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Spiritual Dimensions in Counseling Services For Hiv/Aids Patient

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Abstract

HIV / AIDS patients need biopsychosociospiritual therapy, it means that patients are not only seen in terms of organobiological, psychological, social but also spiritual aspects. Spiritual therapy is needed for patients in dealing with the complexity of the problems caused by HIV / AIDS, therefore VCT counselor (Voluntary Counseling Test) in the PLWHA referral hospital (People Living with HIV / AIDS) must meet the spiritual aspects of HIV / AIDS patients (clients). This research was a qualitative research with a psychological approach to describe the spiritual dimension in the practice of counseling for HIV / AIDS patients in the VCT clinic of PLWHA referral hospitals in Semarang (RSI Sultan Agung and Panti Wilasa Citarum Hospital). The two "religious" hospitals are unique because VCT counselors come from patients' spiritual guides. The results showed that the spiritual dimension in counseling practice for HIV/AIDS patients could be achieved by implementing religious counseling objectives. The Counselor VCT Panti Wilasa hospital applies Pastoral counseling objectives such as sustaining, improving the relationship or reconciling, repentance, and growth of faith. Meanwhile, VCT RSI Counsellor applies Islamic counseling objectives such as understanding of Allah SWT, improving faith and worship, and improving morality.

Keywords: Spiritual Dimensions, Counseling, HIV / AIDS Patients.

Introduction

HIV/AIDS is a medical illness that requires an approach of bio-psycho-socio-spiritual, and not only in clinical terms. AIDS sufferers will experience an affective crisis on him, on his family, in the person he loves and in society. The crisis is in the form of panic, fear, anxiety, uncertainty, despair, and stigma. The treatment of AIDS sufferers is often descriptive, and the risk of suicide in patients is high. In fact, they often ask for the actions of euthanasia (Hawari, 2000: 94). Balaji (2015: 70) reveals that HIV/AIDS patients have 3 main problems, namely psychological, behavioral, and medical.

Psychological problems about PLWHA (People Living with HIV/AIDS) faces death, impatience facing chronic pain, lifelong stress, depression, no confidence, lack or inability to receive emotional support, and a bad coping. The problems of the behaviour faced by ODHA include respiratory changes, dehydration, appetite and unhealthy sleep patterns. While the medical problem of PLWHA is the occurrence of infection, limitation of accessing health care services when sick, the delay in understanding health problems related to the pain, and the low communication pattern with health care providers (Balaji, 2015: 71). Regina, et al. (2015: 108) adding HIV/AIDS patients must face condemnation, discrimination and stigmatization of the family and society, even not impossible to be treated like an outcast instead of the infectious source.

Various problems can cause HIV/AIDS patients stressed even depression. Shanthi, et al. (2007: 15) mentions both male and female HIV positive experiencing depression. Stress and depression faced by HIV/AIDS patients can cause worsening immunity condition of HIV/AIDS patients (Sofro and Sujatmoko, 2015: 100-101). Such conditions require that HIV/AIDS patients get not only medical aspects through ARV therapy but also psychosocial aspects. To meet these needs, referral hospital of PLWHA has facilitated health services by counseling through the clinic VCT (Voluntary and Counseling Test) (Hidayanti and Syukur, 2018: 4). VCT is a two-way coaching or dialogue that goes unbroken between counselors and its clients to prevent the transmission of HIV, providing moral support, information, and other support to the PLWHA, the family and its environment (Nursalam and Kurniawati, 2008: 11-14).

It can use counseling at VCT Clinic and a means to help patients to find an effective strategy to face the illness (Hidayanti and Syukur, 2018: 4). A spirituality

approach becomes one alternative that can be applied in counseling to HIV/AIDS patients. Given many studies have shown the importance of spirituality in the lives of HIV/AIDS patients such as enhancing immunity (Kremer et al., 2015: 71-79), rediscovering the meaning of life and improving the survival skills (Wyngaard, 2013: 226-240), and appreciating the life of post-diagnosis of HIV (Irsanty, 2010: 69-70). Thus evidence becomes increasingly important that it applies a spiritual approach in counseling for patients with HIV/AIDS.

