

HIV Treatment Intervention Navigator: “There Are Options to Support You”

Also called the Client Navigator

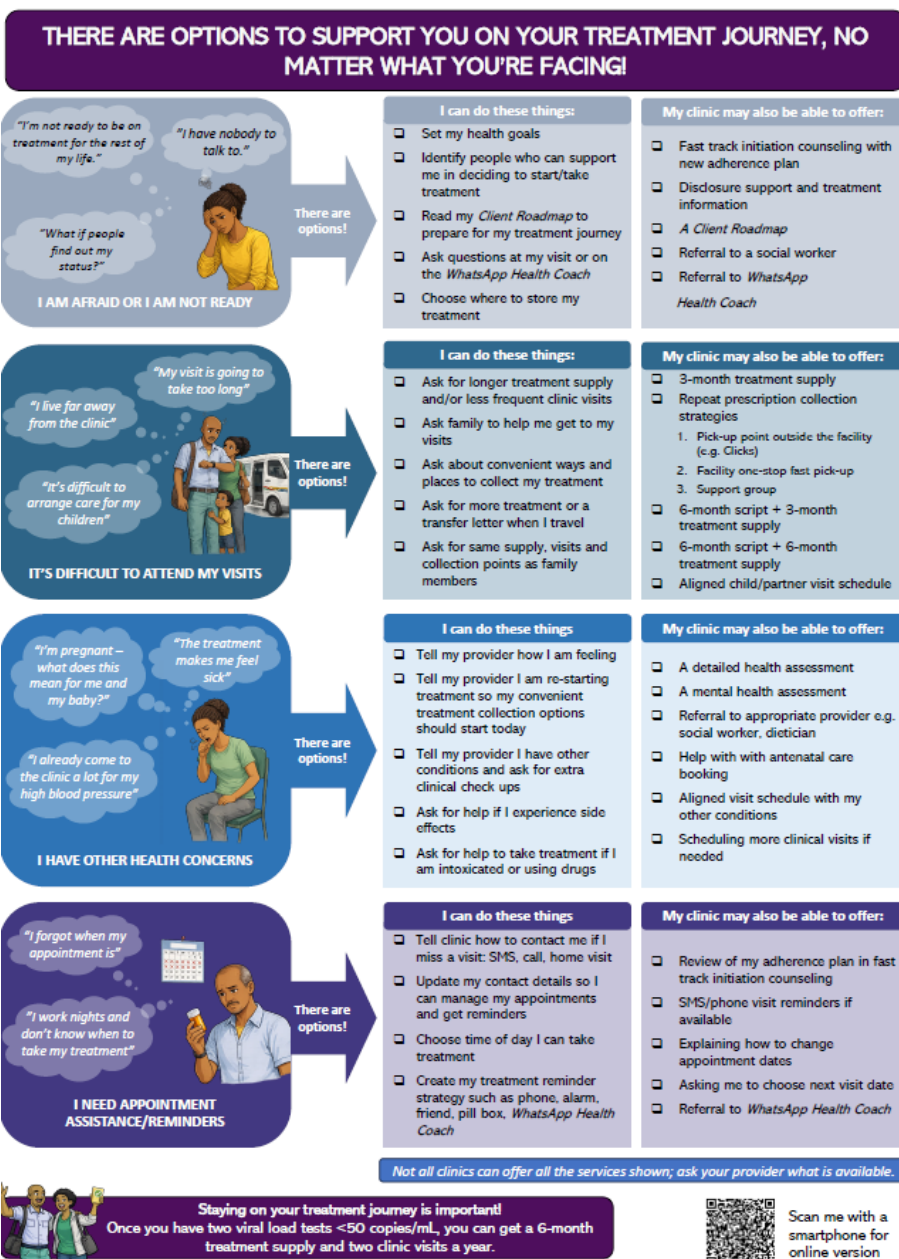
What is it?

The HIV Treatment Intervention Navigator (the Navigator) is a combined self-assessment and retention intervention-mapping tool, developed as part of the RETAIN6 BRIDGE retention toolkit. It groups common barriers that can contribute to client disengagement from HIV care into four broad categories: psychosocial challenges, logistical barriers, concurrent health concerns, and adherence support. Within each category, we developed statements that describe in relatable, easy to follow language what clients may experience if facing one of these barriers. Each barrier category was paired with a matching “menu” of interventions and options that the client can do on their own and/or the clinic may be able to offer.

