ASSESSMENT OF HIV VIRTUAL STRATEGY ON LANE IN THE COVID PANDEMIC 19

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ABSTRACT

In the midst of a tense and constantly increasing pandemic, the government is now automatically a policy of social restrictions to tackle transmission, not only that coaching budget constraints are changing. This certainly becomes an obstacle in carrying out health assistance which has so far been carried out with face-to-face meetings so as to require fairly high mobility, so that assistance becomes intensive in communicating and supervising, ensuring that ODHA and their children's assistance remain compliant with health regulations. Banyuwangi District Child Protection Commission (KPA) has implemented a new strategy, so that health assistance, especially prevention of HIV aids prevention, continues with maximum results. Among the strategies that have been carried out are with Virtual Online. This study uses descriptive qualitative research methods with a phenomenological approach to be able to see how effective the adaptation of the assistance model has been done. Virtual online that has been carried out by KPA of Banyuwangi Regency shows the effectiveness of mentoring to the maximum compared to face to face. This shows that this assistance model is quite effective to be carried out in the pandemic covid era 19.

Keywords: Assessment, HIV Virtual Strategy, On Lane, Covid 19

INTRODUCTION

HIV and AIDS is a problem that requires supervision and very serious attention in public health. This can be seen from the number of AIDS cases which has increased significantly in recent years (Malikha, Nurseptarini. 2017). East Java ODHA have touched 118,468 people according to the provincial health office in 2017 while Banyuwangi Regency is ranked fourth with 3,260 cases (Mursidi et., Al. 2018). Oda’s health surveillance in the pandemic covid 19 period experienced a decline because the service policy at KPA focused on handling covid pandemic cases 19.

ODHA or people with HIV / AIDS is a term used for people infected with the HIV virus. HIV itself is an abbreviation of the Human Immunodeficiency Virus, a virus that causes AIDS by attacking white blood cells in humans which results in a decrease in the immune system so that it is easily infected with various types of diseases. People who are affected by this virus will be susceptible to opportunistic infections or susceptible to tumors (Katiandagho, 2015). every person who has been declared infected with HIV (ODHA) gets different treatment than usual in the community. Where they find negative stigma from society such as exile, rejection, discrimination and avoidance. ODHA are often associated with homosexuality, bisexuality, prostitution and drug use by injection. This perception then becomes a frightening specter for the community, consequently they are shunned (Rosmalina A., et., Al., 2020). The same thing is also experienced by people who are infected with the covid 19 virus, although the types of the disease are different, but both are attacked is immune and
contagious, because covid

To encourage the number of adherence to the recommendation to take medicine for ODHA, it is necessary to have a good companion role that come from fellow ODHA and non-ODHA social volunteers are needed, this certainly also applies to other disease prevention efforts. Problems now arise when a new outbreak attacks Indonesia and the world, especially if it is not the COVID-19 Pandemic. The world, including Indonesia, is currently facing a huge health problem, the spread of the COVID-19 Pandemic, as a whole the case of corona positive patients as of Monday 27 July 2020 in Indonesia reached an outbreak of 100,303 people (Rohmana Kurniandari, 2020), and it is uncertain when the rate of increase in the number of outbreaks can be increased. In the midst of the still growing pandemic, the government immediately began to instruct in everything about the new normal life, which in essence pushed us into new habits. This is interesting to be a joint discussion, especially related to how the application of the New Normal pattern for health assistance activities since previously requires a high enough mobility to establish intensive communication to ensure ODHA continue to maintain their health.

One of the usual activities carried out during the new normal period is a virtual activity. In addition to having adapted virtual activities such as whatsapp, webinars, webmeeting and web training, the co-workers must also begin to arrange strategies for outreach and client assistance through virtual methods as well as a form of adaptation during the COVID-19 pandemic. The role of mentoring with the internet or online media itself has previously been widely discussed in several articles, such as the example of an article in the Jipsi journal entitled online counseling as an effort to overcome the problem of harassment among young people by Irianti Mansyur et al., (2019) which shows the effectiveness of the media internet in counseling and already commonly used since 2008. The preliminary study about the effectiveness of online counseling preference (Hanley (2006) also concluded that online counseling has great potential. Furthermore, the methods of assistance and client outreach is then known as the Virtual Onlane.

