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Lesbian Gay Bisexual Transsexual Self Esteem: Finding and Concerns

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Submission date: 24-Feb-2022 12:37PM (UTC+0700)

Submission ID: 1769722946

File name: 0718017901-2910-Artikel-Plagiasi-24-02-2022.pdf (567.57K)

Word count: 2537

Character count: 12544

Lesbian Gay Bisexual Transsexual Self Esteem: Finding and Concerns

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Abstract. The aim of this study was to identify self-concepts on Lesbian Gay Bisexual and Transsexual (LGBT) in Indonesia. Although LGBT is banned in Indonesia, research shows that many LGBT lives in Indonesia. They accept their condition and consider it a gift, but they feel uncomfortable when traveling everywhere, and also often excluded, they do not have obstacles in self-development. They feel equal to others because their income and work are the same as other people's, they can work and help others and start a business. Most LGBT say they are embarrassed and sad towards people being ridiculed, sometimes angry. They also said could not show their identities openly, only a small LGBT could show openly and that was because the community knew first before they showed. They do not want to be a normal and assume that it was a gift from God.

Keywords: LGBT, Self Esteem, Concerns.

1. INTRODUCTION

LGBT is a social phenomenon that emerged in the early 90s and is increasingly developing in people's lives (15) The LGBT issue has again become a global topic due to the United States on June 26, 2016 which legalized same-sex marriage in 50 states in the United States. From the legalization of the marriage, it turned out to have a significant impact on LGBT communities in various countries to fight for desires that could be legally recognized by the state and could legally carry out same-sex marriages. Even health professional already be prepared to handle LGBT individuals [1]

Indonesia forbid LGBT. LGBT individuals are considered to have social welfare problems because their sexual behavior is obstructed in social life. The Indonesian Ulema Council (IUC) agreed on a fatwa about LGBT that included several some provisions that same-sex sexual orientation was not a gift from God but a disorder that had to be cured. LGBT is haraam and it is a

crime so that LGBT can be punished by the authorities [2]

It can be found also in Philippines, Filipino lesbians, gays, bisexuals and transgender (LGBT) individuals are subjected to discrimination, prejudice and stigma from society, which in turn may contribute to poor mental health [3]

Violation of law and norms about LGBT will have an impact in the form of rejection in the social community so it is not accepted in daily relationships with other people, and limited social interaction in the community. According to Dacholfany [4], LGBT behavior raises health problems such as 78% of people infected with sexually transmitted diseases. The average age of health person who was married is 75 years, while the average age of LGBT is 42 years old and decreases to 39 years if LGBT with HIV-AIDS is included to the proportion [4].

LGBT problems caused negative self-concept for the people. The self-concept or individual's perception of him has an important role for the individual because it can influence the behavior that arises and the mental health of

that individual himself. A research was conducted by Azizah [5], shows that self-concepts on homosexual students are negative self-concepts. This happens because of the imbalance between the positive self-concept of homosexual students and the community's self-concept. Society still thinks that homosexual phenomena violate religious and social norms that exist in the community. The purpose of this study is to find out how self-concept on LGBT individuals.

2. METHOD

2.1. Design

In this study the design was used qualitative with a phenomenological approach.

2.2. Participant

Participants in this study were 18 LGB people, which constituted the total LGB in the group. All participants agreed to be the subject of this study, and signed an agreement to be the subject of the study, they were contacted by research assistants for in-depth interviews, selected participants who became lesbian, gay, bisexual, interview be recorded and transcribed.

This research is located on the Kangean Island, that is part of the province of East Java in the Indonesia, Kangean is an island about 100 km from Sumenep. Existing transportation was a ship that takes about 9 to 10 hours.

2.3. Ethical approval

All participants were given informed consent, this study had passed ethical conduct from the Health Sciences Faculty of Wiraraja University

2.4. Data collection

Data collection was in-depth interviews about self-esteem on LGB, in the study area, the main questions of in-depth interviews in this study are

2.5. Data analysis

Thematic analysis was used in this study, then result of the interview was transcribed, being read over and over again and then given code, after being given a code grouped on the same idea, then giving the name of the theme, all members of the researchers then gathered to determine the results of the theme, and equate perceptions, then look for relationships between themes.

