Supplemental file 2: Characteristics of included studies in alphabetical order

Study	World Bank	Country	Study design	Disease	N	Delivery model	Exercise component	Risk factor management	Geographic	Implicit and explicit
	Income			population		(context / key health			context [†]	considerations with respect
	Classification*			(ICD10 code)		care professional				to LRS
						[HCP] involved)				
Abdelhalem	LM	Egypt	RCT	CVD (I25)	40	- Outpatient cardiac	High-intensity treadmill	- Education about	Metro (L)	- Patients who live in distant
201825						rehabilitation clinic at	exercise	heart disease and importance		rural areas or have no means
						university hospital		of risk factor modification		of transportation and cannot
						- HCP not reported		- Advice regarding home-based		participate regularly in the
								activities		program were excluded.
Ajiboye 2015 ²⁶	LM	Nigeria	RCT	CVD (I50)	69	- Physiotherapy	Combined aerobic and	- Health talks on prevention of	Metro (L)	
						outpatient	resistance training	complications, lifestyle		
						department of		modification and		
						university teaching		healthy living		
						hospital				
						- Researcher /				
						research assistant				
Ali 2014 ²⁷	LM	India	Case/Control	Respiratory	30	- Centre for	Three different types of	- Self-management education	Metro (M)	- A short-term program was
			(P)	(J44)		respiratory diseases	exercises: walking,	related to Chronic Obstructive		chosen to obtain maximum
						- HCP not reported	biking and resistance	Respiratory Disease		physiological benefits and
							exercises			

										compliance in minimum number of sessions Respiratory physicians (in India) largely unaware of benefits of add-on pulmonary rehabilitation.
Babu 2010 ²⁸	LM	India	Case/Control	CVD (125)	30	- Rural hospital - HCP not reported	Inpatient low intensity, short duration, early mobilization; followed by unsupervised exercise program	- Dietary advice - Patient education - Identification of red flags - Risk factor modification - Compliance with medical treatment	Rural	- Limited technology has forced the authors to rely on vital signs (pulse and blood pressure), auscultation, and perceived exertion as indicators for stressful situations during exercise.
Babu 2011 ²⁹	LM	India	RCT	CVD (I50)	30	- Inpatient clinic; followed by home- based - Physical therapist	Inpatient physical therapy (including breathing exercises, range of motion, walking) following by structured home-based walking program	- Education (exercise safety)	Town (L)	- Cost-effective treatment options are needed in countries where patients pay out-of-pocket for health care Barriers to this home-based program were assessed through a semi-structured interview on the patients who completed the rehab program

										([family] fear and concerns,
										lack of interest, lack of
										motivation).
Basri 2017 ³⁰	LM	Pakistan	RCT	Respiratory	60	- Medical ward,	Respiratory muscle and	- Smoking cessation	Metro (M)	
				(J44)		Hospital	breathing exercises	- Lifestyle and diet		
						- Physiotherapist		modification		
Biswas 2017 ³¹	LM	India	Case / Control	Cancer (C91 -	30	- Medical college	Active movement,	- Relaxation training	Metro (L)	
			(P)	97)		- HCP not reported	flexibility and resistive	- Cognitive behavioural therapy		
							exercises			
Chakraborty	LM	India	Cohort (P)	CVD (I25)	52	- Department of	A one-week inpatient	- Diet counselling	Metro (L)	- Lots of illustrations and
200732						Physical Medicine and	acute rehabilitation	- Smoking cessation		sketches were used instead of
						Rehabilitation	program (including	- Drug adherence		lengthy texts to make it
						- Rehabilitation team	walking and specific	- Sexual rehabilitation		comprehensible to even the
							exercise), followed by			illiterate patients.
							home-based, self-			- Low-cost, home-based
							directed exercise.			program designed to extend
							Resistance training was			beyond urban boundaries.
							added 6-wk post-			- Family members asked to
							surgery.			adopt lifestyle changes.
Chi-Jane 2012 ³³	HIC	Taiwan	RCT	Diabetes (E11	50	- Community-based	Education in exercise	- Education (weight[loss])	Rural	- Study in a remote village in
				/110)		district health centre	and weight loss; exercise	- Education (knowledge)		southwestern Taiwan with
						- Researcher,	diary	- Education (nutrition)		limited medical resources.

