

PROVIDER INSTRUMENT

Instructions to Interviewer

Instructions to interviewers are in italics.

All text that is meant to be read to the respondent is written in bold type. For example, when multiple choice options should be read aloud, the options are in bold, like the questions themselves. When options are intended for the interviewer only, i.e. when they should not be read aloud, they are not in bold type.

If a respondent declines to answer a question that does not have a specific option for this response, please write "declined to answer" in the margin of the questionnaire. Please do not read the option "declined to answer" out loud.

Responses to open-ended questions should be recorded as close to verbatim as possible.

Information about the study

Hello, I am {NAME} working on a research project supported by {NAME OF LOCAL COLLABORATING INSTITUTION}. We are conducting a study on HIV testing, treatment and prevention {IF NECESSARY, ADD DETAILS}. By listening to people who may have had some experience with health services around HIV, we hope to learn what goes right with the health services, and how to improve them.

You have been selected to represent people in this area [from this clinic] and we would very much like to hear about your opinions and experiences. Before we get started, I would like to explain to you how the interview works.

Informed consent

- Your participation in the interview and in every aspect of the study is completely voluntary.
- If some questions are difficult or make you uncomfortable, we can skip them. You may also ask me to clarify any questions if you do not understand them. You may also decide to stop the interview at any time.
- All of the information that you provide for the study will be kept completely confidential. We record your responses, but the questionnaire will not have your name on it, and your responses to our questions are identified only by a number, never by name.
- The study will not be used to evaluate this facility or to report what the providers tell us to those in the administration.
- If you have questions or concerns after we are finished, you may contact {CONTACT PERSON AT THE COMMUNITY LEVEL}.
- Although there are no direct benefits to you from participating in this survey, we hope that the survey will help to improve health services and support for people living with HIV and AIDS. The

Do you have any questions about the survey? Would you be willing to participate in our study?

Depending on local ethical clearance, it may be necessary to fill out a signed consent form. In that case it would be preferable to design the instrument so as to be able to separate the form from the rest of the instrument

Consent Form

We have a form that must be read to you before we begin, in order to confirm that we have explained the study to you and that you have agreed to participate.

We ask you to sign the form, but we do not keep the form attached to the questionnaire, so your name will not be linked to the information we write about you, and no one except the people responsible for the study will have access to this information.

The form just repeats what I have told you about the study, but I have to read it to you.

- I understand that I have been asked by *{NAME OF INSTITUTION}* to participate in a research project designed to investigate the experience of people who undergo HIV testing and counselling.
- I understand that during this study I will be asked questions about my health and health care, and that my responses will be recorded in a questionnaire form. But my participation in the study will be kept confidential, and my identity will be available only to those performing or supervising the research. I understand that I would never be identified by name in any publications resulting from this study.
- I am aware that there may be some questions asked during the interview which may make me uncomfortable. I realise that I do not have to answer any question that I do not want to answer. I understand that I am free to withdraw my consent and to discontinue participation in this research project at any time, without affecting my future care or treatment.
- I realize that I will not benefit directly from this project. However, with my participation, I hope to help investigators understand how to improve health services.

Certificate

I have read this consent form or have had explained to me to my satisfaction the information relating to this study. I understand what my participation will involve and agree to take part in this interview under the terms of this agreement. I have had the opportunity to ask questions about it, and my questions have been answered to my satisfaction.

I consent voluntarily to participate in this study and I understand that I have the right to withdraw at any time, without it in any way affecting my future medical care.

Participant

Name _____

Date _____

Signature or thumbprint if appropriate _____

Witness (if appropriate)

Name _____

Date _____

Signature _____

Investigator

Name _____

Date _____

Signature _____

Interview information

Interviewer can complete this section before the interview starts.

PR1.1 Interview ID number in the form of 001, 002, 003...

PR1.2 Date of interview DD/MM/YYYY

/ /

PR1.3 Interviewer name or code

PR1.4 Name of testing facility

PR1.5 Time of interview start. Use the 24:00 clock.

