Dr Kamal. She told her current problem when she felt physically disturbed because she had spent a long time thinking. Due to her severe problems and her current boring life after closing her gallery, this causes her to think often and makes her insomnia. Sleep disturbances indicate an increased risk of depression. The relationship between sleep and depression is stronger than in other mood disorders (Chorney, D., & Morris, T, 2008).

“All I know is that a few months ago I was feeling better, and now I can’t think and I can’t sleep and I can’t draw and the urge to run is becoming overwhelming” (p.163)

The quote above shows the physiological effect by Megan goes through. In addition to frequent insomnia, Megan also can not focus and think. Instead, in her mind, she wanted to run away and give up on where she was at that time. Feelings like what Megan is experiencing are the result of depression after events in her past.

3. Behavioral Response

Individuals with depression typically display aggressive behavior, changes in activity level, intolerance, lack of spontaneity, high dependence, self-care deficits, social isolation, frequent crying, and withdrawal. Megan's character experiences a behavioural response, shown in the following data.

“There was a time when I thought he could be everything, he could be enough. I thought that for years. I loved him completely. I still do. But I don't want this any longer. The only time I feel like me is on those secret, febrile afternoons like yesterday, when I come alive in all that heat and half-light. Who's to say that once I run, I'll find that isn't enough? Who's to say I won't end up feeling exactly the way I do right now – not safe, but stifled? Maybe I'll want to run again, and again, and eventually I'll end up back by those old tracks, because there's nowhere left to go. Maybe. Maybe not. You have to take the risk, don't you?” (p.100)

The quote explains that although Megan feels she has a pretty good household, in her mind, she wants to end it all, but after some time, she realizes that the best place is right now when she is with Scott. After often blaming herself for events in the past, Megan feels she does not deserve to be loved by her husband because she feels she is not a good wife. This guilt resulted in a change in her behaviour, and she looked down on herself. Megan is happy with her better life now because she is haunted by guilt sometimes. She wants to leave her husband.

“This is not quite the same thing, of course. I'm a bit nervous, but I haven't been able to get to sleep lately, and Scott's been on my case to go. I told him, I find it difficult enough talking to people I know about this stuff – I can barely even talk to you about it. He said, that's the point, you can say anything to strangers. But that isn't completely true. You can't just say anything. Poor Scott. He doesn't know the half of it. He loves me so much it makes me ache. I don't know how he does it. I would drive me mad” (p.31)

After experiencing insomnia, Scott advises Megan to see a therapist, but Megan hesitates to tell him how she is feeling. She could not share this with her

husband either. Feelings of guilt in the past made her cover up everything that happened, including her feelings after everything that happened. Depression also changes a person to distrust others.

“Dr Abdic – Kamal, as I have been invited to call him – suggested in this afternoon’s session that I start keeping a diary. I almost said, I can’t do that, I can’t trust my husband not to read it. I didn’t, because that would feel horribly disloyal to Scott. But it’s true. I could never write down the things I actually feel or think or do. Case in point: when I came home this evening, my laptop was warm. He knows how to delete browser histories and whatever, he can cover his tracks perfectly well, but I know that I turned the computer off before I left. He’s been reading my emails again” (p. 52)

Like the previous data, Megan could not start telling stories with her therapist; therefore, Dr Kamal suggested writing down what she was experiencing and feeling, but Megan was not confident and worried about what would happen if Scott found out. Megan almost spent her time thinking, but she could not convey what was on her mind. Because of Megan's depression, it is difficult to express what about her feelings and thinking.

“At night when I lie awake I can hear it, quiet but unrelenting, undeniable: a whisper in my head, Slip away. When I close my eyes, my head is filled with images of past and future lives, the things I dreamed I wanted, the things I had and threw away. I can’t get comfortable, because every way I turn I run into dead ends: the closed gallery, the houses on this road, the stifling attentions of the tedious pilates women, the track at the end of the garden with its trains, always taking someone else to somewhere else, reminding me over and over and over, a dozen times a day, that I’m staying put.” (p.163-164)

The data above shows that Megan begins to stress remembering her past and thinking about her future at night. Even though the incident had passed, this experience effected her life at that time. Because of this, Megan also often experiences insomnia. However, slowly Megan was able to withstand this surge of unpleasant emotions. The days still passed as usual as a result Megan was able to

readjust internally.