					22	public health nurse, physician, nutritionist and exercise physiologist		- Education (behaviour)		
Chockalingam	LM	India	Cohort (P)	CVD (I25)	33	- Cardiac wellness	Active exercise	- Nutritional counselling	Metro (L)	- A home-based modified
201634						institute	component including	- Goal-setting to promote		program was offered to those
						- multidisciplinary	treadmill walking,	behaviour modification		patients with >2hrs one way
						team of healthcare	recumbent cycling,	- Psychosocial counselling		travelling distance.
						professionals	resistance exercises with	- Education about risk factors,		- Family members were
						including a physician,	free weights and	adherence to treatment,		encouraged to attend the
						physiotherapist,	TheraBand floor	resuming		education and counselling
						nutritionist and	exercises.	normal activities and self-		sessions.
						psychologist		management		- Work-out sessions were
										made safe for participants
										wearing traditional clothing.
										- Nutritional counselling was
										adapted to local cooking and
										eating habits.
Chung 2018 ³⁵	UM	Peru	Cohort (P)	CVD (I10)	104	- Health centre	- Physical exercise	- Health assessment	Metro (L)	- Four targeted health centres
						- Trained nurses and	training	- Lifestyle education		in deprived and poor areas of
						nutritionists		- Nutrition education		Lima, Peru where large
								- Self-care education		influxes of migrants from rural

Daabis 2017 ³⁶	LM	Egypt	RCT	Respiratory	45	- Inpatient chest	Treadmill training plus	- Education in the form of self-	Metro (L)	areas have resulted in poorer access to health care services. - Early rehabilitation may
		-616*		(J44)	.5	department and home-based - HCP not reported	low-intensity resistance	management of the disease, nutrition and lifestyle changes		provide a window of opportunity for patient education and increases the continuity of care.
Davis 2012 ³⁷	HIC	USA	Cohort (P)	Diabetes (E11)	247	- Federally qualified health centres and home-based component - Trained non-medical research assistants	Physical activity goal setting / action plan	- Self-management guide covering diet, physical activity, blood glucose monitoring, medication adherence and insulin use.	Multicentre, mixed context	- Resource poor and rural community clinics - Materials written in simple language to accommodate low level of literacy.
Dehdari 2009 ³⁸	LM	Iran	RCT	CVD (125)	110	- Outpatient cardiac rehabilitation clinic - HCP not reported	Exercise training (as part of usual care)	- Education - Progressive muscular relaxation training (intervention)	Metro (L)	
Dhameja 2013 ³⁹	LM	India	Case/Control (P)	CVD (I10)	60	- Cardiopulmonary laboratory - Yoga expert	Yoga-based postures and (breathing) exercises	- Dietary advice	Metro (L)	

Edla 2016 ⁴⁰	LM	India	Cohort (P)	CVD (I10)	104	- Inpatient / Residential naturopathy hospital - Multidisciplinary team	Yoga-based exercise (postures, breathing, encourage to do aerobic exercises)	- Diet - Rest / Relaxation - Education (empowerment, personality development, stress management, meditation)	Metro (L)	
El-Demerdash 2015 ⁴¹	LM	Egypt	Cohort (R)	CVD (125)	40	- Outpatient cardiac rehabilitation unit - HCP not reported	Low-intensity exercise training	- Risk factor modification - Psychosocial management - Nutritional counselling - Physical activity counselling	Metro (L)	
El-Helow 2015 ⁴²	LM	Egypt	RCT	CVD (I63)	60	- Inpatient stroke rehabilitation unit - "Therapist"	Strengthening and range-of-motion exercises (as part of standard therapy) plus constrained movement and shaping (adapted task practice)	- Standard rehabilitation including posture, management of spasticity, standard occupational therapy	Metro (L)	
Elshaziy 2018 ⁴³	LM	Egypt	Cohort (P)	CVD (I21)	50	- Outpatient cardiac rehabilitation unit at university hospital	Moderate intensity treadmill training at 40– 60% of heart rate reserve	- Risk factor modification - Psychosocial management - Nutritional counselling - Physical activity counselling	Metro (L)	

