BRIEF OVERVIEW
HIV testing and counseling is an important step for people to protect themselves and to prevent infecting others. Knowledge of one’s HIV status is also a critical factor in the decision to seek treatment. In 2011, only 24.7% of adults in South Africa aged 15 to 49 had tested for HIV, while approximately 5.6 million, or 17.3%, of South Africans currently live with HIV.

The JustTested program aims to supplement HIV testing and counseling (HCT) services by giving support and information to people who would have just tested, regardless of whether they test HIV positive or negative. Subscribers choose between the JustTested negative or positive free short message service (SMS), both available in Afrikaans, English and isiXhosa. The service sends 39 messages over the course of three months on the topics of healthy living and addressing HIV and AIDS related issues.

JustTested began in May 2012. It is currently active in parts of the Overberg district of the Western Cape and the Nelson Mandela Metro District in the Eastern Cape.

ABOUT JUSTTESTED
SMSs were developed in line with the Health Belief Model, which states that a person’s belief in a personal threat of an illness or disease together with a person’s belief in the effectiveness of the recommended health behavior or action will predict the likelihood he or she will adopt the behavior. Communicate, Cell-Life’s web-based software, is used to automate the signing in and opting out of subscribers into the program as well as the sending of SMSs. Individuals learn of the program through posters and pamphlets placed in participating healthcare facilities. Additionally, during counseling sessions, HCT counselors explain the program. Subscribers can sign up and opt out by sending a please-call-me (PCM) to mobile phone numbers given to them.

EVALUATION AND RESULTS
An evaluation of the pilot phase was conducted. An approximate ten-fold increase was observed when counselors were actively recruiting subscribers, suggesting that counselors are key to the recruitment process (as opposed to relying on sign-ups through posters and pamphlets). Twenty percent of the subscribers sent an opt-out PCM. Based on interviews with 17 subscribers that sent an opt-out PCM, 88% sent the PCM by mistake. Almost all the interviewed exiting subscribers reported that they found the SMSs acceptable and easy to understand. Most subscribers also reported that they learnt new information from the SMSs and that the SMSs improved their outlook on life. Most subscribers suggested that the SMSs should last for at least 6 months.

LESSONS LEARNED
- Translators that utilize simple language are preferred
- SMSs should have a clearly
identifiable brand name so users know who is sending them

- Subscribers who mistakenly opt out of the program should be allowed to automatically resume messaging
- Getting permission from provincial departments of health can be time consuming
- Users need reassurance that the SMSs are free and that their mobile phone numbers will be kept private
- Lay-counselors could also benefit from an educational and support SMS program
- Recruitment rates could be improved by having the option of SMS messaging to clients be part of the standard of care, and advertising the program outside of healthcare facilities
- Periodic reviewing and editing of SMSs is required based on feedback from subscribers and lay-counselors to keep the SMS content relevant

CONCLUSION

This JustTested program has the potential to enhance HCT services in South Africa. The evaluation of the pilot phase shows it is feasible and acceptable to both counselors and subscribers while also being cost-effective and easy to implement.

Future work includes exploring additional forms of marketing to increase recruitment rate, as well as finding ways to optimize implementation and investigate effectiveness of the program in changing and improving health behaviors. Upcoming iterations will examine tailoring content to gender-specific messaging and making the program more interactive by including two-way communication.