

Self-Acceptance of Adolescents with Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome in Bandung

Ahmad Yaneri^A, Berliana Dwi Nur Geonanda^B

Abstract

Self-acceptance is a form of a person's satisfaction with himself which is characterized by understanding himself, being able to overcome his circumstances, being able to show a positive attitude within himself, and being able to continue to develop with existing circumstances through realistic expectations. In HIV positive cases, self-acceptance of positive status is difficult. Many people still reject HIV/AIDS and consider it a cursed thing, which makes HIV/AIDS sufferers increasingly reluctant to accept their positive status. This affects the lives of adolescents with HIV/AIDS, especially adolescents who contract it from their parents. There needs to be an effort to increase HIV/AIDS sufferers' self-acceptance of their status, especially among adolescents so that they can live life as usual. This research was conducted to determine the description of adolescents self-acceptance regarding their HIV positive status through: 1) Self-Understanding, 2) How to Cope with Situations, 3) Positive Attitudes, and 4) Realistic Expectations. This research is descriptive qualitative research with a phenomenological approach. The informants in this study were selected using purposive techniques. The data collection techniques used were in-depth interviews, observation and documentation studies. The research results show that adolescents' self-acceptance of their HIV positive status has not been realized optimally because adolescents' understanding of HIV/AIDS is still not optimal, there is a lack of intensity of meetings with peer support groups, and there is still stigma and discrimination.

Keywords: *Self-Acceptance, Adolescents, HIV/AIDS.*

INTRODUCTION

HIV/AIDS remains a difficult issue for society to accept, despite the increasing availability of valid information on the matter. Many people still view this issue with disdain, leading to stigma and discrimination against HIV/AIDS survivors (Srinatania & Karlina, 2021). As a result, HIV/AIDS survivors often have to struggle alone to address both their internal and external challenges. Internally, they must confront the shock and self-acceptance of their HIV-positive status. This self-acceptance is crucial for the lives of HIV/AIDS survivors. However, it is particularly challenging for adolescents with HIV/AIDS, whose thinking is often unstable, leading to dissatisfaction

^APoliteknik Kesejahteraan Sosial, Bandung, Indonesia, Email: ahmadyaneri@gmail.com

^BPoliteknik Kesejahteraan Sosial, Bandung, Indonesia, Email: berlianageo@gmail.ac.id

and disappointment with themselves, as adolescence is a phase of self-identity exploration (Rakasiwi & Nurchayati, 2021; Sari & Reza, 2013). Many HIV/AIDS survivors experience depression after learning of their positive status (Koritelu et al., 2021). Moreover, if HIV/AIDS survivors do not accept themselves and their status, they may intentionally spread the virus to others out of resentment toward their condition. Therefore, it is essential for HIV/AIDS survivors, especially adolescents, to develop good self-acceptance to face their lives and avoid undesirable outcomes. In light of this situation, this study was conducted as an initial step to improve the self-acceptance of adolescents with HIV/AIDS by enhancing their understanding of HIV/AIDS through peer group gatherings.

This research is based on a review of several previous studies that also address the topic of self-acceptance among HIV/AIDS survivors. Generally, this topic has been studied with a few specific tendencies. First, studies aiming to understand the self-acceptance of PLHIV (People Living with HIV/AIDS) through aspects of nonattachment, nonavoidance, nonjudgment, tolerance, and willingness to engage in activities (Mendrofa et al., 2021). This study examines the social functioning of PLHIV by evaluating the functioning of these self-acceptance aspects. Second, studies have explained that self-acceptance in individuals with HIV-positive status can indicate the quality of life, particularly their psychological well-being (Yunita & Lestari, 2017). Moreover, there are stages that individuals must go through before they can accept themselves, where reaching the stage of accepting their HIV-positive status allows them to develop effective self-acceptance regarding their condition. Third, studies have shown that self-acceptance influences the survival of PLHIV (Rahmah, 2020). This is because self-acceptance is key to how PLHIV behave toward their health (Rakasiwi & Nurchayati, 2021). Poor self-acceptance can lead HIV/AIDS survivors to delay treatment.