PR1.6 Language of interview

SOCIODEMOGRAPHIC AND WORK MODULE

PR2.1 Sex of the respondent. Do not read this question.

female

male

If you don't mind, I would like to start by asking you some questions about your age, education, work background and training. All the information you give me will be kept confidential and will not be recorded on the same page as your name.

PR2.2 How old are you? In years.

PR2.3 What was the last level of schooling that you completed?

no formal education

primary incomplete

primary complete

secondary/vocational incomplete

secondary/vocational complete

post secondary

other, please specify:

declined to answer

.....

Work background

Now I will ask you some questions about your work and training.

For the following question, if the counsellor has had training as a nurse, please mark the box nurse/midwife.

PR2.4 What is your work position?

medical doctor

nurse/midwife

counsellor

other, please specify:

.....

PR2.5 What HIV or AIDS related services do you personally perform at this facility? *Mark all that apply.*

- clinical care
- consultation
- counselling
- testing
- dispensing drugs
- support group services
- home visits
- other, please specify:

.....

In the following questions, if the provider has worked in HIV and AIDS care for less than a year then fill in the number of months, otherwise you do not need to write out the months.

PR2.6 How long have you worked in HIV and AIDS care? *In years and months.*

years

months

PR2.7 How long have you worked in this facility? *In years and months.*

years

months

PR2.8 Have you had training on HIV or AIDS?

- yes
- no

Go to PR2.11

Next I am going to ask you a few questions about what type of training you have received, for example, whether this training was formal or 'on the job'. By formal training, I mean training that took place as part of a class or a workshop. By 'on-the-job' training I mean informal learning in the course of your work, including advice from colleagues, observation or self-study.

PR2.9 Was the training formal or 'on-the-job'?

- formal only
- on-the-job only
- both

Go to PR2.11

PR2.10 Thinking about the formal HIV training you received, what topics did that HIV training cover?

Mark all that apply.

- HIV prevention
- provider-initiated testing
- client-initiated testing
- rapid testing
- HIV counselling
- HIV stigma
- adherence
- antiretroviral therapy
- prevention of mother-to-child transmission (PMTCT)
- psychosocial / general counselling or support for people living with HIV
- nutrition
- other, please specify:

.....

PR2.11 How well prepared do you feel to provide the services that you are responsible for as part of your work? Would you say that you feel:

- well prepared
- somewhat prepared
- not prepared enough

PR2.12 Why or why not?

Daily work routine

The following three questions are time consuming and are designed to be asked among a subsample of respondents.

In the next few questions, I would like to ask about the details of your work in your own words.

PR2.13 Please describe your daily routine, on a typical day.

PR2.14 Does your work vary much from one day to the next?

- yes
- no
- it depends

Go to PR2.16

PR2.15 In what way?

PR2.16 How many clients/patients do you personally see everyday?

PR2.17 How much time do you generally spend with each client/patient on average, in minutes?

PR2.18 On a typical day, how easy or difficult is it for you to see all of your clients/patients in the time available? Would you say it is:

- easy
- manageable
- difficult

PR2.19 Why?

TESTING AND COUNSELLING (T&C) MODULE

For respondents who work in HIV testing and/or counselling

This next part of the interview includes questions about HIV testing and counselling. By HIV testing, I mean testing for HIV antibodies by drawing blood or collecting oral fluids.

PR3.1 Do you personally conduct HIV testing or counselling?

- yes
 no

Go to the end of the T&C module at PR3.51

Sometimes clients decide on their own that they want to know their HIV status, and they come to a health facility specifically to ask for an HIV test. In other cases, health workers are the ones who suggest that testing is a good idea. They might offer HIV testing to clients who have come for other kinds of health services, such as prenatal care. Or, sometimes health workers go out into the community and offer testing in people's homes or workplaces. In the next few questions I would like to ask about your experience with offering HIV testing, and whether offering a test is part of your job responsibility.

PR3.2 As part of your work, do you - personally - ever offer HIV counselling and testing to clients who have not come to the facility specifically for that purpose?

