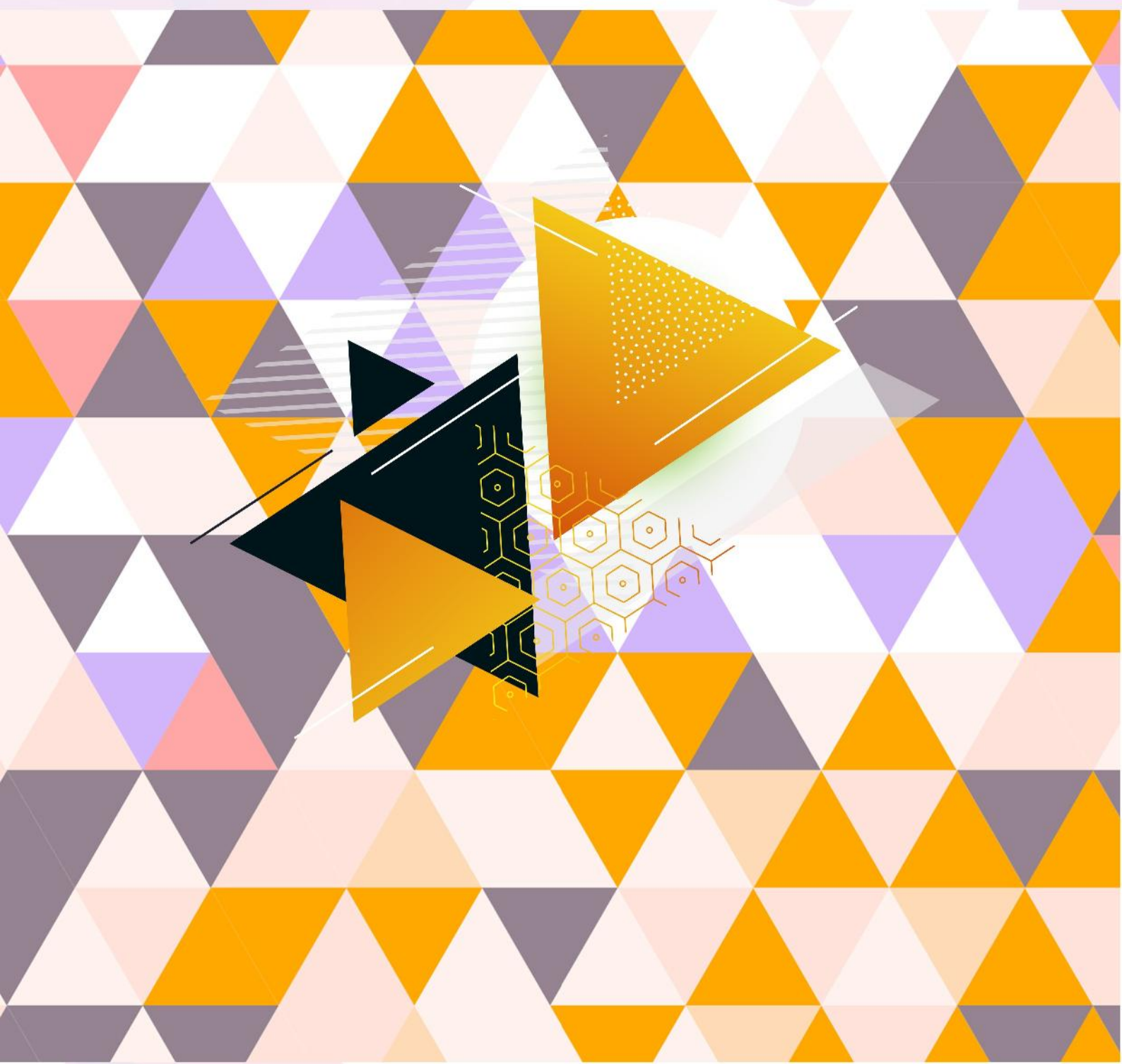


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Aids Stigmatization Among Teenagers

