

Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome Prevention Behavior among Men Who Have Sex with Men (MSM) in the Gender Sexuality Group Community

Herman Herman^{1*}, Nur Fadilah¹, Mohammad Fikri¹

Correspondensi e-mail: herman.untad@gmail.com

¹ Department of Health Promotion, Tadulako University, Indonesia

ABSTRACT

Between January-August 2019, Central Sulawesi Province recorded 235 HIV and 94 AIDS cases. Data from the Gender Sexuality Group indicates that their community houses 28 MSM, 18 of whom are living with HIV/AIDS. This research seeks to understand HIV/AIDS prevention behaviors among MSM at the Gender Sexuality Group Community in Palu City. A qualitative case study approach was employed, with data collection through triangulation techniques including in-depth interviews, observation, and documentation using interview guides. Results show that MSM within the Gender Sexuality Group community demonstrate good knowledge of HIV/AIDS prevention. However, four out of seven informants still engage in risky behaviors. To address this, community and healthcare workers need to provide better infrastructure for HIV/AIDS prevention and treatment, especially for MSM living with HIV. Collaborative support from healthcare workers and the community is crucial in strengthening and assisting MSM. It's recommended that the Gender Sexuality Group community continues to conduct Communication, Information, and Education (CIE) activities to enhance MSM knowledge, particularly about HIV transmission and prevention. All MSM should undergo HIV testing at least twice a year. The community could organize seminars featuring disguised MSM PLWHA (People Living with HIV/AIDS) from outside the city as resource persons to increase awareness about HIV/AIDS within the key community.

Key Messages:

- Collaborative efforts between healthcare workers and the community are crucial to provide stronger support and assistance to MSM regarding HIV/AIDS prevention and care
- The study emphasizes the need for improved infrastructure within the community and healthcare system to facilitate easier access to HIV/AIDS prevention and treatment, especially for MSM living with HIV.

Introduction

Men who have sex with men (MSM) are a group of individuals who engage in sexual activity with other men. This population faces unique challenges regarding HIV/AIDS prevention and treatment due to various factors, including: 1) Stigma and discrimination: MSM often experience social stigma and discrimination, making it difficult for them to access healthcare services and openly discuss their sexual orientation (1). 2) Risk factors: Certain sexual practices associated with MSM sex can increase the risk of HIV transmission (2). 3) Limited knowledge: Some MSM may have limited knowledge about HIV/AIDS prevention and transmission due to social barriers and lack of targeted education. In large cities in Indonesia, there is an increase in the number of sexual services provided by transvestite and men serving male clients, including male sex workers (3).

The prevalence of HIV/AIDS among MSM in Indonesia is concerning. Data shows an alarming increase in HIV cases among this group over the past decade. Central Sulawesi Province, specifically Palu City, reflects this national trend with a growing number of reported HIV/AIDS cases, including among MSM. Data shows that 88% of the MSM gay sexual population do not use safe sexual practices, such as changing partners, engaging in oral and anal sex, and inconsistently using condoms and lubricants (4). According to the United Nations Program on HIV/AIDS (UNAIDS), in 2013, around 3% of the total male

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population in the world were MSM. The prevalence of HIV among MSM in Asian countries is reported to vary, in China the prevalence of HIV among MSM is 3.1%, Nepal reaches 4%, India 6.8%, Japan 4.4%, Vietnam 8%, Taiwan 8%, Cambodia 14.4%, and Thailand 28.3%, this is due to differences in culture and habits in these countries and various other factors. Southeast Asia is an area where HIV prevalence among MSM is increasing very rapidly. The highest increase occurred in Thailand at 28.3% and Singapore at 22% (5). Based on data from the Ministry of Health, coverage of prevention efforts in this population is reported to be still low, around 10%. However, the prevalence of HIV among MSM continues to increase over time. There is an increase in the number of HIV in key populations. The increase is worrying, especially among MSM, in 2011 there were 14,5432 MSM infected with HIV, in 2012 there were 16,883 MSM infected with HIV, in 2013 there were 19,499 MSM infected with HIV, in 2014 there were 22,532 MSM infected with HIV, in 2015 there were 25,412 MSM infected with HIV, in 2016 28,640 MSM were infected with HIV, in 2017 there were 39,268 MSM infected with HIV and in 2019 there were 53,082 MSM infected with HIV (6).

