**Supplementary material – “Preferences for linkage to HIV care services following a reactive self-test: discrete choice experiments in Malawi and Zambia.”**

*Design of the discrete choice experiment*

To develop the DCE design, we used qualitative research to (i) identify key design attributes and levels that were most salient in driving decision-making on linkage to care (1, 2); (ii) assess user comprehension of the DCE scenario exercises, including accompanying illustrations (3).

We first reviewed the existing literature to develop a preliminary set of attributes and attribute levels that influenced the decisions of newly diagnosed people living with HIV to link to care. A limited number of studies have investigated strategies on how to improve linkage into care after self-testing. In Malawi, the offer of ART initiation at home following a reactive self-test and confirmative HIV testing resulted in a three-fold increase in ART initiation compared with referral to facility-based treatment (4). A qualitative study in Malawi found that financial incentives and phone call reminders could help male partners of antenatal care clients access HIV treatment or male circumcision after self-testing in comparison to standard testing, phone call reminders or lottery incentives (1). Other promising linkage to care interventions include integrated delivery with other health services, streamlined operations at health facilities, provision of comprehensive patient-centred services and financial and non-financial incentives for attendance (5, 6).

Semi-structured interviews (n=33) were then conducted with clients attending HTS at primary health centres in rural and urban Blantyre. We developed illustrations to depict each of the levels and tested comprehension of the DCE scenario exercises during these interviews. We opted for an unlabelled DCE design, presenting more neutral scenarios, preferable for a cross-country analysis (7). The STAR programme implementers, Population Services International in Malawi, and Society for Family Health in Zambia, were also consulted to ensure that the DCE design considered key implementation priorities, such as the provision of a telephone support hotline. This design was then vetted for local applicability in Zambia through interviews in peri-urban Lusaka with community members (n=10), leading to the same blueprint in both countries. The final attributes and attribute levels relating to linkage to confirmatory testing and HIV care following HIVST were:

1. Method of support to access services: instruction leaflet provided with the self-testing kit, short messaging services (SMS), phone call, and in person.

2. Location of services: health facility, mobile clinic, at home, and at the home of the HTS counsellor.

3. User fee for HTS services: none, and either Malawian Kwacha (MK) 100 (US$ 0.14) or Zambian Kwacha (ZMW) 10 (US$ 1.04)

4. HIV testing services (at a health facility and mobile clinic): inclusive or separate from other health care services.

5. Waiting time for HTS services: 30 minutes, one hour and 30 minutes, and three hours.

To create the experimental design, we used priors estimated from the pilot studies and developed a final D-efficient design, which ascertains the minimum number of choice sets needed for parameter estimation (3, 8). A random sub-sample of participants aged 16 years or older was selected for an extended questionnaire which included the DCEs. The proportions of participants completing the DCEs were set to ensure that the minimum sample sizes were met, estimated at a minimum of 170 in both Malawi and Zambia using the rule of thumb by Johnson and Orme (28).

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2. Indravudh PP, Sibanda EL, d'Elbée M, Kumwenda MK, Ringwald B, Maringwa G, et al. 'I will choose when to test, where I want to test': investigating young people's preferences for HIV self-testing in Malawi and Zimbabwe. AIDS. 2017;31 Suppl 3:S203-S12.

3. Mangham LJ, Hanson K, McPake B. How to do (or not to do)… Designing a discrete choice experiment for application in a low-income country. Health Policy Plan. 2009;24(2):151-8.

4. MacPherson P, Lalloo DG, Webb EL, Maheswaran H, Choko AT, Makombe SD, et al. Effect of optional home initiation of HIV care following HIV self-testing on antiretroviral therapy initiation among adults in Malawi: a randomized clinical trial. JAMA. 2014;312(4):372-9.

