Research Article

BEYOND STIGMA: UNDERSTANDING ASSOCIATIVE INTERACTIONS AMONG EX-LEPROSY PATIENTS IN SUMBERGLAGAH VILLAGE, MOJOKERTO REGENCY

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ABSTRACT

This study delves into the associative interactions among ex-leprosy patients in Sumberglagah Village, Mojokerto Regency, with a focus on understanding social dynamics beyond stigma. Through qualitative inquiry, including interviews and participant observation, the research explores how ex-leprosy patients navigate social relationships and construct supportive networks within their community. Findings reveal nuanced patterns of associative interactions, highlighting the resilience and agency of ex-leprosy patients in fostering social bonds and overcoming societal barriers. By shedding light on these dynamics, this study contributes to broader efforts aimed at promoting social inclusion and challenging stigmatization of individuals affected by leprosy.

KEYWORDS

Ex-leprosy patients, Associative interactions, Social dynamics, Stigma, Social inclusion, Support networks, Sumberglagah Village, Mojokerto Regency.

INTRODUCTION

Leprosy, historically one of the most stigmatized diseases, continues to cast a shadow over individuals and communities despite significant medical advancements and efforts to eliminate it as a public health threat. In Sumberglagah Village, Mojokerto Regency, ex-leprosy patients confront the enduring legacy of stigma and discrimination, yet their experiences also reveal a remarkable resilience and capacity for forging meaningful social connections.

Against this backdrop, this study aims to explore the associative interactions among ex-leprosy patients in Sumberglagah Village, delving into the intricate social dynamics that underpin their relationships beyond the

confines of stigma. By examining the ways in which ex-leprosy patients navigate social interactions and construct supportive networks within their community, this research seeks to shed light on the lived experiences and agency of individuals affected by leprosy.

Sumberglagah Village serves as a microcosm of broader societal attitudes towards leprosy and those affected by it. Despite advances in medical treatment and the eradication of leprosy as a public health threat, deeply ingrained stereotypes and misconceptions persist, contributing to the marginalization of ex-leprosy patients and hindering their full participation in community life.

The significance of this study lies in its potential to challenge prevailing narratives of stigma and victimization associated with leprosy, offering insights into the resilience and resourcefulness of ex-leprosy patients in fostering social inclusion and support networks. By amplifying the voices of ex-leprosy patients and documenting their experiences, this research seeks to contribute to broader efforts aimed at promoting dignity, equality, and social justice for individuals affected by leprosy.

In the following sections, we will explore the methodology employed to investigate associative interactions among ex-leprosy patients, review relevant literature on stigma and social dynamics in the context of leprosy, and present the findings and implications of this study for advancing understanding and advocacy in the field of leprosy rehabilitation and social integration.

METHOD

The exploration into associative interactions among ex-leprosy patients in Sumberglagah Village, Mojokerto Regency, unfolded through a meticulous and immersive process. Initially, participant selection commenced with the establishment of rapport and trust within the ex-leprosy patient community. Through purposive sampling, a diverse range of participants spanning various demographic backgrounds and lengths of time since leprosy diagnosis was engaged to ensure comprehensive representation of experiences and perspectives.

Data collection encompassed a multifaceted approach blending semi-structured interviews and participant observation. Semi-structured interviews provided a platform for participants to articulate their narratives, recount personal experiences, and express insights into the intricate social dynamics at play within the community. Simultaneously, participant observation afforded the researcher a firsthand glimpse into the daily lives, interactions, and relational dynamics among ex-leprosy patients, enriching the qualitative data with nuanced observations and contextual understanding.

Interview questions, crafted with sensitivity and cultural awareness, delved into themes of stigma, discrimination, social support networks, and resilience strategies. Conducted in Bahasa Indonesia, the local language, interviews facilitated authentic and meaningful dialogue, fostering an environment conducive to open expression and trust-building.

Thematic analysis served as the cornerstone of data analysis, involving the systematic identification, coding, and interpretation of recurring patterns, themes, and connections within the qualitative dataset. Through an iterative process of coding and categorization, themes emerged organically, illuminating the complexities and nuances of associative interactions among ex-leprosy patients in Sumberglagah Village.

Ethical considerations were paramount throughout the research process, with measures in place to safeguard participant confidentiality, privacy, and autonomy. Informed consent was obtained from all participants, and ethical approval was secured from the relevant authorities prior to data collection. Reflexivity guided the researcher in critically examining their own biases, assumptions, and positionalities, enhancing the integrity and credibility of the study findings.

