
Mental Health Conditions and Coping Strategies In Women With HIV and AIDS: A Systematic Review

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ABSTRACT

In terms of mental health, people who know that they have AIDS will experience prolonged mental suffering. This systematic study aimed to review the mental health conditions in women with HIV/AIDS and how coping strategies are used. This systematic study has inclusion criteria, namely women with HIV/AIDS, where the articles used in English and Indonesian from 2015 to 2020, were carried out a systematic review using five databases (Scopus, Proquest, Science Direct, CINAHL, and Pubmed). Articles are written systematically based on the PRISMA protocol. The review results showed that women with HIV use coping focused on emotional problems and strategies. Various changes were experienced by women with HIV/AIDS. One of which can cause mental health problems. Implementing coping strategies will reduce anxiety and improve mental health.

Keywords: Mental Health, Coping Strategies, Coping Skills, HIV/AIDS

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BACKGROUND

Infectious disease is a problem in public health in Indonesia, and this often occurs as an extraordinary event that causes the death of the sufferer. The government's attention in the public health sector is the effort to break the chain of the spread of the Human Immunodeficiency Virus (HIV) and AIDS. Acquired Immunodeficiency Syndrome is an infectious disease caused by infection with HIV (Human Immunodeficiency Virus), which attacks the immune system. The infection causes the sufferer to experience a decrease in body resistance. So, that it is obvious to be infected by various other diseases called AIDS (Acquired Immunodeficiency Syndrome). AIDS is a group of symptoms that arise due to damage to the human immune system due to infection from HIV (Yamanis et al., 2018)

People diagnosed as positively infected by the HIV and AIDS virus are called PLWHA (People Living With HIV/AIDS). The development of HIV/AIDS was first recognized in 1981. However, HIV/AIDS cases retrospectively appeared during the 1970s in the United States and several parts of the world such as Haiti, Africa, and Europe (Dalmida, S et al., 2018). Acquired Immunodeficiency Syndrome is a disease that has no cure, and no vaccine that can prevent HIV's attack, so this disease is one of the most dangerous diseases for human life both now and in the future. AIDS can also cause suffering, both physically and mentally. Maybe we often get information through print, electronic, or seminars about how much someone who has AIDS is suffering (Williams et al., 2020). From a physical perspective, suffering may not be seen directly because the symptoms are new to see after a few months. However, from a mental perspective, people who know that they have AIDS will experience prolonged mental suffering. All of this shows that the problem of AIDS is significant in life (Cecchini et al., 2019). The Directorate General of P2P, Ministry of Health of the Republic of Indonesia, May 29, 2020, on the Development of HIV/AIDS and Sexually Transmitted Infectious Diseases (PIMS) in the first quarter of 2020, the number of HIV cases nationally was 388,724. There are 10 provinces with several HIV-positive cases. The number of PLWHA in the labor force increased between 2005 and 2015 and will continue to increase even if ART is increased as expected. Even though new infections are steadily declining, successful ART will keep people alive longer, enabling them to become active participants in the workforce. The number of cases observed and projected among the global workforce during 2005-2020. The total prevalence projected by 2020 is approximately 29.9 million people (Myers et al., 2019).

Coping is a constant cognitive and behavioral change to cope with specific internal and/or external demands that exhaust or exceed individual sources. The coping mechanism is a way for individuals to solve problems, adjust to change, and respond to threatening situations (Rzeszutek, 2018). Experts classify two coping strategies that individuals can use. Firstly, problem-solving focused coping, where individuals are actively seeking solutions to problems to eliminate stressful conditions or situations. Second, emotion-focused coping, where individuals involve efforts to regulate their emotions to adjust to the impact that a stressful condition or situation will cause. The study results prove that individuals use both methods to overcome various pressing problems in various spheres of daily life (Bakare & Gentz, 2020). This systematic review aimed to study women's mental health conditions and coping strategies with HIV/AIDS.

