BEHAVIOR OF MALE PATIENTS WHO HAVE SEX (MSM) HARMONY POLYCLINIC AT DINOYO DALAM COMMUNITY HEALTH CENTER REDUCE THE RISK OF HIV AIDS TRANSMISSION

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ABSTRACT

This study aims to analyze the behavior of Men who have Sex with Men (MSM) patients at the Harmoni Polyclinic of Dinoyo Community Health Center in reducing the risk of HIV/AIDS transmission. The study employed a qualitative approach with a descriptive case study design. Data were collected through in-depth interviews, participant observation, and documentation involving MSM patients, healthcare workers, peer companions, and related stakeholders. Data analysis was conducted using the Miles, Huberman, and Saldana model, including data condensation, data display, and conclusion drawing and verification. The findings indicate that MSM patients demonstrate a high level of adherence to HIV treatment programs, reflected in regular follow-up visits, timely antiretroviral (ARV) medication intake, and the adoption of safer sexual behaviors. These behaviors are influenced by strong self-motivation, self-efficacy, peer support, family support, and humanistic, stigma-free healthcare services. The role of peer companions is particularly important in providing psychosocial support, monitoring treatment adherence, and facilitating communication between patients and healthcare providers. Furthermore, integrated and patient-centered healthcare services contribute significantly to enhancing patient compliance and reducing HIV transmission risk. The study concludes that successful HIV/AIDS prevention among MSM patients is determined by the synergy between individual factors, social support systems, and adaptive healthcare services. Strengthening community-based support and maintaining inclusive healthcare services are essential strategies for achieving HIV/AIDS transmission control targets.

Keywords: HIV/AIDS, Men who have Sex with Men (MSM), Treatment Adherence, Peer Support, Safer Sexual Behavior, HIV Prevention, Community Health Center.

INTRODUCTION

HIV/AIDS (*Human Immunodeficiency Virus* / *Acquired Immunodeficiency Syndrome*) a disease chronic disease caused by the HIV virus which is a retrovirus that attacks system immunity body . This HIV will cause infection in all organs of the body humans and causes various disease in sufferers , so that HIV/AIDS is one of the diseases that can cause death with distribution increasing disease every year (Chintya *et al* ., 2015).

According to data from WHO (World Health Organization) it was recorded number HIV/AIDS incidents 37.9 million souls in 2018 , while other data show HIV/AIDS sufferers who consume drug or get antiretroviral treatment of HIV/AIDS virus is recorded as many as 23.3 million soul . So from that , the amount population from worldwide 62% of HIV sufferers get it maintenance antiretroviral (WHO, 2018).

In 2005 to 2012 UNICEF (*United Nations International Children's Emergency Fund*) has stated , increasing amount HIV/AIDS deaths among teenager range ages 10-19 years up to 50%, so that show trend worrying . Mortality rate in adolescents due to HIV/AIDS in 2005 reached the figure of 71,000 . Then in 2012 it increased increase until the figure of 110,000 people infected with the deadly virus This . Based on existing data , HIV/AIDS is widespread threaten age teenagers , even though part big

teenagers in the world still many have not know in detail how overcome infected with a very dangerous virus this . Even Some people think that HIV is as incurable disease dangerous . Even though with the right approach and education , this HIV transmission can prevented so that death due to the HIV/AIDS virus can handled (Sugiarto , 2018).

In 2012 , the Indonesian Ministry of Health reported amount highest HIV cases fall to the province of DKI Jakarta as many as 21,755 cases . East Java Province ranks order second that is as many as 11,994 cases which then followed by Papua, West Java and Bali. Meanwhile amount highest AIDS cases located in Papua province with 7,517 cases . DKI Jakarta Province occupies order second , namely with amount case 6299 cases which then followed East Java, West Java, and Bali Provinces .

According to data from the Ministry of Health of the Republic of Indonesia (Kemenkes RI), it was recorded amount HIV/AIDS cases since from 2005 to 2015, there were as many as 184,929 cases were found from report service HIV counseling and testing . Meanwhile, it AIDS cases up to 2015 already reach a total of 68,917 cases . Then the Indonesian Ministry of Health cumulative Until 2015 , it was reported that 28,060 teenagers were infected with HIV . range aged 15-24 years so that show that teenager is vulnerable groups infected with HIV (15.2 percent).

Percentage cumulative HIV cases according to group age is aged 25-49 years reached 73.7%, aged 20-24 years by 15.0%, and age more from 50 years as much as 4.5%. Meanwhile percentage cumulative AIDS cases according to group age is age 20-29 years reached 42.3%, aged 30-39 years as much as 33.1%, aged 40-49 years 11.4 %, aged 15-19 years 4 %, and aged 50-59 years amounted to 3.3% of cases . Based on case above , can concluded that amount The highest number of HIV/AIDS cases in Indonesia is group aged 20-29 years (Chintya *et al* , 2015). In 2019 it was recorded There are 349,883 people living with HIV/AIDS in Indonesia (Ministry of Health of the Republic of Indonesia, 2019).

HIV infections are recorded the most occurs in groups age mature that is aged 25-49 years and 20-24 years . Besides That there is surprising facts among teenager group aged 15-19 years . Number The number of HIV-infected teenagers in Indonesia is increasing increased , with number incident around 3.2-3.8% each year . Until end April 2017, recorded There are 7,329 teenagers infected with HIV and 2,355 people in it suffering from AIDS (Ministry of Health of the Republic of Indonesia, 2017). This Really worrying , considering teenager ages 15-19 years is generation successor nation (Naully & Romlah, 2018).

The spread of this virus among teenager can seen from aspect lack of knowledge about HIV/AIDS among teenagers . So that teenager moment much is missing understand about importance health reproduction and avoidance behavior sex free in prevention HIV/AIDS transmission (Sugiarto , 2018). In 2012 , data recorded that 4.5% of adolescents men and 0.7% teenagers woman aged 15-19 years who have do activity sexual premarital (Ministry of Health, 2015). That teenager have a great sense of curiosity and are easily affected environment surrounding area . Teenagers often do connection sexual or other things only For satisfy desire know they are tall HIV and HBV cases in adolescents ages 15-19 years happen Because Lots working women become Worker Sex Commercial (PSK) at the age of young . Apart from through connection sexual , teenagers can also infected with HIV and HBV through drugs needle injection (Naully & Romlah, 2018).

HIV/AIDS is disease contagious disease that occurs among society that has not found vaccine or effective medicine For HIV/AIDS prevention to moment This . Globally there are 36 million people with HIV throughout the world, in South and Southeast Asia not enough More than 5 million people are living with HIV. Indonesia is one of the countries with the highest number of HIV cases. addition the fastest growing HIV/AIDS cases in Southeast Asia, with estimate improvement number incident more HIV infections from 36%. The HIV/AIDS epidemic in Indonesia is growing the fastest among Asian countries (Marlinda & Azinar , 2017).

Amount case death the impact of HIV/AIDS in Indonesia is estimated reached 5,500 people . Epidemic the especially happening among users drug forbidden through needle injection and partner intimate , people who are involved in activity prostitution and customers they , and the man who did

connection sex with fellow type . Since June 30, 2007 42% of reported AIDS cases transmitted through connection heterosexual and 53% through use drug prohibited (Desmon Katiandago , SST., 2019).

HIV/AIDS in Indonesia is still is problem health public where Indonesia has not yet succeed reverse curve epidemic . Number case new HIV and AIDS infections every the year Still around 50-60 thousand , which is this is amount the highest in Asia and Southeast Asia. Indonesia's commitment at the global level from HIV AIDS prevention is ending AIDS 2030 or often also called as AIDS Getting To Zero 2030 where the strategy used is 95 - 95 – 95 , namely that 95% of people are at risk has undergo test and know their infection status , then 95% of those who are HIV positive has start antiretroviral therapy (ARV) and 95% of people on therapy the has reach condition virus suppression . Monitoring implementation of 95 - 95 - 95 also known as *Cascade of HIV* or *Treatment Cascade.*

For reach the purpose of the treatment cascade especially ASEAN Cities AIDS *Getting To Zero* 2030, then required effort For improving the cascade of HIV Care, things the furthermore be the core of the aid program technical For AIDS Sub-Directorate of the Ministry of Health Based on number ongoing events increased , the Government set a target of 90 % for the achievement of PLHIV in 2024 . matter the has target coverage set inspection prescribed HIV test in document The National Action Plan (RAN) for the Prevention and Control of HIV/AIDS and STIs in Indonesia for 2022-2024 is by 100% in 8 groups SPM targets (Minister of Health Regulation No. 4 of 2019) namely (mothers pregnant women , TB patients , STI patients , FSWs, MSM, transvestites /transgender women, drug users , and residents foster care institution correctional).

The incidence of HIV in East Java is findings Indonesia has the highest HIV rate after Papua and Jakarta. In East Java, Malang City itself become largest HIV discovery second after Surabaya. This HIV discovery like iceberg , where more people are tested for HIV A little compared to those who don't HIV test , because Still many fear and shame For HIV test .

Based on background behind above , the gap various main problem is inequality between height achievements Standard Minimum Service (SPM) in the population general compared backwards with explosion case in one population key . Background show that service HIV and STI tests have been done Enough massive in Malang City, especially in Community Health Centers Dinoyo , however There is a very striking anomaly that 94.9% (129 of 136) of HIV cases were reactive at the Community Health Center Dinoyo originate from MSM group , and 81.6% of total cases be at the age young (15-29 years). The gap lies in reality that although education health in a way general Possible has walking , prevention strategies moment This fail stem transmission specific in MSM ecosystem age young . There are conditions that are not seen related How this LSL group behave , understand risks , and access service before they infected , and conditions This Not yet answered by existing programs .