Results achieved by KPA Banyuwangi Regency in carrying out VO especially during the pandemic is an interesting thing to observe as a form of role model for adaptation of HIV health assistance in the pandemic.

METHODOLOGY

Design using qualitative descriptive phenomenological methods with critical qualitative approach. Qualitative research methods are used to understand what phenomena experienced by research subjects are holistically explained in the form of language words in a special natural context by utilizing various scientific methods (Moleong, 2012), quality to achieve two aspects of goals and objectives. Qualitative research produces descriptive data in the form of written or oral words from people related to the problem in research (Mursidi, 2018).

In line with Sugiyono (2012), qualitative research methods are used to examine a condition object and researchers as a key instrument to collect triangulation data with research results that emphasize more on meaning than generalization. Qualitative research in the paradigm of data triangulation to understand natural or plausible phenomena or phenomena without manipulation (Noviviarai, 2019). research in the view of phenomenology means understanding an event in relation to people in a particular situation, so as to understand the meaning of human events and interactions, theoretical orientation or theoretical perspectives with a phenomenological approach (phenomenological approach). Phenomenology focuses on the subjective meaning of objective reality in the awareness of people directly involved with the problem in this study.

RESEARCH RESULTS AND DISCUSSION

OF PSYCHOLOGICAL STRENGTHENING THROUGH ONLANE MEDIA

Assistance is a process of facilitating the accompaniment provided to clients in identifying needs and solving problems and encouraging the growth of initiatives in the decision-making process, so that independence can be realized (Sumodiningrat, 1997). The purpose of assistance is to ensure concrete changes occur in the environment, and find solutions when there are problems by providing alternatives that can be implemented.

Hatu (2010), there are four activities in the social assistance process which are abbreviated in the 4P acronym, namely: enabling or facilitating, empowering, protecting, and supporting. Possibility or Facilitation, is a
function related to providing motivation and opportunities for the community. This task is related to this function, among others, to become a model (example), mediate and negotiate, build consensus together, and conduct resource management. Strengthening, this function is related to education and training to strengthen community capacity (capacity building). The facilitator plays an active role as an agent who provides positive and directive input based on his knowledge and experience and exchange ideas with the knowledge and experience of the community he is assisting. Protection, this function is related to the interaction between facilitators and external institutions on behalf of and in the interests of the assisted communities.

Some activities in this function are to look for sources, defend, use the media, improve public relations, and build networks. The protection function also involves the task of social workers as consultants, people who can be consulted in the problem solving process. Support, the companion is required not only to be a change manager who organizes groups, but also able to carry out technical tasks in accordance with a variety of basic skills, such as conducting social analysis, managing group dynamics, establishing relationships, negotiating, communicating, and seeking and managing funding sources.

Opening your status as an ODHA is something that is very, very hard to feel. This is related to the many assumptions of people who have negative perceptions of people who have been diagnosed with HIV who are not only physically impaired but also psychologically and socially affected.

Psychological decline in self-confidence of ODHA arises, one of which is due to stigma and discrimination. Society still thinks that people who have HIV are always associated with illness in those who are "less moral" because they are infected through sex, and drug addicts. ODHA are also associated with homosexuality, bisexuality, prostitution and drug use by injection. This perception then becomes a frightening specter for the people, consequently they are shunned (Katiandagho, 2015).

Therefore, it is not only physical decline, but psychological and social relations are also affected. Physically, people living with HIV will be very susceptible to disease due to decreased immunity in the body. Psychologically, ODHA can carry out a negative stigma against themselves. HIV and AIDS still have a frightening image in the community, especially in ODHA themselves. Socially, ODHA tend to get social punishment or negative stigma by the community in various ways, such as acts of alienation, rejection, discrimination, and avoidance of people suspected of being infected with HIV (Katiandagho, 2015).

In general, the main response that emerged when ODHA found out about their status was a rejection in themselves. Forms of rejection that arise in the form of depression both mild and severe until there is a desire to commit suicide.