						- Nurse and study				
						team member				
Embarak 2015 ⁴⁴	LM	Egypt	Case/Control	Respiratory	95	- Outpatient clinic of	Aerobic treadmill	- An education course	Metro (M)	
			(P)	(J44)		respiratory and	training plus resistance	- Instructed on how to perform		
						rheumatology	training exercises	muscle exercises and		
						departments		respiratory training daily at		
						- HCP not reported		home for the entire duration of		
								the program		
Eraballi 2018 ⁴⁵	LM	India	RCT	CVD (I25)	300	- Institute of Cardiac	- Breathing,	- Pharmacotherapy	Metro (L)	
						Sciences	physiotherapy exercises	- Nutrition and lifestyle		
						- Yoga-therapist,	and yoga	counselling		
						nutritionist		- Relaxation techniques		
Evans-Hudnall	HIC	USA	RCT	CVD (I63)	60	- Large county hospital	Physical activity goal	- Workbook (stroke, risk	Metro (L)	- Underserved ethnic minority
2014 ⁴⁶						- A health educator	setting	factors, behavioural strategies,		individuals included.
								resources)		- Linking with available
								- Diet / Activity tracking forms		community and national
								- Self-care education sessions		resources.
Ghanem 2010 ⁴⁷	LM	Egypt	RCT	Respiratory	39	- Inpatient training	Respiratory muscle	- Healthy lifestyle lectures with	Metro (M)	- A home-based rehabilitation
				(J44)		(before discharge) at	training, endurance	hand-outs including disease		program was assessed as
						chest department and	training and resistance	pathology, disease		"pulmonary rehabilitation is
						home-based	training	management, prevention of		not yet widely utilized in many
						component		infections and nutrition.		developing countries." The

						- Unclear which HCP				home-based program under
						provided inpatient				bi-weekly outpatient
						training				supervision can be considered
										a more viable and realistic
										paradigm in terms of
										manpower or finance,
										especially in low-income
										countries.
										- The post-discharge program
										was based on an assessment
										phase which included
										availability of resources and
										patients' culture and
										traditions.
Ghashghaei	LM	Iran	Cohort (P)	CVD (I25)	156	- Cardiovascular	Combined aerobic and	- Individual dietary instruction	Metro (L)	
2012 ⁴⁸ and					and	research institute	resistance training			
Sadeghi 2012 ⁴⁹					585	(outpatient)				
						- supervision of a				
						physician, a nurse and				
						exercise physiologist				

Gupta 2011 ⁵⁰	LM	India	Cohort (P)	CVD (I50)	123	- Inpatient, group-	- Moderate aerobic	- Risk assessment	Mixed	- Spouses were invited to
						based, hospital;	exercise (brisk walk)	- Education on aetiology of		follow lifestyle program as
						transferred to local		heart disease, importance of		well.
						yoga centre for daily		healthy lifestyle.		- Project team visited regional
						follow-up		- Diet modification		medical centres for follow-up
						- clinician,				assessments; the inaccessible
						psychologist, Rajyoga				were sent questionnaires.
						meditation teacher,				
						dietician, exercise				
						expert				
Hassan 2016 ⁵¹	LM	Egypt	RCT	CVD (I25)	60	- Outpatient	Mild to moderate-	- Risk factor (e.g. smoking)	Metro (L)	
						physiotherapy	intensity aerobic	assessment		
						department	exercise	- "Patients were provided an		
						- HCP not reported		idea about risk factor control		
								and secondary prevention		
								according to AHA guidelines		
								for secondary prevention		
								2011"		
Hassan 2016 ⁵²	LM	Egypt	Cohort (P)	Respiratory	40	- Outpatient	Interval resistance	- Education on disease self-	Metro (L)	- Patients were allocated to
				(J44)		department	training for lower	management (prevention and		specific groups based on the
						- HCP not reported	extremity muscles.			number of comorbidities

								early treatment of exacerbations, breathing strategies and bronchial hygiene techniques)		(unclear how that affected the intervention).
Jayasheela	LM	India	RCT	Respiratory	30	- Inpatient, rural	Yoga-based exercise and	- Education on smoking	Town (S)	- Nurse-delivered, community-
2017 ²³				(J44)		hospital	breathing exercises	cessation and lifestyle		based intervention through
						- HCP not reported		modification		rural hospital.
										- Literacy, cultural background
										and socio-economic profile
										included in sample
										description.
Jayasuriya	LM	Sri Lanka	RCT	Diabetes	85	- Community-based,	Physical activity	- Goal-setting	Metro (L)	- Model designed specifically
201553				(E11)		primary care clinic /	intervention targeted to	- Pedometer		to the Sri Lanka health care
						teaching hospital	increase culturally	- Diet intervention		system.
						- Trained nursing staff	appropriate exercise			- Training of nursing staff
							during household work			- Culturally appropriate
							(for women) and to			exercise (household work,
							introduce brisk walking			brisk walking).
Jyotsna 2013 ⁵⁴	LM	India	RCT	Diabetes	64	- Outpatient clinic at	Comprehensive yoga-	- Dietary advice	Metro (L)	- To increase compliance, only
				(E11)		Institute for Medical	based movements and	- Brisk walking		patients from nearby were
						Sciences	breathing program	for 45 minutes daily		selected.
						- "Certified teacher"				

