

## Supplementary information

*Questionnaire items for factors included in analyses.*

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<b>Kessler 10 – Psychological Distress</b>	<p>In the past four weeks about how often did you feel...</p> <ol style="list-style-type: none"><li>1. tired out for no good reason?</li><li>2. nervous?</li><li>3. so nervous that nothing could calm you down?</li><li>4. hopeless?</li><li>5. restless or fidgety?</li><li>6. so restless you could not sit still?</li><li>7. depressed?</li><li>8. that everything was an effort?</li><li>9. so sad that nothing could cheer you up?</li><li>10. worthless?</li></ol> <p><b>Scale</b></p> <ol style="list-style-type: none"><li>1. None of the time</li><li>2. A little of the time</li><li>3. Some of the time</li><li>4. Most of the time</li><li>5. All of the time</li></ol>
<b>Brief Resilience Scale</b>	<p>How much do you agree with the following statements?</p> <ol style="list-style-type: none"><li>1. I tend to bounce back quickly after hard times</li><li>2. It does not take me long to recover from a stressful event</li><li>3. I usually come through difficult times with little trouble</li></ol> <p><b>Scale</b></p> <ol style="list-style-type: none"><li>1. Strongly disagree</li><li>2. Disagree</li><li>3. Neutral</li><li>4. Agree</li><li>5. Strongly agree</li></ol>
<b>2-Way Social Support Scale</b>	<p>Thinking about your support and social networks, how true are the following statements in relation to your life?</p> <ol style="list-style-type: none"><li>1. I am there to listen to other people's problems.</li><li>2. My family/friends understand my job demands.</li><li>3. I like helping others.</li><li>4. There is someone I can talk to about the pressures in my life.</li><li>5. There is someone in my life that makes me feel worthwhile.</li><li>6. I lead a fulfilling life outside work.</li><li>7. There is someone in my life I can get emotional support from.</li><li>8. I give others a sense of comfort in times of need.</li><li>9. I feel that I have a circle of people who value me.</li></ol>

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**Scale**

1. Not at all
  2. Somewhat true
  3. Quite true
  4. Very true
  5. Always true
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**PTSD Symptoms**

Below is a list of reactions that people sometimes have in response to very stressful experiences. Thinking of stressful experiences that may have occurred either at work or away from work at any stage of your life, please read each statement and indicate how much you have been bothered by that problem in the past four weeks.

1. In the past four weeks, how much were you bothered by ...
  - a) Repeated, disturbing, and unwanted memories or nightmares about any stressful experiences?
  - b) Experiencing flashbacks where you suddenly feel or act as if a stressful experience were actually happening again?
  - c) Feeling very upset or experiencing strong physical reactions such as heart pounding, having trouble breathing when something reminded you of these stressful experiences?

**Scale**

1. Not at all
2. A little bit
3. Moderately
4. Quite a lot
5. Extremely

*IF 3, 4, 5 for 1a – 1c THEN ASK.*

2. How often do these reactions occur?
  - Less than once a month
  - 1-2 times a month
  - 3-5 times a month
  - 6-10 times a month
  - More than 10 times a month
3. How much effort do you make to avoid thinking or talking about any stressful events, or doing things which remind you of stressful experiences?
  - None
  - A little bit
  - Moderate
  - Quite a lot
  - A great deal

Still thinking about your reactions to any stressful experiences that may have occurred either at work or away from work, please read each statement below and indicate how much you have been bothered by that problem in the past four weeks.

4. In the past four weeks, how much were you bothered by
    - a) Loss of interest in things that you used to enjoy?
    - b) Feeling emotionally distant or cut off from other people?
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- c) Feeling jumpy or easily startled?
  - d) Having difficulty concentrating?
  - e) Having trouble falling or staying asleep?
  - f) Feeling irritable or having angry outbursts?

