

Factors Related to Coping Mechanisms in HIV/AIDS Patients

Hartatik

Master of Nursing Program, Universitas Brawijaya, Malang, Indonesia

ABSTRACT

Introduction

HIV/AIDS is a modern worldwide pandemic disease caused by the HIV virus that has a negative impact on the sufferer caused by individuals living with HIV / AIDS that are not just physical but psychosocial and emotional problems and despair of disappointment, anxiety of fear and depression, thus it is necessary for people with HIV/AIDS to improve the coping mechanism towards the adaptive.

Method

Literature search is done through process *searching* general internet and academic search site through proquest, science direct, academic portal and national health journal, with predetermined criteria.

Results

From the search results, there were 29 journal articles that were suitable, and 8 which synthesized were found that coping mechanisms for HIV / AIDS sufferers were not effective because they exposed to environmental stress, one of them was stigma. The factors related to coping mechanisms for HIV / AIDS sufferers include: focal stimulus, contextual stimulus, and residual stimulus, spiritual factors, family support etc.

Conclusion

Coping mechanism means the method used by individuals in solving problem, overcoming changes that occur, and situations that threaten, both cognitively and behavior. Coping procedures are more directed at what people do to overcome stressful and emotionally arousing demands. This study shows that poor coping mechanisms for HIV / AIDS sufferers have a positive contribution to physical and psychological conditions

Keywords

Coping Mechanism Factors; HIV/AIDS Patients

BACKGROUND

HIV / AIDS is a health problem that threatens Indonesia and many countries around the world. Currently no country is free from HIV / AIDS problems. HIV (*Human Immunodeficiency Virus*) is a virus that attacks the human immune system and then causes AIDS. AIDS (*Acquired Immuno Deficiency Syndrome*) is a collection of symptoms of the disease caused by the HIV virus that damages the human immune system (Zein 2006). HIV / AIDS sufferers have a problem related to coping mechanism, because there are still many negative stigma from society about HIV / AIDS so that many HIV / AIDS sufferers isolate themselves from their environment and many HIV / AIDS sufferers think they are useless. With the existence of psychological disorders in patients with HIV / AIDS resulting in a decrease in the immune system and immune system (Spiritia Foundation 2006).

Patients with HIV / AIDS are very easy to feel guilty and accept rejection from the surrounding, this is caused by the assumption that their behavior, especially sexual behavior, can harm others. Patients with HIV / AIDS will experience various stressors or stimuli that can affect the mechanism of coping, stimulus or input that include focal stimulus, stimulus and residual stimulus so that PLWHA needs appropriate coping mechanisms for efforts directed at the management of stressors (Roy, Sr. 2009). Individuals who are whole and healthy, will be able to function to meet the needs of biopsychosocial using positive and negative coping. To be able to adapt each individual will respond to physiological needs, positive self-concept, able to maintain the integrity of self, always located in the healthy range of pain to maintain the process of adaptation. The magnitude of the impact of adaptive coping mechanisms for quality of life in reactive HIV patients will require detailed and comprehensive exchange of information among fellow HIV patients. Roy's Adaptation Model explains the defense and enhancement of the adaptability of patients towards a more adaptive coupling toward coping.

According to Nursalam & Kurniawati (2008) psychological problems People with HIV / AIDS is Ego integrity and psychological response. The phenomenon obtained through interviews with 5 people living with HIV, the coping mechanism of people with HIV / AIDS maladaptif seen from the response to the rejection of the client's health diagnosis of HIV AIDS, some are resigned, isolate themselves, there are trying to commit suicide even some intend to transmit this disease to others.

HIV / AIDS has become a global problem and continues to pose a serious health threat. Physiologically HIV attacks the immune system of the sufferer. If coupled with prolonged psycho-social-spiritual stress in HIV-infected patients, it will accelerate AIDS, even increase mortality.

Writing *systematic review* aims to determine what factors are associated with coping mechanisms in people with HIV / AIDS.