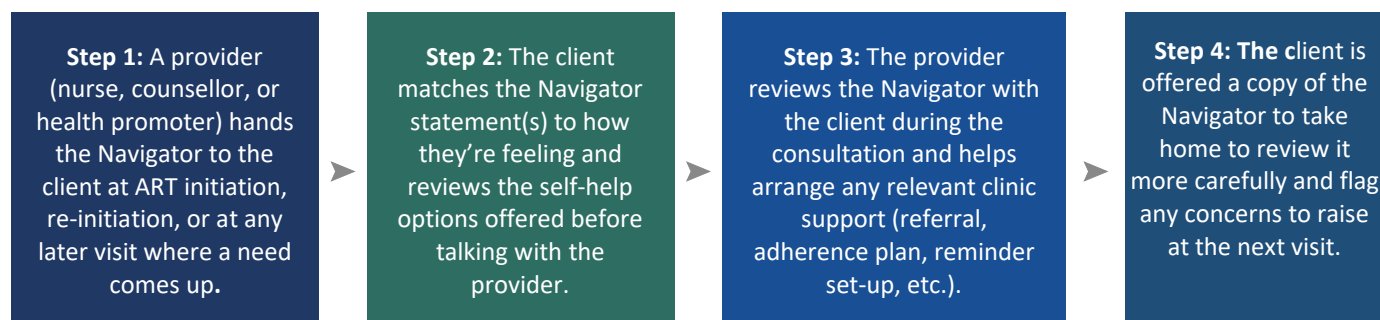
The Navigator was designed to require no direct facility costs beyond printing and to complement existing counseling procedures by providing clients and providers accessible solutions to challenges to staying in care.

Why it matters

Clients starting or restarting ART are most likely to disengage from care in their first six months of treatment, because of barriers at the individual level (e.g. forgetfulness, side-effects, psychosocial factors), interpersonal level (e.g. stigma, concerns about confidentiality), structural level (e.g. transport costs, travel distance, or work commitments), and health facility level (e.g. long waiting times, unwelcoming providers, and inflexible appointment schedules). Some of these barriers go unspoken during a routine consultation unless a client is asked directly. The Navigator is designed to act as a conversation template for both clients and providers. Rather than relying on a provider to guess, remember, or have time to ask about the full range of possible barriers, the Navigator gives the client a structured, low-pressure way to name what is actually going on for them, and gives the provider a ready-made link to a concrete next step.



Intended use



What it contains

If a client says...	Common concerns	Options offered
<i>"I am afraid or I am not ready..."</i> Readiness and fear	Fear of lifelong treatment, disclosure worries, not feeling ready to start or restart treatment	Self-help: identify a support person, read the Client Roadmap, ask questions via the PSI WhatsApp Health Coach. Clinic can offer: fast-track initiation counselling, disclosure support, referral to a social worker.
<i>"It's difficult to attend my visits..."</i> Access and logistics	Distance, cost, time off work, childcare, travel	Self-help: ask for a longer supply or less frequent visits, ask about family-aligned visit dates. Clinic can offer: multi-month scripts, alternative pick-up points, support groups.
<i>"I have other health concerns..."</i> Other health needs	Pregnancy, treatment side effects, comorbidities, substance use	Self-help: tell the provider how you're feeling, ask for extra check-ups. Clinic can offer: detailed or mental health assessment, referral to a dietician/social worker, aligned visit scheduling.
<i>"I need appointment assistance/reminders..."</i> Forgetfulness and uncertainty	Forgetting appointments, shift work, unclear contact process	Self-help: update contact details, choose a reminder method (SMS, alarm, PSI WhatsApp Health Coach). Clinic can offer: SMS/phone reminders, help changing appointment dates.

Availability

The Navigator is available in English, Afrikaans, isiXhosa, Setswana, and isiZulu, as a client handout, a consultation-room poster for display in consultation and counselling rooms and waiting areas (including for group information sessions), and an online version reached by scanning the QR code on the poster for clients who prefer to use it on their own phone. The poster is a single vertical page, while the handout is a double-sided horizontal page.

How it was developed

The Navigator originated as two documents: (i) a risk-scoring tool predicting a client's likelihood of disengaging from care; and (ii) an accompanying list of interventions, based on what is actually available at facilities, that providers could offer in response. The original design envisaged providers assessing each client's risk of missing their next appointment or discontinuing care, then identifying appropriate interventions available at the facility — such as multi-month dispensing — based on that assessment. Consultation with facility providers led to a revised approach: a combination of the two tools, with clients assessing their own risk and concerns rather than providers assessing it on their behalf, and that risk matched directly to a corresponding intervention.

Implementation challenges and ideas for solving them

The Navigator was introduced and tested over an 11-week pilot at six primary healthcare facilities in Gauteng and KwaZulu-Natal provinces. During this period, several challenges in using the Navigator arose.

