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DESCRIPTIVE OF FAMILY PLANNING AND SPIRITUAL SERVICES AT THE VOLUNTARY COUNSELING AND TESTING CLINIC

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One way to anticipate HIV/AIDS transmission is through biopsychosociospiritual services, meaning seeing patients not only from physical, psychosocial but also spiritual/religious aspects. One intervention that can be carried out is by providing counseling to respondents about contraceptives and spiritual services to improve the quality of life of women with HIV/AIDS. Research Objectives: To determine family planning services and spiritual services at the VCT Clinic at the Cilacap Regional General Hospital. This research is a qualitative study describing the dimensions of family planning services and spiritual services at the VCT Clinic at the Cilacap Regional General Hospital with a sample of 3 women aged HIV/AIDS sufferers, Peer Support Group 2 people and VCT Clinic management 1 person. The sampling technique used purposive sampling and three participants were obtained. Research results: Family planning services have been integrated into VCT services, and there are no spiritual services by religious officers at the VCT Clinic. Suggestions need to improve family planning and spiritual services in VCT services. Keywords: Family Planning Services, Spiritualy Services, Women, HIV/AIDS

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INTRODUCTION

Human Immunodeficiency Virus (HIV) is a virus that infects by destroying white blood cells (CD4-positive T cells) so that the patient's immune system decreases, while Acquired Immunodeficiency Syndrome (AIDS) is a disease with a number of symptoms and infections that arise due to a decrease in the immune system body due to HIV infection. People with HIV infection (PLHIV) can be asymptomatic and symptomatic, if the symptoms are not treated properly they will develop into the AIDS phase after a period of 8 to 10 years (Chrysna Mahatma, 2020)

In Indonesia in 2020, 6,094 (0.25%) pregnant women were found to be HIV positive out of 2,404,754 who were tested for HIV and 67 (13.4%) babies were HIV positive out of 498 babies who were tested for HIV. In the period January to March 2021, 1,590 (0.3%) pregnant women were found to be HIV positive out of 520,974 pregnant women who were tested for HIV and there were 7 (7.1%) known cases of HIV positive babies out of 99 babies who

were tested for HIV by mothers. with HIV/AIDS. (Direktur Jenderal P2P, 2021). Based on data from the Directorate General of P2P, Ministry of Health of the Republic of Indonesia in 2022, there were around 25,166 positive HIV cases reported in Indonesia in 2022. (Kemenkes, 2022). Central Java Province is the 4th contributor to HIV/AIDS cases in the January – September 2022 period with 4,140 cases (Kemenkes, 2022). According to Rubino, in 2022, the prevalence of HIV, especially in Cilacap Regency, in 2022 was 2,038 cases, this number makes Cilacap ranked second in Central Java.

The number of people with HIV based on risk factors in the period January – September 2022 in Indonesia is (28.5%), homosexual, men having sex with men (27.5%), transgender (1%), injecting drug users (0.5%), Pregnant Women (11.6%), Prisoners (1.2%), Female Sex Workers (3.2%), and others or unknown (30.4%). Meanwhile, the number of positive HIV cases based on age groups in Indonesia was recorded as teenagers

aged 15-19 years from 2015 to 2022 continuing to increase, the highest in 2022 at (3.6%)(Kemenkes, 2022).

Services at the VCT Clinic include PMTCT (Prevention of Mother to Child HIV Transmission), treatment, and pregnancy programs for women with HIV/AIDS, there are also efforts to handle AIDS cases that require a biopsychosociospiritual approach; This means looking at the patient not only from an organobiological, psychological/psychological, psychosocial perspective but also from a spiritual/spiritual aspect. The patient is not seen as an individual, but as a member of a family, community and social environment. Also as a person who is in a helpless state who needs spiritual/religious needs fulfilled. One intervention that can be carried out is by providing counseling to respondents about contraceptives and spiritual services to improve the quality of life of women living with HIV/AIDS. (Hawkins Lois, Alida M. Gertz, Opelo Badubi, Ontiretse Sickboy, Aamirah Mussa, Tshego Maotwe, 2021).

