## **TREND Statement Checklist**

Paper Section/ Topic	Item No	Descriptor	Reported on page No	JPP Reviewer Comments	Author Responses
Title and Abstract	1a	Information on how units were allocated to interventions	N/A		
	1b	Structured abstract recommended	2		
	1c	Information on target population or study sample	2		
Introduction Background and	2a	Scientific background and explanation of rationale	5-6		
objectives	2b	Theories used in designing behavioral interventions	3-4		
<b>Methods</b> Participants	3a	Eligibility criteria for participants, including criteria at different levels in recruitment/ sampling plan (e.g., cities, clinics, subjects)	6-7		
	3b	Method of recruitment (e.g., referral, self-selection), including the sampling method if a systematic sampling plan was implemented	6		
	3c	Recruitment setting	6		
	3d	Settings and locations where the data were collected	7-8		
Interventions	4a	Details of the interventions intended for each study condition and how and when they were actually administered, specifically including:  • Content: what was given?	8-9		
	4b	Delivery method: how was the content given?	8-9		
	4c	<ul> <li>Unit of delivery: how were the subjects grouped during delivery?</li> </ul>	8-9		
	4d	Deliverer: who delivered the intervention?	9		
	4e	Setting: where was the intervention delivered?	8		
	4f	<ul> <li>Exposure quantity and duration: how many sessions or episodes or events were intended to be delivered? How long were they intended to last?</li> </ul>	8		

CONSORT 2010 checklist

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	4g	Time span: how long was it intended to take to deliver the intervention to each unit?	9		
	4h	<ul> <li>Activities to increase compliance or adherence (e.g., incentives)</li> </ul>	N/A		
Objectives	5	Specific objectives and hypotheses	5-6		
Outcomes	6a	Clearly defined primary and secondary outcome measures	10-11		
	6b	Methods used to collect data and any methods used to enhance the quality of measurements	7-8		
	6c	Information on validated instruments such as psychometric and biometric properties	9-13		
Sample size	7a	How sample size was determined and, when applicable, explanation of any interim analyses and stopping rules	6-7		
Assignment method	8a	Unit of assignment (the unit being assigned to study condition – e.g., individual, group, community)	7		
	8b	Method used to assign units to study conditions, including details of any restriction (e.g., blocking, stratification, minimization)	N/A		
	8c	Inclusion of aspects employed to help minimize potential bias induced due to non-randomization (e.g., matching)	N/A		
Blinding (masking)	9	Whether or not participants, those administering the interventions, and those assessing the outcomes were blinded to study condition assignment; if so, statement regarding how the blinding was accomplished and how it was assessed	N/A		
Unit of analysis	10a	Description of the smallest unit that is being analyzed to assess intervention effects (e.g., individual, group, or community)	7		
	10b	If the unit of analysis differs from the unit of assignment, the analytical method used to account for this (e.g., adjusting the standard error estimates by the design effect or using multilevel analysis)	N/A		

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Statistical methods	11a	Statistical methods used to compare study groups for primary methods outcome(s), including complex methods of correlated data	13-14		
	11b	Statistical methods used for additional analyses, such as subgroup analyses and adjusted analysis	13-14		
	11c	Methods for imputing missing data, if used	15,19		
	11d	Statistical software or programs used	13		
Results Participant flow	12a	Flow of participants through each stage of the study: enrollment, assignment, allocation and intervention exposure, follow-up, analysis (a diagram is strongly recommended)  • Enrollment: the numbers of participants screened for eligibility, found to be eligible or not eligible, declined to be enrolled, and enrolled in the study	7		
	12b	Assignment: the numbers of participants assigned to a study condition	N/A		
	12c	<ul> <li>Allocation and intervention exposure: the number of participants assigned to each study condition and the number of participants who received each intervention</li> </ul>	N/A		
	12d	Follow-up: the number of participants who completed the follow-up or did not complete the follow-up (i.e., lost to follow-up), by study condition	8		
	12e	<ul> <li>Analysis: the number of participants included in or excluded from the main analysis, by study condition</li> </ul>	7-8		
	12f	Description of protocol deviations from study as planned, along with reasons	N/A		
Recruitment	13	Dates defining the periods of recruitment and follow-up	6		

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Baseline data	14a	Baseline demographic and clinical characteristics of participants in each study condition	Table 1		
	14b	Baseline characteristics for each study condition relevant to specific disease prevention research	Table 1		
	14c	Baseline comparisons of those lost to follow-up and those retained, overall and by study condition	15		
	14d	Comparison between study population at baseline and target population of interest	N/A		
Baseline equivalence	15	Data on study group equivalence at baseline and statistical methods used to control for baseline differences	N/A		
Numbers analyzed	16a	Number of participants (denominator) included in each analysis for each study condition, particularly when the denominators change for different outcomes; statement of the results in absolute numbers when feasible	Table 1		
	16b	Indication of whether the analysis strategy was "intention to treat" or, if not, description of how non-compliers were treated in the analyses	N/A		
Outcomes and estimation	17a	For each primary and secondary outcome, a summary of results for each estimation study condition, and the estimated effect size and a confidence interval to indicate the precision	15-20		
	17b	Inclusion of null and negative findings	15-20		
	17c	Inclusion of results from testing pre-specified causal pathways through which the intervention was intended to operate, if any	N/A		
Ancillary analyses	18	Summary of other analyses performed, including subgroup or restricted analyses, indicating which are pre-specified or exploratory	15-20		
Adverse events	19	Summary of all important adverse events or unintended effects in each study condition (including summary measures, effect size estimates, and confidence intervals)	N/A		

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Discussion					
Interpretation		Interpretation of the results, taking into account study			
	20a	hypotheses, sources of potential bias, imprecision of	20-24		
		measures, multiplicative analyses, and other limitations or			
		weaknesses of the study			
		Discussion of the results taking into account the			
	20b	mechanisms by which the intervention was intended to work	N/A		
	200	(causal pathways) or alternative mechanisms or			
		explanations			
	20c	Discussion of the success of and barriers to implementing	N/A		
		the intervention, fidelity of implementation			
	20d	Discussion of research, programmatic, or policy implications	24-25		
Generalizability	21	Generalizability (external validity) of the trial findings, taking			
		into account the study population, the characteristics of the			
		intervention, length of follow-up, incentives, compliance	21-23		
		rates, specific sites/ settings involved in the study, and other			
		contextual issues			
Overall evidence	22	General interpretation of the results in the context of current	20-24		
		evidence and current theory	20-2 <del>1</del>		

From: Des Jarlais, D. C., Lyles, C., Crepaz, N., & the Trend Group (2004). Improving the reporting quality of nonrandomized evaluations of behavioral and public health interventions: The TREND statement. American Journal of Public Health, 94, 361-366. For more information, visit: http://www.cdc.gov/trendstatement/