Additional file 5. Intervention coding into BCTs

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
Luszczynska	pl	Action planning	received instructions about what implementation intentions should include
Luszczynska,	C, d1	Information about health	patients were reminded about the nutrition and physical activity guidelines
Scholzc et al. 2007	C d1	consequence Social reward Action planning	The patients were complimented for seeking social supportpatients received instructions about implementation intentions training
Sniehotta et al.	p2, p3	Action planning	participants formed up to three action plans about when, where, and how they
2006	p3	Coping planning	intended to exercise participants formed up to three coping plans about strategies to overcome anticipated barriers
Luszczynska, Sobczyk et al. 2007	C, p4(d2)	Self-monitoring of behavior Reduce negative emotions Avoidance/reducing exposure to cues for th behavior Framing/reframing Social support (unspecified)	The program consists of weekly 1-hr group meetings focusing on nutrition and physical activity, behavioral weight control strategies (i.e., self-monitoring, stress management, problem solving, and cognitive restructuring), and social support by group members
	p4(d2)	Action planning	The participants were invited to write detailed plans regarding six food categories
		Coping planning	participants were asked to make coping plans regarding risky or tempting
Scholz et al.	p5, p6	Action planning	Participants received a planning sheet
2007	p6	Coping planning	Participants received a planning sheet to write down up to three coping plans.
Soureti et al. 2011a	C, d3, d4 d4	Information about health consequence Biofeedback Salience of consequences	They also received educational information on the importance of a healthy diet low in saturated fatThey then received feedback on their future CVD risk in the form of the HA risk message. Heart-Age (HA) is the age corresponding to someone of the same gender with the same CVD risk level
	d3, d4	Action planning Coping planning	Participants who received the PT selected from a list of 13 situations, in which they were tempted to eat unhealthily and then chose an approach to change their behavior from a list of 13 solutions.
Soureti et al. 2011b	C, d5, d6	Information about health consequence	All groups received educational information on the importance of a healthy diet low in saturated fat,

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
	d5, d6	Action planning	Participants who received the planning tool selected from a list of 13 situations, in which they were tempted to eat unhealthily and then chose an approach to change
		Coping planning	their behavior from a list of 13 solutions.
	d6	Prompt/cues	After completing the planning session, participants in the PTT entered their mobile number and chose a time band to receive text reminders of their plans.
Broekhuizen et	p7(d7)	Information about health	generic online CVD risk information was presented, containing feedback on
al. 2012		consequence Information about antecedents Feedback on outcomes of	CVD risk behaviours and their contribution to overall CVD risk, as well as information on the changeability of these behaviours
		behavior Instruction on how to perform	participants received six tailored advice on smoking, physical activity, saturated fat
		the behavior Feedback on behavior	intake. fruit intake. vegetables intake and compliance to statin therapy. computer-generated feedback was tailored to personal performance level,
		Pharmacological support	awareness of one's own performance Personalised feedback on compliance to statin therapy
		Information about health	the participant and the personal coach further established the level of the
		consequence Credible source Social support (unspecified)	participant's knowledge/awareness about FH and cardiovascular risk factors.
		Prompt/cues	one to five counsellor-initiated booster telephone sessions were performed during
		Social support (unspecified) Information about social and environmental consequences	a period of 9 months to encourage the participant's behavioural changes. Giving personal feedback to participant's self-reported attitude and self-efficacy and by involving the social environment of the participant in making action plans.
		Action planning	Stimulating participants to make action plans and discussing how to
		Coping planning	overcomepossible barriers in behavioural change,
Bélanger-Gravel et al. 2013	C, p8	Feedback on behavior Information about health	Feedback on baseline level of physical activity Information regarding recommended level of physical activity, health benefits and
2010		consequence Goal setting (behavior)	safetv Establishment of behavioural goals
		Self-monitoring of behavior Adding objects to the	Distribution of a physical activity logbook
		environment Review behavior goals	Revision of the physical activity logbook
		Social support (unspecified)	General encouragement

