

Digital Preaching in HIV/AIDS Prevention: An Analysis of Engagement on @victoryplus.yogyakarta

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Abstract - This study examines a local case of HIV/AIDS prevention and stigma reduction in Yogyakarta, Indonesia, focusing on the role of the Victory Plus Yogyakarta Foundation in integrating social and religious approaches. HIV/AIDS prevention programs in Indonesia continue to face major challenges, including unequal access to health services, social inequality, and persistent stigma against people living with HIV/AIDS (PLWHA). This study aims to analyze the role of religious leaders in HIV/AIDS prevention from both global and local perspectives, as well as the role of religious leadership within the Victory Plus Yogyakarta Foundation. Employing a constructivist paradigm and a qualitative approach, the research uses in-depth interviews, literature reviews, and data and source triangulation. The theoretical framework is based on Jan Servaes' development communication perspective, which emphasizes the interaction between global and local dimensions and the importance of participatory social actors. The study is further enriched by Patchanee Malikhao's perspective on the strategic role of religious leaders in health communication. The findings show that HIV/AIDS prevention efforts continue to encounter barriers such as limited public participation, unequal access to services, and persistent stigma toward PLWHA. Nevertheless, the digital da'wah communication approach implemented by the Victory Plus Yogyakarta Foundation has proven effective in increasing public awareness, reducing stigma, and encouraging empathy and social acceptance. Religious leaders play a strategic role in communicating humanistic moral values, although capacity-building remains necessary to prevent the reproduction of stigmatizing narratives. This study contributes theoretically by integrating Jan Servaes' participatory development communication framework with Patchanee Malikhao's faith-based health communication perspective, offering a new perspective on inclusive and culturally grounded HIV/AIDS communication strategies in local religious communities.

Keywords: HIV/AIDS, Social Stigma, Prevention, Religious Perspective, Digital Media

INTRODUCTION

HIV is a retrovirus that attacks CD4+ T cells and weakens the immune system, potentially leading to AIDS. Generally, there are two main types of HIV: HIV-1, which accounts for the majority of global cases, and HIV-2, which is more prevalent in West Africa (Fauk et al., 2022). Currently, an estimated 38 million people worldwide are living with HIV (Lindegger, 2024), making HIV/AIDS a significant global health issue. However, the spread of HIV is not solely influenced by individual behavior, but also by the social, cultural, and environmental contexts in which individuals live (Pickles et al., 2025). Cultural beliefs and values also influence prevention behavior, particularly among adolescents, so educational strategies need to be tailored to the cultural and gender context (Stevenson et al., 1995).

Furthermore, one of the main challenges in combating HIV/AIDS is the stigma against people living with HIV (PLWHA), which has been shown to impact various aspects of life significantly. High levels of stigma correlate with a lower quality of life for people living with HIV (Desyani et al., 2019), reduced adherence to antiretroviral (ARV) therapy, particularly among women (Nurfalah et al., 2019), and negatively impacted mental health, medication adherence, and overall social support (Rueda et al., 2016). This situation demonstrates that HIV/AIDS prevention requires not only a medical approach, but also social and communication interventions that can overcome stigma and build a more comprehensive public understanding.

Religious institutions' HIV/AIDS prevention responses are influenced by faith, policy, and professionalism, often contradicting national policies (Morgan et al., 2014). Spirituality helps older adults with HIV cope with stigma and stress and achieve healthy aging (Vance et al., 2011). Apostolic religious groups in Zimbabwe have lower HIV awareness and knowledge than other religious groups, necessitating HIV prevention programs tailored to their religious context (Mapingure et al., 2021). High religiosity among Ugandan youth is associated with lower HIV risk behaviors (Kagimu et al., 2012). Religious beliefs in Africa influence HIV prevention attitudes and behaviors, particularly regarding sexuality and condoms (Mpofu et al., 2014). Spiritual support improves quality of life and reduces internalized stigma in people with HIV (Mat Min et al., 2020).

The use of digital media can increase public awareness and knowledge about HIV/AIDS while simultaneously reducing stigma by disseminating educational information (Ngcobo & Zhandire, 2025). Empathetic and transparent health communication strategies on social media increase public trust and participation (Wu et al., 2025). WeChat has become the primary platform for Chinese people to obtain health information, but the public desires more professional and personalized education (Zhang et al., 2017). Most public health departments still use social media primarily to disseminate information, rather than to engage with the public (Thackeray et al., 2012). Patients tend to be less trusting of AI chatbots due to concerns about privacy, accuracy, and stigma (Garett et al., 2024). The Aspark platform, with its precision-matching system, was developed to strengthen social support and improve the quality of life for people living with HIV (Xie et al., 2024). Online platforms help people living with HIV (PLWHA) address stigma, and family interventions are effective, though limited (Njejimana et al., 2021).

Religious leaders play a crucial role in HIV prevention in Latin America and the Caribbean through education, moral advocacy, and reducing stigma against people living with HIV (Luévano-Flores & Moral-de la Rubia, 2017). In Malawi, religious leaders play a crucial role in raising awareness among congregations about HIV testing and are key to expanding access to HIV services through support from faith communities (Banda Kamanga et al., 2023). Religion and spirituality influence HIV prevention through moral norms and sexual behavior, but sometimes hinder condom education (Drumhiller et al., 2018).

Social media is a key tool used by groups (usually MSM) to select partners because it provides information about social realities and digital communication patterns related to HIV (Mboussi et al., 2023). Social media plays a significant role in shaping public perceptions of HIV, both positive and negative (Crowley et al., 2024). Social media can be a strategic tool for changing health behaviors when designed with an integrated approach and evaluated against tangible outcomes (Freeman et al., 2015). Positive social media posts can increase people's happiness and raise their awareness of healthcare violations (Zeng & Li, 2020). HIV prevention information on social media is the most influential, highlighting the importance of digital media for religious health education (Li et al., 2025). A social media-based HIV support intervention increased knowledge and emotional support among adolescents living with HIV, although it did not significantly improve treatment retention (Dulli et al., 2020). Social

media is a low-cost, widely used public health strategy for increasing knowledge and changing health behaviors (Agegnehu & Tesema, 2020).

