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**The TIDieR (Template for Intervention Description and Replication) Checklist\*:**

Information to include when describing an intervention and the location of the information

|  |  |  |  |
| --- | --- | --- | --- |
| **Item number** | **Item** | **Where located \*\*** | |
|  | Primary paper  (page or appendix  number) | Other † (details) |
|  | **BRIEF NAME** |  |  |
| **1.** | Provide the name or a phrase that describes the intervention. | Ossolinski et al., 2017 | N/A |
|  | **WHY** |  |  |
| **2.** | Describe any rationale, theory, or goal of the elements essential to the intervention. | Pages 1 to 2 | To evaluate the effect of a personalised future self-image on weight  change over a 6-month period using the Prochaska Transtheoretical  Model of Behaviour Change |
|  | **WHAT** |  |  |
| **3.** | Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL). | Pages 2 to 3  No URL to access materials | Participant images were generated by the Future Me app, printed and given to participants. Participant weight was recorded on calibrated scales by the researcher. The researcher also provided information on sources of advice at the time of  weigh-ins, but did not provide any support in the intervening periods. |
| **4.** | Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities. | Pages 2 to 4 | Repeated measures RCT - Body Mass Index (BMI) of at least 25 kg/m2 were randomised to receive a hard copy future self-image at recruitment (early image) or after 8 weeks (delayed image). Participants received general healthy lifestyle information at recruitment and were weighed at 4-weekly intervals for  24 weeks. A second randomisation at 16 weeks allocated either an additional future self-image or no additional image. |
|  | **WHO PROVIDED** |  |  |
| **5.** | For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given. | Pages 2 to 4 | No information relating to background or expertise |
|  | **HOW** |  |  |
| **6.** | Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it was provided individually or in a group. | Pages 2 to 4 | Face to face (for weigh ins and information) and via app (for image download and comparisons) |
|  | **WHERE** |  |  |
| **7.** | Describe the type(s) of location(s) where the intervention occurred, including any necessary infrastructure or relevant features. | Pages 2 to 4 | Via mHealth app (Future Me) |
|  | **WHEN and HOW MUCH** |  |  |
| **8.** | Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration, intensity or dose. | Pages 2 to 3 | Participants were randomised to receive a hard copy future self-image at recruitment (early image) or after 8 weeks (delayed image). Participants received general healthy lifestyle information at recruitment and were weighed at 4-weekly intervals for  24 weeks. A second randomisation at 16 weeks allocated either an additional future self-image or no additional image. |
|  | **TAILORING** |  |  |
| **9.** | If the intervention was planned to be personalised, titrated or adapted, then describe what, why, when, and how. | Pages 2 to 4 | Participants had their photo taken via Future Me app to show weight loss projections |
|  | **MODIFICATIONS** |  |  |
| **10.ǂ** | If the intervention was modified during the course of the study, describe the changes (what, why, when, and how). | N/A | N/A |
|  | **HOW WELL** |  |  |
| **11.** | Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them. | N/A | N/A |
| **12.ǂ** | Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned. | Page 6- attrition only described not assessed | In general, there was significant attrition  during the study as appears to be case for many studies reporting weight-loss interventions. Sixteen percent of recruits were non-starters and the attrition  rate for the remainder was 31%. |

\*\* **Authors** - use N/A if an item is not applicable for the intervention being described. **Reviewers** – use ‘?’ if information about the element is not reported/not sufficiently reported.

