1. Diagnostic itineraries

- a. Precipitating factors (witnessing effects of HIV): I first saw my friend who told me that he has done HIV test and that encouraged me to go for testing. I wanted to test anyway [...] because most of my family members have died through AIDS. (M9, 27, CD4 not reported)
- b. Precipitating factors (symptoms): I wasn't feeling good and I was also losing weight and then I thought that it is better for me to go for testing so that I would know and then get support if they find out that I am HIV positive because I didn't know what was wrong with me. (M8, 26, CD4=54 cells/µl)
- c. Healthcare system (folk sector): No ways, I don't use traditional healers. I came here to the clinic [...] I know that if I am sick, the doctor will help me, he helps sick people. (F21, 32, CD4=106 cells/µl)
- d. Missed testing opportunities: I sometimes had drop [gonorrhea]. I used to get help from the [sexual health] clinic [...] I did not get any explanation, I got an injection which was very helpful. (M13, 28, CD4 not reported)

2. Other barriers to testing

- a. Not testing unless unwell:
- i. It's just that I did not see a need to get tested before everything was going well with my health. (F10, 28, CD4=125 cells/ μ I)
- ii. I have never thought about it [HIV testing] because I have never had any illness that made me go to the clinic. (M8, 26, CD4=54 cells/μl)
- b. Low perception of risk: Adults do not want to accept the fact that there is a possibility they could be HIV-positive. When people hear that a person is HIV-positive they immediately think that it is because you are promiscuous, it never crosses their minds that it is possible that you got it just from that one partner that you have." (F2, 20, CD4 not reported)
- c. Poor knowledge within community: In this [rural] area most people are dying because they do not get tested and they do not know what is wrong with them. [The government] need to educate people in the rural areas because they do not know anything about this disease. (F2, 20, CD4 not reported)
- d. HIV-related stigma: I started by saying that he [partner] must go and test and he said that he won't go there. He also said that he doesn't like a person who is HIV-positive. (F1, 20, CD4=228 cells/µl)

3. Facilitators of testing

- a. Encouragement:
- i. It is my relative [...] she too is taking the ARVs [antiretrovirals] and so she encouraged me to get up and go for testing. (F11, 28, CD4=165 cells/ μ l)
- ii. When I go to the clinic they would treat [my sore] and it would go away but then come back [...] the nurses were begging me to go get tested [...] and in the end I decided to go get tested for HIV. (M12, aged 28, CD4=524 cells/μI)
- b. HCT campaign: Seeing the President going for testing made me to go and get tested as well. (M9, 27, CD4 not reported)
- c. Access to ART: What made me go for testing is that [...] it is very important to know your status [...] then you can start soon with the medication before it gets complicated." (M38, 27, CD4=33 cells/µl)
- d. Witnessing benefits of ART: Seeing other people living normally that was an influence for me [to get tested for HIV]. (M23, 27, CD4=240 cells/µl)

(gender [M=male, F=female] and participant ID, age, CD4 count); ART, antiretroviral therapy