Staffing and human resources Recurring staff shortages, leave, and turnover pulled trained providers away from the tools for stretches at nearly every site, and provider motivation visibly waned over the course of the pilot. Training backup providers per shift, and continuing refresher support and outcome feedback for as long as implementation runs, may help.	Training and workflow clarity Some sites were not clear on who would introduce the Navigator, or at what point in the visit, reflecting broader confusion about its role as a support tool. Clarifying the Navigator's role as a support tool and agreeing on a workflow per facility at orientation, revisited at refreshers, may help with both.
Materials, language, and supply Flyers weren't always available in clients' languages (notably for clients from other African countries), and some sites ran out of stock between visits. Pre-positioning translated flyers based on each site's actual patient demographics, defaulting to print materials for clients unlikely to engage digitally, and setting a minimum stock threshold with scheduled resupply, may help.	Patient volume and recruitment Some weeks had few eligible patients for reasons unrelated to implementation (month-end, bad weather, grant-payment days), and recruiting male participants specifically became harder as the pilot progressed. Flagging known low-volume periods in reporting, and using a targeted male-recruitment approach alongside the general rollout, may help.

Early responses to the Navigator

Providers and clients who were exposed to the Intervention Navigator were interviewed to learn about their perspectives on it. We talked to 29 providers and 62 clients.

What did providers say?

How was it used?	Providers described variability in use: Some providers reported reviewing the Navigator with clients during clinical consultations or counseling sessions Some providers cited time constraints and sent clients home with the Navigator to review and discuss at their next visit. Providers had mixed perceptions of who is best poised to use the Navigator and which cadre's workflow it fits into most naturally.	“... We resorted to giving this tool to take home so they can go through it comfortably [and] answer honestly. I believe when they have to answer and I'm waiting for them, they might give me wrong answers. Just to please me.” – Professional Nurse, Gauteng Province “[It is] not really practical because we are busy. There's no time to sit with the patient for hours and go through this intervention one-on-one. So, I think maybe it's more practical for the counselors because they can spend more time.” – Professional Nurse, Gauteng Province
Was it acceptable?	- The Navigator received mixed reviews. - Providers who liked the tool felt that it opened opportunities for honest conversation with clients and aligned with existing motivations to offer high-quality counseling. - Providers who found it difficult to use typically cited two main barriers: - Text-heavy format does not meet the needs of clients who cannot read or do not speak the available languages. - Clients may not be emotionally ready for the discussions that the tool encourages, if they	“... Patients thought that we don't care about their challenges... This tool gives a patient a clear view that... if your life has got many components then it means we don't cancel everything, we just add your treatment. This tool enlightens patients to show them that even if you've got challenges... we can collectively come up with solutions.” - Community Health Worker, Gauteng Province “When it comes to newly diagnosed patient, I think they need to absorb the whole information... I think it will be best if they take

have just learned their HIV status and are overwhelmed.

- Some providers suggested that the Navigator be simplified, shortened, or otherwise made more accessible to clients (more images, audio-based, integrate into a digital format, primarily use by clients at home, etc.)

away those questionnaires to go through it. Imagine, if you are newly diagnosed, it's a shock. Now we're going through all of those information." – Lay Counsellor, Gauteng Province

"It fits well, but only if they can make picture [summaries]...I don't think the patient will have time to go through this in the follow-up rooms." – Professional Nurse, Gauteng Province

What did clients say?

Among the 62 clients interviewed, roughly two-thirds could recall reviewing the Navigator. Consistent with what providers said, some clients reported reviewing the Navigator with their provider and others took it home.

What clients thought of the tool

- Clients reported using the Navigator in several ways: some discussed it with their healthcare provider during a clinical visit, and some reviewed it independently while waiting for their visit or from home (but reported that a provider did not discuss with them).
- Clients generally reported that the questions and scenarios posed in the tool were relevant and responsive to their situations.
- Clients who encountered the tool were generally satisfied with the tool and its content.

"The time I started the drugs... There was no one who explained well like this nurse... there was no one who asked me what is happening. During this last visit, the nurse explained and I could speak about my feelings... It was the first time I could talk about those things with a professional, because even at home, I don't talk to many people about that." – Male client, Gauteng Province

"...It makes me realize that I'm not the only one with the challenges I might be facing.[My provider] went step by step with me, she didn't rush through it." – Female client, Gauteng Province

"[The navigator was] important because they made me speak out and be free, without having any shame about myself." – Male client, KZN Province

Next steps

The Intervention Navigator offers clients a structured, self-led way to express their own barriers to care and ask for assistance. Key next steps will include simplifying the Navigator and identifying the pathway to scale and incorporate it into routine practice:

- Replace as much text as possible with simple visual aids.
- Promote the QR-code online version as a fallback for clients when printed stock is low or for use at home.
- Embed the Navigator into the routine triage/counselling workflow at each facility.
- Pre-position translated stock ahead of rollout based on each facility's client language profile.
- Incorporate the Navigator into training for structuring provider-client conversations.

For more information or to request access to the Navigator and supporting materials, please contact Dr Mhairi Maskew, mmaskew@heroza.org.



Welcome! How are you feeling today?