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ABSTRACT

People living with AIDS need the support of others around them. Lack of knowledge about AIDS makes people have a terrible view of people with AIDS, so that discrimination against people with AIDS will increase. The stigma of AIDS is very dangerous for people with AIDS. Support from people around people with AIDS to people with AIDS will be able to increase the enthusiasm of people with AIDS in living life and improve their health status. This research uses an observational method with a cross-sectional design. The location of this study is in Medan City, North Sumatera Province, Indonesia. The number of samples in this study was 89 teenagers in the city of Medan. The instrument in this study used a questionnaire that had been prepared previously. Data analysis in this study uses descriptive analysis and crosstab. The results of this study indicate that adolescents do not want to swim in the same pool with AIDS people as many as 54 people, adolescents do not want to eat/drink a plate with as many as 55 people with AIDS, adolescents do not want to use public toilets with as many as 46 people with AIDS, adolescents do not want to touch skin with AIDS people as many as 36 people, teenagers do not want to sleep with AIDS people as many as 52 people, adolescents do not want to wear the same clothes with AIDS people as many as 57 people. It was concluded that AIDS stigmatization among Medan city adolescents is currently increasing so that adolescents have AIDS stigmatization and discriminate against people with AIDS in their lives.

Keywords: *Discrimination, Stigma, Adolescents, AIDS*

INTRODUCTION

AIDS is a disease that occurs in various countries around the world. Based on data from the United Nations Program on HIV and AIDS (UNAIDS), it was stated that by the end of 2015 as many as 36.7 million people in the world had HIV and as many as 5.7% or about 2.1 million of these were new cases during 2015. In Asia and the Pacific it is known that as many as 5.1 million people are living with HIV by the end of 2016. One of them is that young women are very at risk, with 59% of new infections among young people aged 15-24 year²¹.

Based on data from the Data and Information Ministry of Health of the Republic of Indonesia, it was stated that the number of HIV sufferers in Indonesia

in 2018 was 327,282 people and AIDS was 114,065 people. In 2018 HIV cases experienced an increase in the cumulative number of HIV sufferers by 46,659 people and AIDS has decreased compared to 2017 which was 10,190 people. The death rate or Case Fatality Rate (CFR) due to AIDS from year to year tends to decrease. In 2018 CFR AIDS in Indonesia was 1.03%⁹.

Many HIV sufferers occurred in men by 63.8% and in women by 36.2%. Meanwhile, 67.2% of AIDS sufferers in men and 32.8% in women. HIV infection There tends to be an increase in the productive age group, namely the 25-49 age group by 70.4% and AIDS in the productive age group, namely the 30-39 age group by 34.0%. Teenagers 15-19 years old occupy the third position. The largest proportion of HIV and AIDS cases

are among the population of productive age 15-49 years, the possibility of transmission occurs in adolescents⁹.

North Sumatra Province is one of the most prevalent HIV / AIDS diseases in Indonesia, ranked 7 nationally in the cumulative number of HIV / AIDS in 2018. In 2016 there were 1,891 new cases of HIV and no new cases of AIDS were found, in 2017 found 1,914 new cases of HIV and 155 new cases of AIDS, and an increase in 2018 there were 1,999 new cases of HIV and 149 new cases of AIDS (Kemenkes RI, 2019). In 2017 the city of Medan was the highest HIV / AIDS sufferer with 1,333 HIV cases or around 60.29%¹².

The problem of a PLWHA in terms of health towards PLWHA has a major impact on HIV / AIDS prevention and control programs, including the quality of life of PLWHA. PLWHA will feel afraid to do an HIV test because if it is revealed the results are reactive it will cause them to be discriminated against. HIV positive people are afraid to disclose their HIV status and decide to postpone medical treatment if they are sick, which will result in a decline in their health level and uncontrolled HIV transmission¹⁷. The problem of a PLWHA in a social perspective is the acceptance of negative labels from various forms of discrimination in the environment. PLWHA is considered a curse disease due to deviant actions because HIV and AIDS are so attached to people who commit deviants such as prostitutes (commercial sex workers), gays, free sex offenders and injecting drug users¹⁶. To improve the quality of life of PLWHA, support is needed to PLWHA, starting from their family and living environment. This can be done by not avoiding, alienating and not denying its existence. In addition to providing support to PLWHA, it can also be in the form of providing information, behavioral or material assistance so that

PLWHA feel cared for, valued and loved¹⁰.

