Stigma and Women With HIV/AIDS in North Sulawesi

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**Abstract.** Women with HIV/AIDS, experienced so far continue to be shunned by families and even surrounding communities, due to the illness they suffer. While this disease, is not always related to oneself with HIV / AIDS with HIV, AIDS, or HIV, but many other causes that they become ODHA.

Social punishment for people with HIV/AIDS, is more severe when compared with sufferers of other diseases. The negative stigma announced by HIV / AIDS women because of their negative behavior in free sex or injection needle users seriously hurt them. Not infrequently they become loners or are indeed exiled and have no longer interacted with the environment as a result, in which they will form a negative self-concept.

George Mead & Herber Blumer. Because they want to enjoy the experience of women from households with HIV / AIDS and how to interpret them related to self-concept. The reason, because in this study the researchers wanted to explore the experiences of women (not CSWs) sufferers of HIV / AIDS in the City of Bitung and Manado. In this study the sampling technique used was purposive. While the data collection techniques used are: in-depth interviews, observation, and document review.

**Keywords:** women, stigma, HIV/AIDS

**1.1. Preliminary**

Manado Pos Newspaper, December 1, 2015 edition titled Don't Stay Away from PLWHA, explains how ODHA (People with HIV / AIDS) feel that they are being kept shunned by their families and even their neighbors, due to their illnesses. While there is currently no cure for this disease, it is not always caused by HIV / AIDS sufferers themselves with the problem of free sex or injection drug use, but many mean they become PLWHA.

AIDS is estimated to have infected 38.6 million people worldwide. In January 2006, UNAIDS in collaboration with WHO estimated that AIDS had caused the deaths of more than 25 million people since it was first recognized on June 5, 1981. Thus, this disease was one of the deadliest outbreaks in history. AIDS is claimed to have caused as many as 2.4 to 3.3 million deaths in 2005 alone, and more than 570,000 of them were children.

Social penalties for people with HIV / AIDS, generally more severe when compared with patients with other deadly diseases. The situation occurred because of the stigma that people with HIV / AIDS were caused by deviant behavior by having free sex or injecting drug users. Many reasons why people are exposed to the deadly virus such as contracting from their husbands, contracting from biological mothers during pregnancy and childbirth, and blood transfusions. With the existence of a bad stigma against PLWHA, it will affect the self-concept of PLWHA and it makes them difficult to get along.

North Sulawesi Province from year to year there has been an increase in HIV AIDS sufferers, along with data on HIV / AIDS sufferers in North Sulawesi from the North Sulawesi Health Office, quoted from Koran Sindo Edition 1 December 2015.

**Table 1**

**HIV / AIDS Sufferers in North Sulawesi Province**

of HIV AIDS DIED

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Years** | **HIV** | **AIDS** | **PATIENTS** | **Died** |
| 1997 | 0 | 1 | 1 | 1 |
| 1998 | 0 | 1 | 1 | 1 |
| 1999 | 0 | 1 | 1 | 1 |
| 2000 | 3 | 4 | 7 | 4 |
| 2001 | 5 | 1 | 6 | 1 |
| 2002 | 5 | 13 | 18 | 4 |
| 2003 | 2 | 6 | 8 | 4 |
| 2004 | 9 | 9 | 18 | 5 |
| 2005 | 30 | 47 | 77 | 13 |
| 2006 | 61 | 38 | 99 | 19 |
| 2007 | 29 | 43 | 72 | 14 |
| 2008 | 55 | 93 | 148 | 20 |
| 2009 | 38 | 112 | 150 | 17 |
| 2010 | 38 | 114 | 152 | 9 |
| 2011 | 74 | 128 | 202 | 18 |
| 2012 | 88 | 148 | 236 | 24 |
| 2013 | 82 | 164 | 246 | 22 |
| 2014 | 62 | 195 | 257 | 19 |
| 2015 | 52 | 126 | 178 | 8 |
| **Total** | **633** | **1.244** | **1.887** | **204** |

The data above shows a significant amount that must be the concern of all parties that prevention socialization must be carried out simultaneously. This large number does not actually describe something that is really real because like an iceberg phenomenon the figures above only show sufferers that can be accessed through hospitals, even though there are still far more undetected.

In addition to the problem of prevention, the problem of patient empowerment must also continue to be optimized not to be excluded or excluded from social life. The community should provide support, especially emotional support to sufferers so that the problems they experience are not widespread. The community has several very important responsibilities for HIV / AIDS prevention, namely: finding and providing clear and correct information to people who need it about HIV / AIDS transmission, being friendly, not gossiping about, and underestimating sufferers, supporting and assisting government programs in HIV / AIDS prevention, help sufferers find healthy defense mechanisms, including always positive attitudes in dealing with so many challenges and stress in the course of their illness, and help sufferers develop strategies to deal with real crises that may occur, both in health and socioeconomic, and other things in life.