										- A relative signed off the
										activity diary on a weekly
										basis.
Karimi 2017 ⁵⁵	LM	Pakistan	RCT	Diabetes	102	- Outpatient;	Aerobic exercise training	- Dietary plan	Metro (L)	
and				(E11)		Rehabilitation and				
Shakil-Ur-						Research Centre				
Rehman 2017 ⁵⁶						- HCP not reported				
Ko 2011 ⁵⁷	HIC	S. Korea	Cohort (P)	Diabetes	96	- Home-based	Individual education in	- Knowledge assessment	Metro (M)	- Low-income participants
				(E11)		- Visiting, registered	exercise with trained	- Education (disease		were defined according to the
						nurses with >10yrs	nurse	management)		criteria of the 2006 Ordinance
						experience		- Education (lifestyle factors)		of the Ministry for Health,
								- Education (foot care)		Welfare and Family Affairs of
								- Education (complications)		Korea.
Maharaj 2016 ⁵⁸	LM	Nigeria	RCT	Diabetes	90	- Rural outreach	Rebound (trampoline)	- Dietary counselling	Rural	- Part of outreach program
				(E11)		program / gymnasium	exercise			
						- Dietician,				
						rehabilitation				
						specialist				
Masrul 2016 ⁵⁹	LM	Indonesia	Case/Control	Diabetes	110	- Consultation at	Exercise consultation	- Diet consultation	Metro (L)	
			(P)	(E11)		diabetes clinic +				
						Home-based				
						- HCP not reported				
								<u> </u>		

Mayer-Davis	HIC	USA	RCT	Diabetes	187	- Primary	Behavioural strategies	- Additional behavioural	Rural	- Medically underserved rural
200460				(E11)		health care centres	for weight loss and	strategies to assist with		communities.
						- Nutritionists	physical activity, such as	achieving weight loss		- Modified program including
							self-monitoring of diet	goals		regular use of group sessions,
							and physical activity			considerable simplification
										and reduction in the amount
										of written materials,
										encouragement of physical
										activity at low to moderate
										intensity for individuals who
										had very sedentary lifestyles,
										and inclusion of additional
										regionally /culturally
										appropriate examples and
										suggestions for physical
										activity.
Mehani 2013 ⁶¹	LM	Egypt	RCT	CVD (I50)	40	- Outpatient physical	Circuit-interval aerobic	- Simple disease information	Metro (L)	
						therapy department	training	sessions aimed to reinforce		
						- Physical therapist		patient education about		
								chronic heart failure signs and		
								symptoms, ensure compliance		
								with medications, identify		
								recurrent symptoms amenable		

Mohammed 2018 ⁶²	LM	Egypt	Cohort (P)	CVD (I50)	80	- Department of Cardiology, university hospital - HCP not reported	Individualized, aerobic, treadmill training	to treatment, advice on how to live with heart failure and special emphasis was given to dietary counselling. - Risk factor assessment - Physical activity counselling	Metro (L)	
Moncrieft 2016 ⁶³	ніс	USA	RCT	Diabetes (E11)	111	- Community health clinic - Therapist	Physical activity goal; brisk walking or aerobic activity up to 150 min / week	- Goal setting (diet / weight loss) - Multi-component education sessions (physical activity, weight loss, stress, nutrition, goals)	Metro (L)	- Low-income minority patients
Najafi 2015 ⁶⁴ and Nalini 2014 ⁶⁵	LM	Iran	Cohort (R)	CVD (125)	887	- Inpatient hospital + outpatient cardiac rehabilitation clinic - "Rehabilitation team"	Inpatient exercise training followed by outpatient program (hospital-based or hybrid)	- Education (preliminary phase) - Nutritional and psychological assessment - Education meetings (complementary phase) focused on controlling risk factors, healthy diet, weight	Metro (M)	- A hybrid program was offered to take into consideration socioeconomic status, level of education and access to health care service.