Central Sulawesi is one of the provinces where HIV/AIDS cases have been reported. The trend of HIV/AIDS cases from year to year tends to increase, in 2002 there were 695 reported cases of HIV and 436 AIDS and in January-August 2019 there were 235 reported cases of HIV and 94 AIDS. Cumulatively, HIV cases from 2002 to 2019 were 1,677 cases, and the number of AIDS cases from 2002 to 2019 was 855 cases. Data on positive HIV cases based on risk factors from January to August 2019 shows that the highest number of cases was in the group (others) with 39 cases, couples with high risk with 27 cases, tuberculosis (TB) with 27 cases, men having sex with men (MSM) as many as 24 cases, pregnant women as many as 23 cases, Community Inmates (WBP) as many as 7 cases, and clients of sex workers as many as 7 cases (7). The city of Palu is ranked first with the most HIV/AIDS cases out of the 13 regencies/cities in Central Sulawesi Province, recorded from 2002 to 2019, the cumulative number of HIV cases was 880 cases, 319 AIDS cases, and 107 of them died. HIV/AIDS cases based on key populations and risk factors in Palu City in 2015-2019, MSM is a key population that has quite a high prevalence, followed by customers, transgender women, and female sex workers (FSW). In 2015 there were 28 MSM with HIV/AIDS, 22 MSM with HIV/AIDS in 2016, 39 MSM with HIV/AIDS in 2017, 34 MSM with HIV/AIDS in 2018, and 32 MSM with HIV/AIDS in 2019 (8).

Lawrance Green (1980), states that behavior itself is formed from 3 factors, namely the first predisposing factors which are manifested in knowledge, attitudes, beliefs, values, and so on. The two supporting factors (enabling factors) are manifested in the physical environment, the availability or unavailability of health facilities or facilities, and so on. The three driving factors (reinforcing factors) are manifested in the attitudes and behavior of health workers or other officials, who are the reference group for community behavior (9). Prevention of HIV/AIDS in Men Male sex (MSM) is influenced by human behavioral factors and the environment in which they live. The level of knowledge of an MSM person influences safe sex practices and condom use. The attitude of an MSM person who cares about preventing and controlling HIV/AIDS will reduce the risk of HIV/AIDS cases occurring. Adequate infrastructure available in health services and the Gender Sexuality Group community can prevent the high number of HIV/AIDS cases in the Gender Sexuality Group. The support of the community and health workers is very influential in preventing and controlling HIV/AIDS because providing information both verbally and non-verbally, providing attention or material, which is obtained from close social relationships makes an MSM feel cared for, valued and loved so that they can beneficial to the welfare of the MSM who receive it.

The Banuata Pura Support Foundation is one of the foundations that houses MSM People Living with HIV/AIDS (PLWHA). The vision of the Banuata Pura Support Foundation is to eliminate the stigma and discrimination experienced by PLWHA and other vulnerable groups in society in general. The Gender Sexuality Group is a community division of the Banuta Pura Support Foundation. The aim of forming the Gender Sexuality Group Community is to reach MSM, especially in Palu City, who have not yet joined the Gender Sexuality Group Community as soon as possible for Voluntary Counseling and Testing (VCT) or voluntary HIV counseling and testing. The focus of activities at The Gender Sexuality Group is increasing knowledge about HIV/AIDS, reaching MSM, and inviting them to VCT, if the MSM already have PLWHA status (people with HIV/AIDS) they will be invited to undergo treatment immediately (10).

Based on a preliminary study conducted at the Banuata Pura Support Foundation, there is an organizational division that houses the Gender Sexuality Group which houses 28 MSM, 18 of whom suffer from HIV/AIDS. Based on the problems above, the author is interested in researching HIV/AIDS prevention behavior among men who have sex with men (MSM) in the Gender Sexuality Group Community in Palu City. To find out HIV/AIDS prevention behavior among men who have sex with men (MSM) in the Gender Sexuality Group Community in Palu City.