HIV stigma manifests as internal stigma, such as shame and reluctance to seek help, and external stigma, such as negative judgment from others (Aghaei et al., 2023). Peer education is effective in reducing HIV risk and fostering preventive behaviors in high-risk groups (He et al., 2020). Social isolation is common among people with HIV and is influenced by mental health factors, violence, and housing instability, while community support can mitigate it (Marzali et al., 2021).

Several studies have discussed digital da'wah in the context of social media (Dunn Navarra et al., 2024), and there are also studies on health communication on digital platforms (Han et al., 2023). However, research specifically highlighting the involvement of digital da'wah in HIV/AIDS issues is still very limited. Few studies link da'wah practices to community-based health social movements like Victory Plus Jogja. This opens up new research opportunities that combine the perspectives of da'wah, public health, and digital communication.

This study uses Jan Servaes' development communication perspective to analyze how religious narratives are constructed and disseminated through digital media as part of community-based HIV/AIDS prevention efforts. This approach positions communities and social actors, including religious leaders, as active subjects in a participatory and contextual communication process. In the context of the Victory Plus Yogyakarta Foundation, development communication theory is used to examine how digital da'wah functions not only as a medium for conveying moral messages but also as a space for negotiating meaning, reducing stigma, and building social solidarity for people living with HIV/AIDS (PLWHA). Thus, this study seeks to demonstrate that religious communication in the digital space can serve as an inclusive and value-based health communication strategy. A research gap remains in the limited exploration of how digital da'wah can be applied effectively and inclusively in HIV/AIDS prevention campaigns, particularly within community-based religious movements. Therefore, this study offers a novel approach by integrating netnography to understand patterns of interaction and the construction of meaning on social media, while also examining how the @victoryplusjogja communication strategy combines religious and educational narratives to foster public awareness, empathy, and stigma reduction toward PLWHA.

THEORETICAL FRAMEWORKS

Global Perspective

Globally, religious leaders play a crucial role in conveying HIV/AIDS prevention messages by emphasizing moral responsibility and humanitarian values. However, prevention strategies such as ABC face differing views, particularly regarding condom use, which conservative churches often reject. At the same time, other groups and international organizations favor an inclusive, public health-based approach. This highlights the tension between religious values and scientific approaches in HIV/AIDS prevention efforts globally. Efforts to understand and address HIV/AIDS issues by viewing religion as an agent of social change across cultures and religions are crucial for preventing this global problem (Servaes, 2008). International organizations are focused on addressing the growing HIV/AIDS epidemic, including in Indonesia. This issue requires cooperation, resources, and shared support to prevent its spread and expand access to health services (Fauk et al., 2022). The ability to communicate with partners about condom use is a crucial factor in STI/HIV prevention, as good communication increases condom use and reduces sexual risk (Carmack et al., 2024).

Local Perspective

The localization paradigm in development explains how communities respond to global HIV/AIDS prevention strategies through the relationship between the global and local levels. This process involves four directions: first, the transfer of prevention concepts from international institutions such as the UN and the Vatican to Thailand; second, the transfer of messages from the government and global institutions to local religious organizations; third, the delivery of religious messages from Thai religious institutions to the community; and fourth, the transmission of moral and prevention messages from religious leaders to individuals in the community (Servaes, 2008).

The Role of Religious Leaders

Religious beliefs can either strengthen or hinder HIV prevention efforts, depending on their teachings and implementation (Szaflarski, 2017). HIV cases are rising, but AIDS cases are falling, indicating a successful response, not a failure of religious groups (Junaidah & Bakti, 2022). Dialogue between religious leaders and HIV/AIDS advocates encourages the involvement of religious institutions in HIV prevention, including educational activities and HIV testing tailored to religious values (Sutton & Parks, 2013). Social media-based health interventions help reach hard-to-reach populations, such as people living with HIV (PLWHA), to improve their health outcomes (Ibrahim et al., 2024).

MATERIAL AND METHODOLOGY

This study used a qualitative, netnographic approach to examine the construction and reception of HIV/AIDS prevention messages in digital da'wah communication on the official Instagram account of the Victory Plus Yogyakarta Foundation. A qualitative approach was used to explore phenomena holistically and contextually (Creswell, 2009), while netnography enabled analysis of interactions, symbols, and communication practices within online communities. The research data were obtained from Instagram uploads, including posts, captions, hashtags, and visual materials from January to June 2025. Furthermore, the analysis included five user comments purposively selected to represent audience responses to the messages. The selection was based on the depth of meaning, relevance to the research issue, and their ability to reflect audience reception patterns of digital da'wah narratives. The comments represent variations of audience responses, including emotional appreciation, institutional recognition, and religious meaning-making. The data were analyzed using thematic analysis techniques to identify narrative patterns, communication strategies, and forms of audience engagement in HIV/AIDS prevention.

Although the study analyzed only one audience comment, the selection was conducted purposively within a qualitative netnographic framework that prioritizes depth of interpretation over numerical representation. The selected comment was not intended to statistically represent all audience responses, but rather to serve as a critical example of how digital da'wah messages are interpreted, negotiated, and responded to by Instagram users. In qualitative netnography, a single interaction can provide meaningful insight when it contains reflective, value-laden, and contextually relevant responses to the discourse being examined. The interpretation of this audience response was further strengthened through triangulation with in-depth interviews with the Chairperson of the Victory Plus Foundation, allowing the researchers to compare audience reception with the communicative intentions and institutional perspectives behind the digital campaign.