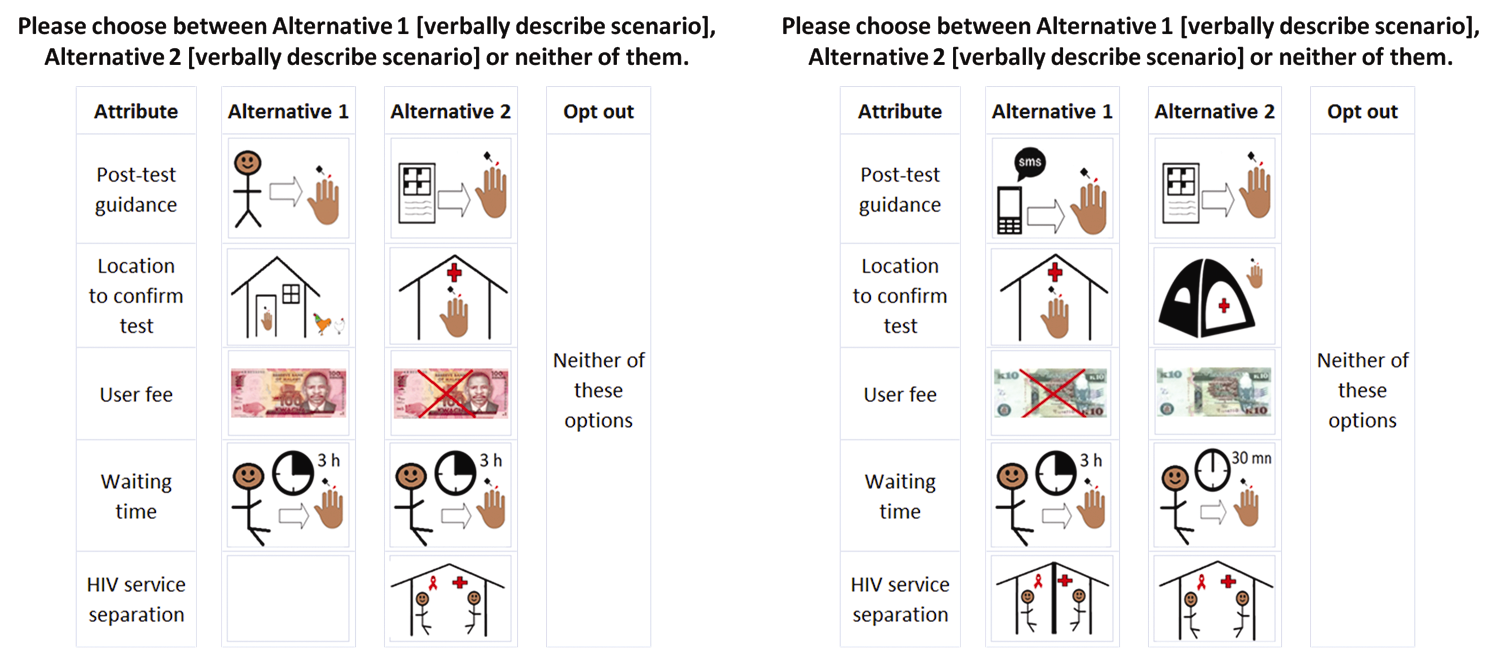
5. Fox MP, Rosen S, Geldsetzer P, Barnighausen T, Negussie E, Beanland R. Interventions to improve the rate or timing of initiation of antiretroviral therapy for HIV in sub-Saharan Africa: meta-analyses of effectiveness. J Int AIDS Soc. 2016;19(1):20888.

6. Govindasamy D, Meghij J, Kebede Negussi E, Clare Baggaley R, Ford N, Kranzer K. Interventions to improve or facilitate linkage to or retention in pre-ART (HIV) care and initiation of ART in low- and middle-income settings--a systematic review. J Int AIDS Soc. 2014;17:19032.

7. Hensher D, Rose J, Greene W. Applied choice analysis. 2nd edition ed. Cambridge, editor2005.

8. Zwerina K, Huber J, Kuhfeld W. A general method for constructing efficient choice designs. Durham: Duke University. 1996:39-59.

**Figure S1. Sample choice task in Malawi (left) and Zambia (right).** Choice scenario administered by the interviewers to the participants during the electronic tablet based household survey. English versions of the DCE presented here, administered in local languages (Chichewa) in Malawi and (Nyanja, Bemba and Tonga) in Zambia.



