Behavioral Prevention of Sexual Transmitted Infections in Female Sexual Workers in Puncak, Bogor

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ABSTRACT

Background: Case of HIV/AIDS in the Bogor district each year continues to rise. And one of them caused by free sex. District Cisarua is one of 14 districts highest number of cases of HIV/AIDS.

Objective: This study aimed to analyze information about behaviors prevention of Sexually Transmitted Infections (STIs) in Female Sex Workers (FSWs) in Bogor 2016.

Methodology: This study which was implemented in July 2016, and used a qualitative approach with key informants is Female Sexual Workers and Security Guards Hotel. Data analysis was done by the content analysis method by transcribing interviews that comes from informants.

Result:The results of this research note that informant is Female Sexual Workers due to economic factors. While on Sexually Transmitted Infections prevention behaviors, informants on Sexual Transmitted Infections prevention behaviors by using condoms protective. However, in the perception of the prevention of sexually transmitted infections, the informant use of antibiotics, betel leaves, antiseptic and cleaning themselves after sexual intercourse to maintain health and prevent sexually transmitted infections.

Conclusion:In this study of Behavioral Prevention of Sexual Transmitted Infections in Women Sexual Workers by using condoms protective and use of antibiotics, betel leaves, antiseptic and cleaning themselves after sexual intercourse. And suggested to the health department to provide information about Sexually Transmitted Infections more intent, and have a strategy with exciting promotional media which easy to understand by Women Sexual Workers.

Keywords: Female Sexual Workers, Sexual Transmitted Infections

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1. INTRODUCTION

More than 1 million sexually transmitted infections (STIs) every day throughout the world. Every year an estimated 357 million new infections with 1 in 4 STIs, namely chlamydia, gonorrhea, syphilis and trichomoniasis. And since 2000 an estimated 7.8 million deaths have been caused by HIV and 30 million people have been infected with new cases of HIV.¹

In Indonesia, there has been a trend towards an increase in the number of HIV cases from year to year since it was first reported (1987). Conversely, the number of AIDS cases shows a tendency to increase slowly even since 2012 the number of AIDS cases began to decline. The cumulative number

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of HIV from 1987 to September 2014 was 150,296 people, while the total cumulative AIDS cases were 55,799.2

The sex industry is estimated to involve 150,000 female commercial sex workers. HIV sufferers in high-risk women are quite high. In Merauke, for example, 26.5% of female commercial sex workers have been infected with HIV.³

Likewise, cases of HIV / AIDS in Bogor are increasing every year. And Cisarua sub-district is one of the 14 highest sub-districts in HIV / AIDS cases. This is dominated by drug users, free sex and mothers who have children.⁴

Sexually Transmitted Infections (STIs) or often called venereal diseases are a group of infectious diseases whose transmission is mainly through sexual intercourse. AIDS is also an STI because of the way it is transmitted mainly through sexual intercourse. ⁵

Prostitution is one of the kaleidoscope images maintained by social order, which wants to perpetuate the status of women as sexual objects.⁶

The types of sex workers include 1) sex workers from trafficking victims namely by the form of sex trafficking; 2) street sex workers, namely sex workers with methods to find customers on the roadside 3) Transgender namely a commercial gay group with drug and alcohol addicts and working to serve sex.⁷

The results of qualitative research on the prevention behavior of sexually transmitted infections in sexually working women in Tegal Regency showed that FSWs were quite active in seeking information on STIs through friends, health workers, counseling, print, and electronic media, but not through pimps. Almost all FSWs seduce customers to use condoms and can use condoms properly. Vaginal FSWs hygiene is not good, they clean the inner vagina using antiseptics and toothpaste.⁸

2. MATERIALS AND RESEARCH METHOD

This research was conducted in July 2016 in the Puncak area, Cisarua, Bogor. This research is qualitative research. At the beginning of the study there were 6 FSWs who were willing to become informants, but then only 1 person was willing to continue as an informant clandestinely because it was banned by pimps. The informants were divided into two, namely Female sex workers (FSWs) as main Informants and Hotel Security Officers as Key Informants, each numbered one person. This is to validate data using source triangulation. Data collection in this study using structured interview techniques with open-ended questions that do not require order. The initial step taken by the researcher is to make interview guidelines compiled based on theories that are relevant to the problem under study and in conducting interviews, the important thing to remember by researchers is being able to adapt research methods and always find the best way to obtain the information needed. At the stage of data analysis, researchers used the content analysis method.