In a study mentioned, the form of rejection of each ODHA is different, this is seen from the background of risk behavior and not at risk of ODHA. ODHA who say they are not at risk, for example housewives have a tendency to experience denial more severe and longer when compared to ODHA who do have a history of risky behavior such as former injecting drug users and sex workers. ODHA who declare themselves not at risk will have a more severe denial period compared to those who behave at risk (Limalvin, Putri, & Sari, 2020).

(Lindayani, 2016) mentions that there are several aspects of HIV that affect the quality of life of ODHA. 1) As a result of the decline in the immune system: opportunistic infections appear, reduced ability to carry out activities so that patients become less productive; 2) There are ongoing demands throughout the life of the treatment, such as diet control, activity restrictions, monitoring; 3) The existence of negative stigma from the community: social isolation, layoffs (layoffs); 4) Fear of disease progression and future use of ART; 5) Access to quality health services

In this case, KPA Volunteers play a role as facilitators, where the facilitator's role in social assistance is as a person in charge of helping clients become able to handle situational or transitional pressures. There are several specific strategies to achieve these goals including giving hope, reducing rejection and ambivalence, acknowledging and managing feelings, identifying and encouraging personal forces and social assets, sorting problems into parts so that they are more easily solved, and maintaining a focus on the goals and ways of achieving them. (Latifah & Mulyana, 2017).
The form of reinforcement carried out by KPA Volunteers is in the form of acceptance and mutual feelings for each other, bearing in mind KPA Volunteers are also institutions formed by the government whose functions include socializing and mentoring ODHA. This means that this volunteer has a very good understanding of the psychological situation of ODHA who have only just found out their status because they have often found the case.

Psychological reinforcement is not only done to self-ODHA, but this reinforcement is also done to families of ODHA and the community in their environment. The family and community are the main support to further strengthen the psychological of ODHA, the acceptance and absence of stigma in the family and community is a form of reinforcement for ODHA. What is needed by ODHA is supporting and the absence of stigma and discrimination against them. So that this can reduce the mortality rate of people living with HIV due to depression they feel.

The strategy of implementing HIV prevention programs in Indonesia to date still uses outreach methods carried out by KPA officers or in this case referred to as field officers. The main task of field workers is to establish communication with the assisted groups or clients directly or face to face, so that information about disease prevention, in this case HIV AIDS can be conveyed. However, evaluation data show that this approach was only able to cover 20% of the community in 2011, and in 2013 only reached 59% of the existing community (Spiritia, 2019).

The internet as a medium that provides strengths and can provide a safe and fearless place to be identified for the assisted communities, when the environment and society do not support the existence of the community in their midst, including for people who are HIV positive (ODHA), to participate in prevention HIV care and treatment. Utilizing the use of KPA Banyuwangi internet media intends to develop, create and implement alternative approaches, namely, virtual outreach and internet-based campaigns in the hope of reaching more communities that have not yet been served or difficult to reach.

This approach is intended to complement the approach that has been taken, namely through face-to-face outreach, so that the implementation of HIV prevention programs for the community can reach even more coverage.

Visual Online Scope

Because of the situation, the internet or cyberspace can also be a tool for outreach. Although there has not been a specific and systematic study specifically about virtual Online that functions for ODHA out of reach, but taking into account the fact that more and more of this technology is being accessed and used as well as anecdotal observations that more ODHA is closed that accesses the internet, this method is feasible. The internet has many other names such as virtual online, computer online, online cyber space. In this case, we will use the virtual term Online. Virtual online is defined as a virtual interaction between Field Facilitators and individuals or groups of people who behave at high risk of HIV with the aim of providing: information and health education, referral and access to services, recruitment for testing and treatment as well as support for HIV-related risk reduction (Spiritia, 2019).

Similar to traditional outreach, virtual online also functions to reach the assisted groups where they are, in this case in cyberspace. Trained mentor educators and field facilitators can provide a variety of services via the internet, including:

a. Prevention education
b. Risk reduction counseling
c. Referrals to trusted information web
d. Referral to local sources such as test sites, treatment and support groups
e. Recruitment into prevention and care programs
f. Promotion of positive health seeking behavior
g. Support for risk communities in cyberspace.

Health messages can be sent to groups through instant messaging, chat rooms, social networking sites, sexual networking sites, using instant messaging to provide information, posted on bulletin boards or to individuals during sessions private one-on-one and e-mails. Such interactions do not require agreement, their duration and
intensity can vary.

