**IDI-HCP-001**

Thank you for agreeing to take part in this key informant interview, I would like you to explain anything that is important in relation to HIV testing and linkage to care in this site.

1. Facility/site operation

Int: Please tell me about works of this facility/site what happens to the client from the time he/she registers for service.

Res: the clients who come for testing they wait outside (the waiting area), when I’m done preparing myself, I invite them one by one, I register them in this Voluntary Counseling and Testing (VCT) register, then we talk, …like I ask him did you come for your own will, why did you decide to check for HIV, this helps me in assessing the personality of my client and I know how to prepare him in case the results comes positive

Then when were done , I take the blood for test I tell him to wait outside then I call him when the results is ready, I give his result and post test counseling according to the outcome.

Int: Is this facility offering care and treatment services (CTCs)? If not where do you refer your clients for further management?

Res: Yes this is big Hospital with admissions, operations like any other district hospital, so we have a CTC unit and laboratory tests are also done here we do not refer unless there are some complications beyond him being HIV positive.

Int: What are the procedures for referral this facility/site?

Res: Normally when I find a positive client, I go to the next room where we keep the documents for registration and the CTC cards, so I register him/her in the CTC register and give them a CTC clinic number with the treatment card, then it if is Wednesday like today… is a CD4 testing day…

We do CD4 testing Wednesdays and Fridays, the other days is for in-patients tests,

So if is Wednesday and the client come early they directly go to CD4 testing section and they are given a date to come for results normally is three or four days but not more than a week

From there, they go directly to the CTC with their CD4 results, the staff on that side they will decide whether he needs ART or not and they will continue accordingly, for me I just send to them a list of clients , I have given them CTC cards so that they will be expecting them.

Int: Are there official documents or guidelines/processes for referral at the site?

No there is a form that we use if the patient is not from … maybe she was just visiting a relative, we fill the form so that he/she show it to the CTC where they live.

Int: okay, I know CTC is on the other side of the Hospital do you know what happens after they go to CTC

Res: as I said earlier the staff will decide what next, there are doctors working at the CTC they do HIV staging or based on the CD4 results the can start ART but I don’t know the details

Int: Do you know if they follow up clients?

Res: I don’t know, In the past years there were HBCs from …Ngo who were helping with follow ups but , I do not see them working nowadays may be the project has ended, I think it was a three years project the patients registered in that organization were receiving some nutrition stuff like food , vitamins and things a like that.

What works well in following up and retention of clients? N/A

What doesn’t work very well in follow up of clients? N/A

Int: Do you see clients who are reluctant to enter HIV care?

Res: Yah occasionally you see someone does not want to go to CTC no matter how much you explain to them, but for me I just tell them take this card you can go home and discuss with whoever you trust and then come tomorrow for further, most of them come but there few who disappear completely

Why

I think some is stigma and some may be they do not believe that they are infected especially those who are asymptomatic….. ooh! And some they go for prayers in the born again religions and they believe is a sin taking medication like the Mashahidi *wa jehova* (Jehova witnesses), they do not take medication or agree to blood donation even if the patient is dying of anaemia.

Int: What do you think can be done to improve things at the site with regard to linkage and continuity in HIV care?

Res: we need to keep educating them, and also the government should train more staff to work in HIV area the problem is very big especially here in kyela.

Thank you very much