Kenyataannya sikap masyarakat yang memberikan sikap negatif terhadap penderita hanya menambah tingkat permasalahan yang menimbulkan efek psikologi yang berat pada mereka. Hal ini bisa mendorong dalam beberapa kasus, seperti terjadinya depresi, kurangnya penghargaan diri, dan keputusasaan. Perempuan penderita HIV yang seharusnya memperoleh dukungan dari semua pihak khususnya dukungan emosional sehingga permasalahan yang dialaminya tidak meluas.

Dengan permasalahan tersebut maka tujuan penelitian ini adalah mengapa ada stigma negatif pada perempuan HIV/AIDS dan bagaimana perempuan HIV/AIDS?

**2. Literature Review**

**2.1. Get to know HIV AIDS**

          AIDS is short for 'Aquired Immune Deficiency Syndrome'. Aquired means obtained, not bloodline. Immune is related to our immune system. Deficiency means deficiency. Syndrome or syndrome means a disease with a collection of symptoms, not specific symptoms. So AIDS means a collection of symptoms due to deficiency or weakness of the immune system that is formed after birth. Clearly AIDS is a collection of disease symptoms arising from a decrease in the acquired human immune system (not due to heredity), but is caused by the HIV virus.

Aquired Immune Deficiency Syndrome is a disease that is a collection of symptoms due to decreased immune system that occurs because someone is infected with the HIV virus. While HIV stands for Human Immuno Virus, which means a virus that attacks the human immune system. This can happen because HIV is a family of retroviruses, which attack the immune system, especially lymphocytes. Because HIV damages white blood cells, over time the human immune system collapses. That's when various diseases carried by viruses, germs, bacteria and others are very easy to attack someone who has been infected with HIV. So, HIV is a virus that attacks the human immune system and then causes AIDS

The difference between an HIV positive person and an AIDS sufferer is that if an HIV positive person is someone who is infected with the HIV virus, it appears healthy without symptoms of any disease, but can transmit the AIDS virus to others. Being an AIDS sufferer is someone who shows symptoms of a group of diseases that have been infected with HIV for a long time. And usually occur between 5-10 years after contracting HIV.

**2.2. Symbolic Interaction Theory George Mead & Herber Blumer**

This theory seeks to understand human behavior from a subjective point of view. Humans act only on the basis of their definition or interpretation of the objects around them. The definitions they give to others, situations, objects, and even themselves determine their behavior.

Symbolic interactions originate among others from the works of John Dewey, Charles Harton Cooley, Robert Park, William Isaac Thomas and George Herbert Mead. Even though the interactionists still differ from one another about the meaning and importance of various concepts that have to do with symbolic interactions. Until now the Mead formulation contained in his book Mind, Self, Society is the most comprehensive and least controversial presentation of that perspective.

For these theorists, people are always in the process of interpretation and definition as they move from one situation to another. All of these situations consist of the doer, other people and their actions, and physical objects. However, a situation can only have meaning through people's interpretation and definition of the situation. Meanwhile other people's actions come from that meaning. So this process of interpretation functions as an intermediary for every tendency to act, in addition to that as an action itself.

According to the view of symbolic interaction, as Herbert Blumer (1969) asserted, it is the social processes in group life that create and enforce rules, not the rules that create and enforce group life. In this context, meaning is constructed in the process of interaction, and the process is not a neutral medium that allows social forces to play their role, but rather is the substance of social organization and social forces.

The theory of symbolic interactionism can be briefly based on three basic premises. First, individuals respond to a symbolic situation. They respond to the environment, including physical objects (objects) and social objects (human behavior) based on the meaning that these environmental components contain for them individuals are seen to be active in determining their own environment. Second, meaning is a product of social interaction, because it is not inherent in objects, but negotiated through the use of language. Third, the meaning interpreted by an individual can change from time to time, in line with changes in the situation found in social interaction. Changes in interpretation are possible because individuals can do mental processes, ie communicate with themselves. (Mulyana, 2010: 71-72)

**2.3. Prior Research**

Research on the problem of HIV / AIDS ranging from treatment, prevention, anti HIV / AIDS campaigns is not new. Since the knowledge of this disease around 1988 the world of medicine plus related parties including social researchers have been looking for ways to prevent the spread of this disease through various studies including the social impact of this disease.

In a study from STKS Bandung, it was found that the issues of stigma and discrimination experienced by PLWHA, both from family, neighbors, the world of work, schools, and other members of the community, further aggravated his condition and were even sicker than the impact of his illness.

Lack of family and community understanding of HIV / AIDS worsens the situation of sufferers. HIV / AIDS is still considered a frightening specter, because when convicted as PLWHA, what comes to mind is death. In the community sufferers often receive unfair treatment or even get discrimination from the family and community environment.

While research from Surahman et al found that sufferers experience anxiety, stress, depression, mental turmoil, discrimination and stigmatization. Furthermore, these conditions will inhibit the development of positive self-concept of PLWHA, causing feelings of inferiority, and feeling yourself worthless.

