

Demand for Health Services in The Lesbian, Gay, Bisexual, And Transgender (LGBT) Group in Padang

Adila Kasni Astiena¹, Aulya Rahmi², Ayulia Fardila Sari³
{adila@ph.unand.ac.id¹}

Department of Public Health Administration and Policy, Faculty of Public Health, Andalas University¹²³

Abstract. LGBT people have a high risk of suffering from HIV-AIDS. There were 687 HIV-AIDS sufferers in Padang in 2016, 21% of them were LGBT. Only 29% of HIV-AIDS sufferers in Padang visited the public health center. This study aimed to determine the demand for health services among LGBT in Padang. The research design was qualitative and conducted in February-June 2016. There were 6 participants, who determined by purposive sampling. They are LGBT people, counselor and health worker. The results showed that the LGBT behavior was motivated by family and social environment. Most said that LGBT came when they were teenagers. They are also abusers of drugs and alcohol. The Lesbian, Gay, and Transgender were actively seeking and using health services on a regular basis. However, the opposite applies to bisexual. Great demand occurred when they were detected as suffering from certain diseases. LGBT people generally come from the lower middle-class economy. LGBT behavior requires extra care and is expensive. The economy related to demand for health services, so that it is necessary to increase the economy for LGBT. The better that they should try to get out of risky health behavior as LGBT.

Keywords: Demand, Health services, LGBT , Needs, Wants

1 Introduction

The individual's fundamental desire to meet the need for love in connection with closeness or intimate feeling is called sexual orientation. Normally human sexual orientation is directed at the opposite sex, but under certain circumstances, there is a deviation that a person is sexually attracted to the same sex (homosexual) and or there is still a sexual attraction with another type (bisexual). Homosexuals consist of gays and lesbians. Gay is a lover of fellow men and Lesbian is a lover of fellow women (Sinyo, 2014). Transgender's people identify and express themselves with a different gender than they were born with. Henceforth, Lesbian, Gay, Bisexual are abbreviated as LGBT.

The LGBT population is found in almost all racial, ethnic, religious, age, and socioeconomic backgrounds in the world. About 3.5% of Americans say they are lesbian, gay, bisexual, and transgender (Hafees, 2017). In Indonesia, the exact number of LGBT perpetrators is not known. According to the Ministry of Women's Empowerment and Child Protection, there is no actual data regarding the number of LGBT people. Still, based on data on the population vulnerable to being affected by HIV, the number of transgenders is estimated at 597 thousand people. In comparison, gay and bisexual people reach more than 1 million people. If using the

prevalence of the population, the number of Man Sex Man (MSM) can reach 3 million, while the lesbian population is not widely known (Kemenpa, 2015).

Several negative impacts can arise from LGBT behavior, namely the emergence of physical health problems and mental health problems. LGBT people are at higher risk of suffering from various sexually transmitted diseases (STDs) like HIV/AIDS, gonorrhea, syphilis, damage to reproductive organs, and infertility. They can cause cancers, cardiovascular diseases, obesity, anxiety, depression, attempted suicide than the normal population (Hafees, 2017). According to the Center for Disease Control and Prevention, Gay, bisexual men and men who have sex with men (MSM) account for 83% of primary and secondary syphilis cases in the United States. This group also often gets other sexually transmitted infections such as chlamydia, gonorrhea, and Human papillomavirus (HPV) which causes cancer of the anus and mouth. Anal and oral cancer incidence is 17 times greater in gay, bisexual, and MSM than heterosexual men (CDC, 2016).

LGBT behavior can also cause psychological impacts such as hating the opposite sex, feeling that he is not a real man or woman and always depressed due to guilt and sin (Hafees, 2017). Besides physical health problems, LGBT behavior is also at risk of mental health disorders. This is known as "syndemic", which is two health conditions that occur together in a population. In general, LGBT perpetrators have mental health disorders such as depression, alcohol abuse, narcotics and other addictive substances, and sexual violence. These psychological disorders are still exacerbated by discrimination, negative stigma, and unpleasant treatment in society, including accessing health services (WHO, 2016).