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
	p8	Adding objects to the environment Action planning Coping planning Credible source Social support (practical)	participants in the experimental condition (i.e. CA+IIs) completed an II task ('if-then' plans) regarding the classical what, when and where componentsparticipants attended two additional sessions for a total of three face-to-face sessions with a physical activity counsellor
Scholz et al. 2013	C, d8	Instruction on how to perform the behavior Information about health consequence Adding objects to the environment Feedback on behavior	All participants received educational leaflets on a low-fat diet, based on recommendations of the Swiss Society of Nutrition.  Next, they completed a self-check knowledge questionnaire on low-fat diet.
		Social support (unspecified)	Subsequently, participants could compare their answers with the correct answers and discuss this with a trained interviewer
	d8	Action planning	In a face-to-face situation with an undergraduate psychology student, participants were instructed to form up to three action plans on their low-fat diet.
Ströbl et al. 2013	p9(d9)	Coping planning Information about health consequence Goal setting (behavior) Goal setting (behavior) Self-monitoring of behavior Action planning Prompt/cues Social support (unspecified) Review behavior goals Feedback on behavior Coping planning Adding objects to the	Following this, participants were asked to form up to three coping plans. provide general information on behaviour-health link, prompt intention formation,prompt specific goal setting,prompt self-monitoring of behaviour;  Patients were offered templates for the individual plans use of follow-up prompts, provide general encouragement, prompt review of behavioural goals, provide feedback on performanceprompt barrier identification, relapse preventionpatients were given their booklets and invited to make individual physical
de Freitas Agondi et al. 2014	C, d10	environment Credible source Social support (unspecified) Pharmacological support	activity and coping plans for the time after discharge. usual care included medical and nursing consultations, general counseling about pharmacological and nonpharmacological treatment, and treatment optimization.

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
	d10	Information about health consequence	patients received a letter containing information on the benefits of reducing dietary salt intake
		Action planning	participants were asked to indicate up to three actionplans on when,where,and how they thought they could reduce the salt added to food preparation
		Coping planning	Then, the women were asked to indicate obstacles or barriers that could interfere with the implementation of the plans they had proposed
		Restructuring the physical environment	The women were asked to repeat aloud the plans and instructed to put the plans in a visible and strategic place at home.
Helena et al. 2014	C, p10(d11)	Prompt/cues Social support (unspecified)	the plans developed were reinforced by telephone call. Continuous positive airway pressure (CPAP) regimen included diagnosis by a physician (consultant in lung medicine).
		Information about health consequence	patients were informed about the association between overweight and sleep apnea and about the aim ofthe CPAP treatment.
		Self-monitoring of behavior Adding objects to the	In clinical practice, the patients are then followed up with a whole-night sleep registration at home
	p10(d11)	environment Feedback on behavior Social support (unspecified) Framing/reframing	the therapists strove to evoke and strengthen the individual's motivation to change and to encourage the patient to explore his or her own perceptions and thoughts regarding the pending behavioral changes.
		Goal setting (behavior)	a S-M-A-R-T (specific, measurable, achievable, relevant, and time limited) goal was set for the week to come.
		Action planning	The participants were asked to transform their intentions into an action plan for the physical activity and eating behavior change
		Self-monitoring of behavior	The participants were encouraged to self-monitor their physical activity behavior and eating behavior
		Review behavior goals Feedback on behavior	At each meeting, the behavioral goals and action plan of the patient were reviewed and feedback was given on performance
		Information about antecedents	Functional behavioral analyses were performed in order to identify functional relationships between antecedents, behavior, and consequences in each individual.
		Feedback on behavior	

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Coping planning	the participants and therapists discussed perceived barriers that could constrain
			their planned actions for behavioral performance
Janssen et al.	p11(d12)	Information on health	Information on consequences & Normative information.
van Genugten et al. 2014		Information on health consequences Self-monitoring of behavior Focus on past success Goal-setting(behavior) Action planning Graded tasks Behavioural contract Prompts/cues Restructuring the physical environment Social support (practical) Behavioral practice/ rehearsal Coping planning Self-monitoring of outcomes of behavior Feedback on behavior Social comparison Self-reward Review behavior goals Reduce negative emotions Adding objects to the environment Information about health consequence Prompts/cues Goal setting (behavior) Pros and cons Self-monioring of behavior Feedback on behavior	Information on consequences & Normative information.  Self-monitoring of behaviour Focus on past success Goal-setting Action planning Set graded tasks Agree behavioural contract Use prompts/cues Environmental restructuring  Plan social support Prompt practice Barrier identification/problem-solving & Relapse prevention/coping planning Self-monitoring of behaviour/outcome  Feedback on performance Facilitate social comparison Rewards contingent on success Review of goals Stress management/emotional control pedometers  general information on weight gain prevention  Reminders to (re)visit the intervention were sent to the participants every two asking them to weigh the pros and cons of weight gain prevention, and to choose one behavior change and plan for that change. giving participants feedback on their performance during the previous week, based on self-reported behavior change.
		Action planning	people were guided in choosing what they wanted to change (goal setting) and
			where, when, and how to make the change in an open format.

