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Research Article

Family Support for HIV Patients Undergoing Antiretroviral Therapy in Subang City

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Abstract. Without family support, HIV patients face negative responses and a tough life situation, which can lead to worries, guilt and sometimes ideas about ending their life. Family support can improve the confidence of HIV patients and it can lead to a longer life if it encourages the HIV patient to take their antiretroviral therapy (ARV) medicine. ARV treatment is necessary for HIV patients. When HIV patients do not comply with their ARV treatment or stop their ARV therapy, resistance to ARV becomes more likely, there is an increased risk of infecting other people with HIV, and a higher likelihood of the HIV patient dying. This study aimed to determine the relationship between family support and adherence of HIV patients to ARV therapy. This study was conducted using an analytical survey with a cross-sectional design. The total sample was 40 subjects. Data were analyzed using the Chi Square test. The results showed that there was a relationship between family support and HIV patient compliance with undergoing ARV therapy (p = 0.001). Types of family support included emotional support, instrumental support and informational support. It can therefore be concluded that the role of the family is very influential on the adherence of HIV patients to ARV therapy.

Keywords: family support, obedience, HIV

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1. Introduction

Human Immunodeficiency Virus [HIV] is a type of virus that attacks the human immune system. Acquired Immuno Deficiency Syndrome [AIDS], which is a collection of symptoms of the disease [syndrome] obtained due to decreased immunity caused by HIV [1]. HIV [Human Immunodeficiency Virus] and AIDS [Acquired Immune Deficiency Syndrome] is one of the diseases that ranks fourth in the world that is deadly, becoming an international epidemic and tends to show a rapid and widespread spread every year. HIV infection has become a health problem that requires attention due to the increasing number of people living with HIV/AIDS . [1]

According to the World Health Organization [WHO] 0.8% of all adults worldwide were living with HIV in 2018. Globally 37.9 million people were living with HIV at the end of 2018, but about 21% of them did not know their HIV status. they. An estimated 0.8%

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of adults aged 15-49 years worldwide are living with HIV, although the burden of the epidemic continues to vary greatly between countries and regions, Sub-Saharan Africa is still very severe. [2].

The spread of AIDS in Indonesia is in an alarming position, reported in 2017 according to HIV/AIDS data and information, the cumulative number of HIV in Indonesia reported was 882,721 people and AIDS 27,975 people. Based on gender, HIV/AIDS sufferers include 62% men, 38% women. Based on the highest risk factors for HIV transmission, there is unsafe sex, such as in sero discordant [one of the partners has HIV] out of 424 tested there are 360 HIV positive people [84.91%], PSK customers from 34,800 tested there are 3,257 people HIV positive [9.36%], MSM [male sex] out of 153,154 tested there are 10,628 HIV positive people

[6.94%], out of 2,063 male sex workers tested there were 112 HIV positive people [5.43%] and high risk partners from 95,336 tested there were 4,097 HIV positive people [4.30%]. [3]

In West Java, HIV/AIDS sufferers until December 2018 reached 37,205 cases [Diskes.jabar.go]. Nationally, West Java Province is one of the 5 provinces with the highest HIV/AIDS cases in Indonesia. [4].

Based on data from the Subang City Health Office, it shows that the number of HIV cases in 2018 reached 230 cases, which increased by 163 cases in 2017 and in 2019 there were 195 HIV cases for HIV deaths in 2017 as many as sixty-six people experienced an increase in 2018. as many as eighty-nine people [5].

Antiretroviral therapy [ART] uses a combination of several drugs. ART is only successful if used obediently, according to the schedule, ie twice a day in the morning and evening. If the dose is forgotten, the effectiveness of the therapy will quickly disappear [www.spiritia.or.id]. Impact Patients who do not comply with treatment or stop taking ARVs will be able to increase resistance to ARVs, increase the risk of transmitting HIV to others, and increase the risk of death for people living with HIV [Kemenkes RI, 2014].

Adherence or adherence to a drug regimen is defined as the action of a patient using drugs as prescribed by health workers, a patient's non-compliance in using his treatment regimen can be classified as a medical error [Cahyono, 2008]. Compliance with therapy and other support systems has a major role in improving the quality of life of patients with HIV/AIDS, reducing mortality and morbidity, and increasing community expectations [6].

Some of the efforts made so that HIV patients can regularly take ARVs with family support must provide counseling including information on side effects, resistance and the benefits of treatment and education for families . This is intended to monitor

medication adherence and provide encouragement, motivation and as a reminder that taking ARV drugs can increase patient confidence in the therapy being undertaken and there must be openness between HIV sufferers and their families so that families continue to support antiretroviral treatment. In addition to counseling and education, medical personnel and the government must synergize in maintaining the affordability of ARV therapy because often economic problems are the reason for patients' non-compliance in undergoing therapy considering that therapy is carried out for the rest of the patient's life. [7]

Family support is a behavior in terms of emotional support, appreciation/assessment, informational, and instrumental to family members [8]. Family can be a very influential factor in determining individual health beliefs and values and has a big role in improve adherence to treatment, namely by providing supervision and encouragement to people with HIV. Support from the family is very decisive in increasing the confidence of PLWHA to be able to live longer by obediently taking ARV drugs. Family support is one of the factors that influence the adherence of HIV patients in taking ARV drugs. ART treatment is mandatory for life. Without family support, it is difficult for PLWHA to comply with taking ARV drugs.

Peer Support Group [KDS] Ceria is a community organization that aims to provide support to group members in their daily lives, and to improve the quality of life of people living with HIV. This organization applies a peer-to-peer approach that involves fellow HIV patients. The Ceria Peer Support Group [KDS] was inaugurated on November 6, 2019. There are 40 KDS members, community meetings are not limited to activities held every 3 months.