Research on the topic of self-acceptance among PLHIV has been widely conducted in Indonesia. The three studies mentioned above indicate that self-acceptance is crucial for HIV/AIDS survivors and a necessary aspect of their lives to achieve proper social functioning. After reviewing these previous studies, this research aims to fill the existing gap. While previous studies have focused on HIV/AIDS survivors in general, this study will specifically examine the self-acceptance of adolescents with HIV/AIDS in Bandung, both those infected by their parents and those infected through risky behaviors. This research also aims to describe the self-acceptance of adolescents with HIV/AIDS in Bandung by analyzing their self-understanding, coping mechanisms, positive attitudes, and realistic hopes.

LITERATURE REVIEW

Self-Acceptance

Self-acceptance is the state in which an individual is able to understand themselves as they are, rather than as they wish to be, and

to hold realistic hopes aligned with their abilities (Nurhasyanah, 2012). According to Hurlock, "self-acceptance is a positive attitude in which an individual accepts themselves as a human being" (Nurhasyanah, 2012). Furthermore, Rogers defines self-acceptance as "an individual's ability to cope with the present situation based on past experiences and to maintain positive feelings towards current issues" (Merlin, 2022). Self-understanding refers to a condition where an individual recognizes their potential, enabling them to comprehend their aspirations (Kurniasih, 2020). It also encompasses self-belief, perspectives, and self-assessment (Jamaluddin, 2023). The term "method" refers to an activity that is repeatedly performed in the same manner, leading to the formation of habits (Siombo, 2021). A positive attitude is defined as actions that demonstrate good values, such as accepting the circumstances one faces (Aisyah, 2023). Realistic hope refers to expectations based on achievable and measurable realities (Sugiarto, 2023). An individual can set their own hopes without guidance from others, and the satisfaction obtained from achieving these hopes will positively impact self-acceptance (Kartika, 2020).

An individual needs self-knowledge to more easily accept themselves and to face life's challenges. When someone has discovered their true self through self-acceptance, it naturally leads to feelings and attitudes of self-confidence, meaningfulness, and usefulness in life. A person who can accept themselves is described as someone who is not in conflict with their own identity, who does not carry emotional burdens, and therefore has more opportunities to adjust to their environment. Self-acceptance can only be achieved by oneself. Although acceptance by others can facilitate self-acceptance, it is not dependent on others. This is because the decision to accept or reject oneself ultimately lies within the individual. Once self-acceptance is achieved, stress dissipates, and feelings of happiness emerge.

Adolescents with HIV/AIDS

According to King, adolescence is "a developmental period marking the transition from childhood to adulthood" (Tolukun, 2020). The National Population and Family Planning Board (BKKBN) defines adolescence as ranging from ages 10 to 24 (BKKBN, 2021). Adolescence is generally divided into three main phases based on age: early adolescence (ages 10-13), middle adolescence (ages 14-17), and late adolescence (ages 18-24) (The Asian Parent, 2022). The changes experienced during this period include physical, psychological, and social transformations. Adolescents with HIV are those who have been diagnosed as HIV-positive and require social support, healthcare services, and treatment to maximize their quality of life. Adolescents may contract HIV through various factors, such as vertical transmission (from mother to child), intravenous drug use, or sexual transmission. The challenges faced by adolescents with HIV/AIDS are generally categorized into three main areas: mental, physical, and social conditions. Physically, adolescents with HIV often experience issues

such as skin problems, hair loss, and weight issues. Socially, they may face rejection from society and, at times, even from their families, as well as stigma, discrimination, and difficulties in carrying out daily activities. These social challenges can lead to psychological problems such as depression, stress, and hopelessness.

