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The Influence Of Perceived Stigma On Anxiety Of People Living With Hiv/Aids (Plwha) In Groups Support Peers Regency Jombang: A Cross-Sectional Study

Agustin Widyowati^{1*} Takariningsih²

*1,2 Doctoral Program in Public Health, Graduate Program, STRADA Indonesia University

*Email:

agustwidy@gmail.com

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ABSTRACT

PLWHA have physical, psychological, social and spiritual health problems that can affect the prognosis of the disease. Disorders psychological problems felt by PLWHA, namely anxiety and worry can influenced by perceived stigma. The purpose of the study analyzing perceived stigma towards PLWHA anxiety in Groups Support Peers Regency Jombang. Research This is studies analytic with cross-sectional approach. Population that is all people with HIV AIDS in the Group Support Peers Regency Jombang as many as 666 PLHIV and the number sample as many as 250 respondents use formula Slovin. The sampling technique uses a purposive sampling technique that meets the requirements criteria inclusion and exclusion. The variable are perceived stigma and anxiety of PLWHA. Data collection with questionnaire HIV/AIDS Stigma Instrument-PLWA for measuring perceived stigma and ZSAS for measure variable PLWHA anxiety. Analysis using the Spearman rho test. The results of the study almost all PLWHA experience high perceived stigma as many as 243 respondents (97.2%) and most of them Most PLWHA experience anxiety currently as many as 243 respondents (97.2%). The results of the statistical test obtained a p-value of 0.001 < 0.005 and r =0.181, which means there is influence between perceived stigma towards PLWHA anxiety in Groups Support Peers Regency Jombang. The high perceived stigma increases anxiety of PLWHA that can impact on his health prognosis so that need effort change perception public for reducing stigma through promotion health.

Keywords: Perceived Stigma, Anxiety, PLWHA, Group Support Peers

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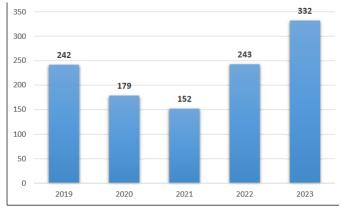
INTRODUCTION

PLWHA (People Living With HIV/AIDS) has problem complex health, no only health physique due to the HIV virus attacking system immunity man so that prone to experience infection opportunistic (WHO, 2024). However, PLHIV also experience disturbance in aspects psychosocial and spiritual factors that affect the prognosis of PLWHA (Armiyati et al., 2015). One of them form disturbance psychological problems felt by PLWHA, namely anxiety. Various study state that PLHIV are vulnerable experience anxiety with a range of 16%-43% (Degu, 2023; Lang et al., 2023; Levy et al., 2019; Ong et al., 2022;

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Parhami et al., 2013; Van Den Heuvel et al., 2013).

It is estimated there are 39.9 million people living with HIV at the end 2023, 65% of them in the WHO African Region. In 2023, an estimated 630,000 people will die Because disease related to HIV and around 1.3 million people are infected with HIV (WHO, 2024). In March 2023, HIV AIDS cases in Indonesia were 522,687 PLWHA and East Java was province second with highest ODHIV findings as many as 79,023 (Ministry of Health of The Republic of Indonesia, 2023). The number cases of HIV- infected people getting service in accordance standards in the Regency Jombang until year 2023 as many as 31,459 and findings case highest from 2019-2023 there were 332 cases in 2023 (District Health Office



Jombang, 2023).

Figure 1. Number of HIV Cases in the District Jombang 2019-2023

One of factor the occurrence anxiety that is the stigma felt by PLHIV from society. The stigma that is felt originate from society (perceived public stigma) and experience self (experienced stigma) so internalized in PLWHA (perceived stigma). These stigmas correlated to quality living with PLWHA (depression, anxiety, problems) sexual, difficulties sleep, price self, etc) (Van Der Kooij et al., 2021). In accordance study (Di Gennaro et al., 2024; Kohli et al., 2023), state that stigma as predictor strong influence mental health of PLHIV such as anxiety, depression and stress.

Research purposes analyzing perceived stigma towards PLWHA anxiety in Groups Support Peers Regency Jombang.

METHODS

This study is an analytical study with a cross-sectional approach conducted on all people with HIV AIDS in the Jombang Regency Peer Support Group in March-June 2024, totaling 666 PLWHA. Research sample as many as 250 respondents with use Slovin's formula. The sampling technique used was purposive sampling technique which met the inclusion criteria, namely PLWHA who were not anxious-moderately anxious, were willing to be respondents and the exclusion criteria were PLWHA who dropped out of treatment. The research variables are perceived stigma and anxiety of PLWHA. Data collection with questionnaire scale Likert. The perceived stigma questionnaire was adopted from (Holzemer et al., 2007), namely the *HIV/AIDS Stigma Instrument-PLWA* which consists of from 6 domains namely verbal abuse, negative perceptions of self alone, ignored by the service health, social isolation, fear infected, stigma in place Work and questionnaire PLWHA anxiety was adopted from (Zung, 1971), namely the ZSAS based on symptom anxiety which has been tested for validity and reliability. Data analysis using the Spearman rho test. Ethical testing was conducted at the STRADA Indonesia Health Sciences Institute with the number 000557/EC/KEPK/I/12/2023

