APPENDIX 4: SUB-STUDY 3-IN-DEPTH INTERVIEW GUIDE FOR AYPLHIV (English Version)

Study Title: Retention in Intensive Adherence Counselling as a Pathway to Viral Suppression among Virally Non-Suppressed Adolescents and Young People Living with HIV in East-Central Uganda: A Sequential Explanatory Mixed-Methods Study

Introduction

Thank you for agreeing to participate in this interview.

My name is ……., and I am part of a research team from Makerere University. We are conducting a study to understand the experiences of adolescents and young people living with HIV who were enrolled in Intensive Adherence Counselling (IAC) after receiving a viral load result showing that the virus was not suppressed.

We would like to learn about:

- Your experiences attending IAC sessions;
- Factors that helped or hindered you from completing IAC;
- How IAC influenced your medication-taking behaviour;
- Your views on viral load suppression;
- How HIV services can better support adolescents and young people.

There are no right or wrong answers. We are interested in your personal experiences and opinions.

The interview will take approximately 45-60 minutes and will be audio-recorded with your permission.

GUIDING QUESTIONS

Domain	Main Questions	Probes (COM-B)
Opening Questions	➢ When did you start HIV treatment? ➢ How long have you been receiving HIV care from this facility? ➢ What was your reaction when you were told that your viral load was not suppressed? ➢ What did you understand about the meaning of an unsuppressed viral load result?	❖ Feelings and emotions after receiving results. ❖ Understanding of viral load suppression. ❖ Concerns about health and treatment outcomes. ❖ Reactions from caregivers and family members.
Introduction to IAC Experience	➢ Can you tell me about your experience after being enrolled into Intensive Adherence Counselling (IAC)? ➢ What were you told about IAC? ➢ How many IAC sessions did you attend? ➢ What was your experience during the counselling sessions?	❖ Understanding of IAC objectives. ❖ Perceived usefulness of IAC. ❖ Quality of counselling received. ❖ Relationship with counsellors.
Psychological Capability	➢ Think about yourself as a young person living with HIV. ➢ What personal factors influenced your ability to attend and complete all scheduled IAC sessions? ➢ What helped or prevented you from remaining in IAC until completion?	❖ Tell me more about how these factors affected your retention in IAC. ❖ Knowledge about HIV and viral suppression ❖ Understanding of IAC. ❖ Memory and forgetfulness. ❖ Decision-making ability. ❖ Attention and concentration. ❖ Planning ability. ❖ Self-management skills. ❖ Health literacy.
Physical Capability	➢ Were there any physical or health-related challenges that affected your ability to attend IAC sessions? ➢ How did your health condition affect your participation in IAC?	❖ Illness episodes. ❖ Medication side effects. ❖ Fatigue. ❖ Disability or mobility challenges. ❖ Mental exhaustion.

		❖ Physical wellbeing during IAC.
Social Opportunity	➢ Think about people around you, such as family members, caregivers, peers, teachers, health workers, partners, and community members. ➢ How did these people influence your attendance and continuation in IAC? ➢ Were there people who encouraged or discouraged you from attending IAC sessions?	❖ Tell me more about how these people influenced your retention in IAC. ❖ Caregiver involvement. ❖ Family support. ❖ Peer support. ❖ Teacher/school support. ❖ Partner support. ❖ Social reminders. ❖ Disclosure status. ❖ Stigma and discrimination. ❖ Social acceptance.
Physical Opportunity	➢ Now think about factors in your environment and the health system. ➢ What factors made it easier or harder for you to attend all your IAC appointments? ➢ What challenges did you face when trying to return for scheduled IAC sessions?	❖ Distance to facility. ❖ Transport availability ❖ Transport costs. ❖ Waiting times. ❖ Appointment scheduling. ❖ Clinic operating hours. ❖ Availability of counsellors. ❖ Privacy and confidentiality. ❖ Drug availability. ❖ Youth-friendly services. ❖ Community-based service access.
Reflective Motivation	➢ Reflect on your personal goals, beliefs and future aspirations. ➢ What motivated you to continue attending IAC sessions? ➢ What made you feel it was important to complete IAC? ➢ How did your expectations about viral suppression influence your attendance?	❖ Reflect on your: ❖ Self-efficacy. ❖ Treatment beliefs. ❖ Illness perceptions. ❖ Future aspirations. ❖ Personal goals. ❖ Educational goals. ❖ Career ambitions. ❖ Family responsibilities. ❖ Perceived benefits of IAC.

		❖ Expectations regarding viral suppression.
Automatic Motivation	➢ Let us talk about emotions and experiences that may have influenced your attendance in IAC. ➢ How did your emotions affect your ability to remain engaged in IAC? ➢ How did receiving an unsuppressed viral load result affect your motivation to attend IAC sessions?	❖ Reflect on your experiences of: ❖ Fear. ❖ Anxiety. ❖ Depression ❖ Stress. ❖ Shame. ❖ Embarrassment. ❖ Hopelessness. ❖ Anger. ❖ Frustration. ❖ Hope and encouragement. ❖ Trust in ART and healthcare providers.
Retention in IAC and Viral Suppression Pathway	➢ In your opinion, how did attending IAC sessions affect the way you take your HIV medication? ➢ How did completing IAC influence your ability to achieve viral suppression? ➢ Why do you think some adolescents complete IAC while others do not? ➢ Why do you think some adolescents achieve viral suppression after IAC while others remain unsuppressed?	❖ Improved medication adherence. ❖ Understanding of treatment. ❖ Behaviour change. ❖ Appointment keeping. ❖ Family support. ❖ Counselling effectiveness. ❖ Persistent barriers. ❖ Motivation for treatment. ❖ Changes in adherence practices.
Facilitators of Retention in IAC	➢ What helped you remain engaged in IAC until completion? ➢ Which support systems were most helpful during IAC? ➢ What made it easier for you to return for subsequent IAC appointments?	❖ Counsellors. ❖ Peer supporters. ❖ Caregivers. ❖ Family members. ❖ Community health workers. ❖ Support groups. ❖ Appointment reminders. ❖ Telephone follow-up. ❖ Community-based support.

		❖ Differentiated service delivery models.
Recommendations	➢ What can health facilities do to improve retention of adolescents and young people in IAC? ➢ What can caregivers, families and communities do to support adolescents to complete IAC? ➢ What changes would help more young people achieve viral suppression after IAC?	❖ Peer-led support. ❖ Community-based IAC. ❖ Family-centred support. ❖ Telephone/SMS reminders. ❖ WhatsApp support groups. ❖ Home visits. ❖ Youth-friendly services. ❖ School-based support. ❖ Community follow-up mechanisms.
Conclusion	➢ Is there anything else you would like to add about your experiences with IAC, retention in care, or viral suppression? ➢ Do you have any recommendations that we have not discussed?	❖ Thank participant for their time and contribution.