METHOD

Self-acceptance in HIV patients refers to the state of psychological well-being experienced by individuals who are HIV-positive. Self-acceptance is essential for integrating the physical, mental, and spiritual aspects of a person. These elements are interconnected; when an HIV-positive individual accepts their status, it positively affects their mental state, reducing stress, fostering a healthy mind, and thereby supporting their physical health (by maintaining their immune system). Self-acceptance also enables HIV patients to avoid merely resigning to their limitations and focusing on their deficiencies. Instead, it helps them leverage their strengths, boosting their confidence and making life more meaningful. Consequently, challenges are not viewed as obstacles but as opportunities for self-actualization and potential development, allowing them to fully accept themselves. For adolescents, self-acceptance involves consciously accepting themselves as they are. This is crucial in their development, serving as a foundation for identity formation during a period when they are exploring their self-identity.

This research is a descriptive qualitative study employing a phenomenological approach. Qualitative research is used to gain theoretical perspectives that align with understanding the phenomenon under study (Harahap, 2020). This approach is suitable because the researcher is investigating self-acceptance among adolescents with Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) in Bandung. Descriptive research is considered appropriate as the researcher seeks to obtain information through the 5W+1H questions (what, who, when, where, why, and how) related to the study (Nurdin, 2019), which focuses on HIV/AIDS. Furthermore, a phenomenological approach is adopted because it allows the researcher to gain a deep understanding of HIV/AIDS without imposing limitations on interpreting the phenomenon (Abdussamad, 2021).

The data collected in this study comprises both primary and secondary sources. Primary data was directly obtained from interviews conducted with four adolescents living with HIV/AIDS in Bandung: AM, FM, S, and A, as well as two individuals from the adolescents' social circles: H and T. Secondary data was gathered from written sources such as general data on HIV-positive cases in Bandung, books, internet sources, observations, and document studies including theses, journals, and relevant official websites that serve as references for the study. The selection of data sources was carried out purposively. The researcher chose sources based on specific criteria, namely, adolescents aged 15-24 years living in Bandung who were willing to provide information related to the study, while also considering variations

among informants to enrich the data collected. Data collection techniques included interviews, observations, and document studies.

The validity of the research data was verified through various methods. Credibility was tested by increasing persistence, using reference materials, and employing both technical and time triangulation (Murdiyanto, 2020). Transferability was tested through the preparation of clear, detailed, sequential, and reliable reports. Dependability was ensured through the guidance process with supervisors to demonstrate how consistently the researcher collected data, developed, and applied ideas when interpreting and drawing conclusions (Harahap, 2020). Confirmability was tested by discussing the research results with individuals who did not participate in the data collection, ensuring that the research findings aligned with the data obtained and were more objective (Harahap, 2020). The data analysis technique used in this study was qualitative data analysis, which involved data reduction, data presentation, and conclusion drawing or verification.

RESULTS AND DISCUSSION

Self-Understanding of Adolescents with HIV/AIDS

Self-understanding is one of the characteristics of individuals who can accept themselves. Based on the findings obtained from in-depth interviews and observations conducted with informants, who are adolescents with HIV/AIDS in Bandung, it was found that the more adolescents understand themselves, the better their self-acceptance. Various opinions about themselves were expressed by the adolescents, including their physical, psychological, social, and spiritual conditions, as evidence of their self-understanding. Additionally, the adolescents were able to articulate their strengths and weaknesses, their self-belief, and their self-assessment, which aligns with the concept of self-understanding (Jamaluddin, 2023). This self-assessment includes whether they like or dislike themselves. Dislike for themselves is often related to their HIV-positive status, such as in the case of AM, who expressed dissatisfaction with the thinness of his wrists caused by ARV medication and his efforts to improve his stamina through exercise, which he felt did not significantly impact his body. A, on the other hand, had scars on his legs from an HIV-related infection, which led to frequent teasing from his peers and diminished his self-confidence. However, overall, the adolescents liked themselves as they were able to reconcile with their HIV-positive status. This was largely due to the support from people around them, such as family, friends, and peer support groups (KDS). KDS is particularly important as a place for sharing stories and exchanging opinions with peers who are of the same age and share similar experiences. However, in reality, the frequency and intensity of peer support group meetings are still lacking.