Methods

The type of research used in this research was research with a qualitative approach, where this research emphasized the analysis of deductive and inductive inference processes as well as the analysis of the dynamics of relationships between observed phenomena using scientific logic. This does not mean that the qualitative approach does not use quantitative data support at all, but the emphasis is not on testing hypotheses but only on trying to answer research questions through formal and argumentative ways of thinking (9). The approach taken in this research, namely the case study method, was used to intensively study the background of the current situation and environmental interactions which can be used both for all social units such as individuals, groups, institutions, and communities as well as for events, circumstances and so on (9).

The informants for this research consisted of 10 informants, including 2 key informants (Program manager of HIV/AIDS and STI; Chair of the Banuata Pura Support Foundation), 7 ordinary informants (6 HIV-negative MSM and 1 HIV-positive MSM), and 1 informant additional (Chair of the Gender Sexuality Community Group). The method for determining the main informant used purposive sampling. Purposive sampling was a technique for sampling data sources by considering certain things, for example, the person was considered to know best about what we expect.

Results

In determining the research subject, the researcher was assisted by a foreigner, a person who knows the behavior of the research subject. Foreigner is the chairman of the Banuata Pura Support Foundation, he is willing to assist researchers in selecting research subjects based on the criteria set by the researchers. The beginning of research began when the researcher visited a foreigner, conveyed his aims and objectives, and asked whether he was willing to be involved in the research.

After finding several men having sex with men (MSM), the researchers asked foreigners for help in conveying their aims and objectives first. Considering that the research informants were minorities, if one of the informants was not willing then the couple could not be used as research informants. Initially, there was resistance from several MSM, so the researchers only took MSM who were willing and able to become research informants. During the interview, the researcher used an interview guide to avoid missing questions that the researcher asked according to the situation. With the permission of the research informant, all processes were recorded, and then the recording results were transcribed into word form.

The Banuata Pura Support Foundation handles community groups of people living with HIV (ODIV) and people living with HIV/AIDS (PLWHA) and also provides strengthening and capacity building to community groups related to HIV/AIDS prevention. The Banuata Pura Support Foundation was founded on December 19th, 2019. The activities of this foundation are outreach, capacity building, close meetings, home care, hospital care, stakeholder collaboration, providing assistance to other vulnerable groups, providing assistance to people infected with the HIV (human immunodeficiency virus virus), as well as assisting victims of natural disasters.

Discussion

Knowledge

The informant's statement regarding knowledge about HIV/AIDS such as what HIV/AIDS is, the factors that cause HIV/AIDS, the symptoms of HIV/AIDS, and appropriate prevention for HIV/AIDS resulted in the informant's knowledge being relatively good. This can be seen by the number of questions answered correctly by the informants because they are often exposed to information about HIV/AIDS at the Banuata Pura Support Foundation where there is counseling or just sharing information with community friends.

This research is in accordance with research Cahyo (2017) (11) which states that regularly holding activities related to providing health information about HIV/AIDS and STIs which includes information about the importance of screening examinations as well as STI prevention practices through communication media, counseling, and periodic education is also one of the prevention measures that must be present in every community. This is supported by research Wardhani et al. (2015) (12), This is proven by many studies on the influence of health education on the level of knowledge. Health education is a health promotion media that can influence a person's knowledge and behavior. Mass media exposure increases the likelihood of HIV testing in women of reproductive age in Papua New Guinea (13). Mass media campaigns would serve as a cost-effective health promotion tool against the spread of disease. Providing continuous HIV education and relaying relevant HIV-prevention messages is thus still

crucial in the fight against HIV/AIDS in order to remove misconceptions about HIV transmission and in particular to help young people to protect themselves from infection (14).

Attitude

Attitudes towards preventing HIV/AIDS by MSM were found to show that knowing, wanting, and being able was not enough if MSM did not act to prevent HIV/AIDS where MSM was more vulnerable to being infected, so attitudes influenced an MSM to choose or decide to prevent HIV/AIDS appropriately. HIV/AIDS prevention in the Gender Sexuality Group Community is good in terms of providing information, preventing HIV/AIDS, and handling MSM who are infected with HIV. However, for the majority of regular informants, the intensity of sexual intercourse is still high and most do not use condoms. Apart from that, several community friends choose not to follow protocols to prevent HIV/AIDS. So several community friends still don't know their status, because they withdrew from the community, did not use protection for reasons of discomfort, stopped taking medication because they chose traditional medicine and quite a few died as a result of this. Discrimination and stigma are also one of the reasons why MSM choose to remain silent and are afraid to go to health services.