Name 200065			DOT	C/D (/25)	100	Outputing to plant	Austianumin	control and stress management Relaxation techniques	Adabas (I)	
Naser 2008 ⁶⁶	LM	Iran	RCT	CVD (I25)	100	- Outpatient clinic consultations + home- based - Program manager	Aerobic exercise	- Manual to help home-based exercise, dietary modifications and nutrition facts. - Risk factor assessment and individualized lifestyle counselling	Metro (L)	
Pande 2005 ⁶⁷	LIC	India	Cohort (P)	Respiratory (J44)	24	- Home-based program - HCP not reported	Leg exercises, and respiratory muscle training / breathing exercises	- Education (causes, manifestations, and management) - Nutritional support - Psychosocial support	Metro (L)	
Raghuram 2014 ⁶⁸	LM	India	RCT	CVD (125)	250	- Division of yoga and life sciences - Intensive care nurse, and yoga therapist	Yoga-based movement and breathing exercises OR physiotherapy-based exercises	- Counselling on lifestyle modification included the concepts of right living from Indian yoga psychology	Metro (L)	- Patients were included living within <200 km from study centre to ensure compliance for follow up.
Ramirez 2017 ⁶⁹	HIC	USA	RCT	Diabetes (E11)	42	- Ambulatory care clinic	- Participants received an activity monitor,	- Behaviour change education	Metro (L)	- Low-income, Latino patients were included from a safety- net ambulatory clinic.

Ranjita 2016 ⁷⁰	LM	India	RCT	Respiratory (J44)	81	- Short-message or voice message service directed by research assistant - Outpatient clinic - Yoga instructors	targeted step goals and tailored feedback Yoga-based exercises	- Lifestyle counselling and lectures (e.g. health, lifestyle modification, stress)	Metro (L)	- A family member / friend was invited to participate Service offered in Spanish. - A specific working population was sampled (coal miners).
Rifaat 2014 ⁷¹	LM	Egypt	Cohort (P)	Respiratory (J84)	30	- Rheumatology and rehabilitation outpatient department; university hospital - HCP not reported	Upper and lower extremity exercises, breathing exercise, and chest physical therapy	- "Psychological support and patient education rounded out the program"	Metro (S)	
Shagufta 2011 ⁷²	LM	India	RCT	CVD (I51)	30	- Physiotherapy outpatient department or home- based - Researcher, dietician	Supervised OR home- based exercises sessions including range of motion, walking, and stair climbing	- Education and counselling - Nutritional advice	Metro (L)	
Shah 2015 ⁷³	HIC	USA	Cohort (P)	Diabetes (E11)	60	- Home-based / Telemedicine - Three community members aged 37–45	Individual education home-visit on exercise / physical activity (150 min / week)	- Monthly home-based educational interventions to encourage healthy lifestyles,	Mixed	- Underserved, minority populations (Zuni Indians) Home visits to complete baseline measurements.

		- Community health workers
cigarette avoidance		were trained as lay-
		interventionists.
Respiratory muscle - Dietary instructions	Town (S)	- Difficult to deliver
raining - Mental health counselling		conventional pulmonary
		rehabilitation programs in
		resource-limited settings.
ower extremity - Secretion removal	Metro (L)	- A home-based program was
exercise and breathing - Energy conservation and		offered with walking as
exercises work simplification of activities		primary mode of exercise.
of daily living		- Home-based rehabilitation
		was chosen as it is more
		convenient in the context of
		the adverse situations found
		in India when implementing
		rehabilitation programs
		(Illiteracy, ignorance, poverty,
		lack of motivation, inclination
_c	espiratory muscle - Dietary instructions - Mental health counselling ower extremity - Secretion removal - Energy conservation and work simplification of activities	espiratory muscle aining - Dietary instructions - Mental health counselling - Metro (L) - Energy conservation and - Energy conservation of activities

										towards drug therapy, and smoking as a social custom).
Suseelal 2016 ⁷⁶	LM	India	RCT	Diabetes (E10	400	- Community-based	Muscle strengthening	- Educational booklet including	Rural	- "Cultural background of the
Suseeiai 2016	LIVI	iliuia	KCI		400	·		_	Kurai	-
				- E11)		- Researcher	and stretching exercises	information on blood sugar,		patients was respected".
								glucose monitoring, meal		- Randomization at the level
								plans, stretching exercises,		of rural village.
								medication, insulin injection,		
								and foot care		
								- Nutritional counselling		
Toufan 2009 ⁷⁷	LM	Iran	Cohort (P)	CVD (I51)	65	- Outpatient cardiac	Aerobic training	- Health education counselling	Metro (L)	
						rehabilitation centre		- Psychotherapy		
						- Psychologist; unclear		- Stress management		
						who provided the		- Smoking cessation		
						exercise component		- Relaxation training		
Van Rooijen	LM	S. Africa	RCT	Diabetes	158	- Community hospital;	Incremental daily home	- Education (exercise)	Metro (M)	- Home-based program was
2004 ⁷⁸				(E11)		home-based program	exercise (walking)	- Education (disease		chosen due to the
						-	program	management)		participants' home
								- Education (nutrition)		responsibilities, as well as to
										ensure a safe environment for
										this women-only patient
										sample.