The LGBT group is a group that needs promotive, preventive, curative, and rehabilitative health care. The utilization of health services (demand) is influenced by the desire (want), and needs. Needs in health services are distinguished from perceived needs. It is the sum of the individual needs of the health services and the need for normative (normative needs) which should be provided by the service provider to the patient based on the standard of health sciences. This need felt and expressed through the desire and ability to pay is called demand (Retnaningsih. E, 2013).

Needs are a human need for goods and services based on objective and scientific standards. Want is a person's desire to obtain goods and services coming from a more subjective desire. Demand is the demand of a person or a society for a product or service. Economically, demand is determined by many factors, including the price of goods, prices of substitute and complementary goods, household income, income distribution, population, and forecasts of future conditions (Sukirno. S, 2011). The demand for the health sector is not exactly the same as the demand in the economy because it is related to saving the body and soul. Scientific information related to health demand is useful for decision-making in order to improve the health status of the population. Estimation of health demand can identify variables related to the use of health services such as the need and desire for health services. (Mwabu.G, 2017)

Data from the West Sumatra Department of Health in 2015 showed that the number of people living with HIV in Padang City was 225 cases, with new AIDS cases being 92 cases. According to the Minangkabau Lantera (ML) Foundation, a Non-Governmental Organization (NGO) that oversees the LGBT group in West Sumatra, the number of people living with HIV/AIDS in Padang City in 2016 was 687 people. Of the number of people living with HIV/AIDS, 129 people are gay and 13 are transgender people. This means that 21% of the HIV/AIDS cases that occurred in Padang municipality, came from the LGBT group.

According to data from the Indonesian Ministry of Health, out of 225 HIV/AIDS patients, only 29% visited health care facilities in 2015. In accessing health services, LGBT people can be bullied, isolated, and rejected due to stigma, thus keeping them away from accessing health services. (CDC, 2016). It is necessary to increase the demand for health services for the LGBT

group by knowing in depth the desires (want) and needs of the LGBT community towards health services. Thus, the number of visits to health services for the LGBT group can be further increased so to reduce the incidence of sexually transmitted diseases.

2 Methodology

The design of this research is qualitative. Informants are determined by purposive sampling, namely people who are considered to know about health services for the LGBT group. This research was conducted from February to June 2016 in the city of Padang. Informants in this study were six people. They are gay, lesbian, bisexual, and transgender counselors at the foundation that oversees LGBT groups in West Sumatra and Reproductive Health Midwives at the Public Health Centre in Padang. Primary data was obtained through in-depth interviews and secondary data was obtained through document review.

Data processing by making data reduction, displaying data, and drawing conclusions. The analysis was carried out thematically, namely drawing conclusions in the form of themes of thoughts from the informants, grouping them and comparing them with different sources (source triangulation) and comparing them with the findings of the document review (technical triangulation).

3 Result and Discussion

Overview of Research Situation

This research was conducted on the LGBT group under the LM Foundation in Padang municipality. The LM Foundation is a foundation engaged in public health with its primary focus to provide support for people living with HIV and AIDS (PLWHA). This foundation was established on October 24, by five people with different backgrounds : a student, a broadcaster, an artist, an activist from Non-Governmental Organizations (NGOs), and a paramedic. The establishment of this foundation was motivated by the increasing number of cases of HIV/AIDS. However, it was not matched by the level of understanding and knowledge of the community on how to support PLWHA so as not to get stigma and discrimination in services and social life. The vision of this foundation is "together to build empowered, independent, and quality PLWHA".

The activities carried out by the LM Foundation consist of advocacy and lobbying, networking, capacity building, training and discussions, meetings of PLWHA throughout West Sumatra and monitoring and evaluation. The activities carried out by the foundation aim to improve the quality of life of PLWHA and help PLWHA in their lives in society. Currently, the LM Foundation houses five peer support groups, namely KDS Palito Ati (Parents) in Padang, Bujang Saiyo Sakato Support Group (gay) in Padang, Saraso Support Group in Padang, Dara Jingga Support Group (Lesbian) in Padang, and Jam Gadang Community in Bukittinggi. The organizational structure of the LM Foundation consists of a Board of Trustees, Supervisory Board, and Management consisting of the Chairman, Secretary and Treasurer.