The spiritual approach does not mean changing the beliefs of each patient but increasing their spiritual strength to face the illness (Ahamd, 2004: 4-5). This approach makes the patient receive complete reality and be able to pass the last phases of his life peacefully and calmly, making him feel back to God, like any other man where no one can prevent death. The significance of the spiritual dimension in handling HIV/AIDS patients should be the concern of counselors who carry out their role in providing psycho-socio-spiritual therapy through counseling services at various VCT (Voluntary Counselling Test) clinics (Naing, et al. 2004: 3).

The spiritual approach in healthcare gains attention from "religious" hospitals, such as the Sultan Agung Islamic Hospital (accredited Shariah Plenary from MUI Central in 2017) and the hospital Panti Wilasa Citarum (under Yakum Kristen Foundation). The hospital gives attention to fulfill the spiritual needs of both hospitalized patients (Hidayanti, 2014: 225), and special patients such as HIV/AIDS. Both are the PLWHA referral hospitals in Semarang with the same uniqueness that the VCT counselors come from the background of the patient's spiritual mentor. The RSI Sultan Agung has one counselor from the Islamic spiritual adviser (Hidayanti, dkk, 2015: 90), while Panti Wilasa hospital has counselors from the pastoral care officers (Hidayanti, 2012: 70). There are also counselors come from doctors and nurses background. In fact, counselors who have a background as the spiritual adviser/pastoral care are the ones who have more opportunities to face HIV/AIDS patients in the field.

Looking at the background, the two hospitals have the same commitment in providing counseling services at VCT clinics by sticking to their religious teachings. In line with the case, this article seeks to describe and further examine how the spiritual dimensions are implemented in counseling services for HIV/AIDS patients in the VCT Clinic of PLWHA Referral Hospital in Semarang focused on the Sultan Agung Islamic Hospital and Panti Wilasa Hospital.

Method

This research was a qualitative study to examine holistically the natural condition of objects, and to see the relationships between variables in interactively researched objects (Sugiyono, 2014: 7). Referring to this sense the study tried to research on counseling services for HIV/AIDS patients in the PLWHAreferral hospital, with the focus is the spiritual dimension in the counseling service. This qualitative study used a case study strategy to investigate a program, event, activity, or group of individuals (Creswell, 2014: 20). This research investigated the activities of HIV/AIDS counseling Services in the PLWHAreferral hospital in Semarang (RSI Sultan Agung and hospital Panti Wilasa Citarum).

The research data was obtained through first interview and in dept interview of HIV/AIDS patients and counselors at VCT Clinic; second, documentation such as counseling services in both hospitals, and previous studies conducted by researchers in these two hospitals since the year 2012-2018. Data analysis techniques followed the analysis model of Miles and Huberman in Sugiyono (2014: 91), which was divided into several phases: 1). data reduction; collects as much data on spiritual dimensions in HIV/AIDS counseling in both hospitals either through live interviews and documentation studies; 2). data display: The presentation of data on the spiritual dimension in HIV/AIDS counseling in the RSI Sultan Agung and Panti Wilasa Citarum Hospital; 3). drawing conclusion or verification; the withdrawal of conclusions and verifications to answer research problem of spiritual dimension in HIV/AIDS counseling at VCT referral hospital clinic in Jakarta.

Theorecal Framework

Spiritual Dimensions in Counseling

Religion and spiritual are inseparable effort to achieve a mental health e through psychotherapy, psychological, and counseling services. The nuances of religious integration and counseling are increasingly felt after being introduced the concept of "wellness". Myers, J. E., & Sweeney, T. J. (2004: 234-245) explains that "wellness" according to experts is a new paradigm in health care, a fundamental approach in mental health care and also as a paradigm in counseling.

While Jeffry L. Moe, et al. (2012: 1) referred to it as "holistic wellness": A holistic health that is continuously sought as best practice by counselors and other mental health practitioners.

