TREND Statement Checklist

Paper	Item	Descriptor	Reported?	
Section/ Topic	No		V	Pg#
Title and Abst	ract			
Title and	1	Information on how unit were allocated to interventions	yes	2, 5, 6
Abstract		Structured abstract recommended	yes	2, 3
		Information on target population or study sample	yes	1, 2, 5
Introduction				
Background	2	Scientific background and explanation of rationale	yes	2, 3,
		Theories used in designing behavioral interventions	no	2, 3,
Methods				
Participants	3	Eligibility criteria for participants, including criteria at different levels in	yes	5, 6
rarticipants		recruitment/sampling plan (e.g., cities, clinics, subjects)	yes	3,0
		Method of recruitment (e.g., referral, self-selection), including the	yes	5
		sampling method if a systematic sampling plan was implemented	,,,,	,
		Recruitment setting	yes	5
		Settings and locations where the data were collected	yes	5
Interventions	4	Details of the interventions intended for each study condition and how	,	
		and when they were actually administered, specifically including:		
		Content: what was given?	yes	7, 8
		O Delivery method: how was the content given?	yes	5, 6
		 Unit of delivery: how were the subjects grouped during delivery? 	yes	5, 6
		Deliverer: who delivered the intervention?	yes	5
		 Setting: where was the intervention delivered? 	yes	5
		 Exposure quantity and duration: how many sessions or episodes or 	yes	5, 6
		events were intended to be delivered? How long were they intended to last?		
		Time span: how long was it intended to take to deliver the	yes	5
		intervention to each unit?	yes	3
		Activities to increase compliance or adherence (e.g., incentives)	no	
Objectives	5	Specific objectives and hypotheses	yes	5-7
Outcomes	6	Clearly defined primary and secondary outcome measures	yes	5-7
		Methods used to collect data and any methods used to enhance the	yes	5-7
		quality of measurements	,	
		Information on validated instruments such as psychometric and biometric	yes	6-7
		properties	,	
Sample Size	7	 How sample size was determined and, when applicable, explanation of any 	yes	5-6
		interim analyses and stopping rules	, i	
Assignment Method	8	 Unit of assignment (the unit being assigned to study condition, e.g., 	yes	5-6
		individual, group, community)		
		Method used to assign units to study conditions, including details of any	no	n.a.
		restriction (e.g., blocking, stratification, minimization)		
		 Inclusion of aspects employed to help minimize potential bias induced due 	no	n.a.
		to non-randomization (e.g., matching)		

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Blinding (masking)	9	 Whether or not participants, those administering the interventions, and those assessing the outcomes were blinded to study condition assignment; if so, statement regarding how the blinding was accomplished and how it was assessed. 	no	n.a. (open label)
Unit of Analysis	10	Description of the smallest unit that is being analyzed to assess intervention effects (e.g., individual, group, or community)	yes	5-15
		 If the unit of analysis differs from the unit of assignment, the analytical method used to account for this (e.g., adjusting the standard error estimates by the design effect or using multilevel analysis) 	no	n.a.
Statistical Methods	11	Statistical methods used to compare study groups for primary methods outcome(s), including complex methods of correlated data	yes	8
		 Statistical methods used for additional analyses, such as a subgroup analyses and adjusted analysis 	yes	8
		Methods for imputing missing data, if used	no	n.a.
		Statistical software or programs used	yes	8
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Results Participant flow	12	Flow of participants through each stage of the study: enrollment,		
rarticipant now	12	assignment, allocation, and intervention exposure, follow-up, analysis (a		
		diagram is strongly recommended)		
		 Enrollment: the numbers of participants screened for eligibility, found to be eligible or not eligible, declined to be enrolled, and 	yes	9
		enrolled in the study		
		 Assignment: the numbers of participants assigned to a study condition 	yes	9
		 Allocation and intervention exposure: the number of participants assigned to each study condition and the number of participants who received each intervention 	yes	9
		 Follow-up: the number of participants who completed the follow-up or did not complete the follow-up (i.e., lost to follow-up), by study condition 	yes	9, 11
		 Analysis: the number of participants included in or excluded from the main analysis, by study condition 	yes	9
		Description of protocol deviations from study as planned, along with reasons	yes	8
Recruitment	13	Dates defining the periods of recruitment and follow-up	yes	9
Baseline Data	14	Baseline demographic and clinical characteristics of participants in each study condition	yes	9-10
		Baseline characteristics for each study condition relevant to specific disease prevention research	no	n.a.
		Baseline comparisons of those lost to follow-up and those retained, overall and by study condition	no	n.a.
		Comparison between study population at baseline and target population of interest	no	n.a.
Baseline	15	Data on study group equivalence at baseline and statistical methods used	no	n.a.

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Numbers	16	Number of participants (denominator) included in each analysis for each	yes	9-16
analyzed		study condition, particularly when the denominators change for different		
		outcomes; statement of the results in absolute numbers when feasible		
		 Indication of whether the analysis strategy was "intention to treat" or, if not, description of how non-compliers were treated in the analyses 	no	n.a.
Outcomes and estimation	17	For each primary and secondary outcome, a summary of results for each estimation study condition, and the estimated effect size and a confidence interval to indicate the precision	yes	9-16
		Inclusion of null and negative findings	yes	9-16
		Inclusion of results from testing pre-specified causal pathways through which the intervention was intended to operate, if any	no	n.a.
Ancillary analyses	18	Summary of other analyses performed, including subgroup or restricted analyses, indicating which are pre-specified or exploratory	no	n.a.
Adverse events	19	 Summary of all important adverse events or unintended effects in each study condition (including summary measures, effect size estimates, and confidence intervals) 	yes	11-13
DISCUSSION				
Interpretation	20	 Interpretation of the results, taking into account study hypotheses, sources of potential bias, imprecision of measures, multiplicative analyses, and other limitations or weaknesses of the study 	yes	16-22
		Discussion of results taking into account the mechanism by which the intervention was intended to work (causal pathways) or alternative mechanisms or explanations	yes	16-22
		 Discussion of the success of and barriers to implementing the intervention, fidelity of implementation 	yes	16-22
		Discussion of research, programmatic, or policy implications	no	n.a.
Generalizability	21	 Generalizability (external validity) of the trial findings, taking into account the study population, the characteristics of the intervention, length of follow-up, incentives, compliance rates, specific sites/settings involved in the study, and other contextual issues. 	yes	16, 17 21, 22
Overall Evidence	22	 the study, and other contextual issues General interpretation of the results in the context of current evidence and current theory 	yes	16-22

From: Des Jarlais, D. C., Lyles, C., Crepaz, N., & the Trend Group (2004). Improving the reporting quality of nonrandomized evaluations of behavioral and public health interventions: The TREND statement. American Journal of Public Health, 94, 361-366. For more information, visit: http://www.cdc.gov/trendstatement/