2. Methods and Equipment

2.1. Methods

The research design used is descriptive correlation with the type of research design using cross-sectional. In this study, researchers conducted a study on the relationship between family support and adherence to HIV patients in undergoing ARV therapy in the Ceria Peer Support Group [KDS] in Subang City.

The population of this study is less than 100, which is 40 people, so in determining the number of samples using the total sampling technique, which means all HIV patients undergoing ARV therapy in the Ceria Peer Support Group [KDS] of Subang City.

TABLE 1: Family Support Instrument Grid

1	Aspect	Indikator	Questions Number	Amount Question
1	Emotional support and appreciation	Mentoring Praise and attention Rating	1 2 3	3
2	Instrumental	Time and facility Active role Cost Equipment	4	4
	support			
			5	
			6	
			7	
3	Informational	8. Inform	8	3
	support	9. Reminder	9	
		10. Explanation	10	
Amount				10

Bivariate analysis in this study was conducted to determine the relationship between family support and HIV patient adherence to ARV therapy using the Chi-square statistical test.

2.2. Equipment

Research instrument

The family support questionnaire can be measured using a family support questionnaire consisting of 10 questions.

Each of these questions has 4 alternative answers, namely "always", "often", "sometimes", and "never".

If you answer "always", you will get a score of 4, answering "often" will get a score of 3, answering "sometimes" will get a score of 2, and answering "never" will get a score of 1. The total score on this questionnaire is 1-40. Answers from respondents are done by scoring [Nursalam & Pariani, 2013].

Compliance questionnaire using the Morisky Medication Adherence Scale [MMAS-8] questionnaire. Measuring results of adherence to medication are obedient [value = 8], less compliant [value = 6-7] and non-compliant [value = <6] .[9]

3. Results

TABLE 2: Frequency Distribution of Family Support in HIV Patients Undergoing ARV Therapy

Family Support	Frequencies [F]	Persentage [%]
Not Support Support	9 31	22,5 77,5
Total	40	100

TABLE 3: Distribution of Adherence Frequency in HIV Patients Undergoing ARV Therapy

Compliance	Frequencies [F]	Persentage [%]
Not Obey Less obedient Obey	7 14 19	17,5 35,0 47,5
Total	40	100

3.1. Overview of family support

The results of the analysis in table 2 above show that of the 40 respondents who received support from their families, 31 respondents [77.5%].

3.2. Overview of compliance

The results of the analysis in table 3 above show that of the 40 respondents, who were compliant with ARV therapy, 19 respondents [47.5%].

3.3. The Relationship Between Family Support With HIV Patient Compliance In Undergoing ARV Therapy

From the results of the analysis of the relationship between family support and compliance, it was found that there were 31 respondents whose family support was supportive, obediently undergoing ARV therapy, totaling 19 respondents [47.5%]. The results of statistical tests obtained p-value = 0.001 [<0.05], then the hypothesis test is Ho is rejected, so it can be concluded that there is a relationship between family support and HIV patient compliance in undergoing ARV therapy.

TABLE 4: The Relationship Between Family Support With HIV Patient Compliance In Undergoing ARV Therapy

Compliance									
Family Support	Not Obey		Less Obident		Obey		Total		P-Value
	F	%	F	%	F	%	N	%	
Not support	6	66,7	1	11,1	2	22,2	9	100	
Support	1	3,2	13	41,9	17	54,8	31	100	
Total	7	17,5	14	35,0	19	47,5	40	100	0,001

4. Discussion

The description of family support shows that there are 22.5% of respondents who do not get support from their families. This is because the HIV patient is not open to his family about his illness. The benefits of social support on health and well-being function together. More specifically, the existence of adequate social support is evidenced by a decrease in mortality more easily recover from illness, cognitive function, physical and emotional health. In addition, the positive influence of family social support is on adjusting to stressful life events. [10]. Family support plays an important role in the lives of people living with HIV because they support direct care. By getting support from family, increasing self-confidence, people with HIV feel more valued and can face the problems that exist in the community.

The results of adherence statistics obtained 35.0% of respondents were less compliant in undergoing ARV therapy. Because HIV patients are not regular in taking their medicine and sometimes forget to take their medicine, and some find it difficult to take medicine. From the results of the study, it was also found that 17.5% of respondents who did not comply with ARV therapy were caused by HIV sufferers not receiving support from their families and not taking medication regularly. a certain reason, or intentionally not using the drug that was instructed .

The Relationship Between Family Support With HIV Patient Compliance In Undergoing ARV Therapy shows that there is a good relationship between family support and HIV patient compliance in undergoing ARV therapy. Good family support such as families providing funds for treatment, asking for progress, providing motivation, providing comfort, giving attention to complaints of HIV patients and helping in problems experienced by HIV sufferers such as getting stigmatized from the community. To be obedient in undergoing therapy for sufferers regularly in taking medicine, carrying medicine when traveling, not stopping taking medicine if you feel a healthy condition. However, there are still HIV patients who are less compliant and non-adherent in undergoing ARV therapy.

The results showed that 41.9% of respondents received family support but were not obedient, and 3.2% who received family support but did not comply. This is because there are still people with HIV who have received support from their families who are less compliant and even disobedient. HIV patients sometimes forget their medication schedule so they are not regularly taken, drugs are not brought when people with HIV travel from home so they miss their medication schedule, do not take their medication

even though their family has warned them, and there are still some who find it difficult to undergo ARV therapy. despite having been given support by the family.

5. Conclusion

The role of the family is very influential on the adherence of HIV patients undergoing ARV therapy. This matter

evidenced by the amount of family support for HIV patients to adhere to ARV therapy. Types of family support are emotional support, instrumental support, informational support.

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