In a way academic and epidemiological , urgency study This very high / critical status . Malang Raya (City and Regency) contributed more of 60% of cases in East Java, making it epicenter infection . Data shows that group age productive and generation successor (teenager) until mature young people) are the main victims . If the behavior prevention transmission among MSM is not quick mapped and intervened , phenomena this iceberg will trigger explosion more cases big . Considering the government's target is Getting To Zero 2030 with the 95-95-95 strategy, failure in understand behavior MSM patients (who dominate almost 95% of findings cases in health facilities said) will create virus suppression targets and termination chain transmission become impossible achieved in the Community Health Center area Dinoyo .

In terms of relevance , research this is very relevant with reality on the ground . Community Health Center is cutting edge of detection early in primary care . With findings that MSM groups dominate absolute visits and results reactive at the health center said , researching behavior patients on site the is the most appropriate step target . Research This No Again groping population general , but rather direct stab to heart problem that is population key , so that recommendations generated later can direct applied by the management of Harmoni Polyclinic for repair channel maintenance .

From the glasses sociology and behavior health , the MSM group in Indonesia is often under shadow of double stigma , stigma as HIV sufferers and the associated stigma orientation sexual . This is what often happens trigger fear and shame For access test or maintenance routinely , which leads to

behavior sex risky that is not detected . Research This relevant For dig factor *predisposing* (knowledge , attitude), *enabling* (availability) services), and *reinforcing* (support) social / couple) that form behavior they . The fact that they Finally accessing Harmoni Poly shows existence will For treat and prevent , but what they do For prevent transmission to other must dissected more in .

Based on existing problems , urgency, relevance , research This give very strong and irrefutable justification refuted For carry out study said . LSL is not just variables complement , but rather actor main in chain HIV transmission in the Dinoyo area moment this . With Thus , it is seen origin If study This discuss about " Behavior Male Sex Patients (MSM) at Harmoni Polyclinic at the Community Health Center Dinoyo In Lowering Risk Transmission of HIV AIDS"

LITERATURE REVIEW

Behavioral Theory Social

Behavior social is atmosphere each other dependency which is must For ensure existence humans (Rusli Ibrahim, 2001). As proof that man in fulfil need life as self personal No can do it Alone but need help from other people . There are bond each other dependency between one person with another . This means that continuity life man ongoing in atmosphere each other support in togetherness . For That man sued capable Work same , mutual respect , no bother rights of others, tolerant in life socialize .

According to Krech, Crutchfield and Ballachey (1982) in Rusli Ibrahim (2001), behavior social somebody That looks in pattern response between the stated persons with reciprocal relationship between personal behavior social is also identical with reaction somebody towards others (Baron & Byrne, 1991 in Rusli Ibrahim, 2001). Behavior That shown with feelings , actions , attitudes belief , memory , or respect towards others.

Behavioral theory social can give useful insights in understand How client interact in environment social them and how factors social influence behavior they . Implementation theory behavior social this , extra time service can give deep insight about factors what influences compliance or violations , as well as help designing more policy strategies in accordance with reality social clients in extra time service .

Behavior originate from the words "peri" and " laku ". Peri means method do behavior actions and behavior means actions , behavior , ways run . Learn can defined as a process where something organization changed his behavior as consequence experience . Skinner distinguishes behavior into two, namely natural behavior (innate behavior) , namely behavior that is carried since organism born in the form of reflexes and instincts .

HIV/AIDS

HIV is abbreviation from the Human Immunodeficiency Virus, which is a virus that attacks system immunity body man . People who are HIV positive or HIV sufferers . People who have infected with HIV in a number of year First Not yet show symptom whatever , in a way physique visible No different with other people. However , he Already Can transmitting HIV to other people (Kurniawan, 2017)

In a way structural Morphologically , the HIV virus is very small The same case in point with other viruses, the form of the HIV virus consists of on A surrounded cylinder circular fat wrapper widen . and at the center circle there is RNA or Ribonucleic Acid strands . The difference between the HIV virus and other viruses is that HIV can can produce the cell Alone in fluid blood humans , namely in cells blood white cells blood white which is usually can fighting viruses, it's a different matter with the HIV virus, this virus precisely can produce cell Alone For damage cell blood white . before the HIV virus changes become AIDS, as a result decline immunity body then that person is very easy caught various disease infection (Infodatin HIV/AIDS, 2014)

HIV is present especially in fluid body human . potential fluids containing HIV is blood , fluid sperm , vaginal fluids and breast milk. HIV transmission can happen through various method that is

through transfusion blood or product blood that has been polluted with HIV, through needle inject or tool other health that is injected , through razor blade or knife , razor beard in a way alternately , through organ transplantation of HIV sufferers , transmission from Mother to children and through connection sexual transmission through connection sexual can happen during intercourse man with Woman or man with men . risk highest is unprotected vaginal or anal penetration protected from HIV - infected individuals .

AIDS is abbreviation of Acquired Immunodeficiency Syndrome. Deep syndrome Indonesian is syndrome which means gathering symptom disease . Deficiency in Indonesian is deficiency . Immune means immunity body , while acquired means obtained or obtained . In matter this , " obtained " has understanding that AIDS is not disease descendants , but Because He infected with the virus that causes AIDS. With Thus , AIDS can interpreted as a group symptom disease consequence loss / decline system immunity body . AIDS is a terminal phase (end) of HIV infection .

Study Previously

Table 1. Research Previously

No	Name Researcher / Year	Research result
1	Thomas J. Coates, Linda Richter, and Carlos Caceres (2008)	Research result can formulated in a number of points important , namely 1) HIV transmission shows number high success When a number of individual risky own change consistent behavior , 2) Prevention combination need role from Lots party For get maximum results , 3) Prevention science- based indeed effective but No lasting a long time without existence intervention behavior .
2	Gabriel Faimau, Langtone Maunganidze, Roy Tapera, Lynne CK Mosomane, and Samuel Apau (2016)	Study done against 445 students and found , 1) 90% understand spread of HIV, 2) Most of them realize risk transmission sexual , but 13.5% of respondents No request usage condoms , 3) Christians have 4x more number low For do sexuality compared to with non-Christians
3	KB Ajide and FM Balogun (2018)	Study done against 240 students and found 1) Only 34.3% understand HIV- related 2) 95% have desire For do behavior sex risky 3) Good understanding correlated with behavior sex risky low with 32.9% stating active in relate sexual Because know HIV transmission with Good
4	Jomarie V. Baron (2022)	Study done against 378 respondents and obtained level good HIV/AIDS awareness from respondents man and women 's behavior sexual risky also shows very low numbers .
5	Behnam Honarvar , Amir Hossein Jalalpour, Fatemeh Shaygani, Zahra Eghlidos , Soodeh Jahangiri, Yasmin Dehghan, Mohammad Jafat Poreisa, and	Study This is a systematic review so that the data is obtained from 28 articles and found that Iranian youth's knowledge of HIV/AIDS is classified as to in category medium down , understanding in condition risky classified as low , and the relationship extramarital sex reported reach the figure 50% of number of Iranian youth with average usage condom <50%

No	Name Researcher / Year	Research result
	Fatemeh Rafiei (2022)	

RESEARCH METHODS

Approach study This aim For give description about something public or something certain groups of people or description about symptom or connection between two symptoms or more (Artherton and Klemmack, 1982). View qualitative in matter This reality social viewed in a way holistic , complex , dynamic , full meaning and pattern think inductive . The paradigm used in writing This is paradigm reality fact social that views ideas as main discussion in knowledge Sociology . Social Facts is every method act , which has standard and no , that can do coercion from outside to individual related with Behavior patient man sex men (MSM) Harmoni Polyclinic at the community health center Dinoyo in lower risk transmission of HIV AIDS.

The selection of Malang City as object study about behavior patient man sex male poly Harmon8 health center Dinoyo in lower risk HIV AIDS transmission based on regulation Mayor no.188.45/417/35.73.112/2014 concerning Formation Commission AIDS Prevention Health Services have possible reasons become consideration namely Malang City is known as city education and tourism with significant diversity . With existence various type HIV AIDS services in Malang City, research This can give more insight wide about How facility service health in the city of Malang give service to customer.

Data collection techniques in research This use a number of technique data collection , including observation , interviews and documentation . The type of observation chosen is observation deep participatory matter this , researcher involved with activity everyday life of people who are observed or used as research data sources . While conducting observation , researcher follow do what the data source does , and participates feel Like grief . The type of interview chosen is interview not unplanned structured but focused on the subject the issues whose questions nature open as far as Still relevant with topic research . Documentation in study This is documentation as well as study literature especially related with book related readings , regulations and policies with problem research . Documents is complement from use method observation and interviews in study qualitative . Therefore that , it is necessary examined that No all document own credibility high (Sugiyono, 2014: 83).

In Research this data is analyzed use method based on The theory of Miles, Huberman, and Saldana (2014) who analyzed data using three steps : *data condensation* , data *display* , and conclusion drawing and verification . conclusion or verification). In frame ensure data validity in study qualitative , field data must verified with carefully so you can said to be valid. In study qualitative , data validity tests include internal validity tests , external validity tests external , reliability , and objectivity (Sugiyono et al., 2021). In study In this case , internal validity testing was carried out through several processes , namely extension observation , improvement persistence , and triangulation .

Extension observation aim For test credibility of research data . In study this , researcher ensure data reliability with do observation , interview in-depth , and confirmation repeat with source study related . Researchers do observation and analysis to perception officers , the community , patients and the environment of the Harmoni Polyclinic, Dinoyo Health Center . Observation to be continued with interview deep together working informants or own relatedness with service health . In interview said , researchers create the atmosphere is relaxed and open , so informant feel comfortable in various views and experiences . Next , confirm repeat done through communication sustainable with informant

through message , if There is information necessary additions , until the data is obtained consistent and able trusted .

Improvement perseverance means do careful and continuous observation For get valid data. In study this , researcher do observation intensive and sustainable to behavior public in respond Harmoni Polyclinic services at the community health center Dinoyo . Researcher analyze pattern perception patient to behavior risky HIV/AIDS transmission . Observation This covers monitoring change perception or possible motivations happen in term time certain . Through in -depth observation and interviews sustainable , researchers make an effort find accurate and comprehensive data in measure response patient to behavior risky transmission .

