# HIV COUNSELLING SERVICES AT PUBLIC HEALTH CENTER IN BANDUNG, WEST JAVA

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#### **ABSTRAK**

Konseling kepatuhan pengobatan sangat penting dalam penatalaksanaan pasien yang menerima terapi jangka panjang, khususnya penderita HIV, karena memerlukan pemahaman menyeluruh tentang manfaat pengobatan. Konseling sebelum pengobatan bertujuan untuk meningkatkan pemahaman pasien mengenai pengobatan HIV, sehingga meningkatkan kualitas hidup mereka. Penelitian ini bertujuan untuk mengetahui ketersediaan dan efektivitas layanan konseling pribadi yang dirancang khusus untuk orang yang didiagnosis dengan HIV. Penelitian ini menggunakan desain penelitian kualitatif. Teknik pengumpulan data melalui wawancara. Penelitian ini merekrut tenaga kesehatan yang bekerja di Puskesmas. Analisis tersebut menghasilkan enam tema berbeda: kesiapan memulai pengobatan, proses layanan konseling, pemantauan efek samping, keterbatasan sarana dan prasarana, adanya dukungan sosial, dan kekurangan sumber daya kesehatan untuk menjadi konselor. Layanan Konseling dan Tes Sukarela (VCT) menyediakan program yang disesuaikan untuk orang yang HIV positif. Program-program tersebut meliputi konseling pra-tes, tes HIV, dan konseling pasca-tes. Kendala yang dihadapi pada saat konseling pra pengobatan adalah menilai kesiapan ODHA untuk memulai pengobatan dan menghadapi keterbatasan sumber daya dan infrastruktur di Puskesmas.

Kata Kunci: Human Immunodeficiency Virus (HIV), Konseling, Puskesmas, VCT

#### **ABSTRACT**

Medication adherence counseling is essential in the management of patients receiving long-term therapy, particularly those with HIV, since it requires a thorough understanding of the benefits of medication treatments. Pre-treatment counselling aims to improve patients' comprehension of HIV medication, thereby boosting their quality of life. This research aims to determine the availability and effectiveness of personalized counseling services particularly designed for persons diagnosed with HIV. Methods: This study uses a qualitative research design. Techniques for gathering data via interviews. This research recruited the health professional working at the Public Health Center. The analysis produced six distinct themes: readiness to begin treatment, process of counseling services, monitoring of side effects, limitations of facilities and infrastructure, presence of social support, and shortage of health resources for becoming counselors. Voluntary Counseling and Testing (VCT) services provide tailored programs for persons who are HIV positive. These programs include pre-test counseling, HIV testing, and post-test counseling. The obstacles faced during pre-treatment counseling are assessing the readiness of persons with HIV to begin treatment and dealing with limited resources and infrastructure at the public health center

Keyword: Counseling, Human Immunodeficiency Virus (HIV), Public Health Center, VCT

#### I. INTRODUCTION

The worldwide prevalence of HIV has seen a substantial growth, reaching a total of 329,581 persons in the year 2023. Indonesia is expected to have an increase in cases from 427,201 in 2021 to 543,100 in 2022. According to the

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Director General of Disease Prevention and Control (Director General of P3 Ministry of Health of the Republic of Indonesia, 2021), 7,650 out of 810,846 persons tested were found to be living with HIV/AIDS. The diagnosis of HIV has profound consequences on both the individual and their family members, underscoring the need of offering therapies that bolster resilience. Individualized counselling services, such as treatment adherence counselling, are crucial for those in need of long-term therapy. Pre-treatment counselling seeks to enhance patients' comprehension of HIV medication, thereby enhancing their quality of life. The World Health Organization (WHO) has shown that the implementation of the Comprehensive Care Team (CCT) model may effectively tackle HIV transmission and its related difficulties. Generally, offering customized counseling services may enhance the well-being of those living with HIV/AIDS. In 2010, Indonesia adopted the Voluntary Counseling and Testing (VCT) program as its primary method for preventing HIV at a nationwide level. This program includes the provision of pre-test and post-test counseling sessions conducted by experienced counselors. The objective is to reduce the occurrence of illness by offering educational resources and incentives to motivate persons to undertake HIV testing. (Zulkarnain et al., 2019). The government is now enacting an HIV prevention strategy throughout many areas and cities via the implementation of four distinct programs: the Information Communication and Education Program (KIE), the Contraceptive Program, and the Volunteer Counseling and Testing (CVT) program. The research conducted in 2019 by Zulkarnain Nasution, Poniyah Simanullang, and Nora Gustina focuses on lifts. Darma Agung University prioritizes the development of a comprehensive program aimed at providing care, treatment, and support for those affected by HIV/AIDS. The application of CVT is universally acknowledged as a very successful strategy for the prevention and control of HIV.