The term definition is a way of life oriented to the optimization of health and well-being that is the embodiment of the integration between body, mind, and spirit in a person (Chyntia, et al., 1992: 168). Surya (2003: 182) explains that "wellness" is a term used to describe a state of "healthy" more comprehensively that healthy condition is not only physical or mental, but the overall personality as reflections from the unity of the physical and spiritual elements, and their interactions with the outside world. Further, it is mentioned that wellness is a healthy concept that not only leads to a healthy mental, but a full personality as a reflection of the unity of physical and spiritual elements, and its interactions with the outside world. Referring to the definition of wellness is very similar to the health concept planned by WHO. Both emphasize the physical, psychological, social, and spiritual dynamics of the human being.

According to Chyntia, et al. (1992: 168), wellness is a concept that consists of six dimensions, namely intellectual, emotional, physical, social, occupational (profession/career), and spiritual. Spiritual wellness is a great concern both in health education and counseling. At the start of health education focuses solely on physical wellness, while counseling focuses on emotional wellness, social wellness, and occupational wellness. Now both in the world of health and counseling have developed the spiritual wellness. Chyntia, K, et al. also strengthens the importance of spiritual is the development center of wellness. Spiritual is the key to develop another five dimensions, even affirmed that spiritual dimension is the key to make individual behavioral changes. While Surya (2003: 182-182) mentions wellness consists of five elements, namely spirituality, self-regulation, occupation, friendship and love. Spirituality is the first and central life task of the wellness.

Individuals who require counseling or clients are individuals who experience the lack of "psychological strength" or "psychological power" i.e. a force required to face various challenges in his whole life including resolving any problems he faced (Surya, 2003: 41). Psychological power has three dimensions: need fulfillment, intrapersonal competencies and interpersonal competencies). The task counselor is the three-dimensional psychic power of this, so the client expects to be able to increase the psychological strength. But along with the realization that man is a spiritual or religious creature counseling services not only

meet the needs of psychological strength clients alone, but able to meet the spiritual/religious needs or "wellness" of the client. Surya (2003: 183) explains that "wellness" is a term used to describe a state of "healthy" more comprehensively that healthy condition is not only physical or mental, but the overall personality as Reflections from the unity of the physical and spiritual elements, and their interactions with the outside world. This means that a counselor not only helps generate the psychological power of the client but also the spiritual/spiritual aspects of the client to achieve a plenary health.

Ministry counseling for patients with HIV/AIDS

Counseling becomes one service that can not be separated from a series of services for HIV/AIDS patients provided at the hospital VCT Clinic of PLWHA. Counseling HIV/AIDS is an interview that can be said to be very confidential between the client and service delivery (counselor) that aims to make the person able to adapt to stress and able to decide related to HIV/AIDS (Nursalam and Kurniawati, 2008: 73). VCT is a two-way coaching or dialogue that goes continually between counselors and its clients to prevent the transmission of HIV, providing moral support, information, and other support to the PLWHA, the family and its environment (Nursalam and Kurniawati, 2008: 38).

General objectives of HIV/AIDS counseling are three, namely 1). Provide psychological support e.g. support relating to the welfare of emotions, psychologies, social and spiritual individuals who suffer from HIV or other viruses; 2). Prevention of HIV transmission by providing information on risky behaviors such as safe sex or the use of shared needles and assisting people in developing personal skills for the change of behavior and negotiation of other safe practices; and 3). Ensure the effectiveness of health referrals, therapies, and treatments through the problem-solving of treatment of drugs (Naing et al., 2004: 2).

Another opinion is expressed by JH. Syahlan, et al (1997: 76), HIV/AIDS counseling is required by PLWHA because of a). HIV/AIDS infection lasts a lifetime and PLWHA will face many problems, counseling can provide social and psychological support for them; b). Counseling can help PLWHA identify potential and circumstances and help to make a plan what is best for them; c). Counseling can empower PLWHA so that all psychological distress and fear due to

the illness, misunderstandings and public discrimination; d). Counseling can help PLWHA appreciate various aspects of his life so that the confidence arises and not be stuck to the problem of HIV/AIDS; and e). Counseling can give the spirit of life to the PLWHA so that they remain active and continue daily activities.

So it can be concluded that HIV/AIDS counselling aims to improve the understanding of HIV and its transmission of PLWHA, providing total support (social, psychological, spiritual and economic) so that PLWHA have a normal life and not only focus with their illness and have knowledge to not transmit it to others, and do the treatment.

