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# **A Comparative Methodology for Evaluating Adolescent HIV Care Transition and Retention in Urban and Rural Ugandan Settings**

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## | Abstract

Adolescents living with HIV (ALHIV) in sub-Saharan Africa face significant challenges during the transition from paediatric to adult care, leading to frequent disengagement. Robust methodologies are needed to evaluate transition outcomes, particularly when comparing urban and rural settings where health systems and social environments differ. This methodology article details a comparative approach designed to evaluate the processes and outcomes of HIV care transition for adolescents in urban Kampala and rural southwestern Uganda. Its primary objective is to systematically assess factors influencing retention in care post-transition across these two distinct settings. The protocol employs a concurrent mixed-methods, longitudinal cohort design. Quantitative data on retention, viral load suppression, and clinic attendance are collected from medical records at multiple timepoints. Concurrent qualitative data are gathered through serial in-depth interviews and focus group discussions with adolescents, caregivers, and healthcare providers. Analysis integrates statistical comparison of urban and rural cohorts with framework analysis of qualitative data. As a methodology article, this paper presents no empirical results. The proposed design is structured to detect differences in retention rates, hypothesising that urban adolescents may exhibit different engagement patterns (for example, higher initial attrition but more re-engagement opportunities) compared to rural adolescents. This

methodology provides a comprehensive, culturally adapted framework for generating comparative evidence on ALHIV transition in Uganda. It is designed to capture the complex interplay of clinical, social, and structural factors affecting care retention in two prevalent but under-compared African settings. Researchers investigating adolescent HIV care transition in similar contexts should consider adapting this comparative mixed-methods framework. Programme implementers are encouraged to use such methodologies to generate locally relevant data for informing transition protocols tailored to specific health systems. adolescent HIV, care transition, retention in care, mixed-methods, Uganda, rural health, urban health, methodology This article provides a detailed methodological framework for comparative health services research, contributing to the methodological literature on evaluating adolescent HIV care transitions in resource-varied African settings.

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