A study showed that men who identified as homosexual reported higher mean scores of stigma and distrust of health care providers compared to men who identified as heterosexual/bisexual ($p < 0.001$) (15). Qualitative data revealed the perception that health care providers lacked knowledge in addressing the needs of MSM. Moderate attitude is that MSM already has fairly good knowledge about HIV/AIDS, but still have insufficient intention or awareness to prevent HIV/AIDS. Lack of intention or awareness can come from MSM themselves and can also be influenced by the wishes of customers or other conditions in the field that make it difficult to use condoms during sex consistently(16). Good knowledge has not been able to influence MSM's attitudes towards preventing HIV/AIDS. HIV risk perception was not always associated with safer sexual behaviors or a reduction in risk behaviors. Attitudes (negative attitudes toward condom use), perceived norms (social pressures), and environment constraints (contextual barriers) were related to MSM and TGW not engaging in safe sexual behavior (17).

Infrastructure

The results show that the Banuata Pura Support Foundation and health services help each other in terms of preventing HIV/AIDS and making it easier for MSM to access treatment, as seen from the existence of VCT services and Supportive Care and Medication Services, provision of equipment, contraception, the availability of ARV drugs, counselling by health workers at the Banuata Pura Support Foundation as well as activities from the Palu City Health Service, namely during the Vira Loud month to reduce the prevalence of HIV/AIDS, especially among vulnerable groups in Palu City. However, adequate infrastructure does not guarantee patient comfort, because there is an obstacle, namely the long waiting time to get VCT test results at several health centers, but this can be handled as quickly as possible by the health center, so it can be concluded that the infrastructure for preventing HIV/AIDS is good.

Ease of access to infrastructure is one of the benchmarks for preventing HIV/AIDS, this is in accordance with research Lestari (2014) (18) which states that the factors that influence MSM's interest in doing VCT are knowledge about basic HIV and AIDS information and easy access to VCT, public perception of the MSM community and HIV and AIDS issues, sexual behavior, the presence of outreach workers, outreach strategies, anxiety about being open about sexual orientation. to other people and anxiety about HIV test results.

MSM can comfortably access VCT services, support from the environment is needed. This is also supported by the research of Eka et al. (2015) (19) which states that more respondents who performed VCT were respondents who received support than respondents who did not receive support from the environment so there is a relationship between encouragement, in this case, encouragement or support from the environment, towards HIV screening. The importance of environmental support has an influence on the use of VCT services, but this is not in line with research Herdanindita et al. (2020) (20) which stated that the informants had implemented VCT and most of the informants admitted that they did not influence their environmental support.

Support from Health Workers

Support from health workers for the prevention of HIV/AIDS showed that the influence of support from health workers can be seen in the efforts made to help provide information about the problem of HIV/AIDS, how to prevent it, how it is transmitted, as well as serving MSM in a good and friendly manner so that when carrying out counseling or treatment the atmosphere becomes more

comfortable. MSM need support or encouragement from officers to always be enthusiastic about preventing HIV/AIDS, but this is not in line with the research of Dewi et al. (2019) (21) stated that informants who did not prevent HIV/AIDS were more likely to be informants who received less support than informants who received support from health workers, so there was no relationship between encouragement, in this case, encouragement/support from health workers, to HIV/AIDS prevention.

The characteristics of health workers are also a benchmark for MSM to access health services, this is also supported by the research of Herdanindita et al. (2020) (20) which stated that the indifferent nature of health workers and created a high stigma of 60% or 18 people towards PLWHA in one of the community health centers in Bandung City caused a decrease in the quality of care and quality of life for clients. At the same time, this stigma will influence the occurrence of discrimination in VCT clients.

