

## Rehabilitation framework for hiv/aids clients in the public health field practice of nursing students: a case study

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### ABSTRACT

One of the phenomena of people living with HIV/AIDS in the rehabilitation phase in rural areas is that there is not enough space for them to get optimal rehabilitation services. The objectives of this study was to provide a public health field practice framework for nursing students in the rehabilitation for people with HIV/AIDS. This research used a case study with a collective design. The primary data were taken from in-depth interviews of 3 informants. Secondary data was from reputable journals. Data processing was done by organizing, sorting, grouping, coding, or marking, and categorizing based on certain groupings. The analysis used descriptive analysis. The study found three problems i.e. HIV/AIDS material is in the curriculum, public health field practice is held in semester 5, and no specific guidelines for public health practice program on the rehabilitation of HIV/AIDS. This study recommended student interventions in the rehabilitation framework for people with HIV/AIDS referring to public health field practices based on the 2019 National Guidelines for HIV/AIDS Management.

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## INTRODUCTION

HIV and AIDS are a frightening specter in Indonesia, especially regarding the stigma embedded in society (Asrina et al., 2022). Hundreds of thousands of HIV/AIDS cases are recorded (Micah et al., 2020). For example, West Java has the third highest number of HIV cases and DKI is the region with the highest number of cases (Menggawanti et al., 2021). Data on HIV cases in Indonesia as of June 2022 in DKI Jakarta: 90,958 cases, East Java: 78,238 cases, West Java: 57,426 cases, Central Java: 47,417 cases, Papua: 45,638 cases, Bali: 28,376 cases, North Sumatra: 27,850 cases, Banten : 15,167 cases, South Sulawesi: 14,810 cases and Riau Islands: 12,943 cases. Heterosexual relations, homosexuality, and the use of injecting drug needles are still the biggest causes of HIV

transmission in Indonesia (Widyaningtyas, 2019). Heterosexual relationships are the cause of 28, 1 percent of the total HIV cases in Indonesia, followed by homosexual relationships as much as 18.7 percent. HIV cases in Indonesia are like an iceberg. Often sufferers do not know they are infected until fatal symptoms appear (Kemenkes, 2019). Early symptoms of HIV can be like a severe case of the flu or COVID-19 but usually occur a few weeks after infection (Kemenkes, 2017). In many people, early signs and symptoms of HIV include fever, headache, fatigue, swollen lymph nodes, rash, joint or muscle pain, and sore throat (Koniasari, 2019). The early phase of acute HIV is the body's natural response to HIV infection (Koniasari, 2019). Symptoms usually go away in one to four weeks, which is why they are often mistaken for a case of the flu (Aini & Agustina, 2017). This viral infection will not directly damage the body's organs. This is because the virus slowly reproduces and attacks the immune system, weakening it gradually (Martiningsih et al., 2015). This phase can be referred to as clinical latency symptoms. A person infected with HIV at this stage may feel healthy and look fine. If not treated with proper care, HIV can develop into a potentially life-threatening chronic condition, namely Acquired Immunodeficiency Syndrome (AIDS) (Rachmawati et al., 2022). AIDS is the development of stage 3 HIV infection (Widiyanti & Hadi, 2019).

The series of studies carried out by the Government, community organizations, academics, or individual professionals on the integration of HIV and AIDS prevention policies and programs into the health system, were designed from the outset not only as a research activity (Rum & Rakhman, 2017). But it is also directed to encourage change, both at the individual level (changes in knowledge, attitudes, and behavior of the individuals involved in research) and at the structural level (HIV and AIDS response policies at the regional and national levels). This change refers to the actualization of potential which means that the potential of various parties involved in research is encouraged to be actualized in the practice of policies and programs. There is no exception for student involvement in overcoming it.

Many studies related to student involvement in HIV/AIDS prevention (Amanah et al., 2020; Marthin et al., 2017; WD. et al., 2021). A study by Wilandika in 2022 several months ago revealed the Implementation of HIV Health Education in Changing the Stigma of HIV/AIDS in Nursing Students (Wilandika, 2021). In 2019, a study was conducted on HIV/AIDS Prevention and Control Training (Mursidi et al., 2019). The training is aimed at students and it discussed about HIV/AIDS prevention. That is the gap with this study. This case study explored the involvement of nursing students in the HIV/AIDS rehabilitation program in the local content curriculum. The aim is to provide a framework for public health practice in the rehabilitation program for people with HIV/AIDS. The implication of this study is to provide added value to the management of the rehabilitation program from the point of view of field practice for health students.