Adherence counseling plays a vital role in helping patients comprehend the significance of prescription regimens and offering psychological and emotional assistance. The 2009 "National Guidelines for Antiretroviral Therapy" delineate the elements of adherence counseling, which include establishing a relationship based on trust, imparting crucial information, and furnishing advice. Participating in peer support networks and developing a customized treatment plan that is compatible with the patient's daily schedule may also be beneficial. Assessing the patient's readiness for antiretroviral therapy (ARVs) is crucial in determining their fitness for treatment (Kusuma, 2013). The authors express a desire to investigate the delivery of one-on-one counseling services for individuals with HIV at a public health facility in Bandung, based on the given environment.

#### II. METHODS

#### Design and sample

This descriptive qualitative study investigates the provision of individual counseling for patients living with HIV. Qualitative methods collect descriptive data via written or spoken language regarding observed phenomena and individual behavior. An investigation was carried out at the Public Health Center to analyze the experiences of a health worker who delivered VCT

training. Nurses who declined to participate in the interviews were excluded from the study.

# Data collection procedures

In order to establish a secure interview environment, researchers ensure confidentiality and select a location that is mutually agreed upon. They prepare field notes and stationery in addition to employing an interview recorder or mobile phone for recording purposes in order to analyze non-verbal communication. The researcher justifies the utilization of a recording device and ascertains the most advantageous location to ensure precise and comprehensible conversation capture. In conducting semi-structured interviews, researchers employed a classification system, straightforward language, and basic inquiries. For the purpose of documenting non-verbal communication, field notes were utilized. The interviews were conducted via a mobile device, and strict confidentiality measures were taken with the recorded data. The duration of each interview was thirty to sixty minutes. The researcher conveyed appreciation to the participants and provided a concluding statement that clarified the data and verified the analysis. The aim was to accurately represent the information acquired throughout the interview. The data was expunged once the research was concluded. Consisting of principles such as informed consent, voluntary participation, confidentiality, and anonymity, research ethics regulates the conduct of scientific inquiry to ensure the ethical use of human subjects and to promote courtesy and consideration in research.

# **Data Analysis**

Content analysis is a systematic way of analyzing data that includes formulating research objectives, choosing acceptable data sources, executing suitable sampling processes, identifying operational definitions, and establishing categories for organizing the data. The contents of the summary are then elucidated via the use of meticulously selected document samples. These samples are subjected to a coding procedure in order to classify and allocate codes. The development of scales and items is guided by established criteria for data collecting, which include factors such as frequency, intensity, and type of the data. This methodology guarantees unbiased and systematic representations of the data. The researcher's interpretation of data is influenced by their theoretical framework and cognitive processes. In this study, the researcher used an anecdotal record recording approach for data analysis. This included capturing material without predefined timelines, coding, or classification. The recorded details were decided by the researcher and included significant information (Yunita & Lestari, 2017).

#### III. RESULTS

The findings of an interview conducted on June 22, 2023, with six HIV counsellor nurse at public health center in Bandung, lasting for 30 minutes in the Nursing care room, yielded 15 codes, ten categories, and 6 themes. The present analysis was delineated the motifs that have been identified.