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| **Item number** | **Item** | **Where located \*\*** | |
|  | Primary paper  (page or appendix  number) | Other † (details) |
|  | **BRIEF NAME** |  |  |
| **1.** | Provide the name or a phrase that describes the intervention. | Fuchs et al., 2019 |  |
|  | **WHY** |  |  |
| **2.** | Describe any rationale, theory, or goal of the elements essential to the intervention. | Pages 1 to 2 | This study aimed to explore the question of whether an mHealth intervention featuring a human-like, future-self avatar of personal diet behaviour leads to higher motivation to pursue a low-salt diet. |
|  | **WHAT** |  |  |
| **3.** | Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL). | Pages 3 to 6 | No link to materials provided |
| **4.** | Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities. | Pages 3 to 6 | Eight day intervention, participants asked to enter diet in mFRCL system (mobile food record checklist). For the first four days, only diet is logged and no avatar feedback is received. From day five, users will receive feedback from their avatars (customised future-self) After the  eighth day, the users were asked to participate in the final survey in  which the motivational predictors of health behavior were  measured |
|  | **WHO PROVIDED** |  |  |
| **5.** | For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given. | Page 4 | mHealth implemented intervention |
|  | **HOW** |  |  |
| **6.** | Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it was provided individually or in a group. | Page 4 | mHealth implemented intervention |
|  | **WHERE** |  |  |
| **7.** | Describe the type(s) of location(s) where the intervention occurred, including any necessary infrastructure or relevant features. | Page 4 | mHealth implemented intervention |
|  | **WHEN and HOW MUCH** |  |  |
| **8.** | Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration, intensity or dose. | Page 5 | The future-self avatar intervention was designed for an eight-day period: On each day, the users enter their diet through the mFRCL. During the first four days, diets are only logged, and no avatar feedback is received, as the FRCL is designed to assess health states after at least three complete daily logs. Starting with day five, users would receive daily feedback from their customized future-self avatar within the system (i.e. see the avatar’s current visual design and receive the corresponding intervention messages). After the eighth day, the users were asked to participate in the final survey in which the motivational predictors of health behavior were measured, and to provide consent in the overall study. |
|  | **TAILORING** |  |  |
| **9.** | If the intervention was planned to be personalised, titrated or adapted, then describe what, why, when, and how. | Page 4 | Avatar created to represent participant |
|  | **MODIFICATIONS** |  |  |
| **10.ǂ** | If the intervention was modified during the course of the study, describe the changes (what, why, when, and how). | N/A | No modifications described |
|  | **HOW WELL** |  |  |
| **11.** | Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them. | N/A | N/A |
| **12.ǂ** | Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned. | Page 6 | 38 of 67 (56.7%) participants  successfully completing the eight-day study. |

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Information to include when describing an intervention and the location of the information

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| **Item number** | **Item** | **Where located \*\*** | |
|  | Primary paper  (page or appendix  number) | Other † (details) |
|  | **BRIEF NAME** |  |  |
| **1.** | Provide the name or a phrase that describes the intervention. | Dworkin et al., 2019 |  |
|  | **WHY** |  |  |
| **2.** | Describe any rationale, theory, or goal of the elements essential to the intervention. | Pages 1 to 3 | To evaluate the feasibility, acceptability, and preliminary efficacy of My Personal Health  Guide, a theory-based mobile-delivered embodied conversational agent intervention to improve adherence to antiretroviral therapy in young African  American men who have sex with men |
|  | **WHAT** |  |  |
| **3.** | Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL). | Pages 3 to 4 | No materials provided via online link or appendices |
| **4.** | Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities. | Pages 3 to 4 | Participants were asked to use the Personal Health Guide app for three months |
|  | **WHO PROVIDED** |  |  |
| **5.** | For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given. | Page 4 | A trained project staff member downloaded the mobile phone app from a portable laptop into the participant’s phone (Dworkin et al.,  2018). They then demonstrated the app functions, oversaw setting reminder functions, encouraged use of the app, and answered questions. A check-in phone call was  made by the project staff twice (the end of months 1 and 2) to troubleshoot for any  technical problems. After 3 months, participants returned for a follow-up survey  that included repeating the knowledge and self-efficacy questions. |
|  | **HOW** |  |  |
| **6.** | Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it was provided individually or in a group. | Pages 3 to 4 | Delivered individually via the app and a check-in phone call was  made by the project staff twice (the end of months 1 and 2) to troubleshoot for any  technical problems. Participants were asked to fill out survey questions face to face |
|  | **WHERE** |  |  |
| **7.** | Describe the type(s) of location(s) where the intervention occurred, including any necessary infrastructure or relevant features. | Pages 3 to 4 | Does not state location of health assessments, but intervention hosted via app |
|  | **WHEN and HOW MUCH** |  |  |
| **8.** | Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration, intensity or dose. | Pages 3 to 6 | Delivered over a 3 month period with daily assessments |
|  | **TAILORING** |  |  |
| **9.** | If the intervention was planned to be personalised, titrated or adapted, then describe what, why, when, and how. | Pages 3 to 7 | App contains realistic talking human avatar-like embodied conversational agent |
|  | **MODIFICATIONS** |  |  |
| **10.ǂ** | If the intervention was modified during the course of the study, describe the changes (what, why, when, and how). | N/A | No modifications stated |
|  | **HOW WELL** |  |  |
| **11.** | Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them. | Pages 6 to 7 | Acceptability and feasibility measured via exit surveys |
| **12.ǂ** | Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned. | Pages 8 to 9 | 11 participants lost to follow up. |

