

Appendix S1 – Reflexivity Statement

1. How does this study address local research and policy priorities?

This study seeks to describe the risk of Covid-19 and effectiveness of vaccines implemented for a vulnerable population in congregate facilities where the risk of transmission is high. Understanding vaccine effectiveness will contribute toward pandemic preparedness and mitigate hesitancy.

2. How were local researchers involved in study design?

Local researchers played key roles in all aspects of the study including design, implementation, analysis, and writing. The senior members in the local researchers (TDS, DP, TT, and ST) are experienced in international collaborations with experience of working with international groups such as from Europe on funds provided by European Commission and with extensive ongoing experience with the Johns Hopkins University on tuberculosis control and elimination including Zero TB in Tibetan Kids project which is in its fifth year. The first author (TT) and other local researchers including ST, TT, and TDS have manuscript writing and editorial experience in multiple other publications. The corresponding author (KD) is a member of the community with thorough understanding of the sociocultural practices, who is leading this project from Johns Hopkins University, along with colleagues RC, AG and DP who have track record of working in with Tibetan or other vulnerable populations such as pregnant women. Of the 17 authors in this study, 13 are local researchers. The subject and mode of researcher engagement for the project exemplify and advance equity in global health research.

3. How has funding been used to support the local research team?

Over the past two years of the pandemic, funding from our TB projects including from the UNOPS TB REACH project and philanthropic support has been dedicated to support the Covid-19 response for the Tibetan community with direct salary support of the project staff on the ground and other resources needed to facilitate implementation of the vaccines against Covid-19 for the community. This financial and technical support has also enabled the development of the Covid-19 surveillance database that helps to monitor outbreaks of Covid-19 for the community.

4. How are research staff who conducted data collection acknowledged?

Research staff engaged in the data collection are acknowledged as authors. Each team member was designated and delivered specific roles during the writing process (see acknowledgements).

5. Do all members of the research partnership have access to study data?

All members of the partnership have access to data.

6. How was data used to develop analytical skills within the partnership?

The local researchers received technical support in development of the surveillance database that provided the data for this analysis. The researchers engaged in literature review, analysis and interpretation of the data leading to improvement of analytic skills with multiple hands-on opportunities throughout the project to learn and improve.

7. How have research partners collaborated in interpreting study data?

Senior author of the study has travelled and spent time on the ground in the community to assist with the project. Multiple in-person meetings were held to discuss the various aspects of the study including the interpretation of the data. Additionally, virtual meetings and calls were held between the research partners to discuss and interpret the findings of the study. Orientation was held before the initiation of the study with follow up meetings during the study period.

8. How were research partners supported to develop writing skills?

The research team writing and editing this manuscript are composed of mix of early career investigators (TT and KD) who were provided academic support by senior researchers (TDS, REC, DP and AG), who helped in the review and revision of the draft providing valuable inputs on interpretation, analytic approaches, visualization, presentation and scientific writing.

9. How will research products be shared to address local needs?

The study will be published as open-access research and all members of the team, and the public will have access to the publication. Dedicated dissemination has been planned to stakeholders including the Central Tibetan Administration Department of Health, local district officials and administrators of the residential facilities that could inform policies and practices at various levels. Additionally, opportunities for research presentation at national and international conferences will be equally available for researchers across the partnership.

10. How is the leadership, contribution and ownership of this work by LMIC researchers recognised within the authorship?

Authors TT and TN from Delek Hospital in India are recognized as the first and second authors and played key roles in the design and implementation of the study, and analysis and writing of the manuscript. The senior or the corresponding author (KD) is a member of the Tibetan community with decades of service to the community in various fields of global health, particularly tuberculosis. More than 75% of the authors are represented from LMIC. The senior authors (REC, AG, DP and ZP) have played crucial roles in providing mentorship, academic and editorial support to the early career investigators in this study.

11. How have early career researchers across the partnership been included within the authorship team?

We have included early career researchers (TT, TT, TD, TN, ST, KD) within the authorship team. They have attended the orientation meetings, conducted literature reviews, and actively engaged in various core activities of the research. Four of the early career investigators are based in the LMIC.

12. How has gender balance been addressed within the authorship?

Of the 17 authors, 8 are females (TN, TD, DL, TC, TW, TY, TK, AG)

13. How has the project contributed to training of LMIC researchers?

The authorship team is primarily composed of mix of senior and early career researchers. Most the authors based in low- and middle-income countries are early career investigators, and the project presented an excellent opportunity for them to learn hands-on through engagement with the various components of the study and through open opportunity to seek technical advice and guidance from the senior and more experienced researchers. The funds from the research collaboration helped support the employment of the researchers and project staff in the Tibetan community.

14. How has the project contributed to improvements in local infrastructure?

The project helped toward development and improvement of the surveillance database for Covid-19.

15. What safeguarding procedures were used to protect local study participants and researchers?

The data for the study were provided from the surveillance database to monitor Covid-19 and effectiveness of the vaccines. There was no primary data collection. All necessary precautions are undertaken to ensure the confidentiality of the participants and data security.