While the study may have inherent limitations in terms of generalizability and scope, the rich and nuanced insights gleaned from the research process offer valuable contributions to understanding associative interactions among ex-leprosy patients in Sumberglagah Village. These insights hold potential implications for informing advocacy efforts, promoting social inclusion, and challenging prevailing narratives of stigma and discrimination associated with leprosy in the broader societal context.

Participants for this study were selected from the ex-leprosy patient community in Sumberglagah Village, Mojokerto Regency. A purposive sampling technique was employed to ensure representation across different age groups, gender identities, and lengths of time since leprosy diagnosis. This approach aimed to capture diverse perspectives and experiences within the ex-leprosy patient population.

Qualitative research methods, including semi-structured interviews and participant observation, were utilized to gather rich and in-depth insights into associative interactions among ex-leprosy patients. Semi-structured interviews provided a platform for participants to share their personal narratives, experiences, and perspectives on social relationships and support networks. Participant observation allowed the researcher to immerse themselves in the daily lives and social interactions of ex-leprosy patients, capturing nuanced aspects of their associative dynamics.

Interview questions were designed to explore a range of themes, including experiences of stigma and discrimination, strategies for coping and resilience, sources of social support, and the role of community networks in fostering inclusion. Interviews were conducted in Bahasa Indonesia, the local language, to ensure effective communication and cultural sensitivity.

Thematic analysis was employed to analyze the qualitative data obtained from interviews and participant observation. This iterative process involved the systematic coding and categorization of data to identify recurring themes, patterns, and relationships within the dataset. Through a collaborative and reflexive approach, themes were refined and interpreted to generate meaningful insights into associative interactions among ex-leprosy patients.

Rigorous attention was paid to ensuring the trustworthiness and credibility of the findings through techniques such as member checking, peer debriefing, and reflexivity. Member checking involved seeking feedback from participants to validate the accuracy and interpretation of their narratives. Peer debriefing involved engaging with colleagues to critically examine the analysis process and interpretations. Reflexivity encouraged the researcher to acknowledge and critically reflect on their own biases, assumptions, and positionality throughout the research process.

Ethical approval was obtained from the relevant institutional review board prior to commencing data collection. Informed consent was obtained from all participants, and measures were implemented to ensure confidentiality, anonymity, and privacy

throughout the study. Participants were informed of their right to withdraw from the study at any time without consequence.

While efforts were made to capture diverse perspectives within the ex-leprosy patient community, the findings may not fully represent the experiences of all individuals affected by leprosy in Sumberglagah Village. Additionally, the qualitative nature of the study limits generalizability to other contexts. However, the rich and nuanced insights obtained provide valuable contributions to understanding associative interactions among ex-leprosy patients in the local context.

RESULTS

The investigation into associative interactions among ex-leprosy patients in Sumberglagah Village, Mojokerto Regency, revealed a complex tapestry of social dynamics, resilience, and agency within the community. Through qualitative inquiry, participants articulated diverse experiences and perspectives, shedding light on the multifaceted nature of relationships beyond the confines of stigma.

Themes of solidarity, mutual support, and resilience emerged prominently in participants' narratives, underscoring the importance of associative interactions in mitigating the impact of stigma and fostering a sense of belonging and acceptance within the community. Participants described informal networks of support and solidarity, characterized by empathy, understanding, and shared experiences of overcoming adversity.

DISCUSSION

The findings highlight the transformative potential of associative interactions among ex-leprosy patients, challenging prevailing narratives of stigma and victimization associated with leprosy. By forging meaningful connections and support networks, ex-leprosy patients in Sumberglagah Village demonstrate resilience and agency in reclaiming their social identities and challenging societal norms that perpetuate discrimination.

Moreover, the study elucidates the role of community solidarity and collective action in promoting social inclusion and advocating for the rights and dignity of individuals affected by leprosy. Through collaborative efforts and mutual support, participants navigate the complexities of stigma and discrimination, asserting their agency and reclaiming their place within the social fabric of the village.

CONCLUSION

In conclusion, the exploration into associative interactions among ex-leprosy patients in Sumberglagah Village offers valuable insights into the transformative power of solidarity, resilience, and agency in confronting stigma and fostering social inclusion. By amplifying the voices and experiences of ex-leprosy patients, this study challenges prevailing narratives of victimization and highlights the inherent strength and resilience within the community.

Moving forward, initiatives aimed at promoting social inclusion and challenging stigma must prioritize the voices and agency of individuals affected by leprosy, centering their experiences and perspectives in advocacy efforts and policy interventions. By fostering a culture of empathy, understanding, and solidarity, we can collectively strive towards a more inclusive and equitable society, where all individuals are valued, respected, and afforded the dignity they deserve.

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