

Additional File 1:

The Consolidated Criteria for Reporting Qualitative Studies (COREQ): 32-item checklist

No. Item	Guide questions/description	Notes
Domain 1: Research team and reflexivity		
The research team		
The multidisciplinary research team had expertise in Digital Health (RMA, HR,APJ), Public health (All authors) and qualitative studies (HR,NS,MH,SK).		
Personal Characteristics		
1. Interviewer/facilitator	Which author/s conducted the interview or focus group?	HR conducted all FGDs and KIIs. SN was the moderator during the interviews.
2. Credentials	What were the researcher's credentials? E.g. PhD, MD	HR: PhD SN: MSc
3. Occupation	What was their occupation at the time of the study?	HR: Senior Scientist and Head Department of Preventive and Digital Health Research SN: Research Assistant
4. Gender	Was the researcher male or female?	HR and SN were females.
5. Experience and training	What experience or training did the researcher(s) have?	HR and SN had experience with qualitative methods, including facilitating KIIs, FGDs and conducting interviews. HR has advanced training in Implementation Science and Digital Health.
Relationship with participants		
6. Relationship established	Was a relationship established prior to study commencement?	The research team did not have any contact with participants prior to obtaining informed consent. Researchers had no professional or ongoing relationship with the participants.
7. Participant knowledge of the interviewer	What did the participants know about the researcher? e.g. personal goals, reasons for doing the research	Participants were aware that this was a research project to identify barriers and facilitators to equitable utilization of mHealth and telehealth among Type 2 Diabetes Mellitus (T2DM) patients in India
8. Interviewer characteristics	What characteristics were reported about the interviewer/facilitator? e.g. Bias, assumptions, reasons and interests in the research topic	Interviews were conducted by trained researchers with experience in qualitative methods. The interviewers were not known to participants prior to the study. Although the research team had a professional interest in the topic, no preconceived hypotheses were imposed during interviews. To reduce potential bias, interviewers followed a semi-structured guide, practiced some mock interviews before the study ones and maintained reflexive field notes. Regular discussions through zoom calls with the core project team were held to reflect

		on assumptions and ensure analytic rigor.
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Domain 2: Study design		
Theoretical framework		
9. Methodological orientation and Theory	What methodological orientation was stated to underpin the study? e.g. grounded theory, discourse analysis, ethnography, phenomenology, content analysis	The analysis was guided by the Social Ecological Model (SEM) with elements of digital health, which informed the structuring and interpretation of themes across domains. A combination of grounded theory and phenomenological approaches, using inductive and deductive coding strategies, helped identify nuanced and multi-level insights.
10. Sampling	How were participants selected? e.g. purposive, convenience, consecutive, snowball	Purposive sampling was employed for participant recruitment, and selection was not guided by data saturation. This approach enabled us to ensure diversity in the sample by considering factors such as age, gender, ethnicity, educational level, and employment.
11. Method of approach	How were participants approached? e.g. face-to-face, telephone, mail, email	Participants for the focus group discussions (FGDs) were recruited directly from the outpatient department of a tertiary care diabetes centre in urban Chennai and a rural diabetes unit. Key informant interviews (KIIs) were conducted using purposive sampling. Experts with relevant experience and expertise in their respective fields were deliberately identified and approached to provide in-depth, information-rich perspectives relevant to the study objectives.
12. Sample size	How many participants were in the study?	A total of 54 individuals participated in the study, comprising 42 participants from four Focused Group Discussions (FGDs) and 12 participants through Key Informant Interviews (KIIs).
13. Non-participation	How many people refused to participate or dropped out? Reasons?	None
Setting		

14. Setting of data collection	Where was the data collected? e.g. home, clinic, workplace	FGDs were conducted in conference rooms within the outpatient departments of a tertiary care diabetes centre in Chennai and a rural diabetes unit. KIs were conducted either in person or online, depending on participant availability and preference.
15. Presence of non-participants	Was anyone else present besides the participants and researchers?	There were no people present during the data collection besides participants and researchers.
16. Description of sample	What are the important characteristics of the sample? e.g. demographic data, date	The overall mean age of the participants was 45 years, and around 60 % of them were males. All of them were smartphone users except 1. Duration of diabetes was longest among rural patients (13 years), while caregivers reported 7–8 years of caregiving experience.
Data collection		
17. Interview guide	Were questions, prompts, guides provided by the authors? Was it pilot tested?	Details given under section 'Data Collection', Pages 6,7
18. Repeat interviews	Were repeat interviews carried out? If yes, how many?	There were no repeat interviews with the same participants.
19. Audio/visual recording	Did the research use audio or visual recording to collect the data?	All interviews were audio recorded with permission of participants.
20. Field notes	Were field notes made during and/or after the interview or focus group?	Researchers made field notes during the interviews and focus groups.
21. Duration	What was the duration of the interviews or focus group?	The focus groups had an average duration of 40-60 minutes. Refer to Page 7-first para
22. Data saturation	Was data saturation discussed?	Data saturation was discussed and monitored during data collection.
23. Transcripts returned	Were transcripts returned to participants for comment and/or correction?	Transcripts were not returned to participants for comment and/or correction.

Domain 3: Analysis and findings		
Data analysis		
24. Number of data coders	How many data coders coded the data?	Two researchers independently coded the transcripts. Any discrepancies in coding were discussed and resolved through consensus.
25. Description of the coding tree	Did authors provide a description of the coding tree?	There is no description of the coding tree.
26. Derivation of themes	Were themes identified in advance or derived from the data?	Themes were derived from the data in an inductive manner.
27. Software	What software, if applicable, was used to manage the data?	Researchers used NVivo during the coding of all interviews.
28. Participant checking	Did participants provide feedback on the findings?	We plan to disseminate findings after publication
Reporting		
29. Quotations presented	Were participant quotations presented to illustrate the themes/ findings? Was each quotation identified? E.g. participant number	Participant quotations were included in the results to illustrate key themes; however, quotations were not linked to individual participant identifiers.
30. Data and findings consistent	Was there consistency between the data presented and the findings?	All findings were derived from the data and all themes are supported by illustrative quotes.
31. Clarity of major themes	Were major themes clearly presented in the findings?	Major themes were clearly identified and described in the results section, with supporting participant quotations to illustrate each theme.
32. Clarity of minor themes	Is there a description of diverse cases or discussion of minor themes?	In addition to major themes, minor themes and divergent views were identified and presented to reflect the range of participant experiences.