Appendix B

Details of Item responses for all outcomes at all time-points

Appendix B. 1 –Secondary outcome items at baseline 3, 6 and 12 months

*i) Mental health status and ii) Substance use measures*

| **Assessment** | **item** | **Summary statistics/categories** | **Empower** | | | | **TAU** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| base | 3m | 6m | 12m | base | 3m | 6m | 12m |
| **PANSS** | 1 Delusions | Pseudo continuous (1-6)  n; mean(sd), median(IQR), min/max |  |  |  |  |  |  |  |  |
| 2 Hallucinatory Behaviour |  |  |  |  |  |  |  |  |
| 3 Unusual Thought Content |  |  |  |  |  |  |  |  |
| 4 Suspiciousness Persecution |  |  |  |  |  |  |  |  |
| 5 Grandiosity |  |  |  |  |  |  |  |  |
| 6 Somatic Concern |  |  |  |  |  |  |  |  |
| 7 Lack Of Spontaneity |  |  |  |  |  |  |  |  |
| 8 Blunted Affect |  |  |  |  |  |  |  |  |
| 9 Emotional Withdrawal |  |  |  |  |  |  |  |  |
| 10 Social Withdrawal |  |  |  |  |  |  |  |  |
| 11 Motor Retardation |  |  |  |  |  |  |  |  |
| 12 Poor Rapport |  |  |  |  |  |  |  |  |
| 13 Social Avoidance |  |  |  |  |  |  |  |  |
| 14 Stereotyped Thinking |  |  |  |  |  |  |  |  |
| 15 Poor Attention |  |  |  |  |  |  |  |  |
| 16 Disorientation |  |  |  |  |  |  |  |  |
| 17 Disorganisation |  |  |  |  |  |  |  |  |
| 18 Difficulty In Abstraction |  |  |  |  |  |  |  |  |
| 19 Mannerisms |  |  |  |  |  |  |  |  |
| 20 Lack Of Judgement |  |  |  |  |  |  |  |  |
| 21 Disturbance Of Volition |  |  |  |  |  |  |  |  |
| 22 Preoccupation |  |  |  |  |  |  |  |  |
| 23 Poor Impulse Control |  |  |  |  |  |  |  |  |
| 24 Excitement |  |  |  |  |  |  |  |  |
| 25 Hostility |  |  |  |  |  |  |  |  |
| 26 Uncooperativeness |  |  |  |  |  |  |  |  |
| 27 Anxiety |  |  |  |  |  |  |  |  |
| 28 Depression |  |  |  |  |  |  |  |  |
| 29 Guilt |  |  |  |  |  |  |  |  |
| 30 Tension |  |  |  |  |  |  |  |  |
| **PSP** | Socially Useful | Pseudo continuous (1-6)  n; mean(sd), median(IQR), min/max |  |  |  |  |  |  |  |  |
| Social Relationships |  |  |  |  |  |  |  |  |
| Self Care |  |  |  |  |  |  |  |  |
| Aggressive Behaviours |  |  |  |  |  |  |  |  |
| **Calgary median(IQR)** | Depression | 0- Absent  1- Mild  2- Moderate  3- Severe |  |  |  |  |  |  |  |  |
| Hopelessness |  |  |  |  |  |  |  |  |
| Self Depreciation |  |  |  |  |  |  |  |  |
| Guilty Ideas |  |  |  |  |  |  |  |  |
| Pathological Guilt |  |  |  |  |  |  |  |  |
| Morning Depression |  |  |  |  |  |  |  |  |
| Early Wakening |  |  |  |  |  |  |  |  |
| Suicide |  |  |  |  |  |  |  |  |
| Observed Depression |  |  |  |  |  |  |  |  |

