

The Effect of Group Dynamics Interventions on HIV Stigma Experienced by Men Who Have Sex with Men in Makassar City

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ABSTRACT

Background: Negative stigma against PLWHA (People Living With HIV-AIDS) causes PLWHA find it difficult to mingle with the environment where they live and their peers and families. So that PLWHA not only experience physical health problems, but also mental. Negative stigma that PLWHA receives also has an economic impact, because there are also PLWHA who experience negative stigma in workplace, thus opting out of work.

Methods: The research method used was a quantitative method through approach *pre-experimental* with a *one group pre post test design*, namely research conducted without involving a control group. The samples in this study were 20 people who involved MSM (Men Who Have Sex With Men).

Results: The results showed that there was an effect of giving intervention using group dynamics methods on the stigma of the community MSM (Men Who Have Sex With Men) in Makassar City on PLWHA (people living with HIV-AIDS).

Conclusion: intervention with group dynamics methods is effective to be applied in educating MSM (Men Who Have Sex With Men) community to eliminate the stigma against PLWHA, both by the government, non-governmental organizations, and the educational environment.

Keywords: HIV, AIDS, MSM (Men Who Have Sex With Men), Stigma, Group Dynamics

INTRODUCTION

HIV (Human Immunodeficiency Virus) is the cause of AIDS (Acquired Immunodeficiency Syndrome) which can cause disturbances in the human body especially the immune system. This virus attacks white blood cells which are an important component for the defense of the human body. Cumulative cases of HIV in the world in 2018 have reached 75 million cases, and have caused the death of 32 million people [1].

In Indonesia, PLWHA (people living with HIV AIDS) have reached a worrying number of cases. Cumulatively until 2020 as many as 409,857 people and only 57,187 people were found alive.

The incidence of HIV in South Sulawesi is quite high. 877 cases from January-September 2020, In 2019 the incidence was 1,679 cases and this case has increased from the previous year 2018, namely 1,174 cases. The media for HIV transmission is currently starting to experience a shift which previously occurred more in groups of sex workers, sex worker partners, injecting drug users, but currently more are in the MSM (Men Who Have Sex With Men). So, of the 1,679 new cases in South Sulawesi 80% occurred in Makassar City [2].

Era 4.0 that we are currently facing, where the development of information is increasingly difficult to stop and gives birth

to a lot of false information or hoaxes. Causing negative stigma by the community, this is also faced by many PLWHA (people living with HIV/AIDS) who often experience stigma. From the family, community, and social environment. This causes PLWHA to experience very concerning social problems and limited knowledge is also suspected to be a contributing factor [3].

HIV cases that occur in the MSM (Men Who Have Sex With Men), not only have an impact on the physical health of the sufferer, but also cause other problems such as social problems, namely negative stigma in the community, family, and social environment. The negative stigma that is accepted by PLWHA causes PLHIV to feel that they are not considered and accepted by society, which leads to mental health [4].

Many PLWHA find it difficult to mingle with their living environment and peer and family environment due to the high stigma that society places on PLHIV. Not only that, the stigma also has an economic impact, where PLWHA still experiences negative stigma at work, thus opting out of work. Another cause of stigma is the leakage of the patient's HIV status by health workers or close friends of the patient to spouses, family, friends and society [5]. The leakage of HIV positive patients' secrets can also be caused by the patient himself leaking to his partner, then the partner. Not yet able to accept the status of PLWHA and notify their family, and surroundings. This condition causes PLWHA to experience multiple disturbances in their lives.

Based on the above background, it is considered necessary to intervene using the group dynamics methods, to change the stigma of the MSM (Men Who Have Sex With Men) community towards PLWHA.

RESEARCH METHODS

In this research used is a quantitative method through the approach *pre-experimental* with the design of *one group pre post test*, which is a research conducted without involving a control group [6]. The

sample in this study were 20 people who involved the MSM (Men Who Have Sex With Men). The data was collected through training activities by inviting the MSM community in Makassar City. While the methodology was by distributing questionnaires about the stigma of fellow MSM who were known to have HIV.

