

Application Of Self Efficacy Model To Improvement Of Self Care, Self Esteem And Self Efficacy In Patients With HIV AIDS At Community Health Centers In The Mimika District, 2020

Jems KR Maay*¹, Blestina Maryorita²

¹Nursing School, Health Polytechnic of The Ministry of Health Jayapura, Street in Padang Bulan

²Hedam, Districk Heram, Jayapura City, Papua, Indonesia

Corresponding Author: Jems KR Maay E-Mail: jemskrmaay@yahoo.co.id

ABSTRACT

Background: In Indonesia alone, it is reported that the number of people living with HIV-AIDS continues to increase every year. In the field of infectious disease prevention and control, the Ministry of Health noted that the highest number of HIV sufferers was DKI Jakarta with 48,502 people, followed by East Java with 35,168 people, Papua 27,052 people, West Java with 26,066 people, Central Java 19,272 people, and Bali 15,873 people. In Indonesia, there are those of the productive age, between the ages of 20-39 years who are high. According to (Bandura, 1986), (Brown SP et al goals, and produce something. Schultz (1994) defines self-efficacy as our feelings towards our adequacy, efficiency, and ability to cope with life. Distribution of Respondents based on Characteristics (Age and Occupation) in the case and control groups in the work area of Community Health Centers Sentani, Jayapura Regency in 2020.

Purpose: Does this study aim to determine the effectiveness of the application of the self-efficacy model on the fulfillment of self-care in HIV AIDS patients at the Timika Health Center.

Methods: This type of research uses quasi-experimental research. Where in this study the treatment was carried out on the research subject. The treatment of the research subjects was the application of the self-efficacy model to the research subjects but no control was done. The study population was all HIV AIDS patients who came for treatment at the Timika Health Center in 2020. The place of this research will be carried out at the Timika Community Health Center, namely Jiliale Health Center, Timika Health Center, and Wania Community Health Center.

Results: The effect of implementing the self-efficacy model on self-care for HIV / AIDS patients at the Jiliale Center, Mimika Regency in 2020, has increased between before and after the intervention. The results of the analysis using paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. There was a significant difference in the self-care aspects of HIV / AIDS patients after the implementation of the self-efficacy model ($p = 0.000$) with a different strength of 83.5%. The effect of applying the self-efficacy model to self-esteem in HIV / AIDS patients at the Jiliale Center, Mimika Regency in 2020, shows that there is an increase in the average self-esteem value of HIV AIDS patients between before and after the intervention. The results of the analysis using paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. There is a significant difference in the self-efficacy of patients with HIV / AIDS after implementing the self-efficacy model ($p = 0.000$) with a difference of 34.3%. The effect of applying the self-efficacy model on the self-efficacy of HIV / AIDS patients at the Jiliale Public Health Center, Mimika Regency has an average value. -The average self-efficacy of HIV / AIDS patients has increased between before and after the intervention. The results of the analysis using paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. There was a significant difference in the self-efficacy of HIV / AIDS patients after the application of the self-efficacy model ($p = 0.000$). with a different strength of 46.5%

Conclusion: Based on the results obtained in this study, it can be concluded that the application of the self-efficacy model affects improving self-care for HIV / AIDS patients at the Jiliale Center, Mimika Regency. The application of the self-efficacy model aims to influence the patient's cognitive, thus someone who has a high level of self-efficacy will have a strong impetus in fulfilling self-care needs.

The application of the self-efficacy model affects the self-esteem of HIV / AIDS patients at the Jiliale Center, Mimika Regency. There is a tendency that the higher the level of patient self-efficacy causes an increase in awareness of his existence. Indirectly will affect increasing patient self-esteem. The application of the self-efficacy model affects the self-efficacy of HIV / AIDS patients at Jiliale Center, Mimika Regency. Self-efficacy is a psychological procedure that will increase a person's self-confidence so that they gain control over self-function in dealing with various things

Keywords: Self Efficacy Model, Self Care, Self Esteem, HIV, AIDS

Correspondence:

Jems KR Maay

1Nursing School, Health Polytechnic of The Ministry of Health Jayapura, Street in Padang Bulan

*Corresponding author: Jems KR Maay email-address: jemskrmaay@yahoo.co.id

Application Of Self Efficacy Model To Improvement Of Self Care, Self Esteem And Self Efficacy In Patients With HIV AIDS At Community Health Centers In The Mimika District, 2020

BACKGROUND

Based on data from UNAIDS (United Nations Program on HIV / AIDS) in 2012, an estimated 34 million people in the world have been infected with HIV and there are approximately 2,000,000 children and adults who died from AIDS. This continues to be a big problem, proven until 2016, there were already more than 36.7 million people living with Human Immunodeficiency Virus (HIV). The number continues to increase until now. In Indonesia alone, it is reported that the number of people living with HIV-AIDS continues to increase every year. The largest provinces in Indonesia are DKI Jakarta with 48,502 people, followed by East Java 35,168 people, Papua 27,052 people, West Java 26,066 people, Central Java with 19,272 people, and Bali with 15,873 people. between the ages of 20-39 years are high. Based on data from the Papua Province AIDS Commission (KPA) report, it was recorded that up to March 31 2016 the number of HIV sufferers in Papua Province was 25,233 cases, of which 98% were caused by sexual relations. The highest number of HIV / AIDS sufferers was in Jayawijaya district with 5,293 cases and Mimika City with 4,524 cases. Based on age groups, the highest number of HIV / AIDS sufferers was in the age range 25-49 years, with 5,333 cases and 9,211 AIDS cases (KPA, 2016).

In the Papua Provincial Health Office in 2017 there were 28,771 HIV-AIDS sufferers; consisting of HIV: 17,611 and AIDS: 11,060. Of these, 26,525 were of reproductive age 15 - 49 years (99.08%) and 14,684 (54.9%) of women of reproductive age. It is also reported that in general the process of HIV-AIDS transmission in Papua occurs because of sexual intercourse. Another factor that causes the rate of progression of this disease is life behavior such as promiscuity and drinking habits. According to (Ambarwati et al. 2014), when a person has been diagnosed with the HIV virus in his psychosocial assessment he will withdraw from his environment. A person who knows that he has HIV-AIDS will think that this news is like deadly information and indirectly has a very bad impact on self-efficacy in his life expectancy. Self-efficacy plays a very important role in everyday life, someone will be able to use their potential optimally if self-efficacy has high self-efficacy. One aspect of life that is influenced by self-efficacy is the ability to carry out activities for basic human needs. According to (Bandura, 1986), (Brown SP et al. (2005) suggests that self-efficacy is an individual's assessment of their ability or competence to perform a task, achieve a goal, and produce something. Schultz (1994) defines self-efficacy as our feelings. to our adequacy, efficiency, and ability to

cope with life. According to (Spirita, 2013) a client's diagnosis of HIV / AIDS does not only affect their biological condition but will affect all aspects of their life such as psychological, social, spiritual. This of course will have an impact on the role, productivity, and even affect motivation in activities to meet the basic needs of humans every day. HIV-AIDS sufferers. Because in addition to weakening his physical health condition, he will also face practical and psychological challenges including dysfunction in his family and community roles, the stress in terms of economy, disruption of social and emotional life. Clients also experience self-confrontation because of stigma and discrimination (Armistead & Forehand, 1995 in Ahwan Z, 2013). The continuing consequence of the social stigma experienced by people with HIV-AIDS causes loss of self-confidence, self-esteem, and self-efficacy aspects in these patients. In the end, this condition will cause disturbances in the patient's motivation and ability to carry out activities to fulfill basic human needs. Human basic needs are the elements needed by humans in maintaining the balance of their bodies both physiologically and psychologically with the aim of maintaining life and health.

Purpose

Does this study aim to determine the effectiveness of the application of the self-efficacy model on the fulfillment of self-care in HIV Aids patients at the Timika Health Center?