*iii) Emotional distress*

| **Assessment** | **Item** | **n(%)** | **Empower** | | | | | **TAU** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| base | 3m | 6m | 12m | | base | 3m | 6m | 12m |
| **Fear of Recurrence Scale (FoRSe)** | 1. I have been worrying about relapse. | 1 - Do Not Agree;  2 - Agree Slightly;  3 - Agree Moderately;  4 - Agree Very Much; |  |  |  |  |  | |  |  |  |
| 2. I have been remembering previous episodes of being unwell. |  |  |  |  |  | |  |  |  |
| 3. I have been more aware of my thoughts. |  |  |  |  |  | |  |  |  |
| 4. I have experienced thoughts intruding into my mind. |  |  |  |  |  | |  |  |  |
| 5. I have been worrying about my thoughts. |  |  |  |  |  | |  |  |  |
| 6. I have felt unable to control my illness. |  |  |  |  |  | |  |  |  |
| 7. I have been worrying about being in hospital. |  |  |  |  |  | |  |  |  |
| 8. I have lacked confidence in my ability to cope. |  |  |  |  |  | |  |  |  |
| 9. My thoughts have been uncontrollable. |  |  |  |  |  | |  |  |  |
| 10. My thoughts have been going too fast. |  |  |  |  |  | |  |  |  |
| 11. I have been worrying about losing control. |  |  |  |  |  | |  |  |  |
| 12. My thoughts have been distressing. |  |  |  |  |  | |  |  |  |
| 13. I have felt more in touch with my thoughts. |  |  |  |  |  | |  |  |  |
| 14. I have been constantly aware of my thoughts. |  |  |  |  |  | |  |  |  |
| 15. I have been unable to switch off my thinking. |  |  |  |  |  | |  |  |  |
| 16. I have paid close attention to how my mind is working. |  |  |  |  |  | |  |  |  |
| 17. The world has seemed more vivid and colourful. |  |  |  |  |  | |  |  |  |
| 18. My thoughts have been more interesting. |  |  |  |  |  | |  |  |  |
| 19. I have had new insights and ideas. |  |  |  |  |  | |  |  |  |
| 20. Unpleasant thoughts have entered my head against my will |  |  |  |  |  | |  |  |  |
| 21. My thinking has been clearer than usual. |  |  |  |  |  | |  |  |  |
| 22. I have been checking my thoughts. |  |  |  |  |  | |  |  |  |
| 23. The thought of becoming unwell has frightened me. |  |  |  |  |  | |  |  |  |