The research design is described as follows:

O1 X O2

O1 = pre-test value (before treatment)

X = treatment (group dynamics)

O2 = post-test value (after treatment)

Methods of analysis

Data were analyzed using the paired t-test, in which the *paired t test* was used to answer the question "Whether there was a significant effect before and after the intervention with the group dynamics methods on stigma in the HIV-infected MSM (Men Who Have Sex With Men). The formula used is as follows:

t test *Paired sample*

$$t = \frac{Md}{\sqrt{\frac{\sum d^2 - \frac{(\sum d)^2}{n}}{n(n-1)}}$$

Description:

Md = average difference between the final test and the initial test difference between the first test

d = the scores against the initial test for each subject

n = number of subjects [7].

RESEARCH RESULT

The results of the research conducted in Makassar City involved 20 MSM (Men Who Have Sex With Men) who had stigmatized their peers who were also MSM with HIV/AIDS, who had been collected and then given a questionnaire to find out how stigma they were doing to their friends for those who have HIV. After that they are given intervention through group dynamics, where each respondent is formed of 4 groups and each group consists of 5 MSM, then the test is carried out again with

the same questions about stigma. The research results are presented as follows:

Table 1: Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistics	df	Sig.	Statistics	df	Sig.
Pre	.035	927.133	20		20	.200
a. Lilliefors Significance Correction						
*. This is a lower bound of the true significance.						

The table above provides information that the value of $p = 0.133$ which means that it is greater than $\alpha = 0.05$, which means that the data is normally distributed, this can also be seen from the following diagram:

Table 2: Paired Samples Statistics

		Mean	n	Std. Deviation	Std. Error Mean
		Pair 1	Pre	60.0000	20
	Post	99.0000	20	18.03505	4.03276

The table above shows that before the intervention the average (mean) was 60 of the 20 respondents. The data obtained

Table 4: Paired Samples Test

		Paired Differences				t	df	Sig. (2-tailed)	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Pre - Post	-3.90000E1	18.89026	4.22399	-47.84092	-30.15908	-9.233	19	.000

The table above shows that $\text{sig}_{\text{tilapia}} (2\text{-tailed}) = 0.00 < \text{from } \alpha = 0.05$ which means that there is an effect of intervention using group dynamics methods on the stigma of the community of MSM (Men Who Have Sex With Men).

DISCUSSION

Stigma against PLWHA (People Living with HIV/AIDS) is still often encountered. Not only in the social environment, but also in the family and community environment. PLWHA are still often regarded as bad people because there are still many people who think that HIV is transmitted through actions that is not praiseworthy or often changes partners, in addition. There is still an assumption that HIV is transmitted through mosquito bites due to lack of knowledge. The form of stigma felt by PLWHA is more verbally or verbally either directly or through other

(standard deviation) was 23.39 with a standard error of = 5.231.

After the intervention was carried out it was found that the mean value was 99 out of 20 respondents, the standard deviation was 18.0335 with a standard error of 4.032. The results above can be concluded that the average value after the intervention is greater than before the intervention.

Table 3: Paired Samples Correlations

Pair 1	Pre & Post	n	Correlation	Sig.
		20	.611	.004

The table above shows the relationship between the two variables in the paired sample, the $\text{sig} = 0.004 < \text{from } \alpha = 0.05$ and the correlation value of 0.61 which means that the relationship between the two averages before and after the intervention is strong.

people. This is reinforced by the findings of Ummu Kalsum (2020) who found that PLWHA in Makassar City experienced stigma from the social environment verbally which caused PLWHA's condition to worsen, become disappointed, and have low self-esteem^[4]. In addition, Dwianita (2018) also revealed in his research that the stigma and discrimination experienced by PLWHA is due to information that is spread by fellow PLHIV to peers, and neighbors or social environments resulting in rejection, expulsion, and exclusion^[3].

The stigma that is often encountered by MSM is in health services, but in services in Makassar City at this time it has increased from previous years. There is no longer any stigma found either directly or indirectly by health workers. This study is different from research conducted by Mandania Zaki (2015) who found that in health services there is still stigma and

discrimination by health workers towards ODHA patients, even doctors, nurses and other health workers are not willing to provide health services^[8].