The stigma against PLWHA includes not being willing to eat food provided or sold by PLHIV. The stigma of being infected through touch, associating with children of HIV sufferers, and through food should not occur considering that HIV transmission is through, blood, genital fluids and breast milk. However, the lack of information received in the community can be one of the factors causing stigma against PLWHA¹⁷. The community considers that HIV / AIDS is a contagious and deadly disease, due to changing partners, punishment and curses from God for the sins committed. Stigma can occur due to the community's ignorance and lack of understanding about HIV / AIDS properly and accurately. A person's lack of knowledge is a factor in the emergence of stigma against PLWHA⁶.

The stigma against PLWHA is common among adolescents. adolescents are less aware of and understand the forms and effects of stigma on PLWHA. Youth as the next generation must think openly about PLWHA because misunderstandings or ignorance of HIV often have an impact on fear of PLWHA, causing rejection of PLWHA. Age will be related to cognitive development, moral reasoning, psychosexual and social development. Many factors influence the occurrence of stigma against PLWHA among adolescents, namely knowledge¹⁸.

Based on the results of Riskesdas in 2018, the people of North Sumatra Province have an attitude towards HIV / AIDS sufferers as much as 43.6% keep a secret if there is ART with HIV / AIDS, as many as 79.5% have the attitude of being willing to treat ART suffering from HIV / AIDS, 16, 5% have an attitude of isolating neighbors who suffer from HIV / AIDS, as many as 33.5% have the attitude not to buy fresh vegetables from farmers or sellers

who are known to be infected with HIV / AIDS, and as many as 39.6% have an attitude of agreeing not to allow teachers who suffer from HIV / AIDS teaches¹³.

METHODS

This research is a descriptive quantitative research with a crosstab approach. Conducted in November 2019. The population in this study were

adolescents in Medan City, North Sumatra Province. The sample used in this study were 89 adolescents in the city of Medan. Data collection was carried out primarily with a research instrument in the form of a questionnaire. Data analysis in this study used a crosstab descriptive analysis to describe the stigma of adolescents against HIV / AIDS

RESULTS AND DISCUSSION

BIVARIATE RESULTS

Table 1. Stigma Adolescents want to swim in the same swimming pool as HIV / AIDS sufferers

Gender	Stigma				Total	
	Yes		Not		Total	%
	f	%	f	%		
Man	10	11.2%	15	16.9%	25	28.1%
Women	10	11.2%	54	60.7%	64	71.9%
Total	20	22.5%	69	77.5%	89	100.0%

Based on the results of the cross tabulation of 25 men, it was found that 10 men who wanted to swim in the same pool were HIV/AIDS sufferers and 10 male respondents who did not want to swim in the same pool as HIV/AIDS sufferers. AIDS as many as 15 people. There were 64 women who wanted to swim in the same swimming pool with 10 HIV/AIDS sufferers and 54 women who did not want to swim in the same pool with HIV/AIDS sufferers.

According to research Elsa et al, (2019), the reason why adolescents do not want to swim in the same swimming pool as HIV/AIDS sufferers are due to the lack of knowledge of adolescents and the amount of knowledge in the good category is small because adolescents have not been exposed to comprehensive information. The knowledge possessed by adolescents

will influence adolescent attitudes about the situation in the environment around them. The formation of a behavior begins with knowledge, giving rise to an inner response in the form of an attitude from the subject to the object that is known. This knowledge will lead a person to think by involving emotional and belief components, giving rise to a certain attitude towards objects that he already know⁷.

In adolescence, his closeness to his peer group is very high because in addition to peer group ties to replace family ties, they are also a source of affection, sympathy and understanding, share experiences and serve as a place for adolescents to achieve autonomy and independence. So it is not surprising that adolescents have a tendency to adopt

information received by their peers, without having a significant information base from more reliable sources (Pratiwi et al, 2012). Not all peers who are considered to be places to share stories and information have the skills or

qualifications, so they do not have sufficient knowledge and skills about adolescent health problems, so they can provide incorrect or incorrect information⁵.