“I feel as though I’m going mad. And yet just a few months ago, I was feeling better, I was getting better. I was fine. I was sleeping. I didn’t live in fear of the nightmares. I could breathe. Yes, I still wanted to run away. Sometimes. But not every day” (p.164)

Like the previous data, even though Megan is filled with negative thoughts and often wants to give up her life, Megan persists in her situation. From a cognitive point of view, in addition to having errors in thinking, it is also interesting to make bad decisions. Decision making is the process of choosing or determining various possibilities among uncertain situations according to Mukarromah and Nuqul (in Suharnan, 2014).

“Hear me out, please. This isn’t going to go on for ever, I just need someone to listen.’ ‘Your husband?’ he asks and I shake my head. ‘I can’t – I can’t tell him. Not after all this time. He wouldn’t ... He wouldn’t be able to see me as me any longer. I’d be someone else to him. He wouldn’t know how to forgive me. Please, Kamal. If I don’t spit out the poison, I feel like I’ll never sleep. As a friend, not a therapist, please listen.” (p.166)

“I need to get to the end of the story. I need to tell someone, just once. Say the words out loud. If it doesn’t come out of me, it’ll eat me up. The hole inside me, the one they left, it’ll just get bigger and bigger until it consumes me. I’m going to have to swallow my pride and my shame and go to him. He’s going to have to listen. I’ll make him.” (p.164)

The data above shows that Megan is trying to share her experiences in the past with Dr Kamal. She did not want to keep her worries anymore. Megan was previously very secretive about what happened in the past. After Dr Kamal changed, she started to tell all her experiences that happened in the past. This shows a change in her behaviour; Megan does this because she wants to change the stressful environment. Consequently, she can be free from the stressful environment.

“I’ve kept this secret for so long – a decade, more than a third of my life. It’s not that easy, letting go of it. I just know that I have to start talking. If I don’t do it now, I might never have the courage to say the

words out loud, I might lose them altogether, they might stick in my throat and choke me in my sleep” (p.166)

The data above is the same as the previous explanation. Megan finds a way out of this context and changes the stressful environment. Megan wants to start her courage by telling stories to people she trusts. In this case, her attitude is different and changed than in the beginning. The impact that occurs from depression also shows a person will change a bad environment for the better or find a way out.

“I feel relieved, I think, because I know from his reaction that I have done the right thing. He isn’t angry with me, he doesn’t think I’m a monster. I am safe here, completely safe with him.” (p. 170)

Megan finished telling Dr Kamal about her worst experience that had haunted her all this time. Megan was relieved that she had decided to tell Dr Kamal. Megan has been hiding it in the past for a long time and has decided to open her story. This decision is a change from Megan's attitude that, at first, she did not want to tell anyone and closed the story tightly; therefore, no one knew, including her husband. Megan did not want to tell anyone because she was scared, but she could not take it anymore because she felt guilty. In this case, Megan decided to get up and dare to tell about what happened to her.

“In the moments when Kamal is saying these things, it doesn’t sound so bad. As the words slip seductively off his tongue, warm and honeyed, I can almost believe them. I can almost believe that there is a way to leave all this behind, lay it to rest, go home to Scott and live my life as normal people do, neither glancing over my shoulder nor desperately waiting for something better to come along. Is that what normal people do?” (p.212-213)

When Megan heard Kamal's statement, she began to feel positive energy. Megan began to believe that good thing would happen to her in the future. After Kamal's statement, Megan realized she could not give up on her current situation. The data above is also a change in behaviour that occurred to Megan. At first, she

felt hopeless and wanted to leave her life, but she changed her mind and began to believe that her life would return to normal. Because this is also the impact that occurs in depression, apart from feeling like giving up on someone's life, they can also change for the better and change their slump.

“... I made my decision. I’m going to do the right thing. I’m going to do everything right. If I do everything right, then nothing can go wrong. Or if it does, it cannot be my fault. I will love this child and raise her knowing that I did the right thing from the start. All right, perhaps not from the very start, but from the moment when I knew she was coming. I owe it to this baby, and I owe it to Libby. I owe it to her to do everything differently this time.”(p.282)

Although previously she was very afraid and unsure of her future, this time, she tried to get up and get out of her negative thoughts, and she tried to correct her mistakes in the past. Megan also started again and studied it again so as not to be a mistake again. In this quote, it is a behavioural response from Megan. She can readjust and choose freely from the thoughts that haunt her. This action is also a negative impact when a person has experienced bad things and then slumps and blames herself for a long time. As a result, when there are events that push her back to what happened in the past, she does not want to make the same mistake and wants to do best.

