

DESCRIPTION OF THE INCLUDED ARTICLES

COPD, Chronic Obstructive Pulmonary Disease; HIV, Human Immunodeficiency Virus; OCD, Obsessive Compulsive Disorder; RCT, Randomized Clinical Trial; USA, United States of America.

Authors	Year	Methodological design	Disease Profile	Global Health Data Exchange Grouping	Geographic Location	World Bank Income Group in study year	GINI index (most recent)	Brief rehabilitation intervention description
Aikens et al (29)	2015	Non-RCT	Depression	B.6.2	USA	High income	41,4	Patient-selected support person integrated into mobile health services for depression
Baruah et al (30)	2018	RCT	OCD	B.6.4	India	Lower middle income	37,8	Brief (6 session) family-based including psychoeducation, exposure and response prevention and family intervention for obsessive compulsive disorder
Bhattacharyya et al 327)	2018	Observational cohort	COPD	B.3.1	India	Lower middle income	37,8	Curriculum-based intensive single-session intervention with education, bronchial hygiene and exercise training for Chronic Obstructive Pulmonary Disease patients stabilised with uniform pharmacotherapy
Boivin et al (31)	2016	RCT	HIV - neurocognitive impairments	A.1.1.4	Uganda	Low income	42,8	24 one hour sessions of computerised cognitive rehabilitation training in stage 1 or 2 HIV disease.
Burner et al (33)	2014	Qualitative	Diabetes	B.8.1	USA	High income	41,4	TExT-MED (mobile health intervention) experiences in low-income Latinos with diabetes

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Caagbay et al (34)	2017	Qualitative	Pelvic organ prolapse	B.12.3.5	Nepal	Low income	32,8	Brief verbal instruction and illustrative leaflet on how to contract pelvic floor muscles to improve knowledge and muscle contraction in parous women
Cobbing et al (35)	2019	Qualitative	People living with HIV	A.1.1.4	South Africa	Upper middle income	63	Experiences and reflections of people living with HIV involved in a novel home-based rehabilitation intervention
Dambi & Jelsma (36)	2014	Observational cohort	Cerebral Palsy	B.5.7	Zimbabwe	Low income	44,3	Cerebral palsy rehabilitation services in a community setting and outpatient at a central hospital setting.
Debussche et al (37)	2018	RCT	Diabetes Type 2	B.8.1.2	Mali	Low income	33	One year of culturally tailored structured patient education delivered in the community by trained peer educators (peer-led) to adults with type 2 diabetes.
Essien et al (38)	2017	RCT	Diabetes Type 1 and 2	B.8.1	Nigeria	Lower middle income	43	Intensive and systematic diabetes self-management education, using structured guidelines.
Ferreira-Correia et al (39)	2018	Qualitative	Working memory deficits	B.6.10	South Africa	Upper middle income	63	Evaluation of the barriers encountered by participants in a computer-based rehabilitation program (CBRP).

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Flood et al (40)	2017	Observational cohort	Diabetes Type 2	B.8.1.2	Guatemala	Upper middle income	48,3	Diabetes self-managed education which consisted of 6 home visits conducted by a diabetes educator using a curriculum culturally and linguistically tailored to rural Mayan populations.
Foley & Masingila (42)	2015	Mixed-Methods	Visual impairments	B.10.1	Kenya	Lower middle income	40,8	Design-based research project in which a theoretically-grounded intervention was developed and refined – a model for developing communities of practice to support the use of mobile technology as an assistive technology
Foley et al (41)	2016	RCT	Obesity	No category	USA	High income	41,4	12-month digital weight loss intervention in a community health centre system
Giordani et al (43)	2015	Case-Control	HIV - working memory/attention deficits:	A.1.1.4	Uganda	Low income	42,8	Brain Powered Games for cognitive training and rehabilitation of 45minutes, several times a week, for two months (24 sessions) , for at-risk African children
Haddad et al (44)	2014	Observational cohort	Diabetes Type 2	B.8.1.2	Iraq	Upper middle income	29,5	Weekly SMSs (text messaging) to support education and self-management of Type 2 diabetes over 29 weeks.

