



WALUYA THE INTERNATIONAL SCIENCE OF HEALTH JOURNAL

The Relationship between Spirituality and Duration of Infection with the Quality of Life in People with HIV/AIDS

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ARTICLE INFO

Article history

Received : September 06th, 2023
Revised : September 22th, 2023
Accepted : September 27th, 2023

Keywords

Spirituality,
Duration of Infection,
Quality of Life.

ABSTRACT

Introduction: HIV/AIDS has become an emergency problem throughout the world, where there are still high transmission of infection, morbidity and mortality. Based on data obtained at the VCT Clinic at the Kendari City Hospital, over the past 5 years there has been an increase in new cases, where at the end of 2022 it is known that the HIV/AIDS Incidence Rate is 183/100,000. This study aims to analyze the determinants of quality of life in people with HIV/AIDS at the VCT Clinic at Kendari City Hospital.

Method: The type of research used in this research is quantitative research, using a cross sectional study design. The population in this study were 247 people. The number of research samples is 151 people, with sampling using Simple Random Sampling. Data analysis was carried out descriptively and inferentially using the Chi Square test.

Result: The results showed that there was a relationship between spirituality ($X^2_{\text{count}} = 6.071 > X^2_{\text{table}} = 3.841$), duration of infection ($X^2_{\text{count}} = 6.334 > X^2_{\text{table}} = 3.841$), and the quality of life of people with HIV/AIDS.

Conclusion: There is a relationship between spirituality and duration of infection with the quality of life of people with HIV/AIDS at the VCT Clinic at Kendari City Hospital.

Introduction

HIV (Human Immunodeficiency Virus) and AIDS (Acquired Immune Deficiency Syndrome) are known to have become emergency problems throughout the world, where infection transmission, morbidity and mortality rates are still high. The number of HIV/AIDS cases continues to increase from year to year, both globally and

nationally, even though various preventive efforts are being implemented. Based on UNAIDS data in the 2021 Global HIV & AIDS Statistics, it is known that 38.4 million people worldwide are living with HIV, 1.5 million people are newly infected with HIV, and 650,000 people die from AIDS.^[1]

The HIV/AIDS epidemic is also a problem in Indonesia, which is the 5th most at risk country

in Asia. Based on the 2021 Indonesia Health Profile, the accumulation of HIV/AIDS cases in Indonesia since it was first discovered until 2021 is 42,652 cases.^[2] Based on the Southeast Sulawesi Provincial Health Office, the number of cases of HIV/AIDS infection reported over the last five years has increased. Likewise, at the VCT Clinic at the Kendari City Regional Hospital, which is the place where patients carry out HIV tests and carry out ARV treatment therapy. Based on data obtained at the VCT Clinic at the Kendari City Hospital, over the past 5 years there has been an increase in new cases, where IR in 2018 was 30/100,000, in 2019 was 34/100,000, in 2020 was 49/100,000, and in 2021 IR HIV /AIDS of 75/100,000. Meanwhile, in 2022 HIV/AIDS IR will be 183/100,000.^[3]

HIV/AIDS causes a wide range of problems for infected individuals, which include physical, social and emotional problems. If this problem is not handled properly, it will have an impact on the quality of life of sufferers. Quality of life is a broader concept than standard of living. Quality of life is an individual's perception of his position in life, culture, and values related to goals, expectations which include several aspects, namely physical, psychological, level of independence, and social relations.^[4]

Quality of life in people with HIV/AIDS is strongly influenced by disease progression, social problems, problems related to antiretroviral therapy (ARV) and the aging process. Therefore, sustainable HIV management aims to improve their physical and psychological well-being and thus health-related quality of life. Research by Sastra et al., (2019) explains that the quality of life of people with HIV/AIDS tends to be poor, namely 64%.^[5] There are several factors that affect the quality of life of people with HIV/AIDS, including stigma, depression, social support, duration of HIV infection, antiretroviral (ARV) use, spiritual condition, marital status, employment, and opportunistic infections (OI).^{[6];[7]} Based on the background above, this study aims to determine the relationship between spirituality and duration of infection with quality of life in people with HIV/AIDS at the VCT Clinic at Kendari City Hospital.

Method

This The type of research used in this research is quantitative research, using a cross sectional study design. The population in this study were all HIV/AIDS patients who live in Kendari City and are currently undergoing treatment at the VCT Clinic at Kendari City Hospital until 2022, namely 247 people. The number of samples in the study was 151 people, with the sampling using Simple Random Sampling. Primary data collection was carried out through observation and interviews using questionnaires and secondary through official sources such as the health office and other information from journals related to this research. Data analysis was carried out descriptively and inferentially using the Chi Square test.

Result

Table 1 shows that of the 98 respondents with sufficient spirituality, there are 71 respondents (72.4%) who have a good quality of life and 27 respondents (27.6%) who have a poor quality of life. Meanwhile, of the 53 respondents with low spirituality, there were 27 respondents (50.9%) who had a good quality of life and 26 respondents (49.1%) who had a poor quality of life. Based on the results of the chi square statistical test, the value of $X^2_{count} = 6.071$, with a value of $X^2_{table} = 3.841$, then $X^2_{count} > X^2_{table}$ which means H_0 is rejected and H_a is accepted. This shows that there is a relationship between spirituality and quality of life.