“I don’t want to make things worse. I have to keep reminding myself that I’m trying to do the right thing.” (p.298)

Like the previous data, after going through difficult times and almost despair, she decided to face events similar to those in the past. The fact that Megan previously had negative thoughts about the future, she also abused herself; therefore, she did not deserve to be a good mother, but the data above shows that she believes that she is doing the right thing and believes that she will not experience the same mistakes in the past with her decisions. Correct. The data above is a behavioural

response and changes in behaviour experienced by Megan.

4. Motivation Response

According to Selye (1950) depression changes the motivation of the subject causes a lack of interest in activities in a social environment, even in fun activities. Hawkins portrays Megan's character who loses what she likes because of what happened in the past. This is supported by the following data.

"I find myself standing in front of my wardrobe, staring for the hundredth time at a rack of pretty clothes, the perfect wardrobe for the manager of a small but cutting-edge art gallery. Nothing in it says "nanny." God, even the word makes me want to gag. I put on jeans and a T-shirt, scrape my hair back. I don't even bother putting on any makeup. There's no point, is there, prettying myself up to spend all day with a baby?"(p.27)

The data shows Megan is no longer interested in seeing babies. Megan finds babysitting very boring. In fact that Scott suggested Megan be a babysitter to get her interested in having children. However, this actually made her feel uncomfortable to do, after losing her child Megan had no interest and motivation anymore to have children and to raise children. This data shows that Megan lost her motivation in parenting.

"Today, I don't want to go anywhere, I don't want to run away, I don't even want to go down the road. I want to stay here, holed up with my husband, watching TV and eating ice cream, after calling him to come home from work early so we can have sex in the middle of the afternoon."(p.62)

The data shows that Megan has no interest in doing work, she doesn't want to go anywhere and do anything. In fact, Megan once had a gallery of these things that kept her busy and active, Megan liked this but she no longer had any interest in doing it. Even Megan has resigned to become a babysitter. She is not busy anymore. as a wife Megan has no interest in taking care of babies and having babies besides

that she also has no other busyness. These data show the effect of changes in motivation after depression.

“I haven’t got much done today. I was supposed to sort out my application for the fabrics course at St. Martins; I did start it, I was working downstairs in the kitchen when I heard a woman screaming, making a horrible noise, I thought someone was being murdered. I ran outside into the garden, but I couldn’t see anything” (p.26)

The data shows that Megan doesn't do much, she realizes that she actually has a to-do list, she loses motivation in doing many activities. She feels her day is empty, and does not do activities like other people. She realized many things she no longer did and felt her life was boring. This data also proves that Megan actually has a lot of activities but she doesn't do it and feels her life is empty.

CHAPTER IV

CONCLUSIONS AND SUGGESTIONS

This chapter includes all research summaries. The conclusion contains several research findings. Then, the suggestions contain the researcher recommendations after doing the research. These are explained as follows:

A. Conclusions

Megan Hipwell is the main character in Paula Hawkins' *The Girl on the Train* who has depressive cognition. In this study, the researcher uses the theory of Aaron Beck (1967), depressive cognition, which resulted in the following analysis: the cause of depression experienced by Megan is a cognitive triad. Her experiences in her past mistakes because her negligence caused her baby to die and the loss of her older brother and ex-husband, Megan views herself, the world, and the future in an idiosyncratic way, dominated by negative cognitive patterns. Megan is worried about her future because she does not deserve to be a good mother, and she feels she failed to be a wife. That is the reason why her mind always looks at any situation in a negative way. She also feels some effects of depression, such as affective responses, physiological responses, and behavioural responses that are still related to her depressive cognition mechanism.

The researcher analyzed the effects of depression experienced by Megan after events in the past that made her depression effected Megan's life. Megan became often thinking and woke up at night with a sleep disorder, after which she saw her therapist. Megan is also reluctant to share her bad experience with her husband. However, over time she decided to change her negative thoughts to

believe in the changes in her. She tried to do good and relieve the stress she was experiencing. She stopped her fear and tried to correct her mistakes in the past. Megan realized that the only way she could overcome her depressive cognition was to stay alive.

B. Suggestions

Analysis of literary works can be done from various points of view. Literature refers to the reality and imagination that people perceive and experience, and it can be a picture of the past, present, and future. It can also be analyzed from sociological, feminist, linguistic aspects, and many more, apart from psychoanalytic aspects. This research is based on Aaron Beck's Literary Psychology to analyze the causes of depression.

Furthermore, it is supported by analyzing the impact of depression related to psychoanalysis. This system builds the human mental structure. Then, the relevance of this theory to literary works is that this theory can be used to analyze the psychological aspects of both readers and writers or actors in novels. In addition, this research can contribute to students who like literary works, especially novels, for those interested in learning.