Table 1. Study findings



Quote	Code	Categori c	Theme
"From the patient, yes, the readiness, yes, the willingness to take treatment for life, that's what must be prepared. For the second, from me, as the first counsellor, what kind of drug will be given, what are the side effects of the medicine, when should we control it, then how to prevent transmission, so if he has a partner, his partner took him for an examination."	1. Willingnes s to receive treatment for life 2. Type of drug 3. Drug side effects 4. Control schedule	1. Willing for lifelong treatment 2. Treat ment coun selin g	Readiness To Start Treatment
"if the results turn out to be positive, we will refer you for a TCM examination first; its function is to determine whether there is TB because it is mandatory. If the TB result is negative, then continue treatment"  "because if HIV treatment at the community health centre is only stage one and stage two, if stage three has TB, it can't be treated here, we have to refer"  " in his room, we have to be alone right now. We want to start	5. TCM examination 6. Stage one and stage two 7. There must be two of us in the room	Screening     Stadium     disease     Technique     counseling	Counselling Service Process
treatment"  "Monitoring is usually done when HIV patients come to the health centre for further counselling, well, we there we see whether any side effects occur to the patient or not, or we there are complaints from the patient while taking the medicine or not well, like that."	8. Viewed side effects 9. Asked about complaints	1. Monitor side effects through counsellin	Monitoring Drug Side Effects
"Most of the time, it's being examined because we have a CD4 test, but there's no viral load here yet." "Well, for example, the room conditions"	10. Viral load check 11. Room conditions	1. Vira l Loa d Che ck 2. Fac iliti es ser vice	Limited Infrastructu re Facilities

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"we give motivation, that who wants HIV, right"  "Sometimes we also like testimonials, yes, we bring the what are our peers, this is good too"  How long does the treatment take? You see, he can still be productive like that, but if he has permission, for example, can I, um, do you have any testimonials? You can just like having friends of the same age here; I like to involve them; you see, it's been a long time since the treatment, you can still be productive, you can still work"  "if the patient has an open status, for example, he has been open to his partner, or we usually involve the family"	12. Give motivation 13. Give testimonials in a way bring friends 14. Involve the family to support during counselling	1. Form support	Providing Social Support
"There are only three counsellors here, namely all nurses, including me, and my two colleagues, Mrs N and Mrs L, who are trained and have certificates."	15. There are only three counsellors	1. Counselor limitations	Lack of Health Resources to be counsellor

### Theme 1: Readiness To Start Treatment

Category 1: Willing to receive treatment for life

The initial theme elucidates the concept of preparedness for enduring therapy over one's lifetime. The sentence conveys the experiences of individuals living with HIV.

"The patient's preparedness, precisely their willingness to undergo lifelong treatment, is a crucial factor that must be considered." (p2)

### Category 2: Medication Counselling

Patients are given pre-treatment counselling by a trained counsellor, who provides detailed information about the treatment process, medication type, potential side effects, and adherence to routine control schedules to ensure they are well-prepared for lifelong treatment commitment.

"As the second counsellor, I would like to inquire about the specific type of medication that will be administered and the associated side effects. Additionally, I am interested in understanding the recommended frequency of monitoring and control measures. Furthermore, I would appreciate guidance on strategies for preventing transmission, particularly when the individual has

a partner who should also undergo screening".(p3)

# Theme 2: The Process of Counselling Services

**Category 1: Screening Procedures** 

In the context of HIV counselling services, it is imperative to conduct a screening or assessment before initiating therapy to determine the appropriate course of action.

"... if the findings yield affirmative results, we shall proceed with a referral for a Traditional Chinese Medicine (TCM) examination as a first step to ascertain the presence or absence of tuberculosis (TB), as it is a compulsory requirement. If the tuberculosis test yields a negative result, it is advisable to proceed with the ongoing treatment regimen".(p5)

# Classification 2: Disease Progression Stage

Counselling services must consider the specific treatment and disease progression, advising counsellors on whether community health centers can effectively provide treatment or if hospital referral is necessary, as illustrated by the statement:

"...since HIV treatment at the public health center is limited to stage one and stage two; however, if the disease progresses to stage three and is accompanied by tuberculosis, it becomes imperative to refer the patient to a hospital for appropriate treatment..."(p1)

# Category 3: Counselling Techniques

Counselling approaches often involve creating a dedicated space for sessions only between the counsellor and the individual seeking counselling, as demonstrated in the following statement:

"... to commence treatment, it is imperative that we are currently in a private setting within his room."(p2)

#### Theme 3: Monitoring of Side Effects

This section focuses on monitoring side effects associated with a specific medical intervention or treatment, which are unintended or undesirable effects resulting from a medical intervention.