Despite receiving support, the adolescents still face stigma and discrimination from their surroundings, friends, and even from their own families. This has prevented the adolescents from fully accepting

their HIV-positive status. However, they remain grateful and accept their health condition, which aligns with Hurlock's aspect of self-acceptance as cited in Merlin (2022). Although the adolescents are physically healthy, being infected with HIV makes them prone to illness and easily fatigued. Psychologically, the adolescents reported being fine, but they had previously experienced stress, and some had even contemplated suicide. Spiritually, AM and A felt that they had not fully committed to their religious practices, while FM and S admitted that their religious observance was inconsistent. S acknowledged that he was half-hearted in fulfilling his obligations to God and only turned to religion when he needed something. However, they all expressed a desire to improve.

The adolescents could also describe their state when they first learned of their HIV-positive status and their journey towards self-acceptance, as explained by Kubler-Ross's theory in Merlin (2022). Upon learning his status, AM immediately reached the acceptance stage without feeling any resentment towards his HIV-positive status. In contrast, FM went through four stages: denial, when he refused to take his medication; anger, when he blamed his parents; bargaining, when he felt the need for treatment; and acceptance, when he made peace with himself. Informants S and A experienced all five stages: denial, anger, bargaining, depression, and acceptance. Denial occurred when they were confused about what was happening to them. Anger was directed towards themselves in S's case and towards parents in A's case. Bargaining occurred when S and A felt a strong desire for treatment. Depression manifested in S with sudden crying episodes and suicidal thoughts shortly after learning of his positive status, while A felt deep sadness upon learning her status. Finally, self-acceptance was reached when S and A accepted their HIV-positive status and were able to continue their lives as usual.

The adolescents were able to understand themselves, which in turn, led to confidence in themselves and their actions. This is reinforced by one of the adolescent's statements during the interview: "Of course, I have to be confident. I have to believe that I can accomplish what I'm doing. Right now, I'm stepping out of my comfort zone, so whatever decision I make, I have to be confident in my choice." (FM, March 22, 2024)

Coping Strategies of Adolescents with HIV/AIDS

Based on the research findings, it was revealed that the informants were relatively capable of managing their circumstances despite their current HIV-positive status. Upon discovering their positive status, the four adolescent informants with HIV/AIDS exhibited varied responses and coping strategies. Some displayed positive reactions, such as a desire to seek immediate treatment, increased diligence in self-care, and a commitment to consistently taking their medication. However, others reacted oppositely, refusing to take their medication out of frustration and resentment towards their current

HIV-positive status, especially when the infection was transmitted from their parents. Some adolescents who contracted the virus from their parents expressed feelings of anger about their situation and a desire to blame their parents, but this was not possible as their parents had already passed away. Consequently, they attempted to accept their positive status to make peace with themselves. The adolescents employed different strategies to cope with their challenges, emotions, and the perceptions of others, including dealing with the stigma and discrimination they continued to face due to their HIV-positive status. They consistently maintained their stamina and immune system by regularly taking their antiretroviral (ARV) medication and refused to stop, as they did not want to transmit the virus to others and were determined to halt the spread of HIV within themselves. This determination is reflected in one of the adolescents' statements during the interview: "The effort I make is to consistently take my medication without missing a dose, always setting an alarm so I don't forget, because I want to stop the transmission within myself and not spread it to others" (S, March 26, 2024).

Positive Attitudes of Adolescents with HIV/AIDS

The positive attitudes exhibited by the four adolescent informants with HIV/AIDS—AM, FM, S, and A—are manifestations of their acceptance of their HIV-positive status. Positive attitudes, as defined by Aisyah (2023), encompass all the good actions undertaken by the informants. The research revealed various positive attitudes among the adolescents, with all four informants consistently displaying attitudes such as expressing gratitude, striving to become better individuals, and diligently taking their medication. FM and S also mentioned their desire to continue improving themselves. The informants have been able to maintain these positive attitudes over time. This sentiment is reinforced by the following statement from one of the adolescent informants during the interview: "What keeps me going is, first, looking at my peers who are in a worse situation than I am. That makes me more grateful and also serves as a motivation for me to maintain this positive attitude." (AM, March 22, 2024)