3. RESEARCH RESULT

a. Overview of Sex Workers

From the results of in-depth interviews, it was found that the main informant was named (AN) precisely in July 2016, 26 years old. (AN-26 years) claimed to have been an FSWs for 6 years, initially 3 years working in Jakarta since he was 19 years and 3 years in Puncak, Cisarua until now. (AN-26 years) migrated from Tegal, Central Java. And according to her, usually, fellow sex workers in Cisarua came from the Cianjur area, Sukabumi. Whereas according to the acknowledgment of Hotel Security Officers TG-33 years in one of the Puncak, Cisarua, Bogor, information was obtained that the FSWS in Puncak, Cisarua, Bogor usually came from the Cianjur, Ciamis, Sukabumi, Indramayu areas which had been around 2 - 4 years. Like the statement of the informant (TG-33 Years) below: "Mostly Cianjur, Ciamis, Sukabumi, Indramayu ..." (TG-33 years).

In the in-depth interview, other information was obtained that (AN-26 years) when being an FSWs in Kramat Pulo, Central Jakarta, was closely monitored because it became an FSWs in a brothel house or an official agency. The selection of admission to the FSWs begins with filling out the registration form, with one of the requirements being a minimum of a high school graduate. Like the statement (AN-26 years) below:

"In Jakarta, there are friends of mine who go to college, even a graduate student, maybe it's just me whose education is minimal, onlyuntil junior high school. There, the minimum form fill is a high school ... "(AN-26 years).

In addition (AN-26 years) claimed to start his job as an FSWs due to family economic factors. The following statement (AN-26 years) regarding the reason for being an FSWs:

"Because of the needs, the responsibilities, because my father has died since I was 19 years old. I am the backbone of the family because two siblings are married so they don't care " (AN-26 years).

The same thing was also expressed by key informants (TG-33 years) that female sex workers who are often found in Puncak areas usually become sex workers because of economic factors.

During in-depth interviews, other information was obtained about the virginity status of the main informant, (AN-26 years) who claimed that before becoming an FSWsshe was not virgins and had premarital sex with herboyfriend. The following statement below:

"I used to have a big problem, I lost my virginity with my boyfriend ..." (AN-26 years).

FSWs customers at Puncak areas are usually Arab tourists. According to key informants (TG-33 years), usually, in the Puncak areas, there are certain months which are the months for Arab tourists to have sex with FSWs. In addition, the main informant claimed that his customers were only tourists - Arab tourists only (AN-26 years old) did not want local customers and were delivered by ojeg (R-private motorcycle driver) to villas to find customers. Like the statement below:

"... We serve all Arab tourists from the Middle East who come right here. I come to villas with Ojeg. I can't do with local people. Has to be with foreigners" (AN-26 years).

In addition, information was obtained from (TG-33 years) that the hotel place (TG-33 years) worked as a sexual service place by FSWs. And it is undeniable that the hotel management knows. And usually, places that are often used as sexual services are villas in the Puncak area, Cisarua Bogor. Like the statement (TG-33 years) below:

"they know, yes they know, but pretending not to know...the only important for them was the hotel's room booked fully..." (TG-33 years old).

"... There are also villas, most of them are villas. Because there are mostly villas there..." (TG-33 years).

According to the main informants, the services provided were in the form of dancing and sexual intercourse. The following statement (AN-26 years) about the cost of services obtained:

"It depends sometimes ... five hundred, sometimes seven hundred..., but sometimes we see Saweran. Sometimes dancing... four hundred...five hundred, sexual intercourse...the same... five hundred too ... "(AN-26 years).

