### CONSORT-EHEALTH (V 1.6.1) -Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (nonpharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red \*.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF \_AND\_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: <a href="http://www.jmir.org/2011/4/e126/">http://www.jmir.org/2011/4/e126/</a>

doi: 10.2196/jmir.1923

PMID: 22209829

\*Obligatorisk

Your name *	
First Last	
Pia Kvillemo	
Primary Affiliation (short), City	, Country *
University of Toronto, Toronto, Ca	nada
Karolinska Institutet	
Your e-mail address *	
abc@gmail.com	
pia.kvillemo@ki.se	
Title of your manuscript *	
Provide the (draft) title of your ma	anuscrint
· · · · ·	of an Internet-based mindfulness
training program – feasibility and	
	<i>l</i> /
•	_
•	paration are you currently (at the time you fill in this form)
At which stage in your article preposed not submitted yet - in early dra	paration are you currently (at the time you fill in this form)
At which stage in your article preposed not submitted yet - in early dra	paration are you currently (at the time you fill in this form)  If status  It status, just before submission
At which stage in your article preposed not submitted yet - in early draged not submitted yet - in late draft submitted to a journal but not	paration are you currently (at the time you fill in this form)  If status  It status, just before submission  reviewed yet
At which stage in your article preposed not submitted yet - in early draged not submitted yet - in late drafted submitted to a journal but not submitted to a journal and after	paration are you currently (at the time you fill in this form)  off status  it status, just before submission  reviewed yet  er receiving initial reviewer comments
At which stage in your article prepared not submitted yet - in early drage not submitted yet - in late draft submitted to a journal but not submitted to a journal and after submitted to a journal and according to the submitted to a journal according to the submitted to a jo	paration are you currently (at the time you fill in this form) off status it status, just before submission reviewed yet er receiving initial reviewer comments
At which stage in your article prepared not submitted yet - in early drated not submitted yet - in late draffers submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished	paration are you currently (at the time you fill in this form)  off status  it status, just before submission  reviewed yet  er receiving initial reviewer comments
At which stage in your article prepared not submitted yet - in early drage not submitted yet - in late draft submitted to a journal but not submitted to a journal and after submitted to a journal and according to the submitted to a journal according to the submitted to a jo	paration are you currently (at the time you fill in this form) off status it status, just before submission reviewed yet er receiving initial reviewer comments
At which stage in your article prepared not submitted yet - in early drawn not submitted yet - in late drafted submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished	paration are you currently (at the time you fill in this form) off status it status, just before submission reviewed yet er receiving initial reviewer comments
At which stage in your article prepared not submitted yet - in early draden not submitted yet - in late draffed submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished övrigt:  Journal *  If you already know where you will	paration are you currently (at the time you fill in this form)  off status  it status, just before submission  reviewed yet  er receiving initial reviewer comments
At which stage in your article prepared not submitted yet - in early draden not submitted yet - in late draffed submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished övrigt:  Journal *  If you already know where you will	paration are you currently (at the time you fill in this form)  If status It status, just before submission reviewed yet er receiving initial reviewer comments beepted, but not published yet  Il submit this paper (or if it is already submitted), please provide In provide the journal name under "other")
At which stage in your article prepared not submitted yet - in early drated not submitted yet - in late draffed submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished  Ovrigt:  Journal *  If you already know where you will the journal name (if it is not JMIR, not submitted yet / unclear where you will not you wi	paration are you currently (at the time you fill in this form)  If status It status, just before submission reviewed yet er receiving initial reviewer comments beepted, but not published yet  Il submit this paper (or if it is already submitted), please provide In provide the journal name under "other")  In provide the initial reviewer comments  In provide the journal name under "other")