| **Assessment** | **Item** | **n(%)** | **Empower** | | | | **TAU** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | base | 3m | 6m | 12m | base | 3m | 6m | 12m |
| **HADS** | 1. I feel tense or wound up | 1. Not at all 2. From time to time, occasionally 3. A lot of the time 4. Most of the time 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I still enjoy the things I used to enjoy | 1. Definitely as much 2. Not quite as much 3. Only a little 4. Hardly at all 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I get a sort of frightened feeling as if something awful is about to happen | 1. Not at all 2. A little, but it doesn’t worry me 3. Yes, but not too badly 4. Very definitely and quite badly 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I can laugh and see the funny side of things | 1. As much as I always could 2. Not quite so much now 3. Definitely not so much now 4. Not at all 5. missing |  |  |  |  |  |  |  |  |
|  | 1. Worrying thoughts go through my mind | 1. Only occasionally 2. From time to time but not too often 3. A lot of the time 4. A great deal of the time 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I feel cheerful | 1. Most of the time 2. Sometimes 3. Not often 4. Not at all 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I can sit at ease and feel relaxed | 1. Definitely 2. Usually 3. Not often 4. Not at all 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I feel as if I am slowed down | 1. Not at all 2. Sometimes 3. Very often 4. Nearly all of time 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I get a sort of frightened feeling like butterflies in the stomach | 1. Not at all 2. Occasionally 3. Quite often 4. Very often 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I have lost interest in my appearance | 1. I take just as much care as ever 2. I may not take quite as much care 3. I don’t take so much care as I should 4. Definitely 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I feel restless as if I have to be on the move | 1. Not at all 2. Not very often 3. Quite a lot 4. Very much indeed 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I look forward with enjoyment to things | 1. As much as I ever did 2. Rather less than I used to 3. Definitely less than I used to 4. Hardly at all 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I get sudden feelings of panic | 1. Not at all 2. Not very often 3. Quite often 4. Very often indeed 5. missing |  |  |  |  |  |  |  |  |
|  | 1. I can enjoy a good book or radio or TV programme | 1. Often 2. Sometimes 3. Not often 4. Very seldom 5. missing |  |  |  |  |  |  |  |  |
| **Personal Beliefs about Illness Questionnaire-Revised**  **(PBIQ-R)** | 1. I will always need to be cared for by professional medical staff. | **1 - Strongly Disagree;  2 - Disagree;  3 - Agree;  4 - Strongly Agree;**  **1 - Strongly Disagree;  2 - Disagree;  3 - Agree;  4 - Strongly Agree;** |  |  |  |  |  |  |  |  |
| 2. My illness frightens me. |  |  |  |  |  |  |  |  |
| 3. I can talk to most people about my illness. |  |  |  |  |  |  |  |  |
| 4. I am capable of very little as a result of my illness. |  |  |  |  |  |  |  |  |
| 5. Because of my illness I have to rely on psychiatric services. |  |  |  |  |  |  |  |  |
| 6. My illness stops me doing the things I want to do. |  |  |  |  |  |  |  |  |
| 7. I find it difficult to cope with my current symptoms. |  |  |  |  |  |  |  |  |
| 8. I am the same person I was before my illness. |  |  |  |  |  |  |  |  |
| 9. I know when Im relapsing but I cant do anything about it. |  |  |  |  |  |  |  |  |
| 10. My illness is a judgement on me. |  |  |  |  |  |  |  |  |
| 11. I am powerless to influence or control my illness. |  |  |  |  |  |  |  |  |
| 12. My illness stops me getting on with things I want to do. |  |  |  |  |  |  |  |  |
| 13. Society needs to keep people with my illness apart from everyone else. |  |  |  |  |  |  |  |  |
| 14. I feel excluded because of my illness. |  |  |  |  |  |  |  |  |
| 15. I am embarrassed by my illness. |  |  |  |  |  |  |  |  |
| 16. My illness is too delicate / brittle for me to work or keep a job. |  |  |  |  |  |  |  |  |
| 17. I am ashamed about my illness. |  |  |  |  |  |  |  |  |
| 18. Because of my illness I dont fit in. |  |  |  |  |  |  |  |  |
| 19. I have changed for the worse because of my illness. |  |  |  |  |  |  |  |  |
| 20. I can get on with others as well as I used to. |  |  |  |  |  |  |  |  |
| 21. My illness prevents me from having friends and relationships. |  |  |  |  |  |  |  |  |
| 22. My illness prevents me from planning for my future. |  |  |  |  |  |  |  |  |
| 23. My relationship with my friends has changed for the worse. |  |  |  |  |  |  |  |  |
| 24. I feel an outsider because of my illness. |  |  |  |  |  |  |  |  |
| 25. I am intimidated by my illness. |  |  |  |  |  |  |  |  |
| 26. I feel trapped by my illness. |  |  |  |  |  |  |  |  |
| 27. Because of my illness others see me as fragile or weak. |  |  |  |  |  |  |  |  |
| 28. I have the same goals now as I had before my illness. |  |  |  |  |  |  |  |  |
| 29. Others look down on me because of my illness. |  |  |  |  |  |  |  |  |