From the research data obtained, the number of LGBT perpetrators fostered by the LM Foundation is as many as 142 people for the Padang City area and 65 people for the Bukittinggi City area. Most LGBT perpetrators are male sex men (MSM), as many as 129 people in Padang City and 45 in Bukittinggi City. LGBT actors in West Sumatra, especially in Padang, have

started to appear openly, but some are still hiding. According to the informant, advances in technology and information through social media currently encourage the emergence of LGBT groups openly.

The Characteristics of Informants

Data were obtained through in-depth interviews and document review. In-depth interviews were conducted on six informants, namely Lesbian, Gay, Bisexual, Transgender under the LM Foundation, Counselors, and Reproductive Health Program Holders at the Puskesmas, according to the following table 1:

Table 1. The Characteristics of Informants

Informant Code	Age (years)	Gender	Education	Work	Status
Inf-1	35	Male	Senior High School	Entrepreneur	Counselors / Escort
Inf-2	37	Male	Junior High School	Not Working	Gay
Inf-3	28	Male	Senior High School	Freelance	Bisexual
Inf-4	19	Women	Diploma	Billiard Employee	Lesbian
Inf-5	36	Male	Diploma	Beauty Shop Owner	Transgender
Inf-6	46	Female	Diploma	Civil Servant	Midwife/ Health Worker

Obtained results related to the life background and life experiences of the informants as follows:

1. Lesbian

Lesbian informants are the youngest informants among other informants. The emergence of sexual orientation to the same sex has only occurred in the last two years. The informant stated that the reason for liking the same sex was the trauma factor of the love she experienced with her previous partner. The pain and discomfort felt with her male partner make the informant like the same sex. The informant admitted that she was in a relationship with a lesbian but had not yet had sexual intercourse. The informant is currently working and earning Rp. 1,700,000,-/month. Informants use health insurance in health with a contribution of Rp. 300.000,-/6 months included in the dependents of the informant's semester tuition fees.

2. Gay Informants

Informants have felt sexual orientation to the same sex since school age. This is triggered by the informant's family environment, which treats the informant like a woman, resulting in an identity that does not match the informant's gender. Informants' poor environment also causes informants to become drug abusers. In 2011, the informant was detained at the Bukittinggi Penitentiary for drug abuse. At the same time, he knew that he was HIV-reactive. The refusal to have an HIV-reactive status caused the informant to become a street transvestite who peddled himself in several places in Padang from 2011-2013. From 2014 until now, informants have not peddled themselves anymore. HIV reactive status became the issue for the informant to find a job so that he experiences difficulties in terms of economy. However, for outpatient treatment, the informant uses 3rd class national health insurance (BPJS) with a contribution of Rp. 25,500,- which is currently being paid by the LM Foundation.

3. Bisexual Informants

Informants have had a same-sex sexual orientation since the age of 18, due to the influence of their social environment. This informant is married with one wife and four children. Currently, the informant does not have a permanent job so that it is difficult to meet daily life. With family status, the informant is still in a relationship with a same-sex partner. It is not just the same person, he often changes sex-partners.

4. Transgender Informants

Similar to gay informants, this transgender informant also experienced a deviant sexual orientation towards the same sex since childhood due to the influence of the family environment which caused deviations in the formation of identity. The informant has been in a same-sex relationship since college. Active sexual relations have also been started since college but do not often change sex partners because they have a special sexual partner. The informant is the owner of one of the beauty salons in the city of Padang with a monthly income of Rp. 3,000,000, - to Rp. 5,000,000, - Previously, the informant used health insurance In health with a contribution of Rp. 350,000, - / month, but the last two years, the informant no longer uses the health insurance.

Background and Length of Time being LGBT Behavior

The emergence of LGBT behavior is motivated by several factors, such as the environment, including family environment and close friends, social media, and spectacle. Informant explained that they have started being LGBT for quite a long time, namely elementary, junior high, and high school. Nevertheless, most of them start in their teens.