RESULTS

1. Characteristics Respondents

Table 1. Characteristics Respondents of PLWHA in Groups Support Peers Regency

Jombang

Characteristics Respondents	Frequency (f)	Percentage (%)	
Gender			
Male	200	80.0	
Woman	50	20.0	
Marital status			
Not Married	103	41.2	
Marry	146	58.4	
Widow/Widower	1	4.0	
Education			
Elementary School	3	1.2	
Junior High School	22	8.8	
Senior High School	187	74.8	
College	38	15.2	
Work			
Farmer	25	10.0	
Self-employed	66	26.4	
Civil Servants/TNI/POLRI	20	8.0	
Doesn't work	41	16.4	
Other	98	39.2	
Income			
\leq 3,500,000	102	40.8	
> 3,500,000	148	59.2	
Long Illness			
≤ 1 year	47	18.8	
1-5 years	128	51.2	
6-10 years	40	16.0	
> 10 years	35	14.0	
TOTAL	250	100%	

The table explains that most various sex male (80%), marital status married (58.4%), have work others (39.2%), income > 3,500,000 (59.2%) and duration of illness between 1-5 years (51.2%).

2. Distribution Frequency Variables

Table 2. Distribution Frequency Variables of PLWHA in Groups Support Peers Regency Jombang

Variables	Frequency (N)	Percentage (%)
Perceived stigma		
Low	7	2.8
Tall	243	97.2
Anxiety of PLWHA		
Light	63	25.2
Currently	187	74.8
Total	250	100

The table shows that almost all PLWHA experience high perceived stigma as many as 243 respondents (97.2%) and most PLWHA experienced anxiety as many as 187 respondents (74,8%).

3. Cross Tabulation of Variables and Statistical Tests

Table 3. Results of Cross Tabulation and Statistical Test of Perceived Stigma Towards Anxiety of PLWHA in Groups Support Peers Regency Jombang

Variables	Anxiety of PLWHA				
	Light		Currently		
	N	%	N	%	
Perceived Stigma					
Low	5	2.0	2	0.8	
Tall	58	23.2	185	74.0	
Total	63	43.2	187	74.8	
Spearman's Rho					
p-value	0.001				
Correlation Coefficient (r)	(0.181			

The table shows that part Most PLWHA experience high perceived stigma with level anxiety currently as many as 185 respondents (74%). Statistical test results obtained a p-value of 0.001 < 0.005, r = 0.181, which means there is influence between perceived stigma towards PLWHA anxiety in Groups Support Peers Regency Jombang with strength connection low. The low strength of the relationship indicates that there are other factors that are more dominant in influencing the anxiety of PLWHA besides perceived stigma.

DISCUSSION

This study states that there is a significant influence between perceived stigma and anxiety of PLWHA. Stigma is characterized by labeling, negative stereotypes, and power asymmetry. Stigma is a social phenomenon against targeted groups, but has a direct impact on individuals (Andersen et al., 2022). Groups targeted by stigma include people with mental disorders, PLWHA, people with disabilities, and others. The impact of stigma is difficulty in social interaction, difficulty in seeking treatment, experiencing relapses, thus reducing the individual's quality of life (Widyowati et al., 2021).

PLWHA, one of the groups that is stigmatized by society, with the perception of society as a dangerous and contagious disease, punishment or karma due to deviant behavior. This condition makes PLWHA feel stigma related to verbal abuse, fear of infection, social isolation, negative perceptions of themselves, neglect of health services, and stigma in the workplace (Widyowati, 2024). Stigmatization makes PLWHA vulnerable to discrimination and social exclusion, making them vulnerable to psychological impacts such as anxiety, stress, and depression. Stigma has a potential impact on anxiety and even depression in PLWHA so that it can affect adherence to ARV treatment (Ahmed et al., 2021; Maharani et al., 2022; Soan et al., 2023; Turi et al., 2021) and decrease quality of life (Van Der Kooij et al., 2021).

Although it has a significant value (p-value <0.05), this study has a low strength of relationship between perceived stigma and anxiety in PLWHA (r = 0.181). This finding may be due to the dominance of male respondents, high school education, married, working so that respondents have social support from both family and coworkers, financial stability, a good level of knowledge in responding to environmental stressors.

CONCLUSION

Statistical test results obtained a p-value of 0.001 < 0.005 and r = 0.181, which means there is influence between perceived stigma towards PLWHA anxiety in Groups Support Peers Regency Jombang. The high perceived stigma increases anxiety of PLWHA that can

impact on his health prognosis so that need effort change perception public for reducing stigma through health promotion and worker policies for PLWHA.

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