										- Participants were
										encouraged to form small
										groups.
										- Common activities were
										visualized in the activity log.
Wang 2018 ⁷⁹	HIC	USA	RCT	Diabetes	26	- Underserved	- Pedometer based	- Education on healthy eating,	Metro (L)	- Patients from underserved
				(E11)		minority community	activity plan	physical activity, stress and		minority community health
						health centre		behaviour change.		centre who are uninsured /
						- Lifestyle counsellors				underinsured.
										- Three different delivery
										models (mobile, paper/pen,
										usual) were tested.
Wattana 2007 ⁸⁰	LM	Thailand	RCT	Diabetes	147	- Community-based	- Education on	- Education on meal planning,	Rural	- Rural, community centre.
				(E11)		hospital in rural	appropriate physical	foot care, use of medicine,		
						Thailand; part home-	activity	complications and stress		
						based		reduction		
						- Researcher		- Education manual "Living well		
								with diabetes"		
Wayne 2015 ⁸¹	HIC	Canada	RCT	Diabetes	138	- Community Health	Supervised exercise	- Health-related goal setting	Metro (L)	- People living in lower
				(E11)		Centre	education program	including food, blood glucose,		socioeconomic status
							including exercise	exercise and mood. Secure		communities were included.
							prescription, monitoring			

						- eHealth counselling through certified exercise physiologists	and adherence support. Experimental group received additional mobile wellness platform	messaging with health counsellor.		- Smartphones were provided by the research team including data plan.
Wiyono 2006 ⁸²	LM	Indonesia	RCT	Respiratory (J44)	56	- Asthma clinic - HCP not reported	Stationary cycling exercise program	- Education - Chest physiotherapy	Metro (L)	
Yadav 2015 ⁸³	LM	India	RCT	CVD (125)	80	- Yoga Lab of the Physiology Department - Yoga instructor	Yoga-based exercises	- Lectures and group discussions aimed at understanding the need for lifestyle change, weight management and stress and anxiety management Dietary counselling	Metro (L)	- Five-fold higher burden of coronary heart disease in urban India incurs greater economic burden Only patients from the middle socio-economic class were included.
Yadav 2016 ⁸⁴	LM	India	RCT	CVD (163)	30	- Outpatient Department of Physical Medicine and Rehabilitation - HCP not reported	Modified constraint- induced movement therapy in conjunction with strengthening exercises and endurance training	- ADL training - Stretching and Range of Motion exercises - Gait training and/or orthosis - Education	Metro (L)	- Literacy and income status included as descriptive variable.
Yogendra 2004 ⁸⁵	LM	India	RCT	CVD (125)	113	- Yoga institute	Individualized aerobic walking exercise	- Diet modification (low fat,	Metro (L)	

						- Cardiologist / Nutritionist provided supervised sessions. Intervention was family-based.		- Lifestyle modification including sleep, recreation, relationships, faith, positive attitudes and correct attitude to work.		
Zhang 2017 ⁸⁶	UM	China	RCT	CVD (I21)	62	- Community health service centre - Multidisciplinary research team comprising of dietitian, psychologist, physiotherapist, cardiologist and nursing staff	Aerobic training plan according to their preferred training modality in their home environment	- Risk assessment - Counselling (diet, smoking) - Group discussion	Metro (L)	- "In the context of limited health funding and associated scarcity of medical resources, it seems difficult to provide consistent care to coronary heart disease patients depending solely on hospitals." - Randomization at the "participating centre" level.

*As classified at the time of participant recruitment; †Geographical context was classified in line with the United States of America's Department of Agriculture as Metro (Large [L]) > 1 million, Metro (Medium [M]) 250.000 – 1 million, Metro (Small [S]) < 250.000, Town (L) > 20.000 (not in metro area)), Town (M) 2500 – 20000, Town (S) 2500 – 20.000 (adjacent to metro), Rural < 20.000 (not adjacent to metro); Abbreviations: CVD, Cardiovascular Disease; R, Retrospective; P, Prospective; LIC, Low-Income Country; LMIC, Lower-Middle Income Country; UM, Upper-Middle Income Country; HIC, High-Income Country; LRS, Low-Resource Setting; ICD, International Classification of Disease²⁴