**HIV IN INDONESIA**

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**Introduction**

In the early 1950s, Scientists identified a type of chimpanzee in West Africa as the source of HIV infections in humans. The scientist believe that the chimpanzee version of HIV which is Simian Immunodeficiency Virus or SIV most likely transmitted to humans and mutated to HIV when humans hunted the chimpanzees for meat and came into contact with their infected blood. Over decades, the virus slowly spread across Africa and later into other parts of the world. (The AIDS Institute, 2011).

HIV is a virus that can lead to infection. It stands for human immunodeficiency virus. The name describes the virus: it infects human only and it attacks the immune system, rendering it deficient and unable to work as effectively as it should be. AIDS is a condition. HIV is a virus that may cause an infection, but AIDS is a condition or a syndrome. If we are infected with HIV it can lead to the development of AIDS which stands for acquired immunodeficiency syndrome. AIDS develop when HIV caused serious damage to the immune system. The symptoms vary for different people. (healthline, 2016).

Since HIV was first discovered in 1983(AIDS was discovered in 1981), the amount of people that are diagnosed with this disease is still high. Though the statistics might be getting better, HIV is still a disease to wary about. In 2016, a predicted amount of 36.7 million people worldwide is currently diagnosed with HIV/AIDS. In the year 2015 itself, an estimated population of 2.1 million became newly infected with HIV. Majority of the people that are infected with the disease are from developing countries, with an estimated amount of 25.6 million infected people just from the Sub-Arahan side of Africa.

The statistics show us that majority of newly HIV patients had been coming from developing countries, lacking education about HIV. According to united nations figures, Indonesia was one of the 9 countries that has an increasing amount of HIV victims over the last decade. It is predicted that there are over than 690 000 people currently living with HIV in Indonesia. 17 000 of them being children under 14 years old that got the virus inherited from their parents. And, according to an article published by jakartaglobe.id, 8.47% of the men that are diagnosed with HIV in Indonesia got infected due to male between male sex intercourse.

All of our actions and behavior have a cause and effect. Cause and effect are very natural that most of the time we are not even aware of their existence. Once someone is infected with HIV, it will remain in their body for the rest of their life. A person of any age, religion, and economic background can get HIV. HIV is a virus. When someone infected with HIV the virus, it will damage their body’s defense system which is called the immune system. HIV can be passed from one person to other people through sexual contact. HIV can be transmitted through heterosexual (Straight) or homosexual (gay and lesbian). Usually, people with HIV virus will look fine and feel healthy, so it's hard for us to tell who has the virus and people can transmit HIV without knowing they are HIV positive (fpa.org.uk,2017). HIV is transmitted from one person to another by using needle or injection equipment which has been used by someone who is infected with HIV or has unprotected sex (sex without condom) with someone who has HIV. A mother with HIV can also pass the virus to her baby during birth, breast feeding or during pregnancy (Health.ny.gov).

In early weeks after becoming infected with HIV virus, people may have long periods fever, headache and lack energy. People with HIV will also develop skin problems like skin rashes and sores. HIV makes it harder for immune system to fight off germs, so it's easier infections to attack the body like pneumonia, hepatitis C and also tuberculosis. Women with HIV can have menstrual changes (healthline.com) People with HIV often bruise more easily than others. People with AIDS may have headaches very often. They may feel dizzy and imbalance. They may also feel weak or easily out of breath (Gedatus,200)



**Primary Objectives**

Our objective is to raise awareness towards HIV/AIDS. The numbers of people in Indonesia who are currently suffering from HIV/AIDS is about seven hundred thousand. We would like to decrease these high numbers in the years coming. The citizens of Indonesia need to know how dangerous HIV/AIDS is. Our target is the teenagers and the adults. The youngster needs to have basic education on HIV/AIDS and how it’s transmitted. This is goal is important to us because the youngsters is the next generation to this world, they at least need to know how dangerous HIV/AIDS is and how it’s spreading even faster. The adults also needs to have basic knowledge on HIV/AIDS so they can share what they know to their inherit.

**Materials & Method**

The materials needed for the campaign are 50 flyers and a video. The flyers will be distributed through CFD or Car Free Day. The content of the flyers will be explaining a brief definition of HIV and AIDS also how we should prevent it from happening. The video will be like an ad, it will only be 30 seconds explaining the brief definition of HIV and AIDS, a little bit of statistic about the amount of people getting HIV from year to year also why and how we should prevent ourselves from getting HIV. The video is the main material and the flyers are just for handouts. The video should be short but very useful and thorough, it should be interesting enough to make people watch until the end.