In study this , researcher use a number of technique data collection , namely interviews , observations , and documentation . For ensure data validity , researchers do triangulation with check consistency of the data obtained from third technique said . Researchers match data from interview with the data obtained through observation field . If found data discrepancies , researchers analyze difference the as " case negative " for understand possible perspectives different from do checking cross between interviews , observations , and documentation , researchers ensure that the data used in study This true and can trusted .

RESULTS AND DISCUSSION

Behavior Male Patient Male Sex (MSM) Harmoni Community Health Center Polyclinic Dinoyo In Lowering Risk Transmission of HIV AIDS

Regularity and Discipline in Visiting Schedules Repeat

Research result about compliance visit repeat MSM patients with HIV/AIDS at the Harmoni Community Health Center Polyclinic Dinoyo show achievements phenomenal by 100%. This figure represent success intervention health that goes beyond standard general in management disease chronic . In theoretical , compliance absolute This is manifestation from solid integration between support structural (facilities), support social (friends peers), and internal motivation of patients . The phenomenon This in line with draft *Treatment as Prevention* (TasP), where discipline control medical No only functioning For guard health individual , but also as a collective suppress viral load to to level that is not undetectable , so that cut off chain community transmission (Cohen et al., 2013) .

Reviewed from aspect leadership and governance health , the effectiveness of Poli Harmoni is not off from ability management strategic Head Community Health Center in orchestrate source Power financial and operational . Use sourced budget from Help Health Operations (BOK), BPJS, and government funds area ensure continuity of the program awake in the middle challenge logistics reagents and medicines . Leadership transformational at the root level grass This become bone back for availability sustainable services (sustainability), *which* in literature management health public recognized as factor determinant in success of long-term HIV control programs long in urban areas (Bekker et al., 2018) .

Approach clinical carried out by medical personnel medical , in particular doctor , showing shift paradigm from the paternalistic model traditional going to *patient-centered care* . With positioning self as partners discussion than figure judging authority , power medical succeed building a strong therapeutic alliance . This crucial Because MSM groups often face multiple stigmas in facilities health general . When the patient feel appreciated and have understanding deep that compliance is instrument control on his life alone , then motivation intrinsic will formed , which is far away more stable compared to motivation extrinsic solely .

System digital reminder via WhatsApp (H-3 Reminder) managed by nurses is form application practical from Nudge Theory in health community . Intervention simple but this is personal capable overcome obstacle cognitive patient like negligence consequence busyness work . More far , style non-formal and warm communication (“ language friends ”) effective reduce tension psychological which is usually appear moment face to face with formal institutions . This strategy prove that digital

technology , if combined with empathy , able increase retention patient in maintenance in a way significant (Free et al., 2013) .

Presence Friend peers (peer support) provide dimensions intersubjectivity that is not Can replaced by power professional . The role of friends peers in accompany patient start from the registration process until taking drug is form very real instrumental support . Support from fellow member groups that have experience life similar (*lived experience*) proven effective in mitigate self-stigma and improve efficacy self patients . Peers act as bridge social connecting need patient with protocol service community health center (Mbuagbaw et al., 2015) .

Innovation in the flow designed services special For guard privacy is a crucial strategy in respond obstacle sociopsychological MSM group . Elimination queue at the counter general , use code summons without hardener sound , and access room Wait closed is form protection to identity patient . Sensitive room and system design to privacy This minimize risk discrimination social , so that patient feel safe For visit on a regular basis. This is emphasize that quality service health No only determined by aspects medical , but also by architecture service that values dignity man .

Service integration in One room (service One door) which involves doctors , nurses , and pharmacists in a way simultaneous increase efficiency time in a way drastic . Readiness officer pharmacy in prepare package drug before patient come show coordination very mature interdisciplinary . Speed service This become incentive for patients who have limitations time consequence job . In perspective economy health , minimizing opportunity costs (lost time) for patient is the most effective way For ensure compliance visit repeat at the facility health level First .

Education provided by midwives about behavior sexual as form love Darling to partner add dimensions ethics and emotions in treatment . Approach This touch aspect affective patients , so that discipline control medical viewed as not quite enough moral responsibility towards loved ones , not just burden clinical atmosphere friendly and family - like service created by all team medical succeed change perception about health center ; from scary place become room safe space that provides support emotional for patient mental health .

In a way theoretically , the whole the phenomenon at Harmoni Polyclinic confirm theory behavior Snehandu Kar who emphasized that utilization service health is greatly influenced by support information and facilities available . According to Notoatmodjo (2010), giving accurate information by officers health No just a transfer of knowledge , but rather form support socially capable change behavior health community . Synergy between support information , support emotional , and instrumental support in Poly Harmony creates A ecosystem inclusive health , where everyone obstacles — good physique and psychological — mitigated in a way systematic (Notoatmodjo, 2010) .

As Conclusion : 100% compliance success at the Harmoni Community Health Center Polyclinic Dinoyo is results from collaboration multi- stakeholder based on trust and protection privacy . This model can become references for facility other health in handle group population key . Discipline MSM patients here No born in a way spontaneous , but rather constructed through system adaptive management , support militant community , as well as empathy power sincere medical transformation from therapeutic treatment mechanistic become services that are of a nature humanistic is key main in win war fighting HIV/AIDS at the grassroots level community .

In discourse psychology behavior , the evolving Skinnerian paradigm to be a Stimulus- Organism - Response (SOR) model provides framework sharp analytics For dissect Why MSM patients at Harmoni Polyclinic show 100% discipline . Although BF Skinner initially more emphasizes the linear relationship of SR (operant conditioning), evolution theory This confess existence variables between , namely " Organism " (O), which includes cognitive processes , perception , and conditions psychological individual . In case this , regularity visit repeat is not A reflex mechanistic , but rather A behavior planned results from conditioning environment (stimulus) mediated by mature internal processing in oneself patient .

Constructed stimulus (S) in a way massive at Harmoni Polyclinic— starting from the WhatsApp reminder H-3, assistance Friend peers , up to design services that guarantee privacy act as *discriminative*

stimuli . These stimuli No just give information , but give signal that environment the safe and profitable . In behavior , warm and personal WhatsApp messages work as anticipated positive reinforcement . Skinner (1953) argued that behavior followed by pleasant consequences tend will repeated . Here , the external stimulus the trigger expectation will experience positive in the facility health , which is effective eliminate aversive stimuli (fear will stigma) which is usually attached to HIV services (Skinner, 2014)

Component Organisms (O) in study This become variables key that bridges environmental stimuli with response compliance . At this stage This , MSM patients do internal mediation involving perception risks and efficacy self - *efficacy* . Awareness that "the virus will sleep " (viral load not detected) if routine control is form internalization information medical become personal beliefs . Organisms here play a role process the stimulus into A motivation intrinsic For maintain life . The role of "O" is crucial Because the LSL group has structure highly sensitive cognitive to threat identity ; so that when organism perceive service as " space safe ", then obstacle psychological will collapse and smooth out road for occurrence expected response (Bandura, 2004) .

The response (R) that appears is 100 % attendance appropriate time , is the operant response that has been conditioned very well . Compliance This No only about compliance to timetable medical , but is form behavior adaptive For lower risk transmission for self alone and couple . In perspective theory behavior social , disciplined response This strengthened in a way sustainable through appreciation officer pharmaceuticals that accelerate services and education touching midwife aspect affective . When the response discipline bear fruit results real in the form of a fixed body fitness and privacy that remains awake , then behavior the locked in A cycle adherence compliance .

Surgery more carry on to aspect social show that discipline This influenced by the Social Reinforcement mechanism . Interaction with Friend peers who participate deliver to community health center give strengthening strong social . Skinner stated that behavior Humans are greatly influenced by the reinforcement provided by groups social . In Harmonious Poly ecosystem , becoming discipline is a valued social norm . Compliant patients get validation social as responsible individual answer . Pressure social positive This ensure that response individual still consistent with expectation group , so that 0% non-compliance rate become logical results in a way sociological (Homans, 1961) .

Argumentation sociopsychological This confirm that For create discipline in the population key , provider service No Can only depend on instructions rigid clinical . Success Community Health Center Dinoyo lies in its ability manage *contingency management* . With manipulate the stimulus (comfort and speed) and strengthen side organisms (literacy and sense of security), they succeed create environment in which the response discipline become choice the most appropriate behavior reasonable and profitable for patient . Phenomenon This prove that engineering behavior social based empathy Far more effective compared to approach coercive or just education one way (Aarons et al., 2011) .

The SOR pattern in MSM patients at the Harmoni Polyclinic is an ideal model of integration management behavior in system health public . Discipline visit repeat that reaches number perfect is manifestation from harmony between stimulation the right environment and mental readiness of the organism that has educated with good . This model show that when the psychological " cost " For obedient reduced until point zero and social " profit " maximized , then behavior complex health even though can achieved in a way collective and sustainable .

In accordance with theory compliance owned by (Durkheim, 1990) compliance patient in do visit repeat is form real from fact social . Discipline visit repeat here No Again just personal choice , but rather Already become kind of awareness more collective force individual For obey for the sake of a group . Durkheim emphasized that in public with solidarity organic , every part own function specific . At Harmoni Polyclinic, patients , companions peers , and energy medical form One ecosystem where compliance individual considered as moral contribution to stability health the LSL community in general overall .

More in again , the interactions that occur at the Harmoni Polyclinic create what Durkheim called *Collective Effervescence* . Presence Friend peers who accompany from registration until pharmacy No just help technical , but rather social rituals that strengthen bond inner . This is prevent patient fall to

in condition No normative post diagnosed with HIV. When the patient feel become part from something more big from himself alone , then compliance medical changed become A devotion social (Latkin et al., 2011) .