The statement is similar to the recognition of key informants that FSWs usually provides services in the form of karaoke, massage, and sex. Like the statement below:

"Yes, it depends on the customer order for the PSK, usually there is only someone who orders for the karaoke, then karaoke plus, ...order only for massage also there ..." (TG-33 years).

According to the main informant (AN-26 years), she claimed there was no intention to stop being an FSWs because she was the backbone of the family. In addition, information was obtained from key informants that the FSWs who often met at his workplace said she wanted to stop being a prostitute. But not for long (TG-33 years) also met them again as a sex worker because of the demands of economic conditions. The following statement (TG-33 years) below:

"Yes, there was, say she wanted to stop.... wanting to live a normal life - sometimes the economy doesn't support it....come back again ..." (TG-33 years).

b. STI Prevention Behaviors

Using protective equipment in sexual relations with customers. (AN-26 years) admitted trying to use protective equipment condoms during sexual intercourse. And how to obtain protective equipment or condoms, (AN-26 years old) claimed to get it from customers because the customer has stock, sometimes asking the ojeg to buy, sometimes even (AN-26 years) herself buy it.

"Use condoms as a safety tool ..." (AN-26 years).

Based on information from key informants, (TG-33 years) as a hotel security officer, he and usually with hotel cleaning guards, clean the room if guests have checked out and found condom contraception. And usually, FSWs get condom protection from hawkers that deliver it to villas. The following statement (TG-33 years) below:

"From which I know, when a guest has already checked out. Sometimes I go in together with those who clean the hotel rooms, (while laughing) there are many remnants of contraception ... "(TG-33 years).

In addition, (AN-26 years) made traditional efforts and medical treatment to prevent STIs. That uses antibiotics and sometimes takes pap smears, betel leaves, drink jamu (R-herbs) and clean herself after sexual intercourse sometimes with antiseptics. Like the statement below:

"Oh, sometimes just it... what it called... antibiotics. Sometimes when I have money I also have a pap smear (AN-26 years).

"Sometimes I drink jamu (r-herbs) ..." (AN-26 years).

Based on the results of in-depth interviews with key informants of hotel security officers (TG-33tahun), information was obtained that there were those who sold strong jamu (r-herbal medicine) to villas and someone told FSWs to see a doctor, usually, the pimp told it. And (TG-33 years) heard that there had been an FSWs in the Puncak area who got pregnant and had an abortion.

c. Predisposing factors

1) Knowledge

The main informant (AN-26 years) have already known about Sexually Transmitted Infections, what are the types of STIs Diseases and their symptoms. Because (AN-26 years) get information and education from government health workers when he works at the Club in Jakarta. The following statement (AN-26 years) at the time of the results of in-depth interviews:

"HIV, Syphilis, a lot. I used to work in Jakarta, there are also those who are like this (r-this research), give this knowledge - if we work like this, there are the impacts "(AN-26 years).

"(While smoking) ... even I saw the picture, what kind of syphilis, festering, white fluid, chicken combs, even genital lice and what HIV is, the transmission... I also read" (AN-26 years).

In an in-depth interview, information was obtained that her friends from fellow FSWs in Cisarua lacked an understanding of STIs. Like the statement below:

"...you don't have enough (r-information) here, I used to hear that someone got HIV, maybe because he was still young and his knowledge was lacking" (AN-26 years).

2) Perception

In the results of in-depth interviews, (AN-26 years) assessed that FSWs affected by STIs because she did not prevent and not using condoms and not choosing customers, and described it as experienced by her fellow FSWS. The following statement (AN-26 years) below:

"Sometimes there are a lot of children (R-FSWs)...(sorry)..., as soon as they finish they go to bed. That is what makes the disease, even more, they don't use safety ..." (AN-26 years).

According to (AN-26 years) STIs that does not appear which in the customers can infect her as well as HIV disease. Following statement (AN-26 years):

"You can (R-get infected), HIV is not visible ..." (AN-26 years).