Category 1: The monitoring of adverse effects via counselling

The study utilized counselling sessions to monitor and assess the side effects of HIV patients, with participants reporting side effects and addressing complaints during the monitoring process at the health center.

# Theme 4: Limited Facilities and Infrastructure

Category 1: analysis of viral load

The Public Health Centre encounters certain constraints in terms of inspections. One particular aspect that has not been established is an overload check, as indicated by the statement:

"Our examinations revolve around CD4 tests, while viral load testing is not yet available at this facility." (p3)

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# Category 2: service facilities

This category discusses service facilities, essential components of various industries and sectors, and physical spaces or structures designed to provide specific services to customers or clients. The provision of service facilities is crucial during pre-treatment counselling sessions.

# Theme 5: the role of social support

Enhancing well-being and resilience social support is a significant factor in individuals' overall well-being and resilience. It encompasses several forms of assistance, such as emotional and informational.

Category 1: Types of support

The fifth element emphasizes the importance of social support in boosting self-assurance and overall well-being for individuals living with HIV. It suggests various forms of assistance, such as incentives, peer involvement, and family involvement, to improve counselling effectiveness. It also emphasizes the need for motivation to adhere to treatment regimens for overall health maintenance.

"...we provide motivation, as it is evident that nobody desires to acquire HIV, and thus we continue to offer motivation to encourage their willingness to pursue treatment..."(p2)

Category 2: aspect is the inclusion of peers

In addition to receiving motivation, the presence of supportive friends, particularly peers, is deemed highly essential, as exemplified by the following statement:

"Occasionally, we also appreciate testimonials, which foster a sense of encouragement and camaraderie." (p1)

The individual discusses their social group and the duration of therapy for a condition. They find engaging with peers of similar age beneficial. Despite the long-term treatment, they maintain high productivity and continue professional activities, highlighting the importance of engaging with peers.

Category 3: incorporating family involvement to enhance support in counselling sessions

Peer support and active family engagement are crucial for HIV patients, as they tend to be more receptive to treatment, highlighting the importance of comprehensive assistance.

"as indicated by factors such as disclosing their HIV status to their partner or actively including their family in the treatment process." (p4)

# Theme 6: insufficient availability of health resources for the development of counselling professionals.

Category 1: limitations of counsellors

The sixth theme addresses the insufficiency of health resources for individuals pursuing a career in counselling. The findings indicate that the outcomes achieved by counsellors remain constrained. The informant reports that there are merely three.

"Counsellors available, specifically comprising of myself, a nurse, and my two colleagues, Mrs N and Mrs L, have received training and possess relevant certifications".

The research revealed that the availability of treatment counseling and a dedication to lifetime adherence to treatment are essential elements in guaranteeing the preparedness of HIV patients for treatment. This is consistent with the findings of (Reichenbach et al. 2019), who highlight the need of providing precise information and guidance to individuals with HIV before starting antiretroviral medication. Therapy counselling sessions address several subjects including medication adherence, side effects, immunological reconstitution, inflammatory syndrome, complications, drug interactions, clinical monitoring, and regular laboratory testing. Prior to commencing longterm antiretroviral (ARV) medication, patients are required to provide written or informed consent. The Ministry of Health requires that specifically assigned individuals, such as counselors and peer supporters, provide information, counseling, and assistance to ensure adherence to antiretroviral (ARV) prescription regimens. To enhance compliance, it is crucial to implement three essential measures: distributing information widely, conducting one-on-one counseling sessions, and actively participating in practical problem-solving and planning activities. Therapy should also take into account the appropriate storage of medicine, adherence to the prescribed schedule, reminders, and ways to resolve any deviations. These techniques are designed to convince clients to adhere to regular medication intake and visiting patterns that are tailored to their specific requirements and situations. Building a reliable rapport between the client and health provider is essential, since consistent appointments and repeated visits ensure the ongoing provision of patient care and treatment. Healthcare workers that demonstrate a supportive and empathetic approach might encourage clients to be honest about their adherence to medication.

