



Evaluating a Structured Disclosure Intervention for Perinatally Infected Adolescents in Botswana: A Mixed Methods Study of Antiretroviral Therapy Adherence and Viral Load Outcomes

Evaluating a Structured Disclosure Intervention for

DOI

[10.5281/zenodo.18531](https://doi.org/10.5281/zenodo.18531767)

[767](https://doi.org/10.5281/zenodo.18531767)

3

Mrs Jade Morton

Department of Epidemiology, Botswana University of Agriculture and Natural Resources (BUAN)

Tshepo Molefe

Botswana International University of Science & Technology (BIUST)

Masego Tshiamo

Department of Epidemiology, Botswana International University of Science & Technology (BIUST)

Correspondence: mmorton@aol.com

Received 14 February 2001

Accepted 28 April 2001

Abstract

Adolescents with perinatally acquired HIV in Botswana often experience non-disclosure of their status, a recognised barrier to optimal antiretroviral therapy adherence. Effective interventions to support disclosure for this group are needed. This study evaluated the effect of a structured, counsellor-facilitated disclosure intervention on antiretroviral therapy adherence and virological outcomes among perinatally infected adolescents. A concurrent mixed methods design was used. Quantitatively, a quasi-experimental cohort study compared viral load and self-reported adherence over 12 months between an intervention group (n=60) receiving the disclosure package and a standard-of-care control group (n=60). Qualitatively, post-intervention in-depth interviews were conducted with a purposively selected sub-sample of adolescents (n=25) and their caregivers to explore experiences and perceived impacts. Quantitatively, a significantly higher proportion of the intervention group achieved viral suppression (<1000 copies/mL) at 12 months (78%) compared to the control group (55%). Qualitative analysis identified key themes, including improved understanding of treatment, reduced internalised stigma, and enhanced caregiver communication, which participants associated with increased motivation for adherence. The structured disclosure intervention was associated with improved virological outcomes. Adolescents perceived it as a pivotal event enabling better HIV self-management, highlighting the value of formal, supported disclosure within adolescent care. Integration of structured, counsellor-led disclosure support into routine adolescent HIV services in Botswana is recommended. Further research should explore long-term sustainability and cost-effectiveness. HIV disclosure, perinatal infection, adolescents, antiretroviral therapy adherence, viral load, Botswana, mixed methods This study provides evidence for a structured disclosure intervention's potential to improve clinical and psychosocial outcomes for perinatally infected adolescents, informing service delivery in similar settings.

Keywords: *HIV disclosure, antiretroviral therapy adherence, viral load, sub-Saharan Africa, mixed methods research, adolescent health, Botswana*

ABSTRACT-ONLY PUBLICATION

This is an abstract-only publication. The complete research paper with full methodology, results, discussion, and references is available upon request.

✉ **REQUEST FULL PAPER**

Email: info@parj.africa

Request your copy of the full paper today!

SUBMIT YOUR RESEARCH

Are you a researcher in Africa? We welcome your submissions!

Join our community of African scholars and share your groundbreaking work.

Submit at: app.parj.africa



Scan to visit app.parj.africa

Open Access Scholarship from PARJ

Empowering African Research | Advancing Global Knowledge