Table 2. Length of time being LGBT

Group	Age of starting LGBT (Years)	Age of having sex (Years)	Length of being LGBT until present (Years)
Lesbian	16	Unwilling to mention	2
Gay	10	14	27
Bisexual	18	18	10
Transgender	12	19	17

However, according to other informants, the background of LGBT behavior is due to the lack of parental roles in providing an understanding of reproductive health, such as gender, reproductive function, and identity recognition.

“...From an early age, a man is like this, a woman is like this. So they know what the function of their reproductive organs is. The introduction should be done regulatorly so that it can be well absorbed...” (Inf-6)

“...I have six siblings, 1 to 5 boys, I am the fifth child. Because I was wanted as a daughter, I was dressed in girl's clothes until my little sister finally was born. I started to be interested in this kind of thing since puberty since my third year in middle school...”(Inf-5)

The Mindset of LGBT People on Their Behaviors

LGBT actors have their own views on life and the choices they make. They believe that what they are doing is the right thing. According to them, this is their right to be free to choose

what they want to do in their life as long as it does not disturb other people or the surrounding environment. This large number of LGBT certainly has specific effects if it is associated with the sexual activities of those who are vulnerable to the transmission and development of HIV/AIDS. The majority of the informants have started having active sexual relations with the same sex since junior high school and while in college until now with one person and changing sexual partners.

The vulnerability of the LGBT community to the transmission of HIV/ADS is not only due to unsafe sexual activity but also due to the use of narcotics, psychotropic substances, and drugs abuse as well as liquor or alcoholic beverages. According to the informant, the use of narcotics and the alcoholic beverages has been around since junior high school and is mostly influenced by the social environment. People with LGBT are at high risk for abusing drugs. According to the American Center, a study in 2018 concluded that LGBT people are three times more likely to experiment with ecstasy, cocaine, methamphetamine and heroin (Ackermann, K. 2020).

Demand for Health Services

The demand for health services is quite diverse among informants. This is influenced by the health status experienced by each member of the LGBT informant. The informant with HIV-positive fulfills the demand for health services better. A gay Informant tried to get a health insurance card (BPJS) by selling his cellphone to get antiretroviral virus (ARV) medicine. The informant tries to maintain a healthy lifestyle, as in the following interview:

"So, I sold my cellphone to get BPJS class 3 for 25,500. I also have a medical card to take anti-retroviral medicines, I have two treatment cards, one at the Seberang Padang Health Center and the other at the M.djamil Hospital..." (Inf-2)

This informant is also taking ARV medicine that he has been on for almost eight months and doing HIV checks regularly to see his body's immunity. The starting point of routine check-ups and outpatient visits to the hospital was different for LGBT informants. Some informants start regularly going to the hospital when they have been diagnosed with certain diseases, but there are also those who are used to doing it even though they are not sick. Lesbian and transgender informants have a great enough demand for health services. They routinely carry out outpatient examinations to the doctor's clinic or hospital once a month and have permanent health workers.

The demand for health services for informants with HIV-negative status is not as good as for HIV-positive informants. If they experience a complaint or an emergency, they do not immediately seek medical attention but prefer to handle it themselves. The demand for health services for LGBT informants is influenced by economic factors, treatment options, and whether or not the health services are covered by health insurance (BPJS). Instead of using money to check themselves, they prefer to use it for basic needs such as food and electricity bills. The following informants state this.

"I don't really think about health, all I think about is money to buy food and electricity bills..."(Inf-3)

"In my opinion, health checks are getting more and more expensive, especially since I do not have health insurance (BPJS). one blood check can reach 700-800 thousand, that's every 3 months."(Inf-5)

"LGB friends are a bit different from transgender friends in terms of health care, maybe because their economic factors are different, so it is like that..." (Inf-1)

Workers who play a role in serving the LGBT group are generally medical personnel as well as paramedics. LGBT people generally access health services in the form of counseling,

sexual education, and identity recognition. Demand for Health Services among LGBT Informants is shown in table 3. From table 3 it can be seen that in general, the demand for health services is good, except for bisexual informants.