2.6. Prolonged engagement.

In this research, one of the researchers and primary data collectors were local resident, who has interacted with LGB for more than 20 years, so that the data collection was done easily even though the data collected was sensitive data. Researchers interview directly and also by telephone if the participant does not want to be suspected during the interview.

2.7. Rigour

To obtain the valid data, the research was carried out carefully, this research pays attention to credibility, transferability and dependability, to obtain credible data researchers conduct data coding independently then discuss with members of the researchers to obtain the mes, data triangulation was also carried out to obtain credible data by comparing the results of interviews with the results of observations and theories also previous research.

Transferability was done by displaying data clearly and simply, so that the reader can find out the similarities and differences between research and clinical practice settings. Dependability was done by explaining research methods and collecting data through data analysis.

3. RESULT

The results showed that the majority of respondents were gay, with age 21-40 years. Most respondents had basic education with the most work as laborers, farmers, fisherman.

Table 1

Category	Frequency (f)	Percentage (%)
LGBT		
Lesbian	6	14,3%
Gay	10	71,4%
Bisexual	2	14,3%
Age		

<20	3	14,3%
21-40	12	71,4%
>40	3	14,3%
Education		
Elementary School, Junior High School	10	57%
Senior High School, Collage	8	42,9%
Job		
Entrepreneur	3	14,3%
Unemployment	3	14,3%
Laborer/farmer/fisherman	12	71,4%

3.1. Self Acceptance

Respondents with his physical appearance match their desires, (gays who act as men) accept this condition because respondents say there is no change on themselves, and do not want to change their appearance.

An interview excerpts as follows

“Because of my appearance is still a man, I don’t change my appearance (Resp. I/41 y.o)”

“I don’t know how to say it, but if I must be honest, at the first time I feel sad why I must be born this way, but now I can be happy to accept myself because I believe if this condition is a gift from God. (Resp. V/ 32 y.o)”

but a respondent who have a tendency to want to change their sex say they cannot accept his changes.

“I’m clearly not happy, because I want to be like other people, but what can I do. (Resp. J/ 29 y.o)”

3.2. Fear, stigma, exclusion and limitations

Respondents said they were afraid of having to gather with many people, because people were often made fun of them, so it was not convenient to go anywhere, and was also often ostracized but they said still could work and help others.

“I was often be mocked, especially if I walk alone at an area that so many people (Resp. J/ 29 y.o)”

“Really difficult, I wish I can get along with other people, but I’ve been mocked seldomly (Resp. J/ 29 y.o)”

3.3. Development of Self Potential

Almost all of respondents work, they feel there are no obstacles in self-development and there are those who set up a barber shop and then teach women around them to dress up, they feel useful for those around him.

“Alhamdulillah I can earn money, although still not enough to another necessary, but I can get food (Resp. A/ 32 y.o)”

“I have a barber shop, and I can earn my income from that shop (Resp. L/41 y.o)”

“Just if I get wedding invitation or an event, I’ve get paid if I help to dress them up in the wedding invitation, if usual event usually I don’t get paid (Resp. L/41 y.o)”

3.4. Desires to be accepted by the community and family

All respondents want to be accepted by the community, and live peacefully and get together with family, and have a family like the others, they also hope that there is a solution so that the conditions are accepted by the community, they try to interact with the community, but some of them are already ignorant and surrender if the community isolates them, so that only a few of LGBT individuals are active in social activities.

“Yes, so we can live quietly (Resp. J/ 29 y.o)”

“Of course, so I can live like other people (Resp. A/ 32 y.o)”

3.5. Feeling equal to others

They feel equal to others because their income and job are the same as another people.

“In term of income, I got equal or even more than other people, because I have a barber shop (Resp. L/41 y.o)”

“Yes, it’s same, although I used to be like this, I still can earn money (Resp. T/ 28 y.o)”

3.6. Feeling ashamed and angry also sad

Most respondents said they were ashamed and sad about their condition, and sometimes they felt angry and

embarrassed when they were ridiculed by people. They said they were sad because of the community's treatment. They were also sad because their family also got ridicule from the community.