**Supplement Table S1.** **Random parameter logit with main effects (Model 1), country effects (Model 2)**

**and interaction effects with sex, age, wealth, HIV status and belief in ART effectiveness (Model 3)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Model 1** | | | | | | **Model 2** | | | | | | **Model 3** | | | | | |
|  | **Coef.** |  | **SEa** | **SDa** |  | **SEa** | **Coef.** |  | **SEa** | **SDa** |  | **SEa** | **Coef.** |  | **SEa** | **SDa** |  | **SEa** |
| ***Main effects*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Support for linkage |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *SMS* | -0.071 |  | 0.057 | 0.330 | \*\*\* | 0.110 | -0.072 |  | 0.061 | 0.127 |  | 0.239 | 0.093 |  | 0.195 | 0.363 | \*\*\* | 0.109 |
| *Phone call* | 0.162 | \*\*\* | 0.061 | 0.290 | \*\* | 0.132 | 0.160 | \*\* | 0.067 | 0.182 |  | 0.149 | 0.357 | \* | 0.200 | 0.071 |  | 0.410 |
| *In person* | -0.114 | \*\* | 0.050 | 0.040 |  | 0.112 | -0.091 | \* | 0.052 | 0.035 |  | 0.132 | -0.256 |  | 0.174 | 0.025 |  | 0.138 |
| Location |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *HFb (HIV inclusive)* | -0.249 | \*\*\* | 0.081 | 0.962 | \*\*\* | 0.122 | -0.183 | \*\* | 0.083 | 0.387 | \* | 0.230 | -0.033 |  | 0.276 | 0.894 | \*\*\* | 0.135 |
| *HFb (HIV separated)* | 0.261 | \*\*\* | 0.080 | 0.776 | \*\*\* | 0.135 | 0.262 | \*\*\* | 0.085 | 0.668 | \*\*\* | 0.176 | 0.504 | \* | 0.262 | 0.691 | \*\*\* | 0.159 |
| *MCc (HIV inclusive)* | -0.396 | \*\*\* | 0.094 | 1.309 | \*\*\* | 0.124 | -0.234 | \*\* | 0.107 | 0.844 | \*\* | 0.374 | -0.638 | \*\* | 0.321 | 1.264 | \*\*\* | 0.125 |
| *Own home* | 0.145 | \*\* | 0.071 | 0.637 | \*\*\* | 0.119 | 0.095 |  | 0.077 | 0.728 | \*\*\* | 0.110 | -0.142 |  | 0.241 | 0.620 | \*\*\* | 0.133 |
| *Counsellor’s home* | 0.100 |  | 0.074 | 0.941 | \*\*\* | 0.130 | 0.149 | \*\* | 0.076 | 0.434 |  | 0.351 | 0.017 |  | 0.253 | 0.842 | \*\*\* | 0.134 |
| User fee for services (per dollar) | -1.495 | \*\*\* | 0.107 | 1.203 | \*\*\* | 0.115 | -1.396 | \*\*\* | 0.118 | 0.114 |  | 0.159 | -1.268 | \*\*\* | 0.254 | 1.123 | \*\*\* | 0.131 |
| Waiting time for services (per hour) | -0.437 | \*\*\* | 0.038 | 0.374 | \*\*\* | 0.058 | -0.415 | \*\*\* | 0.041 | 0.339 | \*\*\* | 0.060 | -0.320 | \*\*\* | 0.120 | 0.383 | \*\*\* | 0.061 |
| Neither (opt-out) | -4.988 | \*\*\* | 0.259 | 3.373 | \*\*\* | 0.199 | -4.574 | \*\*\* | 0.236 | 0.324 |  | 0.569 | -7.425 | \*\*\* | 0.663 | 3.261 | \*\*\* | 0.236 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Zambia effects*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Support for linkage |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *SMS* |  |  |  |  |  |  | 0.128 | \*\* | 0.061 | 0.314 | \*\* | 0.127 | 0.094 |  | 0.071 |  |  |  |
| *Phone call* |  |  |  |  |  |  | -0.052 |  | 0.068 | 0.282 | \*\* | 0.130 | 0.018 |  | 0.075 |  |  |  |