Spiritual Dimensions in Counseling Services for HIV / AIDS Patients

AIDS is a disease caused by Human Immunodeficiency Virus that attacks the immune system (Adhiputra, 2018: 8). This disease often leads to death for the sufferer. The death rate of fear or shadow of death is one problem faced by HIV/AIDS sufferers along with other complex problems (Hidayanti, 2020: 1). A person suffering from HIV/AIDS disease is experiencing a complex issue of biological for decreased immune function and immune system, psychological problems such as anxiety, fear, inferiority and social isolation, and spiritual problems (beliefs and values) (Nursalam, and Kurniawati, 2008). Spiritual therapy in people with HIV/AIDS has a position as important as medical therapy and psychosocial therapy (Hawari, 2000: 28).

The fulfillment of the spiritual needs turned out to contribute the most important in the life journey of people with HIV/AIDS. It is supported by a variety of research that finds the spiritual pattern of HIV/AIDS patients in three categories i.e. finding the life purpose of stigmatization; an opportunity to discover the meaning of a disease that cannot be healed; and spirituality framing their lives after experiencing suffering (Hall, 1998: 143-153). In addition, spirituality directs the patient to have a better quality of life after being diagnosed, and being a bridge over between despair and courage in life (Fryback, & Reinert, 1999: 12-33). In line with the above research, a domestic research finds out that the spiritual significance of HIV/AIDS patients, among others, is closer to God, appreciating the life of post-diagnosis of HIV, requiring the support of the closest person, have hope for a better life on the next day, and spiritual needs that are not fulfilled (Irsanty, 2010: 69-70).

The results of the above studies have proved that spirituality/religiosity can answer the psychological dynamics faced by people with HIV/AIDS. VCT provides a wide range of counseling services such as counseling to prevent HIV/AIDS, pre-test counseling, post-test counseling, family counseling, ongoing counseling and counseling to those who face death (Adhiputra, 2018: 45; Hidayanti, 2017: 9). Counseling is expected to provide psychological support such as support related to the emotional, psychological, social, and spiritual welfare of a person infected with HIV/AIDS, providing information on risky behaviors, helping clients develop personal skills in the face of disease, and encouraging to conduct medical compliance (Priyanto, 2009: 120). Thus, it is increasingly clear that VCT is trying to provide counseling for people of HIV/AIDS is to provide various psychological and social support of PLWHA and his family so that it can prevent transmission and various problems arise for HIV/AIDS.

While according to Nursalam, et al. (2014: 215), it emphasizes the spiritual aspect on the acceptance of the patient to the pain he suffered, so that HIV patients will be able to receive with sincerity to the pain experienced and able to take wisdom. The spiritual aspect that needs to be grown to HIV/AIDS patients is to strengthen the patient's realistic expectations of healing, clever taking of wisdom, and steadfastness of the heart. The spiritual dimension above is aspects that need to be excavated to awaken the spirituality of people with HIV/AIDS so that it can provide strength amid self-weakness because of illness. The client's spiritual response should be directed at adaptive responses such as the attitude of gratitude, accepting oneself, feeling the grace given by God, and receiving the God Forgiveness (Achir Yani, 2008: 15-17). This spiritual adaptive response provides a positive impact to bring out the effective coping. Various aspects of spirituality are the fulfillment of the need for interaction between people who can become a source of hope and build a relationship with God with rituals and worship that can be a source of strength that contributes a positive psychological birth in one's self. This psychological endurance makes people immune to stress, which means it can suppress the development of the disease (Utley & Wachholtz, 2011: 1).

Stress can affect the development of HIV/AIDS disease to be worse (Sofro and Sujatmoko, 2015: 100-101). Thus it becomes very important to cultivate the psychological and spiritual adaptive response in which both are closely related and support each other to cultivate effective coping for HIV/AIDS patients (Sofro and Hidayanti, 2019: 78). And this is where seen the point of emphasis from

counseling for people with chronic disease is the development of a client's attitudes and resilience in battling the illness, cultivating patience, steadfastness and the tenacity of the client to do their best, to fight the illness that is medically difficult to heal, but his attitude and endurance is stronger than his own illness (Hidayanti, 2017: 98).