METHODOLOG

This type of research uses quasi-experimental research. Where in this study the treatment was carried out on the research subject. The treatment of the research subjects was the application of the self-efficacy model to the research subjects but no control was done. The study population was all HIV AIDS patients who came for treatment at the Timika Health Center in 2020. The place of this research will be carried out at the Timika Community Health Center, namely Jiliale Health Center, Timika Health Center, and Wania Community Health Center.

RESEARCH RESULTS

Characteristics of Respondents

At this stage, a univariate analysis was carried out for the general characteristics of the respondents which included gender, age group, marital status, education level, occupation in order to determine the frequency distribution of respondents.

Table 4.1. Respondent characteristics

No	Respondent Characteristics	Frequency (f)	Percentage (%)
1	Gender		
	Male	19	55.9
	Women	15	44.1
	Total	34	100
2	Age Group		
	18-25 Year	9	26.4
	26-35 Year	13	38.2
	36-45 Year	10	29.4
	46-55 Year	2	5.8
	Total	34	100
3	Level of education		
	basic education	8	23.5
	Middle education	23	67.6
	College	3	8.8

Application Of Self Efficacy Model To Improvement Of Self Care, Self Esteem And Self Efficacy In Patients With HIV AIDS At Community Health Centers In The Mimika District, 2020

Total		34	100
4	Profession		
	PNS/Polri/TNI	4	11.7
	Private	8	23.5
	entrepreneur	12	35.2
	Does not work	10	29.4
	Total	34	100

Source: Primary Data 2020

Based on table 4.1 above, describing the characteristics of HIV / AIDS patient respondents based on gender, the highest percentage was male, namely 19 people (55.9%), while the female gender was obtained 15 people (44.1%). Based on age, the highest distribution of numbers was consecutively found in the 26 - 35-year-old group, namely 13 people (38.2%), 10 people in the 36 - 45 year group or (29.4%), the 18-25 year age group. as many as 9 people (26.4%) and the lowest was found in the age group 46 - 55 years, namely 2 people (5.8%). The distribution of respondents based on education, the highest number was found in secondary education, namely 23 people (67.6%), while the lowest was higher education as many as 3 people (8.8%). Whereas when it is viewed from the aspect of work, the highest number of respondents is the type of self-employed work as many as 12 people (35.2%) and not working as many as 10 people (29.4%), private 8 people (23.5%) and finally PNS / Polri / TNI as many as 4 people (11.7%)

Bivariate Analysis

Variable	Mean	Correlation	SD	P value
Perawatan diri				
Before intervention	3.94		1.099	0.000
After the intervention	6.53	.835	1.619	0.000

Source: Primary Data 2020

Table 4.2 illustrates that the mean value of HIV / AIDS patient self-care has increased between before and after the intervention. The results of an analysis using a paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. Based on the values above, it can be interpreted that there is a significant difference in the self-care aspects of HIV / AIDS patients after the application of the self-efficacy model ($p = 0.000$) with a different strength of 83.5%.

Variable	Mean	Correlation	SD	P value
Self esteem				
Before intervention	2.97		.834	0.000
After the intervention	7.38	.343	1.206	0.000

Source: Primary Data 2020

Table 4.3 above shows that there is an increase in the average self-esteem value of HIV AIDS patients between before and after the intervention. The results of an analysis using a paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. This illustrates that there is a significant difference in the self-efficacy of patients with HIV / AIDS after the application of the self-efficacy model ($p = 0.000$) with a difference of 34.3%.

Variabel	Mean	Correlation	SD	P value
Self efficacy				
Sebelum intervensi	55.18		4.401	0.000
Sesudah intervensi	65.21	.465	5.547	0.000

Source: Primary Data 2020

Previously, the normality test for all variables was carried out using the Kolmogorov-Smirnov test. The results of the normality test for all variables showed an average value of $p > 0.05$, which means that all data were normally distributed. Furthermore, the paired T-test was carried out to see the effect of the application of models self-efficacy on self-care, self-esteem, and self-efficacy of patients with HIV / AIDS at the Jiliale and Wania Public Health Centers, Mimika Regency.