Table 3. Summary of Health Services Demand on LGBT Informants

No. In Assessing Aspect	Description	LGBT group							
		Lesbian		Gay		Bisexual		Transgender	
		Yes	No	Yes	No	Yes	No	Yes	No
1. Member of Health Insurance	Having a specific health insurance card	√	-	√	-	-	√	√	-
2. Ownership treatment card in health facility	Having a medical card in the certain health institutions	√	-	√	-	-	√	√	-
3. Proof of payment once on inpatient	Have proof of payment of the administration ever in hospitalized in certain health facilities	√	-	-	√	-	√	√	-
4. Proof of medical examination	Have evidence of past health checks, such as:								
	Chest X	√		√	-	-			-
	Blood Tests ultrasound	√		√			√	√	
5. LGBT informant health visits to foundation	A list of visits by LGBT to LF is available		√	√	-	√	-	-	√
6. Consultation Visit to psychologist	Consulting existence of the traffic data LGBT groups	√	-	-	√	-	√	-	√

From table 3, It can be seen that lesbian, gay, and transgender informants have a high awareness of health by having insurance cards, outpatient visit cards, and conducting health diagnostic checks regularly. It is different from Bisexual informants.

Table 4. Triangulation Matrix about Demand for Health Service among LGBT

Informant	Demand for Health Services	Conclusions
<i>Lesbian</i>	Hospitalized every month and consume medicine prescribed recipied by a doctor. Regularly doing laboratory checks in 6 months.	Three of 4 informants have a fairly great demand for health services. The demand of health services for bisexuals is not good enough.
<i>Gay</i>	Visit the VCT clinic routinely, once a month, and take ARV medicine. There is also a schedule for checking the CD4 lab.	
<i>Bisexual</i>	Never had a health check, a lab check, an outpatient visit, and hospitalized once.	
<i>Transgender</i>	Visit ambulatory services routinely every month. Do complete lab checks once in 3 months. Taking regular medication for the treatment of thyroid currently	

Shared hobbies or activities can lead to the formation of a community. Nowadays, it is easy to find communities that formed based on hobbies and activities. Besides that, communities that are formed on the same sexual orientation are also formed as examples of the existence of lesbian and gay communities or LGBT groups. It is what underlies the emergence of the LGBT group. This group often gathers and interacts to develop its communication network as people with the same sexual orientation.

People with LGBT behavior have started to show their current existence openly, especially in the city of Padang. Most of the LGBT informants in this study did not open themselves openly in the community. They prefer to close themselves and only be open to their group. This is in line with Agustine's research on lesbian groups in Jogjakarta which has not yet received public recognition and acceptance. Stigma as deviant behavior makes lesbians choose to close themselves (In the Closet). They also only reveal their identity among themselves (Satrio FXC, 2013). Closing oneself will have specific effects on the LGBT community itself. By shutting down, others do not know that someone needs help. The help that can be given to LGBT perpetrators is medical assistance, both physically and mentally. This condition causes LGBT people to be late in accessing health services so that they come with more severe disease conditions.

Feeling unaccepted and depressed will affect their mental health and make LGBT people unable to express their health problems. LGBT group emerged from school age, namely elementary school. Some started at the junior high or high school level, based on the information obtained. The surrounding environment largely influences the emergence of the impulse for LGBT behavior and the most important role in the social environment. Even sexual activity started an early age, namely junior high school.

Kinsey reports that 37% of men and 25% of women have had sexual activity to the point of orgasm after the onset of adolescence, including LGBT people (Semiun. Y, 2006). Sexual relations that have been started from an early age will undoubtedly have an effect on reproductive health. People with LGBT, especially young people, certainly do not know much about safe sex, so they are at high risk of being infected with STDs and HIV/AIDS. Health is not a commodity that can be traded because health cannot be directly bought or sold in the market. Health efforts are one of the characteristics of health services. In order to improve their health status, people access health services at health service facilities such as doctor consultations, laboratory examinations and X-rays, and inpatient care. It is known as public demand for health services. Demand is one way to achieve a higher health status. Demand is influenced by the need and the desire to get better health (Nurlina, 2012).