- yes
 no

PR3.3 Do you - personally - ever go out into the community to encourage people to get tested for HIV?

- yes
 no

IF RESPONDENT DOES NOT EVER INITIATE TESTING (i.e. HAS SAID NO TO PREVIOUS TWO QUESTIONS), GO TO PR3.6

PR3.4 What is the most frequent or typical way that you offer HIV testing? *Probe for typical circumstances, use of guidelines.*

PR3.5 How do clients generally respond to your offer of an HIV test? *Probe: do they readily accept? Do they ever get upset?*

PR3.6 What do you think hinders people in this community from being tested for HIV?

PR3.7 What could be done to improve access to testing for those who want it?

PR3.8 Do some of your clients have repeated HIV tests?

- yes
 no
 don't know

Go to PR3.10

Go to PR3.10

PR3.9 What do you think are the reasons that some clients have repeated HIV tests?

The next few questions are about counselling, meaning the discussions that health workers have with clients about HIV tests and the meaning of test results.

Some testing facilities provide pre-test counselling, while others do not.

PR3.10 What do you think about not having pre-test HIV counselling?

PR3.11 As part of your work do you personally conduct pre-test counselling?

- yes
- no

Go to PR3.13

PR3.12 Do you find that the time that you can give for pre-test counselling is usually too long, about right or too short to give clients the information they need and to answer their questions?

- too long
- about right
- too short

PR3.13 In general, do you think that the pre-counselling information that is provided at this facility is too much, about right, or too little?

- too much
- about right
- too little

PR3.14 Why?

Consent

For the following question, please make certain that the respondent obtains consent him/herself from the client. If he or she does not obtain consent personally then skip to the next section.

PR3.15 Do you personally obtain consent from clients for HIV testing, or does that responsibility fall to other staff members?

- yes, obtains consent
- no, doesn't obtain consent

Go to PR3.24

Only for respondents who personally obtain consent

PR3.16 How do you typically obtain a client's consent to have an HIV test?

PR3.17 Is the consent usually obtained...

- in writing
- verbally
- it depends; sometimes in writing, sometimes verbally
- usually both
- other, please specify:

.....

PR3.18 After you offer a test, how much time is the client usually given to think about the test before deciding whether to consent?

- less than 5 minutes
- more than 5 minutes, but less than 15 minutes
- 15-30 minutes
- more than 30 minutes, up to an hour
- more than an hour, up to 2 hours
- more than 2 hours
- other, please specify:

.....

PR3.19 Are there guidelines or a protocol that you are supposed to follow when obtaining consent?

- yes
- no
- don't know

Go to PR3.22

Go to PR3.22

PR3.20 Is there a written copy of these guidelines or protocol in the health facility?

- yes
- no
- don't know

PR3.21 How useful are these guidelines in practice?

- very useful
- somewhat useful
- not very useful

PR3.22 In general, when you ask clients for their consent to have an HIV test, what proportion agree? Would you say:

- all
- almost all
- most
- some

PR3.23 In this facility, are clients ever tested without getting their consent first?

- yes, often
- yes, sometimes
- yes, but only occasionally
- no, never
- declined to answer

Go to PR3.25

Testing without consent [all respondents]

PR3.24 Can you describe some instances when clients were tested for HIV even when they did not want to or were not given a chance to consent?

The next questions ask for your opinions about who should receive HIV testing. People have different opinions about this, and we would appreciate hearing about your honest feelings.

PR3.25 Do you think that there are reasons to require somebody to have an HIV test?

- yes
- no
- unsure

Go to PR3.27

PR3.26 Who do you think should be required to have an HIV test and why?

Privacy and confidentiality [all respondents]

Now I would like to ask you a few questions regarding how you feel about giving information to other people about someone else's HIV status. People have different opinions about this, and we would like to know your honest feelings.

PR3.27 Do you think that it is sometimes okay to tell other people that someone else has HIV even if that person doesn't want other people to know?

- yes
- it depends
- no

PR3.28 Why or why not?