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Coping planning	people were asked whether they expected to encounter a risk situation and to think
		Self-monitoring of outcomes of behavior Feedback on outcomes of	about this situation and to describe their strategy to avoid or handle they were provided with a tool to monitor and evaluate changes in their body weight.  Furthermore, written feedback is provided.
Vinkers et al.	С	behavior Information about health	The group sessions were led by one of three dieticians who were explicitly
2014	C	consequence Social support (unspecified)	required to only provide nutritional knowledge
		Goal setting (behavior)	participants were asked to make a list with 10 unhealthy eating habits, and choose
		Self-monitoring of behavior	one habit they wanted to change Two written assignments were sent requiring participants to reflect on their goal
		Information about health consequence	participants were asked to change an unhealthy habit they would be able to maintain, and the importance of behavior maintenance was emphasized.
	p13(d14),	Goal setting (behavior) Information about health	participants' motivation, dietary knowledge and expectations towards the
	p14(d15)	consequence Goal setting (behavior) Action planning Mental rehearsal of successful performance Self-monitoring of behavior	intervention were discussed.  (a) concrete, realistic goal setting; (b) exploring conditions and barriers to goal attainment; (c) appraisal of the barriers to goal attainment; (d) making specific if—then plans for action initiation and mental simulation of plans; and (e) evaluating progress  Participants were given a workbook that provided basic background information
		Adding objects to the	about weight management, 5-step plans, and diaries
		environment Social support (unspecified)	participants were stimulated to discuss and make use of each other's knowledge and experience with weight management.
	p14(d15)	Review behavior goals	renewing a goal that proved difficult to achieve in the past weeks and identifying
Obara- Golebiowska et	C, d16 d16	Coping planning Material reward (behavior) Action planning	specific goal-threatening situations and coping strategies the participants were offered a special reward based on their individual participants developed a list of techniques for resisting high-calorie foods during
al. 2015		Social support (unspecified)	and after the weight-loss program.  The ideas generated by the participants were discussed with others
Armitage et al. 2017	C, d17	Instruction on how to perform the behavior	The volitional help sheet provides participants with a list of critical situations they may encounter and the responses they might find useful

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
	С	Avoidance/reducing exposure	participants were simply asked to tick all the critical situations and appropriate
	d17	to cues for the behavior Action planning Coping planning	responses that applied to them Participants were asked to draw links between as many critical situations and appropriate responses as they wanted thereby forming implementation intentions
Cheung et al. 2017	p15(d18)	Goal setting (behavior) Feedback on behavior Feedback on outcomes of behavior	asked participants to set goals; provided feedback regarding their weight, behavior, and socio-cognitive beliefs
		Action planning	asked participants to make if-then plans specifying when, where, and how they
		Coping planning Feedback on behavior Discrepancy between current behavior and goal Social comparison	would take specific actions to realize the behavior change provided participants the option to make coping plans participants received tailored feedback about their behavior change progress by assessing current behavior and comparing to their weight and behavior before role models narrating about their own change process and how they dealt with
		Review outcome goals	difficult situations participants received tailored feedback on their weight change by indicating whether or not they had achieved their weight goal
Duan et al. 2018	p16(d19)	Information about health consequence Goal setting (behavior) Goal setting (outcome)	risk perception, outcome expectancies, and goal setting;
		Action planning Review behavior goals Coping planning	development of action plans; revision and adjustment of previous action plans and development of coping plans;
		Review behavior goals Social support (practical) Feedback on behavior Prompts/cues	revision and adjustment of previous coping plans and development of behavior- specific social support patients received individualized feedback on their self-reported behavior short message service (SMS) text messages were sent as reminders
Stevens et al. 2001	p17(d20)	Information about health consequence Social support (practical) Action planning Self-monitoring of behavior Goal setting (behavior)	provided nutrition education, information on physical activity, and social support for making and maintaining behavior changes.  self-monitoring, setting explicit short-term goals and developing specific action plans to achieve those objectives, and developing alternative strategies for situations that trigger problem eating.