Discussion

Counseling for people with HIV/AIDS is a unique counseling because it not only helps clients to prepare themselves with the possibility of HIV positive, but also conducts advanced counseling for the sufferer to adapt to various life changes resulting from illness. Counseling HIV/AIDS is done continuously seeing the weight of problems facing the client. It is understood by the counsellor because the essence of HIV/AIDS has resulted in complex problems for the sufferer and his family. The noticeable problem is a physical change, psychological problems (such as feelings of guilt, and so forth), social problems (such as dissociated/excommunicated by families, dishonor for their families), economic problems (such as loss of work because of declining physical abilities, requiring substantial costs for therapy), and also spiritual or religious problems (such as loss of spirit and meaning of life, feel the Punishment of God).

Recognizing this, the spiritual approach in counseling for HIV/AIDS patients is a major concern for the counselors VCT Panti Wilasa hospital and RSI Sultan Agung Semarang. As a "religion" hospital, the spiritual dimension is highly visible in counseling services for HIV/AIDS patients. Implementing the spiritual dimension in counseling services for HIV/AIDS patients in each hospital refers to the religious teaching that is the second identity. Counselor VCT \ Panti Wilasa hospital emphasizes the spiritual dimension of referring to the teaching of Christianity. The Spiritual dimensions are:

- a. To foster self-acceptance, this is the main capital that HIV/AIDS patients must have to be able to continue his life and have the observance of his lifelong treatment (Hidayanti, 2012: 72-75; Hidayanti et al., 2015: 95-96). Such counseling is an implementation of the purpose of pastoral counseling in the form of sustaining both psychic, moral, and spiritual in order to keep patients with the disease able to endure (Ratnawati & Tiaristhy, 2013: 46).

- b. Accepting the state of guilt, most clients infected with HIV/AIDS because of past behavior such as free tight that violate the moral rules of even religion. This condition of the counselor invites the patient to cultivate the guilt of violating God's rule so that it finally gets a warning. In this context the counselor performs a pastoral counseling function in the form of people in the pastorate meaning to require people to know his faults and to do best in the face of his problem (Ch. Abineno, 2006: 50)
- c. God's forgiveness, counselors help HIV/AIDS patients instill that God is forgiving to all his servants as long as the individual admits and does not repeat the mistake again (Hidayanti et al, 2015: 125). The VCT Counselor applies the purpose of pastoral counseling in the form of resolving sin through Christ, it encourages the client to realize his sin and to do repentance (Tulus, 2006: 39).
- d. The restoration of relationship with God and the closest person, after HIV/AIDS patients have an awareness of their faults and repent, another thing that follows is motivating the patient to be diligent in prayer. Some patients have a haunted experience of excessive anxiety and the fear of death. It is a means that can help the patient create peace and mind again (Hidayanti et al, 2015: 125-126). In addition, some clients transmit their illness to spouse and children. The client is encouraged and invited to improve the relationship with the family by asking them for forgiveness for harmful personal mistakes and making the whole family miserable. Such assistance is given by counselors based on the purpose of improving the relationship (*reconciling*) in pastoral counseling, which is to improve the relationship with God and to others (Ratnawati & Tiaristhy, 2013: 48; Suprana, 2009: 33; Ch. Abineno, 2006: 66).
- e. Forget the past chains and organizing the post-life of HIV/AIDS, the Counsellor invites them to forget the past and move on to a better life . Here counselors help clients make better use of his life, and increase faith and worship to God. This is where the core purpose of pastoral counseling can apply to HIV/AIDS patients which are changes in the conduct of behavior, growth of faith, and involvement in the Congregation's Fellowship (Tulus, 2006: 29-39).