Decision theory as put forward by George R. Terry understand decision as choices made between a number of available alternatives , which are based on rational processes in the form of identification problem , collection information , evaluation alternatives , and selection action best . 100% compliance of MSM patients with timetable visit repeat can understood as results from the retrieval process a mature and conscious decision . When patient H stated " I want to live long... if I drink regularly medicine and control , the virus Can pressed until No infectious to other people," he said. indeed currently demonstrate logic rational from the retrieval process decision : he identify problem (HIV positive status), collect information (education from officer health), evaluate alternatives (compliant vs. non-compliant) obey), and choose action best (discipline visiting). Rationality This is rationality that takes into account consequence term long for self yourself and others.

One of findings key in study This is How information become determinant main process of taking decision patients . Notoatmodjo (2012) emphasized that behavior utilization service health influenced by the existence of whether or not information about health or facility health that can obtained public from officer health . Statement This parallel with Terry's framework that places information as foundation for the right decision . At Poli Harmoni, information flow through various route : from doctor who positions self as partners discussion , from the nurse who sent message personal reminders via WhatsApp, from midwives discussing behavior sexual , up to from pharmacist explaining function drug as a " shield ." Quality information This provide map adequate cognitive for patient For make right and sustainable decisions .

decision theory also emphasizes importance available alternatives and calculated consequences . MSM patients at Harmoni Polyclinic do not only face alternative between come or No come , they also consider complex consequences like risk resistance medicine , possibly transmit the virus to couple , decline quality live , until threat death . Statement pharmacist AE is very relevant here : " once just separated schedule , the risks No only to self alone , but to community they too." Awareness will consequence double This Good personally and in community can strengthen quality decision taken . In Terry's skeleton , when a taker decision own complete and capable information projecting consequence from every alternatives , resulting decisions tend more stronger and more consistent executed .

The process of taking the decision at Harmoni Polyclinic is not stop at the individual level, but rather reinforced by structure intentionally facilitative Built by the Community Health Center . The "H-3 Reminder" system via WhatsApp provides flexibility . scheduling repeat , path service special guard privacy , and speed service pharmacy is elements that reduce obstacle in implementation decision . In other words, the patient No only decide For compliant , but also facilitated For realize decision Terry's theory teaches that that good decision can fail in implementation If No supported by adequate conditions ; Poli Harmoni bridges gap between intention and action This with designing a system that minimizes friction between decisions and their implementation . The result is consistency outside the usual reflected in number 100% compliance .

Max Weber distinguishes four ideal type of action social : action instrumental rational (*zweckrational*), action rational value (*wertrational*), action affective and action traditional . All type action This can found in a way simultaneous , creating configuration complex and interrelated motivational strengthening . The most obvious instrumental rational action seen in statement Patient H: " I want to live long... if I drink regularly medicine and control , the virus Can pressed ." Here , the visit repeat is means taken into account in a way aware For reach objective in the form of health and survival life . Weber said type action This as the most rational Because involving calculation between methods and objectives (Weber, 1946) .

Rational action (*wertrational*) values are reflected when patient act No Because calculation profit and loss , but rather Because belief will mark intrinsic from action said , regardless from the result .

Statement patient H that " I No Want to So a burden to others or nularin to partner I " show dimensions ethical from his obedience . He came No solely For guard his health alone , but Because He believe that transmitting the virus to other people is actions that are morally not can accepted . Doctor SP in explicit implant mark this : " if the schedule right , the virus sleeping , there is a risk of Mas transmitting to that other person almost zero." With Thus , the patient internalize mark not quite enough answer social which then become moral imperative that drives action they , regardless from whether visit the comfortable or pleasant .

Weber also emphasized importance meaning subjective that the actor attaches to his actions . In study this , meaning subjective constructs by patients are very central . They No interpret visit repeat as burden or routine boring , but rather as meaningful action personally and socially . Nurse EW said that approach communication done with " language friend ," not "like collecting a debt." Midwife EI emphasized that " discipline visit repeat That form love Darling they to couple ." Construction meaning This change action routine medical care expression from identity , responsibility answer , and affection . When the meaning subjective thus embedded strong , compliance No Again question coercion or compliance passive , but rather become action social activities carried out with full awareness and commitment .

Finally , the Weberian perspective can also used For understand dimensions bureaucratic from the success of Poli Harmoni. Weber saw modern bureaucracy as form the most rational organization . Poli Harmoni shows How principles This adapted in a way contextual , there is planning budget from three sources (BOK, BOKes , BPJS), SOP- based monitoring , evaluation monthly in the mini-workshop forum , and coordination hierarchical from Head Community Health Center until officer field . However, what differentiates Poli Harmoni from classical Weberian bureaucracy is humanization from implementation service That Alone that is personal reminder system , communication with Language friendship , flexibility schedule , and protection strict privacy . Harmony Poly with thus is synthesis from formal rationality of bureaucracy and rationality substantive connection humanity , a configuration that answers weakness bureaucracy that ever existed Weber was worried about .

Compliance Theory explains that this 100% discipline born from quality relationships between giver services and patients . The existence of a digital *reminder* H-3 is not just an alarm, but form support continuous information . Patients feel monitored in meaning positive , namely attention . Support emotional support provided by midwives and counselors make patient feel safe in a way psychological , which is this is condition absolute for compliance term length in patients disease chronic .

Speed service and guarantee privacy also becomes factor determinant . MSM patients are very sensitive against stigma, when system health capable give track special and calling without hardener sound , then obstacle structural lost . In theory compliance , if obstacle minimized and benefits maximized , then level compliance will approach perfect . Poli Harmoni has succeed do elimination to all the usual reasons make lazy patients come return (Carey et al., 2019)

According to Diffusion Theory Schiffman Innovation , services at Poli Harmoni considered as innovation highly compatible service with style life LSL community . Adoption process behavior discipline This accelerated by the role of Opinion Leaders— namely companion peers and long - standing patients . Schiffman stated that message will more effective If delivered by a source who has credibility and similarity background behind social .

There is recognition from frequent SH patients invite his friends For follow as well as is proof real from the diffusion process effective information . Innovation services that are of a nature easy accessed and the results seen real make behavior discipline This spread with quickly in the community . Schiffman saw that success communication marketing social is very dependent on how A mark discipline packed in relevant language with the target audience , and Poli Harmoni has do That with great brilliance (Schiffman et al., 2019) .

Analysis to anomaly spatial at the Harmoni Community Health Center Polyclinic Dinoyo disclose existence deconstruction to determinism geographical in access service health . In general conventional , theory *distance decay* state that utilities service will decrease along with increase distance traveled (Arcury et al., 2005). However , the achievement 100% compliance among respondents , the majority of

whom (80%) live >10 KM indicates emergence phenomenon look for service to maintain privacy . For the MSM group , distance physique is not primary barriers , but rather variables secondary that is defeated by need will security identity . Readiness go through journey Far This is form compensation on risk stigmatization in facilities better health near with domicile they , so that distance geographical transform become distance protective that guarantees anonymity (Sabin et al., 2020).

Effectiveness management of Harmoni Polyclinic in neutralize burden spatial This lies in optimizing time-space compression through service models One door . When the cost journey increase consequence distance , patient do calculation rational to cost time on site goal . Speed service and assurance ARV logistics at the Community Health Center Dinoyo act as incentives that justify journey Far said . Patient look at that journey one hour followed by service efficient for 15 minutes Far more worth compared to on- site service near slow house or risky expose health status they . Trust to reliability stock drug become the foundation that maintains expectation patients , so that obstacle spatial No leading to attrition or failure retention in maintenance (Haldane et al., 2021) .

Interaction sociotechnical via WhatsApp playing role crucial as virtual bridge that reduces perception distance physical . Technology communication No only functioning as reminder schedule , but as instrument For maintaining therapeutic alliances across administrative boundaries . Fluid communication between officers (BA) and patients create feeling close to the heart although far from the eye , which is psychological shorten distance spatial . Presence this digital support mitigate fatigue and inhibitions technical on the way , because patient feel arrival they are highly anticipated by a caring system . This is prove that connectivity mediated emotional technology capable beyond obstacle geographical in management disease chronic in marginalized populations (Mbuagbaw et al., 2013) .

In a way systemic , integration between access acceptance and availability logistics create an inclusive ecosystem where quality interaction man become Power pull centripetal . Past trauma patients in other health facilities due to treatment discriminatory make Poly Harmony a A asylum medical support consistent emotional from all units, starting from nutritionist until pharmacy build loyalty patients who exceed logic convenience access physical . Success This confirm that in service health population key , architecture social that values dignity man own Power more influence strong compared to with proximity geographical center service . With Thus , the Poly Harmony model shows that elimination obstacle sociopsychological is key main For reach coverage true universal healthcare (Bekker et al., 2018) .

The Skinnerian perspective views journey distance Far patient as Operant Behavior which is controlled by consequences environment . Distance >10 KM is *The response cost* is large , but behavior This Keep going repeated (100% compliant) because reinforced by *High-Magnitude Reinforcers* at Poli Harmoni, namely privacy absolute and acceptance social . Skinner emphasized patient willing do journey Far For avoiding aversive stimuli in the form of stigma or possibility meet acquaintances at health facilities closest . In matter This , Poli Harmoni was successful create free environment from social punishment , so that behavior visit distance Far strengthened in a way positive by a sense of security and empowerment in a way negative by the loss anxiety will discrimination (Rasmussen et al., 2023) .

Durkheim will analyze phenomenon This as manifestation from integration social that transcends spatial boundaries . 100% compliance in the midst of long distance show existence solidarity where patients feel tied to the system health Because need functional and moral. Travel Far the No just mobility physical , towards validating institution dignity they . Social facts in the form of norms of compliance for the sake of the community that are echoed by the companion peers defeat constraint individual related distance . Durkheim argued that strength collective capable force individual For ignore burden physical for running role social as responsible survivor answer (Alexander, 1990)

In Terry's POAC framework , compliance patient distance Far is results from Organizing and Actuating efficiency that minimizes friction in service . Pickup decision by the patient For go through distance > 10 KM is based on accurate information about certainty stock drug (AE) and flow fast . Terry emphasized that decision individuals are heavily influenced by the most profitable alternative . Patients

choose Harmoni Polytechnic because calculation proper management : sacrifice time journey compensated by speed service One door . Structure solid organization in the health center give certainty outcome certainty , which is variables key in taking decision strategic by patients For still obedient .