Assessment of health will affect efforts to seek health services. In this study, the awareness of LGBT informants about health is proven by a good desire. They view health quite positively. Want good and positive LGBT groups related to health services is realized with good demand as well. They actively seek and use health services. This is in accordance with the theory that perception of health is closely related to treatment-seeking behavior. The better the perception of health, the better the behavior in seeking treatment. In addition to perceptions of health, health service seeking behavior is also influenced by knowledge, socioeconomic conditions and the availability of health service facilities in the community (Afolabi. MO, 2013)

Health conditions that are perceived as good also affect the assessment of LGBT informants on health services. Some of the informants thought that they just started seeking treatment, if they had physical problems. This is because some people think that a hospital is a place for sick people. Rahma (2014) investigated the treatment-seeking behavior of STIs among transgender people in Poso. This study concluded that most transgender people did not feel the need to check their health because they had not experienced a serious illness. This causes them

not to immediately go to the public health centre or hospital when experiencing not too bothersome symptoms (Rahma, 2014). Thus, it can be concluded that the assessment of the meaning of health and attitudes towards disease prevention greatly affects the demand for health services for people with LGBT.

The LGBT group is a group that has abnormal sexual desires, but they are also like the general public, who need medical assistance when they are sick. The health services needed are generally related to reproductive health because people with LGBT behavior are more at risk of suffering from STIs and HIV-AIDS. People with LGBT also need medical help psychologically related to their sexual deviations and secondary consequences in the form of guilt and stigma from their environment. This is manifested in the form of demand for physical and psychological health services. From the results of this study, it is known that, in general, LGBT informants have a good demand for health services. It can be done by measuring the demand for the LGBT group through the use of beds (hospitalization), on lesbian and transgender informants who have been hospitalized. This result from unhealthy lifestyle and the use of medicines such as diet pills by one of the informants.

Lesbian, gay, and transgender informants routinely make outpatient visits to health services every month to check their health. Likewise, the three informants also regularly carry out diagnostic examinations such as blood checks. The three informants, namely LGT, fulfilled their demands by making visits and examinations to health workers providing health services such as clinics and hospitals. It shows that the demand for LGT is very good with its concern for health services which is also good. LGT understands health as something important for their survival. Although it can be said that they do not come from upper-middle-class families, but they strive to get health services by utilizing government programs through JKN through BPJS and other private health insurance.

However, for bisexual informants, there is an unfavorable demand for health services. Informants only meet their health demands by self-medication. The informants have never carried out diagnostic examinations, outpatients, or inpatients, even though the informants are aware of the risks associated with living with a wife who is PLWHA as well as having sex with same-sex partners. One of these is influenced by economic status. The informant said that one of the factors that caused his lack of health concern was due to the lack of economic factors, so that the informant focused more on family survival than personal health. This is in line with the theory that the health priority of family income to buy food is more important than medical needs. Thus, the provision of costs for health services has decreased, magnified by the increase in tariffs for health services, especially in private facilities, resulting in a sharp decline in public access to health services. In addition, the demand for health services is dominantly influenced by several factors, namely tariffs (price), patient income, patient preferences, and alternative goods due to availability and price (Juanita, 2006).

This economic factor gives a considerable influence on the informants' concern for their health, but not all LGBT people are affected because of it. The research was conducted by one gay informant who tried to get health services through BPJS by selling his cellphone for the management of the JKN card owner. This means that concern can be realized with the awareness that comes from each LGBT person. Awareness and desire to improve self-health status are essential and influences decisions to seek treatment and use health services.

This unsafe sex activity and the influence of the environment make LGBT people vulnerable to disease. The majority of LGBT people know about the impact of what they do. However, currently, the LGBT group has only reached the stage of knowing but there has been no positive reaction to improve their health or their lives in a better direction. The comfort factor

of the current condition and environmental influences cause LGBT groups to not be able to get out of what they have been doing.