PR3.29 In your opinion, do you think that it is ever okay for a health worker to tell someone outside the facility that a client tested positive for HIV, even if that client did not give permission to tell?

- yes
- no
- unsure

Go to PR3.31

Go to PR3.31

PR3.30 Under what circumstances is it okay and why?

PR3.31 What do you do to try to protect confidentiality within your HIV testing and counselling work?

Many health workers try hard to protect the confidentiality of client information - including HIV test results and medical histories. But sometimes, health workers talk about clients' confidential information in places where they can be overheard by other clients. For example, a receptionist may ask a client to state the reason for the visit in front of other clients. Or, health workers sometimes have conversations or collect medical histories in places where they can be overheard, such as waiting areas.

PR3.32 In your experience, do staff members in this facility ever talk about or ask patients about confidential client information in places where they can be overheard by other clients?

Probe: this includes asking clients the reason for their visit in front of other clients.

yes

no

PR3.33 Does this facility have guidelines, rules or a protocol for protecting clients' confidentiality?

yes

no

Go to PR3.35

don't know

Go to PR3.35

PR3.34 In your experience, how closely do staff members follow these guidelines in practice? Would you say they follow them:

very closely

somewhat closely

not very closely

don't know

PR3.35 How important do you think it is to protect the confidentiality of your clients' HIV test results?

very important

somewhat important

not so important

it depends

PR3.36 In general, would you say that staff members manage to keep clients' information confidential:

always

almost always

most of the time

some of the time

PR3.37 What are the main challenges that staff in this facility face in protecting confidentiality?

PR3.38 Can you describe instances at this facility when it was difficult to protect confidentiality?

Results

PR3.39 In your experience, what proportion of clients in this facility receive their test results? Would you say:

all

Go to PR3.41

almost all

most

some

few

don't know

Go to PR3.41

PR3.40 Why don't clients always receive their results?

Post-test counselling

Earlier, we talked about pre-test counselling. Now I would like to ask some questions about post-test counselling.

PR3.41 As part of your work, do you personally conduct post-test counselling?

- yes
 no

Go to PR3.49

Only for those who conduct post-test counselling

PR3.42 On average, when you conduct post-test counselling with a client, how long (in minutes) do you typically spend?

PR3.43 Do you find that the duration of post-test counselling that you are able to provide is too long, about right or too short?

- too long
 about right
 too short

PR3.44 In general, do you think that the post-counselling information that is provided at this facility is too much, about right or too little?

- too much
 about right
 too little

PR3.45 Why?

PR3.46 How prepared do you feel to conduct post-test HIV counselling? Would you say you feel:

- well prepared
 somewhat prepared
 not prepared enough

PR3.47 How easy or difficult do you find the work of post-test counselling? Would you say you find it:

- very easy
 somewhat easy
 neither easy nor difficult
 somewhat difficult
 very difficult

PR3.48 What would make it easier for you to conduct post-test counselling?

Follow-up care and support after the test [all respondents]

Next, I would like to ask about follow-up care and support for those clients who test positive at this facility.

PR3.49 In your experience, how often are clients who test positive for HIV able to access follow-up care and support?

- always
 almost always
 sometimes
 rarely
 never
 don't know

PR3.50 Do you have any suggestions for making it easier for HIV-positive clients to get the follow-up care and support they need? *Probe further about both medical care and social support.*

Testing and counselling module closing statement

This concludes this portion of our interview. Thank you very much for your participation.

PR3.51 *Time of interview or module end. Use the 24:00 clock.*

PR3.52 **Additional interviewer notes**

DISCLOSURE, SUPPORT AND STIGMA MODULE

Disclosure

Now I would like to ask you about what happens when your HIV-positive clients disclose their test results to their family, friends and people in their community.

PR4.1 **If a client has HIV, do you think that client should tell anyone else?**

yes

no

it depends

Go to PR4.3

PR4.2 **Who do you think the client should tell? *Mark all that apply.***

partner

close family

other relatives

people they live with

friends

co-workers

it depends on the client

other, please specify:

.....

