Online supplementary file 3: Summary of patient experience of technology-based symptom monitoring

		Theme		Acceptability of intervention				Impact of intervention	
		Subtheme	General acceptability of symptom monitoring approach	Ease	Technology	Frequency and duration	Helpfulness of feedback	Insight into health and management	Relationships with others
Study	**Diagnosis**	**Details of symptom monitoring**							
Bauer et al., (2004) [1]	Bipolar disorder	Unguided intervention to support treatment management Daily unprompted			Excellent technology				
Foster et al., (2011) [2]		Guided intervention to support treatment management Weekly prompted	More flexibility to capture individual symptoms	Ease	Liked choice of text or email	Liked frequency	Graphs represented illness through time	Process improved insight but could be more responsive to alert clinician if high or missed scores. Better if tailored to illness symptoms	Improved interactions with clinician and fostered carer awareness
Wenze et al., (2014) [3]		Guided intervention to support treatment management Fixed schedule twice daily prompted	Overall satisfaction and helpfulness though repetitive structure – change order of questions and expand content	Ease	Preferred smartphone to PDA. Technology not saving responses, not beeping loud enough	Increase frequency from daily to multiple times daily		Insight, active role and engagement. Increasing content, e.g. drugs, stress. Might differ depending on illness stage	Therapeutic alliance improved

Study	Population	Intervention					
Depp et al., (2010) [4]		Guided software (PDA) integrated intervention Random schedule Four times daily prompted			Device easy to use but concerned how to explain it to others.		Increased awareness of emotions and greater use of self-management strategies
Depp et al., 2015 [5]		Guided website integrated intervention Random schedule twice daily prompted			Ratings about device largely positive; participants would use it again, it was helpful, little difficulty in operating, no interference or difficulty interpreting		
Gulec et al., (2011) [6]	Eating disorder (risk)	Guided website integrated intervention Weekly prompted	Good concept but few rated as helpful			Increase frequency from weekly to daily	Only half thought feedback messages appropriate	Wanted more concrete advice from feedback
Carrard et al., (2011) [7]	Eating disorder	Guided website integrated intervention Daily unclear if prompted	Pleasant and useful	To understand, to complete			Graphs rated as not helpful	
Carrard et al., (2011) [8]		Guided website integrated intervention Weekly unclear if prompted	Useful				Feedback satisfied	
Lindenberg et al., (2011) [9]		Guided website integrated intervention Weekly prompted	Good concept, not helpful				Feedback not appropriate	
Shapiro et		Guided integrated	Enjoyment of using					

Study	Condition	Intervention							
al., (2010) [10]		face-to-face therapy Daily unprompted	intervention						
Bauer et al., (2006) [11]		Unguided intervention to support discharge Weekly prompted	Most would recommend it or repeat it. Found it triggered time to reflect and were grateful for support			Most felt that duration was OK but many felt too short	Mostly rated as very or reasonably appropriate messages but a third said rather inappropriate. Commented that feedback too repetitive and standardised		Most of the participants reported that the lack of personal support bothered them to a certain degree, with some very bothered by lack of contact
Robinson et al., (2006) [12]		Guided intervention to support discharge Weekly prompted	Good quality intervention, would not repeat nor recommend	Little effort. Some loss of instructions	SMS limits answers. Incorrect messages received,	Most satisfied with duration	Rated as moderately appropriate; mixed views whether encouraging or patronising	More personalised and constructive responses wanted to improve impact of intervention.	Half appreciated lack of personal support, others wanted some contact e.g. Phone call to support
Drake et al.,(2013) [13]	Depression	Guiding optional (only one third chose to), intervention as a treatment Daily unprompted	Low acceptability, validity of daily and mood descriptors	To learn, remember, access	To learn, remember, access	Not too time consuming, but too frequent	Graphs helpful, automated feedback not as formulaic	Some felt insight but most already had this and recommended intervention for new service users to identify mood patterns before or with another therapy	Moderately helpful to have a buddy receiving feedback as received concern and support but experienced guilt about the burden
Kramer et al.,(2014) [14]		Guided intervention as treatment					Satisfaction with graphs, easy to understand		

		Multiple times daily random prompts					
Burns et al., (2011) [15]		Guided website integrated intervention Multiple times daily random prompts	Moderate satisfaction				
Hetrick et al (2015) [16]	Moderate Depression	Guided intervention Weekly unprompted	Overall acceptable, simple and time it takes acceptable. Not capable of capturing feeling		Graphs were not shown to patients, would have liked to see them.	Helped to understand symptoms, fluctuation and ability to manage. Some already knew the information	
Meglic et al., (201) [17]	Depression, Mixed depression and anxiety	Guided website integrated intervention Weekly prompted if no response	Overall usefulness. Annoying prompts and repetitive questionnaire	Computer literacy required		Feedback useful or repetitive and impersonal	Increased control over disease and improved overview
Godelski et al., (2012) [18]	Mix (Depression)	Guided intervention to support treatment management Daily prompts		Fully or very satisfied with device			Improved understanding of condition and ability to cope
Granholm et al.,(2012) [19]	Schizophrenia	Guided intervention to support treatment management Daily prompts	Found text messages helpful (alludes to acceptability of intervention)				
Smith et al.,(2012) [20]	PTSD	Guided intervention to support discharge Multiple times weekly prompts				Notification of distress was useful	

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