METHODS**Study Selection**

The search results from 5 databases from Sopus, Proquest, Science Direct, CINAHL, and Pubmed were used in compiling this systematic review. Search for relevant literature in the

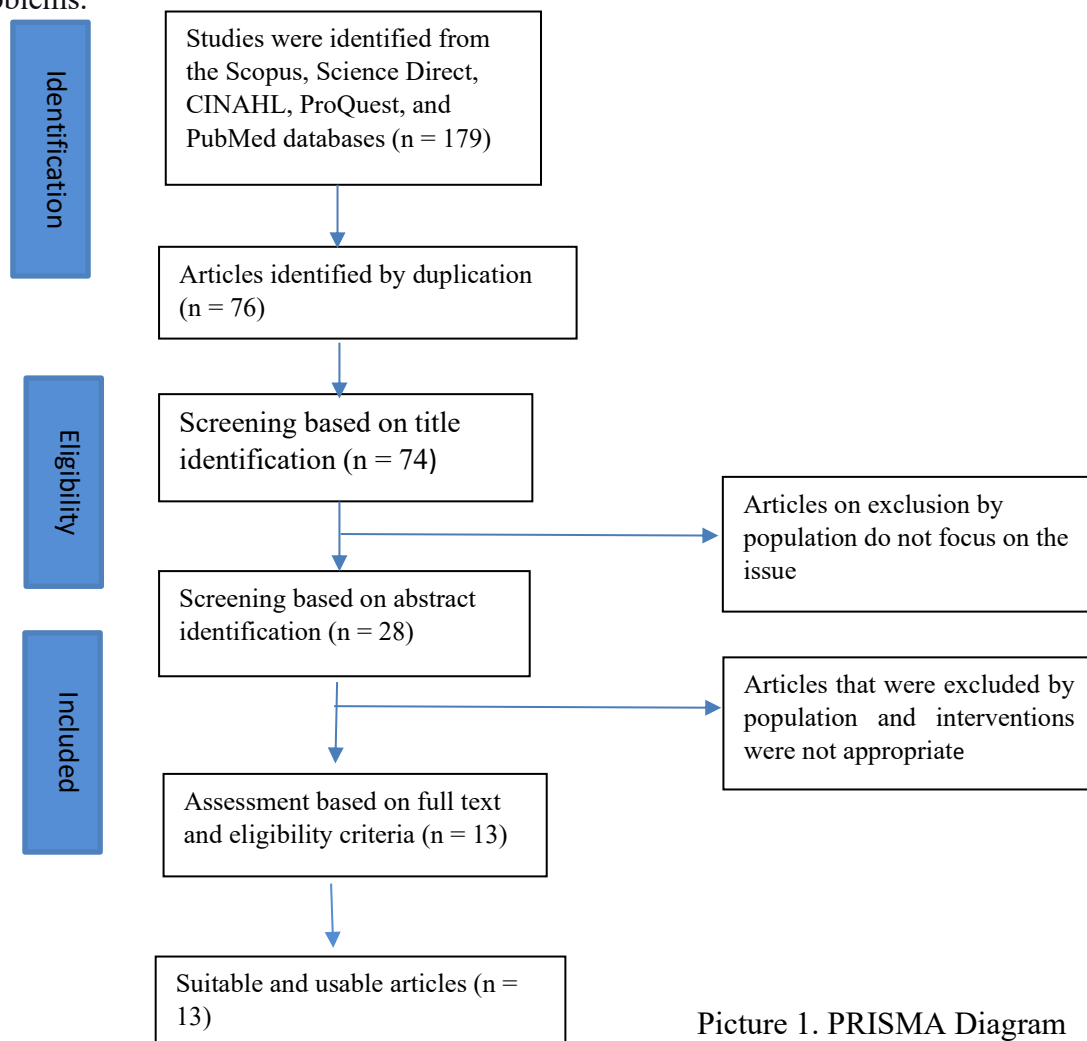
range of year 2015 to 2020. Search using keywords that have been adjusted to Mesh and use boolean techniques, namely “mental health” OR “mental hygiene”, “coping strategies” OR “coping skills”, “HIV/AIDS” OR “Human immunity virus”. Articles included in the systematic summary of this review based on the inclusion criteria are (1) articles that focus on the mental health and coping of women with HIV/AIDS, (2) RCTs, Cross-sectionals and qualitative research (3) articles in the last 5 years from 2015-2020 and (4) articles written in English. Articles are written systematically based on the PRISMA protocol. A total of 179 articles that matched these keywords were obtained, then checked based on the title; there were 74 articles. The abstract was screened, and 28 relevant articles were found. After mapping according to the inclusion and exclusion criteria and the overall script was obtained 13 articles.

Literature search

The review of 179 articles after extraction according to the inclusion and exclusion criteria found 13 articles. The research method used included 4 RCTs study, 4 cross sectionals study, 4 qualitative study, and 1 cohort study.