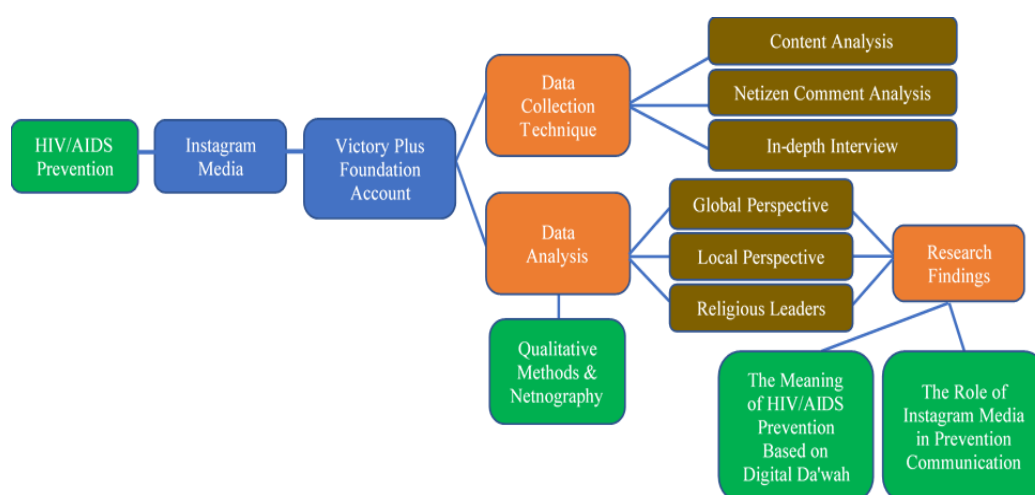


Figure1. Research Framework of Digital Da'wah-Based HIV/AIDS Prevention on Instagram
Source: Authors' work

To enrich the contextual understanding of the digital narrative, researchers conducted semi-structured online interviews with the Chairperson of the Victory Plus Foundation as a key informant. The informant was selected based on her role as a policymaker and her understanding of the

organization's communication strategies and message design. The integration of netnographic observation and interview data enabled a more comprehensive analysis of how faith-based communication and HIV/AIDS prevention messages were constructed and disseminated through Instagram, while also presenting both emic (insider) and etic (researcher) perspectives in the interpretation of the findings.

RESULTS AND DISCUSSION

Global Context in HIV/AIDS Response

This research begins with the context that HIV remains a significant global health issue. The World Health Organization (2024) report shows that HIV transmission continues globally, with the number of people living with HIV remaining high. This situation indicates that HIV/AIDS remains a serious challenge to global public health, necessitating various effective prevention strategies, including digital and religious-based communication approaches.

In this context, this research focuses on digital da'wah communication practices in conveying HIV/AIDS prevention messages through the official Instagram account of the Victory Plus Yogyakarta Foundation as part of its response to this global issue. The global communication approach includes public education through digital media, the involvement of community and religious leaders, and cross-sector campaigns that emphasize stigma reduction and promote healthy lifestyles.

This study places HIV/AIDS in a global context to provide an overview of the scale and trends of the epidemic relevant to local practices in Yogyakarta. According to the latest WHO and UNAIDS report (2024-2025), HIV/AIDS remains a significant public health issue, with millions of people living with HIV worldwide, new infections remaining high, and deaths from AIDS-related illnesses continuing. To address these challenges, various prevention strategies are being implemented globally, including public education through digital media, engagement with community and religious leaders, and cross-sector campaigns that emphasize stigma reduction and the promotion of healthy lifestyles. The following table presents key global data on HIV/AIDS through 2024 and global targets for 2025.

Table 1. Global HIV/AIDS Statistics 2024 and 2025 Targets

Global HIV/AIDS Indicators	Year 2024	Target 2025	Source
People living with HIV (PLWHA)	± 40.8 million	-	UNAIDS 2024
New HIV infections	± 1.3 million	≤ 370,000	UNAIDS 2024
Deaths due to AIDS-related illnesses	± 630.000	-	UNAIDS 2024
People who know their HIV status	± 87%	95%	WHO 2024
PLWHA receiving ART treatment	± 77%	95%	WHO 2024
PLWHA with suppressed viral load	± 73%	95%	WHO 2024

The table shows that despite a decline in new infections and deaths compared to the previous decade, the number of people living with HIV remains high, and the global target of 95, 95, 95 for 2025 has not been fully achieved in many countries. This indicator underscores the need for effective communication strategies, not only for education and prevention, but also to reduce stigma and increase access to HIV/AIDS services. This global data provides an important foundation for adapting local strategies, such as the digital da'wah communication practices implemented by the Victory Plus Foundation in Yogyakarta, where faith-based and community-based approaches are a way to address this global challenge at the local level.

After reviewing the global numerical data in Table 1, it is also important to visualize the HIV/AIDS development trends from 2010 to 2024, as well as the global targets for 2025. This trendline diagram provides a dynamic overview of the changing numbers of new infections and AIDS deaths worldwide, while also highlighting the 95-95-95 targets set by WHO and UNAIDS. This visualization helps readers understand the downward trend in cases, the challenges that remain, and the urgency of effective global prevention strategies.

