**Supplementary Table 3. Emergent themes and sub-themes extracted from the interviews with professionals**

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| **Themes** | **Sub-themes** | **Frequency**  |
| 1. The Syrian culture constitutes an obstacle to mental health care provision. | - Illiteracy and lack of education are features of the Syrian culture.- The Syrian culture is “traditional” in contrast to the “modern” psychiatric language.  | 56 out of 60 professionals (93%) |
| 2. MHPSS interventions are a means to educate Syrian refugees about mental health disorders. | - “Convincing” refugees of the need for the service is a core feature of mental health education (إقناع).- Mental health disorders are presented as similar to any other medical disorders (using the mhGAP)- A minority perceives referral to the psychiatrist as being done before addressing basic needs.  | - 45 out of 60 professionals (75%)- 3 out of 60 (5%) |
| 3. Refugees’ “lying” is a threat to the therapeutic relationship. | - Refugees lie in order to obtain material benefits.- Refugees’ lies are related to a manipulative character. | 33 out 60 professionals (55%) |
| 4. MHPSS interventions should be short term because it is an emergency crisis. | - Ideal MHPSS interventions are clinical, time-limited and evidence based (IPT, EMDR and Trauma-Focused Therapy).- Other professionals perceive the emergency crisis rationale as an obstacle to their work.  | - All three policymakers and6 out of 10 NGO program coordinators.- 24 out of 60 (40%) |