

Original Article

Community Stigma Against COVID-19 Patients

Lilik Setiawan ¹, Heru Suwardianto²

¹STIKES Karya Husada Pare Kediri, East Java, Indonesia

²STIKES RS Baptis Kediri, East Java, Indonesia

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ABSTRACT

Background: Covid-19 is a contagious and dangerous disease. So that the sufferer must be isolated either independently at home, isolated in the hospital, or isolation in the village. In addition to patients, the community also implements health protocols. A person who is declared positive for Corona often gets negative prejudice, and gets unfavorable treatment, and is often shunned or ostracized by the community because people are afraid of being infected. This causes them to be labeled, stereotyped, discriminated against, and treated differently, and experience status harassment because they are associated with a disease. The purpose of the study was to find out community stigma about sufferers.

Methods: The Design of this study was descriptive, with the research variable being community stigma about sufferers Covid-19. The population of the community research in Dusun Batu, Joho Village, Pace District, Nganjuk Regency, was 730 people and the sample was 73 respondents. The sampling technique used purposive sampling. The study was conducted on December 15-26, 2020. The research instrument was in the form of a questionnaire. The data were analyzed by percentage and interpreted to obtain quantitative data.

Results: The results were obtained from 73 respondents, most of them 55 respondents (75%) with a negative stigma and a small proportion of respondents, namely 18 (25%) positive stigmatized respondents. The public's stigma about sufferers is Covid-19 influenced by several factors including age, education, occupation, whether or not they have received information about Covid-19, sources of information. Look for sources of information about Covid-19 that can be trusted

Conclusion: By better understanding the information provided, it is hoped that the negative stigma will become positive about sufferers Covid-19. And from health workers to provide counseling to the community, so that people better understand the disease Covid-19 and maintain health protocols

Corresponding Author Contact:

Lilik Setiawan, STIKES Karya
Husada Pare Kediri, East Java,
Indonesia
Email: Liliks1975@gmail.com

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Introduction

Covid-19 is an infectious and dangerous disease. So that the sufferer must be isolated either independently at home, isolated in the hospital, or isolation in the village. In addition to patients, the community also implements health protocols. A person who is declared positive for Corona often gets negative prejudice, bad treatment and is often shunned or ostracized by the community because people are afraid of being infected. This is most likely due to public knowledge about Covid-19 to the relatively lack, such as information on transmission, modes of transmission. This is what causes the emergence of social phenomena that have the potential to exacerbate the situation, namely social stigma or negative associations against a person or group of people who experience symptoms or have certain diseases. They are labeled, stereotyped, discriminated against, treated differently, and experience status harassment because they are associated with a disease (Ose, 2020).

Judging from the increase in the number of cases took place quickly and spread in a short time. Date August 31, 2020, there were 25.3 million cases of virus corona that have been confirmed in the world (Data World meters). In Indonesia, on August 31, 2020, 174,796 people were confirmed to have Covid-19 (data from the Covid-19 Task Force). In East Java on August 31, 2020, 33,543 people were confirmed (Prov.JATIM, 2020). In Nganjuk Regency August 31, 2020, 300 people were confirmed (data from covid19.nganjukkab.go.id). From the results of research on stigma against positive people Covid-19 in 2020, it was found that negative stigma for sufferers Covid-19 and their families arose as a result of the global pandemic in early 2020. Covid-19 is an infectious disease with a very fast transmission process and can

result in death. Many patients are indeed difficult to reveal their history because of the stigma against patients Covid-19 and the social conditions of the community.

As a new dangerous and contagious disease, humans tend to be afraid of the unknown and it is easier to attribute fear to "different groups". Because sufferers are a source of infection, people around them become afraid and anxious. This is what causes the emergence of social stigma and discrimination against certain ethnicities and also people who are considered to have a relationship with this virus (Agustang et al., 2021; Badrfam & Zandifar, 2020; Kuwado, 2020). The feelings of confusion, anxiety and fear that we feel are understandable, but that doesn't mean we can have bad thoughts about sufferers, nurses, families, or those who are not sick but have symptoms similar to Covid-19. If it continues to be maintained in the community, social stigma can make people hide their illness so they are not discriminated against, prevent them from seeking medical assistance immediately, and prevent them from practicing healthy lifestyle behaviors (Dai, 2020).

The negative stigma that is given will only worsen the situation both mentally and in the spread of the disease itself. The impact of being shunned by the community of patients is Covid-19 psychologically burdened, the immunity of the patient will decrease, it will slow down healing (Maulidah & Sufi, 2021; Yono et al., 2020). If this is allowed to happen, the surrounding community will automatically be affected. Because the status of the risk of contracting will be prolonged. That's because the source of transmission that should have been completed within 14 days will extend to an unknown time limit.