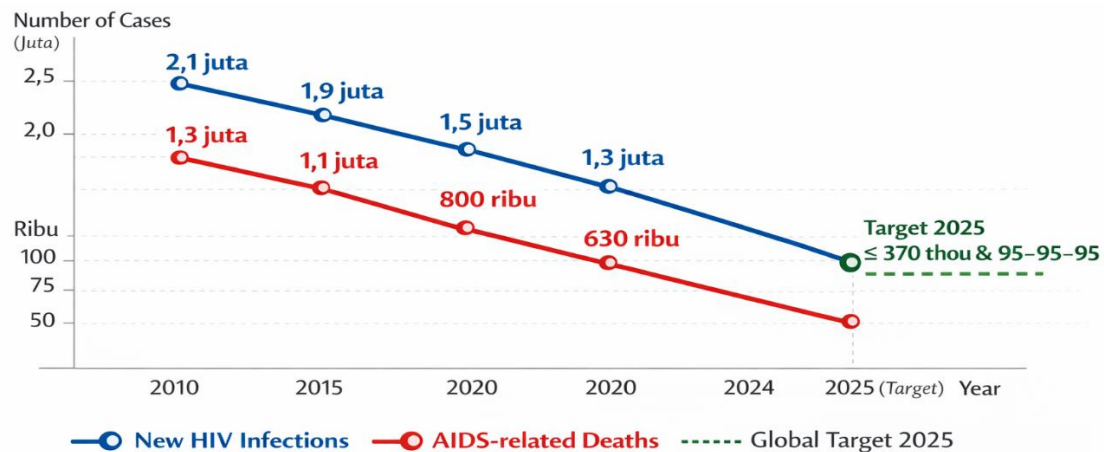


Figure2. Global HIV/AIDS Trends (2010-2024) and 2025 Targets

The trendline diagram shows that the number of new HIV infections and AIDS deaths has decreased significantly since 2010, although the number of people living with HIV remains high. The global target of 95, 95, 95 by 2025 emphasizes the need for improved diagnosis, access to ART therapy, and viral load control to suppress transmission and improve the quality of life for people living with HIV. This global trend serves as an important reference for adapting local strategies, such as the digital da'wah communication practices of the Victory Plus Yogyakarta Foundation, which emphasize community strengthening, psychosocial support, and stigma reduction for people living with HIV through faith-based approaches and digital media.

The global approach includes promoting healthy lifestyles, running stigma-reduction campaigns, providing ARV testing and treatment services, and using digital media to reach diverse community groups. This global practice serves as a reference for the Victory Plus Yogyakarta Foundation, which adapts its digital da'wah-based communication strategies to the local context, adapting them to the culture, social norms, and media most effective for the Yogyakarta community.

In the local context, the Victory Plus Yogyakarta Foundation draws inspiration from this global practice by adopting a digital communication strategy focused on religious outreach to reach the Yogyakarta community, particularly the younger generation and faith-based communities. Therefore, understanding the global context of HIV/AIDS provides a crucial foundation for analyzing the local communication practices implemented by the Victory Plus Yogyakarta Foundation, including the role of religious leaders in digital outreach

The Local Context of HIV/AIDS Response in Yogyakarta

Locally, the dynamics of HIV/AIDS cases are also evident in the Yogyakarta region. Data from the Yogyakarta City Health Office shows that between 2004 and 2024, there were 1,675 cumulative cases of HIV and 329 cases of AIDS. In 2024, from January to September, an additional 92 HIV cases and 14 AIDS cases were recorded. These conditions provide the context for the prevention communication practices implemented by the Victory Plus Yogyakarta Foundation through social media. These figures indicate that despite increasing knowledge about HIV/AIDS, new cases continue to emerge, necessitating an effective communication strategy.

Furthermore, high community mobility is a contributing factor to the spread of HIV. Inter-regional movement opens up opportunities for risky interactions, such as unprotected sex with partners of unknown health status. Furthermore, the presence of entertainment venues can also increase the potential for risky behaviors, such as injecting drug use or unsafe sex. These factors show that HIV/AIDS prevention cannot only rely on a medical approach, but must also take into account the social context and community behavior.

In addition to these structural factors, stigma against people living with HIV/AIDS (PLWHA) remains a major problem. PLWHA often experience discrimination, both in social settings and in accessing health services. Lack of public understanding of HIV/AIDS often leads to shunning and unfair treatment of PLWHA, which results in delayed treatment, poor adherence to therapy, and psychological

distress. This situation demonstrates that social and psychological aspects play an equally important role as medical aspects in HIV/AIDS control.

The analysis shows that stigma against people living with HIV/AIDS (PLWHA) is still influenced by misconceptions about HIV/AIDS, which are often associated with deviant behavior. Limited public knowledge about various transmission routes also reinforces discrimination. This situation poses a challenge to HIV/AIDS control efforts at the local level. Furthermore, PLWHA still face various obstacles in accessing health services, particularly related to limited facilities and economic conditions. Therefore, understanding the local context is key to designing targeted interventions that can reduce stigma and increase access to services.

In response to these issues, the Victory Plus Yogyakarta Foundation developed a social media communication strategy as part of its prevention and stigma-reduction efforts. This strategy emphasizes that communication does not always have to be direct or explicitly educational, but can take a more subtle yet effective approach.

Content displayed in the Victory Plus Yogyakarta Foundation's Instagram posts demonstrates that the communication strategy employed does not always convey explicit health messages related to HIV/AIDS. Instead, the approach tends to be indirect, emphasizing religious aspects and psychosocial support, as seen in community prayer gatherings. This practice represents a form of digital da'wah (Islamic outreach) that emphasizes the values of empathy, togetherness, and spiritual strengthening as part of efforts to build a more inclusive social environment.

Thus, although it does not directly convey education about HIV/AIDS, this content contributes to reducing stigma against people living with HIV/AIDS by fostering positive perceptions and providing social support based on religious communities. Therefore, digital content is an effective medium for building positive perceptions of people living with HIV/AIDS and supporting more inclusive social interactions. This demonstrates that digital content not only conveys messages but also fosters social acceptance at the community level. One user commented.