*iv) Service engagement -*

| **Assessment** | **Item** | **n(%)** | **Empower** | | | | | | | | **TAU** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Service Attachment Scale (SAS)** | |  | base | | 3m | | 6m | | 12m | | base | | 3m | | 6m | | | 12m | |
| 1. I have somebody who listens attentively to me | |  |  | |  | |  | |  | |  | |  | |  | | |  | |
| 2. I have regular time with the same person that knows me and my problems | | 1 - Not at all;  2 - Sometimes;  3 - Quite often;  4 - Always;  1 - Not at all;  2 - Sometimes;  3 - Quite often;  4 - Always; |  | |  | |  | |  | |  | |  | |  | | |  | |
| 3. I feel under pressure to get better and be discharged | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 4. I have a feeling of being looked after | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 5. I have the feeling that Ill be accepted for who I am, whatever I say | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 6. Im helped to realise that its not just me – other people have similar problems. | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 7. I dont feel listened to, or taken notice of | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 8. I get frustrated because I have to wait too long to see my key worker/therapist | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 9. I feel confident that support will be provided when I am discharged | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 10. I feel suffocated by the service rather than feeling safe | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 11. I cant relate to/get on with certain people in the service | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 12. It feels like theres a them and us attitude from the staff | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 13. I feel that people in the service understand my needs and problems | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 14. I know that the same person is there for me consistently | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 15. I worry that I wont be better within the allocated time and will need longer | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 16. I feel safe within the service | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 17. I dont feel judged, just accepted | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 18. I feel patronised and stigmatised by the service | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 19. I dont feel that people really want to listen to what my problems are | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 20. I worry that Ill be discharged without any follow-up from my key worker/therapist | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 21. I feel confident that if I need more time and help, over longer, that it will be given | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 22. I feel frustrated at my lack of freedom within the service | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 23. I feel I have a partnership with my key worker/therapist and that we work together | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 24. I have the feeling my key worker/therapist is really interested in me and wants to help | |  | |  | |  | |  | |  | |  | |  | | |  | |
| 25. I am made to feel that I am a burden to the service and outstaying my welcome | |  | |  | |  | |  | |  | |  | |  | | |  | |
| **Medication Adherence Rating Scale (MARS)-** | | **n(%)** | | **base** | | **3m** | | **6m** | | **12m** | | **base** | | **3m** | | **6m** | **12m** | |
| 1. Do you ever forget to take your medication? | | 1:Yes;  2:No; | |  | |  | |  | |  | |  | |  | |  |  | |
| 2. Are you careless at times about taking your medication? | |  | |  | |  | |  | |  | |  | |  |  | |
| 3. When you feel better, do you sometimes stop taking your medication? | |  | |  | |  | |  | |  | |  | |  |  | |
| 4. Sometimes if you feel worse when you take the medication, do you stop taking it? | |  | |  | |  | |  | |  | |  | |  |  | |
| 5. I take my medication only when I am sick | |  | |  | |  | |  | |  | |  | |  |  | |
| 6. It is unnatural for my mind and body to be controlled by medication | |  | |  | |  | |  | |  | |  | |  |  | |
| 7. My thoughts are clearer on medication | |  | |  | |  | |  | |  | |  | |  |  | |
| 8. By staying on medication, I can prevent getting sick. | |  | |  | |  | |  | |  | |  | |  |  | |
| 9. I feel weird, like a 'zombie' on medication | |  | |  | |  | |  | |  | |  | |  |  | |
| 10. Medication makes me feel tired and sluggish | |  | |  | |  | |  | |  | |  | |  |  | |

Appendix B. 2 – Mechanisms at base, 3, 6 and 12 months

*i) Recovery and Self Efficacy:*

| **Assessment** | **Items** | **n%** | **Empower** | | | | **TAU** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **base** | **3m** | **6m** | **12m** | **base** | **3m** | **6m** | **12m** |
| **Questionnaire for Personal Recovery (QPR)** | I feel better about myself | 0 - Disagree strongly;  1 - Disagree;  2 - Neither agree nor disagree;  3 - Agree;  4 - Agree Strongly; |  |  |  |  |  |  |  |  |
| I feel able to take chances in life |  |  |  |  |  |  |  |  |
| I am able to develop positive relationships with other people |  |  |  |  |  |  |  |  |
| I feel part of society rather than isolated |  |  |  |  |  |  |  |  |
| I am able to assert myself |  |  |  |  |  |  |  |  |
| I feel that my life has a purpose |  |  |  |  |  |  |  |  |
| My experiences have changed me for the better |  |  |  |  |  |  |  |  |
| I have been able to come to terms with things that have happened to me in the past and move on with my life |  |  |  |  |  |  |  |  |
| I am basically strongly motivated to get better |  |  |  |  |  |  |  |  |
| I can recognise the positive things I have done |  |  |  |  |  |  |  |  |
| I am able to understand myself better |  |  |  |  |  |  |  |  |
| I can take charge of my life |  |  |  |  |  |  |  |  |
| I can actively engage with life |  |  |  |  |  |  |  |  |
| I can take control of aspects of my life |  |  |  |  |  |  |  |  |
| I can find the time to do the things I enjoy |  |  |  |  |  |  |  |  |
| **General Self Efficacy Scale (GSE)** | manage to solve difficult problems if try hard enough | 1:Not at all true;  2:Hardly true;  3:Moderately true;  4:Exactly true; |  |  |  |  |  |  |  |  |
| If someone opposes me, I can find the means and ways to get what I want. |  |  |  |  |  |  |  |  |
| It is easy for me to stick to my aims and accomplish my goals. |  |  |  |  |  |  |  |  |
| I am confident that I could deal efficiently with unexpected events. |  |  |  |  |  |  |  |  |
| Thanks to my resourcefulness, I know how to handle unforeseen situations. |  |  |  |  |  |  |  |  |
| I can solve most problems if I invest the necessary effort. |  |  |  |  |  |  |  |  |
| I can remain calm when facing difficulties because I can rely on my coping abilities. |  |  |  |  |  |  |  |  |
| When I am confronted with a problem, I can usually find several solutions. |  |  |  |  |  |  |  |  |
| If I am in trouble, I can usually think of a solution |  |  |  |  |  |  |  |  |
| I can usually handle whatever comes my way. |  |  |  |  |  |  |  |  |