| *In person* |  |  |  |  |  |  | -0.038 |  | 0.052 | 0.092 |  | 0.114 | -0.068 |  | 0.061 |  |  |  |
| Location |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *HFb (HIV inclusive)* |  |  |  |  |  |  | 0.560 | \*\*\* | 0.088 | 0.790 | \*\*\* | 0.172 | 0.398 | \*\*\* | 0.096 |  |  |  |
| *HFb (HIV separated)* |  |  |  |  |  |  | -0.325 | \*\*\* | 0.088 | 0.510 | \*\*\* | 0.188 | -0.298 | \*\*\* | 0.094 |  |  |  |
| *MCc (HIV inclusive)* |  |  |  |  |  |  | 0.272 | \*\*\* | 0.104 | 0.990 | \*\*\* | 0.311 | 0.257 | \*\* | 0.118 |  |  |  |
| *Own home* |  |  |  |  |  |  | -0.130 | \* | 0.077 | 0.047 |  | 0.196 | -0.115 |  | 0.088 |  |  |  |
| *Counsellor’s home* |  |  |  |  |  |  | -0.049 |  | 0.076 | 0.685 | \*\*\* | 0.187 | -0.081 |  | 0.090 |  |  |  |
| User fee for services (per dollar) | 0.667 | \*\*\* | 0.087 | 0.112 |  | 0.091 | 0.618 | \*\*\* | 0.106 | 1.105 | \*\*\* | 0.121 | 0.629 | \*\*\* | 0.117 |  |  |  |
| Waiting time for services (per hour) |  |  |  |  |  |  | 0.084 | \*\* | 0.039 | 0.127 | \* | 0.076 | 0.070 |  | 0.044 |  |  |  |
| Neither (opt-out) |  |  |  |  |  |  | 0.993 | \*\*\* | 0.163 | 3.219 | \*\*\* | 0.200 | 0.453 | \*\* | 0.183 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ***Interaction effects*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Age |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *Support – In person* |  |  |  |  |  |  |  |  |  |  |  |  | 0.009 | \*\* | 0.003 |  |  |  |
| *Location – MCc*  *(HIV inclusive)* |  |  |  |  |  |  |  |  |  |  |  |  | 0.014 | \*\* | 0.006 |  |  |  |
| *Fee* |  |  |  |  |  |  |  |  |  |  |  |  | -0.010 | \*\* | 0.005 |  |  |  |
| *Neither* |  |  |  |  |  |  |  |  |  |  |  |  | 0.036 | \*\*\* | 0.010 |  |  |  |
| Food insecure |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *Location HFb*  *(HIV inclusive)* |  |  |  |  |  |  |  |  |  |  |  |  | -0.226 | \*\*\* | 0.086 |  |  |  |
| *Neither* |  |  |  |  |  |  |  |  |  |  |  |  | -0.448 | \*\*\* | 0.173 |  |  |  |
| HIV - positive |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *Location – HFb*  *(HIV separated)* |  |  |  |  |  |  |  |  |  |  |  |  | 0.206 | \* | 0.107 |  |  |  |
| ART non believer |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| *Location – Home* |  |  |  |  |  |  |  |  |  |  |  |  | 0.135 | \* | 0.069 |  |  |  |
| *Neither* |  |  |  |  |  |  |  |  |  |  |  |  | 0.637 | \*\*\* | 0.153 |  |  |  |
| **Model fit statistics** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Number of participants | 941 |  |  |  |  |  | 941 |  |  |  |  |  | 941 |  |  |  |  |  |
| Number of observations | 5632 |  |  |  |  |  | 5632 |  |  |  |  |  | 5368 |  |  |  |  |  |
| Log Likelihood function | -4311 |  |  |  |  |  | -4268 |  |  |  |  |  | -3992 |  |  |  |  |  |
| AIC | 8669 |  |  |  |  |  | 8624 |  |  |  |  |  | 8159 |  |  |  |  |  |
| AIC/N | 1.539 |  |  |  |  |  | 1.531 |  |  |  |  |  | 1.520 |  |  |  |  |  |