**3. Research Methods**

This research is a qualitative interpretive approach. The reason is because in this study the researchers wanted to explore the experiences of HIV / AIDS women, especially infected housewives from their partners in the cities of Bitung and Manado. As the interpretivism approach assumes that individuals always try to understand the world in which they live and work. Creswell (2013: 11) states humans then develop subjective meanings of their experiences, meanings directed at certain objects or objects. The meanings are also quite numerous and varied so that researchers are required to look more for the complexity of views rather than narrowing down the meanings into categories or ideas. The researcher tries to rely on as much as possible the views of the participants about the situation being studied. To explore these views, questions also need to be asked. The more open the question, the better it will be, so that researchers can listen more closely to what participants are saying and doing in their lives.

To direct the research objectives, this study uses two types of data, namely: Primary data and secondary data. Primary data is data collected directly by researchers from informants through in-depth interviews and observations. Secondary data is data that is not directly collected or through second hand or in other forms such as data / writing in newspapers or so forth. Secondary data usually refers to literature sources and some sources of information related to self-concept and HIV / AIDS.

**4. Results and Discussion**

Scientists generally believe that AIDS originated in Sub-Saharan Africa. Now AIDS has become an epidemic. AIDS is estimated to have infected 38.6 million people worldwide. The emergence of this disease directly horrendous to the world, because it was allegedly AIDS originated from deviant sexual behavior, such as homosexual sexual behavior. In addition, this disease is quite unique spread through sexual contact and contact with infected blood. Prevention of the spread of the virus can be overcome if sexual behavior that is faithful to each other can be maintained. But unfortunately there are still many sexual behaviors that change partners.

The spread of AIDS can also occur through blood. Blood that has been infected when it is transfused to healthy people will automatically be infected. The use of unsterile syringes can also be an effective medium in the spread of this disease. Another way is to occur when infected blood hits a healthy person's wound. So the stigma that arises is people with HIV / AIDS are those who have unhealthy and careless sexual relations. Also the perpetrators of drug abuse through injection media. Even though there are many other ways to make people infected with HIV / AIDS, one of them is blood transfusion.

Not surprisingly, women with HIV / AIDS get stigma as naughty women who have sexual relations carelessly and even changing partners. This label is very detrimental to women who may be infected with a deadly virus and the cure is not yet because of these methods but transmitted by her own husband who is unfaithful and changing partners without the wife knowing.

This fact is very detrimental to women who are loyal but contracting this disease. They are still considered negative by society. If the one affected by the disease is a female sex worker it might be announced because her sexual behavior has been unhealthy and can be at risk of contracting various other venereal diseases. People sometimes generalize all women who suffer from this disease, they always just label bad or bad women to all sufferers. It could also be because they are stigmatized as drug users and others.

The stigma of PLWHA causes a major obstacle to PLWHA who want to access treatment, care, education, and information to prevent HIV transmission. This stigma develops because of the spread of the disease through sexual contact or the use of unsterile syringes. So usually women who are infected with this disease are female sex workers or women who use drugs with a syringe media.

**5. Conclusions and Suggestions**

**5.1. Conclusion**

This disease that has no cure yet, needs to be continued with socialization regarding the spread of the virus and its prevention, so that people can anticipate it. Stigma can still occur due to the lack of good information about this disease / Besides that the community is continuously educating so that the stigmatization of women with HIV / AIDS is reduced and it is not recognized that women with HIV / AIDS are naughty and bad women.

**5.2. Suggestion**

An educational model that is suitable for every community needs to be done so that the stigmatization of women with HIV / AIDS decreases or even disappears.

**References**

Cresswell, W. John. 2013.*Research Design Pendekatan Kualitatif, Kuantitatif, dan Mixed (Edis Ketiga).* Yogyakarta : Pustaka Pelajar.

Kriyantono, Rachmat, S.Sos., MSi, 2009. *Teknik Praktis Riset Komunikasi.* Jakarta : Kencana Prenada Media Group.

Miles, Matthew B., dan A. Michael Huberman. 1999. *Qualitative Data Analysis (Second Edition).* Los Angelas : Sage Publication.

Moleong, Lexy, Prof, DR,MA. 2014. *Metode* *Penelitian Kualitatif (Edisi Revisi****)***. Bandung : Rosdakarya.

Mosse, Julia Cleves. 2010. *Gender dan Pembangunan.* Yogyakarta : Pustaka Pelajar.

Mulyana, Deddy. 2010. *Metodelogi Penelitian Kualitatif****.***  Bandung : PT Remaja Rosdakarya.

Nurul Arifin. (2005). Membuka Mata Masyarakat: Menghapus Diskriminasi dan Stigma Perempuan dengan HIV/AIDS. Jurnal Perempuan, 43, 49-59.

Umiarso dan Elbadiansyah. 2014. *Interaksionisme Simbolik dari Era Klasik hingga Modern*.Jakarta : Rajawali Press.

**Sumber lain :**

[www.puslit.kemsos.go.id](http://www.puslit.kemsos.go.id).

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