*ii) Social and Interpersonal Context:*

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Assessment** | **Items** |  | **Summary statistics/categories** | **Empower** | | | | **TAU** | | | |
| **base** | **3m** | **6m** | **12m** | **base** | **3m** | **6m** | **12m** |
| **Psychosis Attachment Measure (PAM)** | 1. I prefer not to let other people know my true thoughts and feelings. | \* | n(%)  \*  0 - Not at all;  1 - A little;  2 - Quite a bit;  3 - Very much;  \*\*  0 - Very much; 1 - Quite a bit 2 -; A little 3 - Not at all; |  |  |  |  |  |  |  |  |
|  | 1. I find it easy to depend on other people for support with problems or difficult situations | \*\* |  |  |  |  |  |  |  |  |
|  | 1. I tend to get upset, anxious or angry if other people are not there when I need them. | \* |  |  |  |  |  |  |  |  |
|  | 1. I usually discuss my problems and concerns with other people. | \*\* |  |  |  |  |  |  |  |  |
|  | 1. I worry that key people in my life wont be around in the future. | \* |  |  |  |  |  |  |  |  |
|  | 1. I ask other people to reassure me that they care about me | \* |  |  |  |  |  |  |  |  |
|  | 1. If other people disapprove of something I do, I get very upset. | \* |  |  |  |  |  |  |  |  |
|  | 1. I find it difficult to accept help from other people when I have problems or difficulties. | \* |  |  |  |  |  |  |  |  |
|  | 1. It helps to turn to other people when Im stressed. | \*\* |  |  |  |  |  |  |  |  |
|  | 1. I worry that if other people get to know me better, they wont like me | \* |  |  |  |  |  |  |  |  |
|  | 1. When Im feeling stressed, I prefer being on my own to being in the company of other people. | \* |  |  |  |  |  |  |  |  |
|  | 1. I worry a lot about my relationships with other people. | \* |  |  |  |  |  |  |  |  |
|  | 1. I try to cope with stressful situations on my own. | \* |  |  |  |  |  |  |  |  |
|  | 1. I worry that if I displease other people, they wont want to know me anymore. | \* |  |  |  |  |  |  |  |  |
|  | 1. I worry about having to cope with problems and difficult situations on my own. | \* |  |  |  |  |  |  |  |  |
|  | 1. I feel uncomfortable when other people want to get to know me better. | \* |  |  |  |  |  |  |  |  |

