

ENTREQ STATEMENT – CHECKLIST

Enhancing transparency in reporting the synthesis of qualitative research: the ENTREQ statement: Tong et al. BMC Medical Research Methodology 2012, 12:181 (<http://www.biomedcentral.com/1471-2288/12/181>)

Adherence to tuberculosis treatment in the Indian sub-continent: systematic review and meta-synthesis of qualitative research

No	Aim	State the research question the synthesis addresses	Addressed	Support from manuscript
1	Synthesis methodology	Identify the synthesis methodology or theoretical framework which underpins the synthesis, and describe the rationale for choice of methodology (e.g. meta-ethnography, thematic synthesis, critical interpretive synthesis, grounded theory synthesis, realist synthesis, meta-aggregation, meta-study, framework synthesis).	Qualitative synthesis comprising of inductive coding, thematic analysis, and development of a conceptual framework	Page 6, Methods Authors familiarized themselves with the qualitative data reported and used initial inductive coding (KSS, MG) that was subsequently refined (deductive coding) based on discussions (KSS, MG, KDS). Codes were grouped into analytical categories and sub-categories from which overarching themes and sub-themes were generated through an iterative process (KSS, MG) and checked for consistency and validity (KSS, MG, KDS). Disagreements, if any, were discussed and resolved between the reviewers. At a midway point, the core team (PG, MT) reviewed and discussed interpretations, to help identify the themes and sub-themes. Atlas.ti

				Qualitative software, Berlin, Germany was used for the qualitative analysis described ⁴⁴ .
2	Approach to searching	Indicate whether the search was pre-planned (comprehensive search strategies to seek all available studies) or iterative (to seek all available concepts until they theoretical saturation is achieved).	Yes, a pre-planned comprehensive search was conducted	<p>Page 5, Methods</p> <p><i>Search Methods and Study Selection</i></p> <p>We searched the following electronic databases using the search terms and strategies described in Annexure 1: Cochrane Central Register of Controlled Trials (CENTRAL; 2023, Issue 1), published in the Cochrane Library; MEDLINE Ovid (1946 to 13th January 2023); Embase Ovid (1996 to 2023 Week 02); Cinahl (EBSCOHost; 1981 to Published Date: 20000101-20231231); PsycInfo (EBSCOHost; from 1800 to Published Date: 20000101- 20231231); Web of Science Core Collection Timespan=2000-2023; Epistemonikos. Searches were initially run on 26 March 2020 and were limited to publications in English from 01 January 2000. The search was updated on 13 January 2023 (Annexure 2)</p>

3	Inclusion criteria	Specify the inclusion/exclusion criteria (e.g. in terms of population, language, year limits, type of publication, study type).	Yes, inclusion and exclusion criteria were explicit	<p>Page 5, Methods</p> <p><i>Inclusion Criteria</i></p> <p>We included qualitative studies and mixed-method studies that used qualitative methods in data collection and analyses to examine adherence to treatment for TB. Adherence refers to the completeness with which participants or patients follow medical instructions³. It also means concordance or compliance to treatment, the extent to which the person on treatment continues taking the treatment regularly^{30,33}. We included studies that describe perspectives of those undergoing treatment, their caregivers, or healthcare providers. All published studies from the past 20 years that were reported in English and were set in the Indian subcontinent (Bangladesh, Bhutan, Maldives, Nepal, Pakistan, and Sri Lanka in addition to India) were considered. All the reviews with TB and any other comorbidities (MDR TB, TB-HIV, TB diabetes) were included in the review if they met the inclusion criteria.</p>
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4	Data sources	Describe the information sources used (e.g. electronic databases (MEDLINE, EMBASE, CINAHL, psycINFO, Econlit), grey literature databases (digital thesis, policy reports), relevant organisational websites, experts, information specialists, generic web searches (Google Scholar) hand searching, reference lists) and when the searches conducted; provide the rationale for using the data sources.	Yes, Data sources have been mentioned	Page 5, Methods Cochrane Central Register of Controlled Trials (CENTRAL; 2023, Issue 1), published in the Cochrane Library; MEDLINE Ovid (1946 to 13 th January 2023); Embase Ovid (1996 to 2023 Week 02); Cinahl (EBSCOHost; 1981 to Published Date: 20000101-20231231); PsycInfo (EBSCOHost; from 1800 to Published Date: 20000101- 20231231); Web of Science Core Collection Timespan=2000-2023; Epistemonikos.
5	Electronic Search strategy	Describe the literature search (e.g. provide electronic search strategies with population terms, clinical or health topic terms, experiential or social phenomena related terms, filters for	Yes, search strategies are available	Annexure 1 and 2

		qualitative research, and search limits).		
6	Study screening methods	Describe the process of study screening and sifting (e.g. title, abstract and full text review, number of independent reviewers who screened studies).	Yes, study screening methods are detailed	Page 5, Methods KSS, MG, and KDS initially reviewed titles and abstracts together using the Rayyan software ³⁴ (http://rayyan.qcri.org) to screen and shortlist abstracts for full text. When unsure, these were included in full text screening. Full-texts were assessed for eligibility against the inclusion criteria. As we retrieved a large number of studies eligible for inclusion, we chose to sample the studies based on 'thickness'. Full-texts included were classified as 'thick' or 'thin' ^{35,36} based on the depth of qualitative reporting for the scope of this review, and only 'thick' full-texts were included in this synthesis. (Figure 1)
7	Study characteristics	Present the characteristics of the included studies (e.g. year of publication, country, population, number of participants, data	Yes, detailed included studies tables are available	Page 7, Results The characteristics of the included studies are shown in Supplementary Table 1 . The earliest study was published in 2002 but most were published after 2012 (17/24). Studies were from India (12/24), Pakistan