not submitted yet - in early dra not submitted yet - in late draft submitted to a journal but not submitted to a journal and afte submitted to a journal and acc published övrigt:  Journal * If you already know where you wil the journal name (if it is not JMIR, not submitted yet / unclear wh	paration are you currently (at the time you fill in this form)  If status It status, just before submission reviewed yet er receiving initial reviewer comments expeted, but not published yet  Il submit this paper (or if it is already submitted), please provide In provide the journal name under "other")  In provide the journal name under "other"
At which stage in your article prepared not submitted yet - in early drawn not submitted yet - in late draffed submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished  Ovrigt:  Journal *  If you already know where you will the journal name (if it is not JMIR, not submitted yet / unclear where Journal of Medical Internet Recomposite in over the property of the pr	paration are you currently (at the time you fill in this form)  If status It status, just before submission reviewed yet er receiving initial reviewer comments beepted, but not published yet  Il submit this paper (or if it is already submitted), please provide In provide the journal name under "other")  In provide the interviewer time you fill in this form)
At which stage in your article prepared not submitted yet - in early draden not submitted yet - in late draffed submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished ovrigt:  Journal *  If you already know where you will the journal name (if it is not JMIR, not submitted yet / unclear where Journal of Medical Internet Recomposition over the control of the c	paration are you currently (at the time you fill in this form)  off status  it status, just before submission  reviewed yet  er receiving initial reviewer comments  bepted, but not published yet  Il submit this paper (or if it is already submitted), please provide  off, provide the journal name under "other")  here I will submit this  esearch (JMIR)
At which stage in your article prepared not submitted yet - in early drawn not submitted yet - in late draffed submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished  Ovrigt:  Journal *  If you already know where you will the journal name (if it is not JMIR, not submitted yet / unclear who Journal of Medical Internet Recovering or in the journal name of the journal of Medical Internet Recovering number and the journal of Medical Internet Recovering number can be found in the journal of JMIR. If the paper is already and the journal of JMIR. If the paper is already and the journal of JMIR. If the paper is already and the journal of JMIR. If the paper is already and the journal of JMIR. If the paper is already and the journal of JMIR. If the paper is already and the journal of JMIR. If the paper is already and the journal of JMIR. If the journal of JMIR.	paration are you currently (at the time you fill in this form)  If status It status, just before submission reviewed yet er receiving initial reviewer comments beepted, but not published yet  Il submit this paper (or if it is already submitted), please provide In provide the journal name under "other")  In provide the interviewer time you fill in this form)
At which stage in your article prepared not submitted yet - in early drated not submitted yet - in late drafted submitted to a journal but not submitted to a journal and after submitted to a journal and accompublished overigt:  Journal *  If you already know where you will the journal name (if it is not JMIR, not submitted yet / unclear where Journal of Medical Internet Recoveright:  Manuscript tracking number *  If this is a JMIR submission, please tracking number can be found in the author in JMIR. If the paper is alreadigit number at the end of the DOI	deparation are you currently (at the time you fill in this form)  If status It status, just before submission  reviewed yet  er receiving initial reviewer comments  depted, but not published yet  Il submit this paper (or if it is already submitted), please provide  to, provide the journal name under "other")  mere I will submit this  desearch (JMIR)  desearch (JMIR)  desearch submission acknowledgement email, or when you login as the submission acknowledgement email, or when you login as the submission acknowledgement email, or when you login as the submission in JMIR, then the ms tracking number is the four-

