

IMPROVING HIV TREATMENT ADHERENCE VIA A SCRATCH CARD-BASED INTERVENTION

Background: Treatment adherence is critical for viral load suppression and achievement of South Africa's HIV goals. **Adherence to treatment is influenced** by a complex web of interconnected barriers:

 **Individual Factors & Social Factors:** Forgetfulness, medication side effects, HIV-related stigma

 **Structural Barriers & Health System Factors:** Lack of resources, clinic capacity and health worker engagements

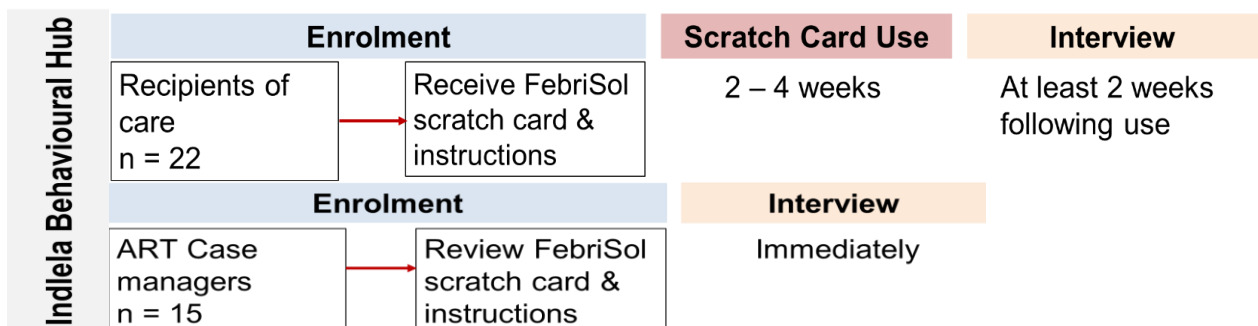
Objective: Environmental cues can motivate an individual to take action, engage in repetitive behaviour and build habits like taking medication daily to improve ART adherence. The FebriSol scratch card is a medication adherence tool that may be adapted and placed in visible locations to serve as a reminder to take ART medication daily.



- ✓ **Take Medication:** Care recipient takes their daily dose
- ✓ **Scratch Card:** They scratch off that day's panel on the card
- ✓ **Reveal Tick:** A green tick provides instant, positive feedback

Study overview:

- Care recipients with adherence challenges enrolled in a case management programme and case managers supporting care recipients with treatment interruptions were recruited from the Indlela Behavioural-Hub in Gauteng
- All participants were given two FebriSol adherence scratch cards each and watched an instructional video on how to use them
- Care recipients were asked to use the cards and were interviewed 2-4 weeks after receiving the cards
- Case managers were interviewed immediately after receiving the cards and watching the instructional video
- The study outcomes included user experience and acceptability of using the scratch cards amongst PLHIV and acceptability, appropriateness and feasibility among case managers



- We conducted a thematic analysis of interview transcripts
- We applied a behavioural science lens to generate insights on treatment adherence and use of the card

RESULTS

Profile of care recipients and healthcare workers

- **Care recipients:** Among 22 care recipients, 72.7% were women, 95.5% had completed high school, including 18.2% who attained tertiary qualifications, and 31.8% were employed.
- **Healthcare workers:** Among 15 healthcare workers, 73.3% were women and 86.7% had been in their current role for over a year.

Themes influencing treatment adherence

- **Psycho-cognitive:** Mental and emotional state affecting decision-making
- **Physical:** Medication side effects and overall physical health
- **Clinic/System:** Clinic logistics, like long queues and staff attitudes
- **Social:** Stigma, disclosure challenges, and lack of social support
- **Socio-economic:** Poverty, unemployment, and food insecurity

In Their Own Words: Care Recipient Experience



"Of course I am a human being. I will forget. I can never plan to be perfect."



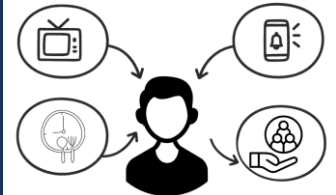
"The purpose of the card is to help you remember to take your medication and this way you can see patterns."



"Everyone can see that I scratched which means that I drank the pill."

KEY FINDINGS

Adherence Routines/Strategies



Care recipients build habits around daily cues like TV shows, use phone alarms, and rely on family and social support for reminders.

Failure of adherence strategies



Life events like power cuts, travel, social events and weekend activities disrupt their treatment adherence routines.

Perceived benefit of the card



Some people understood the patterns of their adherence by looking at the full card. The green tick was a positive reinforcement.

RECOMMENDATIONS

Our findings indicate high potential for low cost, scalable adherence scratch cards to support ART adherence among people struggling with their medication. With frequent failures of adherence strategies, multiple strategies may be needed to improve adherence. We recommend testing the scratch card in real-world contexts to evaluate its effectiveness, assess feasibility, and identify practical challenges. Insights from these tests can help refine the approach and guide future decisions about broader use.

Indlela policy Brief

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