Population

The population drawn in the article is women with HIV/AIDS. The total number of respondents of this review were 1,096 samples involved. Participants involved have been selected and must-have criteria, namely women with HIV/AIDS who have mental health problems.



Picture 1. PRISMA Diagram

RESULTS

Women living with HIV/AIDS may be prone to experiencing various stressful life events, such as HIV-related symptoms, stigma, intimate partner violence, and the death of family members. Strategies for coping with these stressors are important indicators of overall psychological well-being among PLHIV. The review results found two types of coping strategies commonly used by PLHIV. The first coping used was behavioral and cognitive processes. This coping involved regulating emotional distress associated with stressful situations (e.g., focusing on coping with emotions). The second coping strategies were changing difficult situations using behavioral and cognitive processes to address problems that cause distress (i.e., problem-focused coping). Examples of problem-focused coping strategies are positive reassessment or planned problem solving, whereas coping focuses on problem-solving. Emotions can include distancing oneself (i.e., releasing oneself emotionally from stressors) or avoiding-escaping from stressors (Travaglini et al., 2018). The outcome of the existing review of coping, support, and mental health outcomes experienced by women living with HIV was that coping focused on the problem and emotion-focused strategies associated with a higher incidence of depression and anxiety symptoms.

DISCUSSION

The experience of a disease will cause various feelings and stress reactions, including frustration, difficulty, recovery, denial, shame, grief, and the struggle towards disease adaptation. All female participants in this systematic review all had different life experiences since their diagnosis of HIV/AIDS. Many of the changes they experience while suffering from this disease, one of which is psychological, can cause disturbances to their mental health.

One article describes a study of mental health care needs in women at an HIV/AIDS care center in Kisumu, Kenya. Women reported that the violence perpetrated primarily by men was extremely severe, ranging from attempted murder, rape, physical assault requiring hospitalization, constant emotional abuse accusing HIV/AIDS women of worthlessness, and obstructing their care.

The emotional distress that can interfere with the mental health felt by women with HIV/AIDS includes symptoms associated with depression based on the U.S. diagnostic system. (American Psychiatric Association, 2013 in (Zunner et al., 2015): such as sadness, suicide, helplessness/guilt, difficulty concentrating, sleep disturbances, decreased appetite, weight loss and hopelessness, anxiety, and symptoms of traumatic stress such as alienation from others and irritability.

Addressing the problems that arise from mental health problems in women with HIV/AIDS requires individual coping strategies. This review results showed that women coping methods or strategies were obtained from social support of fellow genders. In this case, women can better understand and can share experiences with other genders.

Another positive coping strategy used was that acceptance of HIV/AIDS status and self-acceptance was the main coping strategies used by women. Acceptance of HIV/AIDS status and self-acceptance help individuals change their situation and are also motivated to face difficult situations, overcome denial, and face reality. Another finding showed that some participants who had limited support from their partners became independent to support themselves and their children. Economic stability helps women with HIV/AIDS cope positively and overcome the causes of stress related to HIV/AIDS.

Even though women can cope with it, they should not be burdened with all the responsibilities that exist. Family members, health care providers, and the ward must also overcome this challenge. However, the role of partners and family and community support is beneficial to reduce the risk of psychological distress and can improve the mental health of women with HIV/AIDS. In addition to helping them cope, social support allows women to get helpful information about their health and healthcare services availability. Social support has also been shown to protect against the progression of HIV/AIDS disease leading to more prolonged survival among people with HIV/AIDS. Environmental care and support can help women face the challenges and fears associated with a diagnosis of HIV/AIDS. Some women get involved with church, spirituality, and prayer to overcome this situation. Religion as a coping strategy is also a source of strength and meaning in life for a woman.

CONCLUSION

AIDS is the final stage of HIV infection. At this stage, the body's ability to fight infection has completely disappeared. So far, there is no cure for HIV and AIDS. However, there are drugs to ease the progression of the disease and can increase the life expectancy of sufferers. Coping is a constant cognitive and behavioral change to overcome internal and or external demands. Specifically, that is tiring or exceeds individual resources. The coping mechanism is how individuals solve problems, adjust to changes, and respond to situations, in some journals describing some women experiencing excessive anxiety.

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CONFLICTS OF INTEREST

There is no conflict of interest

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