## RESEARCH METHOD

HIV and AIDS are a frightening specter in Indonesia, especially regarding the stigma embedded in society (Asrina et al., 2022). Hundreds of thousands of HIV/AIDS cases are recorded (Micah et al., 2020). For example, West Java has the third highest number of HIV cases and DKI is the region with the highest number of cases (Menggawanti et al., 2021). Data on HIV cases in Indonesia as of June 2022 in DKI Jakarta: 90,958 cases, East Java: 78,238 cases, West Java: 57,426 cases, Central Java: 47,417 cases, Papua: 45,638 cases, Bali: 28,376 cases, North Sumatra: 27,850 cases, Banten : 15,167 cases, South Sulawesi: 14,810 cases and Riau Islands: 12,943 cases. Heterosexual relations, homosexuality, and the use of injecting drug needles are still the biggest causes of HIV transmission in Indonesia (Widyaningtyas, 2019). Heterosexual relationships are the cause of 28, 1 percent of the total HIV cases in Indonesia, followed by homosexual relationships as much as 18.7 percent. HIV cases in Indonesia are like an iceberg. Often sufferers do not know they are infected until fatal symptoms appear (Kemenkes, 2019). Early symptoms of HIV can be like a severe case of

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## RESULTS AND DISCUSSIONS

### Data Assessment

The three lecturers were interviewed each from the provinces of Aceh (MS), East Java (JK), and Papua (IT). The interview materials were arranged in four themes, i.e. general information on HIV/AIDS, curriculum related to HIV/AIDS, student involvement in field practice, and suggestions for field practice related to HIV/AIDS prevention.

### Theme 1: General Information on HIV/AIDS

Few people understand HIV and AIDS, including students as prospective health professionals, because they do not receive adequate training during the process of studying on campus. It is important to know the symptoms and ways of transmission to prevent yourself and others from this disease. The following are the questions:

- a. How many cases of HIV/AIDS are in your area?

"Papua is one of the provinces with the highest HIV/AIDS cases in Indonesia. Our locations in Jayapura, Nabire, Mimika Jayawijaya, and Merauke are the five areas with the most cases in Papua. According to research, there are at least two main factors that cause HIV transmission in Papua to grow rapidly. First, is the rise of liquor (alcohol). Second,

free sex behavior. Those two negative habits can make a nation experience the phenomenon of the lost generation. That's our challenge." (IT)

"In East Java, the city of Surabaya is the area with the highest number of cases of people living with HIV/AIDS. Then followed by Banyuwangi and Jember. The Pacitan Regency is the lowest area. Various efforts have been made to reduce the number of HIV/AIDS in East Java. One of them is expanding HIV testing and treatment support services in 38 districts/cities in East Java." (JK)

"About HIV/AIDS cases in Aceh only because the community considers it taboo, so it is difficult for us to get the actual data, most of the data available at the health centers because they experience health problems and have just gone to the health service center, the team in charge will do the tracking.... That's where the answer is that there are additional cases, the information that the average sufferer is the driver, they are probably moving." (MS)

- b. Do students receive adequate training on HIV/AIDS?

"We teach HIV/AIDS in several subjects, such as public health courses, infectious diseases, and community nursing. We also provide HIV/AIDS material integrally with other lecture materials but it is not discussed specifically." (IT).

"I teach public health. In particular, I do not teach HIV/AIDS but become part of the public health materials. Because the disease is part of the current public concern. Moreover, the disease is one of the national health agendas. We automatically discuss it." (JK)

"Materials about HIV/AIDS are provided and integrated into nursing. The community is only limited to introducing material, not being specific because our vision is towards disaster. HIV/AIDS is included in the Reproductive Health course, taught in one meeting, this case is now buried with the Covid-19 case, so the prevalence is small." (MS).

## **Theme 2: Curriculum related to the Rehabilitation of People with HIV/AIDS.**

The Ministry strives for sex education to be included in the curriculum, both in the curriculum and in the extra curriculum. It is integrated into the learning system but is not a subject of its own. With education from various parties, the number of people living with HIV/AIDS can be reduced (Mabaso et al., 2018). The campus is a very effective area for socialization and can be proactive because it involves many components from lecturers, school committees, parents, and the community (Wilandika, 2017). By including HIV/AIDS education and sex education in the curriculum, it is possible to provide information and prevent the spread of HIV/AIDS.