Key informants (TG-33tahun) perceptions about the vulnerability and severity of FSWs against STIs based on the results of in-depth interviews, FSWs already know the risks of change male partner, and worry about being exposed to diseases and also fear of being expelled by pimps when infected with STIs. The following statement (TG-33 years) below:

"I must be afraid of having an illness, sometimes will be thrown away when having the disease, she is told to go home ..." (TG-33 years).

3) Attitude

Attitude (AN-26 years) in preventing STIswere asking customers to use condoms. And if the customer does not want to use a condom, (AN-26 years) prefer not to serve and leave the customer. Like the statement below:

"... the customer must use it. Sometimes the Arabian is so so... Because Arabian different to us, he remembers health as well "(AN-26 years).

Whereas (TG-33 years) know about the attitude of FSWs in preventing STIs, among others, FSWs usually refuses if customers do not want to use protective equipment such as condoms. The following statement (TG-33 years) below:

"Sometimes they like to refuse, but their customers sometimes like to get angry... "(TG-33 years).

d. Enabling factors

1) Health facility

Based on the results of in-depth interviews, it was found that the main informant (AN-26 years) did not have a regular check-up schedule with the doctor. Dan (AN-26 years) claimed to get treatment from a doctor only while working in Jakarta and got an antibiotic injection from a doctor. Like the statement (AN-26 years) below:

"I don't have to, I go as I wish, I've never been (R- regular checkup) here,that was in Jakarta ..." (AN-26 years).

"In the past, in Jakarta, sometimes there were injections of vitamins, maybe a vaccine, yeah ..." (AN-26 years).

In addition, it was found that health workers visited the Club in Jakarta to provide education about STIs, but at Cisarua had never been a health worker who provided education about STIs to FSWs because she works at Cisarua freelance. Like the statement below:

"Here, it's not there, I've never known ..." (AN-26 years).

In addition, those who (TG-33 years) know, there has never been a health worker who came to provide education to the FSWs around the hotel. And for FSWs who go to the doctor, (TG-33 years) he admitted that only certain people. As the statement below: "Never been ..." (TG-33 years).

e. Reinforcing Factor

1) Family Role

From the results of in-depth interviews, it was found that parents (AN-26 years old) did not know their work as an FSWs. The one who knew the work (AN-26 years) were only one of their family members because they were told by one friend. As with statements (AN-26 years) below: "Mamah doesn't know, if she knows, perhaps I could have been hanged on the flag pole. My brother also doesn't know,he is strict, perhaps I'll be slaughtered. The one who knows only an older sister because she knows the conditions right "(AN-26 years old).

According to (TG-33 years) usually no FSWS family knowabout the work, but it is different from the FSWs who marriedfor a contract. For the Puncak areas, many do contract marriages, the parents usually know the contract. In addition, because of the lack of knowledgefrom the family of the condition being an FSWs, there is no support or family role in preventing STIs.

2) Role of Friends

AN (26 years) admitted the differences work conditions in Jakarta and in Cisarua. One of which was her friend's knowledge of STIs. According to the information obtained, the knowledge of his friends in Jakarta on STIs was good because of the educational background of her friends who were still in college and graduate level, besides the FSWs living environment in Jakarta was tight with bodyguards monitored so that they reminded each other to use safety. While in Cisarua, her friends lacked knowledge about STIs and fellow FSWS friends in Cisarua were still young students, so when (AN-26 years) worked in Cisarua (AN-26 years) which always reminded them of using a condom as safety. The following statement below:

"... it's not there, I'm the one who told others, when it was in Jakarta my friend already adult" (AN-26 years).

The information obtained from key informants was that the role of fellow FSWs in Cisarua seemed to have high solidarity.