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
Sniehotta et al. 2005	p18, p19	Action planning Coping planning Mental rehearsal of successful performance Commitment Adding objects to the	Participants received a planning booklet with two planning sheets for action plans and for coping plans
	p19	environment Self-monitoring of behavior Adding objects to the	they received by mail six weekly diaries after discharge, tailored to individual requirements.
Jackson et al. 2005	C, d21	environment Information about health consequence Adding objects to the environment	By use of an information postcard, participants were told what constitutes a portion of fruit and vegetables.
		Goal setting (behavior)  Monitoring outcomes of behavior by others without feedback	They were asked to eat two extra portions of fruit or vegetables each day for the next 3 months.  They then completed the TPB questionnaire.
Svetkey et al. 2008	d21 C, p20(d22), p21(d23)	Action planning Social support (practical) Instruction on how to perform the behavior Goal setting (behavior) Goal setting (outcome) Information about health	The two implementation intentions were then written onto the back of the postcard A trained interventionist led 20 weekly group sessions over approximately 6 Intervention goals were for participants to reach 180 minutes per week of moderate physical activity (typically walking); reduce caloric intake; adopt the Dietary Approaches to Stop Hypertension dietary pattern, which has been shown to reduce CVD risk factors; and lose approximately 1 to 2 lb per week.
		consequence Self-monitoring of behavior Adding objects to the	Participants were taught to keep food and physical activity self-monitoring records accelerometer
	C p20(d22)	environment Information about health consequence Goal setting (behavior) Feedback on behavior Feedback on outcomes of behavior	participants received printed lifestyle guidelines with diet and physical activity recommendations.  Interactive features allowed participants to set personal goals and action plans and to graph personal data over time.

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
	p21(d23)	Action planning Coping planning Social support (unspecified) Self-monitoring of behavior Self-monitoring of outcomes of behavior Prompt/cues Prompt/cues Social support (unspecified) Goal setting (behavior) Action planning Review behavior goals Review outcome goals Feedback on behavior Feedback on outcomes of behavior Self-monitoring of behavior	Modules addressed problem solving and motivation, and a bulletin board facilitated social support participants were required to enter current weight and were encouraged to use the Web site for self-monitoring of physical activity and caloric intake.  they were sent an e-mail reminder that was repeated after another week of no Participants had telephone contact with an interventionist each month,  Each personal-contact session began with a self-reported weight and a review of progress since the last contact, including number of days on which a food diary was kept, frequency of weighing, average number of minutes of exercise, and progress on additional goals and action plans.
Thoolen et al. 2009	С	Self-monitoring of outcomes of behavior Coping planning  Information about health consequence Instruction on how to perform the behavior	Each contact discussed the individual's barriers to weight loss maintenance and plans to overcome those barriers.  The control group received a brochure on diabetes self-management.
	p22(d24)	Adding objects to the environment Goal setting (behavior) Coping planning Action planning Instruction on how to perform the behavior Social support (unspecified) Behavioral practice/ rehearsal Self-monitoring of behavior	set small, concrete and attainable goals, recognise barriers to goal achievement, generate strategies for solving potential problems in specific situations, formulate specific action plans, and consider beforehand how to evaluate progress.  During the sessions, the nurse primarily functions as coach, facilitating group interaction and practice with the proactive skills.  keep a written daily register of goal-attainment

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Adding objects to the	Course material includes a patient workbook and a nurse's handbook
Zandstra et al. 2010	C, d25	environment Mental rehearsal of successful performance Monitoring outcomes of behavior by others without feedback Instruction on how to perform	Mental simulation is employed in each session to help patients become more proactive. participants were weighed on an electronic scale, received instructions on how to use the MR products and how to record consumption of the MR products
Sniehotta et al. 2011	d25 C, p23(d26)	the behavior Self-monitoring of behavior Action planning Information about health consequence Instruction on how to perform	Participants fromed implementation-intentions Participants received two British Heart Foundation (BHF) booklets
	p23(d26)	the behavior Adding objects to the environment Goal setting (behavior) Self-monitoring of behaviour (behavior) Action planning Coping planning Review behavior goals Behavioral practice/ rehearsal	intention formation/goal setting, self-monitoring of behaviour, action planning, barrier identification/coping planning, review of behavioural goals, prompting practice, planning contingent rewards and relapse prevention.
Armitage et al. 2014	C, d27 C	Self-reward Instruction on how to perform the behavior Avoidance/reducing exposure	Participants were both told that identifying situations in which they might be tempted to eat.  Participants were asked to tick as many or as few critical situations and appropriate
	d27	to cues for the behavior Action planning	responses that applied to them. Participants were asked to draw links between as many critical situations and
Rodrigues et al. 2013	C, p24	Coping planning Goal setting (behavior) Instruction on how to perform	appropriate responses as they wanted Participants were recommended to engage in regular exercise they were advised to increase their everyday PA, for example, by using a bicycle
	p24	the behavior Action planning Coping planning	instead of a car Participants received three identical planning sheets participants established up to three coping plans