Realistic Hopes of Adolescents with HIV/AIDS

Realistic hope is essential for achieving good self-acceptance (Nurhasyanah, 2012). The research findings revealed that the four informants have realistic hopes, which include their desired goals, short-term aspirations for themselves, and hopes for those around them. AM aspires to establish a shelter for adolescents with HIV/AIDS, where they can collaborate creatively, ultimately educating and uplifting each other. FM, on the other hand, wishes to educate the public about HIV and prove that two people living with HIV can have children who are not HIV-positive. Additionally, FM dreams of becoming an entrepreneur. S and A each have specific career goals: S aspires to own a restaurant, while A dreams of becoming a doctor. Regarding their

short-term hopes for themselves, FM and S wish to secure employment, while AM hopes for good health and strength to compete in his upcoming soccer tournament, and A wishes to be accepted into the school of her choice. All four informants expressed a shared hope for those around them: that they find happiness. This sentiment is supported by a statement from one of the adolescents with HIV/AIDS during the interview: "My hope for those around me is simply that they are happy and that they can accept my status." (FM, March 22, 2024)

Based on the research findings, several points can be discussed. First, self-understanding for adolescents with HIV/AIDS can be concluded as the state of fully knowing oneself, encompassing physical, psychological, social, and spiritual aspects. The adolescents were able to articulate their views about themselves, including their strengths and weaknesses, provide self-assessments, express confidence in themselves, and recount their experiences upon first learning of their positive status—a challenging task if they had not yet accepted their HIV-positive identity. Self-understanding serves as the foundation for self-acceptance; before an individual can accept themselves, they must first understand what is happening within them.

Second, adolescents with HIV/AIDS employ various strategies to cope with their situation, including their responses upon learning of their positive status, managing their HIV-infected bodies, dealing with emotions, and addressing others' perceptions of them. These coping mechanisms enable them to live their lives and face challenges effectively.

Third, the manifestation of self-acceptance among adolescents with HIV/AIDS is evident through their positive attitudes, which they are able to maintain. These positive attitudes are sustained by strong internal motivation as well as support from their surroundings.

Fourth, the adolescents have realistic hopes, grounded in achievable and measurable realities (Sugiarto, 2023). An individual can set their hopes independently, without direction from others, and the satisfaction derived from achieving these hopes positively impacts self-acceptance (Kartika, 2020). This allows the adolescents not only to accept their limitations and focus on their constraints but also to leverage their strengths, thereby enhancing their confidence and making life more meaningful.

This research contributes both theoretically and practically. Theoretically, it is hoped that this study will add to the body of knowledge and inform future research on self-acceptance among adolescents with HIV/AIDS. Practically, the research provides insights into solving issues related to self-acceptance among adolescents with HIV/AIDS. The research identifies several problems, needs, and available support systems for HIV/AIDS survivors. These findings can inform stakeholders and related entities to not only focus on the prevention and management of HIV/AIDS but also on enhancing the capacities of HIV/AIDS survivors, particularly adolescents.

However, the study has limitations, notably the relatively small

number of adolescent informants with HIV/AIDS, which has limited the ability of the researcher to provide comprehensive and conclusive results. This limitation is a weakness of the study. Therefore, the researcher recommends further research on programs that can assist adolescents in accepting their positive status and addressing stigma and discrimination associated with HIV/AIDS, as these issues are significant barriers to their full acceptance of their HIV-positive status.

CONCLUSION

This study investigates the self-acceptance of adolescents with HIV/AIDS in Bandung. The research findings indicate that the self-acceptance of HIV-positive status among adolescents has not been fully realized. This is due to several issues, including the persistent stigma and discrimination associated with HIV/AIDS, the lack of understanding among adolescents about HIV/AIDS itself, and the insufficient frequency of peer support group (KDS) meetings. These issues were identified through the analysis of sub-problems in the research, such as the understanding of adolescents with HIV/AIDS in Bandung, their coping mechanisms, their positive attitudes, and their realistic hopes. Therefore, efforts are needed to enhance the self-acceptance of adolescents with HIV/AIDS regarding their positive status by increasing their understanding of HIV/AIDS through peer group gatherings.