To stop the community's stigma against sufferers Covid-19, the SATGAS in Joho Village, must provide mentoring education to the community, must enable

the community to understand this disease, apply effective and practical steps to control it, and show empathy to those affected. Creating an environment where people can discuss and discuss this disease and its effects openly, honestly, and effectively. This will reduce the fear and social stigma caused by the disease

Method

The design of this research is descriptive, with the research variable being community stigma about sufferers Covid-19. The population of the community research in Dusun Batu, Joho Village, Pace District, Nganjuk Regency, was 730 people and the sample was 73 respondents. The sampling technique used purposive sampling. The study was conducted on December 15-26, 2020. The research instrument was in the form of a questionnaire. The data were analyzed by percentage and interpreted to obtain quantitative data (Nursalam, 2017).

Results

Results of research that have been carried out on Community Stigma about Patients *Covid-19*

Table 1 Table of Characteristics of Respondents Based on Community Stigma about Patients *Covid-19* in Batu Hamlet, Joho Village, Pace District, Nganjuk Regency, December 15-26 2020.

No	Criteria	Frequency	Percentage
1	Positive	18	25
2	Negative	55	75
Total		73	100

Data Source: Questionnaire, Elisa Damayanti, December 15-26, 2020

Based on table 1 above shows that the number of 73 respondents, most of the respondents, namely 55 respondents (75%) had a negative stigma, and a small proportion of respondents, namely 18 respondents (25%) had a positive stigma.

Discussion

From the results of research conducted in Batu Hamlet, Joho Village, Pace District, Nganjuk Regency on December 15-26, 2020, it can be seen that the public stigma about sufferers Covid-19 shows that most of the respondents have a negative stigma, namely 55 respondents (75%) and the majority of respondents have a negative stigma. a small number of respondents have a positive stigma as many as 18 respondents (25%).

Stigma is the act of giving a social label that aims to separate or discredit a person or group of people with a bad stamp or view. In practice, stigma results in acts of discrimination, namely the act of not recognizing or not seeking to fulfill the conscious rights of individuals or groups how they should be as useful human beings. Stigma and discrimination occur due to the perception that they are considered enemies, diseases of elements of society (Depkes, 2012 in Pradana 2017). Meanwhile, according to Chaplin (2004) in Pradana (2017) stigma is a blemish on a person's character. The theory states that several factors influence stigma, one of which is work (Notoatmodjo, 2010), access to information, (Suryoputro, 2006) Other factors that influence stigma include age, gender, education (Paryati et al, 2012).

With the outbreak Covid-19, it seems to add to a row of diseases that can

cause negative stigma for sufferers and their families. This is in line with research conducted by (Media and Afriyani, 2020) that people isolate or refuse when there are neighbors whose family members are confirmed to be positive for Covid-19. As it is known that Covid-19 is a new disease that spreads quickly and until now there is no cure. This condition is also accompanied by various information on Covid-19 through social media that is not all reliable, this has caused some people to be afraid of contracting the disease Covid-19, as well as negative stigma against confirmed families by ostracizing. Then according to research (Abudi et al, 2020), negative stigma on sufferers Covid-19 and their families arose as a result of the global pandemic in early 2020. Because Covid-19 is a dangerous disease and its transmission is fast and can result in death, there are still many patients who find it difficult to express history because people still value negative stigma. People prefer to stay away and do not want to come into direct contact with sufferers. In line with research by (Azizah, 2011; Jannah et al., 2020; Maulida et al., 2020) society gives a negative stigma. This is felt in inpatients Covid-19, in addition to physical pressure, mental pressure is also felt. In this case, patients Covid-19 are afraid of being ostracized by the community. Because he had a history of Covid-19. Many people are trying to avoid patients Covid-19 because they are worried that they are afraid that former patients Covid-19 will transmit the virus contained in their bodies. Then according to Rosadi (2020) the emergence of negative stigma against those associated with Covid-19. Where this virus is a new model so people tend to have fear. Anxiety, confusion, and fear in most people are feeling that always adorn people's lives today. As a result, they will try to avoid those who are indicated by Covid-19 by giving a negative stigma. Then in line with journal research by (Livana,

Mubin, et al., 2020; Livana, Suwoso, et al., 2020), there is an increase in the number of reports of public stigmatization of positive people Covid-19. Especially against people from areas affected by the epidemic. Stigma appears in social behavior such as ostracizing patients who have recovered, refusing and ostracizing people who move from one area to another, ostracizing certain ethnicities because they are carriers of the virus.