In a study conducted by Zainal et al. (2015) on lesbian groups in Malaysia, it was found that the majority of informants had a desire to recover. However, their time to change cannot be ascertained because even though they have the desire to change, there is no initiative to make the change. It is also triggered by a sense of comfort in the relationship so that the process of change is hampered (Abidin, 2015).

The LGBT group still requires special attention in terms of health. Because most LGBT people do not know what they need, the information gap on the dangers and health impacts that will be faced has not been appropriately realized before they experience symptoms of the disease after they go to the doctor. Especially for those who have not come out or have not been open to others about their LGBT identity (Kristina. S, 2013). So efforts to maintain the health of the LGBT group require extra treatment. Not only for special health problems related to their sexuality but also for treatment if they are experiencing common illness. The LGBT group is the same as the general public who are free to choose the place where they want to seek treatment (Mukorromah. D, 2013).

Health workers in this study view that the basic things they need are the following:

- a. Good perception, by not discriminating against them. Good and proper treatment will ultimately lead to comfort so that LGBT people will be open and willing to follow the health recommendations given.
- b. Proper consultation on the problems of each LGBT people because LGBT issues are very complicated, slightly different from other general public. So if it is not handled immediately, it will cause problems that are not only physical health problems but also mental health
- c. Support for the LGBT group to regularly undergo their treatment if they are already experiencing health problems and if not as a health worker can bring the LGBT group towards better physical health and overall life.

It is in accordance with research conducted by Duwi and Refti (2013) in Mukarromah (2013) which states that treatment is through supportive therapy by providing support to transgender, including the LGBT group. Especially for those who have become HIV/AIDS sufferers will experience anxiety, depression, and stress so that their immune system will be reduced. New sufferers usually experience these feelings. There will be feelings of guilt and being ostracized by others. For this reason, support through consultation activities by health workers or experts is very necessary (Mukorromah, 2013). Thus, consultation and support greatly affect the success of preventive, promotive, curative, and rehabilitative actions for the LGBT group.

4 Conclusion

The LGBT group in this study was motivated by the influence of the surrounding environment, namely their family and relationships and life as an LGBT majority had started early, namely from elementary to high school, but the majority were in their teens. LGBT groups are also abusers of drugs; the consumption of alcoholic beverages has also started since school age. The magnitude of the environmental influence and the comfort factor makes it difficult for the LGBT group to get out of this condition. The demand for health services for the LGBT group

in the city of Padang in this study is mostly good. It can be seen from the desire of the LGBT group, most of which are already good.

However, from four informants, only one informant whose demand is not good. This is manifested in demand, namely requests for health services by actively seeking and using existing health services such as routinely conducting outpatient treatment and health checks, but not all LGBT people are active in making health requests. Only lesbian, gay, and transgender people are active while bisexuals are not active in making health requests. This demand mainly arises when the LGBT group is detected with certain diseases, so prevention is not when healthy but preventive when sick so that the disease does not worsen.

LGBT groups need extra treatment and special attention from the government and health workers and the surrounding environment by providing information about the prevention, mode of transmission, and treatment of STDs, STIs, and HIV/AIDS to prevent them from transmitting the disease. It is hoped that the LGBT group can increase their awareness of health by regularly checking their health and maintaining a healthy lifestyle. Non-governmental organizations are expected to increase the reach of mentoring and outreach services to the community. Health service providers are expected to provide sex education, promote the prevention of STDs and HIV/AIDS and take action if they are already positive for HIV/AIDS. Promotion is carried out in at-risk groups. And can be more proactive in promoting health services and health facilities that are currently available to be better utilized by LGBT people.