However, this research is still far from perfect because it only discusses a small part of the overall aspects covered by literary studies. Therefore, the writer of this thesis proposes the following suggestions for other possible authors: carry out further research on the same novel or the same topic.

The researcher suggests that others study further in comparing this novel with other works by Paula Hawkins. Hawkins is a very productive and creative writer who can collaborate with others regarding research contributions to library

criticism, suggesting that the results of this research can be used, especially for the teaching and learning of novels.

In addition, it is hoped that the literature teacher/ lecturer will not only teach about new elements on the surface, such as characters, points of view, and conflicts. However, also deep as moral values and social values, this is believed to be able to achieve the essence of education. Finally, the writer hopes that this research will be useful for the writer himself. Other writers interested in analyzing this research will do better than the author because this thesis is still far from perfect.

In addition, it will increase their knowledge. Literature teachers should provide many books and other references on literature. By reading this thesis, the reader will get the benefits and life experiences contained in the novel. The researcher expects comments and criticism from readers related to this psychoanalytic analysis.

REFERENCES

- Alfariji, M. (2019). The depression experienced by Rachel Watson as the main character in Paula Hawkin's novel . UIN Sunan Gunung Djati Bandung. <http://digilib.uinsgd.ac.id/id/eprint/27381>.
- Ati, K.W. (2017). The Motives of Murder Reflected in Paula Hawkins's The Girl on the Train Novel (2015): A Psychoanalytic Analysis. Universitas Muhammdiyah Surakarta.
- Atkinson, R. L. (1999). Pengantar Psikologi (Jilid 2 edisi 8). Jakarta: Gelora Aksara Pratama
- Atkinson, R. L. (1991). Pengantar Psikologi 2 (Terjemahan: Nurdjannah). Jakarta: Erlangga.
- Beck, A. T. (2005). *The Current State of Cognitive Therapy a 40-year Retrospective*. Department of Psychiatry, University of Pennsylvania, Philadelphia.
- Beck, A. T., & Alford, B. A. (2009). Depression: Causes and treatment (2nd ed.). *University of Pennsylvania Press*
- Beck, A.T. (1967). *Depression*. Harper and Row: New York.
- Beck, A. T. (1976). *Cognitive Therapy and the Emotional Disorder*. New York: InternationalUniversity Press.
- Beck, A. T., & Young, J. E. (1985). Depression. In D. H. Barlow (Ed.), *Clinical handbook of psychological disorders: A step-by-step treatment manual* (pp. 206–244). The Guilford Press.
- Beck, AT & Weishaar, ME (2008). *Terapi kognitif dalam Psikoterapi Saat Ini*. Belmont: Brooks/Cole
- Baron, R.A., & Byrne, D.E. (2004). *Social Psychology*. USA: Pearson.
- Bhowmik, D., et all (2012). Depression - Symptoms, Causes, Medications and Therapies. The Pharma Innovation
- Burns, D. D., & Spangler, D. L. (2000). Does psychoterapy homework lead to improvements in depression in cognitive-behavioral therapy or does improvement lead to increased homework compliance ? journal of Consulting and Clinical Psychology, 68, 46- 56
- Chorney, D., & Morris, T. (2008). The Changing Face of Dating anxiety: Issues in Assesment With Special Population. *Clinical Psychology Social Practice*
- Davison, G. C., Neale, J. M. (2002). *Abnormal Psychology*. New York: John Wiley & Sons, Inc.
- Davison, G.C., Neale, J.M., et al. (2004). *Abnormal Psichology*, Ninth Edition. USA. John Wiley&Sons, Inc.
- Davidson, M., et al (2006). Development of cognitive control and executive functions from 4 to 13 years: Evidence from manipulations of memory, inhibition, and task switching. *Neuropsychologia*, 44, 2037-2078.
- Fauziah, K.M. (2018). Psychological Dynamic of Female Characters Towards Marriage Problem in Paula Hawkins' The Girl on the Train. Universitas Islam Negeri Sunan Ampel Surabaya.
- Fitriyani, Diana (2014) Gejala Depresi Tokoh Tristan Dalam Film Tristan Et Iseut Sebuah Kajian Psikoanalitis. Sarjana thesis, Universitas Brawijaya.
- Freud, S. (2005). *Psikoanalisis. Diterjemahkan oleh haris Setiowati*. Jakarta: PT

Gramedia Pustaka Utama.