Weber saw phenomenon This as victory *zweckrational* (rationality) goal) above limitations geographical . Patient do action rational with choose distant health facilities However ensure privacy in order to achieve objective term length : health and anonymity . Happened change social where authority traditional or charismatic switch become humanist legal- rational authority . Harmonious Politics deproximates bureaucracy that usually rigid become inclusive services . Weber will mention journey distance Far This as form asceticism rational , where individuals in a way aware bear suffering physical (distance and traffic jams) for the sake of higher values high , namely dignity and safety life in modern systems (Swedberg & Agevall, 2005) .

Compliance Theory confirm that factor *Patient-Provider Relations* hip capable eliminate obstacle access physical . Although distance travel in a way statistics often become predictor non-compliance , in Poly Harmoni variable This neutralized by quality interaction . 100% compliance was born Because officer medical (YD, BA, SP) capable create strong relationship so that patient feel own moral contract for present . This theory state that If patient feel get benefit great emotional and clinical sensitivity they to cost access (such as petrol and distance) will decrease drastic . Loyalty This is product from system responsive service to need specific marginal population

According to Schiffman, Poli Harmoni has succeed diffuse a safe space that has very high profits compared to health facilities conventional . Diffusion This happen in a way effective through channel interpersonal communication (LSM community) and digital (WhatsApp). Schiffman emphasized that adoption innovation No limited by space geographical If compatibility value high . Because the service this is very appropriate with need LSL privacy , news about the quality spread wide to outside the area (up to >10 KM). Patients who travel distance Far is group *early adopters* who prove that quality innovation service capable creating a loyal medical market beyond the boundaries of the health center area (Schiffman et al., 2019) .

Compliance and Punctuality In Taking ARV drugs

Research result about compliance antiretroviral (ARV) therapy for MSM patients at the Harmoni Community Health Center Polyclinic Dinoyo represent A phenomenon success intervention health community based on strengthening ecosystem sociopsychological . Achievements 100% compliance in consumption dose No just number statistics , but rather manifestation from efficacy self that has internalized in a way deep through education transformative .

Success This confirm that emphasis viral load depends largely on how patient perceive treatment No as burden clinical , but rather as instrument control on body and sustainability life (Achappa et al., 2013) . Synergy between power medical (doctors , nurses , analysts , pharmacists and health workers) others) and partners community (Mahameru NGO) created environment capable supporters reduce obstacle structural for patient .

Although compliance dose reach number perfect , disparity small on accuracy time by 3.4% giving signal crucial clinical related risk resistance medicine . In sociopsychological , inaccuracy time This often rooted in relationships between need medical and pressure sociocultural , such as the stigma that surrounds moment patient must consume medicine in the room public or social events . Obstacles physique in the form of effect side beginning like nausea and dizziness also become variables testing moderation consistency behavior treatment . Therefore that , approach patient *centered care* and support more psychosocial intensive become imperative For bridge gap obedience to minorities patient to ensure the target in HIV/AIDS prevention can achieved in a way absolute (Liu et al., 2016) .

Utilization technology simple in the form of a mobile phone alarm that transforms become habits and are adaptation strategies highly effective behavior in manage routine treatment chronic . Use metaphor like fortress defense by force medical show ability communication capable health touch aspect affective and cognitive patient in a way simultaneous . Knowledge based on understanding deep will mechanism Work drug create greater compliance organic and sustainable compared to with just

instructions rigid medical . This is in line with premise that behavior sustainable health born from integration between accurate knowledge and strong internal motivation For guard quality life .

System coordination team at Poli Harmoni which involves method *pill count* as instrument control technical , which is combined with approach from heart to heart by nurses , creating A humanistic check and balance mechanism . The role of the Mahameru NGO as agent companion peers become catalyst in reduce stigma and increase sense of security for MSM patients . Through approach educational , religious, and psychological , companion peers capable transform perception patient from object treatment become empowered subjects . Inclusive service integration This prove that success HIV therapy requires more from just availability pharmacology , he need architecture social guarantees dignity and comfort patient in every stages maintenance (Haldane et al., 2019) .

Skinner's perspective views 100% compliance of MSM patients at Harmoni Polyclinic as results from conditioning organized operands in a way systematic . Use of cell phone alarms and reminders from nurse act as a discriminative stimulus (S) that triggers response (R) in the form of behavior drinking drug appropriate time . This stimulus No stand alone , but rather reinforced by consequences positive feelings patients , such as condition physical condition fit and results laboratory that shows decrease in viral load. Skinner argues that behavior followed by reinforcement positive tend will repeated in a way consistent until become habit or ritual (Skinner, 2014) (Rasmussen et al., 2023) .

Strengthening negative also works in mechanism this , where the patient discipline drink drug For avoid consequences that are not fun , like fear will virus mutation or worsening condition health . In addition , personal attention from nurse via WhatsApp which is routine however attention act as strengthening social . Patients feel own moral obligation to respond attention the with compliance , so that created bond behavior between giver services and recipients benefits based on appreciation and support emotional .

Obstacle in the form of effect side effects and social stigma in Skinner's view is form punishment that can be weaken response compliance . However , Poli Harmoni succeeded mitigate matter This through behavioral shaping strategies , where patients taught techniques practical like use receptacle drugs that are not striking For avoiding stigma. By reduce impact negative from punishment social and maximize strengthening positive through mentoring peers , the Harmoni Poly environment is successful lock behavior compliance at the maximum level .

In a way collective , order This show existence effective *contingency* management . Success therapy No Again just luck medical , but rather results from engineering supportive environment . When the system service capable provide the right stimulus and give consistent reinforcement , patients will adopt expected behavior in a way lasting . This is prove that change behavior health can achieved in a way systemic through adaptive and humane stimulus - response management

Drinking ritual drug every 9 pm as stated informant can analyzed as a sacred ritual . Durkheim emphasized that the ritual works For strengthen bond social and nurturing values group . Through the sounding alarm simultaneously in various places , individuals This in a way symbolic connected in One the same struggle . Poly Harmony acts as room sacred where identity patient validated and appreciated , so that regular visits become A ceremony social media that confirms their status as responsible individual responsible and empowered .

The stigma faced patient is form pressure social that can cause anomie , however the role of Mahameru NGO and its workforce medical functioning as guard regularity social (social order). They give moral framework and support psychological factors that prevent patient interesting self from system social . With existence education based on religious and psychological values , actions drinking drug experience sacralization ; he No Again just swallow pill chemistry , but rather A action ethical For guard sustainability life community .

Solidarity This the more strong Because existence distribution clear and transparent work in Harmoni Polyclinic services . Patients feel become part from functioning system with good (functionalism), where each officer operate his role in a way maximum . Sense of acceptance love and

appreciation patient to officer medical show existence bond strong social , which according to Durkheim , is prerequisite main for creation compliance to rules collective in A public

Compliance and Discipline In Behavior sexual

The figure of 96.6% of MSM respondents who chose For No do activity sexual risky is phenomenon very interesting sociopsychological . This is No just success clinical in pressing number transmission , but rather A form adaptation identity in the middle pressure double threat the biology of the HIV virus and the social stigma that still exists rigid . Majority decision patient For withhold self or practice sex safe show existence internalization very strong risk . Knowledge they No Again just information cognitive , but rather has become *lived knowledge* , where fear will infection opportunistic and responsible moral responsibility towards partner become a driving force main in every personal decisions (Chesney et al., 2000) .

Approach holistic approach applied at Harmoni Polyclinic, including involvement nutritionist (YD), providing dimensions new in HIV management which is often too focus on aspects pharmacological . Education about material food local For increase immunity No only question fulfillment nutrition , but rather an empowerment strategy patients to have control on condition physique they . When the patient feel own strong body through intake nutrition , efficacy self they in operate ARV therapy and maintenance behavior healthy sexuality will increase linearly . Involvement nutritionist in registration the beginning also breaks down partitions bureaucracy cold medical , creating proximity essential emotional for retention patient in maintenance term long (Haldane et al., 2019) .

Phenomenon convenience access experienced by patient H where he get access drug for two months Because his perseverance show existence system adaptive awards . Policy this is very crucial for patients living outside city or own obstacle mobility work . Here , the Community Health Center Dinoyo succeed shifting service models of a nature *provider- centered* become *patient- centered* . Efficiency through delivery results laboratory via email not just question technology , but rather form respect to time and privacy patient . This is prove that obstacle structural such as working hours can mitigated with simple digital innovation that is oriented towards convenience access .

Involvement Friend peers (DB) and Mahameru NGO complete architecture social at Harmoni Polyclinic. Companion peers act as bridge that is capable translate term medical to in Language more community empathetic and not judgmental . Encouragement For avoid activity sexual risky information conveyed by friends peers often more heard Because existence similarities experience live . Meanwhile that , Mahameru NGO play a role in do strengthening motivation through approach psychological and spiritual. Synergy This effective in reduce *self-stigma* , so that patient feel empowered For negotiate use safety or choice For No active in a way sexual to his partner (Latkin et al., 2011) .

Behavior sexual safe for MSM patients at the Harmoni Polyclinic is results from a very effective avoidance conditioning mechanism . HIV diagnosis acts as a strong aversive stimulus . Response patient in the form of behavior sex No risky strengthened in a way negative (*negative reinforcement*) because behavior the capable remove or reduce anxiety will worsening condition physique or death . Skinner emphasized that environment hold control full on behavior ; in matter this , system friendly service and availability condom as well as lubricant act as facilitating stimuli that smooth things out occurrence response behavior safe (Skinner, 2014) .