#### TITLE AND ABSTRACT

## 1a) TITLE: Identification as a randomized trial in the title

#### 1a) Does your paper address CONSORT item 1a? \*

I.e doe	s the title con	tain the phrase '	'Randomized	Controlled	Trial"? (if not	t, explain the	reason u	ınder
"other"	)	·			•			

yes	
Övrigt:	

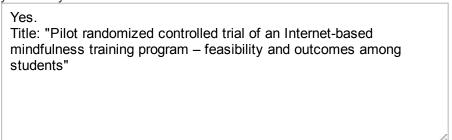
#### 1a-i) Identify the mode of delivery in the title

Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.

	1	2	3	4	5	
subitem not at all important			•			essential

#### Does your paper address subitem 1a-i? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



#### 1a-ii) Non-web-based components or important co-interventions in title

Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").

	1	2	3	4	5	
subitem not at all important			•			essential

#### Does your paper address subitem 1a-ii?

Not applicable

#### 1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial



#### Does your paper address subitem 1a-iii? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes.
Title: "Pilot randomized controlled trial of an Internet-based mindfulness training program – feasibility and outcomes among students"

## 1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

### 1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

	1	2	3	4	5	
subitem not at all important			•			essential

#### Does your paper address subitem 1b-i? \*

your study

Yes.

"Methods: Participants were randomly assigned to either an intervention (n=46) or an active control condition (n=44). Intervention participants were invited to an Internet-based eight-week mindfulness program and control participants were invited to an Internet-based four-week expressive writing program."

#### 1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

#### Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes.

"The programs were automated apart from weekly reminders via email."

### 1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

#### Does your paper address subitem 1b-iii?



"Participants were randomly assigned to either an intervention (n=46) or an active control condition (n=44). Intervention participants were invited to an Internet-based eight-week mindfulness program and control participants were invited to an Internet-based four-week expressive writing program. The programs were automated apart from weekly reminders via e-mail. Main outcomes in pre- and post-assessments were psychological

#### 1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)



#### Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

#### Yes.

"In the mindfulness program 28 out of 46 students (60%) completed the first week and 18 out of 46 (39%) completed the full program. In the expressive writing program 35 out of 44 students (80%) completed the first week and 31 out of 44 (70%) completed the full program. There was no statistically significantly stronger intervention effect for the mindfulness intervention compared to the active control intervention. Those completing the mindfulness

#### 1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)



#### Does your paper address subitem 1b-v?

#### Partly.

"Conclusions: The program was usable, acceptable and showed potential for increasing psychological well-being for those completing it. However, additional modification of the program might be needed to increase retention and compliance."

### INTRODUCTION

## 2a) In INTRODUCTION: Scientific background and explanation of rationale

#### 2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as standalone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

	1	2	3	4	5	
subitem not at all important			•			essential

#### Does your paper address subitem 2a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

stress-related problems to large groups."

"In addition to the benefits of wide dissemination, the stigma that might be associated with some face-to-face consultations regarding mental disorders can be avoided in Internet-based programs. Internet-based programs can also be cost efficient. A growing number of treatment programs are Internet-based, targeting a wide diversity of stress-related and mental conditions and behaviors, such as smoking, insomnia and depression. An

#### 2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropriate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.



#### Does your paper address subitem 2a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional

nformation not in the ms, or briefly explain why the item is not appl programs."	icable/relevant for your study
"In addition to the benefits of wide dissemination, the stigma that might be associated with some face-to-face consultations regarding mental disorders can be avoided in Internet-based programs. Internet-based programs can also be cost efficient."	
"outcomes were examined by comparing pre- and post-	

## 2b) In INTRODUCTION: Specific objectives or hypotheses

#### Does your paper address CONSORT subitem 2b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes.

"This broad approach of evaluation aims to expand the knowledge about Internet-based self-administrated mindfulness-based programs' potential to improve mental health status."

#### **METHODS**

## 3a) Description of trial design (such as parallel, factorial) including allocation ratio

#### Does your paper address CONSORT subitem 3a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes.

"Participants were randomized to either the intervention group (Internet-based mindfulness training program) or an active control group (Internet-based expressive writing program) on a rolling basis using a random sequence of numbers indicating group assignment. One of the authors generated the sequence of numbers using the SPSS software's and another author enrolled and assigned participants in the order they were recruited."

# 3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

Does your paper address CONSORT subitem 3b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this"
to indicate direct quotes from your manuscript), or elaborate on this item by providing additional
information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.			

#### 3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

#### Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.		
		1

### 4a) Eligibility criteria for participants

#### Does your paper address CONSORT subitem 4a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. The study was open to students (≥ 18 years of age) with access to a computer and an email address.	