METHODS

This *systematic review* begins with literature searches conducted through the process *searching* internet in general and academic search sites through Proquest, Science Direct, The criteria of the article to be used is related to factors or factors related to coping mechanisms in people with HIV / AIDS from 2007 - 2017. The search process was conducted using the keyword coping mechanism of HIV / AIDS patients, Calista Roy's theory. Factors related to coping mechanisms in people with HIV / AIDS.

The articles used are also published for at least the last 10 years. The searching process of the article began on September 10 to December 12, 2017. The search process is translated using Prisma Chart (2009) as follows:

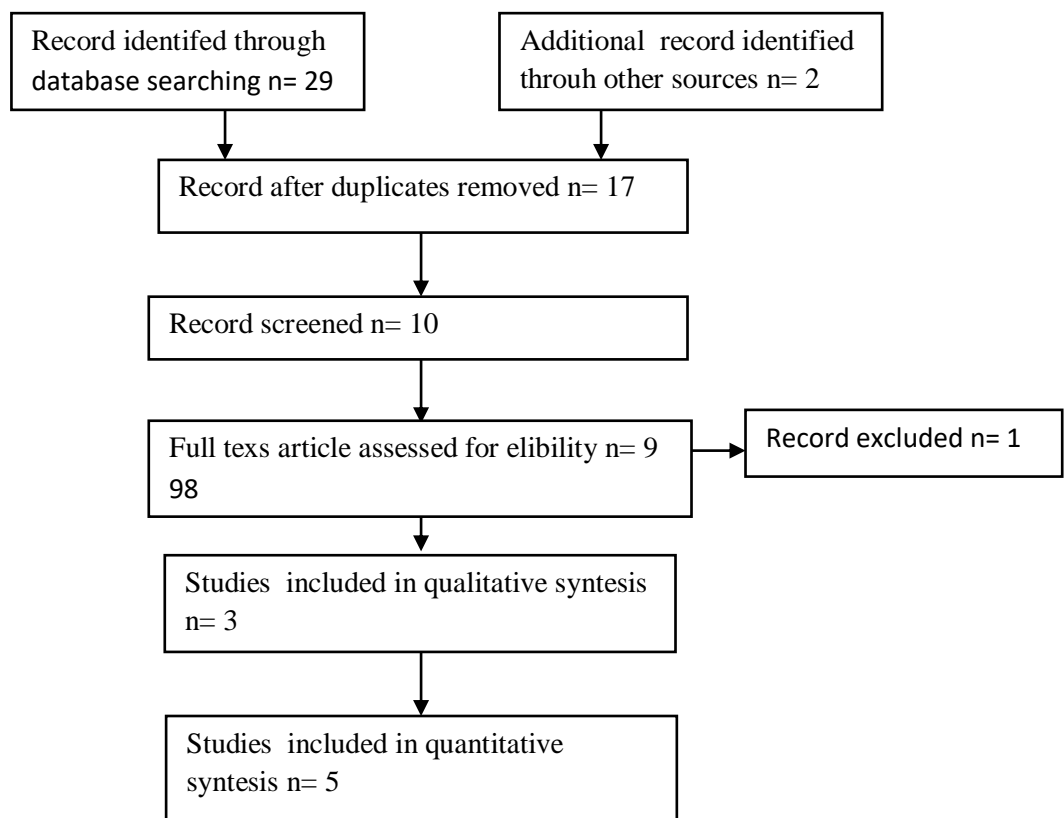


Chart 1. *Flow chart* search process and selection of literature

RESULTS

Of the hundreds of results that appear through *searching*, the author took 29 articles from the ProQuest site, Science Direct, academic portals, paramedic journals, related coping mechanisms of HIV / AIDS patients at the beginning of the writing process. After that proceed with the process *screening* to *including* and get 7 articles analyzed, in accordance with the above PRISMA flowchart. 8 articles used are the result of original research (*original article*) consisting of 5 quantitative research and 3 qualitative. The studies were conducted in Indonesia, India, Nigeria, Africa, Malawi, Colombia and Pakistan. The summary of the 8 articles is described in table 1.