While the spiritual dimension in HIV/AIDS counseling in RSI Sultan Agung Semarang refers to Islamic teachings. The implementation of spiritual dimension in counseling service can be seen from:

- a. Giving understanding of God's destiny. It is very important to be given to the patient so as not to feel constantly guilty, sinful, and have a wish to stay alive. While the understanding of fate becomes important as most HIV/AIDS patients dealt with fear of imminent death (Hidayanti et al., 2015: 107). Counsellor VCT has an obligation to adhere to the guidance of counseling on Islamic studies in the form of providing an understanding of the laws and provisions of Allah SWT, Which must be a definite for everyone of all time (Sutoyo, 2017: 8).
- b. Improving faith and worship is an important thing to be delivered by counselors to HIV/AIDS patients. The counselor also advises HIV/AIDS patients to join the *taklim* (Muslim gathering) or religious organization to find a return for a life (living reproduction) (interview with VCT RSI counselor Sultan Agung). HIV/AIDS patients experience positive changes in religion such as more diligent to pray and other worship (Hidayanti et al, 2016: 123).
- c. Rectify the morality and keep a *sakinah* (comfort) for a family of HIV/AIDS-infected couples. The importance of the participation in counseling in HIV/AIDS patients is not just faith and worship, but also moral. It means that it implants the client a good-behaved consciousness so as not to transmit to the spouse, and keep the family intact even if in the end they have infected one with HIV/AIDS (Hidayanti, et al, 2015: 110; Hidayanti, 2018: 114).

Based on the above exposure, the implementation of the spiritual dimension in counseling services for HIV/AIDS patients in Panti Wilas Hospital includes 5 things, self-acceptance, confessing mistakes, asking for a shipment to God, improving relations with God and family, setting up a post-infected life of HIV/AIDS. While the spiritual dimension in counseling for HIV/AIDS patients is emphasized on the following aspects, increasing the closeness to God, understanding the destiny of God, improving the quality of worship, and the family of *Sakinah*. It can be seen that by referring to each teaching,, the implementation of the spiritual dimension in HIV/AIDS counseling emphasizes on the improvement of relations with God and relations with others.

Such spiritual dimensions direct the patient to have a spiritual adaptive response. This is mentioned by Achir Yani (2008: 15-17), presented with the attitude of gratitude, accepting oneself, feeling the grace given by God, and receiving the God's forgiveness. Admission becomes the main provision of the

patient to be able to continue his life post-infusion HIV/AIDS. Giving an understanding of the fate of Allah SWT as Islam is the way to accept every decree of Allah or called *Qana'ah* (Hidayanti, 2017: 73). The spiritual aspect that needs to be grown to HIV/AIDS patients is to strengthen the patient's realistic expectations of healing, clever taking of wisdom, and steadfastness of the heart. Patient's self-acceptance of the disease is an early stage of inviting the patient to be realistic and build a post-infectious expectation of HIV/AIDS.

The next spiritual dimension is to repentance or pleading for forgiveness to God believing that God is forgiving. This is an aspect that is highly highlighted in counseling services to HIV/AIDS patients. Given that this aspect contributes to the life of HIV/AIDS patients. Ironson Research, et al. (2011: 414-425) found positive belief in God would effect significantly to slow down progression of HIV disease (the increasing number of CD4 and VL controlled better). Instead, those who have a negative belief in God are predicted to speed up illness for up to four years. In this context means that positive belief in God is the belief that God will receive the repentance of the risky behavior that has ever been done.

That experience is proven by RSI counselor Sultan Agung who handles HIV/AIDS patients for risky behaviour. The counselor assessed HIV/AIDS patients who had a background in the army had a self-acceptance of post-positive infected by acknowledging the mistake and the desire to improve. Many of the positive things done by HIV/AIDS patients are increasing their worship and attend regularly on peer support group meeting, even to become finally peers who motivate fellow PLWHA. This post-infected lifestyle, delivering HIV/AIDS patients, to an increasingly healthy (interview with the RSI Sultan Agung VCT Counselor). Instead, a husband who transmitted HIV/AIDS to his wife and child is handled by the counselor of Panti Wilasa hospital who finally died because of the worse conditions. The condition is because the patient is in a relentless feeling of guilt and has not received himself infected with HIV/AIDS (interview with the Panti Wilasa hospital).