While waiting to see your provider, please read these lists below describing challenges that some clients have seeking care. Tick any boxes that you would like to talk about with your provider during your consultation. There are many options to manage these challenges yourself and services that this facility offers to support your care journey. *Not all clinics can offer all the services shown; ask your provider what is available.*

I AM AFRAID

- ☐ I'm afraid people will find out I am taking treatment
- ☐ I had problems last time I was on treatment
- ☐ I don't want to disappoint my nurse
- ☐ I don't have anyone to talk to
- ☐ I was shouted at before when I came to the clinic

I AM NOT READY

- ☐ I am not ready to start treatment
- ☐ I need more information about taking treatment
- ☐ I don't like clinics
- ☐ I don't need treatment
- ☐ I am new on treatment and not sure what to expect

I can do these things:

- ☐ Set my health goals
- ☐ Identify people who can support me in deciding to start/take treatment
- ☐ Read my *Client Roadmap* to prepare for my treatment journey
- ☐ Ask questions at my visit or on the *WhatsApp Health Coach*
- ☐ Choose where to store my treatment

My clinic may also be able to offer:

- ☐ Fast track initiation counseling with new adherence plan
- ☐ Disclosure support and treatment information
- ☐ A *Client Roadmap*
- ☐ Referral to a social worker
- ☐ Referral to *WhatsApp Health Coach*



IT'S DIFFICULT TO ATTEND MY VISITS

- ☐ I live far away
- ☐ I don't have transport
- ☐ I am in school/work during clinic hours
- ☐ My visit date is different from others in my family
- ☐ I have too many visits
- ☐ My visits take too long
- ☐ I often have unplanned travel
- ☐ I could lose my job
- ☐ I don't have money to attend so many visits
- ☐ I have children or others to care for at home

I can do these things:

- ☐ Ask for longer treatment supply and/or less frequent clinic visits
- ☐ Ask family to help me get to my visits
- ☐ Ask about convenient ways and places to collect my treatment resupply
- ☐ Ask for more treatment or a transfer letter when I travel
- ☐ Ask for same supply, visits and collection points for family members

My clinic may also be able to offer:

- ☐ 3-month treatment supply
- ☐ Repeat prescription collection strategies
 1. Pick-up point outside the facility (e.g. Clicks)
 2. Facility one-stop fast pick-up
 3. Support group
- ☐ 6-month script + 3-month treatment supply
- ☐ 6-month script + 6-month treatment supply
- ☐ Aligned child/partner visit schedule

I HAVE OTHER HEALTH CONCERNS

- ☐ I feel sick today
- ☐ I have other health conditions like TB, high blood, high sugars
- ☐ I am worried I have STI
- ☐ I am pregnant or breastfeeding
- ☐ I have mental health concerns
- ☐ I use alcohol or drugs I'm worried it may affect my treatment
- ☐ The treatment makes me feel sick
- ☐ I take other medication
- ☐ I don't think my treatment is working
- ☐ I don't have food at home

I can do these things:

- ☐ Tell my provider how I am feeling
- ☐ Tell my provider I am re-starting treatment so my convenient treatment collection options should start today
- ☐ Tell my provider I have other conditions and ask for extra clinical check ups
- ☐ Ask for help if I experience side effects
- ☐ Ask for help to take treatment if I am intoxicated or using drugs

My clinic may also be able to offer:

- ☐ A detailed health assessment
- ☐ A mental health assessment
- ☐ Referral to appropriate provider e.g. social worker, dietician
- ☐ Help with antenatal care booking
- ☐ Aligned visit schedule with my other conditions
- ☐ Scheduling more clinical visits if needed

I NEED APPOINTMENT/ASSISTANCE REMINDERS

- ☐ I forget when my next visit is
- ☐ I forget to take my treatment some days
- ☐ I sometimes use alcohol or drugs and forget my visit
- ☐ I don't know when my next visit date is
- ☐ I can't come on my scheduled visit date
- ☐ I don't get visit reminders

I can do these things:

- ☐ Tell clinic how to contact me if I miss my visit: SMS, phone, house visit
- ☐ Update my contact details so I can manage my appointments and get reminders
- ☐ Choose time of day I can take treatment
- ☐ Create my treatment reminder strategy such as phone, alarm, friend, pill box, *WhatsApp Health Coach*

My clinic may also be able to offer:

- ☐ Review of my adherence plan in fast track initiation counseling
- ☐ SMS/phone visit reminders if available
- ☐ Explaining how to change appointment dates
- ☐ Asking me to choose next visit date
- ☐ Referral to *WhatsApp Health Coach*

☐ I have different concerns to discuss today

☐ I don't have concerns to discuss today

Not all clinics can offer all the services shown; ask your provider what is available.

Staying on your treatment journey is important!

Once you have two viral load tests <50 copies/mL, you can get a 6-month treatment supply and two clinic visits a year.