#### 4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

1 2 3 4 5

subitem not at all important		$\bigcirc$		•		essential
------------------------------	--	------------	--	---	--	-----------

#### Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

## The study was open to students (≥ 18 years of age) with access to a computer and an email address.

#### 4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

	1	2	3	4	5	
subitem not at all important	$\bigcirc$		•			essential

#### Does your paper address subitem 4a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Study participants were recruited between December 2013 and March 2014 by advertising at different university campuses in Stockholm, Sweden. The study was open to students (≥ 18 years of age) with access to a computer and an email address. Students interested in participation phoned or sent an email to the study coordinators to receive additional information about the study design and that they would be randomized to one of two programs

#### 4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

	1	2	3	4	5	
subitem not at all important				•		essential

#### Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this"

to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Study participants were recruited between December 2013 and March 2014 by advertising at different university campuses in Stockholm, Sweden. The study was open to students (≥ 18 years of age) with access to a computer and an email address. Students interested in participation phoned or sent an email to the study coordinators to receive additional information about the study design and that they would be randomized to one of two programs

### 4b) Settings and locations where the data were collected

#### Does your paper address CONSORT subitem 4b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. Heading in the method section:: "Internet-based measurements at baseline and post-intervention"	
	<i>[</i>

#### 4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in webbased trials) or otherwise.

	1	2	3	4	5	
subitem not at all important				•		essential

#### Does your paper address subitem 4b-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

assessing potential mediators of intervention effect i.e. mindfulness skills (after week 2, 4, 6, and 8) and positive/negative affect (after week 1, 3, 5, and 7). For the analyses in the current paper the time and frequency of practice is reported, but no analyses of the mediation was performed." "Items evaluating the program

At the post-assessment follow-up, the respondents were asked

#### 4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item - describe only if this may bias results)

1 2 3 4 5

#### Does your paper address subitem 4b-ii?

2016-06-08

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. "Study participants were recruited between December 2013 and March 2014 by advertising at different university campuses in Stockholm, Sweden."

### 5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credential, affiliations of the developers, sponsors, and owners Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The mindfulness training program developed for the current study was a modified version of the group-based mindfulness program developed by Jon Kabat-Zinn. The adaptation of the program to an Internet environment was based on experiences from other Internet-based programs."

"The authors declare that they have no conflicts of interest. Two of the authors (PK and RB) developed the programs."

#### 5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. "The mindfulness training program developed for the current study was a modified version of the group-based mindfulness program developed by Jon Kabat-Zinn. The adaptation of the program to an Internet environment was based on experiences from other Internet-based programs." "The program consisted of eight weekly modules including

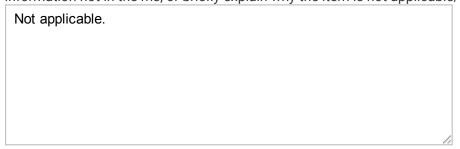
#### 5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



#### 5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

1 2 3 4 subitem not at all important \( \bigcup \) \( \bigcup \) \( \cdot \) essential

#### Does your paper address subitem 5-iv?

Not applicable.	

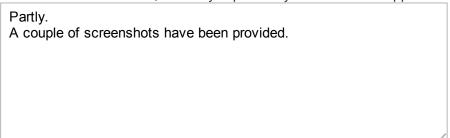
#### 5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used

Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.

	1	2	3	4	5	
subitem not at all important			•			essentia

#### Does your paper address subitem 5-v?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



#### 5-vi) Digital preservation

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, webcitation.org, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

	1	2	3	4	5	
subitem not at all important			•	$\bigcirc$		essential

#### Does your paper address subitem 5-vi?

The current programs were carried out at Karolinska Institutets platform for education. Karolinska Institutet has routines for archiving content related to material at this platform.

#### 5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).



#### Does your paper address subitem 5-vii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. "Participants were given access to the course platform by logging in with an individual password." "All participants completing the Internet-based programs were compensated with an amount of 500 SEK (about €49)."