3) The role of Pimp

From the results of in-depth interviews, information was obtained that the job as an FSWs when in Jakarta was different as (AN-26 years) worked in the Puncak area due to a tight ruleby the Agency. When (AN-26 years) worked as an FSWs at Puncak until now she was freelance even though there was security but it was not as tight as when working in Jakarta. Therefore, pimps also have a role to remind sex workers to use safety. As with statements (AN-26 years) below:

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"I accompanied by mamih (R-Pimp), I really close to her, really close like my own mother.... You won't be like that, don't forget to bring this (Condom), you get the drunkest...still, you clean it first "(AN-26 years).

The results of interviews obtained from key informants regarding the role of the pimp, which is the support of the pimp, showed that the pimp did seem to participate enough for the health safety, including maintaining health to avoid infection.

4. DISCUSSION

a. Overview of Sex Workers

Choosing to be an FSWs is not without reason. The main information in this study which has an education background was junior high school, and when in high school often skipped school. The family economic factor is the main cause, namely the difficulty to meet the daily needs of the family, so the informant chooses to become an FSWs.

b. STI Prevention Behavior

The results showed that informants always used condoms when serving customers and were believed to be an effort to prevent STIs. And almost all customers who have been served have the awareness to use condoms due to good knowledge informants and customers of STIs.

The behavior scheme according to Notoatmodjo¹³ that with the perception, knowledge, beliefs, desires, motivations, and intentions can manifest a person's behavior.

In addition, there is other information from interviews that informants believe drinking herbal medicine, betel leaves and antibiotics and cleaning genitals after having sex can prevent STIs.

That is in line with Widodo's research, where the majority of respondents still believe that taking antibiotics and washing genitals with soap before or after sex can prevent STIs, HIV and AIDS and because they feel taking antibiotics and drinking herbs become healthier, recovering from illness and safe from STIs, HIV, and AIDS because of the assumption of respondents that germs will die by taking antibiotics and bitter jamu(R-herbal medicine).⁹

c. Predisposing factors

1) Knowledge

From the results of the research with in-depth interviews, the main informants had good STIs knowledge, as well as explaining the types of STIs, the way of transmission and one of the symptoms. So that informants have attitudes and behaviors to prevent STIs by using protective devices such as condoms. This was supported by key informant statements that FSWs did know about STIs because they were worried about their health if they were infected with STDs.

According to Bloom in its development written by Notoadmodjo¹³, knowledge is the result of human sensing, or the result of knowing someone to an object through their senses (eyes, nose, ears and so on). By itself, when sensing to produce knowledge it is greatly influenced by the intensity of attention and perception of the object. So, in this case, the informant has the attention and perception of infectious diseases caused by sexual relations. So, the informant has the ability to protect her body from STIs.

2) Perception

Informant's perceptions of the vulnerability of FSWs exposed to STIs were wrong, informants said that the FSWs affected by STIs were people who did not choose their customers, but the informants already knew that one of the risks of patients getting STIs was not using condom protective equipment. And for the perception of the severity of STIs, it is considered a filthy disease and can cause death such as HIV.

This is different from the research conductedby Arifianti.et.al., that the majority of respondents are still mistaken in assessing STI disease can cause infertility. 10

So the informant believes that all forms of effort can prevent STIs and informants knowing that their work as FSWs is at risk for transmission of STIs.

3) Attitude

The results of in-depth interviews with informants, it was found that the informants were able to provide condoms and or ask customers to provide condoms. In addition, informants already had self-efficacy to reject customers who did not want to have sex safely or use protectors such as condoms.

It can be concluded that the manifestation of that attitude can be directly seen. The real attitude shows the connotation of the suitability of the reaction to certain stimuli that in everyday life is an emotional reaction to social stimulus.

d. Enabling factors

Health Facility

The results of in-depth interviews were informed that the experience of informants as FSWs working in the Jakarta area and in the Puncak area of Bogor was far different in terms of health services. While working in Jakarta under the agency, she is required to always check her health facilitated by government health services in the form of information and education about STIs and getting injections of antibiotics by doctors. Whereas the work of FSWs in the Puncak area is freelance, and according to her, there has never been a health worker who provided education regarding STIs,medical examination, or administration of antibiotics.

