Assessed for eligibility

(Patients from 2 tertiary care institutions with urban HIV clinics and rural satellite clinics)

Inclusion criteria

- Documented HIV-1 infection, age 18-60 years
- ART-naïve (no previous ART use for > 14 continuous days)
- Meeting national criteria for initiating first-line ART
- Willingness to come for all study visits

Exclusion Sever

Exclusion criteria

- Severely ill (Karnofsky score < 70)
- Study participant already in the same household
- Lives in area with no phone network

Randomization (n=600)

Permuted block randomization

Mobile phone intervention (n = 300)

- Automated interactive voice calls
 - frequency: once a week
 - timing of call: selected by participant
- weekly pictorial text message
- + Standard of care

Standard of care (n = 300)

- Establish rapport with participant
- Counseling on ART and adherence at initiation and at subsequent visits
- Create treatment plan

Follow-up: Every 3 months for 24 months, or until primary endpoint is reached, whichever earlier

- Clinical assessment
- Adherence assessment (self-report, pill count)
- CD4, HIV viral load

Primary outcome: Time to **Secondary outcome:** Adherence

nary outcome: Time to virological failure

Sub-group analyses:

- Patterns of drug resistance at failure in the two arms
- Comparison between self-reported adherence versus pill count
- Quality of life differences in the two arms
- Gender and socio-economic differences in adherence in the two arms