#### 5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and - if computer-mediated communication is a component - whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

2 3 4 subitem not at all important O O O essential

#### Does your paper address subitem 5-viii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study and walking meditation in week rive. In week six to eignt, the

participants could choose which exercises to perform. None of the exercises required a high degree of physical strength or agility. If needed, participants were presented with alternative ways of doing the exercises, like choosing other positions, to ensure their safety. The study coordinator supported participants by sending weekly messages, informing them that a new week's text and exercises were available. The study coordinator could monitor each participant's login history and could send extra reminders to

#### 5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what

instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 5-ix?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The participants were encouraged to practice 30-45 minutes a day for six to seven days per week, either continuous or spread out over the day."

#### 5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 generalizability).

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The study coordinator supported participants by sending weekly messages, informing them that a new week's text and exercises were available. The study coordinator could monitor each participant's login history and could send extra reminders to

participants who did not attend the platform for a longer period of time (14 days). The participants could make contact with the study coordinators through the program platform or by sending an

#### 5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 - generalizability).

1 2 3 4 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

Does you	r paper	address	subitem	5-xi? *
----------	---------	---------	---------	---------

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

#### Yes.

"The study coordinator supported participants by sending weekly messages, informing them that a new week's text and exercises were available. The study coordinator could monitor each participant's login history and could send extra reminders to participants who did not attend the platform for a longer period of time (14 days). The participants could make contact with the study coordinators through the program platform or by sending an

#### 5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 - generalizability.

subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 5-xii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.			
			,

### 6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

#### Does your paper address CONSORT subitem 6a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

program completion. The focus of the interviews was the participants' experiences of the techniques, information, instructions, and exercises, as well as the perceived support delivered from the study coordinators. The first students who completed the mindfulness program were asked to participate in an interview. One of the study coordinators (PK) conducted all interviews using a semi-structured guide with open-ended questions along with probing statements. The interview guide

#### 6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

Participants' characteristics:

The baseline questionnaire included questions regarding age, gender, level of education, and living situation.

Outcome variables

Psychological Well-Being (PWB) is a questionnaire measuring six dimensions of psychological well-being: environmental mastery; calf accentance nocitive relations with others number in life.

#### 6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored

Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

1 2 3 4 subitem not at all important O O O essential

#### Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

"Participants who did not respond to the weekly assessments were reminded by email. The completion of a week's training was not time-limited, but the next set of program material was only made available after the participant completed the previous training and assessment. Those who did not respond to the reminder or did not fill out the weekly assessments, marking the continued participation, were not asked to give a reason for

### 6a-iii) Describe whether, how, and when qualitative feedback from participants was

Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emails, feedback forms, interviews, focus groups).

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

monactione, and exercises, as men as the perceived support delivered from the study coordinators. The first students who completed the mindfulness program were asked to participate in an interview. One of the study coordinators (PK) conducted all interviews using a semi-structured guide with open-ended questions along with probing statements. The interview guide reflected issues that have previously been shown to influence participants' perceptions of Internet-based programs, e.g. if the program was easy to use [33], how it was perceived in terms of

### 6b) Any changes to trial outcomes after the trial commenced, with reasons

#### Does your paper address CONSORT subitem 6b? \*

"Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this
to indicate direct quotes from your manuscript), or elaborate on this item by providing additional
information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.		
		//

### 7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

#### 7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample

	1	2	3	4	5	
subitem not at all important		•				essential

#### Does your paper address subitem 7a-i?

Not applicable.  No power analysis was carried out since the primary aim of the stud was to assess feasibility, usability and acceptability.	у
	/

### 7b) When applicable, explanation of any interim analyses and stopping guidelines

Does yo	our paper	address	<b>CONSORT</b>	subitem	7b?	*
---------	-----------	---------	----------------	---------	-----	---

Copy and	paste rel	evant sed	ctions fro	m the i	manuscr	ript (inc	clude q	uotes in	quotation	marks	"like this"
to indicat	e direct q	uotes fro	m your n	nanusc	ript), or e	elabora	ite on t	his item	by provid	ing addi	tional
informati	on not in	the ms, o	r briefly e	explain	why the	item is	not ap	oplicable	/relevant	for your	study

Not applicable.		
		1

### 8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

#### Does your paper address CONSORT subitem 8a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"One of the authors generated the sequence of numbers using the SPSS software's and another author enrolled and assigned participants in the order they were recruited."