a. The effect of implementing the self-efficacy model on self-care for HIV / AIDS patients at the Jiliale Center, Mimika Regency in 2020

The results of research on physical aspects of self-care variables in HIV / AIDS patients before and after the application of the self-efficacy model obtained the following results:

Table 4.2. Self-care for HIV / AIDS patients before and after implementing the self-efficacy model in the Jiliale Community Health Center working area in Mimika Regency in 2020

b. The effect of implementing the self-efficacy model on self-esteem in HIV / AIDS patients at the Jiliale Center, Mimika Regency in 2020

The data analysis on the self-esteem variable of HIV / AIDS patients before and after the application of the self-efficacy model obtained the following results:

Table 4.3. The self-esteem of HIV / AIDS patients before and after the implementation of the self-efficacy model at the Jiliale Health Center, Mimika Regency in 2020

c. The effect of the application of the self-efficacy model on the self-efficacy of HIV / AIDS patients at the Jiliale Health Center, Mimika Regency

The results of research on the variable Self-efficacy in HIV / AIDS patients before and after the application of the self-efficacy model obtained the following results:

Table 4.4. Self-efficacy of HIV / AIDS patients before and after the application of the self-efficacy model in the working area of the Jiliale Community Health Center, Mimika Regency in 2020

Table 4.4 illustrates the mean value of HIV / AIDS patient self-efficacy that has increased between before and after

Application Of Self Efficacy Model To Improvement Of Self Care, Self Esteem And Self Efficacy In Patients With HIV AIDS At Community Health Centers In The Mimika District, 2020

the intervention. The results of an analysis using a paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. Based on the values above, it can be interpreted that there is a significant difference in the self-efficacy of HIV / AIDS patients after the application of the self-efficacy model ($p = 0.000$). with a different strength of 46.5%.

DISCUSSION

Implementation of the self-efficacy model for self-care for HIV / AIDS patients at the Jiliale Health Center, Mimika Regency in 2020

The results showed that there was an effect of the application of the self-efficacy model on improving self-care for HIV / AIDS patients. This is evidenced by the increase in the mean value of self-care for patients with HIV / AIDS at the Jiliale Health Center, Mimika Regency, compared to before and after the intervention. The results of an analysis using a paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. The test results showed that there was a significant difference in self-care after implementing the self-efficacy model ($p = 0.000$) with a difference of 46.5% strength. Thus the results of statistical tests show that there is an effect of the application of the self-efficacy model on improving self-care for HIV / AIDS patients at the Jiliale Community Health Center, Mimika Regency. The application of the self-efficacy model is very important in increasing motivation to carry out self-care in HIV / AIDS patients. In line with Ismatika & Soleha's research (2017), it is stated that a person's behavior, especially self-care behavior, is strongly influenced by a person's level of self-efficacy. A person who has a high level of self-efficacy will have a strong impetus in fulfilling his personal care needs. According to Bandura (2001) in Dearly & Sri Lestari, (2016), the foundation of human life is very dependent on self-belief. Someone who has high self-efficacy will feel confident that they can do something that has the potential to be able to change events in their environment and will be more likely to act and be more likely to be successful than humans who have low efficacy. High self-efficacy A person's personality will be formed so that they have confidence in their ability to succeed and have positive expectations of something they want. A person who is infected with HIV / AIDS is very difficult to accept his existence. Because in addition to the physical problems faced, PLWHA patients also have to face social discrimination from the surrounding community. This will affect the patient's motivation to carry out regular self-care because it is fulfilled by the life expectancy of Dearly and Lestari S (2016). This adds to the positive self-confidence in dealing with the illness that is being suffered. Thus, it is necessary to apply the self-efficacy model which aims to arouse patient motivation through increasing self-confidence so that self-awareness arises to recover, and optimizes the role during illness.