REFERENCES

- Abdussamad, Z. (2021). *Metode Penelitian Kualitatif*. Makassar: Syakir Media Press.
- Aisyah, S., & Anshori, M. (2023, Februari). Penguatan Karakter Peserta Didik Melalui Pembiasaan Sikap Positif. *Dirasah: Jurnal Pemikiran dan Pendidikan Dasar Islam*, 6(1), 30-50.
- Harahap, N. (2020). *Penelitian Kualitatif*. Medan: Wal Ashri Publishing.
- Jamaluddin, S. L., Yusuf, A. N., & Sahade, M. (2023). Pengaruh Pemahaman Diri dan Lingkungan Keluarga Terhadap Minat Memilih Program Studi di Universitas Negeri Makassar. *Jurusan Pendidikan Akuntansi*, 3(2).
- Kartika, M., Irwanto. (2020). *Aku dan Skoliosis: Studi Kasus Penerimaan Diri Remaja Perempuan Yang Mengalami Sikolis*. Jakarta: Universitas Katolik Indonesia Atma Jaya.
- Kurniasih, V. W., Fitriyah, F. K., Hidayat, M. T., & Sunanto, S. (2020, Agustus). Hubungan Pemahaman Diri Terhadap Rasa Tanggung Jawab Sebuah Survey Pada Anak Usia Dini di Kota Surabaya. *Child Education Journal*, 2(2), 98-105.
- Mendrofa, E. S., Rasalwati, U. H., & Nurushshobah, S. F. (2021). Penerimaan Diri Orang dengan HIV/AIDS di Balai Rehabilitasi Sosial Odh “Bahagia” Medan. *Jurnal Ilmiah Rehabilitasi Sosial (Rehsos)*, 3(2), 165-188.
- Merlin, N.M. (2022). *Meningkatkan Penerimaan Diri Pada Pasien Kanker Payudara*. Bandung: Feniks Muda Sejahtera.

- Murdiyanto, E. (2020). *Metode Penelitian Kualitatif*. Yogyakarta: Yogyakarta Press.
- Nurdin, I., & Hartati, S. (2019). *Metodologi Penelitian Sosial*. Surabaya: Media Sahabat Cendekia.
- Nurhasyanah. (2012). Faktor-Faktor Yang Mempengaruhi Penerimaan Diri Pada Wanita Infertilitas. *Jurnal Penelitian dan Pengukuran Psikologi*, 1(1), 143-152.
- Pratiwi, R. D., Kurniawan, R., & Suyono, S. P. (2022). *Sebatas Hidup Anak dengan HIV/AIDS*. Indramayu: Penerbit Adab.
- Sari, D. J. (2013). Hubungan Antara Dukungan Sosial dengan Penerimaan Diri Pada Remaja Penderita HIV di Surabaya. *Character Jurnal Penelitian Psikologi*, 1(3).
- Siombo, M. R. (2021). *Hukum Adat*. Tangerang Selatan: Universitas Terbuka.
- Srinatania, D., & Karlina, R.C. (2021). Pengalaman Hidup pada Remaja dengan HIV/AIDS di Kota Bandung. *Risenologi*, 6(1), 43-58.
- Sugiarso, E., Makiya, K. R., Prasetyo, H., Priyanto, S. E., Deskarina, R., Rohman, N., & Nugroho, D. Y. (2023). *Perilaku Wisatawan*. Bantul: Mata Kata Inspirasi.
- Yunita, A. & Lestari, M.D. (2017). Proses Grieving dan Penerimaan Diri Pada Ibu Rumah Tangga Berstatus HIV Positif Yang Tertular Melalui Suaminya. *Jurnal Psikologi Udayana*, 4(2), 223-238.