Appendix B. 3 – Carer Outcome Items at base, 3, 6 and 12 months

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **IEQ** | **n(%)** | **Empower** | | | | **TAU** | | | | |
| **base** | **3m** | **6m** | **12m** | **base** | **3m** | **6m** | | **12m** |
| 1. Has your relative/friend disturbed your sleep?\* | 1:Never;  2:Sometimes;  3:Regularly;  4:Often;  5:(Almost) always;  1:Never;  2:Sometimes;  3:Regularly;  4:Often;  5:(Almost) always; |  |  |  |  |  |  |  | |  |
| 2. Has the atmosphere been strained between you both, as a result of your relative/friend’s behaviour |  |  |  |  |  |  |  | |  |
| 3. Has your relative/friend caused a quarrel? |  |  |  |  |  |  |  | |  |
| 4. Have you been annoyed by your relative/friends behaviour? |  |  |  |  |  |  |  | |  |
| 5. Have you heard from others that they have been annoyed by your relative/friend’s behaviour |  |  |  |  |  |  |  | |  |
| 6. Have you felt threatened by your relative/friend? |  |  |  |  |  |  |  | |  |
| 7. Have you thought of moving out, as a result of your relative/friends behaviour? |  |  |  |  |  |  |  | |  |
| 8. Have you worried about your own future? |  |  |  |  |  |  |  | |  |
| 9. Have your relative/friends mental health problems been a burden to you?\* |  |  |  |  |  |  |  | |  |
| 10. Have you guarded your relative / friend from committing dangerous acts? |  |  |  |  |  |  |  | |  |
| 11. Have you guarded your relative / friend from self-inflicted harm? |  |  |  |  |  |  |  | |  |
| 12. Have you ensured that your relative / friend received sufficient sleep? |  |  |  |  |  |  |  | |  |
| 13. Have you guarded your relative / friend from drinking too much alcohol? |  |  |  |  |  |  |  | |  |
| 14. Have you guarded your relative / friend from taking illegal drugs? |  |  |  |  |  |  |  | |  |
| 15. Has your relative / friend disturbed your sleep?\* |  |  |  |  |  |  |  | |  |
| 16. Have you worried about your relative / friends safety? |  |  |  |  |  |  |  | |  |
| 17. Have you worried about the kind of help / treatment your relative / friend is receiving? |  |  |  |  |  |  |  | |  |
| 18. Have you worried about your relative / friends general health? |  |  |  |  |  |  |  | |  |
| 19. Have you worried about how your relative / friend would manage financially if you were no longer able to help? |  |  |  |  |  |  |  | |  |
| 20. Have you worried about your relative / friends future? |  |  |  |  |  |  |  | |  |
| 21. Have your relative / friends mental health problems been a burden to you?\* |  |  |  |  |  |  | |  |  |
| 22. Have you encouraged your relative / friend to take proper care of him/herself? |  |  |  |  |  |  | |  |  |
| 23. Have you helped your relative / friend to take proper care of him/herself? |  |  |  |  |  |  | |  |  |
| 24. Have you encouraged your relative / friend to eat enough? |  |  |  |  |  |  | |  |  |
| 25. Have you encouraged your relative / friend to take up an activity? |  |  |  |  |  |  | |  |  |
| 26. Have you accompanied your relative / friend on some kind of activity, because he/she did not dare go alone? |  |  |  |  |  |  | |  |  |
| 27. Have you ensured your relative / friend has taken the required medicine? |  |  |  |  |  |  | |  |  |
| 28. Have you carried out tasks normally done by your relative / friend? |  |  |  |  |  |  | |  |  |
| 29. Have you encouraged your relative / friend to get up in the morning? |  |  |  |  |  |  | |  |  |
| 30. How often during the past 4 weeks have you been able to pursue your own activities and interests? |  |  |  |  |  |  | |  |  |
| 31. Have you got used to your relative / friends mental problems? |  |  |  |  |  |  | |  |  |
| 32. How often have you felt able to cope with your relative / friends mental health problems? |  |  |  |  |  |  | |  |  |
| 33. Has your relationship with your relative / friend changed since the onset of the mental health problems? |  |  |  |  |  |  | |  |  |

Appendix B. 4 – Co-ordinators Outcome Items at base, 3, 6 and 12 months

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SES** | **n(%)** | **Empower** | | | | **TAU** | | | | |
| **base** | **3m** | **6m** | **12m** | | **base** | **3m** | **6m** | **12m** |
| 1. The client seems to make it difficult to arrange appointments | 1:Not at all or rarely;  2:Sometimes;  3:Often;  4:Most of the time; |  |  |  |  | |  |  |  |  |
| 1. When a visit is arranged, the client is available |  |  |  |  | |  |  |  |  |
| 1. The client seems to avoid making appointments |  |  |  |  | |  |  |  |  |
| 1. If you offer advice, does the client usually resist it? |  |  |  |  | |  |  |  |  |
| 1. The client takes an active part in the setting of goals or treatment plans |  |  |  |  | |  |  |  |  |
| 1. The client actively participates in managing his/her illness |  |  |  |  | |  |  |  |  |
| 1. The client seeks help when assistance is needed |  |  |  |  | |  |  |  |  |
| 1. The client finds it difficult to ask for help |  |  |  |  | |  |  |  |  |
| 1. The client seeks help to prevent a crisis |  |  |  |  | |  |  |  |  |
| 1. The client does not actively seek help |  |  |  |  | |  |  |  |  |
| 1. The client agrees to take prescribed medication |  |  |  |  | |  |  |  |  |
| 1. The client is clear about what medications he/she is taking and why |  |  |  |  | |  |  |  |  |
| 1. The client refuses to co-operate with treatment |  |  |  |  | |  |  |  |  |
| 1. The client has difficulty in adhering to the prescribed medication |  |  |  |  | |  |  |  |  |