PR4.3 **How often do you talk to clients about how to disclose their status to friends and family?**

always

frequently

sometimes

rarely

never

PR4.4 **What challenges do your clients face in disclosing their status?**

PR4.5 Has a client ever told you that if they disclose their HIV status, they are afraid of being:

| | yes | no |
|------------------------------------|--------------------------|--------------------------|
| abandoned by a spouse/partner? | <input type="checkbox"/> | <input type="checkbox"/> |
| abandoned by other family members? | <input type="checkbox"/> | <input type="checkbox"/> |
| physically assaulted/beaten? | <input type="checkbox"/> | <input type="checkbox"/> |
| fired from their job? | <input type="checkbox"/> | <input type="checkbox"/> |
| expelled from their home? | <input type="checkbox"/> | <input type="checkbox"/> |

PR4.6 Have HIV-positive clients ever told you that they experienced any of these things as a result of being HIV-positive?

| | yes | no |
|------------------------------------|--------------------------|--------------------------|
| abandoned by a spouse/partner? | <input type="checkbox"/> | <input type="checkbox"/> |
| abandoned by other family members? | <input type="checkbox"/> | <input type="checkbox"/> |
| physically assaulted or beaten? | <input type="checkbox"/> | <input type="checkbox"/> |
| fired from their job? | <input type="checkbox"/> | <input type="checkbox"/> |
| expelled from their home? | <input type="checkbox"/> | <input type="checkbox"/> |

IF RESPONDENT SAID NO TO ALL THE SUB-ITEMS IN THE TWO QUESTIONS ABOVE, THEN GO TO PR4.8

PR4.7 How did you respond when the client told you this? Probe to refer back to any affirmative answers from the previous two questions.

PR4.8 Do you think enough support is given to clients to help them disclose to other people?
 yes
 no
 don't know

Go to PR4.10

PR4.9 How could this be improved?

Health care discrimination

The following questions are about fear of HIV and your feelings towards people living with HIV and AIDS. People have very different feelings about this, and we are interested in hearing about your honest opinions.

PR4.10 Have you ever seen or heard of clients who have been badly treated at this facility because they had HIV or AIDS?

yes
 no
 declined to answer

Go to PR4.12

Go to PR4.12

PR4.11 Can you tell me what happened?

PR4.12 In the past 12 months have you seen the following happen in this health facility because a client was known to have, or was suspected of having HIV or AIDS?

| | yes | no | declined to answer |
|---|--------------------------|--------------------------|--------------------------|
| staff seemed uncomfortable with a client because of his or her HIV status? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| health worker gossiped about a client's status? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| client was ignored or received less care than other clients? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| client was denied care that he or she should have received? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| staff used excessive precautions with clients suspected of having HIV or AIDS, for example, using latex gloves for non-invasive procedures? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| client was treated with disrespect or abused? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PR4.13 Please indicate whether you agree with, are undecided or disagree with the following statements:

| | agree | disagree | undecided |
|--|--------------------------|--------------------------|--------------------------|
| People with AIDS deserve blame for getting the disease. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I think patients with AIDS have the right to the same quality of care as other patients. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PR4.14 Aside from your pay, do you find that your work presents you with any particular rewards?
Probe: job satisfaction, not financial.

| | |
|-------------------------------------|--------------|
| <input type="checkbox"/> yes | |
| <input type="checkbox"/> no | Go to PR4.16 |
| <input type="checkbox"/> don't know | Go to PR4.16 |

PR4.15 Can you give some examples?

FEAR OF INFECTION AND WORK SAFETY MODULE

The following questions are about fear of HIV and the safety of the work environment in your health facility.

PR4.16 How concerned are you about getting infected with HIV in the course of your work? Would you say you are:

| | |
|---|--------------|
| <input type="checkbox"/> very concerned | |
| <input type="checkbox"/> concerned | |
| <input type="checkbox"/> slightly concerned | |
| <input type="checkbox"/> not very concerned | |
| <input type="checkbox"/> not concerned at all | Go to PR4.18 |

PR4.17 What types of situations at work cause you most concern?

