

Reflexivity Statement

1. How does this study address local research and policy priorities?

Prevent Mother-to-Child Transmission (PMTCT) is one of the national priorities in the fight against HIV. National stakeholders have identified the problem of transporting samples and access to points of care as crucial issues to which this research seeks to respond.

2. How were local researchers involved in study design?

The principal investigator is Prof. Mohammed Cissé (Service de Dermatologie, Centre de Traitement Ambulatoire, Laboratoire de Biologie Moléculaire, CHU Donka, Conakry, Guinea), who has been involved at every stage of the research. Dr. Oumou Hawa Diallo (Solthis NGO, Guinea) was responsible for the operational coordination of the research and carried out data collection on her own or in collaboration with the international investigators. She was involved at all stages of the research. This collective work enabled her to strengthen her skills.

3. How has funding been used to support the local research team?

17% of the total cost of the project, i.e. €4830, was spent on the project coordinator's salary.

4. How are research staff who conducted data collection acknowledged?

Data collection was carried out by the coordinator, either alone or with support of the international investigators and was included in the author list. After his consent, we have included Mohamed Soumah, who have collected travel time by motorcycle for the modelling, in the acknowledgement section.

5. Do all members of the research partnership have access to study data?

All members of the research partnership have access to data.

6. How was data used to develop analytical skills within the partnership?

MI conducted the analysis which was validated by PM. Due to the limited funding allocated to the project (less than €30,000), capacity development for analytical skills was limited. Nonetheless, several meetings have been organised to explain and familiarise all the partners with the statistical methodologies involved in this study. Collective expertise and resources were leveraged within the available data for analytical skill development within the project.

7. How have research partners collaborated in interpreting study data?

Research partners have collaborated in interpreting study data by coming together to collectively analyse and make sense of the findings. This collaboration involved regular meetings, discussions, and exchanges of ideas among all the partners. Through this collaborative effort, the partners would have been able to validate their findings, challenge assumptions, and reach a consensus on the implications and conclusions drawn from the study data.

8. How were research partners supported to develop writing skills?

MI was supported to develop his writing skills from more senior research partners (PM,FT,ZA,GB).

9. How will research products be shared to address local needs?

The project was presented prior to implementation, and the results were shared with national partners, including representatives from the Ministry of Health, le *Plan National de Lutte contre le Sida et les Hépatite virales* (PNLS), *Conseil National de Lutte contre le Sida* (CNLS), Ministry of Defense,

Ministry of Transport, Guinean Civil Aviation Authority (AGAC), Air Navigation Agency (ANA), National Laboratories Directorate, *Institut National de Santé Publique* (INSP), *Centre de Traitement Ambulatoire* Donka Laboratory, Ignace Deen Pediatrics and Maternity Department, Médecin Sans Frontière and JH Piégo, as well as a representative from a patient association (FEG).

10. How is the leadership, contribution and ownership of this work by LMIC researchers recognised within the authorship?

MC worked as part of the senior authorship team in developing this manuscript and OHD was instrumental in the data collection and project coordination. YK supported the project implementation. We acknowledge, however, that the authorship team is predominantly based in high-income countries.

11. How have early career researchers across the partnership been included within the authorship team?

We have included early career researchers (MI & DN) within the authorship team. MI was given the opportunity to lead the manuscript writing and to carry out the analysis. DN contribute to the review and the interpretations of the results.

12. How has gender balance been addressed within the authorship?

Eight authors are male (MI,PM,MC,FT,ZA,YK,GB) and two authors are female (OHD,GLB)

13. How has the project contributed to training of LMIC researchers?

Dr. Oumou Hawa Diallo was responsible for the operational coordination of the research in collaboration with the international investigators. She was involved at all stages of the research. This collective work enabled her to strengthen her research skills.

14. How has the project contributed to improvements in local infrastructure?

This project has not yet directly contributed to improvements in local infrastructure however it is hoped that the results will be used to improve the efficiency of local health systems in the future

15. What safeguarding procedures were used to protect local study participants and researchers?

The research project has been validated by the national ethics committee and has complied with current procedures.