#### IV. DISCUSSION

The study's interviews indicated that counselling tactics were successful, consistent with Sari et al.'s (2022) research, which underscores the importance of joint endeavors between counselees and counselors in individual counselling. This partnership facilitates counselees' comprehension of their concerns and comprehensive growth. The potential of the individual seeking counseling is of utmost importance, and it is essential that the counseling process be directed by a skilled counselor who has extensive understanding of both theoretical principles and practical techniques. Mastery of counseling skills is crucial throughout the whole service process. The method has three primary evaluations: a pre-test that covers topics such as introductions, trust, risk assessments, and information about HIV infection and non-infection. The second component is HIV testing via a rapid test technology. The third element comprises post-test counselling, including conversations on client consent, standards for communication, voluntary counselling and testing (VCT), ethical issues, and problems relating to gender. The counselor must possess a comprehensive understanding of the theoretical underpinnings and practical

implementations of counselling. Soepomo's (2014) study indicates that drug side effect monitoring is accomplished via counseling. Healthcare workers use a question-and-answer method to evaluate patient compliance in HIV/AIDS treatment clinics. Typical negative effects include abdominal distension, queasiness, and loose stools, which may happen temporarily or continuously. AZT (zidovudine) has been correlated with mild adverse effects such as asthenia and vertigo, whilst EFV (efavirenz) has been connected with the occurrence of nightmares. This technique is essential due to the lack of constant personnel supervision over patients.

The investigation relies on interviews to ascertain infrastructure limitations in VCT service facilities, including the state of the rooms. The study is consistent with Heryana's (2020) research, which proposes that VCT facilities should have client greeting, counseling waiting places, specimen and lab collection areas, staff areas, test result waiting areas, cashier areas, and restrooms. Infrastructure components include essential services such as power, water supply, telephone services, and waste storage and disposal systems. Facilities and infrastructure factors include aspects such as availability of outpatient services, a designated counseling room for specimen collection, soundproofing, close proximity to personnel, proper entry access, and an alternate exit route.

The interviews revealed that social support plays a crucial role in enhancing the quality of life for those who are afflicted with HIV. It encompasses affective encounters such as reverence, concern, fondness, and encouragement from external sources. These behaviors promote a feeling of inclusion, reduce prejudice, and enhance general well-being. Social support may be derived from several sources such as people, families, peers, and the wider society. Maharani et al. (2022) emphasizes the significance of social support in improving the quality of life for those with HIV. Interviews indicated a scarcity of counsellors, which sharply contrasts with Sahiddin and Resubun's 2018 research on professionals specializing in HIV/AIDS. The dearth of HIV/AIDS professionals in Health Offices and Service Units at Community Health Centres results in higher workloads and a lack of a varied range of specialists in HIV/AIDS, such as health analysts, chemists, doctors, and counsellors. The electricity distribution problem is being deliberated as a means to rectify this inadequacy. Healthcare services are mostly centralized in urban areas, and the Health Service has arranged training sessions for HIV/AIDS personnel. Nevertheless, they often encounter changing obligations. Sahiddin and Resubun (2018) propose that training programs may improve the abilities of HIV health workers, enabling their professional growth and capacity development to provide high-quality services.

An inherent limitation of this research is the minuscule sample size, which might impede the capacity to apply the results to the larger population using community health center services.

# V. CONCLUSION

According to the findings the Public Health Centre provides counseling services via the implementation of the Cognitive Behavioural Therapy (CBT) method. The counseling procedure consists of three stages: pre-test, HIV, and



post-test. The challenges encountered include the preparedness of HIV patients for treatment, as well as the constraints posed by inadequate resources and facilities at the center. This research case study indicates that Public Health Centers have the potential to enhance nurses' comprehension of individual counselling services prior to treatment. The results of this study may be used as a beneficial point of reference for future research and may stimulate additional investigation in this field. The research recommends that educational institutions enhance their case studies on individual counseling services prior to treatment, as they might serve as invaluable tools. Community health centers should augment their counseling services for individuals with HIV. The results of this study will provide a basis for future investigations on pre-treatment individual counseling for individuals with HIV.

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