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Prompt/cues	phone calls were made
Wilczynska et al.	p25	Framing/reframing	Increase motivation, Increase self-efficacy, self-reward
2019	_	Reduce negative emotions	Change negative outcome expectancies related to PA
		Instruction on how to perform	Provide strategies for overcoming barriers
		the behavior	
		Action planning	Provide planning strategies and instructions
		Coping planning	Implement problem solving strategies, help change unhelpful automatic thoughts
		Self-monitoring of behavior	Provide self-monitoring strategies
		Social support (practical)	Social support
		Demonstration of behavior	Model or demonstrate behavior
		Feedback on behavior	Provide feedback on performance
		Behavioral practice/ rehearsal	Behavior reinforcement
		Social support (unspecified)	General encouragement
		Information about health	Provide information about eCoFit Challenges
		consequence	
		<u> -</u>	Provide cognitive strategies to increase motivation and PA maintenance
		the behavior	
		Information about social and	Promote outdoor environment for RT and aerobic activities
		environmental consequences	
		Goal setting (behavior)	Goal setting
		Self-monitoring of behavior	Self-monitoring
		Restructuring the social	Social support
		environment	D ( 1'
		Feedback on behavior	Progress tracking Pedometer
		Adding objects to the	redometer
Hayes et al. 2020	C 428 420	environment Goal setting (behavior)	All participants were assigned five dietary goals.
11ayes et al. 2020	C, u28, u29	Self-monitoring of outcomes	Participants also were assigned the goal to weigh daily as regular weight self-
		of behavior	monitoring promotes weight loss.
		Reduce negative emotions	Participants were introduced to the dietary goals and asked to read through brief
		Information about health	psychoeducational materials regarding dietary change for weight loss.
		consequence	psychoeducational materials regarding dietary change for weight loss.
		Information about emotional	
		consequence	
	d28, d29	Action planning	Participants formed an implementation intention for each of the six goals.
	d29	Prompt/cues	Text messages containing all implementation intentions and goal reminders
		-	

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
Zakrisson et al. 2019	p26	Social support (emotional)  Goal setting (behavior) Action planning Instruction on how to perform the behavior Behavioral practice/ rehearsal Social support (practical) Information about health	The group meeting was to achieve a positive and supporting atmosphere among the group members.  Individual action plans and goal setting discussions for better self-management and behavioural changes were performed supporting the patients to practice skills and gain the knowledge they needed for better self-management and behavioural changes.
Ayre et al. 2020	C, d30, d31 C d30, d31	Cool setting (behavior)	During the first, second, and third weeks, participants were emailed a reminder of their plan.  Participants were given a brief description of each action plan and then could choose which one they would like to use.
	d30, d31	Goal setting (behavior)  Action planning Review behavior goals Reduce negative emotions	Participants were asked to select from a list 3 situations and to select the situation they would be happiest to change.  Participants were asked to select 1 option from a list of possible plans participants were asked to imagine how it might feel to enact the plan Participants were advised to select a different plan from the list to reduce their
Kim et al. 2019	d31 C, p27(d32), p28(d33)	Action planning Coping planning Information about health consequence Monitoring outcomes of behavior by others without feedback Pharmacological support Instruction on how to perform	perceived difficulty of enacting the plan. Participants formulated a plan to reduce their unhealthy snacking Participants entered their selected situations and plan into text boxes. nurse diabetes educators provided initial diabetes self-management education in which the content consisted of general information on diabetes mellitus, complications, blood glucose monitoring, nutritional management, exercise, and medication utilization, using different strategies.
	p27(d32), p28(d33)	the behavior Information about health consequence Social support (unspecified) Action planning	the educators distributed an easy-to-read diabetes education brochure  The study interventionist encouraged patients to make an action plan for each week and provide answers to their questions
	p28(d33)	Restructuring the social environment	The social media–based self-management support was operated as a closed social media service