DISCUSSION

Table 1. Summary of review articles related to coping mechanism of HIV / AIDS patient

No	Author and year	Research Methods	Sample	Research Result
1	Sreelekshmi (2015)	Original article	150	65,75% coping mechanism in HIV patient / AIDS is negative.
2	Lucia N Makoe et al (2008)	Qualitative	251	Through the Calista Roy theory approach, coping refers to the behavior and cognitive performed by individuals to adapt to the environment, as a whole, to sustain life in people with HIV / AIDS in intrapersonal and interpersonal relationships and transpersonal linked with spiritual result spiritual relationship with behavior attitude of patient of HIV / AIDS and family care with adaptation process with new status as patient of HIV / AIDS. And the stigma that makes people with HIV / AIDS withdraw and close the status of making adaptive coping mechanism.
3	Beatriz Perez Giraldo (2011)	Original article	100	Based on the results of coping interviews and the process of adaptation according to Roy in the experience of HIV / AIDS sufferers in the effort of cognitive and environmental behavior is closely related in spiritual perspective. Where the level of awakening is directly proportional to the level of confidence it has.
4	Deepika Khakha and Bimla Kapoor. (2015)	Pre test post test historic	180	The mechanism of effective coping and quality of life of HIV / AIDS sufferers is improved after giving intervention that is giving information about disease and power up 59%.
5	Azra Shaheen, Hareh Kumar	Research article	60	Perception of the level of stress associated with HIV / AIDS affects the individual

	and Uzma Ali (2015)			coping styles. The perception of high levels of stress associated with the disease is negatively related to the problem-focused and positive issues associated with focused coping emotions; the perception of control in this disease is positively associated with a problem-focused problem and negatively related to emotion-focused coping. Baron & Byrne described coping as "responding to stress in a way that reduces threats and effects, what one does, feels or thinks to master, tolerates or diminishes the negative effects of stressful situations
6.	Regina Udobony et al. (2015)	Qualitative	30	Some respondents still hide status as HIV / AIDS sufferers because it feels that the family will refuse, The findings also support the view that women with HIV / AIDS coping mechanisms are ineffective and often do not have access to appropriate medical care, encouragement and moral support from the family
7.	Sandu Siyoto, Yuly Peristiowati, and Eva Agustina (2016)	Crossectional	30	Using a questionnaire with Roy's theory of adaptation approach there are 18 respondents (60%) negative coping mechanism, ie in the contextual stimulus ie $p < 0.004$ which is an external or internal stimulus that can resulting in a negative mechanism response.
8	Melisa Sahara. (2012).	Qualitative	52	There are 28 respondents (53.8%) of negative coping mechanisms

Coping mechanisms are cognitive distortions used by a person to maintain a sense of control over the situation, reduce insecurity, and deal with stressful situations (Videbeck, 2011). Roy argues that humans as a system that can adjust (*adaptive system*). As a self-adjusting system humans can be described holistically (bio, psicho, Social) as a whole that has *Input* (input), *Control* and *Feedback Processes* and *Output* (output / output). The control process is the Coping Mechanism manifested in ways of adjustment. More specifically, humans are defined as a system that adapts to the process of cognitive and regulatory mechanisms to maintain adaptation in four ways of adjustment: Physiological functions, Self-concept, role function, and Interdependence (Roy, Sr. 2009). Focal stimulus is a stimulus that can directly affect an individual to behave toward an adaptive coping mechanism. In this study focal stimulus is the negative stigma of the community or the environment and family rejection of HIV / AIDS sufferers that can affect an individual in the face of incoming stimulus to the positive response mechanism coping.