The effect of implementing the self-efficacy model on increasing self-esteem in HIV / AIDS patients

Based on the results of the study, it can be seen that there is an effect of applying the self-efficacy model on increasing patient self-esteem. Analysis of data using paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. This shows that there is a significant difference in the aspects of patient self-esteem after implementing the self-efficacy model ($p = 0.000$) with a difference of 34.3%. The self-efficacy model is an information framework used in the process to help patients recognize the problem

they are experiencing, foster a positive self-image of the patient, optimize their role during illness, improve communication between patients and families and between patients and health workers, help patients control the stress they experience, and improve patient coping mechanisms. Triyono (2018), in his research, stated that almost 80% of patients with PLWHA experience low self-esteem disorders, patients hesitate to interact socially, and experience emotional disturbances such as irritability, hopelessness, and offense. Triyono further, (2018) states that the self-preservation of PLWHA patients can develop with social support through counseling. The simultaneous application of the self-efficacy model can be carried out so that it can encourage HIV / AIDS patients to develop themselves optimally and live more productively. This will provide awareness to patients to accept themselves and the risk of transmission to their spouse and loved ones can be anticipated. National Safety Council (2004) states that self-esteem is a very important and effective element in reducing stress levels including patient self-esteem, because individuals with high self-esteem will show self-confidence and enthusiasm, and can handle frustration well. In line with that Lowther (2016), in Fitri (2017), states that people with HIV / AIDS have a low quality of life, especially those related to psychological and social aspects. Furthermore, Lowther states that community stigma and discrimination causes the self-esteem of patients with PLWHA to become low. Through the application of the self-efficacy model, it can form a great deal of one's self-esteem.

Implementation of the self-efficacy model for self-care for HIV / AIDS patients at the Jiliale Health Center, Mimika Regency in 2020

The results showed that there was an effect of implementing the self-efficacy model on increasing the self-efficacy of HIV / AIDS patients. This is evidenced by the increase in the mean value of self-care for patients with HIV / AIDS at the Jiliale Health Center, Mimika Regency, compared to before and after the intervention. The results of an analysis using a paired sample t-test obtained p-value $0.000 < \alpha = 0.05$. The test results showed that there was a significant difference in the self-efficacy of HIV / AIDS patients after implementing the self-efficacy model ($p = 0.000$) with a difference of 83.5% strength. Bandura A., (1997) in APA PsycNet (2020), states that self-efficacy is formed from training activities of a person's abilities, including control of self-function in dealing with various aspects of one's life. Psychological procedures including the application of the self-efficacy model will increase a person's self-confidence which in turn will lead to a decrease in defensive behavior in facing obstacles or unpleasant conditions as one's life experience. Another study states that someone who has a tendency to behave optimistically, find solutions to the problems faced, and has a fighting power in overcoming their difficulties are those who have high self-efficacy. Meanwhile, someone who has low self-efficacy tends to behave pessimistic, low self-esteem, and hopeless. HIV / AIDS patients tend to experience psychological problems due to stigma. This often affects the level of a person's self-efficacy. According to Li X., Huang I., Et all (2011), to increase patient self-efficacy, intervention steps are needed to suppress the stigma in HIV / AIDS patients. This should be a concern for health care providers to pay

Application Of Self Efficacy Model To Improvement Of Self Care, Self Esteem And Self Efficacy In Patients With HIV AIDS At Community Health Centers In The Mimika District, 2020

attention to the psychological needs of patients so that they are able to interact socially.

CONCLUSION

Based on the results obtained in this study, it can be concluded that the application of the self-efficacy model affects improving self-care for HIV / AIDS patients at the Jiliale Center, Mimika Regency. The application of the self-efficacy model aims to influence the patient's cognitive, thus someone who has a high level of self-efficacy will have a strong impetus in fulfilling self-care needs.

The application of the self-efficacy model affects the self-esteem of HIV / AIDS patients at the Jiliale Center, Mimika Regency. There is a tendency that the higher the level of patient self-efficacy causes an increase in awareness of his existence. Indirectly will affect increasing patient self-esteem.

The application of the self-efficacy model affects the self-efficacy of HIV / AIDS patients at Jiliale Center, Mimika Regency. Self-efficacy is a psychological procedure that will increase a person's self-confidence so that they gain control over self-function in dealing with various things

ACKNOWLEDGMENT

Thanks to the Health Polytechnic of Health Ministry Jayapura that providing research funds, also to the enumerators, and all participants involved in this research

CONFLICT OF INTEREST

All authors declare that there is no conflict of interest in this study.

