| **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) |