In addition , strengthening positive (*positive reinforcement*) is given in a way consistent by the team medical . Praise from the doctor (SP) for decreased viral load results and attitude friendly nurse (BA) at the moment patient Honest about activity sexuality is form reward strengthening social behavior discipline . Patient feel that honesty valued than punished . This is create circle reinforcement where the patient feel comfortable For Keep going consult , which in turn guard behavior sexual they still in corridor security medical (Noar & Zimmerman, 2005) .

In Durkheim's perspective , compliance behavior sexuality in this MSM group reflect working solidarity organic . Durkheim argued that in modern society , cohesion social created Because

existence each other dependence between individuals . MSM patients at Harmoni Polyclinic are aware that behavior they impact on health community in a way whole . Awareness collective For No transmitting the virus to other people is form fact social in nature integrative . Behavior sex safe become a new binding moral norm member group the (Durkheim, 1990) .

Harmoni Polis takes action as institutions that prevent the occurrence of anomie (condition without norms). With existence structured education and assistance from Mahameru NGO , patients given guidelines life new in the middle situation crisis health . Routine visit rituals and taking drug become the moment where values collective the strengthened . Solidarity This appear Because existence distribution clear role : power health as provider service clinical and patient as responsible subject answer implementing health norms for sustainability life group (Alexander, 1990)

Implementation management at Poli Harmoni reflects Terry 's POAC (Planning, Organizing, Actuating, Controlling) principles precision . Retrieval decision by the doctor (SP) to give leniency taking drug for disciplined patients is Actuating form based on evaluation performance individual . This decision taken For optimize source Power community health center at a time increase satisfaction patient . Terry emphasized that good decision must consider factor humans and the environment in a way balanced (Terry, 1958) .

Controlling function is executed through regular monitoring Good in a way clinical and behavior . Laboratory analysts who submit results via email shows existence decision managerial For speed up channel information . Patient Alone do taking decision daily based risk -based decision making. When patient H decides For Honest about activity sexuality to nurse , he Actually currently do evaluation towards " space safe " provided by the health center . The decision to obedient is results end from system capable management convincing patient that instructions medical is choice best for the future they (Haldane et al., 2019) .

Weber will see behavior MSM patients at Harmoni Polyclinic as form rationalization action . Happened shift from action affective (based on feelings / urges sexual moment) towards action instrumental rational (Zweckrational). Patient in a way aware pressing encouragement sexuality Because own objective clear end : health term length and prevention infection opportunistic . Weber said This as a process of disenchantment, in which the rational medical world shift old behaviors that are considered No efficient for continuity life (Weber, 1946) .

In addition , the authorities working at Poli Harmoni are not Again rigid legal – formal authority , but rather authorities that have experience humanization . Weber emphasized importance efficient bureaucracy , but here bureaucracy the more humane . Use Language local by Nutritionists (YD) for explain intake nutrition is effort For get closer system rational community health center with the patient's life world (*lebenswelt*) . Changes social in LSL community occurs Because system medical capable offer framework think rational input reason and give benefit real for dignity they (Swedberg & Agevall, 2005) .

Compliance theory emphasize that behavior Healthy is results from interaction between knowledge , motivation , and support system . Research results This confirm that knowledge provided in a way communicative increase level compliance in a way significant . However , compliance here No just *compliance* passive), but rather Already leading to *adherence* (involvement) active). Patient feel own not quite enough moral responsibility for obedient No Because Afraid punished , but Because feel appreciated by officers medical (Sonnentag & Frese, 2005) .

There are 3.4% of respondents who still active in a way sexual although use safety show that compliance nature dynamic . Compliance theory confess existence variables obstacle such as stigma and needs emotional . The support provided BA nurses through creation room safety is crucial For keep patients active in a way sexual still is at in track *safe sex* . Compliance term long only can maintained If system service capable accommodate honesty patients and provide solution practical on challenge daily that they face it (Whiteley et al., 2021) .

Schiffman emphasized that adoption A behavior new (innovation) is highly dependent on channels communication and the role of opinion leaders. In the Dinoyo LSL community , the practice

sex safe and the use of ARVs is innovation propagated behavior through strong interpersonal channels . Mahameru NGO and friends peers (DB) act as *opinion leaders* who have credibility high . They succeed convincing community that innovation behavior This own relative advantage , namely life more healthy and long lasting and high compatibility with need privacy they (Schiffman et al., 2019) .

Innovation service like email consultation and flexibility timetable taking drug own level easy triability carried out by patients . Success rate of 96.6% of respondents in adopt behavior sexual safe show that innovation This has reach stage saturation adoption in system social Schiffman also highlighted importance reduce complexity in innovation . With simplify channel services and use easy language understood , Poli Harmoni has lower obstacle adoption innovation behavior health among MSM group (Rodger et al., 2019) . From the results research and discussion that has been described , then obtained findings as following :

Finding 1: MSM patients have strong internal drive For monitor physical status below supervision doctor as well as committed achieve clinical targets for *viral load* status they become No detected for an optimal future

Finding 2: Taking role real in accompany patient in a way psychological and physical directly in the field , starting from registration process flow beginning until taking logistics medicine at the health center .

Finding 3: Companion Peers play a role active manage and remind regular visits for patient his/her mentor . Companion act as supervisor external which is consistent remind timetable control periodically patient .

Finding 4: Shifting paradigm to direction *patient-centered care* with positioning self as partners non- judgmental discussions and creating a sense of comfort and ease access , completeness facility operational , as well as environment clinical that provides a sense of security

Finding 5: MSM patients have mature understanding where compliance drink drug in a way collective pressing *viral load* until No detected and manifested compliance daily in a way discipline tall with set a cell phone alarm personal For anticipate negligence get treatment , so that drug can consumed in a way strictly at the same time every Evening .

Finding 6 : Peers optimize supervision social periodically For each other remind in consume drug in a way appropriate time .

Finding 7: Companions Peers do intensive routine communication that acts as reminder daily to maintain rhythm treatment patients so as not to experience delay consumption drug .

Finding 8: In general proactive give education clinical and counseling in a way periodically to construct understanding patient that compliance drug is instrument control on his life alone , at the same time mitigate factor negligence psychological and guarantee availability drug

Finding 9: Some MSM patients choose do transformation behavior in total post exposed become inactive in a way sexual Because strong internal motivation For prevent transmission of the virus to partner new as well as focus on evaluation physique together doctor

Finding 10: Companions Peers identify that majority patient is in phase age productive with activity sexual potential height trigger risk transmission back . Companion play a role monitor as well as give understanding post-behavioral risk for patients still cooperative do *follow-up* medical .

Finding 11: Giving education behavior sexual safe with touch aspect affective , moral, and emotional patient ; construct understanding that discipline sex safe is form not quite enough moral responsibility and love Darling towards loved ones , not burden clinical solely .

Based on findings on so so obtained formulation proposition 1 as following :

Proposition 1: Compliance and discipline behavior MSM patients in continuity of therapy program HIV clinical (which combines order and discipline visit repeat , accuracy time drink medicine and discipline behavior sexual safe) is determined optimally by the presence of integration between height internal motivation as well efficacy self MSM patients , strengthening function supervision daily and support psychosocial based community by friends peers and companions , as well as existence transformation system service adaptive , humanistic , and stigma- free health by multi-professionals power health .

Factors That Influence Male Patient Male Sex (MSM) In Reducing the Risk of HIV Transmission

Factors where related with body infected patients including viral load

Findings that 96.6% of respondents achieve suppressed viral load status show success very high clinical risk in MSM patients with HIV/AIDS at the Harmoni Polyclinic , Dinoyo Health Center . From the service , numbers This indicates powerful combination between ART compliance , regularity control and quality mentoring clinically . In epidemiological , viral suppression in proportion as big as This in harmony with program targets that emphasize that viral load that is not detected in a way effective lower risk transmission and repair external term long .

Correlation descriptive shown between behavior preventive and achievement consistent viral load suppression with Health Belief Model (HBM) framework . In the HBM, individuals who perceive high HIV susceptibility and severity , while see benefit ART compliance and sex safe exceed obstacles , will more Possible behave preventive . Signal For act from officers and companions as well as Friend peers as well as belief self push regularity drink drugs and uses practice sex more safe , which in turn support virus suppression .

Intention For comply with ART and avoid behavior sexual risky formed by attitude positive to results , subjective norms (support couples , families , and officers), as well as control perceived behavior (ease of access medicine , reminder drink medicine). When the third component This strong , compliance increased and is reflected in the low viral load.

The Success of the Harmoni Community Health Center Polyclinic Dinoyo in maintain achievements *viral load* suppressed by 96.6% giving description real that quality patient - centered care *is* capable of mitigate obstacle existing structures in society

The height suppression in the midst of 80% of respondents who traveled >10 km highlighted role enabling factors in the precede–proceed/ Andersen model behavioral model. Availability stable medication , friendly service , ongoing counseling , and support scheduling reduce impact obstacle geographical . In other words, the barriers structural can transcended when factor supporting and reinforcing (enabling and reinforcing) managed with Good .

Optimal *viral load* achievement suppressed in MSM patients at the Harmoni Community Health Center Polyclinic Dinoyo is results strong synergy between *predisposing factors* in the form of awareness high health , efficacy self in conquer obstacle geographical (*enabling factors*), as well as support environment inclusive clinical as *reinforcing factors* . Discipline behavior safe sex and compliance proven antiretroviral therapy become determinant main mutual strengthen . Findings This recommend importance maintaining the service model based approach psychosocial and involvement community to maintain sustainability viral suppression in HIV/AIDS sufferers at the level service primary health .

Factors of external Where related with environment, behavior and social between other, stigma-discrimination, conditions social economics and policies /programs

1) Stigma

Research result This confirm that support family is fundamental variables that form resilience MSM patients with HIV/AIDS. All respondents (100%) reported get support a supportive family , which is theoretical in harmony with Social Support Theory . Support This No only functioning as

bearings emotional , but also as predictor main in formation behavior health independent . According to House (1981), support solid social includes dimensions emotional , instrumental, and informational which are collective increase price self patient . Existence the receiving family condition patient remove the burden of internal stigma, so that patient own energy sufficient psychological For focus on management clinical they Alone .