Community Support

Community support shows that community support is important. The Gender Sexuality Group community was founded to be a place that will encourage MSM to maintain a healthy lifestyle so that they are protected from sexually transmitted infections and HIV/AIDS, not only in terms of behavior but increasing capacity regarding HIV/AIDS and emotional support will not escape their attention. Finding a community that understands the struggles of MSM ODIV and PLWHA can ease the burden because they feel like they have friends with whom they can share their complaints. So community support is very important.

The community supports MSM to maintain a healthy lifestyle and provides employment opportunities to keep MSM busy doing positive things, this is in accordance with research of Listina, Febria (2020) (22) MSM empowerment also needs to be carried out to enable MSM to work. Friends from the same community are considered informants to influence intentions because by looking at the status of the informant who is not yet open with other people, even his own family, friends from the same community are considered the closest people.

The role of the community as a friend and support for MSM in carrying out HIV/AIDS prevention efforts is not in line with the research of Rokmah (2013) (23) who stated that such conditions could not resolve their feelings of isolation. In fact, these actions result in gay people increasingly feeling separated (isolated), different from their social environment and other friends, and feeling inferior to heterosexual people. However, there was a small portion of respondents who found it difficult to socialize within the family environment, even among fellow MSM. This could be due to the nature of the respondents who tend to be introverted (close themselves off) to anyone.

Implications of the Research

This research on HIV/AIDS prevention behavior among MSM within the Gender Sexuality Group Community in Palu City reveals several key implications across different aspects:

- 1) **Knowledge:** The study indicates that the informants possessed relatively good knowledge about HIV/AIDS. This is likely attributed to their frequent exposure to information through various activities at the Banuata Pura Support Foundation. This finding emphasizes the significance of ongoing educational programs in raising awareness and promoting knowledge about HIV/AIDS within MSM communities. This aligns with existing research highlighting the positive impact of health education on knowledge levels.
- 2) **Attitude:** Despite having good knowledge, attitudes towards consistent preventive behaviors were found inconsistent. While the community promotes and provides information on prevention, some informants still engage in high-risk behaviors such as infrequent condom use. This highlights the gap between knowledge and practice, requiring interventions that address not only knowledge but also attitudes and motivations towards consistent safe sex practices.
- 3) **Infrastructure:** The research reveals the positive role played by the Banuata Pura Support Foundation and health services in providing infrastructure for HIV/AIDS prevention and treatment. This includes VCT services, medication access, and support from healthcare workers. However, the study identifies a challenge related to waiting times for VCT results in some health centers. Addressing such issues can further improve the comfort and efficiency of accessing essential services.
- 4) **Support from Health Workers:** The study shows that supportive and friendly attitudes of health workers play a crucial role in encouraging MSM to access services and adhere to preventive measures. This finding underscores the importance of sensitizing healthcare workers regarding the needs and challenges faced by MSM communities to ensu
- 5) **Community Support:** The Gender Sexuality Group Community provides a vital space for MSM to

access peer support, maintain healthy lifestyles, and address emotional needs. This finding emphasizes the importance of strengthening and fostering such community support systems as a crucial element in promoting well-being and encouraging preventive behaviors among MSM populations.

Conclusion

The knowledge of men who have sex with men (MSM) in the Gender Sexuality Group community regarding HIV/AIDS prevention is in a good category. This is because MSM is often exposed to information about HIV/AIDS obtained through activities in the Gender Sexuality Group community. MSM's attitude to preventing HIV/AIDS only reaches the knowledge level, which is the lowest level of knowledge. MSM knows the theory to prevent HIV/AIDS but sometimes neglects to apply it. The infrastructure available in the Gender Sexuality Group community to prevent HIV/AIDS is in a good category. The available infrastructure includes contraceptives (condoms), ARV drugs, and posters. The support from health workers felt by MSM is support regarding physical and psychological comfort, attention, appreciation, and assistance in other forms such as information, which individuals receive from health workers.

The community is people who understand and understand what MSM feel, where the Gender Sexuality Group community has become a comfortable space for MSM, to share stories, help each other, and visit community friends who are down, so that the Gender Sexuality Group community has become a support system for friends. other community friends.

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