Tabel 2. Stigma remaja mau makan/minum sepiring dengan penderita HIV/AIDS

Gender	Stigma				Total	
	Yes		No		Total	%
	F	%	f	%		
Man	3	3,4%	22	24,7%	25	28,1%
Women	9	10,1%	55	61,8%	64	71,9%
Total	12	13,5%	77	86,5%	89	100%

Based on the results of the cross tabulation of 25 men, there were 3 men who wanted to eat/drink a plate with HIV/AIDS sufferers and 22 male respondents who did not want to eat/drink a plate with HIV/AIDS sufferers. There were 64 women who wanted to eat/drink a plate with HIV/AIDS sufferers as many as 9 people and female respondents who did not want to eat/drink a plate with HIV/AIDS sufferers as many as 55 people.

This research is in line with Angel (2018), state that they do not want to use the utensils of HIV/AIDS sufferers for fear of contracting them. People think that HIV/AIDS is a contagious disease. This shows that public knowledge of HIV/AIDS transmission is still lacking in terms of research results. The public is of the view that if people approach people who suffer from HIV disease they will be infected, and they also see discrimination against people with HIV/AIDS by providing their own special room and separate dinner plates. There is a myth that is wrong in the community that

having a social relationship with people with HIV/AIDS will cause infection, such as shaking hands, using the same toilet, living in the same house or using the same sheets or clothes as people with HIV/AIDS⁷.

The age group of adolescents who are vulnerable to HIV transmission because on average they do not know how serious the problems caused by HIV/AIDS, how it is transmitted and how to prevent them from getting infected. Where the stigma against HIV/AIDS is still quite high. It is not easy for teenagers to accept HIV/AIDS sufferers living normally in their midst. Fear of transmission and the belief that sufferers will bring bad luck to their environment. Stigma against PLWHA can occur anywhere and anytime, including in families, schools, places of worship, workplaces, as well as legal and health services. So it is necessary to get correct information, attention by educators, policy makers and implementers of HIV prevention programs²².

Table 3. The stigma of adolescents wanting to use public toilets with people with HIV / AIDS

Gender	Stigma				Total	
	Yes		No		Total	%
	f	%	F	%		
Man	10	11,2%	15	16,9%	25	28,1%
Women	18	20,2%	46	51,7%	64	71,9%
Total	28	31,5%	61	68,5%	89	100%

Based on the results of cross tabulation of 25 men, it was found that 10 men who wanted to use public toilets with HIV/AIDS sufferers and male respondents who did not want to use public toilets with HIV/AIDS sufferers were 15 people. There were 64 women who wanted to use a public toilet with 18 people with HIV/AIDS and 61 women who did not want to use the toilet with HIV/AIDS sufferers.

HIV/AIDS is considered a death sentence. People who are diagnosed with HIV and AIDS for the first time often feel depressed, fearful, discouraged and hopeless. Forms of stigma include not being willing to eat food provided or sold by PLWHA, not allowing their children to play with HIV/AIDS children, refusing to use the toilet together with PLWHA, and even refusing to live near people who show symptoms of HIV/AIDS⁴.

The stigma arises from the misunderstanding of the mode of transmission of HIV AIDS and the assumption that HIV AIDS is a disgusting disease that affects people who have deviant sexual behavior. For the general

public, it is feared that social interaction will cause transmission. There are still many who think that touching, hugging, shaking hands, kissing, sharing eating/drinking utensils, sharing bathrooms, living in the same house, mosquito bites and even swimming with sufferers can transmit HIV AIDS. The stigma that exists in society can lead to discrimination. Discrimination occurs when negative views encourage people or institutions to treat someone unfairly based on their prejudice about a person's HIV status³.

Adolescence is a phase of hormonal and physical changes. This change is indicated by the development of health dynamics, the sexual organs towards perfection of function and the growth of secondary sexual organs. This makes adolescents very close to sexual issues. Knowledge about HIV/AIDS, one of which can be obtained through the mass media, but the limited provision of information made adolescents still need attention and direction regarding the impact that will result from this behavior¹

Table 4. Stigma Adolescents want to have skin contact with people with HIV/AIDS

Gender	Stigma				Total	
	Yes		No		Total	%
	f	%	F	%		
Man	14	15,7%	11	12,4%	25	28,1%
Women	28	31,5%	36	40,4%	64	71,9%
Total	42	47,2%	47	52,8%	89	100,0%