Another spiritual dimension worthy of concern is the counselor's effort in helping the patient to improve relations with God through increased faith and

worship. The complex problem faced by HIV/AIDS patients requires life skills to overcome. Religion is one strategy to be effective in addressing HIV/AIDS patient problems. It has been proven Kremer, et al. (2015: 71-79) through research that shows undetection of VL significantly in HIV/AIDS patients with positive spiritual. In HIV/AIDS patients with negative spiritual, the VL can be decreased and there is a decrease in CD4 counts compared to those who have positive spiritual.

Thus the implement of spiritual dimension can essentially provide full support to HIV/AIDS patients in both psychological support such as emotional well-being, and social support (Naing et al., 2004; 2). The spiritual dimension can help to fulfill the spiritual needs of HIV/AIDS patients that provide a healthier physical effect. We can see more healthy conditions in HIV from the increasing CD4 and the non-detection of Viral Load. This spiritual or religious benefit in HIV/AIDS patients is not only a positive change in physical problems but also a psychological problem. Trevino, et al. (2010: 379-389) finds the relationship between the positives of religions (e.g., seeking spiritual support) with Viral Load, CD4 counts, quality of life, symptoms of HIV, depression, self-esteem, social support, and spiritual well-being. The results showed that the religion of HIV/AIDS patients gave significant changes to these variables within a period.

Counseling is expected to provide psychological support such as support related to the emotional, psychological, social, and spiritual welfare of a person infected with HIV/AIDS, providing information on risky behaviors, helping clients develop personal skills in the face of disease, and encouraging to conduct medical compliance (Priyanto, 2009: 120). According to the counselors that the religious approach is done essentially to help the patient reduce various psychological problems such as feelings of guilt, sin, fear of death, and anxiety facing the future. Drawing closer to the God is highly recommended because it can help the patient discover the meaning of his life again and obedience to the treatment (Hidayanti and Syukur, 2018: 4). Through religious teachings, the counselors are easier to mediate to husband and wife who are experiencing family problems due to one of them infected with HIV/AIDS (Hidayanti, et al, 2015: 110), and helped to create a harmonious family avoid divorce (Hidayanti, 2018: 114).

The efforts of the counselor through the emphasis of a spiritual dimension in the counseling service provided significant results. Such counseling not only

meet the needs of clients who have weak psychological power (Surya, 2003: 41), but can bring social support from the family. More importantly, it meets the spiritual support that HIV/AIDS patients expect under the religious teachings he has. The success of helping HIV/AIDS patients by creating their psychological, social, spiritual and even physical wellbeing shows that the spiritual dimension develops the other aspects of the individual. This is in line with Chyntia, et al (1992: 168) Strengthening the importance of spiritual as a key to develop the other five dimensions (intellectual, emotional, physical, social, occupational (profession/career) and make changes in individual behaviour in the concept of spiritual wellness.

The achievement of spiritual needs or wellness means presenting a comprehensive counseling service that touches all aspects of the bio-psycho-social-religious HIV/AIDS patients. Such counseling is aligned with the concept of holistic service proposed by WHO. Thus, the application of spiritual dimension in counseling means able to support the implementation of holistic service in the health world for HIV/AIDS patients. It means that HIV/AIDS patients will get the best medical service and the best mental service. Although it is medically difficult to cure, the mental endurance facing pain should be pursued. If in the end the patient died because of his illness, then the mentality remains a winner because it has ended to the best and reliance on God (Hidayanti, 2013: 111; Hidayanti, 2017: 98).

Conclusion

Spiritual dimension in HIV/AIDS counselling conducted at Panti Wilasa Hospital and RSI Sultan Agung emphasized on the vertical aspect of the improvement of relationship with God and the horizontal aspect in the form of improvement relationship with fellow especially couples and families. These spiritual dimensions can be achieved by using a religious approach in counseling services for HIV/AIDS patients. Religious teachings become central to the spiritual needs of human beings as a social creature, including HIV/AIDS patients. Looking at the needs of HIV/AIDS patients, it has become the obligation of each PLWHA referral hospital to fulfill it through counseling services at VCT clinic. Optimizing the religious approach in counseling services for HIV/AIDS patients along with pharmaceutical therapy (antiretroviral therapy) can realize holistic

service (bio-psycho-socio-religious) so that the life quality of HIV/AIDS patients can increase.

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