

Phase 1- Scoping review

Codes

Name	Description	Files	References
ASHA workers		2	6
ASHA program governance is rarely discussed		1	2
ASHAs not residing in the village, but employed		1	2
Biased selection of ASHAs		1	2
Capacity building for urban ASHAs		2	2
Displacements of ASHAs in conflict-hit areas		1	1
Unfamiliar areas- Unknown people		1	2
Equality		3	9
Increased workload, reduced pay		9	13
belittled by family		1	1

Name	Description	Files	References
need to spend more- on ASHAs		1	1
Lack of motivation		1	4
Low institutional recognition		1	1
National policies not well implemented at state levels		3	5
Non-acceptance by opposing ethnic communities		2	2
preference given to married women		1	2
Roles and responsibilities		1	2
Shortage of ASHAs in urban areas		1	2
training programmes for ASHA		6	13
Need for training in One health activities		2	2
Unaddressed challenges of ASHAs		1	1
Workplace violence		1	6

Name	Description	Files	References
cast based hierarchy		1	1
Challenges in data sharing		2	3
Confidentiality issues in data sharing		2	4
Lack of benefits in data sharing		1	1
Need for participatory action research		2	2
Need for simple tools to capture field data		5	6
No official strategies to facilitate data sharing		1	1
use of non-standardized reporting formats		1	2
Challenges in One Health		1	1
Cultural challenges		1	2
Health not a priority for some states		1	3

Name	Description	Files	References
Lack of awareness among disciplines		1	1
Lack of capacity building programs		3	3
Variations in health administration and capacities		1	1
Lack of data on social and economic impact of zoonoses		1	1
Lack of inter-ministerial collaboration		7	11
Lack of policy framework		9	10
Lack of quality, discussion and drivers vs demand of one health		1	2
Limited infrastructure		4	5
Limited resources, funding		1	1
Limited involvement of non-scientific community		1	1
Limited laboratory capacities		2	2

Name	Description	Files	References
Limited literature in the One health discipline		1	3
Limited OA journals		2	15
Publications in predatory journals		1	2
Limited research on One health		1	1
Motivation of collaborating partners		4	4
Need for data sharing in one health		3	5
Prioritize ethics into one health		1	1
Social inequalities		1	2
Health equity- Compromised		1	1
Training of researchers		7	9
Unavailability of proper records		1	1
Citizen Science		3	3
Authorship issues		1	1

Name	Description	Files	References
Communication-unidirectional		1	1
Data ownership issues		1	1
Existing policy failed to mention the potential of Citizen Science		2	2
Highest no.of projects in south India		1	1
lack of trained volunteers		1	1
Limited awareness among scientists		2	2
Limited funding for community-driven projects		2	2
need for a collaborative model for Citizen science		1	1
Need for capacity development efforts		3	3
Participatory modelling approaches are more seen in environmental research		1	3
Quality of data generated- A question		2	2

Name	Description	Files	References
types of approaches		1	2
Digitalised participatory data generation		1	4
Social media- A facilitator		1	1
Volunteers just a small subset of the Indian population		1	2
Copyright issues		1	1
Data analysis		1	1
Data repositories based on FAIR principles		1	1
Enablers		0	0
Data visualization- to make results easily understandable		2	7
Big data and its implications in healthcare research		1	4
Data privacy		1	2
Streamline mechanisms for data sharing		1	1

Name	Description	Files	References
Incentives, Co-authorship to retain volunteers		2	3
Include Citizen science in academia		3	6
Inclusion of tribal stakeholders		1	1
Need for a journal on Citizen science		1	1
Need for collaborative tools		2	3
Need for equitable participation of stakeholders		1	2
Need for guideline for Citizen science		1	4
Need for joint education for professionals		1	1
Need for online portal for citizen science		1	1
Need for training programmes		5	5
Recommendations on how to incorporate, OS and		2	2

Name	Description	Files	References
Techniques to improve Citizen Science		1	1
Transparency		1	1
Increasing APC charges		1	2
Methods used		19	26
Need for framework and policies for one health		6	11
Policy making driven by political interests		6	7
One health Centric guidance developed for each countries		2	2
One health collaboration in India		10	18
One health in India		5	6
Assessment tools for One health		1	6
Barriers		2	2
data sharing		1	1
Digital inequity		1	2

Name	Description	Files	References
Limited laboratory capacity		1	1
Limited literature on One health challenges		1	1
Political and institutional barriers		2	2
Funding for One health		1	2
Human behaviour as barrier		4	7
Lack of coordinated One health research programmes		1	1
Lack of funds		3	6
missed opportunities		2	3
Need for One health committees		1	2
One health publications		2	2
One health stakeholders		5	7
Unutilized opportunities		2	2
One health paradigm		2	3

Name	Description	Files	References
Vets- a bridge between sectors		7	16
Open Science initiatives in India		1	1
Challenges		1	2
Need for open science programs		1	7
Open access trend- a boon to predatory journals		1	2
Publication inequality		1	1
Sectors within multisectoral		5	7
One health sectors in India		10	18
Barriers to cross-sectoral collaboration		1	1
Communication barriers		1	1
Different states- different working cultures		2	4
Disparity in shared responsibilities		1	1
Lack of awareness		1	1

Name	Description	Files	References
Lack of time		1	2
Scope for short-term collaborations		2	3
Limited guidelines for collaboration		2	5
Need for context-specific cross sectoral collaboration		2	3
Facilitators to cross-sectoral collaborations		1	1
Hierarchical issues within domains		2	6
Need for One health committees		1	1
The term Multisectoral defined differently by disciplines		6	8