"So proud of Yogyakarta, direct command from the top leadership, Victory Plus is awesome, and I envy the calm and collected West Java Governor. I want to take action but have no friends, there are lots of discussions but they only end at the table and in the discussion room, after which it becomes quiet again." (@komunitas.sahabat.odha, comment on Instagram @victoryplus.yogyakarta, 2025).

This response reflects appreciation for the role of the Victory Plus Foundation and demonstrates public trust toward the institution's communication approach. The comment also indicates that the integration of religious values and psychosocial support within digital da'wah content is positively received by audiences. One user commented.

"*Komentar sarapan malam yang ndaging sekali*" ("This late-night comment is deeply meaningful"). (@dyaharviyanti, comment on Instagram @victoryplus.yogyakarta, 2025).

Although informal and conversational, this response reflects emotional resonance and audience engagement with the message conveyed through the Victory Plus Foundation's digital da'wah content. The comment suggests that audiences perceive the content not only as informative, but also as emotionally meaningful and socially relatable. This response reflects appreciation for the role of the Victory Plus Foundation and demonstrates public trust toward the institution's communication approach. The comment also indicates that the integration of religious values and psychosocial support within digital da'wah content is positively received by audiences. Another audience member commented.

"*Selamat ulang tahun ya Victory Plus Yogya semoga tetap semangat dalam memperjuangkan teman-teman ODHA dan membantu dalam pengobatan dan aksesnya*" ("Happy anniversary to Victory Plus Yogyakarta. Keep up the spirit in supporting people living with HIV/AIDS and helping them with treatment and access to healthcare"). (@ykslametsumantri, comment on Instagram @victoryplus.yogyakarta, 2025).

This response reflects audience appreciation and public recognition of the Victory Plus Foundation's role in supporting PLWHA. It also demonstrates how audiences perceive the institution

as a source of empathy, psychosocial support, and advocacy for people living with HIV/AIDS. In addition to emotional engagement, several audience responses also demonstrate public appreciation for the consistency and community-based approach of the Victory Plus Foundation in HIV/AIDS prevention efforts.

“Terimakasih atas ketekunan, semangat dan kekonsistennnya bergerak di penanggulangan HIV yang berasal dari komunitas” (“Thank you for the perseverance, spirit, and consistency in carrying out community-based HIV prevention efforts”). (@ronaldjonathan6329, comment on Instagram @victoryplus.yogyakarta, 2025).

This response reflects public recognition of the Victory Plus Foundation’s long-term commitment and community-based approach in HIV/AIDS prevention. The comment also indicates that audiences perceive the institution as a credible and socially engaged actor in supporting PLWHA and promoting HIV awareness within the community. Another audience response also reflected the spiritual interpretation of the content conveyed through the Victory Plus Foundation’s digital da’wah communication.

“Biarlah terangmu bercahaya dan orang melihat perbuatanmu yang baik memuliakan Allah pencipta langit bumi” (“Let your light shine so that people may see your good deeds and glorify God, the Creator of heaven and earth”). (@dewi.y.linarto, comment on Instagram @victoryplus.yogyakarta, 2025).

This response demonstrates how audiences interpret the Foundation’s activities not only as social or health-related efforts, but also as religiously meaningful actions associated with compassion, goodness, and spiritual values. These audience responses indicate that digital da’wah communication does not merely function as information dissemination, but also creates emotional engagement and participatory interaction within digital spaces. Through comments and reposts, audiences actively participate in reproducing meanings of empathy, spirituality, and solidarity toward PLWHA. This finding reinforces the participatory nature of digital da’wah communication, where followers become part of the process of constructing inclusive social perceptions toward HIV/AIDS issues. One example of this practice can be seen in the content uploaded to the Victory Plus Yogyakarta Foundation Instagram account, as shown in the following image.



Figure 3. Instagram Content of the Victory Plus Yogyakarta Foundation Prayer Fellowship
Source: Instagram @victoryplus.yogyakarta, 2025

These practices can be seen not only in digital content but also in real-life activities posted on social media, as explained by the Chairperson of the Victory Plus Yogyakarta Foundation, who outlined the implementation of prayer fellowships as a form of psychosocial and spiritual support. These visual findings were reinforced by an interview with the Chairperson of the Victory Plus Yogyakarta Foundation, who explained the psychosocial and spiritual support practices they implement.

"As explained by Utami, Chair of the Victory Plus Foundation, we have a prayer team that goes around the inpatient wards. We believe that medical care is quite sophisticated in Indonesia, but social support in the form of psychosocial support in the form of prayer and spiritual strengthening is also needed in addition

to medical support. We walk from ward to ward, to provide prayer support. And we have a prayer fellowship community every Thursday, the term for spiritual strengthening, involving religious leaders." Utami, Interview with Chair of the Victory Plus Foundation, May 20, 2025.

This statement demonstrates that spiritual strengthening and psychosocial support are integral parts of communication strategies, which simultaneously support the sustainability of treatment for people living with HIV/AIDS (PLWHA). In addition to these supportive practices, research findings also indicate challenges in the provision of services to people living with HIV/AIDS (PLWHA). The government has an obligation to protect people living with HIV/AIDS (PLWHA) as a vulnerable group, yet research findings indicate that the services received are not entirely welcoming.

This is reflected in the continued rejection by some health workers and family members. Furthermore, in social life, PLWHA tend to be treated differently and experience higher levels of stigma compared to patients with other diseases, such as tuberculosis, even though the disease is relatively contagious. This emphasizes that legal and social protection for PLWHA must be balanced with education that changes public perceptions.

