

Recognizing Mental Health Issues Associated with HIV and Factors Affecting Indonesian Adolescents Living with HIV

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Introduction

In addition to being a chronic illness, HIV (Human Immunodeficiency Virus) poses a significant psychological risk, especially for young people. HIV-related mental health issues are still not well understood or well handled in Indonesia, where the disease's incidence among youth has been gradually increasing. A distinct mix of psychological, social, and environmental stresses are faced by adolescents living with HIV (ALHIV), which are frequently made worse by societal stigma and restricted access to mental health services. This essay examines the mental health problems linked to HIV among Indonesian teenagers, pinpoints the variables affecting their mental health, and offers solutions to raise their standard of living. There are close connections between HIV and mental health. Teens who are HIV positive may struggle with a variety of mental health conditions, such as anxiety, sadness, PTSD, and loneliness. These young people face substantial psychological burdens due to the chronic nature of HIV, the requirements of adhering to antiretroviral medication (ART), difficulties with disclosure, and fear of stigma. In Indonesia, a lack of resources and awareness exacerbates mental health issues among people living with HIV.

Description

For ALHIV in Indonesia, stigma and prejudice continue to be major obstacles to mental health and general well-being. Negative views toward people living with HIV are sometimes a result of cultural and societal misconceptions about the infection. Teenagers are more susceptible to rejection from family, friends, and neighbors, which can negatively affect their mental and self-esteem. Decisions about disclosure are also influenced by the fear of stigmatization. Feelings of loneliness and isolation result from the fact that many teenagers decide not to tell peers, professors, or even family members that they have HIV. A vicious cycle of pain and secrecy is created when mental health issues are made worse by a lack of social support. Furthermore, self-blame, humiliation, and social disengagement can result from internalized stigma, which is the acceptance of unfavorable society views about oneself [1].

In order to manage HIV and stop the disease from getting worse, ART adherence is essential. For ALHIV, however, maintaining regular adherence can be a major cause of stress. Furthermore, mental health conditions like anxiety and depression can have a detrimental effect on adherence, starting a vicious cycle whereby poor mental health results in inconsistent medication use and worse health outcomes. The experiences of ALHIV in Indonesia with regard to mental health are also influenced by gender dynamics. Adolescent girls frequently encounter particular difficulties, such as gender-based assault [2].

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Conclusion

In Indonesia, stigma, family dynamics, socioeconomic conditions, and access to care all influence the complex interplay of mental health issues that adolescents living with HIV must deal with. A comprehensive strategy that incorporates mental health care into HIV services, lessens stigma across society, and gives families and communities the tools they need to better support these young people is needed to address these problems. Indonesia can assist people with HIV live better lives and realize their full potential by emphasizing mental health as a vital part of HIV care. To create a more welcoming and encouraging atmosphere for teenagers living with HIV, stakeholders must continue their research, campaigning, and cooperation.

References

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