PR4.18 How concerned would you feel about getting HIV if you had to do any of the following. Please indicate if you would be very concerned, somewhat concerned, not sure, not very concerned or not at all concerned.

| | very concerned | somewhat concerned | not sure | not very concerned | not at all concerned |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| take the blood pressure of a person with HIV or AIDS? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| change the bed linens of a person with HIV or AIDS? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| change the clothes of a person with HIV or AIDS? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| give an injection to a person with HIV or AIDS? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| dress the wound of a person with HIV or AIDS? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PR4.19 Do you estimate the risk of accidental exposure at work as low, moderate or high?

| |
|-------------------------------------|
| <input type="checkbox"/> low |
| <input type="checkbox"/> moderate |
| <input type="checkbox"/> high |
| <input type="checkbox"/> don't know |

PR4.20 Are you concerned about getting other types of infections - besides HIV - from HIV-positive clients?

- yes
- no

Go to PR4.22

PR4.21 Which other infections are you concerned about?

- 1.
- 2.
- 3.

PR4.22 In the past year, have you been accidentally exposed to HIV?

- yes
- no
- don't know
- declined to answer

Go to PR4.24

Go to PR4.24

Go to PR4.24

PR4.23 Please tell me what happened, and how you dealt with the situation.

PR4.24 In the past year, do you know of any other staff member in this health facility that has been accidentally exposed to HIV?

- yes
- no

Now I would like to ask you some questions about whether this health facility has enough supplies and protocols in place to protect the health and safety of the people who work here.

PR4.25 Do you or other staff members ever run out of supplies that you need to implement universal precautions? *Probe and give examples, such as latex gloves, if needed.*

- yes
- no
- don't know

Go to PR4.27

Go to PR4.27

PR4.26 What type of supplies sometimes run low?

- 1.
- 2.
- 3.

PR4.27 Does this facility have written guidelines for implementing universal precautions?

- yes
- no
- don't know

PR4.28 In your experience, would you say that staff in this health facility use universal precautions:

- always
- almost always
- most of the time
- some of the time
- not much at all
- don't know

PR4.29 Do you have any suggestions for improving workplace safety in this health facility?

PR4.30 What are the main challenges that staff at this facility face in providing services related to HIV and AIDS?

PR4.31 What—if anything—could be done to make your work easier?

PR4.32 Do you participate in any activities or groups that help you cope with the emotional demands of your work?

- yes
 no

Go to PR4.34

PR4.33 What type of activities or groups?

Fear of infection and work safety module closing statement

This concludes this portion of our interview. Thank you very much for your participation.

PR4.34 *Time of interview end. Use the 24:00 clock.*

PR4.35 *Additional interviewer notes*

ADHERENCE MODULE

For health workers who care for patients living with HIV

I would like to begin this portion of the interview by asking you more questions about the type of care and services you personally provide as part of your work. In particular, we are interested in whether and how you help patients who are taking antiretroviral therapy adhere to their treatment regimen. So when I ask about adherence during this portion of the interview, I specifically mean adherence to antiretroviral therapy.

PR5.1 Do you provide care for patients taking antiretroviral therapy on a regular basis as part of your work?

- yes
 no

Go to PR5.23

PR5.2 Do you personally provide adherence counselling to HIV-positive patients as part of your work?

- yes
 no

Go to PR5.4

PR5.3 Is this adherence counselling done in the form of individual or group counselling?

- individual
 group
 both

PR5.4 Do you think the adherence counselling provided at this facility is very effective, somewhat effective or not effective?

- very effective
 somewhat effective
 not effective
 don't know

PR5.5 Why or why not?

PR5.6 When you consult with a patient who is taking antiretroviral therapy, do you assess a patient's level of adherence:

- at each consultation
- most consultations
- some consultations
- rarely
- never

Go to PR5.9

PR5.7 On average, when you assess adherence during a patient consultation, how long do you typically spend? *In minutes.*

minutes.....