Many MSM in Makassar City are still unwilling to use health services statically, because they are ashamed to know by their families or the surrounding community. This is what is called self-stigma, as stated by Mandania Zaki that most people infected with HIV use health services with wearing a mask because they feel ashamed of the people who come for treatment at health services. There are many assumptions that HIV/AIDS is a disease for people who often commit adultery^[8].

Overcoming the above problems, the health services in Makassar City made a breakthrough for the MSM community to take advantage of HIV testing services through the HIV mobile testing method, namely health services that come to them for testing at the gathering locations or hotspots of MSM.

To make changes in behavior so that people no longer carry out negative stigma, both self-stigma and stigma from the family and social environment, a method of providing education through group dynamics is used. Where each group is first given information about HIV, then a group is created the aim is to have an interactive discussion. Where each group is given a case related to HIV/AIDS. The case must be resolved by analyzing the problem, problem solving methods, and solutions offered so that the existing problems can be resolved. Group dynamics are aimed at making participants able to share and develop information based on experiences with each other, resulting in social sensitivity, reducing self-confidence, reducing authoritarianism in each individual, so as to be able to accept any differences of opinion. In applying the group dynamics method the role of the facilitator is very important, that in this study the facilitators involved were people who were trained and experienced in facilitating activities and working on the HIV/AIDS program. In carrying out group

dynamics activities, participants were given several games related to HIV/AIDS, such as basic knowledge of HIV/AIDS, modes of transmission, characteristics, methods of prevention, treatment and care as well as HIV testing sites in Makassar City.

At present there are still many people's perceptions of people who are infected with HIV making people who are at risk of contracting HIV do not dare to do HIV testing. The assumption that HIV only occurs in homosexual groups and sex workers are still widely encountered in the community and creates a negative stigma against PLWHA.

CONCLUSION

From the results of the study, it is concluded that the stigma against people living with HIV-AIDS in the MSM (Men Who Have Sex With Men) still often occurs in Makassar City, so that training using a group dynamics approach is able to change the perception of the MSM community towards PLWHA. So that this method is very effectively applied by the government, non-governmental organizations and in the sphere of education, to provide education to the community.

REFERENCES

1. World Health Organization. *HIV/AIDS*. 2018. [internet] Last accessed Maret 09, 2020. Retrieved from: <https://www.who.int/gho/hiv/en/>.
2. Kemenkes RI, *Laporan Perkembangan HIV/AIDS dan Penyakit Menular Seksual 2020*. Jakarta. Kemenkes RI: September 2020.
3. Dwianita, 2018. Model Komunikasi Antar pribadi Orang Dengan HIV/AIDS dalam Menghadapi Stigma dan Diskriminasi Lingkungan Sosial). *Jurnal Simbolika*. 2018; 4(2):140-159
4. Kalsum, Ummy. Stigma Dan Diskriminasi Pengidap HIV Dan AIDS Di Kota Makassar. Makassar: UNM; 2020. 12 p.
5. Gamze Senyurek, Yesim Isil Ulman, Mustafa Volkan Kavas. 2021. Stigmatization, discrimination, violation of autonomy, and compromised confidentiality: A descriptive qualitative analysis of the lived experiences of people living with HIV

- in healthcare settings in Turkey. [internet]. 2021; [update 2021 jan; cited 2021 jan.31] <https://doi.org/10.21203/rs.3.rs-33490/v2>.
6. Sugiyono. *Metode Penelitian Kombinasi (Mixed Methods)*. Bandung: CV Alfabeta; 2018.
 7. Subana, M., Sudrajat. *Dasar-Dasar Penelitian Ilmiah*. Bandung: Pustaka Setia; 2011
 8. Mandania Zaki, Sima Mohamad Khan Kermanshahi PhD, Eesa Mohammadi, at al, (2015). Perception of patients with HIV/AIDS from stigma and discrimination Iranian Red Crescent Medical Journal. 2015; 17 (6):1-8.
- How to cite this article: Gafur A, Nursiah A, Razak NK. The effect of group dynamics interventions on HIV stigma experienced by men who have sex with men in Makassar City. *International Journal of Science & Healthcare Research*. 2021; 6(1): 251-255.
