| **Question** | **Response / response categories** | **N (%)** |
| --- | --- | --- |
| Do you like the idea of using video/tele-consultation as a tool to support the care of patients with mental disorders? | Responses among participants who like the idea of using video/tele-consultation in mental health | 21 (77.8) |
| * the possibility to contact a patient who cannot come for an appointment or is required by a pandemic situation | 16 (59.3) |
| * facilitating continuous contact with the patient | 3 (11.1) |
| * improving the quality of patient care | 1 (3.7) |
| * support in disease monitoring, and “going with the times” | 1 (3.7) |
| Responses among participants who do not like the idea of using video/tele-consultation in mental health | 6 (22.2) |
| * preference for personal contact | 4 (14.8) |
| * such contact is difficult and exhausting | 1 (3.7) |
| * it is not for me | 1 (3.7) |
| All responses | 27 (100.0) |
| What would you like to see improved in the current video/tele-consultation tools,  do you see a need for new functionalities, if so which one? | * the quality of the call | 10 (52.6) |
| * the need for a dedicated medical platform | 6 (31.6) |
| * confidentiality of the call and data protection | 2 (10.5) |
| * the possibility to assess wellbeing/risk of self-injurious actions, which could be visible to the therapist | 1 (5.3) |
| All responses | 19 (100.0) |
| Do you like the idea of using mobile apps, smart watches, wristbands and other mobile health tools to support mental health care? Why? | Responses among participants who like the idea of using mobile health tools to support mental health care | 13 (46.5) |
| * they help monitor treatment and the therapeutic process | 4 (14.2) |
| * respondents indicated that if they do not harm patients and they accept them then they should be used | 3 (10.7) |
| * indicate that current apps are reliable and researched | 2 (7.1) |
| * enable to collect objective data | 1 (3.6) |
| * they can be an extra support for patients | 1 (3.6) |
| * can give a greater sense of being cared for | 1 (3.6) |
| * this “is the future” | 1 (3.6) |
| Responses among participants who do not like the idea of using mobile health tools to support mental health care | 12 (42.8) |
| * inexperience and unfamiliarity with such apps | 7 (25.0) |
| * might make long-term contact with the therapist more difficult | 2 (7.1) |
| * it draws attention away from own causality to something else | 1 (3.6) |
| * driving patient into an unreal world | 1 (3.6) |
| * sounds like a kind of leash | 1 (3.6) |
| Participants who have mixed feelings about whether such solutions would help or harm patients | 3 (10.7) |
| All responses | 28 (100.0) |
| Do you have any concerns about the use of video/tele-consultation as a tool to support the care of patients with mental disorders? | * difficulties in assessing the patient's condition | 7 (41.2) |
| * inability to build an adequate therapeutic relationship | 3 (17.6) |
| * it is more tiring than face-to-face contact | 3 (17.6) |
| * contact with the patient is weaker | 2 (11.8) |
| * patients may give a feeling of being monitored | 1 (5.9) |
| * patients may want non-stop contact | 1 (5.9) |
| All responses | 17 (100.0) |
| Do you have any concerns about the use of mobile apps, smart watches, wristbands and other mobile health tools to support mental health care? | * lack of opportunity to try such effectiveness solutions, or not knowing which ones to recommend | 8 (40.0) |
| * security and privacy risk | 6 (30.0) |
| * mobile solutions may do more harm | 2 (10.0) |
| * mobile solutions may get boring | 2 (10.0) |
| * patient expectations may be too high | 1 (5.0) |
| * may delay contact with a specialist | 1 (5.0) |
| All responses | 20 (100.0) |