Based on the results of the cross tabulation of 25 men, there were 14 men who wanted to have skin contact with HIV/AIDS sufferers and 28 male respondents who did not want to have skin contact with HIV/AIDS sufferers. Of the 64 women, there were 28 women who wanted to have skin contact with HIV/AIDS sufferers and 36 female respondents who did not want to have skin contact with HIV/AIDS sufferers. Research Tianingrum(2018) states that teenagers still are feel afraid to come into contact with PLWHA so that there is a stigma against PLWHA. Adolescents still

have a negative stigma against people living with HIV/AIDS, fear arises in feelings of being friends with people affected by HIV AIDS and thinks that buying food from someone who is HIV positive is a dangerous thing. Research result Pandelaki et al, (2017) The stigma arises from a lack of correct knowledge about HIV/AIDS. One of the ways to increase knowledge about HIV/AIDS can be done by providing health education¹¹. Efforts were made to increase youth knowledge regarding HIV and AIDS through education, training and health promotion program¹⁹.

Table 5. The stigma of adolescents wanting to sleep together with people with HIV/AIDS

Gender	Stigma				Total	
	Yes		No		Total	%
	f	%	f	%		
Man	7	7,9%	18	20,2%	25	28,1%
Women	12	13,5%	52	58,4%	64	71,9%
Total	19	21,3%	70	78,7%	89	100,0%

Based on the cross tabulation results of 25 men, there were 7 men who wanted to sleep with HIV/AIDS sufferers and 18 male respondents who did not want to sleep together with HIV/AIDS sufferers. There were 64 women who

wanted to sleep together with HIV/AIDS sufferers as many as 12 people and female respondents who did not want to sleep together with HIV/AIDS sufferers were 52 people. Research Shaluhiah et al.,(2015) stated that if there are PLWHA

in the family, they are afraid to sleep together with PLWHA and are not willing to take care such as preparing food and cleaning eating utensils, and sitting close to HIV-infected people who do not show symptoms of illness. HIV/AIDS is not transmitted through kissing, hugging, shaking hands with HIV positive people,

using toilets, washbasins, shared bathrooms, sleeping together, swimming together in swimming pools, mosquito/insect bites, blowing your nose/coughing, spitting and using dishes. or drinking together with people with HIV/AIDS¹⁷.

Table 6. Stigma Adolescents want to wear the same clothes as HIV / AIDS sufferers

Gender	Stigma				Total	
	Yes		No		Total	%
	f	%	f	%		
Man	4	4,5%	21	23,6%	25	28,1%
Women	7	7,9%	57	64,0%	64	71,9%
Total	11	12,4%	78	87,6%	89	100,0%

Based on the cross tabulation results of 25 men, there were 4 men who wanted to wear the same clothes as HIV AIDS sufferers and 21 male respondents who did not want to wear the same clothes as HIV/AIDS sufferers. Of the 64 women, there were 7 women who wanted to wear the same clothes as HIV/AIDS sufferers and 57 female respondents who did not want to wear the same clothes as HIV/AIDS sufferers.

Research result Fitra Yani et al, (2020) The stigma of adolescents against PLWHA is due to a lack of knowledge and the existence of some misconceptions about HIV/AIDS that can be transmitted through wearing the same clothes as PLWHA. According to research Pindani (2014) some people already know how HIV/AIDS is transmitted through blood, and through sexual contact but still feel afraid of contact with PLWHA, such as shaking hands and using the same equipment and clothes. This is in line with Maharani's research (2017) that knowledge is related to stigma against PLWHA among high school adolescents. This has

an effect on the serious stigma against PLWHA.

CONCLUSION

Teenagers in Medan City have a high AIDS stigma such as refusing to swim in the same swimming pool as AIDS sufferers, teenagers do not want to eat/drink a plate with sufferers, teenagers do not want to use public toilets with AIDS sufferers, teenagers do not want to touch skin with sufferers, teenagers do not want to sleep with people with AIDS and teenagers do not want to wear the same clothes as people with AIDS.

It is necessary to conduct socialization or counseling about AIDS and AIDS transmission to adolescents through social media in order to eliminate the stigma of adolescents about AIDS and so that adolescents do not discriminate against AIDS sufferers in their lives.

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