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Hamid et al (45)	2017	Cross-sectional study	Physical disabilities	No category	Uganda	Low income	42,8	Description of disability characteristics of community-based rehabilitation accessed through community-based organisations
Hasan et al (46)	2015	RCT	Schizophrenia	B.6.1	Jordan	Upper middle income	33,7	12 weeks of a booklet form of psycho-educational, with follow-up phone calls and treatment as usual for people diagnosed with schizophrenia and their primary care-givers
Ibrahim et al (47)	2018	RCT	Low Back Pain	B.11.3	Nigeria	Lower middle income	43	Motor control exercise and patient education program for low resource rural community dwelling adults with chronic low back pain
Järnhammer et al (48)	2018	Qualitative	Persons with disabilities	No category	Nepal	Low income	32,8	Experiences of people using lower-limb prostheses in Nepal
Johnson et al (49)	2014	RCT	Stroke	B.2.3	Mexico	Upper middle income	45,4	Theradrive system in a robot gym (circuit training system with 6 stations) for upper limb stroke rehabilitation
Jones et al (50)	2017	Observational cohort	Post tuberculosis lung disorders	A.2.1	Uganda	Low income	42,8	A culturally appropriate, 6-week, twice weekly, pulmonary rehabilitation program in Uganda for people with post-tuberculosis lung disorder.

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Khabbache et al (51)	2017	Qualitative	Mental, neurological and substance use (MNS) disorders	B.5; B.6	Morocco	Lower middle income	39,5	Evaluations of the reactions and feelings of the patients receiving rehabilitation at a mental rehabilitation centre
Kitzman et al (52)	2017	Observational cohort	Stroke	B.2.3	USA	High income	41,4	An assessment of the effectiveness of using specifically trained community health workers to support community transitions for individuals with neurological conditions (strokes) and their caregivers.
Ku & Kegels (53)	2014	Observational cohort	Diabetes Type 2	B.8.1.2	Philippines	Lower middle income	44,4	Context-adapted diabetes self-management education and support given by trained pre-existing local government healthcare personnel
Lakhan (54)	2014	Case-Control	Intellectual impairments - Behavioural problems	B.6.9	India	Lower middle income	37,8	Non-Government Organisation (NGO)-implemented interventions for behavioural problems in a clinical or a community setting
Lee et al (55)	2016	Mixed-Methods	Diabetes Type 2	B.8.1.2	USA	High income	41,4	Two- year pilot intervention of undergraduate volunteers as Patient Partners (assisting during classes, weekly patient calls and accompanying patients to clinic appointments) to foster diabetes self-management education participation

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Lindley et al (56)	2017	RCT	Stroke	B.2.3	India	Lower middle income	37,8	Stroke survivors, with residual disability and an informal family-nominated caregiver, received structured rehabilitation training - including information provision, joint goal setting, carer training, and task-specific training
Luyten et al (57)	2016	Observational cohort	Cleft (lip and) palate	B.12.1.3	Uganda	Low income	42,8	Short, intensive speech therapy focussed on phonetic placement and contrasts between oral and nasal airflow and resonance, in Ugandan patients with cleft (lip and) palate
Muchiri et al (58)	2016	RCT	Diabetes Type 2	B.8.1.2	South Africa	Upper middle income	63	One year RCT including a nutrition education programme including education materials and participation in eight weekly (2–2.5 h) group nutrition education sessions and follow-up sessions to affect clinical status and dietary behaviours
Muchiri et al (60)	2016	RCT						