**STUDY 1**

According to British Medical Journal, India has an HIV/AIDS population of approximately 1.4-1.6 million people. THE US$2.5 billion National AIDS control Plan III was set up by India in 2007 and received support from UNAIDS. The main factors that have contributed to India’s large HIV infected population are labor migration and low literacy level in certain areas resulting in lack of awareness. The government of India also concerns about the role of drug use and prostituting in spreading AIDS, especially in north and east India. Some efforts have been made by the educational literature to those people with low literacy levels. They provide books through local libraries, so people can access information easily about HIV (Patel, 2014)

**STUDY 2**

The pathways of HIV/AIDS in Cuba are different from other countries. Transmission by injecting drugs to veins is extremely rare. Rates of mother to child HIV transmission are very small. In Cuba, HIV is largely male population, with 99% of cases through sexual relations. The infection has been spread by heterosexual transmission which means men who have sex with men (MSM), who now form over 80% of people living with HIV in the country. Cuba provides complete care to all people living with the disease, and guarantees antiretroviral or ART for those who needing them. Despite financial difficulties, treatment and medication in Cuba is free. In 2010, over 5.600 people received ART therapy in Cuba. People with HIV can live in their communities, where they have access to medical services with doctor who know about HIV and how to treat patients in a caring wa. y (Gorry,2011)

**STUDY 3**

In 1987, Indonesia reported its first AIDS case. In 2000, 1,000 aids cases were reported in 16 provinces. By 2009 nearly 20,000 AIDS cases had been reported across all 33 provinces. The amount of people infected with HIV in Indonesia is increasing because of injecting drug users, sex workers, and men who have sex with men (MSM). Transmission through the sharing of needles was the main cause of HIV transmission in Indonesia. The five provinces most affected were Jakarta, East Java, West Java, North Sumatra, and South Sulawesi. The ministry of health (MOH) estimated there were 219,200 injection drug users (IDUs) in 2006. Most IDUs injected heroin and 90% were man. Half of the IDU population was between ages 15 and 24. Prostitution is illegal in Indonesia. In 2006, it was estimated that Indonesia had between 95,000 and 157,000 direct female workers who worked in brothels (a place where people may come to do sexual activity with a prostitute) and 85,000 to 107,000 indirect female sex workers who worked in karaoke bars and massage parlors. Overall, both indirect and direct female sex worker entered commercial sex work as a way to earn money for their families or they were sold or traded by boyfriends or parents. Estimates of the number of men who have sex with men in Indonesia is from 385,000 to 1.1 million. About 5% of MSM surveyed in 1007 were HIV positive. There are several program like HIV prevention program, aksi stop AIDS program, and also Indonesia HIV/AIDS prevention and care project that improve care, support, and treatment for people living with HIV. Those program also focused on strengthening the education of HIV including the use of condom (Mboi,2011)

**PROJECT TIMELINE**

**28 Aug - 1 Sept**

· First group discussion

· Deciding the disease and setting the individual roles

· Making the group contract

**4 Sept - 15 Sept**

• Starting the proposal

• First draft of project proposal

**18 Sept - 29 Sept**

• Revisiting the proposal

• Preparing the materials/props needed for the campaign

**2 Oct - 14 Oct**

• Finalising the materials needed for the campaign

**Campaign: 15 Oct**

**16 Oct – 3 Nov**

· Making the report

**Responsibilities**

1. Time Manager: Hakiim Norman, The time manager will create a timeline. This timeline will help us know our deadlines for this project about HIV/AIDS. The time manager also needs to manage our time very well so we get to finish this project with maximum results.

2. Project Manager: Alifa Zahra, The project manager is in charge to oversee the final documents. The project manager will edit all the errors and mistakes in this project. If somebody put the wrong information about HIV/AIDS in this project, the project manager will edit them out.

3. Communication Manager: Tatyana Hadi, The communication manager has a job to gain information from the other respective groups, teachers, and group members. The communication manager will make sure that the group they’re in and the other are researching on different things.

4. Archive Manager: Amanda Fernandy, The archive manager needs to keep all the things the group members contributed to this project. The archive manager needs to make sure that all the information are stored correctly and the archive manager also has a responsibility to not lose all the information we collected.

5. All the four group members also have a general responsibility which is to research about HIV/AIDS, write about all the information about HIV/AIDS, participating in all group activities, designing, and also presenting .

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