Family planning is the fourth key component of the WHO framework for the Prevention of Mother-to-Child Transmission of HIV program. Women with HIV/AIDS need information and services to prevent unwanted pregnancies. If an unwanted pregnancy occurs, it will increase HIV infection in children. Pregnancy or fertility in women with HIV/AIDS contributes to 24.5% of HIV infections in children and 19% of child deaths.(Rebeca & Corrine, n.d.) Improving the skills of integrated service providers is an important role in facilitating the integration of family planning services with HIV/IADS services (Nkhoma et al., 2022) .

The results of research at the Cilacap Regional General Hospital showed that of the 20 respondents who used double protection contraceptives as recommended, 6 respondents, and 14 respondents used one contraceptive device. And of the 20 respondents who always used a condom every time they had sexual intercourse, 8 respondents. This may be related to the high incidence of unwanted pregnancies (Susanti, Sujianti, 2022).

Integrated family planning and HIV service facilities increased the use of dual contraception by 8% and the use of modern contraception by 8%. Integration of family planning services with HIV/AIDS services has the potential to improve the reproductive health of women with HIV/AIDS (Maidment Tallulah Grant et al., 2022). Integration of family planning services into HIV services has a positive impact. Women with HIV are 3 times more likely to accept the use of contraceptives, especially the use of multiple contraceptives so that the incidence of

unwanted pregnancies decreases.(Joshi Beena , Velhal Gajanan , Chauhan Sanjay , Kulkarni Ragini , Begum Shahina, 2016).

METHOD

This type of research uses qualitative research. The method used in descriptive research is intended to analyze the description of family planning and spiritual services at the Voluntary Counseling and Testing (VCT) Clinic through the researcher's understanding of the experiences or descriptions of research informants. This research was conducted in June 2022. The data sources in this research used primary data sources and secondary data sources. Primary data in this research was obtained through observation and in-depth interviews with parties involved in implementing family planning services at the VCT Clinic. Determining informants was carried out using purposive sampling techniques. The main informants in this study were 3 female respondents with HIV/AIDS. Peer Support Cadre 2 people, and VCT Clinic management 1 person. The research instrument using interview guidelines included: Are there family planning services at the VCT Clinic, are there spiritual services at the VCT Clinic.

RESULT

1. Are there family planning services at the VCT Clinic? a. Women with HIV

The informants who participated in this research were 3 women of childbearing age. The age of the informants ranges from 24-32 years.

This research found that some informants stated that the VCT at the Cilacap Regional General Hospital provided other services, one of which was counseling about contraceptives. Informant responses were described as varied as expressed by the following informants:

- "...Yes, at the VCT clinic at the Regional General Hospital, I was given information about contraceptives, directly given the information by the doctor, and advised to consult a midwife to plan to use injections" (1.1)
- "....I wasn't told here, ma'am, instead I was told by my mother, ma'am, because I was afraid of getting pregnant again, and I just took birth control for more than 40 days, ma'am, because I only had the money, ma'am" (1.2)
- ".....Yes, at the VCT clinic at the Regional General Hospital, I was told to use birth control" (1.3)
- b. Peer Support Groups
- "......here there is counseling for planning families, especially regarding the use of condom contraception" (1.1)
- ".....here there is counseling for the use of condom contraception" (1.2)

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c. VCT Clinical Management

- "...almost every month there are services related to family planning, especially those who are reactive or positive where one of the partners is positive"
- 2. Are there spiritual services at the VCT Clinic?

a. Women with HIV

This research found that all informants stated that 3 informants stated that there were no spiritual services but there was advice from the VCT management section of the Cilacap Regional General Hospital. Informant responses were described as varied as expressed by the following informants:

- ".....if there are no special officers, ma'am, I can get motivation by getting advice about religion from Mr. Rubino, ma'am. Now the important thing is to be enthusiastic, the child is negative so you have to stay enthusiastic and pray" (1.1)
- ".....I was told about religion by the officers here, ma'am and Ms. M, ma'am, I just have to pray" (1.2)
- ".....I was just told by the officers, ma'am, to be diligent in praying so that you can stay enthusiastic, ma'am" (1.3) b. Peer Support Groups
- "..... if there is no spiritual specialty yet, ma'am, the most we would suggest is that if you already have HIV, you just need to worship, ma'am. (1.1)
- ".....yes that goes into counseling ma'am, sometimes patients are different ma'am."(1.2)
- c. VCT Clinical Management
- "...So far we have optimized the counselors who are available during counseling, have collaborated with the Indonesian Ulema Council on how to increase spirituality for PLWHA, especially obligatory worship services." (1.1)

DISCUSSION

This research found that some informants stated that the VCT at the Cilacap Regional General Hospital provided other services, one of which was counseling about contraception. This is in line with research (Yibelta Yordanos, 2021) Family planning services in HIV/AIDS services are very important to prevent unplanned pregnancies, reduce the number of HIV/AIDS transmissions from mother to baby, and prevent the transmission of HIV/AIDS and sexually transmitted diseases. Improve family planning services with the VCT program to provide comprehensive services to prevent HIV infection and unwanted pregnancies. This is also to provide access to family planning services for HIV/AIDS sufferers who cannot access maternal and child health services..

In line with research (Awadhi Bayoum, Beati Mboya,&, Florence Temu, 2012) that government policy supports the integration of Family Planning/VCT services

by health service providers. And research results show that 85% of customers are satisfied with integrated services. This is also in accordance with the research results (Susanti, Sujianti, 2022) that contraceptive counseling or family planning services are needed to be integrated with services at VCT, especially for women with HIV/AIDS who visit the VCT Clinic regularly. Information about safer contraceptive options for patients with HIV to reduce the risk of transmitting HIV to their partners or risky pregnancies, so that integration of HIV and family planning services in the same health facility is highly recommended so that people living with HIV/AIDS will find it easier to access them. (Jennifer et al., 2017).

According to three informants, spiritual services at the VCT Clinic stated that they received no spiritual services. Based on information, the informant did not receive religious services from the spiritual staff but there was advice from the management of the VCT Clinic. The opportunities and challenges for integrating spiritual services into VCT services are very good because the service needs at VCT apart from health needs, they really need spiritual intake in order to improve their mental health, within the framework of this standardized care it must also be supported to support spirituality, so that therapeutic compliance emerges, and be happier and more confident for your future life. This is confirmed by research (Ema. 2020) states that the spiritual dimension in counseling practice for HIV/AIDS patients can be optimized with religious services so that it can increase faith and worship.

Some of the services needed by HIV/AIDS patients at VCT are counseling services to provide health and counseling services, and spiritual services to provide spiritual support. (UNAIDS, 2020). Strengthened by stating that to increase faith and worship in HIV/AIDS patients, counselors are needed to provide religious advice or direct patients to take part in religious studies. (Ema, 2016). Menurut hasil penelitian (Amal & Khofsoh, 2022) What people with HIV/AIDS need most are spiritual needs.

The role of Peer Support Groups is very necessary in providing services at the VCT Clinic. Based on the results of interviews, it was revealed that there are already family planning services in the form of contraceptive counseling. This is reinforced by research results which state that there are various roles carried out by Pelangi Peer Support Group companions in each stage of intervention for people living with HIV/especially in the social dimension (Hayyinatun & Wahyu, 2018). The results of the research state that the integration of family planning and VCT can be implemented, with the

involvement of several parties in health facilities and local governments as policy makers to improve the quality of integrated family planning services and VCT services (Awadhi Bayoum, Beati Mboya,&, Florence Temu, 2012).

CONCLUSION

Based on interviews with three respondents, family planning services have been integrated into VCT services, and there is no spiritual service by religious officers at the VCT Clinic but in the form of advice from counselors. The need to improve family planning and spiritual integration services in VCT services.

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