PR5.8 How do you assess adherence? *Record answer as given, then select option below. Do not read options. Mark all that apply.*

- self-recall
- missed appointments
- visual analogue scale
- MEMS cap
- pill counts
- on-time pharmacy pick ups
- other, please specify:

PR5.9 What advice do you give to patients about how to take all their pills and adhere to their antiretroviral therapy regimen?

PR5.10 What information do you give patients to explain why all pills have to be taken?

PR5.11 What do you tell patients to do if a dose is missed?

PR5.12 What do you tell patients about side-effects and what they should do when they experience them?

PR5.13 In your experience, how many of your patients face problems adhering well to their antiretroviral therapy regimen?

- all
- many
- some
- few
- don't know

PR5.14 What are the most common problems your patients face adhering to their antiretroviral therapy?

PR5.15 How frequently do you have patients who report interrupting their antiretroviral therapy for more than 48 hours?

- very frequently (at least one patient a week)
- somewhat frequently (at least one patient a month)
- not frequently (less than one patient a month)
- never

Go to PR5.18

PR5.16 What reasons do patients give for interrupting their antiretroviral therapy?

PR5.17 How do you deal with that situation?

PR5.18 In the past year, have any of the antiretroviral regimens prescribed in this clinic been out of stock or unavailable for any reason when patients needed them?

- yes
- no
- don't know

PR5.19 Would you say there are certain types of patients who tend to adhere better to antiretroviral therapy than others?

- yes
- no
- don't know

Go to PR5.23

Go to PR5.23

PR5.20 What types of patients are better adherers and why?

PR5.21 What types of patients are poor adherers and why?

PR5.22 What do you think could be done to help these patients adhere better?

Adherence module closing statement

This concludes this portion of our interview. Thank you very much for your participation.

PR5.23 *Time of interview end. Use the 24:00 clock.*

PR5.24 *Additional interviewer notes*

PREVENTION MODULE

The next portion of this interview addresses services to help patients living with HIV prevent the transmission of HIV.

PR6.1 Do you personally provide HIV prevention information to HIV-positive patients on a regular basis as a part of your work?

yes

no

Go to PR6.8

PR6.2 When you consult with an HIV-positive patient, what is the average amount of time (in minutes) that you spend talking about HIV prevention with HIV-positive patients?

minutes.....

PR6.3 What type of prevention information do you discuss with them? Record answer as given, then mark all the options that apply. Do not read the options.

PR6.4 Mark all that are mentioned.

information about HIV transmission/prevention

how to protect themselves and their sexual partners

disclosure of HIV status

referral of partners for HIV test

safer sex practices

advice on condom use

provision of information on support groups

referral to support groups

discuss family planning options

discuss options for prevention of mother-to-child HIV transmission

discuss breastfeeding in relation to prevention of mother to child HIV transmission

discuss HIV discordance between couples

PR6.5 Do you provide HIV-positive patients with condoms?

yes

no

declined to answer

PR6.6 In your experience, which groups of patients need special advice for prevention?

PR6.7 What specific advice/services do you give to each of these different groups?

adolescents.....

sex workers

breastfeeding mothers

pregnant women

PR6.8 Do you think that people in this community think that HIV or AIDS is less dangerous than it used to be now that antiretroviral therapy is available?

yes

no

don't know

Go to PR6.10

PR6.9 Why or why not?

PR6.10 Do you think that people are returning to more risky sexual behaviour now that antiretroviral therapy is available?

yes

no

don't know

PR6.11 Do you think that receiving antiretroviral therapy encourages patients to adopt safer behaviours?

yes

no

don't know

Go to PR6.13

PR6.12 Why or why not?

PR6.13 What suggestions do you have for improving HIV prevention services for patients receiving antiretroviral therapy?

Prevention module closing statement

This concludes our interview. Thank you very much for your participation.

PR7.1 *Time of interview end. Use the 24:00 clock.*

PR7.2 *Additional interviewer notes*