"Externally, we collaborate with Islamic boarding schools and the Ministry of Religious Affairs, for example. But over the past two years, due to program efficiency cuts, we've stopped working. Previously, we were providing HIV and AIDS education to Islamic boarding schools and madrasas. So, we're interconnected with various religions? Yes, for patients with various care, patients with advanced stages, we call it spiritual strengthening, providing a foundation for them to believe that, besides human strength, we have extraordinary powers out there. Regardless of religion, we reach out universally." Utami, Interview with the Chairperson of the Victory Plus Foundation, May 20, 2025.

People living with HIV/AIDS (PLWHA) still frequently experience discrimination in healthcare, which hinders access to treatment and reduces the continuity of care. Furthermore, the prevailing negative stigma in society makes some people living with HIV/AIDS reluctant to disclose their health status. This presents a challenge in HIV/AIDS management, as disclosure significantly impacts access to appropriate healthcare services and treatment success. Although HIV therapy does not provide a complete cure, adherence to regular treatment can boost immunity and help control the risk of transmission. Therefore, care for people living with HIV/AIDS (PLWHA) must be comprehensive, integrating medical, psychosocial, and educational aspects.

To address these challenges, the strategy involves various stakeholders, including religious leaders. In the context of HIV/AIDS prevention, the involvement of religious leaders is a form of social support that is evident in local practices. According to the Chairperson of the Victory Plus Yogyakarta Foundation, the involvement of religious leaders is one strategy in supporting HIV/AIDS prevention.

"To be honest, religious figures actually have the power to provide or change the way people think. When we provide education to church congregations, involving religious figures in the community will be more effective, so religious figures are trusted, that from their mouths are true things that exist, and that helps us to provide education to eliminate the stigma of discrimination that exists in society." Utami, Interview with the Chairperson of the Victory Plus Foundation, May 20, 2025.

Stigma remains a significant issue in the local context. In addition to these structural factors, research findings also indicate that people living with HIV/AIDS (PLWHA) still face discriminatory treatment in social life. This discrimination is influenced by limited public understanding of HIV/AIDS, leading to misperceptions about PLWHA. As a result, PLWHA are often shunned, treated unfairly, and struggle to achieve social acceptance. The inherent negative stigma also leads to social isolation and rejection from their surrounding environment. Therefore, religious leaders play a crucial role as agents of change, shaping positive public perceptions of PLWHA.

Overall, these findings demonstrate that HIV/AIDS prevention at the local level is not solely medical but also involves interacting social, cultural, and religious factors. Integrating communication strategies, psychosocial support, and the involvement of religious leaders is key to building an inclusive social environment and reducing stigma against PLWHA.

The Role of Religious Leaders in Digital Da'wah Communication for HIV/AIDS Prevention

In facing these challenges, religious leaders play a strategic role in HIV/AIDS prevention because they are socially trusted actors capable of conveying moral, social, and health-related messages to the community. Their involvement in digital da'wah communication contributes to raising public awareness, reducing stigma against people living with HIV/AIDS (PLWHA), and fostering more inclusive social attitudes. Through religious approaches, religious leaders contribute not only to delivering moral and health-related messages, but also to fostering empathy, social acceptance, and psychosocial support for people living with HIV/AIDS (PLWHA).

Their involvement in digital da'wah communication helps create a more inclusive social environment while strengthening social solidarity within religious communities. The involvement of religious leaders in HIV/AIDS prevention is also carried out through various collaborative activities. However, implementation still faces challenges, particularly related to program sustainability and funding support, as explained by the Chairperson of the Victory Plus Yogyakarta Foundation below.

"We have weekly activities with religious or church leaders. We're given a space for spiritual strengthening. We're specifically invited, meaning we're partnered with religious leaders to strengthen the community. The problem, however, is the dependency on funding to organize these activities. I think faith-based universities should also respond to this opportunity, so that it can serve as a strengthening tool before they become religious leaders. This includes learning about HIV/AIDS, but with a humanitarian focus, that's the hope. So that when they become religious leaders, they don't contribute to the stigma of discrimination." Utami, Interview with Chairperson of the Victory Plus Foundation, May 20, 2025.

Research findings indicate that stigma against people living with HIV/AIDS (PLWHA) remains a major challenge in HIV/AIDS management, particularly due to persistent misconceptions that associate HIV/AIDS with deviant behavior. Such stigma contributes to discrimination, delays in treatment access, poor adherence to therapy, and psychological distress among PLWHA, thereby highlighting the importance of inclusive communication and education strategies involving religious leaders. In this context, research findings also demonstrate that religious leaders play a strategic role in reducing stigma and building a more inclusive understanding within the community.

"Religious leaders are still trusted in Indonesia, especially in Yogyakarta. Whether church leaders or Islamic religious leaders, they are still trusted. Therefore, they play a greater role in HIV/AIDS management. When we talk about HIV/AIDS, what still circulates in society is the stigma, the negative stigma that is built up and followed by discrimination. When we use or are assisted by religious leaders, all of that is eroded, so there is a paradigm shift." Utami, Interview with the Chair of the Victory Plus Foundation, May 20, 2025.

Based on an interview with the Chairperson of the Victory Plus Yogyakarta Foundation, religious leaders are involved in various psychosocial and spiritual support activities, including hospital visits, prayer fellowships, and assistance for patients with advanced health conditions. These practices demonstrate that religious support is integrated into the foundation's broader HIV/AIDS care approach.

"Religious leaders in our foundation play a role. We involve them in providing psychosocial support, especially for patients with special needs, through varied care, for spiritual strengthening. We hold prayer meetings and hospital visits, especially for those hospitalized with severe opportunistic infections." Utami, Interview with the Chair of the Victory Plus Foundation, May 20, 2025.

Therefore, systematic training is needed, not only for health workers, but also for religious leaders as part of a more holistic, cross-sectoral approach to handling HIV/AIDS.