Roy explains that the response that causes decreased integrity of the body will cause a need and cause the individual to respond through a particular effort or behavior. Every human being is always trying to cope with changes in health status and nurses must respond to help humans adapt to these changes. Contextual stimulus is a stimulus that can support the occurrence of pain (precipitation factors) such as unhealthy conditions. This situation is not seen immediately at this time, such as decreased endurance, unhealthy environment and social isolation. Many people with HIV / AIDS who when they experience psychological problems from outside and cause psychological disturbance or burden of the mind so that the immune system of HIV / AIDS patients are vulnerable will decrease so that will affect CD4 in HIV / AIDS patients. Residual residual is a characteristic or history of a person and arise relevantly according to the situation at hand but difficult to measure objectively. Residual stimulus is an attitude, belief and understanding of the individual that can affect the occurrence of unhealthy conditions, or called Predisposisi Factor, resulting in Focal conditions, for example: The patient's perception of disease, lifestyle, and role function. (Wilkins nd, 2006)

This suggests that HIV / AIDS sufferers who receive focal stimuli will affect the coping mechanism in a negative direction, because there are still many HIV / AIDS sufferers who get stigma from the community and also the rejection of the family, so people with HIV / AIDS often feels his life is useless again feeling a failure in life and resulted into a negative coping mechanism.

Effective coping or a positive coping mechanism keeps a central place in the body's resilience and rejection of the body against disruption or attack of a disease whether physical or psychic and social (Nursalam and Ninuk 2013). Roy defines the environment as all internal and external conditions affecting and impacting the development of one's and group's behavior toward an adaptive coping mechanism. The influence of a contextual stimulus is the existence of external changes that is the physical, chemical, psychological. While there is an internal change that is a mental process disorder (experience, emotional and personality) and the process of biological stressors (cell or molecular) (Nursalam, & Kurniawati 2008).

Meanwhile, research conducted by Beatriz et al, that coping mechanisms in people with HIV / AIDS that explains that humans have the potential to develop their life projects, which can be affected by the experience of chronic diseases such as HIV / AIDS, where spirituality and coping and process adaptation emerges as human expression in seeking balance or improving their quality of life. The situation of chronic diseases such as HIV / AIDS affects the integrity of the individual, which affects on his physiological processes, as well as on the psychosocial aspects represented in their role, in interacting with the environment

and on his / her self concept, thus, the individual endures in vulnerability, vulnerability, anxiety, in overcoming and adapting and their relationship with a spiritual perspective on patients with HIV / AIDS. The author m enddefineda spiritual perspective as a personal vision to find meaning in life through a sense of interconnectedness with something greater than the very being, which transcends oneself and enhances it in a way that empowers individuals without devaluating them, Spirituality can be identified by professional nurses as a great source of value for parenting , given that it can be conceptualized as a component of therapeutic relationships in favor of human healthand well-being. Authorshows that spirituality is part of the ontological basis of nursing. Thus, spiritual perspectives and coping and adaptation of processes can be considered integral, as human expression on the experience of disease, including HIV / AIDS.

Supported by another study in Melisa Sahara (2012) study on the effects of Roy's adaptation nursing care on immune response adaptation shows that social-emotional response is strongly influenced by the use of coping mechanisms. Based on the results of this study obtained data that the average coping mechanism of respondents is negative that is as much as 28 respondents (53.8%) .Koping mechanism is the way used by individuals in solving problems, overcome the changes that occur and situations that threaten, both cognitively and behavior, Köping response of each individual must be different. Maladaptive coping mechanism is a coping mechanism that blocks integration, solves problems, lowers autonomy, and tends to dominate the environment. If there is one of the 3 components of the mechanism consisting of coping styles, coping methods and sources it will affect the results of coping mechanisms (Nasir & Muhith, 2011). Negative coping mechanisms are *denial*, resignation, isolation, hiding status, assume this is karmic law and so on. Different coping mechanisms depend on the perception of spirituality and social support that exists in the environment. HIV / AIDS has become a global problem and continues to pose a serious health threat. Physiologically HIV attacks the immune system of the sufferer. If coupled with prolonged psycho-social-spiritual stress in HIV-infected patients, it will accelerate AIDS, even increase mortality.