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
Groeneveld et al. 2011	C, p29(d34)	Information about health consequence Identification of self as role model Information about health consequence Adding objects to the	The study interventionist uploaded diabetes self-management information in both video and short text formats  The study interventionist encouraged patients to share their diabetes management experiences on the discussion board.  brochures were provided containing information on PA, healthy eating, smoking cessation, and CVD.
	C p29(d34)	environment Biofeedback Feedback on behavior Social support (unspecified) Biofeedback Feedback on behavior	The participants received brief oral or written information from the occupational physician about their risk profile This counselor applied a client-centered counseling style using MI techniques (1) participant's CVD risk profile was presented and his current health status was discussed. (2)participant decided to aim at PA and diet, or smoking. (3)participant
Almeida et al. 2015	C, p30, p31	Pros and cons Goal setting (behavior) Action planning Feedback on behavior Social support (unspecified) Prompt/cues Information about health	was encouraged to indicate advantages and disadvantages of current and 'desired' behavior. (4)participant was asked to indicate his willingness, readiness, and In the following counseling sessions, progress and barriers were discussed. participants received 3 interactive voice response (IVR) support calls and 3 tailored newsletters interventions began with an opening message about the importance of PA to
	C, p31	consequence Restructuring the physical environment Adding objects to the	achieving good health the session included an interactive geographic information system (GIS) interface that allowed participants to select a free 12-month voucher to a fitness facility
	p30, p31	environment Action planning Feedback on behavior Goal setting (behavior) Social support (unspecified) Coping planning	the session included personal action planning to improve self- and response- The session included an assessment of the patient's PA level The program provided a range of minutes of PA that would be an appropriate starting point for the patient and used a collaborative goal setting process the session included assisting the patients with PA barrier identification and
Silva et al. 2020	p32	Action planning Social support (unspecified) Behavioral practice/rehearsal Coping planning	strategies to overcome barriers with the researcher's help, participants were asked to form a plan on when, where and how they intended to walk for at least 30 minutes five times a week participants described the barriers to walking and formulated strategies to overcome them

Studies gr	roup ID	Behavior change technique	Coding based on the original article
Fleig et al. 2011 po	33(d35)	Goal setting (behavior) Framing/reframing Action planning Focus on past success	post rehabilitation exercise goal setting, checking the self concordance of these goals, the formation of action plans, and the recall of positive exercise experiences.
		Action planning Review behavior goals Mental rehearsal of successful	the formation of action plans, the reflection of positive exercise experiences, and an action control diary to self-monitor one's home-based behavior
		performance Self-monitoring of behavior	
Leung et al. 2019 p.	34	Information about social and	introduction of the concept of photovoice and the importance of doing regular
		environmental consequences Information about health	physical activity; warm-up stretching exercises; capturing photos in the neighbourhood; sharing of thoughts when the participants reviewed the photos;
		consequence Behavioral practice/rehearsal Action planning Restructuring the physical	identifying resources and facilities related to physical activity within the neighbourhood; formulating action plans for physical activity
		environment	
		Commitment	
		Social support (practical)	A health and fitness officer was invited to rectify the myths of physical exhaustion
		Instruction on how to perform the behavior	and guide the participants to do exercise
		Demonstration of the behavior	
		Credible source	
		Coping planning	all participants worked together to find possible solutions/strategies to remove
D 1 1: 4 C	25(126)	Social support (unspecified)	barriers for each individual.
Dombrowski et C al. 2016	C, p35(d36)	Behavioral contract Commitment	All people who participate in this programme are sufficiently motivated to actively sign up and commit personal time and money.
	35(d36)	Action planning	The dietician then explained the idea of forming a detailed plan and provided an
1	1 ( )	Social support (unspecified)	additional form
		Credible source	
		Coping planning	participants specified which barriers they foresee and how to cope with them
		Prompt/cues	Participants were encouraged to use the planning form as a prompt/cue in their home environment.
Göhner et al. på	36(d37)	Goal setting (behavior)	clarification of personal health objectives
2012	, ,	Pros and cons	decisional balance sheet
		Commitment	decision-making approach

