Supplementary Table 2: Scope of practice, Mode of delivery, Barriers and Facilitators of CHWs delivering physical rehabilitation service delivery

Ref	Author and year of publication	Aim	Country	Evidence	Scope of service of delivered of physical rehabilitation services provided by the community health workers	Mode of delivery of physical rehabilitation services provided by the community health workers	Barriers experienced by community health workers in the delivery of physical rehabilitation services	Facilitators of physical rehabilitation services
22	Nesbit et al (2015)	To evaluate a training programme in rehabilitation for home-based palliative community health workers	Malawi	Home-based palliative care community health workers providing rehabilitation in home-based palliative care in Malawi	Positioning, bed mobility, transfers, ambulation training, stair training, maintaining range of motion, assistive device fitting and adaptations environment (e.g. building ramps, chairs, railings, parallel bars). Encouraging participation in society	Home-based		
23	Nesbit & Clark (2019)	To evaluate the effectiveness of a rehabilitation training program for community health workers in a resource-limited setting over a 5-year period	Malawi	Home-based palliative care community health workers providing rehabilitation in home-based palliative care in a training evaluation	Positioning, bed mobility, transfers, ambulation training, stair training, maintaining range of motion, assistive device fitting and adaptations environment (e.g. building ramps, chairs, railings, parallel bars). Encouraging participation in society	Home-based		
24	Couper (2002)	To determine the prevalence of disability in children under 10 years of age in the Manguzi sub district, in order to inform the development of an appropriate rehabilitation service	South Africa	Community health workers assessing children's disability in a prevalence study	Disability assessment	Community		

25	Galvez et al (2021)	To evaluate a CHW training program in rural Malawi integrating blood pressure (BP) monitoring into rehabilitation care	Malawi	Home-based palliative care community health workers providing hypertension monitoring and rehabilitation in a palliative program	Positioning, bed mobility, transfers, ambulation training, stair training, maintaining range of motion, assistive device fitting and adaptations environment (e.g. building ramps, chairs, railings, parallel bars). Encouraging participation in society, blood pressure monitoring	Home-based		
26	Vancampfort, et al (2021)	To explore the efficacy of an 8-week, once weekly, VHT-led physical activity counselling program on symptoms of anxiety, depression, HIV related stress and global disability in inactive PLWHIV and with mental health problems from a remote Ugandan farming community	Uganda	Community health workers providing the intervention in the study	Physical activity counselling	Home-based		
27	Wilson et al (2020)	To evaluate a CHW training programme in Malawi that integrated technology into rehabilitation care delivery	Malawi	Home-based palliative care community health workers in palliative home-based rehabilitation care using technology	Positioning, bed mobility, transfers, ambulation training, stair training, maintaining range of motion, assistive device fitting and adaptations environment (e.g. building ramps, chairs, railings, parallel bars). Encouraging participation in society	Home-based	Transportation needs, Lack of patient care supplies, Lack of caregiver compliance,	Training programmes, Phones, Communication with the hospital, Collaboration among community health workers
28	Tekle- Haimanot et al (1990)	To assess the Neurological Disorders in Rural Central Ethiopia	Ethiopia	Community health workers identifying neurological disorders	Case identification	Community		
29	Naidoo et al (2019)	To identify gaps and help improve future training of CHWs and the service delivery offered by CHWs for childhood disorders and disabilities.	South Africa	Community health workers identifying assistive devices needs of disabled children	Identifying assistive device needs	Health facility	Unclear roles of other stakeholders, Lack of cooperation from other stakeholders, Community health workers lack of recognition, Lack of transport, Lack of access to clients' homes	Passion for the job

