Appendix O In-Depth Patient Interview Guide

Introd	luction

Hello, my name is [_____] from RTI International, a nonprofit research firm, and [Name] is also on the phone. RTI is evaluating the text messaging program that is being piloted with [Clinic name] patients. As part of the evaluation process, we are talking with up to 100 people who are participating in the text messaging project to learn more about their experiences and opinions. [Clinic staff person] recommended you for this interview. Is this still a good time to talk? Our discussion should take about 45 minutes, please let me know if you need to go earlier.

Before we get started, I just wanted to mention a couple of procedural issues. Please know that you can choose to not answer questions and can stop this interview at any time with no problem. I also would like to point out that none of your comments will be linked with your name or shared with your doctor or anyone at the clinic. We are going to be taking notes as we talk, but would also like to audio record our discussion so that we can check our notes to make sure we didn't miss anything. Once we check our notes, we will destroy the audio recording.

Is it OK for us to audio record our discussion?

[If yes, turn on recorder. If no, do not turn on recorder]

Since some of these questions I am going to ask you are of a sensitive nature, I would like to make sure you are in a private location for having this kind of discussion with me.

May we proceed with the interview now?

[YES] Thank you again for your time and help. Let's begin!

[NO] Terminate

Implementation Policies and Practices

1. How were you approached and enrolled into the text messaging project? What did you think about the enrollment process? Did it give you enough information about the text messaging program and what your participation would be?

Implementation Effectiveness

- 2. Are you still receiving text messages from the clinic?
 - a. If not, did you choose to stop receiving text messages?

- i. If chose to stop early: Why did you decide to stop receiving text messages?
- 3. How often did you read the text messages that you received?
- 4. Were the messages helpful to you? If so, how?
- 5. Which of the messages told you something that you didn't already know?
- 6. Were there times when the messages were confusing or hard to understand? Can you give me an example?
- 7. Did you feel that the messages were written for you? Tell me more about that.
- 8. Did you ever worry about your privacy because of getting the text messages? Tell me a little bit more about your concerns? How could those concerns be addressed?
 - a. How did having to enter a PIN for some messages help with your concerns?
 - b. Did you do anything to try and make sure others could not see the messages? If so, what did you do?

Barriers to Program Implementation, Maintenance and Sustainability

- 9. Did you encounter any problems with sending or receiving the text messages as part of the program? Did you run into any other problems or obstacles related to the text messaging project? What were those?
- 10. Do you think it would be helpful to continue to receive messages like those you have been receiving? If so why? If not, why not?

Patient Satisfaction

- 11. How satisfied are/were you with the text messaging program?
- 12. Was there anything you especially liked/disliked about the messages? What? Probe: Did you feel some messages did not apply to you? Which ones and why?
- 13. How do you/did you feel about the timing of the text messages? Number of messages? Content?
 - a. Ideally, how often would you like to receive reminders or messages?
- 14. Would you recommend a text messaging program like this to other people your age who also have HIV?

Outcomes

- 15. Did you make any changes in your life as a result of getting the text messages?
- 16. Did the text messages make it easier for you to:
 - a. Get to your medical appointments?
 - b. Ask your doctor questions about your medication, HIV or your treatment?
 - c. Take your medication at the right times?
 - d. Get support from other people?
 - e. Change anything related to the way you eat, exercise?
 - f. If sexually active, protect yourself from STDs?
 - g. If sexually active, use condoms?
 - h. Reduce alcohol or drug use?
 - i. Find additional information or resources to help you address mental health issues, quit smoking, or reduce stress?
 - j. Find out about immunizations that might be good for you to get
 - k. Learn about reproductive or preconception health topics
 - I. Disclose your HIV status?
- 17. Did the messages change the way you feel about [Clinic name] and the doctors, nurses and other staff who work there?

Those were all the questions that I had. Did you have any additional comments or thoughts to add before we go? Thank you very much for taking the time to talk with us today.