### 8b) Type of randomisation; details of any restriction (such as blocking and block size)

#### Does your paper address CONSORT subitem 8b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No			
			//

### 9) Mechanism used to implement the random

### allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

#### Does your paper address CONSORT subitem 9? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"One of the authors generated the sequence of numbers using the SPSS software's and another author enrolled and assigned participants in the order they were recruited."

### 10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

#### Does your paper address CONSORT subitem 10? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"One of the authors generated the sequence of numbers using the SPSS software's and another author enrolled and assigned participants in the order they were recruited."

### 11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

#### 11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 11a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Students interested in participation phoned or sent an email to the study coordinators to receive additional information about the study design and that they would be randomized to one of two programs aimed to alleviate stress."

The students were not informed about which of the programs was intervention condition and which was active control condition.

#### 11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Students interested in participation phoned or sent an email to the study coordinators to receive additional information about the study design and that they would be randomized to one of two programs aimed to alleviate stress."

The students were not informed about which of the programs was intervention condition and which was active control condition.

### 11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

#### Does your paper address CONSORT subitem 11b? \*

	 	 		,
Not relevant.				
			//	

### 12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

#### Does your paper address CONSORT subitem 12a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

differences was calculated based on the difference between group means on baseline and follow-up change scores. The denominator was based on the pooled standard deviation (SD) at baseline and follow-up, adjusted for different sample sizes [37]. All tests of intervention effects were done with intention-to-treat analysis with missing data at follow-up imputed according to last-observationcarried forward strategy, meaning that some baseline values were used as post-intervention values. All tests of significance were

#### 12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

1 2 3 4 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 12a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"All tests of intervention effects were done with intention-to-treat analysis with missing data at follow-up imputed according to lastobservation-carried forward strategy, meaning that some baseline values were used as post-intervention values. All tests of significance were two-tailed. Analyses were performed in SPSS."

### 12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

#### Does your paper address CONSORT subitem 12b? \*

out. Conono a choot oize for within and between group differences was calculated based on the difference between group means on baseline and follow-up change scores. The denominator was based on the pooled standard deviation (SD) at baseline and follow-up, adjusted for different sample sizes [37]. All tests of intervention effects were done with intention-to-treat analysis with missing data at follow-up imputed according to last-observationcarried forward strategy, meaning that some baseline values were used as post-intervention values. All tests of significance were

### X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

#### X26-i) Comment on ethics committee approval

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"All procedures were performed in accordance with the ethical standards of the institutional and/or national research committees, and with the 1964 Helsinki Declaration and its later amendments, or with comparable ethical standards. Informed consent was obtained from all the individual participants included in the study. The study was approved by the Ethics Committee of the Karolinska Institutet (No. 2010/1407-31)."

#### x26-ii) Outline informed consent procedures

Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem X26-ii?



Students interested in participation phoned or sent an email to the study coordinators to receive additional information about the study design and that they would be randomized to one of two programs aimed to alleviate stress.

#### X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes.

Collected data are handled according to ethical principles. Approval of collection- and storage routines has been obtained from the Ethics Committee of the Karolinska Institutet (No. 2010/1407-31).