If reviewed from the Social Behavior Theory put forward by George Homans, interaction between patients , families , and the Harmoni Polytechnic team create A system exchange mutual social profitable (*social exchange*). Patients accept reward in the form of stable health and treatment human from officers , so that they give back in the form of compliance high (96.6%). Attendance companion peers from Mahameru NGO strengthen ecosystem This with provide relevant social capital . Behavior safe sexuality No just instructions medical , but rather results from strengthening continuous positive accepted patient from environment its inclusive and non -exclusive social judging .

Success clinical in the form of 96.6% suppressed viral load status is manifestation real from Max Weber's Action Theory. Patients show action instrumental rational (*Zweckrational*), where they in a way aware choose For guard behavior sexual No at risk and adherent to ARV therapy as means For reach objective life healthy . Data shows that discipline behavior sexual compared straight with achievements clinical . This is prove that patient own deep understanding about causality between action preventive they with results laboratory , so that they in a way voluntary adopt style supportive life emphasis virus replication .

Interestingly , the obstacles significant geographic area where 80% of respondents stay more from 10 KM from community health center No degrade level compliance . Phenomenon This can explained through Decision Theory, where patients do calculation rational to mark utilities service . Although distance travel distance and condition Then congested Malang City traffic become cost , satisfaction to friendliness officers and quality services at Poli Harmoni provide far- reaching benefits more big . Patient like Patient-2 informant willing come on Saturday by motorbike because feel mark health and comfort the services they provide get beyond burden physique journey the (Zanolini et al., 2018) .

In scale organization , transformation services at Poli Harmoni reflect dynamics of Social Change Theory . Change pattern original service rigid become more flexible and integrated through mini workshops and coordination cross -unit shows adaptation institutions to need population key . Involvement active from leadership community health center until officer laboratory in One command coordination ensure that service No only nature administrative , but also empathetic . Change social This succeed shift paradigm HIV services from just treatment medical become mentoring holistic psychosocial , which is very crucial for MSM groups that often face discrimination systemic .

National program integration to in level local this is also a Diffusion Theory form Innovation from Everett Rogers. The Fast Track 95-95-95 global target was adopted by Poli Harmoni through innovation interpersonal approaches , such as administration of Vitamin S (Patient) by officers personal laboratory and education . Innovation No always shaped technology sophisticated , but also in the form of method effective communication in persuade scared patient taken sample his blood . Success reach number viral suppression that goes beyond number national prove that innovation services that are of a nature down to earth and based community more fast accepted by the group target .

However , research this also notes existence internal challenges through Compliance Theory lens . Although majority obedient , there is part small patients who do not obedient No Because factor external , but rather internal factors such as saturation to large drug regimen size . This is show that compliance is a continuous process that is influenced by motivation intrinsic . Appropriate with Simoni et al.'s (2020) study , support maximum social from family and energy health of course capable increase compliance , however intervention psychological more in required For guard resilience patients so as not to give in to boredom in treatment term long .

As conclusion , synergy between support family , friendliness power health , and engagement Friend peers at Harmoni Polyclinic have creating a robust HIV service model . Through integration various theory social above , visible that factor humanity and support emotional Far more strong than constraint physique like distance geographical . Success clinical outcomes achieved respondents is fruit from an ecosystem that values dignity human , where the patient No only seen as subject medical , but as supported individuals in a way social and empowered in a way cognitive For take decision best for health they .

2) Discrimination

Stigma and discrimination Still become challenge psychosocial main in management health of MSM with HIV/AIDS, however dynamics This varies in a way significant at the level domestic . For informants who receive openness full from family , such as Informant SHA and Informant F, nothing internal discrimination supported by literacy health tall family become factor massive reinforcing *factor* . Warm reception This build trust self , order control , until decision For adopt behavior safe sex . On the other hand , fear will discrimination social , academic , and economic force Informant S and Informant SH for implement a status closing strategy strict or limit exposure privacy in the environment Work them to protect continuity studies and eyes search , so that management compliance done in a way independent or switch to system support external .

Obstacle consequence closure status in the environment domestic Because afraid will this moral judgment Then bridge importance presence substitution support from Friend peers . As perceived by Informant R, when threat discrimination family cut off function experience family as Supervisor Taking Medication (PMO), the role of Friend peers become very crucial in mitigate vulnerability psychological patient . Intervention emotional through informal approaches such as *intimate chatting* and discussion relaxing outside House proven effective eliminating psychological trauma consequence afraid discriminated against . Safe space without judgment created by friends peers This succeed replace role domestic lost , so patient still own motivation strong For discipline consume medication , consultation , and comply practice health safe reproduction .

In addition to informal support from Friend peers , fear will discrimination in the environment community and facilities health conventional need formal handling through mentoring programs inclusive clinical . Informant G emphasized that treatment No friendly or judgmental in facilities other health issues often lead to falls motivation patient until trigger phenomenon separated medication (*loss to follow-up*). Facing challenge mentioned , the Harmoni Poli policy prioritizes principle high *hospitality* and protection strict privacy act as fortress trusted protection . Absence of discriminatory bias in the environment clinical This proven capable compensate obstacle geographically and financially , where the patient from outside the city is willing emit cost independent For do visit over and over again to get safe , humanistic service , and still cooperative in compliance prevention medical such as VCT and PrEP.

Commitment mentoring humanistic clinical the rooted strong on values ethics internalized by officers health at the forefront polyclinic services . Informant P1 and Informant P2 confirmed that rejection to all form discrimination is commitment ethical absolute for the sake of achieving justice health equitable society for MSM population , gender diversity (DG), and partner risky others . With prioritize principle humanize patient and respect confidentiality identity they , the police officers succeeded transform environment clinical become a safe and comfortable zone . Policy inclusive services This in a way direct demolish resistance psychological patients , so that they feel accepted completely and without hesitation to utilise facility medical in a way sustainable .

Informant L1 proved that practice justice handling medical realized through standardization time Turnaround *Time* (TAT) for inspection uniform specimens without differentiate background behind patient . With processing sample in a way fast below one hour without existence delay subjective , party laboratory confirm that every patient entitled get certainty fair and efficient

clinical synergy between support domestic (or substitution by a friend peer), protection privacy by the companion , as well as guarantee justice services by polyclinic and laboratory staff form One ecosystem protective complete success eliminate impact bad discrimination to compliance term long patient

3) Socio- Economic

Construction behavior compliance absolute (100%) in the MSM population at the Harmoni Community Health Center Polyclinic Dinoyo show strong articulation between education with taking decision strategic health . Dominance respondents educated high (80% level) College) changes landscape interaction clinical from the paternalistic model traditional become partnership participatory therapeutic . Literacy good health allows patient No only absorb information medical in a way passive , but also doing internalization to mechanism ARV pharmacokinetics and consequences clinical from resistance medicine . Higher education here play a role as a cognitive buffer that neutralizes doubt to efficacy treatment , so that compliance No Again viewed as instructions external , but rather as need rational For guard sovereignty biology and the future professional they (Sabin et al., 2020).

Limitations economic conditions experienced by the majority respondents dominated by groups student it turns out No become variables significant inhibitor blessing existence policy subsidy full on ARV services . Phenomenon This indicates that when obstacle financial factors at the fundamental level are eliminated by the state, the factors education appear as determinant the main one who directs behavior health . Students , although in a way financial Not yet independent , have capacity For do management very strict priorities . They more choose reduce expenditure consumptive in order to allocate cost transportation and nutrition , because in a way intellectual they understand that failure therapy moment This will cause burden economy catastrophic future that can destroy prospects career they (Haldane et al., 2019) .

In perspective sociological , profile high intellectual capacity in LSL patients at the location study This facilitate adoption behavior sex safer consistent through understanding data - driven risk , not just fear . Interview results reveal that patient educated tall tend more critical and have a clear future orientation , which in turn strengthen control self to encouragement impulsive . Education provides tool analysis for patient For negotiate use security and understanding Undetectable = Untransmittable (U=U) concept . High compliance This reflect existence transformation identity from a victim of stigma to agent empowered health , where education tall act as catalyst in speed up diffusion of health norms new in the neighborhood community they (Bekker et al., 2018).

Synergy between background behind established and quality education inclusive services at Poli Harmoni create A ecosystem self - sustaining compliance . Ability patient in understand literacy HIV basics , such as viral load and system function immune , making the counseling process become Far more effective and efficient . Effect multiplier from education This seen in how patient manage limitations economy they without sacrifice integrity therapy . With Thus , the findings This give proof strong empirical that success mitigation risk HIV transmission in the population the key is largely determined by the extent to which the facilities health capable optimize modality intellectual patient For overcome challenge existing socio - economic (Mbuagbaw et al., 2015) .

Skinner looked compliance LSL students as results from shaping behavior through understood consequences in a way intellectual . Although cost economy (transportation) is an aversive stimulus , however strengthening positive in the form of condition constant health stable (because ARVs are free and effective) and strengthening negative in the form of avoidance to failure career consequence fall sick , forming pattern consistent behavior . Higher education functioning as variables between the ones that accelerate understanding to timetable reinforcement (schedules of reinforcement); they understand that just one time roll call drink drug can cancel strengthening health term the length that has been built (Rasmussen et al., 2023) .

Durkheim will analyze phenomenon This through draft solidarity where student status create awareness collective towards intellectual norms . Discipline drink medication and routine check-ups become A fact social ties for group educated this . Higher education create system values where to keep health No Again individual actions , but rather part from morality group For still productive . Their decisions For economical in snacks for expenses transportation is form sacrifice individual to function more social big , namely maintain status as people healthy educated (Alexander, 1990) .