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| --- | --- | --- | --- |
| **Item number** | **Item** | **Where located \*\*** | |
|  | Primary paper  (page or appendix  number) | Other † (details) |
|  | **BRIEF NAME** |  |  |
| **1.** | Provide the name or a phrase that describes the intervention. | Wonggom et al., 2020 |  |
|  | **WHY** |  |  |
| **2.** | Describe any rationale, theory, or goal of the elements essential to the intervention. | Pages 2 to 3 | To evaluate the effectiveness of education using avatars for improving patients’ heart failure knowledge and self-care. The specific objectives of this study were to:  1. Evaluate the effectiveness of an avatar education app on patients’ HF knowledge compared with usual care. ; 2. Evaluate the effectiveness of an avatar education app on patients’ self-care behaviours compared with usual care.; 3. Evaluate the impact of the avatar education app on HF related readmissions compared with usual care; 4. Describe the predictors of knowledge score with the group using the app; 5. Evaluate patient reported experiences (satisfaction) of an avatar education app |
|  | **WHAT** |  |  |
| **3.** | Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL). | Pages 2 to 5 | No link provided for materials |
| **4.** | Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities. | Pages 2 to 5 | Usual care included care from HF nurses or regular nurses who are responsible for bedside education to reinforce the diagnosis, treatment, self-care, self-monitoring and follow-up provided by HF nurses at the HF clinic in line with site practice. Patients followed up at 30 and 90 days. Participants allocated to the intervention group received a combination of the usual care and an avatar app (UC + I)- app pre-installed on a tablet computer. |
|  | **WHO PROVIDED** |  |  |
| **5.** | For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given. | Pages 4 to 5 | Information provided via research assistant and nurses |
|  | **HOW** |  |  |
| **6.** | Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it was provided individually or in a group. | Pages 4 to 5 | Delivered via mHealth app |
|  | **WHERE** |  |  |
| **7.** | Describe the type(s) of location(s) where the intervention occurred, including any necessary infrastructure or relevant features. | Pages 4 to 5 | Intervention delivered via mHealth app. No further information about where the initial appointments were hosted. |
|  | **WHEN and HOW MUCH** |  |  |
| **8.** | Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration, intensity or dose. | Pages 1 to 4 | Participants were followed up at baseline, 30  and 90 days (more information provided in protocol which has been referenced). |
|  | **TAILORING** |  |  |
| **9.** | If the intervention was planned to be personalised, titrated or adapted, then describe what, why, when, and how. | N/A | N/A |
|  | **MODIFICATIONS** |  |  |
| **10.ǂ** | If the intervention was modified during the course of the study, describe the changes (what, why, when, and how). | N/A | N/A |
|  | **HOW WELL** |  |  |
| **11.** | Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them. | N/A | N/A |
| **12.ǂ** | Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned. |  |  |

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| **Item number** | **Item** | **Where located \*\*** | |
|  | Primary paper  (page or appendix  number) | Other † (details) |
|  | **BRIEF NAME** |  |  |
| **1.** | Provide the name or a phrase that describes the intervention. | Mohan et al., 2020 |  |
|  | **WHY** |  |  |
| **2.** | Describe any rationale, theory, or goal of the elements essential to the intervention. | Pages 1 to 3 | To develop interactive, social agents that can coach people to learn new tasks, skills, and habits. |
|  | **WHAT** |  |  |
| **3.** | Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL). | Pages 3 to 7 | No online materials or links provided |
| **4.** | Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities. | Pages 3 to 7 | These participants completed a preintervention visit when they were given instructions on how to install and use NutriWalking on their smartphones. Participants were also provided with a Fitbit physical activity tracker as an incentive for their participation. They used NutriWalking for the next 6-weeks to interact with the coach and log their daily activity goals. The data provided to the application was backed up on a server maintained by the research team. This data was used to adapt weekly and daily goals by the AI coach as well as for the analyses described below. At the end of the study, participants completed a post-intervention visit and participated in an exit interview to provide subjective feedback  about their experience using the app. |
|  | **WHO PROVIDED** |  |  |
| **5.** | For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given. | Pages 3 to 7 | App set up by research assistant |
|  | **HOW** |  |  |
| **6.** | Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it was provided individually or in a group. | Pages 3 to 7 | Delivered via mHealth app |
|  | **WHERE** |  |  |
| **7.** | Describe the type(s) of location(s) where the intervention occurred, including any necessary infrastructure or relevant features. | Pages 3 to 7 | Delivered via mHealth app |
|  | **WHEN and HOW MUCH** |  |  |
| **8.** | Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration, intensity or dose. | Pages 3 to 7 | Baseline (week 0) and post intervention (week 6). Daily and weekly measures of physical activity |
|  | **TAILORING** |  |  |
| **9.** | If the intervention was planned to be personalised, titrated or adapted, then describe what, why, when, and how. | N/A | N/A |
|  | **MODIFICATIONS** |  |  |
| **10.ǂ** | If the intervention was modified during the course of the study, describe the changes (what, why, when, and how). | N/A | N/A |
|  | **HOW WELL** |  |  |
| **11.** | Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them. | N/A | N/A |
| **12.ǂ** | Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned. | N/A | N/A |

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