REFERENCES

1. Ambarwati, et al. (2014), The social and spiritual psychological impact of people with IV / AIDS. - Journal of Nursing 7 (2) accessed from http://ejournal.polekesdepkes-sbyc.id/index.php/jurnal_kperawatn/article/view/27/0
2. Ahwan, Z, (2014), stigma and discrimination against HIV & AIDS in people with HIV / AIDS in the community based on members of the Nahdatul Ulama (NU) Bangil - Study the strategic role of the faith Based Organization (FBO) in the issue of HIV AIDS. Accessed from HTTP // journal.yudharta.ac.id. / Wp-content / uploads / 2014/11 / 11.pdf
3. APA PsycNet, 2020, Self-efficacy: Toward a unifying theory of behavioral change. Psychological Review, 84 (2), 191-215. <https://doi.org/10.1037/0033-295X.84.2.191>
4. Burhan Bungin. 2001. Social Research Methods Quantitative and Qualitative Formats. Airlangga University Press
5. Bandura, A. (1997). Self-Efficacy The Exercise of Control. New York: W.H. Freeman and Company.
6. Brouwers, A., Evers, W. J. G., & Tomic, W. (2001). Self-Efficacy in Eliciting Social Support and Burnout Among Secondary-School Teachers. Journal of Applied Social Psychology, 31 (7), 1474-1491. Brown, S. P., Jones, E., & Leigh, T. W. (2005). The Attenuating Effect of Role Overload on Relationship Linking Self-Efficacy and Goal Level to Work Performance. Journal of Applied Psychology, 90 (5) 972-979
7. Caprara, G. V., Barbaranelli, C., Borgogni, L., & Steca, P. (2003). Efficacy Beliefs as Determinants of Teachers' Job Satisfaction. Journal of Educational Psychology, 95 (4), 821-832.
8. Dearly and Sri Lestari, 2016, Relationship between Self Efficacy and Subjective Well Being in people with HIV / AIDS in Jakarta, Journal of Economic and Social Sciences, Volume 5, Number 3, November 2016, pages 258 - 264
9. Ismatika & Soleha I., (2017), Relationship of self-efficacy with the self-care behavior of Stroke patients at Islamic Hospital Surabaya, Journal of Health Scientific, Vol. 10, No. 2, August 2017, pp. 139-148
10. Harijan pagi Papua (2017) Penularan penyakit AIDS dan perkembangannya <http://harianpagipapua.com>.
11. KPA (2012) Jayapura District HIV / AIDS Report Li X., Huang L., et all (2011), Stigma Mediates the Relationship Between Self-Efficacy, Medication Adherence, and Quality of Life Among People Living with HIV / AIDS in China, Aids Patient Care STDS Jurnal, doi 10 1089 / apc.2011. 0174
12. Made Rustika, (2010, Self Efficacy: A Review of Theory. Psychology Bulletin, Vol 20, No 1-2, Gadjah Mada University. Gadjah Mada Press.
13. Mohammadi, E., Abedi, H.A., Gofranipour & Jalali, (2002). Partnership conceptual model. International Journal of Nursing Practice, 8, 324-329
14. Putra P.S & Susilawati L.K., (2018), Relationship between social support and self-efficacy with stress levels of treatment at Sanglah Central General Hospital, Udayana Psychology Journal 2018, Vol.5, No.1, 145-157 Udayana ISSN: 2354 5607 145
15. Sugiyono, (2008). Quantitative Research Methods, Qualitative and R & D. Bandung: Alfabeta Publisher
16. Subdin BPP & PL DinKes Papua Province, (2007) Triyoso et al, 2018, Pengaruh counseling on the self-esteem of HIV / AIDS clients in the Voluntary counseling and testing clinic at Abdul Moelok Hospital, Lampung Province, Holistic Health Journal, Volume 12, No.3, July 2018 : 170-177 170