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Muchiri et al (59)	2016	Qualitative						Subject's experiences of a one year RCT including a nutrition education programme including education materials and participation in eight weekly (2–2.5hr) group nutrition education sessions and follow-up sessions
Onagbiye et al (61)	2016	Observational cohort	Non-communicable diseases	B	South Africa	Upper middle income	63	Exercise intervention (3 days a week for 4 weeks) for managing noncommunicable diseases in an African community
Paddick et al (62)	2017	RCT	Dementia	B.5.1	Tanzania	Low income	40,5	Cognitive stimulation therapy led by occupational therapists, 14 sessions, twice weekly, over seven weeks, for dementia
Pandian et al (63)	2015	RCT	Stroke	B.2.3	India	Lower middle income	37,8	Structured home-based rehabilitation delivered by trained and protocol-guided family caregivers of stroke patients with residual disability.
Puckree & Naidoo (64)	2014	RCT	Stroke	B.2.3	South Africa	Upper middle income	63	Physiotherapy focused balance and stability exercise program to improve stability and balance in patients after acute stroke.
Rispin & Wee (66)	2014	Cross-sectional study	Persons with disabilities	No category	Kenya	Lower middle income	40,8	Outcomes study comparing two paediatric wheelchairs for low-resource setting

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Rispin & Wee (65)	2015	Cross-sectional study	Persons with disabilities	No category	Kenya	Lower middle income	40,8	Comparison (using skills tests) between performances of three types of manual wheelchairs often distributed in low-resource settings
Sarfo et al (67)	2018	Observational cohort	Stroke	B.2.3	Ghana	Lower middle income	43,5	Tele-rehab intervention (Smartphone with the 9zest Stroke App®), to deliver individualised, goal-targeted, 5 days-a-week exercise program that was remotely supervised by a tele-therapist for 12 weeks, in stroke patients
Seshan & Muliira (68)	2015	Case-Control	Urinary incontinence	B.12.3.7	India	Lower middle income	37,8	Video-Assisted Teaching for Kegel's Exercises for urinary incontinence.
Spencer et al (69)	2018	RCT	Diabetes Type 2	B.8.1.2	USA	High income	41,4	A community health worker (CHW)-led, 6-month diabetes self-management education program followed by either 12 months of CHW-delivered monthly telephone outreach or 12 months of weekly group sessions delivered by peer leaders, with telephone outreach to those who were unable to attend.
Tongsiri et al (70)	2017	Observational cohort	Persons with disabilities	No category	Thailand	Upper middle income	36,4	Home modification programme for persons with physical disabilities

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Tyson et al (71)	2015	RCT	Post-operative pulmonary complications following laparotomy	No category	Malawi	Low income	44,7	Routine post-operative care (deep breathing instruction and early ambulation) with incentive spirometry following exploratory laparotomy.
Verusia et al (72)	2015	Cross-sectional study	Disability - amputations	No category	South Africa	Upper middle income	63	Experiences of physiotherapy rendered to acute and sub-acute in-patients with lower-limb amputations
Visser & du Plessis (73)	2015	Qualitative	Sexual abuse	C.3.2.3	South Africa	Upper middle income	63	10 weekly sessions including expressive art activities, followed by reflective group discussions for sexually abused adolescent females
Wang et al (74)	2016	RCT	War-related trauma/PTSD	No category	Kosovo	Lower middle income	29	Bio-psycho-social (10 weekly individual 60-minute sessions of cognitive behavioural therapy, individual 20-min breathing exercise and 90-min group physiotherapy and once-daily multi-vitamins) approach for rehabilitation of traumatised victims of torture and war
Washburn et al (75)	2014	Cross-sectional study	Aging - older adults/physical activity	No category	USA	High income	41,4	Community-based lay-led physical activity program for older adults

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Zhou et al (76)	2019	RCT	Stroke	B.2.3	China	Upper middle income	38,5	Task-shifting / training-the-trainers model, supported by a custom-designed smartphone application, where stroke patients and caregivers received evidence-based in-hospital education and stroke rehabilitation training, delivered by trained nurses before hospital discharge, and 3 post discharge support telephone calls