a SE = Standard Error, SD = Standard Deviation; b Health facility; c Mobile clinic. \*10%, \*\* 5%, \*\*\*1% level of significance with *p* value.

Likelihood ratio test between the random parameter logits with and without the country effect: LL Model 1 – Model 2 = 85.50χ2(degrees of freedom=20); p<0.001.

Likelihood ratio test between country adjusted random parameter logits with and without interaction effect: LL Model 2 – Model 3 = 552.67χ2(degrees of freedom=44);p<0.001.

**Supplement Table S2a. Random parameter logit (Model 3) with interaction effects: sex, age, wealth, HIV status and belief in ART effectiveness**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Main effect** | | | **Country** | | | **Age** | | | **Men** | | |
|  | **Coef.** |  | **SEa** | **Coef.** |  | **SEa** | **Coef.** |  | **SEa** | **Coef.** |  | **SEa** |
| Support for linkage |  |  |  |  |  |  |  |  |  |  |  |  |
| *SMS* | 0.093 |  | 0.195 | 0.094 |  | 0.071 | -0.006 |  | 0.004 | -0.031 |  | 0.058 |
| *Phone call* | 0.357 | \* | 0.200 | 0.018 |  | 0.075 | -0.004 |  | 0.004 | -0.029 |  | 0.059 |
| *In person* | -0.256 |  | 0.174 | -0.068 |  | 0.061 | 0.009 | \*\* | 0.003 | -0.033 |  | 0.052 |
| Location |  |  |  |  |  |  |  |  |  |  |  |  |
| *HFb (HIV inclusive)* | -0.033 |  | 0.276 | 0.398 | \*\*\* | 0.096 | -0.008 |  | 0.005 | 0.037 |  | 0.083 |
| *HFb (HIV separated)* | 0.504 | \* | 0.262 | -0.298 | \*\*\* | 0.094 | 0.001 |  | 0.005 | -0.041 |  | 0.079 |
| *MCc (HIV inclusive)* | -0.638 | \*\* | 0.321 | 0.257 | \*\* | 0.118 | 0.014 | \*\* | 0.006 | 0.043 |  | 0.095 |
| *Own home* | -0.142 |  | 0.241 | -0.115 |  | 0.088 | 0.000 |  | 0.005 | 0.001 |  | 0.072 |
| *Counsellor’s home* | 0.017 |  | 0.253 | -0.081 |  | 0.090 | -0.004 |  | 0.005 | -0.041 |  | 0.077 |
| User fee for services (per dollar) | -1.268 | \*\*\* | 0.254 | 0.629 | \*\*\* | 0.117 | -0.010 | \*\* | 0.005 | 0.076 |  | 0.071 |
| Waiting time for services (per hour) | -0.320 | \*\*\* | 0.120 | 0.070 |  | 0.044 | -0.002 |  | 0.002 | -0.014 |  | 0.036 |
| Neither (opt-out) | -7.425 | \*\*\* | 0.663 | 0.453 | \*\* | 0.183 | 0.036 | \*\*\* | 0.010 | 0.081 |  | 0.172 |
| **Model fit statistics** |  |  |  |  |  |  |  |  |  |  |  |  |
| Number of participants | 941 |  |  |  |  |  |  |  |  |  |  |  |
| Number of observations | 5368 |  |  |  |  |  |  |  |  |  |  |  |
| Log Likelihood function | -3992 |  |  |  |  |  |  |  |  |  |  |  |
| AIC | 8159 |  |  |  |  |  |  |  |  |  |  |  |
| AIC/N | 1.520 |  |  |  |  |  |  |  |  |  |  |  |

a SE = Standard Error, SD = Standard Deviation; b Health facility; c Mobile clinic. \*10%, \*\* 5%, \*\*\*1% level of significance.

**Supplement Table S2b. Random parameter logit (Model 3) with interaction effects: sex, age, wealth, HIV status and belief in ART effectiveness**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Food insecure** | | | **HIV-positive** | | | **ART non-believer** | | |
|  | **Coef.** |  | **SEa** | **Coef.** |  | **SEa** | **Coef.** |  | **SEa** |
| Support for linkage |  |  |  |  |  |  |  |  |  |
| *SMS* | 0.024 |  | 0.059 | 0.014 |  | 0.079 | 0.018 |  | 0.056 |
| *Phone call* | -0.014 |  | 0.060 | -0.100 |  | 0.080 | -0.058 |  | 0.056 |
| *In person* | -0.048 |  | 0.054 | 0.014 |  | 0.071 | -0.082 |  | 0.052 |
| Location |  |  |  |  |  |  |  |  |  |
| *HFb (HIV inclusive)* | -0.226 | \*\*\* | 0.086 | -0.183 |  | 0.113 | 0.012 |  | 0.079 |
| *HFb (HIV separated)* | -0.007 |  | 0.081 | 0.206 | \* | 0.107 | -0.099 |  | 0.075 |
| *MCc (HIV inclusive)* | -0.018 |  | 0.098 | -0.087 |  | 0.133 | -0.043 |  | 0.092 |
| *Own home* | 0.111 |  | 0.075 | -0.028 |  | 0.098 | 0.135 | \* | 0.069 |
| *Counsellor’s home* | 0.050 |  | 0.080 | -0.116 |  | 0.104 | 0.091 |  | 0.074 |
| User fee for services (per dollar) | -0.017 |  | 0.077 | -0.098 |  | 0.089 | 0.078 |  | 0.056 |
| Waiting time for services (per hour) | 0.048 |  | 0.037 | -0.001 |  | 0.048 | -0.031 |  | 0.033 |
| Neither (opt-out) | -0.448 | \*\*\* | 0.173 | -0.262 |  | 0.231 | 0.637 | \*\*\* | 0.153 |
| **Model fit statistics** |  |  |  |  |  |  |  |  |  |
| Number of participants | 941 |  |  |  |  |  |  |  |  |
| Number of observations | 5368 |  |  |  |  |  |  |  |  |
| Log Likelihood function | -3992 |  |  |  |  |  |  |  |  |
| AIC | 8159 |  |  |  |  |  |  |  |  |
| AIC/N | 1.520 |  |  |  |  |  |  |  |  |

a SE = Standard Error, SD = Standard Deviation; b Health facility; c Mobile clinic. \*10%, \*\* 5%, \*\*\*1% level of significance.