Table 2 shows that of the 62 respondents with a long duration of infection, there were 48 respondents (77.4%) who had a good quality of life and 14 respondents (22.6%) who had a poor quality of life. Meanwhile, of the 89 respondents with a lack of spirituality, there were 50 respondents (56.2%) who had a good quality of life and 39 respondents (43.8%) who had a poor quality of life. Based on the results of the chi square statistical test, the value of $X^2_{count} = 6.334$, with a value of $X^2_{table} = 3.841$, then $X^2_{count} > X^2_{table}$ which means H_0 is rejected and H_a is accepted. This shows that there is a relationship between duration of infection and quality of life.

Table 1.
Analysis of the Relationship between Stigma Spirituality and Quality of Life in People with HIV/AIDS at the VCT Clinic at Kendari City Hospital

Spirituality	Quality of Life				Total		Statistical analysis
	Good		Not good		n	%	
	n	%	n	%			
Enough	71	72,4	27	27,6	98	100.0	X ² count = 6.071 X ² table = 3.841
Not enough	27	50,9	26	49,1	53	100.0	
Total	98	64,9	53	35,1	151	100.0	

Table 2.
Analysis of the Relationship between Duration of Infection and Quality of Life in People with HIV/AIDS at the VCT Clinic at Kendari City Hospital

Duration of Infection	Quality of Life				Total		Statistical analysis
	Good		Not good		n	%	
	n	%	n	%			
Long	48	77,4	14	22,6	62	100.0	X ² count = 6.334 X ² table = 3.841
Early	50	56,2	39	43,8	89	100.0	
Total	98	64,9	53	35,1	151	100.0	

Discussion

Spirituality with Quality of Life in People with HIV/AIDS

World Health Organization states that one of the domains in the quality of life of people with HIV/AIDS is spiritual well-being.^[5] Spirituality is used to overcome life traumas emphasized by HIV, namely facing death, HIV as a sin, stigma, poverty, and health care.^[8]

Based on the results of statistical tests using chi square, which obtained X²table, which is 6.071, is greater than X²table, which is 3.841, meaning that spirituality is related to the quality of life of people with HIV/AIDS. Spirituality has a relationship with the quality of life of people with HIV/AIDS, because psychosocial problems in people with HIV/AIDS can be neutralized or eliminated with a strong spiritual life. Therefore, spirituality becomes an important dimension for the emotional well-being of people living with HIV/AIDS. Likewise with research that found a relationship between spirituality and the quality of life of people with HIV/AIDS (p = 0.030, r = 0.511) with a positive relationship direction, meaning that the higher the spirituality, the better the quality of life. In conclusion, there is a

relationship between the level of spirituality and the quality of life in people with HIV/AIDS at KDS Kosala Bali.^[9]

This research is in line with research conducted by Ghoni and Andayani (2020) which showed that the Spearman Rank test obtained a p value of 0.004 < 0.005, which means that there is a significant relationship between spirituality and the quality of life of people with HIV/AIDS.^[10] It is also in line with the research that has been done which obtained a p value of 0.015 < 0.05. Ho is rejected then Ha is accepted. So it can be concluded that there is a significant relationship between spiritual level and the quality of life of people with HIV/AIDS at Medan Plus Foundation, Medan City.^[11]

Duration of Infection with Quality of Life in People with HIV/AIDS

Quality of life consists of four domains, including the domain of physical health and the domain of psychological well-being. Individuals who have been exposed to and infected with HIV for 1-10 years will experience flu-like symptoms. Furthermore, there are early symptoms of the disease including excessive sweating at night, persistent diarrhea, swollen lymph nodes, flu that

doesn't go away, decreased appetite, body becomes weak, and weight continues to decrease.

The results of the chi square test obtained X^2 table, which is 6.334, greater than X^2 table, which is 3.841, meaning that the duration of infection is related to the quality of life of people with HIV/AIDS. Researchers are of the opinion that people with HIV/AIDS with long infection ranges have adaptive coping by taking ARVs regularly to maintain CD4 counts in the normal range, namely above 200 cells/mm³. developing an opportunistic infection. This will affect the condition of the patient who is able to carry out activities as usual and maintain a good quality of life. This is reinforced by research by Kumar, et.al, showing that most respondents were infected with HIV for less than two years. The early stages of infection can make a person experience stress and depression. This relates to coping mechanisms used by individuals to adapt to existing stressors.^[12]

This research is in line with research conducted by Mardia et al., (2017) which found that the duration of HIV diagnosis had a significant relationship with the quality of life of HIV patients with a p value = 0.007.^[13] These results are also consistent with a study conducted in Ilorin, Nigeria which showed that HIV patients at an advanced stage had a higher quality of life. At this stage, ARV patients feel that drugs have become part of their daily routine.^[14]

Conclusion

Based on the results of research conducted on "The Relationship between Spirituality and Duration of Infection with Quality of Life in People with HIV/AIDS" obtained the following conclusions:

1. There is a relationship between the level of spirituality and the quality of life in people with HIV/AIDS at the VCT Clinic at the Kendari City Hospital.
2. There is a relationship between duration of infection and quality of life in people with HIV/AIDS at the VCT Clinic at Kendari City Hospital.

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