- Fu'ady, M.A (2011) *Dinamika Psikologis Kekerasan Seksual: Sebuah Studi Fenomenologi. Psikoislamika*, Jurnal Psikologi Islam (JPI) 8 (2). pp. 191-208. ISSN 1829-5703.
- Hadi, P. (2004). Depresi dan solusinya. Yogyakarta : Tugu publisher
- Hawkins, P. (2015) *The Girl on the Train*. Doubleday, UK.
- Kaplan H. (1997) *Synopsis of Psychiatry*. Lange Medical Publication Maruzen.
- Kartono, K. (1998). Psikologi Remaja. Jakarta: Rajawali.
- Kendall, P. C., Julian D. N. F. (1982). *Clinical Psychology: Scientific and Profesional Dimension*. New York: John Willey and Sons Inc.
- Louis, G. C., et al (1996). "Predicting the effect of cognitive therapy for depression; A study unique and common factors". *Journal of Consulting and Clinical Psychology*
- Lubis, N.L. (2009). *Depresi : Tinjauan Psikologis*. Jakarta : Kencana Prenada Media Group.
- Nevid, Jeffrey S, et al. (2005). Psikologi Abnormal Jilid 1. Jakarta: Erlangga.
- McDowell, I & Newell, C. (1996). *Measuring Health*. New York: Oxford University Press.
- McEwen, B. S. (2007). Physiology and neurobiology of stress and adaptation: central role of the brain. *Physiol. Rev.* 87, 873–904. doi: 10.1152/physrev.00041.2006
- Mukarromah, L. & Nuqul, F.L (2014) *Dinamika psikologis pada pelaku percobaan bunuh diri*. *Psikoislamika*, 11 (2). pp. 40-48. ISSN 1829-5703
- Radiani, W. A. (2016). Cognitive Behavior Therapy Untuk Penurunan Depresi Pada Orang Dengan Kehilangan Penglihatan. *Insight*.
- Rahayu, M. (2009). Literature in language teaching. *LiNGUA: Jurnal Ilmu Bahasa dan Sastra*, 4(1).
- Rahayu, M. (2010). Women in Achebe's Novel "Things Fall Apart". *Register Journal*, 3(1), 37-50.
- Rahayu, M., & Aurita, N. A. (2020). The new female image: Dewi Ayu's feminist consciousness in *Cantik Itu Luka*. Presented at The 1st International Conference on Recent Innovations (ICRI 2018), 26-28 Sep 2018, Jakarta.
- Ratna, Kutha, N., (2009). *Teori, Metode, dan Teknik Penelitian Sastra*. Yogyakarta: Pustaka Pelajar.
- Santrock, J. W. (2003). *Adolescence; Perkembangan Remaja: terjemahan edisi keenam*. Jakarta: Penerbit Erlangga.
- Satriawan, F.Y & Rahayu, M. (2020) A soldier's post traumatic stress disorder in Kevin Power's *The Yellow Birds*. *Jurnal Pembelajaran Sastra*, 2 (1). pp. 1-11. ISSN 2722-998X
- Selye, H. (1950). Stres dan sindrom adaptasi umum. *sdr. Med. J.* 17, 1383–1392. doi: 10.1136/bmj.1.4667.1383
- Semi, A. (1993). *Metodologi Penelitian Sastra*. Bandung: Angkasa
- Tyson, P., & Tyson, R. L. (1990). *Psychoanalytic theories of development: An integration*. Yale University Press.

- Utami, P. (2017). *Love Affair Reflected in Paula Hawkins' The Girl on the Train (2015): A Psychoanalytic Study*. Universitas Muhammdiyah Surakarta.
- Varcarolis, E. M. & Halter, M.J., (2010). *Foundations Of Psychiatric Mental Health Nursing Clinical Approach*. Sixth Edition. St Louse. New York.
- Wang. (2010). A Representative of the New Female Image—Analyzing Hester Prynne's Feminist Consciousness in *The Scarlet Letter*.1(6), 893- 897
- Wiyatmi, (2011). *Psikologi Sastra (Teori dan Aplikasinya)*. Kanwa Publisher.
- Wellek, R. and Austin W. (1970). *Theory of Literature*. New York: A Harvest Book.. Harcourt. Brance and World. Inc.
- Yuliza, E. (2015). *Depresi dan Penanganannya pada Mahasiswa*. Al Ishlah: Jurnal Pendidikan.

CURRICULUM VITAE



Fina Makhlidatus Shulhiyah was born in Malang on August 1st, 1999. She started her higher education in 2017 at the Department of English Literature, UIN Maulana Malik Ibrahim Malang and finished in 2021. During her undergraduate study, she had joined some student activity units, such as Himpunan Mahasiswa Jurusan Sastra Inggris as the member of Journalism Division (2018) and also UKM KSR PMI Unit UIN Malang (2018).