- a. What is the student practice framework related to HIV/AIDS?

"HIV/AIDS is listed in the Constitutional Court. HIV/AIDS is given in semester 4. Theory 2 credits semester and clinical practice 2 credits semester. Clinical practice is nursing management for HIV/AIDS. Determination of courses based on tracer studies in the curriculum. Clinical practice in the hospital is an obligation. Not even a few campuses send students to the Type A central hospital which provides specialist services to HIV/AIDS patients because in their campus area there is no hospital with these facilities." (IT).

"We present theory and practice related to HIV/AIDS. The theory is given in the fourth semester and practiced in the fifth semester. Practice is given one credit. Our students practice at a major hospital in Surabaya to fulfill instructional goals related to HIV/AIDS cases." (JK).

"We are in Sigli, Aceh. To practice cases such as HIV/AIDS, students have to go to Banda Aceh, which is 3 hours away. There are demands in the student practice curriculum at Type A hospitals to gain specialist nursing experience." (MS).

### Theme 3: Student Involvement in Field Practice

The purpose of carrying out fieldwork practices is to gain work experience before entering the world of work and obtain a work certificate (reference) from the relevant agency (Hernández-Martínez et al., 2021). In addition, students can increase their knowledge, experience, abilities, and skills that have been obtained during the study time.

- a. What are their duties and responsibilities during field practice?

"Our students do field practice in various areas in Papua. Our job is to train students to be able to adapt to the world of work. We provide experience to students about the work system in government health service agencies, especially in Puskesmas, hospitals, or in the community. None other than so that they gain experience in applying the theory they have learned in college to real problems in the world of work. Their duties and responsibilities depend on where they practice. If it is at the Puskesmas, clinic or hospital, they generally have to compile a case study. Whereas in the community they identify existing health problems, then develop a plan to solve the problem, generally in groups...." (IT).

"During field practice, students learn to have responsibility through direct experience in the community. They interact directly amid health practitioners, government officials, community organizations, health service providers and other related parties, then they make work plans, report and present the results of their activities." (JK)

"In general, they have duties and responsibilities that we expect to be independent. In practice in the community, for example, they conduct data assessments, identify problems, prioritize problems, develop activity plans for handling problems and carry out evaluations. The issues raised can be environmental, family, or community health. Their responsibilities are group rather than individual...." (MS)

- b. What are the expected results from field practice?

"We provide practical guidance for field work...the results depend on the place of practice. If in the hospital, they are asked to compile case studies in the sections where they practice. If in the community, in the form of a work practice report, it is then discussed together and made a presentation, involving the community, community leaders, and of course practice supervisors....the same thing is happening when practicing at the hospital, there is also a case presentation....." (IT)

"Field work practice is divided into two parts, namely hospital and community health. The hospital includes all major service units such as medical-surgical, pediatric, obstetric, emergency, and psychiatric. While the practice in the community includes work practices at the Puskesmas. Their main duties and responsibilities are reviewing existing health problems, preparing work plans, and reporting the results of the studies." (JK)

"Almost all campuses have the same fieldwork practice program as contained in the curriculum. Including goals, practice areas, and student activities, both in hospitals and public health centers. In general, students are asked to identify existing health cases, learn to prioritize problems, solve problems and evaluate them. Everything is presented in a report." (MS).

### Theme 4: What Are Your Suggestions for The Involvement of Nursing Students In The HIV/AIDS Rehabilitation Program?

Education and information about HIV/AIDS for students will affect the quality of provision of knowledge and skills for students which in turn has a positive impact on the end of education (Hewitt et al., 2021). Preparing competencies from an early age is expected to help prevent and reduce HIV/AIDS cases in the community.

- a. What is the future role of students?

"It's good in the future students are given a kind of field practice specialization with cases according to their interests. In handling HIV/AIDS, they can choose preventive,

promotive, curative, or rehabilitative aspects. It can be in the hospital, clinic, health center, or family health. Even if we need home care. The problem is that it requires more intensive guidance and more lecturers." (IT)

"Students start field practice in the fifth semester. Practice goals depend on their area of practice. The problem is that not all students master or have an interest according to their potential. Our suggestion is to limit the practice area based on the student's specialization so that the practice results are more optimal. Like the handling of HIV/AIDS, not all students have the same competencies or interests. Those who have a great interest will be more serious and the results will be better than those who have little interest in the case. The restriction also gives benefits to patients/clients because there are not a few cases where patients are not willing to speak in front of many people or front of several health workers, including students.....perhaps that is our suggestion..." (JK).