**Scale**

- 1. Not at all
- 2. A little bit
- 3. Moderately
- 4. Quite a lot
- 5. Extremely

*IF 3, 4, 5 TO ANY OF 4a-4f, THEN ASK.*

- 5. How much distress did these feelings or reactions cause you?
  - None
  - Mild
  - Moderate
  - Severe
  - Very severe
- 6. How much did these feelings or reactions disrupt or interfere with your normal daily life?
  - Not at all
  - A little
  - Some
  - A lot
  - Extremely

*IF 3, 4, 5 TO EITHER 5 OR 6, THEN ASK.*

- 7. How long have these feelings or reactions been troubling you?
  - Less than a month
  - 1 - 2 months
  - 3 - 6 months
  - 7 - 12 months
  - 1-2 years
  - 3-5 years
  - More than 5 years

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**Explosive Anger**

In the last four weeks, about how often were you mad or angry?

In the last four weeks, about how often were you so angry you felt out of control or became violent?

In the last four weeks, about how often did you have an urge to hit, push or hurt someone?

In the last four weeks, about how often did you have an urge to break or smash something?

- 1- None of the time
- 2- A little of the time
- 3- Some of the time
- 4- Most of the time
- 5- All of the time

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**Sleep Quality**

How often do you sleep well?

1. Almost always
2. Often
3. Sometimes
4. Not often
5. Almost never

How much sleep do you get on average (during a 24 hour period)?

1. Less than 5 hours
  2. 5 hours
  3. 6 hours
  4. 7 hours
  5. 8 hours
  6. 9 hours
  7. More than 9 hours
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**Suicidal Thoughts and Behaviours**

Have you seriously thought about taking your own life in the last 12 months,

Did you make a plan to take your own life in the last 12 months?

Have you attempted to take your own life in the last 12 months?

Have you ever seriously thought about taking your own life?

Have you ever made a plan to take your own life?

Have you ever seriously thought about taking your own life?

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**Perceived Stigma**

Employees in my organisation would be hesitant to disclose that they were suffering from a mental health-related issue or problem

Most people in my organisation would prefer not to have someone with depression or anxiety working on the same team as them

Most people in my organisation believe that people with depression or anxiety can't be taken as seriously as other people

- 1- Strongly disagree
  - 2- Disagree
  - 3- Neither agree nor disagree
  - 4- Agree
  - 5- Strongly agree
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**Organisational Stigma**

My manager is clearly supportive of those experiencing mental health-related issues or problems

My immediate colleagues are clearly supportive of those experiencing mental health-related issues or problems

In my organisation, when people recover from a mental illness, their career is unaffected

I believe my organisation is committed to making changes that promote mental health and wellbeing

I believe my organisation has the skills and resources to make changes that promote mental health and wellbeing

- 1- Strongly disagree
  - 2- Disagree
  - 3- Neither agree nor disagree
  - 4- Agree
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<b>Self-Stigma</b>	<p>You previously said that you have been told by a doctor or mental health professional that you have an emotional or mental health condition. Please indicate how much you agree or disagree with each of the following statements.</p> <ol style="list-style-type: none"> <li>1. I feel embarrassed about feeling this way</li> <li>2. I feel that I should be able to 'pull myself together'</li> <li>3. I feel embarrassed about seeking professional help</li> </ol>
<b>COPSOQ-II</b>	
<b>Meaning of Work</b>	Is your work meaningful?
<b>Management Support</b>	Do you feel that the work you do is important? How often is your manager willing to listen to your problems at work? How often do you get help and support from your manager?
<b>Work/Life Balance</b>	Do you feel you have enough flexibility to balance work and non-work commitments? Can you influence your working hours or the shifts assigned to you?
<b>Time to Recover</b>	If you are exposed to a critical incident or potentially traumatic event during your work, do you feel that you can take time out to recover or talk about it if you need it?
<b>Emotionally Disturbing Situations</b>	Does your work put you in emotionally disturbing situations?
<b>Work/Family Conflict</b>	Do you feel that your work drains so much of your energy that it has a negative effect on your private life? Do you feel that your work takes so much of your time that it has a negative effect on your private life?
<b>Recognition of work/fairness</b>	Is your work recognised and appreciated by the management? Are you treated fairly at your workplace? 1 - Never/hardly ever 2 - Seldom 3 - Sometimes 4 - Often 5 - Always
<b>Bullying</b>	Have you been bullied in your workplace during the last 12 months? 1- No 2- Yes, once or twice 3- Yes, a few times 4- Yes, monthly 5- Yes, weekly 6- Yes, daily