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
Christiansen et al. 2010	C, p37	Action planning Coping planning Self-monitoring of behavior Social support (unspecified)	generation of implementation intentions ("when-where-and-how plans"); anticipation of personal barriers and development of counter-strategies self-monitoring of the new behavior A trained psychologist (the principal investigator) delivered the modules in one-on-one sessionsThe control group participated in the standard treatment such as
		Information about health consequence Instruction on how to perform the behavior Reduce negative emotions Information about antecedents	nhysiotherapy under the guidance of qualified personnel. The patients receive general information about pain (e.g., the relationship between pain and stress, interaction between the psychological and somatic factors of pain) in addition to medical care and consultation, physiotherapy, and physical therapy (e.g., massage) and education (relaxation techniques).
	p37	Pros and cons	To begin with, the patient, assisted by the psychologist, listed four positive and four negative aspects associated with "exercising more" Next, the patients verbally elaborated two positive aspects of the desired future and two negative
		Coping planning Action planning	We applied common cognitive behavioral therapeutic principles of problem solving, in particular the strategies of planning changes Finally, we assisted the patients in the formation of implementation intentions.
Gagnon-Girouard et al. 2010	1 d38, d39	Information about health consequence Social support (emotional) Behavioral practice/rehearsal Reduce negative emotions Framing/reframing Avoidance/reducing exposure	Different themes such as enjoyment of physical activity and healthy nutrition, recognition of internal cues of hunger and satiety, identification of external influences on eating behaviors and food intake, and acceptation of one's own and others' body image were addressed through guided self-reflection and observations, group discussions, practical exercises, and lectures.
		to cues for the behavior Goal setting (behavior) Action planning	participants were asked to choose a personal objective and to design and present their own action plan in line with this objective.
	d39	Social support (unspecified) Social support (practical)	In the HAES group, the interveners were active leaders, providing specific information, structured activities, and counselling to participants.
Richardson et al. 2012	p38	Goal setting (outcome)	patients participated in collaborative goal setting with the therapist,
		Goal setting (behavior) Action planning	Patients then created weekly action plans related to the goal using a self- management behaviour that addressed the functional goal.

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Information about health consequence Instruction on how to perform the behavior Information about social and	The goals of the program were to build self-management skills, identify goals, set action plans and engage in problem solving approaches in a group setting.
Miller et al. 2016 p39(d40)		environmental consequence Self-monitoring of outcomes of behavior Adding objects to the	All participants received a Personal Health Record (PHR) booklet to record details of physical functioning and other aspects of their health.
		environment Feedback on behavior Social support (unspecified) Self-monitoring of behavior Self-monitoring of outcomes of behavior Adding objects to the	The study coordinator summarized the results of the assessment in terms of age- and sex-based norms within the record and responded to the participants' questions Weekly 60-minute group sessions were held and facilitated by a lifestyle coach using the program manual. The first 8 sessions presented the intervention goals, taught fundamental information about modifying energy and fat intake and increasing energy expenditure, and helped participants self-monitorparticipants
		environment Information about health consequence Instruction on how to perform the behavior Social support (unspecified)	received a written manual with session material, food and PA trackers for self-monitoring, a graph for tracking weekly weights, and a booklet with the nutrient content of commonly consumed foods for self-monitoring
		Goal setting (behavior) Goal setting (outcome) Action planning	The lifestyle intervention was goal-based with a goal of losing 7% of initial body weight, progressively increasing PA to 150 minutes/week of at least moderate The latter 8 sessions focused on problem solving to achieving lifestyle goals,
		Coping planning Discrepancy between current behavior and goal	relapse prevention, and motivational factors for sustaining behavioral change The following week, participants were asked to review the success of their action plan and how it could be modified. if unsuccessful.
		Information about health consequence	The control group received an information booklet regarding lifestyle changes for diabetes prevention
Kwasnicka et al. 2020	p40(d41)	Adding objects to the environment Social support (unspecified)	to create more need supportive and less controlling environments
2020		Instruction on how to perform the behavior	The program supported participants to make small sustainable changes to their eating through portion control; reduced consumption of sugary drinks, energy-

