

## Online Annex 4: Questionnaire to assess perspectives of people living with HIV and health care workers on differentiated ART delivery



### IAS Project: Differentiated Models of ART delivery

#### ITPC & ARASA QUESTIONNAIRE FOR KEY STAKEHOLDERS

Zambia | Malawi | Kenya | Morocco | Egypt | Tanzania | Cameroon | Côte D'Ivoire

This survey should be administered to between 35-50 individuals per country. Sources should primarily be individuals who are recipients of treatment and care (PLHIV including key populations) but may also include community health workers and representatives of civil society organizations.

I consent to being interviewed for this project and to having my answers written down/recorded and used in the subsequent data analysis on this topic.

Signature:

Date:

#### SECTION I. PROFILE OF RESPONDENT

1. What is your gender? Female ☐ Male ☐ Other ☐
2. How old are you?  
15-20 ☐ 20-35 ☐ 36-50 ☐ 50-60 ☐ Above 60 ☐
3. Are you currently receiving ART? Yes ☐ No ☐

*(NB: Section II is relevant for PLHIV currently receiving care and ARV treatment. Section III is relevant for those who are not PLHIV but are health care workers or represent civil society organizations.)*

#### II. CLIENT PERSPECTIVES

4. Can you tell us about how you usually collect your ARVs?

*(NB: Encourage the respondents to explain in their own words but please include the following in the data- How often do you visit a clinic/facility? Does it take a long time? How long? What does the transport cost? Where is it? Do you go with anyone? The experience of collection)*

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5. Can anyone else go to pick up your treatment?

Yes ☐ No ☐

**6. Have you ever missed an appointment or been unable to pick up your ARVs?**

Yes ☐ No ☐

**If yes, why?**

Could not take the day off work ☐

Didn't have the time ☐

Too unwell to travel that day ☐

Transport unavailable ☐

Sick family member ☐

Other ☐

**If other, please explain.**

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**7. What are the main challenges you face in obtaining your ARV's regularly?**

Lack of transport ☐

Cost of transport ☐

Cost of missing work ☐

Lack of time ☐

Illness/depression ☐

Family constraints ☐

Other ☐

**If other, please explain.**

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**8. Would you be interested in ARV pick up being split up from your clinical check ups? (getting medicines without having to have a clinical check up as well each time?)**

Yes ☐ No ☐

**9. When would be the best time of day for you to take delivery of your ARV's?**

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**10. What would make it simpler for you to pick up your ARVs?**

*(NB: Ask client to express what they might think about this)*

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**11. Have you heard of 'differentiated ART delivery'?** *(NB: Interviewer to provide definition)*

Yes ☐

No ☐

**12. Does this sound interesting?**

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**13. Would any of the options below make it simpler to regularly obtain your ARVs?**

*(Tick one or all that apply)*

Picking up my ARV's at the facility/clinic but at a 'fast track' window rather than having to complete a clinical check every time as well ☐

Picking up my ARV's close to my home at a community drug distribution point ☐

Participating in a peer support group or health care worker led group at the facility or in a home or hall close by, where the drugs are distributed ☐

Participating in a community group and working on a roster system: sharing pick up and distribution duties where one person picks up the drugs while at a clinic consultation and delivers to other group members, who each get a turn at the clinic. ☐

**14. If you feel that the above options would not be useful/relevant to your circumstances, can you explain why?**

*(Please tick any that apply)*

I am comfortable with the health workers at the clinic/facility ☐

I do not want to change my doctor or get used to a new system ☐

I am worried that I will face discrimination if people living near by find out I am HIV positive ☐

I do not want my health being discussed by neighbours ☐

There is no peer support group where I live ☐

Other ☐

**If other, please explain.**

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15. If implemented within your area, do you think any of the above ways would have a negative impact on you in terms of your care and treatment?

Yes ☐ No ☐

If yes, please explain.

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16. If implemented within your area, do you think any of the above ways would have a positive impact on you in terms of your care and treatment?

Yes ☐ No ☐

If yes, please explain.

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### SECTION III: NON-PLHIV PERSPECTIVE

*(NB: These are relevant to health care workers, representatives of civil society organizations working with support groups or community members affected by HIV)*

**17. How long do patients usually wait at the facility to obtain their ARVs?**

Up to 1 hour ☐ 1-3 hours ☐ 3-6 hours ☐ All day ☐

**18. Are you able to spend enough time with each client?** Yes ☐ No ☐

**19. What challenges do you face as a health care worker providing treatment and care within the community to PLHIV?**

Lack of time to deal with each client properly ☐

Lack of equipment/medical resources ☐

Lack of information/training or awareness on certain subjects, which might be helpful to clients ☐

Overcrowding at the clinics ☐

Exhaustion ☐

Lack of adequate support for health workers ☐

Other ☐

**If other, please explain.**

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**20. Have you heard of 'differentiated ART delivery'?**

Yes ☐ No ☐

**21. *(NB: Interviewer to provide definition)* Does this sound interesting? If so, why?**

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**22. In your opinion, would any of the options below make it simpler for PLHIV to regularly obtain their ARV's?**

(Tick one or all that apply)

Picking up ARV's at the facility/clinic but at a 'fast track' window rather than having to complete a clinical check every time as well ☐

Picking up ARV's close to home at a community drug distribution point ☐

Participating in a peer support group or health care worker led group at the facility or in a home or hall close by, where the drugs are distributed ☐

Participating in a community group and working on a roster system: sharing pick up and distribution duties where one person picks up the drugs while at a clinic consultation and delivers to other group members, who each get a turn at the clinic. ☐

23. Would any of the above approaches be appropriate in your region/community?

Yes ☐

No ☐

24. What specific barriers or challenges do you feel would hinder the implementation of different models of ART delivery in your region/community? *(NB: this is deliberately open ended to find out what the person thinks)*

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25. Are there specific sub groups that might be adversely affected by changing how ART is delivered? If yes, please explain?

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26. What additional support do you think might be needed to effectively implement a differentiated approach to ART delivery within the region where you work? *(NB: for instance think about additional training so that health workers can adequately communicate to the community, establishing or engaging with peer support networks, ensuring specific criteria are met and monitoring viral load as well as being aware of implications related to stigma/discrimination)*

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