							Lack of supervision	
30	Cobbing, et al (2017)	To describe the experiences of CCWs when working as rehabilitation assistants in a randomised controlled trial investigating the effects of a four month HBR intervention on adult PLHIV	South Africa	Community care workers working as rehabilitation assistants in a randomised controlled trial investigating the effects of a four-month home-based rehabilitation intervention on adult people living with HIV	Teaching and supervising strength, aerobic and functional exercises	Home-based	Distances between homes, Extreme weather Patient stigma	
31	Cobbing et al (2017)	To describe how a home- based rehabilitation (HBR) programme adhered to the fundamental principles of a theoretical model of integrated care developed for the study setting in KwaZulu-Natal, South Africa	South Africa	Community care workers providing rehabilitation services in a study in KwaZulu-Natal	Teaching and supervising strength, aerobic and functional exercises	Home-based		
32	Ennion & Rhoda (2016)	To explore the roles and challenges of the members of the MDT involved in trans-tibial amputation rehabilitation in a rural community in South Africa	South Africa	Community caregivers as members of multi- disciplinary teams in prosthetic rehabilitative	Stump bandaging required for prosthetic fitting	Community	Unclear defined roles	Proximity to the community
33	Walelign (2018)	To assess the practice and challenges of community based rehabilitation (CBR) services for deaf children	Ethiopia	Community-based rehabilitation workers providing rehabilitation for deaf children in a community-based rehabilitation programme	Educating interaction for deaf children, teaching deaf children life skills	Community	Poverty Negative societal and parental attitudes towards people with disabilities, Low awareness about disability	

34	Scheffler & Mash (2020)	To describe the experience and perceived needs of stroke survivors, their caregivers and CHWs in a context with limited access to and support from formal rehabilitation services	South Africa	Community health workers and caregivers providing stroke rehabilitation in home- community-based care stroke survivors	Patient care, teaching and supervising home exercises	Home and community	Inadequate skills equipped to manage complications such as pain, stiffness, blood glucose levels and seizures	
35	Scheffler et al (2019)	To determine what CBR workers in three areas of Uganda perceived as (1) the challenges with wheelchair provision and use, (2) the factors contributing to these challenges, (3) the role they themselves can potentially play and (4) what facilitators they need to achieve this	Uganda	Community-based rehabilitation workers providing assistive devices in a community-based rehabilitation programme in Uganda	Client referrals, client support and empowerment, Supporting wheelchair delivery	Community and health facilities	High numbers of clients, Transportation, Negative attitudes	
36	Tsolekile et al (2014)	To explore the current roles of CHWs working with non-communicable diseases (NCDs)	South Africa	Community Health Workers taking part in the management of non- communicable diseases in Khayelitsha	Advising, client monitoring; linking clients with health system; capacity building; administration, exercise provision to stroke patients	Community and facility	Home visits were not utilized maximally	
37	Wang et al (2020)	To explore the nature of the CHWs' roles and factors affecting the program's sustainability.	Malawi	Provide palliative care and basic rehabilitative services to patients in their homes, typically following discharge from St. Gabriel hospital	Patient care, caregiver training, monitoring 'personal hygiene (bath and toilet), home assessment and holistic person assessment.' relationships assessment, praying with patients	Home-based	Lack of transportation, Bad weather	Joyful work, Proximity to their patients
38	Grut et al (2004)	i) assess the effectiveness, impact and relevance of the program, ii) examine and draw conclusions regarding the program's strengths and weaknesses, and iii) to propose recommendations that can strengthen the program	Eritrea	Lay health workers were the Local supervisors in the community-based rehabilitation programme in Eritrea	Assessment, registration of problems and needs	Community	Lack of technical devices, Lack of medicines	

39	Soopramanien (2012)	To obtain qualitative and quantitative information relating to the potential gaps in the Neurological Rehabilitation Care in Mauritius.	Mauritius	Community-based rehabilitation providers providing neurological rehabilitation to stroke, spinal cord injuries and traumatic brain injury patients	Assessment, training family, counselling, prevention, referrals, social integration, integration of clients in the community	Home	Lack of technical devices Lack of medicines, Lack of financial support	
40	Claussen et al (2005)	To assess the Community Based Rehabilitation Programme (CBR) in Tororo District in Uganda	Uganda	Community health workers involved in mobilizing disabled persons to form groups and link these groups to resource systems in community-based rehabilitation in Uganda	Training in activities of daily living, training using assistive devices (aids), and mobilisation to form groups.	Community	Limited time of training which is 2 weeks	
41	Mukumbuta (2018)	To assess the impact of the CBR strategy on PWDs and their families within the Oniipa Constituency in Namibia.	Namibia	Community-based rehabilitation volunteer workers implement the community-based rehabilitation strategy within their respective communities	Provide precise information to people with disabilities about what they can do to improve their capacities, to take care of themselves, to communicate, provide basic rehabilitation	Community	Lack of financial incentives	