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Information about health consequence Goal setting (behavior) Social support (practical) Behavioral practice/rehearsal Demonstration of the behavior Information about social and	dense foods, and alcohol; and a gradual increase in physical activity by choosing the activity that the men enjoy the most or could most easily incorporate into daily 1: £.  This content was delivered in coach training with discussion of the basic principles of the theory, interactive activities (for example, scenarios, role-playing), detailed descriptions of these environmental components,
		environmental consequence Action planning Coping planning Review behavioral goals Restructuring the social environment	Aussie-FIT participants were supported in how to best form habits [14] and how to form specific action and coping plans (expanding on their initial SMART goals); these plans were revisited and revised during subsequent Aussie-FIT sessionsparticipants and coaches being invited to join closed Facebook groups
		Social support (unspecified)	Automated text messages, written in language to promote feelings of autonomy,
		Self-monitoring of behavior	competence. and relatedness. were sent each week to encourage session attendance In session 1, participants received an Aussie-FIT booklet with session summaries
		Self-monitoring of outcomes of behavior Adding objects to the	and space to complete in-session activities and to self-monitor their weight-loss progress and goals. Men also received activity monitors (Fitbit Zip), club tshirts, and reusable 'LiveLighter' branded water bottles.
		environment Social support (emotional)	Participants were free to communicate through the Facebook group with the coach and with each other.
Kivelä et al. 2020	C, p41(d42)	Social support (unspecified) Information about health consequence Feedback on outcome(s) of	They received the usual care regarding their health problems from the physicians and nurses at the primary healthcare centres if they needed it included assessment for the need of treatment, physical examination, problem assessment, laboratory and X-ray tests, medical advice and patient support and education
	p41(d42)	behavior Reduce negative emotions Goal setting (behavior) Action planning Adding objects to the	nurse coaches helped to identify their life situations and define their goals for the plans. The goals and health coaching focused on the management and The frequent attenders received their written plans for home self care support.
Osborn et al. 2018	C	environment Social support (emotional) Feedback on behavior Adding objects to the environment	In the follow-up sessions, the nurse coaches assessed their stage of changes, motivated them toward lifestyle and behavioural changes, gave emotional support. The usual clinical pathways for cardiovascular disease risk factors were continued in this group. British Heart Foundation leaflets were mailed out to participants.

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Information about health	
	p42(d43)	consequence Monitoring outcomes of behavior by others without Social support (unspecified) Goal setting (behavior) Feedback on behavior Review behavioral goals Action planning	These included setting a behavioural goal, involving supportive others, creating an action plan, recording progress, providing positive feedback, reviewing progress, coping with setbacks, and forming habits.
		Coping planning Adding objects to the environment	British Heart Foundation leaflets on keeping your heart healthy were given to intervention nurses or health-care assistants to distribute to participants at their
Boekhout et al. 1 2018	p43	Pros and cons Information about social and environmental consequences	first Primrose appointment. raise consciousness of the current level of PA; motivates participants to increase physical activity
		Feedback on behavior Action planning	participants receive planning sheets that the participant is stimulated to use in order to plan PA:
		Coping planning Restructuring the social environment	formats how they plan to deal with difficult situations that may interfere with PA received brochures from local PA-exercise groups
		Information about health	received medical information on exercising with a physical limitation.
Breslin et al. 2019	C, p44	consequence Information about health consequence Credible source Social support (practical)	Participants received a weekly multicomponent weight loss program, delivered in a group setting by a trained professional weight loss practitioner
		Instruction on how to perform	Participants received an eating plan to promote a healthier life
	p44	the behavior Social support (unspecified)  behavioral practice/rehearsal Demonstration of the behavior Instruction on how to perform the behavior	individual physical activity 30-minute long consultations took place in weeks two. three and four participants attended a 30-minute long group educational physical activity session

Studies	Intervention group ID	Behavior change technique	Coding based on the original article
		Goal setting (behavior)	The consultation session included discussions about possible discrepancies
		Discrepancy between current	between the individual's activity levels and recommended guidelines; goal setting;
		behavior and goal Coping planning	and problem solving
		Self-monitoring of behavior	Participants completed a physical activity log each day to enhance self-monitoring
		Action planning	participants formed weekly physical activity implementation intentions
<b>5</b> 1	4.5	Feedback on behavior	researcher checked the log details matched with what was said to be performed
Rodgers et al.	p45	Information about health	One investigator delivered an information lecture on the importance of exercising
2014		consequence Social support (unspecified)	participants were encouraged to 'brain storm' ideas for increasing/maintaining
			their exercise
		Information about antecedents	Patients were encouraged to report their experiences to discuss any challenges they
		A .: 1 :	were having
		Action planning	participants to identify some specific activities they wished to engage in
Wooldridge et al.	C, p46, p47	Instruction on how to perform	following the standard if-then- format of implementation intentions Participants received educational materials including a worksheet for overcoming
2019		the behavior Information about health	barriers to physical activity
		consequence Adding objects to the	accelerometer
		environment	acceleronicae
	p46, p47	Action planning	To develop plans, participants followed a template in which they completed IF-
			THEN statements
	p47	Social support (practical)	The plan was made jointly with partners

Note: In the second column, "C" refers to control group. Lowercase "P" followed by a number refers to the group with interventions aiming to improve physical activity. Lowercase "D" followed by a number refers to the group with interventions targeting diet behavior.