"Still feel ashamed, moreover when family time and then.... (Resp. V/32 y.o)"

"I feel ashamed and angry when meet many people at the street and I've got mocked (Resp. A/ 32 y.o)"

"I feel ashamed because people always make fun of me, especially when time to dress up, hehe... (Resp I/ 34 y.o)"

"We are human, of course we feel sad (Resp. J/ 29 y.o)"

"I'm sad, can't talk, that's hurt me (Resp. T/ 28 y.o)"

But, some of them were not ashamed.

"That's already common for me, I be myself so why must I feel ashamed, don't I? (Resp. T/28 y.o)"

"I feel like usual because with this condition, I can have a business (Resp. L/41 y.o)"

3.7. Showing Identity

Almost all of respondents said they were shy and could not show their identities openly. only a small portion could show openly, even they were not shy because the community knew about their abnormal orientation first before they showed it of.

"Since long time ago, people already know about me, for the first time I've hid it but then I have this (Resp. L/41 y.o)"

"I still can't do that yet, I'm shy (Resp. M/ 19 y.o)"

"I didn't dare, I'm afraid with my family (Resp. A/ 32 y.o)"

3.8. Desire to be Normal

Most respondents said that they did not want to go back to the way they were and considered that the situation was a gift from God.

"Long time ago I've thought to be normal, but now I accept myself, this is from I was born, so what can I do? (Resp. L/41 y.o)"

"I think I've live normal, because it is already from I've born (Resp. M/ 19 y.o)"

4. DISCUSSION

Violation of law and norms about LGBT certainly has an impact in the form of rejection in the general community so that is not accepted in everyday relationships, and association is only limited to the community. According to Dacholfany [4], LGBT behavior raises health problems in the form of 78% of people infected with sexually transmitted diseases. LGBT problems result in negative self-concept of the individuals. The self-concept or individual's perception of him has an important role for the individual because it can influence the behavior that is raised and mental health of the individual. Previous research shows that self-concept in homosexual students is negative self-concept. This happens because of the imbalance between the positive self-concept of homosexual students and the community's self-concept. Society still thinks that the homosexual phenomenon violates religious and social norms that exist in the community [1].

Individual behavior will be in accordance with the way the individual sees himself. Individuals who have negative self-concepts tend to have poor mental health such as feeling depressed, isolated from the environment and feel life is meaningless [6]. LGBT can no longer view and judge themselves rationally based on gift (religion), state legal products, and social norms. Based on S. C. Roy's Adaptation Nursing theory approach, psychological integrity (self-concept) is one of the four adaptation models that must be achieved. Can the input of the LGBT adaptation process affect the level of ability to respond positively to himself so that it will form self-concepts and behaviors that do not deviate?

5. CONCLUSION

Efforts to overcome LGBT problems are done through counseling on gender status that is non-discriminatory or non-judgmental. Nurses can involve families, religious leaders, and community leaders to raise awareness with the approach method. The involvement of family, religious leaders, and community leaders is an important domain in shaping positive self-concepts of LGBT because they are a social environment part of the integration of social support.

REFERENCES

- [1] B. M. S and B. C. A. C. O. S. S. A, *Toward Defining, Measuring, and Evaluating LGBT Cultural Competence for Psychologists*. USA: Wiley Library, 2015.

- [2] *Indonesian Ulema Council 2014 Fatwa Number 57 Year 2014 about LGBT*. Indonesia: Ministry of Religious Affairs.
- [3] R. M. E. L. P. J. L. E. N. T. E. F. T. E. R and T. P. J., *Self-Stigma, Self-Concept Clarity, and Mental Health Status of Filipino LGBT Individuals*. Philippines: North American Journal of Psychology, 2015.
- [4] I. Dacholfany, "LGBT dan Antisipasinya di Masyarakat," *NIZHAM*, vol. 05, no. 01, 2016.
- [5] S. N. Azizah, "Konsep Diri Homoseksual di Kalangan Mahasiswa di Kota Semarang (Studi Kasus Mahasiswa Homoseksual di Kawasan Simpanglima Semarang)," *Journal of Non Formal Education and Community Empowerment*, 2103.
- [6] Sunaryo, *Psikologi untuk Keperawatan*. Jakarta: Penerbit Buku Kedokteran EGC, 2004.

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