ABSTRACT
Istifadah, Rina. 2014. *Coping Stress ODHA (People with HIV/AIDS)*. 
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A data at 2011, a HIV patients as many as 21.031 people and AIDS patients as many as 5.686 people (Indonesia policy, 2013). That number is not small and people with HIV is need a special attention because of psychological impact that experienced by ODHA (People with HIV/AIDS) due to this disease is very risky like as stress and even depression. Depression experienced by people with HIV and AIDS is closely related with the inability to do a well *coping*. Stress is very strong and lasted a long time can exceeds our ability to cope (*coping ability*) and causing emotional distress such as depression or the anxiety, or or physical complaints such as tired and headache (Nevid, Rathus & Greene, 2003). Sustainable stress in a long time is can lead to interruption of anxiety and depression, this is the important role of *coping*. The aim of this research is to know some things for example is how a coping stress is ODHA’s did, the factors that influential for the process of a *coping* stress, the things that stressor for ODHA and the past rule for a *coping* stress that ODHA’s did.

A research method used in this research is a qualitative descriptive method. The theory orientation to get a main of this research is using single study case approach *Life History*. A data was collected using a observation method and interview to the respondents and some informants. A data was used in this research is *theory-based/ operational construct sampling*. The data analysis technique that used is compaction of fact and coding, data reduction, data display and drawing an conclusion. Validity test of data in this research is doing with interpretation with triangulation technique data source.

The result of this research, is during early six month after knowing he was infected of HIV, he was prolonge stress experience, then in this present he is many use a *Emotional focused Coping*, like a *seeking social support for emotional reason*, *positive reinterpretation* and *acceptance*. Since of E have wants to change, he start to do a *coping* that differnt with before this is a *problem focused coping* like doing a *planning*, *active coping*, to delay for another activity that *Suppression of Competing*, *restraint coping*, *seeking social support for instrumental reasons*. But E also use an *Emotional focused coping* that is *seeking social support for emotional reason*, *positive reinterpretation* and *turning to religion*.

**Keywords**: *coping*, stress, ODHA, HIV