ROLE OF VIRTUAL ONLINE IN PLANNING ODHA

There are several steps that can be done in carrying out Virtual Online, including

1. Research or Observation (Research)
   becomes important to do, especially to find out the segmentation and characteristics of information or any internet content that is often accessed by the assisted groups, including their demographic characteristics, knowledge of their attitudes related to HIV and AIDS, the social and sexual networking sites used by ODHA, including the website and then the needs of the general this segment regarding HIV and AIDS. Specific online places suitable for online internet must be decided, including effective time and day to reach them via the internet.

2. Determination of the target population
   needs to be done based on the results of the assessment above. The more specific the target population, the better. Which segments can be most reached and served via the internet need to be determined. The most important segment is ODHA who often use the internet as a means of communication, finding information and looking for sex partners. And if possible, this segment has indeed not been reached through online advertising conventional.

3. Starting Communication,
   After the above stages are carried out, the next step that must be carried out is to start communication. In this step, the officer can use media or platforms. the appropriate Use an opening conversation that fits the characteristics of the group assisted, then provide persuasive structured information, and try to use empathy communication models. In the final stage, persuasive invitations to be accompanied and access to health care services independently continue.

Effectiveness of Virtual Online As mentioned earlier that health assistance activities, especially HIV AIDS through face to face online, were only able to cover 20% of ODHA communities by 2020, and 80% of existing communities, during the COVID-19 pandemic, it is now perceived to be increasingly declining in effectiveness. This is due to the applicable social restrictions, so KPA as a health assistance institution can gather the community, especially clients or assistants, to carry out assistance and human resource development activities such as discussions, seminars and training.

Banyuwang, in the context of tackling the spread of COVID-19, also enacted a Community Activity Restrictions (PIKM) rule which also limited the number of people in a cluster. This certainly affects the effectiveness of health assistance activities as above. This is exacerbated by the health care officer concern about the risk of contracting COVID-19. For this reason, various alternatives are needed, so that health assistance activities can continue to function, especially in mentoring, client referral, to developing human resources in disease prevention efforts, in terms of this training or training.

This Virtual Online activity that has been carried out above, can be an alternative solution to be able to carry out the activities above, this can be seen from the outreach activities of ODHA communities through Virtual Online as shown in the following figure: The image is a graph that shows the dynamics of outreach using face-to-face (TM) and Virtual online methods; (VO). The results show, in the ODHA group, the results have decreased since the pandemic COVID-19 struck, and the peak in April, the results have not decreased significantly from the number of 3,603 people reached to 2786 people, and began to improve again until now showing the results of 1754 people reached in January. Different things were shown by VO results, the results showed a significant increase when entering the pandemic COVID-19, VO results in the ODHA group itself resulted in an increase since April reaching 3,603 people, and finally reaching 3260 people who were reached in July.

The above results can already show that the Virtual Online Outreach (VO) outreach model conducted by KPA officers shows an increase in results since the COVID-19 pandemic struck, which is approximately in April. These results should be used as a justification for the effectiveness of the VO adaptation model undertaken in health assistance during the pandemic. Because the outreach results are one of the main indicators in the world of assistance
health, especially HIV AIDS prevention and control programs.

CONCLUSION
The results of the above explanation can at least be concluded that KPA Banyuwangi is one of the health assistance institutions that is actively conducting health assistance especially HIV AIDS. KPA Banyuwangi has implemented a health assistance adaptation strategy during the COVID-19 pandemic form of outreach through virtual media or referred to as Virtual Online (VO). Virtual online is defined as a virtual interaction between officers and individuals or groups of people who behave at high risk of HIV with the aim of providing: information and health education, referral and access to services, recruitment for testing and treatment as well as support for HIV-related risk reduction. The outreach results of the COVID-19 pandemic (around April) through VO that had been carried out by KPA Banyuwangi, showed the results of VO from the assisted community groups namely ODHA showing improved results compared to the face-to-face (TM) method. It shows that the adaptation model of health assistance through virtual methods, namely VO, is quite effective to run, because in addition to showing results improved, VO is considered to be safer against the risk of COVID-19 transmission.

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