#### RESULTS

### 13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

#### Does your paper address CONSORT subitem 13a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

before completing the baseline questionnaire and initiating the program. A flow chart showing enrollment and number of participants that completed each week of the programs is presented in Figure 1. Of those randomized to the mindfulness training program (n=46), 40 individuals, 30 women and ten men, initiated the program. Of those initiating the program, 22 participants, 14 women and eight men, did not complete the postintervention questionnaire. Eighteen participants (39%), 16 women

### 13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Even though the reason for participants to leave the program was not systematically assessed, half of those who terminated the program before completion stated an explanation for leaving by email to the study coordinator. Nine of them mentioned lack of time, one had technical problems with the computer at home, and one participant referred to changed circumstances. Eight of those completing the full mindfulness program, seven women and one man, were interviewed."

#### 13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

A flow chart showing enrollment and number of participants at each phase of the study is included in the manuscript.

### 14a) Dates defining the periods of recruitment and follow-up

#### Does your paper address CONSORT subitem 14a? \*

No critical "secular events" relevant as we know.	for the results did appear, as far
	//

#### 14a-i) Indicate if critical "secular events" fell into the study period

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

1 2 3 4 5 subitem not at all important \( \bigcup \) \( \bigcup \) \( \color \) essential

#### Does your paper address subitem 14a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No critical "secular events" relevant for the results did appear, as far as we know.

### 14b) Why the trial ended or was stopped (early)

#### Does your paper address CONSORT subitem 14b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable	<del>)</del> .		
			_

### 15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

#### Does your paper address CONSORT subitem 15? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this"

to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

40 individuals, 30 women and ten men, initiated the program. Of those initiating the program, 22 participants, 14 women and eight men, did not complete the post-intervention questionnaire. Eighteen participants (39%), 16 women and two men, completed the mindfulness training program. The median age of the completers was 25 (range: 18 to 45), and the mean age was 29. Corresponding figures for the 22 participants who did not complete all eight weeks of the mindfulness program was 22 (range: 19 to

#### 15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

	1	2	3	4	5	
subitem not at all important			•			essentia

#### Does your paper address subitem 15-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not known.		
		,

### 16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

#### 16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

	1	2	3	4	5	
subitem not at all important	$\bigcirc$		•			essential

#### Does your paper address subitem 16-i? \*

No division into tresholds or other divisons of the groups were made.

#### 16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes Also see the method-section. Results: "There were no statistically significant differences between the intervention and control group concerning baseline scores on psychological well-being (t=-1.07, P=0.29) and depression symptoms (t=0.69, P=0.49). The MANOVA analysis with baseline

### 17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

#### Does your paper address CONSORT subitem 17a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. "On average, participants practiced 3.6 days per week."	
The participants reported duration of weekly practice in online questionnaires after each weekly module.	

#### 17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

	1	2	3	4	5	
subitem not at all important		0	0	•		essential

#### Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. "On average, participants practiced 3.6 days per week."
The participants reported duration of weekly practice in online questionnaires after each weekly module.

### 17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

#### Does your paper address CONSORT subitem 17b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.		
		/

### 18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

#### Does your paper address CONSORT subitem 18? \*

Not applicable.		

#### 18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

	1	2	3	4	5	
subitem not at all important	0			•		essential

#### Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Г	
	No such subgroup analysis is presented.

### 19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

#### Does your paper address CONSORT subitem 19? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.		
		/

#### 19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

	1	2	3	4	5	
subitem not at all important			•			essentia

#### Does your paper address subitem 19-i?

Yes.	_
"A couple of other issues were also mentioned (in the interviews,	
authors' comment) as impeding the training. One of the	
participants had technical problems with the computer at home."	
participante nad teenmedi probleme with the computer at nome.	
"half of those who terminated the program before completion	
, •	<u> </u>
stated an explanation for leaving by e-mail to the study	
coordinator. Nine of them mentioned lack of time, one had	
technical problems with the computer at home, and one participant	

#### 19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.



#### Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The results from the interviews include qualitative feed back on strengths and shortcomings of the application, exemplified below: "I had no problems with the technology and stuff, with audio files and so on." "Yes, there was a typo here and there and, yes, maybe there was a sentence structure or two, which I couldn't understand."