References

- Satrio, FXC. Interaksi Kaum Lesbian dan Jurnalis dalam Pemberitaan Mengenai Lesbian di Tribun Jogja.com (Studi Deskriptif Kualitatif Mengenai Interaksi Kaum Lesbian dan Jurnalis dalam Pemberitaan Kaum Lesbian di Tribun Jogja.com). S1 thesis, UAJY; 2013
Accessed from : <http://e-journal.uajy.ac.id/1277/>
- Budiarto W. Analysis of Demand for Health Center Health Services in Mojokerta Regency. Health Research Bulletin 1996.
- Center for Disease Control and Prevention. Gay and bisexual Men's Health. Sexually Transmitted Diseases.
Accessed from : Health Care Disparities Among Lesbian, Gay, Bisexual, and Transgender Youth: A Literature Review - PubMed (nih.gov)
Sexually Transmitted Diseases
Accessed from : <https://www.cdc.gov/msmhealth/STD.htm>
- Hasan S, Nasma A. Lets Talk About Love: The Triumvirate.
- Hudaisa Hafees, Muhammad Zeshan, Muhammad A Tahir, Nusrat Jahan and Sadiq Naveed. Health Care Disparities Among Lesbian, Gay, Bisexual, and Transgender Youth: A Literature Review. Cureus. 2017 Apr; 9(4): e1184.
Accessed from : Health Care Disparities Among Lesbian, Gay, Bisexual, and Transgender Youth: A Literature Review - PubMed (nih.gov)
- Juanita. The Effect of Economic Crisis on Health Services, USU Repository; 2006
Accessed from : <http://repository.usu.ac.id/bitstream/handle/123456789/3687/D0101255.pdf;sequence=1>
- Ministry of Women's Empowerment and Child Protection Health Research Center, University of Indonesia. Study report. Transgender Views on Gender Status and Human Rights Equality in Jakarta, Bogor, Depok and Tangerang, 2015. Ministry of Women's Empowerment and Child Protection Health Research Center, University of Indonesia.
Accessed from : <https://www.kemenpppa.go.id/lib/uploads/list/0ea2c-1-laporan-lgbt-transgender-.pdf>
- Kristina S. Information and Homosexuality- Gay (Ethnomethodology Study Regarding Information and Gay in the GAY Community Nusantara Surabaya). FISIP Universitas Airlangga. 2013;02.
- Mukarromah D, Listyani RH. Surabaya City Waria Association in the Frame of "Construction" of HIV-AIDS. Faculty of Social Sciences, State University of Surabaya. 2013;01.

- Noyman L. Global estimates shed light on toll of sexually transmitted infections PLOS ONE: WHO; 2015 [cited 2016 March 03]. Accessed from : <http://www.who.int/>.
- Nurlina. Analysis of Need and Demand for Health Services. 2012.
- Rahma S. Behavior of Seeking Treatment for Sexually Transmitted Infections in Waria in Podo District. Makassar: Hasanuddin University Makassar; 2014.
- Retnaningsing E. Access to Health Services. Jakarta: Rajawali press; 2013.
- Semiun Y. Mental health 2. Yogyakarta: Kasinus; 2006.
- Sinyo. My Son Asks About LGBT. Jakarta: PT. Elex Media Komputindo; 2014.
- Sukirno S. Introduction to Microeconomic Theory. Jakarta: Rajawali press; 2011.
- WHO. World Health Organization LGBT Report: [Globalhealth.gov](http://globalhealth.gov); 2013 [cited 2016 March 03].
- Abidin Z. Factors and Ways of Lifestyle and the Possibility of Recovering among Lesbians: A Health Study. Faculty of Social Sciences and Humanities. 2015;10.
Accessed from : <http://www.answer.com/read/article/id/2015/07/01/188/Rentan-> Published online 2017 Apr 20. doi: 10.7759/cureus.1184
- Germano Mwabu. Demand for Health Care. International Encyclopedia of Public Health (Second Edition); 2017
Accessed from : <https://www.sciencedirect.com/topics/nursing-and-health-professions/health-care-need>
- Kristina, Ackermann. Why American LGBTQ Teens Are More Likely to Abuse Drugs. American Addiction Centers; 2020
Accessed from : <https://americanaddictioncenters.org/lgbtqiapk-addiction/drug-abuse-in-the-lgbtq-teen-community>
- Afolabi, M.O. Dorapale, V.O. Irinoye, A.I, Adegoke, A.A. Health Seeking Behaviour and Student Perception of Health Care Services in a University Community in Nigeria. Health Journal Vol 5;2013 Accessed from : Health-seeking behaviour and student perception of health care services in a university community in Nigeria (scirp.org)