In POAC framework Terry, respondent student show Planning and Organizing capabilities of resources Power limited economy optimally . The decision to still obedient even though economy lower-middle class based on alternatives rational action . They share scale priority between need academic and needs clinical . Terry emphasized that quality decisions depend heavily on quality information ; because majority respondents is student with access information wide , they capable take decision strategic For utilise government ARV subsidies for sustainability life

Change social happen when education change method view patient from action traditional or affective (fear / shame) becomes goal - oriented action real medical . Student status reflects the process of intellectualization and demystification of HIV. Although in a way economy Not yet established , rationality objective they (graduate from college and have a career) make they comply procedure bureaucracy medical at Harmoni Polyclinic as legitimate and sole means For reach objective life the

Compliance Theory emphasize that level education is predictor strong for compliance medical . In case this , education tall eliminate impact negative from low economy . Patients have high self-efficacy For navigate system health . They understand importance obedience time consumption medicine (96.6% very disciplined) not Because afraid of the officers , but rather Because understand will danger resistance . Education facilitates symmetrical communication between doctors and patients , so that compliance that is formed based on awareness intellectual , not coercion (Thompson et al., 2021).

4) Policy /Program

Implementation policy HIV/AIDS management at the Harmoni Community Health Center Polyclinic Dinoyo show strong alignment with direction policy strategic national . Plan Indonesia's HIV/AIDS action is centered on the "Ending AIDS 2030" strategy to eliminate epidemic through the Three Zeros target: Zero infections new , Zero deaths related to AIDS, as well as Zero stigma and discrimination . At the level primary care , policy This realized with integrate group risk to in Standard Minimum Health Services (SPM) area .

For the MSM population with a therapy period term long-term , consistent antiretroviral (ARV) provision program proven capable form behavior compliance therapeutic treatment permanent . Phenomenon This reflected in the SHA informant (LSL 1) who has operate therapy since in 2003 and has view deep to effectiveness of long-term programs long said . High internal commitment make informant in a way strict arrange discipline drink drug every 9 pm without Once missed or Lack of integration of counseling programs prevention transmission and screening partner in policy clinical This give runway protection biopsychosocial for his family , it is proven with results the wife 's ARV test was negative Because success of the emphasis program virus replication in the body informant .

On the other hand , from the perspective patient new like Informant S (LSL 2), orientation program policy health and education regarding achievement targets clinical act as strength very strong personal motivation . There is a target to achieve clinical in the form of virus status not undetectable trigger behavior radically adaptive in order to maintain efficiency of the new ARV program commencement . Informant S is willing face constraint bureaucracy campus , sacrificing time lectures , and do journey Far inter-city to maintain accuracy time visit repeat monthly . In

addition , understanding deep to risk transmission push him For do restrictions strict with stop all activities sexual risky in a number of Sunday final .

Obstacle operational in groups age worker productive succeed mitigated in a way effective through policy involvement community in the form of a Companion program Peer (PS). Informant SH (LSL 3), a worker private sector facing limitations time daily , assessing the mentoring program This is very functional , solution-oriented , and lightening the burden from stigma barriers in services health . Through communication periodically with companion with the initials D, patient get solution adaptive operations For get around collision timetable Work daily in taking logistics medicine . Educational program daily from companion combined with initiative independent in the form of use of reminder alarms proven escort behavior informants to remain discipline consumption drug daily and not slip back to behavior sexual that can lower his immunity .

Instrument control other behavior that is not lost effective manifest through monitoring programs clinical face advance in a way periodically by manpower medical specialist . Informant F (LSL 4) perceives that the evaluation program physique in a way directly by a doctor is A must mandatory medical followed for the sake of continuity his life . There is control structured clinical from doctor guarantor answer , namely Dr. Sody , gave effect supervision strong medical , so that increase accuracy time visits and discipline drink medication . Supervision physique this also strengthens control self informant For adopt behavior total sexual inactivity post- diagnosis , because He prioritize treatment program success targets moderate physical condition monitored in a way clinical .

From the governance side service , modernization administration references medical online based to become factor supporters crucial for continuity therapy dynamic patients . Informant P1 (Police Officer 1) emphasized that transition policy references from file physique photocopy to digital systems make things easier continuation lifelong ARV therapy life cross- administrative regions without partition bureaucracy , especially for patient LSL students who must return to area origin after graduating from college . Flexibility system this online reference strengthened by coordination *real-time via digital* communication media .

Trust clinical patient to service health at the Community Health Center Dinoyo is also strengthened by commitment control quality a global standard laboratory . Informant L1 (Lab Officer 1) explained that participation periodically in External Quality Assurance (PME) with CDC Atlanta ensures results inspection viral load has 100% validity . The existence of this valid diagnostic data supported by procurement instrument medical latest from the Ministry of Health and the Health Service. Informant L2 explained that availability tool tester *viral load* in a way independent in the laboratory community health center succeed realize system service One door (*one-stop service*), which cuts eye sequence references sample and speed up handling diagnostics for satisfaction service public .

Policy convenience - oriented operations access logistics are also implemented through an additional working hours program service pharmacy (*extra time*). Informant F (Pharmacy Officer) highlighted that giving service additional on Saturday until the afternoon (17.00) is designed as instrument regulations For expand number screening term length (*retention*) and elimination reason delay taking ARV logistics for population constrained key time regular . The reliability of this program supported by certainty guarantee ARV stock confirmed by Pharmaceutical Informant (AE). Availability logistics stable drug give guarantee main for patient , ensure that sacrifice time and physical in go through journey distance Far No end in vain .

From the discussion about internal and external factors that influence behavior MSM patients in prevention of HIV AIDS then can concluded findings as following :

Finding 12: Discipline in guard behavior sexual safety and compliance in undergo ART therapy becomes factor determinant main mutual strengthen in success emphasis replication of the HIV virus in the body they

Finding 13: Support and influence positive from Friend peers proven push regularity MSM patients in drinking drug as well as push use practice more sex safe

Finding 14: Companions give contribution big through mentoring quality and clinical nature humanist , so that capable make patient obedient and aware about his health

Finding 15: Officers at the Harmoni Community Health Center Polyclinic Dinoyo succeed create environment proven inclusive and patient - centered clinical powerful For motivating patients to do routine treatment .

Finding 16: Policy community health center make things easier patient in access service health Good through one stop service or in taking drug outside working hours so that increase compliance MSM patients

Finding 17: Companions play a role active give solution real in the field , such as help facilitate taking logistics ARV drugs when patient Busy work , give communication periodically , and do education daily for immunity patient still awake

Finding 18: Community Health Center succeed increase trust clinical patient through guarantee validity results inspection *viral load* up to 100% because has follow control quality

Finding 19 : Open patients get support from family and trust self alone , thing This increase compliance For discipline treatment and behavior safe sex .

Finding 20: Officer apply anti- discrimination practices No only in the form of attitude but realized in standardization time Wait specimen service .

CONCLUSIONS

Based on data analysis from description as well as discussion about results research " Behavior Male Sex Patients (MSM) at Harmoni Polyclinic at the Community Health Center Dinoyo In Lowering Risk Transmission of HIV AIDS" then can taken conclusion as following :

1. Behavior Male Patient Male Sex (MSM) Harmoni Polyclinic at the Community Health Center Dinoyo In Lowering Risk Transmission of HIV AIDS is obtained a number of conclusion main that synergy between design services that guarantee privacy structural , intervention behavior based technology (digital nudging), and strengthening efficacy self through support social at Poly Harmoni is factor determinant specific that converts vulnerability sociopsychological LSL group becomes compliance clinical and discipline behavior sexual nature absolute . Supporting conclusions that can be stated is
   Compliance and discipline behavior MSM patients in continuity of therapy program HIV clinical (which combines order and discipline visit repeat , accuracy time drink medicine and discipline behavior sexual safe) is determined optimally by the presence of integration between height internal motivation as well efficacy self MSM patients , strengthening function supervision daily and support psychosocial based community by friends peers and companions , as well as existence transformation system service adaptive , humanistic , and stigma- free health by multi-professionals power health .
2. Factors That Influence Male Patient Male Sex (MSM) Harmoni Polyclinic at the Community Health Center Dinoyo In Lowering Risk Transmission of HIV AIDS is obtained a number of conclusion main that achievement of health status and success clinical in patients with literacy health tall No Again determined by geography , but rather determined by synergy between action instrumental rationality in guard privacy and effectiveness strengthening positive from system support family , companions and staff health . Supporting conclusions that can be drawn stated is :
   Suppression *viral load* and success therapy in MSM patients is determined in a way holistic by synergy between factor internal adaptive (discipline , efficacy) self and openness with family) with system support integrated external (intervention emotional Friend peers , the solution mentoring community , as well as policy service inclusive , accountable , and free clinical discrimination by officers health)

Based on conclusions above , then the suggestions that can be stated :

1. Remember patient more prioritize anonymity than distance , government should No only focus on equality facilities in each sub-district , but also on development service *one step door* that has standard privacy high . This is Because for group stigmatic , distance is instrument security
2. Success WhatsApp intervention at Harmoni Polyclinic is necessary formalized become protocol standard service . Reminder personalized automatic proven become effective *discriminatory stimulus* For guard regularity visit
3. Making Poly Harmony a *pilot project* For service health population key , with emphasis on transformation procedure medical become an empowering social ritual through involvement companion same age .
4. Recommended for researchers furthermore For test variables distance protective this is in case disease stigmatic others (such as leprosy or TB) for see whether deconstruction *distance decay* This universally applicable to all marginalized groups
5. Remember findings show discipline absolute (100%), required study term long For test resilience from Contingency This reinforcement (Skinner) . Is its effectiveness will decrease along with point fed up treatment .
6. Researchers furthermore need study more in threshold level capable education become *cognitive buffer so that* intervention strategies can customized for group with literacy low
7. Because of the support 100% family is key success clinical , necessary created a counseling program families who focus on eliminating internal stigma . must positioned No as supervisor medical , but rather as agent strengthening social .
8. Optimizing role figure in LSL community for diffuse sexual norms safe as expression love dear . Swipe narrative from sex safe For avoid disease become sex safe as not quite enough moral responsibility towards partner .

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