		collection, methodology, analysis, research questions).		(6/24), Nepal (3/24), Bangladesh (1/24), and two in multiple countries, and were mostly purely qualitative (18/24). All studies used in-depth interview (IDI) methods, and several studies also included focus group discussions (FGD). One study used an interesting method of a “photovoice” – photographs taken by participants that were followed by interviews and discussions. Of the 24 studies, all but one included people who were taking treatment for TB (1 study included <i>only</i> healthcare providers), and 17 included healthcare workers and/or community members in addition.
8	Study selection results	Identify the number of studies screened and provide reasons for study exclusion (e.g, for comprehensive searching, provide numbers of studies screened and reasons for exclusion indicated in a figure/flowchart; for iterative searching describe reasons	Yes, PRISMA diagram is available detailing this	Figure 1

		for study exclusion and inclusion based on modifications to the research question and/or contribution to theory development).		
9	Rationale for appraisal	Describe the rationale and approach used to appraise the included studies or selected findings (e.g. assessment of conduct (validity and robustness), assessment of reporting (transparency), assessment of content and utility of the findings).	Yes, the quality assessment is described in methods and result are presented in the paper and supplementary materials	Page 7, Results The quality assessment of shortlisted studies included in this synthesis is reported in Supplementary Table 2 . Quality of studies has been reported based on the first tool adapted from a previously published review ³⁰ (Supplementary Table 2a) and also based on the second tool adapted from the EPPI centre (Supplementary Table 2b)
10	Appraisal items	State the tools, frameworks and criteria used to appraise the studies or selected findings (e.g. Existing tools: CASP, QARI, COREQ, Mays and Pope [25]; reviewer developed tools;	Yes, tool is described	Page 6, Methods <i>Quality assessment</i> We used a quality assessment tool adapted from one developed by the EPPI-enter ^{38,39} . Although, non-validated, it was chosen for its detailed signaling questions, prior use within the author team, and use in

		describe the domains assessed: research team, study design, data analysis and interpretations, reporting).		several other well conducted qualitative evidence syntheses, including those published by Cochrane ⁴⁰⁻⁴² .
11	Appraisal process	Indicate whether the appraisal was conducted independently by more than one reviewer and if consensus was required.	Yes, appraisal was conducted independently by more than one reviewer	The three authors (KSS, MG, KDS) independently assessed included studies in terms of (1) rigor in sampling, (2) data collection and analysis, (3) level to which the findings were supported by the data, and (4) the breadth and depth of study findings. Discrepancies were resolved through discussion (KSS, MG, KDS, MT, PG).
12	Appraisal results	Present results of the quality assessment and indicate which articles, if any, were weighted/excluded based on the assessment and give the rationale.	No studies were excluded based on the quality assessment	
13	Data extraction	Indicate which sections of the primary studies were analysed and how were the data extracted from the primary studies?	Yes, We extracted authors results and conclusions	We coded the authors results and conclusions from the primary studies.

		(e.g. all text under the headings “results /conclusions” were extracted electronically and entered into a computer software).		
14	Software	State the computer software used, if any.	Yes, detailed	Page 6, Methods Atlas.ti Qualitative software, Berlin, Germany was used for the qualitative analysis described ⁴⁴ .
15	Number of reviewers	Identify who was involved in coding and analysis.	Yes, Identified	Page 6, Methods <i>Qualitative data synthesis</i> Authors familiarized themselves with the qualitative data reported and used initial inductive coding (KSS, MG) that was subsequently refined (deductive coding) based on discussions (KSS, MG, KDS).
16	Coding	Describe the process for coding of data (e.g. line by line coding to search for concepts).	Yes, described	Page 6, Methods Codes were grouped into analytical categories and sub-categories from which overarching themes and sub-themes were generated through an iterative process (KSS, MG) and checked for consistency and validity (KSS, MG, KDS). Disagreements, if any, were discussed

				and resolved between the reviewers. At a midway point, the core team (PG, MT) reviewed and discussed interpretations, to help identify the themes and sub-themes. Atlas.ti Qualitative software, Berlin, Germany was used for the qualitative analysis described ⁴⁴ .
17	Study comparison	Describe how were comparisons made within and across studies (e.g. subsequent studies were coded into pre-existing concepts, and new concepts were created when deemed necessary).	Yes, detailed	Page 6, Methods Codes were grouped into analytical categories and sub-categories from which overarching themes and sub-themes were generated through an iterative process (KSS, MG) and checked for consistency and validity (KSS, MG, KDS). Disagreements, if any, were discussed and resolved between the reviewers. At a midway point, the core team (PG, MT) reviewed and discussed interpretations, to help identify the themes and sub-themes. This was an iterative process conducted through team meetings at regular intervals (KSS, MG, KDS, PG, MT). We repeatedly refined our conceptual model and coding framework according to the preliminary themes

18	Derivation of themes	Explain whether the process of deriving the themes or constructs was inductive or deductive.	This metasynthesis used inductive coding, thematic analysis, and development of a conceptual framework	Figure 2
19	Quotations	Provide quotations from the primary studies to illustrate themes/constructs, and identify whether the quotations were participant quotations of the author's interpretation.	Yes, participants quotations (based on author results of included studies) are reported	Page 12, Table 2
20	Synthesis output	Present rich, compelling and useful results that go beyond a summary of the primary studies (e.g. new interpretation, models of evidence, conceptual models, analytical framework, development of a new theory or construct).	Yes, we present a conceptual framework, Overarching themes, sub-themes, associated categories, and inductive codes and new interpretation	Page 9, Results, Table 1 Figure 2, Conceptual Framework