Antibiotic injections can never prevent transmission of STIs but can kill bacteria that may be transmitted by sex. Antibiotic dosage is usually only enough to cure one type of STI and cannot cure another STIs. In addition, healing with antibiotics has certain rules and certain doses to kill bacteria so that it cannot be used carelessly.²

e. Reinforcing Factors

1) Family Role

The results of in-depth interviews obtained information that parents of informants did not know to be FSWS. Even though his parents did not know the work of the informant, one of the family members knew that the informant worked as an FSWs, her sister. And in the role of the family to provide support for prevention of STIs, information was obtained that family members who knew did not give advice in preventing STIs because they were worried that they could offend informants.

2) Role of Friends

According to the results of in-depth interviews, the informants acknowledged that there were differences in support in friendship groups while working as FSWs in Jakarta and in Puncak, Cisarua. Because the age of FSWs in Jakarta is mature and has better knowledge, so can be more participating in providing support to prevent STIs. While the group of fellow FSWs friends in Cisarua was due to their young age and their distant age difference, their knowledge was lacking about STIs, the informants who were the one always told them about the prevention of STIs using a condom as protective equipment.

In this case, the closeness with friends who have the same level of age maturity provides more information needed. As it was stated by Santrock ¹²that conformity arises when individuals imitate the attitudes or behavior of others because of the real and imagined pressure by them. And peers are individuals who are level and maturity and their age is more or less the same and their peers provide information about the world outside their families.

3) The role of Pimp

In this case, the informant explained that the pimp or familiarly called "mamih" had a close enough role to her to carry out activities as an FSWs. The informant claimed that this "mamih" role was only when working in Jakarta because the informant was tied to the agency, "mamih" as she always called to support in preventing STIs by reminding her not to forget to use condom protective equipment and cooperate with other parties such as hotels and health services. And according to key informants, pimps in the Cisarua area have a role in the life of FSWs. Pimp intermediaries FSWs with another party who provide information about customers. And cooperate with a group of security if there were FSWs who have problems with their customers. This is in

line with Budiono's research ¹¹, according to him, there are benefits from pimps who are economically able to increase income because FSWswere always in good health.

5. CONCLUSION AND RECOMMENDANTION

From this qualitative study, information was found on FSWs who carried outsexual transactions and preventive behaviors of STIs in FSWs in the Puncak area, CisaruaBogor.

The prevention of STIs in the majority of FSWs by using condom protective equipment and other efforts such as the use of antibiotics, drinking jamu, boiling betel leaves, cleaning themselves after having sex using antiseptics.

Informants in this study, have good knowledge about STIs at the level in explaining the types of STDs, symptoms, and transmission. Thus, informants were more concerned with efforts to prevent STIs.

The role of health workers as a part to provide health services to the community, especially those FSWs, in terms of education regarding STIs to the FSWs not evenly distributed.

The role of the family in providing support for the prevention of STIs, it is very lacking because of the family's ignorance of family members becoming an FSWs.

In terms of friendship groups, friends have a great influence, especially in information about STIs. It's just that peers or friends who have an age level are not much different in all aspects of information and especially the role in preventing STIs.

The pimp side has a very important role in the life of an FSW. Every form of pimp attention both in terms of appearance, finance, health and so on is the responsibility of the pimp. Because financial turnover is a goal that needs to be realized. So that pimps demand health from sex workers by providing health services such as medical examinations by doctors. However, the health services that pimps provide are only around the Jakarta Capital City area under the supervision of the FSWs agency. Unlike the pimps in the Puncak area, Cisarua, Bogor who have not facilitated health services for the FSWs because the work of the FSWs is freelance and unbound under the FSWs agency.

It is recommended that the Health Promotion Center, Bogor District Health Office be able to convey STI information more intensely by having strategies and promotional media that can be interesting and understood by the FSWs. And or can work with hotels, villas and other strategic places to provide information and education about STIs.

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