### DISCUSSION

### 22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

#### 22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).



Does your paper address subitem 22-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

meaningful and helpful in improving their way of being. The flexibility to perform exercises where and when it was convenient for them was appreciated and overall the program layout was perceived as satisfactory. More frequent contact with the study coordinators and reminders were suggested as ways to help participants to complete the daily exercises and to increase the likelihood of successful completion of the program. A major difficulty for several of the participants was to find enough time to

#### 22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

1 2 3 4 5 subitem not at all important \( \bigcup \) \( \bigcup \) \( \cdot \) essential

#### Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. Our study highlights the challenge of developing health-related Internet-based interventions, including mindfulness-based programs, that are sufficiently easy to complete for an intended target group. A way to enhance completion of Internet-based programs might be to use more reminders and make personal contact by phone before program start. Less time-consuming exercises and a shorter program period might also be considered

### 20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

#### 20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

1 2 3 4 5 subitem not at all important \( \cap \) \( \cap \) \( \cap \) essential

#### Does your paper address subitem 20-i? \*

Yes.

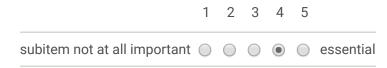
"Although this study is of great interest as it is one of the first to explore the feasibility and effect of an Internet-based mindfulness intervention, it has several limitations. Firstly, the participants were not required to have a certain level of stress or other psychological symptoms to be included in the study, which may have reduced the ability to detect changes in the outcome measures. A possible absence of stress or distress may also

### 21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

#### 21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations



#### Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Another issue that limits the generalizability of the results lies in the fact that the participants received reimbursement for their participation. It is possible that the expectations regarding the program and perceived improvements of well-being had been different without a reimbursement."

#### 21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.



#### Does your paper address subitem 21-ii?

Not applicable.	

#### OTHER INFORMATION

### 23) Registration number and name of trial registry

#### Does your paper address CONSORT subitem 23? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes. www.ClinicalTrials.gov, number: NCT02062762	
	,

### 24) Where the full trial protocol can be accessed, if available

#### Does your paper address CONSORT subitem 24? \*

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable.	,	
		,

### 25) Sources of funding and other support (such as supply of drugs), role of funders

#### Does your paper address CONSORT subitem 25? \*

The research was supported by the Swedish National Research School of Health Care Science, Karolinska Institutet (3656/2012-225).	

### X27) Conflicts of Interest (not a CONSORT item)

#### X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

	1	2	3	4	5	
subitem not at all important				•		essentia

#### Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The authors declare that they have no conflicts of interest. Two of the authors (PK and RB) developed the programs.

#### About the CONSORT EHEALTH checklist

As a result of using this checklist, did you make changes in your manuscript? \*

- yes, major changes
- yes, minor changes
- no

What were the most important changes you made as a result of using this checklist?

Revised some headings.		
		/

How much time did you spend on going through the checklist INCLUDING making changes

in your manuscript *	
2 h	
As a result of using this checklist, o	do you think your manuscript has improved? *
<ul><li>yes</li></ul>	
o no	
○ Övrigt:	
Would you like to become involved This would involve for example becom "Explanation and Elaboration" documen	ning involved in participating in a workshop and writing an
○ yes	
<ul><li>no</li></ul>	
○ Övrigt:	
Any other comments or questions of	on CONSORT EHEALTH
STOP - Save this forn	n as PDF before you click submit
	in this form, we recommend to generate a PDF of this "and then select "print as PDF") before you submit it.
	, , , ,
When you submit your (revised) pap	per to JMIR, please upload the PDF as supplementary file.
•	oxes is cut off, as we still have the complete information
in our database. Thank you!	
Final step: Click subr	nit!
Click submit so we have your answe	ers in our database!
Skicka	
Skicka aldrig lösenord med Google Fo	ormulär
Ssha alang loodhold mod Google Fo	·····
Tillhandahâlla ay	
Tillhandahålls av	Det här innehållet har varken skapats eller godkänts av Google.

Anmäl otillåten användning - Användarvillkor - Ytterligare villkor