"Religious leaders don't have to be from the health sector, but they can be facilitated and empowered by healthcare professionals, so that cross-sectoral roles can have a shared understanding and knowledge. If we rely on religious leaders who are also from the health sector, we cannot solve the HIV/AIDS problem." - Utami, Interview with Chairperson of the Victory Plus Foundation, May 20, 2025.

Religious leaders have a strategic role in conveying health messages amidst limited information, as they often serve as references on moral and social issues, including HIV/AIDS.

"Religious leaders are expected to play a crucial role in disseminating information about the importance of HIV testing for prospective brides and grooms, both in Christian and Muslim weddings. With the right education and capacity, religious leaders are expected to view HIV wisely, not to marginalize, and not to use HIV status as a reason for canceling a wedding. Their role is crucial in preventing stigma and discrimination in the wedding preparation process." - Utami, Interview with Chairperson of the Victory Plus Foundation, May 20, 2025.

However, the implementation of these training and education programs still faces obstacles, especially in terms of budget and policy priorities.

"The challenge for religious leaders is educational programs. When it comes to educational programs, the public often feels they are unimportant. So, there are budget cuts and budget refocusing. The limited budget limits these programs from being implemented effectively." Utami, Interview with the Chair of the Victory Plus Foundation, May 20, 2025.

Thus, religious leaders play a strategic role in digital da'wah communication for HIV/AIDS prevention by contributing to stigma reduction, psychosocial support, health communication, and community engagement. However, the sustainability of these initiatives remains dependent on institutional support, funding availability, and cross-sector collaboration.

The Relevance of Digital Islamic Propagation Communication in the Global Context of HIV/AIDS Prevention

The findings of this study indicate that the digital da'wah communication strategy implemented by the Victory Plus Yogyakarta Foundation combines persuasive, educational, and religious narratives in conveying HIV/AIDS prevention messages through Instagram. This strategy functions not only to disseminate health information, but also to construct moral awareness, empathy, and social acceptance toward people living with HIV/AIDS (PLWHA) within digital religious communities.

In this context, Instagram functions not merely as an information-sharing platform, but also as an affective and participatory communication space where religious narratives are visually and emotionally constructed. Through visual posts, captions, hashtags, and documentation of prayer fellowships, the Victory Plus Foundation creates a digital atmosphere of empathy and spiritual solidarity rather than fear-based HIV/AIDS messaging. The use of emotionally supportive language, religious symbolism, and community-centered visuals gradually reframes PLWHA from objects of stigma into subjects of compassion and inclusion. Interactive features such as comments, reposts, and audience engagement also enable the negotiation of social meaning between the institution and followers, allowing digital da'wah to operate as a dialogical communication process rather than one-way health promotion.

Unlike conventional HIV/AIDS campaigns that primarily rely on direct biomedical education, the Victory Plus Foundation employs indirect digital da'wah strategies centered on spirituality, emotional support, and communal belonging. This approach allows HIV/AIDS issues to be communicated in a less confrontational and more socially acceptable manner within religious communities. These findings reflect Jan Servaes' participatory development communication perspective, which emphasizes dialogical, community-based, and culturally contextual communication processes rather than top-down information delivery.

In the case of the Victory Plus Foundation, digital da'wah communication is not positioned merely as a transmission of health information, but as a participatory social process that involves emotional engagement, spiritual values, and community interaction in shaping public understanding of HIV/AIDS. These findings are relevant in a global context, where a (World Health Organization, 2025), report indicates that HIV remains a significant global public health problem. Globally, approximately 39.9 million people are living with HIV, with 1.3 million new infections and 630,000 HIV-related deaths in 2023. These data demonstrate that HIV/AIDS prevention efforts cannot rely solely on biomedical interventions.

From a global health communications perspective, the success of HIV/AIDS prevention is largely determined by the effectiveness of communication strategies that reach various community groups contextually. Communication that is not only informative but also persuasive and values-based is key to raising awareness, changing behavior, and reducing stigma against people living with HIV/AIDS.

Based on this, the digital da'wah practice of the Victory Plus Foundation can be understood as an innovative, faith-based form of health communication. This approach expands the role of da'wah beyond simply as a medium for disseminating religious teachings to become a strategic instrument in supporting global efforts to combat HIV/AIDS by increasing health literacy and strengthening inclusive social values.

The Urgency of a Communication Approach in Local HIV/AIDS Response

The findings of this study indicate that the digital da'wah communication approach implemented by the Victory Plus Yogyakarta Foundation functions not only as a medium for HIV/AIDS education, but also as a mechanism for fostering social awareness, empathy, and stigma reduction toward people living with HIV/AIDS (PLWHA). This approach is particularly relevant within the local context of Yogyakarta, where HIV/AIDS response efforts continue to face social, cultural, and structural challenges. In the local context, HIV/AIDS response efforts remain closely linked to structural challenges, including limited access to health services, low public awareness, and social inequality among vulnerable groups. Individuals from lower socioeconomic backgrounds tend to experience greater barriers to HIV/AIDS services, increasing their vulnerability to transmission and highlighting the need for more inclusive communication approaches (Endalamaw et al., 2024).

Furthermore, HIV/AIDS prevention behavior is influenced not only by knowledge, but also by social, cultural, and environmental factors (Nurfadillah & Indawati, 2025). This indicates that communication strategies should move beyond merely delivering information and instead consider community values, lived experiences, and social contexts. Another persistent challenge is stigma against people living with HIV/AIDS (PLWHA), which contributes to discrimination, delayed treatment access, poor adherence to therapy, and psychological distress (Ari Athiutama et al., 2025). Conversely, social and family support have been shown to strengthen psychological resilience and improve treatment confidence among PLWHA (IKP, 2022; Maharani Riri, 2014; Rasyidah & Husna, 2019). These findings underline the importance of communication approaches that foster empathy, social acceptance, and community support in HIV/AIDS prevention efforts.