"In Aceh, the issue of HIV/AIDS is still taboo and not much discussed. Therefore, the challenge in field practice by students is if it helps to identify the number of cases, unless they voluntarily come to the Puskesmas. A routine, consistent and continuous socialization program is needed so that when students practice there are not many obstacles...otherwise, students who have minimal supplies will experience great difficulties in society...especially sensitive issues such as HIV/AIDS..." (MS).

### **Case Analysis**

With a descriptive analysis of the results of the interviews with the three informants above, this study underscores three findings, namely that the case of HIV/AIDS is a national problem that requires handling with integrity from students and education providers. HIV/AIDS material is already contained in the curriculum, covering theory and practice, and public health practice is held in the fifth semester. However, no public health practice program specifically addresses HIV/AIDS. To organize a rehabilitation program as an intervention for health students in public health field practice, a guideline is needed as their framework in the field directed by lecturers and campus management support.

This study found three issues that need to be discussed, namely HIV/AIDS as a national problem that requires an integrated solution, the absence of a public health practice program for students specifically regarding the rehabilitation of HIV/AIDS patients, and the need for a uniform framework for fieldwork practices for health students.

### **Plans and Implementation**

Students are part of society. In every program on a national scale, community involvement is highly recommended, because these programs not only require large amounts of community support but also to test eligibility highly recommended from an academic point of view. Many types of research related to public health have been carried out involving various parties integrally such as family planning, tuberculosis, malaria, and others (Habibah & Dhamanti, 2021; Mongilala et al., 2019; Widyaningtyas, 2019). The HIV/AIDS rehabilitation program has also been discussed by several researchers who discussed social issues (Smith et al., 2018). Therefore, socialization of the rehabilitation program needs to be done before it is implemented, including if it involves students.

Rehabilitation programs for HIV/AIDS patients involving students have not been widely discussed. There has been no research related to the HIV/AIDS rehabilitation program by students. It is known that involving students in various community programs in the health sector is recognized to have provided many benefits such as stunting, health kidney day, environmental health, and others (De Bortoli Cassiani et al., 2017; Torre et al., 2020). It needs to be emphasized that field practice with specific programs will help achieve clearer goals. In addition, the program will run more efficiently in terms of funds, costs, and other resources.

However, the existence of guidelines as a framework in the HIV/AIDS rehabilitation program is no less important. The Ministry of Health of the Republic of Indonesia has published a Guidebook for the Prevention of HIV Transmission Program which aims, among others, to break the chain of transmission, and carry out early detection and adequate case management by developing a quality network (Kemenkes, 2019). Achieving this requires the cooperation of all parties, including the involvement of students as part of the community. Specifically, the guide is not specifically designed for students but can be used as a reference in developing a national standard rehabilitation program. Many studies have been carried out based on existing national standards. e.g. hemodialysis guidelines, and Diabetes Management (Soelistijo, 2020; Sola et al., 2020). Field programs for health students that focus on the rehabilitation of HIV/AIDS patients can be prepared using existing standards which can then be modified according to the needs and local wisdom where the campus is located.

### Study Limitation

The results of this case study cannot be used to generalize. Moreover, the number of health lecturers is tens of thousands, spread over 34 provinces with a total population of more than 270 million. However, it can be used as an illustration of handling similar cases. Therefore, quantitative research involving many HIV/AIDS clients or patients is recommended. Many previous studies discussed the causative factors, methods of prevention, and treatment, but rarely discussed the rehabilitation program (Pessiwarissa et al., 2019; Pradani & Kundarto, 2018; WD. et al., 2021). Especially on the rehabilitation program that involves health students is still very rare. Therefore, the results of this study provide novelty in the treatment of HIV/AIDS on health education programs.

## CONCLUSION

This study seeks to discuss one way of dealing with HIV/AIDS patients through a rehabilitation program by involving students who practice in the community. The results of this study reveal three problems where there is no uniformity in the implementation of field practices related to HIV/AIDS prevention, making field practice students unable to focus. Therefore, it is recommended that the preparation of an HIV/AIDS rehabilitation pilot project driven by campuses in areas with the highest HIV/AIDS cases can be an example of the success or failure of the rehabilitation program framework. This is important because the existing guidelines have never been carried out by campuses that involve students in field practice of HIV/AIDS prevention.

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