In addition, in a study conducted by Lucia N Makoae et al that supported by research conducted by Sreelekshmi R Lecturer that the spiritual value will be related in intrapersonal relationships and relationships with interpersonal and transpersonal associated with spiritual results obtained by the relationship of spiritual values with the behavior attitude of the sufferer HIV / AIDS and families caring for the adaptation process with new status as HIV / AIDS sufferers. HIV / AIDS sufferers have an interrelated relationship with anxiety in dealing with environmental steresors and the lack of social and family support in acceptance as a status of HIV / AIDS sufferers. In a study conducted by Deepika Khakha and

Bimla Kapoor coping mechanisms of HIV / AIDS patients increased more effectively after being given intervention through health education through counseling groups of peer support groups HIV / AIDS. In addition, in a study conducted by Regina Udobony et al explained that the acceptance of self-acceptance as a status of HIV / AIDS exposure is closely related to coping mechanisms performed, so that individuals in HIV / AIDS patients will more effectively accept the status and tell the family about its status (open status).

CONCLUSIONS

Coping mechanism means the method used by individuals in solving problem, overcoming changes that occur, and situations that threaten, both cognitively and behavior. Coping procedures are more directed at what people do to overcome stressful and emotionally arousing demands. This study shows that poor coping mechanisms for HIV / AIDS sufferers have a positive contribution to physical and psychological conditions. From all the above research, it can be seen that factors often associated with the coping mechanism of HIV / AIDS are so many spiritual, family support, stress, anxiety, focal stimulus, contextual stimulus and residual stimulus not to mention the stigma of discrimination from the environment that makes withdraws so that it affects self-esteem and impacts on how their adaptive coping mechanisms to shut down. Therefore, as medical personnel need to develop a comprehensive holistic adaptation of Roy's adaptation, HIV / AIDS sufferers not only need physical handling like ARV treatment, family social support, environment, therapeutic care, and nursing attitudes that are full of attention and education counseling health through peer support groups in people with HIV / AIDS. This fact is an important issue that should get the attention of nurses in managing nursing care.

REFERENCES

1. Azra Shaheen, Uzma Ali and Haresh Kumar. (2015). *Extraversion Personality Traits and Social Supports as Determinants of Coping Responses among Individuals with HIV / AIDS*. Volume 4 No (2)
2. Beatriz Perez Giraldo et al.(2011). *Coping and Adaption their Relationship to the Spiritual Perspective in Patients with HIV / AIDS*
3. Deepika Khalika and Bimla Kapoor. (2015). *Effect of Coping Strategies on the Coping Styles(2)*
4. Lucia N.Makoe et al. (2008). *Coping With HIV / AIDS Stigma In Five African Countries*
5. Melisa Sahara (2012). *Overview of Coping Mechanisms of People With HIV / AIDS*

6. Nasir, A & Muhith, A. (2011). *Fundamentals of Soul Nursing*. Jakarta: Salemba
7. Natalya (2012). HIV AIDS papers. Retrieved on September 14, 2017 from www.scribd.com/doc/63916518/MAKalah-HIV-AIDS
8. Nursalam (2009). *Holistic model based on adaptation theory (Roy and PNI as an effort to modulate the immune response (application in HIV AIDS patients)*
9. Nursalam & Kurniawati, ND (2008) *Nursing Care in HIV / AIDS Infected Patients* Jakarta: Salemba Medika
10. Regina Udobony et al. 2015) *Coping Strategy of Women with HIV / AIDS Influence of Care Giving Family Social Attitude and Effective Communication*
11. Sandu Siyoto, Yuly Peristiowati, and Eva Agustina (2016) .The Coping Mechanism of PLWHA with Approach of Calistta Roy Adaptation Theory. Volume 11 No. (2)
12. Sreelekshmi R. (2015) *Anxiety and Coping Mechanism among HIV Positive Patients* Volume 1 No (2)