The results showed that most of the respondents, namely 55 respondents (75%) had a negative stigma about sufferers Covid-19. People give a negative stigma to the possibility of thinking that Covid-19 is the source of a deadly disease spreader, they are afraid of contracting the virus. This is in line with research conducted by (Afriani & Fitria, 2021; Syawaluddin et al., 2020) that people isolate or refuse when there are neighbors whose family members are confirmed to be positive for Covid-19. As it is known that Covid-19 is a new disease that spreads quickly and until now there is no cure. This condition is also accompanied by various information on Covid-19 through social media that is not all reliable, this has caused some people to be afraid of contracting the disease Covid-19, as well as negative stigma against confirmed families by ostracizing. Then this is influenced by several factors, namely age, education, occupation, information.

Judging from the age factor there are most of the respondents, namely 38 respondents (52%) aged 17-20 years. The older a person gets, the more a person's attitudes and behavior change so that his thoughts can change (Arlisa, 2020). With the age of the respondent being relatively young, the level of maturity or psychological maturity is still lacking. So it is easy to give a negative stigma about sufferers Covid-19.

In addition, negative stigma is also influenced by education, most of the respondents, namely 37 respondents (51%) have junior high school education. This shows that the higher the level of education, the higher the level of knowledge (Teresha, 2015). Education affects understanding the information provided. Low education means that receiving information and perceptions about sufferers is Covid-19 negative.

Another factor that influences the negative stigma about sufferers Covid-19 is the respondent's occupation. The results of this study indicate that almost half of the respondents, namely 30 respondents (41%) do not work. According to Notoadmodjo (2010) work can affect knowledge, a person's job is very influential on the process of accessing the required information on an object. Work will affect a person's mindset. By not working, a person interacts less with other people and therefore lacks a lot of information about info Covid-19. From someone who works and has a good income, it can make it easier to find information and can exchange ideas with coworkers.

Stigma is also influenced by the information obtained. Information has a major influence on the formation of people's opinions and beliefs. From the respondents studied, all respondents, namely 73 respondents (100%) had received information. And most of the respondents, namely 51 respondents (70%) get information from the Internet. This condition shows the magnitude of the delivery of information about Covid-19. The information obtained is not all reliable and often contains fake news (hoax) on irresponsible sites or websites. So that understanding about Covid-19 becomes less and it is easy to give a negative stigma about sufferers Covid-19 (Yunere & Yaslina, 2020).

The results of further research are that a small proportion of respondents, namely 18 respondents (25%) have a positive stigma about sufferers Covid-19. This is influenced by factors of age, education, and occupation. From the results of the study, it was found that a small proportion of the respondents were 11 respondents (15%) aged 41 -50 years and 7 respondents (10%) aged 51-60 years. According to (Suganda, 1997 in Paryati et al, 2012) the older a person gets, the more a person's attitudes and behavior change so that his thoughts can change. With the increasing age of the respondent, it will also increase maturity or psychological maturity and be able to carry out their duties, regulate their mindset well. So that age maturity affects the positive stigma about sufferers Covid-19.

Positive stigma is also influenced by educational factors. Where a small part of the respondents, namely 18 respondents (25%) had high school education. According to (Teresha, 2015) the higher the level of education, the higher the level of knowledge. Therefore, the high level of education has an impact on respondents in capturing and understanding the information about Covid-19 that is given. Education can also affect a person's behavior, affect his perception, then also influence his association. The higher the level of education, the more knowledge, the wider the horizons. So, the respondent is seen in his education level as having a good stigma about sufferers Covid-19.

Another factor that influences respondents who create a positive stigma is work. A small proportion of respondents, namely 15 respondents (21%) work in the private sector and 7 respondents (10%) work as civil servants. According to (Notoatmodjo, 2010), work can affect knowledge, a person's job is very influential on the process of accessing the required information on an object.

Occupational factors affect positive stigma because interacting frequently can lead to broader insights.

Conclusion

Based on the results of the Community Stigma research on sufferers Covid-19 conducted on 15-26 December 2020, it can be concluded that most respondents have negative stigma and a small proportion of respondents have a positive stigma about sufferers Covid-19. are expected to be able to change the negative stigma into positive ones by being able to better understand the information provided and seek information on reliable news. For respondents who have a positive stigma, it is necessary to maintain a positive stigma so that it does not become negative. Positive stigma is not ostracizing people with Covid-19, not talking badly about sufferers. institutions are expected to be able to add literature, reading books, and other sources related to Stigma about sufferers Covid-19 to make it easier for students or other researchers to find references and considerations to improve the quality of further research on stigma about sufferers Covid-19. This research is expected to provide additional information and references related to the stigma that exists in the community about sufferers Covid-19. It is hoped that the results of this research can be used as a basis for researchers to further examine the stigma of society about sufferers Covid-19 and serve as additional knowledge for daily life.

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