These conditions indicate that HIV/AIDS management is not solely a medical issue but is also shaped by social constructions, including stigma, cultural values, and patterns of social interaction. In the context of Yogyakarta, which continues to face increasing HIV/AIDS cases and high community mobility (Wicaksono, 2024), prevention strategies require not only structural interventions but also cultural and communicative approaches capable of reaching vulnerable groups more inclusively (Adminwarta, 2024). Persistent stigma against people living with HIV/AIDS (PLWHA), including discrimination in healthcare and social environments, continues to hinder access to treatment and continuity of care (Patoni, 2017). In addition, HIV prevention efforts are closely related to broader social factors, including public education, moral values, youth culture, and the involvement of community leaders, religious leaders, and mass media in promoting awareness and reducing discrimination (Anggraeni et al., 2021; Bakti, 2013; Brin, 2024).

Therefore, HIV/AIDS management at the local level requires not only biomedical interventions but also communication approaches that can foster empathy, strengthen social support, and transform public perceptions toward PLWHA. In this regard, the digital da'wah practice implemented by the Victory Plus Yogyakarta Foundation becomes relevant as a faith-based communication strategy that not only disseminates health-related information but also promotes values of acceptance, solidarity, and social inclusion. This approach demonstrates the strategic potential of faith-based digital communication in supporting HIV/AIDS prevention, strengthening community support systems, and reducing stigma toward PLWHA within local communities.

The Strategic Role of Religious Leaders in Digital Islamic Communication for HIV/AIDS Prevention

The findings of this study indicate that religious leaders play a strategic role in HIV/AIDS prevention efforts, particularly within the context of digital Islamic communication. Beyond serving as transmitters of religious teachings, religious leaders function as social actors capable of raising public awareness, reducing stigma toward people living with HIV/AIDS (PLWHA), and promoting values of empathy and social acceptance. Through sermons, spiritual support, and community engagement,

religious leaders contribute to strengthening social solidarity and supporting HIV/AIDS prevention efforts (Moh. Bahrudin, 2010).

However, the effectiveness of this role continues to face several challenges, particularly limited knowledge and understanding of HIV/AIDS among both communities and health-related actors. Research in Yogyakarta shows that HIV education and training remain limited, contributing to persistent stigma and discriminatory attitudes toward PLWHA (Fauk et al., 2021; Nanik Setiyawati & Meilani, 2020). Limited access to health services among vulnerable and low-income groups further complicates comprehensive HIV/AIDS management (Dewi, 2024).

In this context, religious leaders play an important role as mediators between religious values and public health issues. Effective da'wah communication requires sensitivity to the social, cultural, and linguistic characteristics of audiences so that health-related messages can be conveyed in a more acceptable and persuasive manner (Bakti & Meidasari, 2014). Nevertheless, some religious leaders still reproduce stigma against PLWHA, indicating the importance of capacity building and HIV/AIDS education for religious communities to foster more inclusive attitudes (Wattie & Sumampouw, 2018).

Furthermore, the acceptance of various biomedical HIV prevention interventions, such as Pre-Exposure Prophylaxis (PrEP), circumcision, and other preventive measures, is often influenced by cultural and religious perceptions (Mahajan et al., 2008). In such situations, religious leaders can act as mediators who bridge public understanding of health innovations with prevailing religious and moral values. Therefore, the role of religious leaders extends beyond moral instruction and functions as a form of social and cultural intervention capable of shaping public perceptions of HIV/AIDS more humanely and inclusively. Social support built through religious approaches can reduce social isolation, strengthen psychosocial resilience, and improve the quality of life of PLWHA (Nugroho, 2024).

Thus, the involvement of religious leaders in digital da'wah communication demonstrates strategic potential in strengthening HIV/AIDS response efforts, particularly in reducing stigma, improving health literacy, and fostering inclusive community support. The study further demonstrates that digital da'wah can function as an alternative model of faith-based health communication that addresses HIV/AIDS not only through biomedical discourse, but also through emotional, spiritual, and community-centered approaches. This model is particularly relevant in societies where religious authority and communal values strongly shape public perceptions of health, morality, and stigma.

CONCLUSION

Stigma against people living with HIV/AIDS (PLWHA) remains a major challenge in HIV/AIDS prevention and treatment efforts, including within healthcare and social environments. The findings of this study demonstrate that HIV/AIDS prevention cannot rely solely on biomedical interventions, but also requires communication approaches capable of transforming public perceptions, reducing discrimination, and fostering social acceptance. In this regard, the digital da'wah communication strategy implemented by the Victory Plus Yogyakarta Foundation plays a strategic role in building awareness, empathy, and solidarity toward PLWHA through persuasive, religious, and community-based communication practices. Instagram functions not only as a medium for disseminating information, but also as an affective and participatory communication space where religious narratives, psychosocial support, and values of inclusion are constructed digitally. Through indirect yet emotionally supportive communication, the foundation contributes to stigma reduction and the creation of a more inclusive social environment for PLWHA.

Furthermore, this study highlights the strategic role of religious leaders as trusted social actors capable of influencing public understanding and attitudes toward HIV/AIDS. Their involvement in digital da'wah communication strengthens efforts to promote empathy, reduce stigma, and support psychosocial well-being among PLWHA. These findings imply that HIV/AIDS prevention efforts require collaborative and cross-sectoral approaches involving healthcare institutions, communities, digital media, and religious leaders. This study also suggests the need for future research focusing on the effectiveness of digital da'wah communication across different social media platforms and community settings, as well as quantitative studies examining its impact on public attitudes, stigma reduction, and HIV/AIDS prevention behavior more broadly.

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