Checklist for Reporting Results of Internet E-Surveys (CHERRIES)			
Item Category	**Checklist Item**	**Explanation**	**Location in the Manuscript**
Design	Describe the survey design	Describe target population, sample frame. Is the sample a convenience sample? (In "open" surveys this is most likely.)	Page 4, paragraph 2. A convenience sample was used.
IRB approval and informed consent process	IRB approval	Mention whether the study has been approved by an IRB	Page 5, paragraph 2: The study was approved by the University of Regina Research Ethics Board (File #2016-107)
	Informed Consent	Describe the informed consent process. Where were the participants told the length of time of the survey, which data were stored and where and for how long, who the investigator was, and the purpose of the study?	Page 5, paragraph 2: Informed consent was obtained online from each respondent prior to beginning the survey. See below for a copy of the consent form.
	Data Protection	If any personal information was collected or stored, describe what mechanisms were used to protect unauthorized access.	Page 5, paragraph 2: No identifying information was collected.
Development and pre-testing	Development and testing	State how the survey was developed, including whether the usability and technical functionality of the electronic questionnaire had been tested before fielding the questionnaire.	Page 4, paragraph 2. The survey modules were developed by the Canadian Institute for Public Safety Research and Treatment Team.

			The survey was piloted with undergraduate and graduate students.
Recruitment process and description of the sample having access to the questionnaire	Open survey vs closed survey	An "open survey" is a survey open for each visitor of a site, while a closed survey is only open to a sample which the investigator knows (password-protected survey).	Page 4, paragraph 2: This was an open survey.
	Contact mode	Indicate whether or not the initial contact with the potential participants was made on the Internet. (Investigators may also send out questionnaires by mail and allow for Web-based data entry.)	Page 5, paragraph 1: Initial contact was made through email and/ or through a public service announcement video made by the Minister of Public Safety and Preparedness.
	Advertising the survey	How/where was the survey announced or advertised? Some examples are offline media (newspapers), or online (mailing lists – If yes, which ones?) or banner ads (Where were these banner ads posted and what did they look like?). It is important to know the wording of the announcement as it will heavily influence who chooses to participate. Ideally the survey announcement should be published as an appendix.	Page 5, paragraph 1: Contact was made through email sent by national public safety associations to currently serving members, and/ or through a public service announcement video made by the Minister of Public Safety and Preparedness.
Survey Administration	Web/E-mail	State the type of e-survey (eg, one posted on a Web site, or one sent out through e-mail). If it is an e-mail survey, were the responses entered manually into a database, or was there an	Page 5, paragraph 1 and 2: The survey link was sent out through email and was also available on public safety association websites. The data

		automatic method for capturing responses?	were exported directly from the website to an electronic database.
	Context	Describe the Web site (for mailing list/newsgroup) in which the survey was posted. What is the Web site about, who is visiting it, what are visitors normally looking for? Discuss to what degree the content of the Web site could pre-select the sample or influence the results. For example, a survey about vaccination on an anti-immunization Web site will have different results from a Web survey conducted on a government Web site	Page 5, paragraph 1: The survey link was posted on a range of public safety association websites including those with membership information, regulatory information and/or websites for advocacy groups with many different foci. The detail of the foci of the websites is not included in the manuscript.
	Mandatory/voluntary	Was it a mandatory survey to be filled in by every visitor who wanted to enter the Web site, or was it a voluntary survey?	Page 4, paragraph 2: This was a voluntary survey.
	Incentives	Were any incentives offered (eg, monetary, prizes, or non-monetary incentives such as an offer to provide the survey results)?	Page 5, paragraph 1. No incentives were offered for completing the questionnaire.
	Time/Date	In what timeframe were the data collected?	Page 4, paragraph 2: The data were collected from September 1, 2016 to January 31, 2017.
	Randomization of items or questionnaires	Randomization of items or questionnaires	The questions were not randomized. This is not included in the manuscript.

	Adaptive questioning	Use adaptive questioning (certain items, or only conditionally displayed based on responses to other items) to reduce number and complexity of the questions.	Some adaptive questioning was utilized in the survey; however, none was used for the items included in this study. We did not state this in the manuscript.
	Number of Items	What was the number of questionnaire items per page? The number of items is an important factor for the completion rate.	This varied substantially based on participant responses because the survey was not static. For example, if a participant reported not having children when asked on a single screen whether they have children, the next screen moved to a subsequent header question, rather than to a screen with numerous items asking about children. We did not describe this detail in the manuscript.
	Number of screens (Pages)	Over how many pages was the questionnaire distributed? The number of items is an important factor for the completion rate.	They survey was dynamic and delivered electronically, so the number of pages that each respondent viewed varied based on skip logic and the respondents' unique responses. This was a long, electronic-based survey, so the page number cannot be as easily determined as with a paper questionnaire. Due to copyright laws, the final questionnaire cannot be included

			as an appendix. This detail was not included in the manuscript.
	Completeness check	It is technically possible to do consistency or completeness checks before the questionnaire is submitted. Was this done, and if "yes", how (usually JAVAScript)? An alternative is to check for completeness after the questionnaire has been submitted (and highlight mandatory items). If this has been done, it should be reported. All items should provide a non-response option such as "not applicable" or "rather not say", and selection of one response option should be enforced.	Participants could skip any question they wanted to skip, but at the end of any given page, if an item was skipped, participants were asked to confirm if the skip was intentional. This was not explicitly described in the manuscript.
	Review Step	State whether respondents were able to review and change their answers (eg, through a Back button or a Review step which displays a summary of the responses and asks the respondents if they are correct).	Respondents were not allowed to use a back button. This was not explicitly described in the manuscript.
Response Rate	Unique site visitor	If you provide view rates or participation rates, you need to define how you determined a unique visitor. There are different techniques available, based on IP addresses or cookies or both.	Page 5, paragraph 2. No identifying information was collected, therefore, there was no way of identifying unique visitors. We intentionally avoided identifying unique visitors because of our heavy focus on anonymity.
	View rate (Ratio of unique survey	Requires counting unique visitors to the first page of the survey, divided by the	Many would have been able to access the survey from the same

	visitors/unique site visitors)	number of unique site visitors (not page views!). It is not unusual to have view rates of less than 0.1 % if the survey is voluntary.	computer. We prioritized anonymity over counting unique visitors because we did not expect participants would want to complete the survey multiple times. Therefore, we could not compute view rates and, as such, do not provide this detail in the manuscript.
	Participation rate (Ratio of unique visitors who agreed to participate/unique first survey page visitors)	Count the unique number of people who filled in the first survey page (or agreed to participate, for example by checking a checkbox), divided by visitors who visit the first page of the survey (or the informed consents page, if present). This can also be called "recruitment" rate.	We did not employ the technology to determine the number of visitors who went to the page but decided not to complete the survey. This detail was not included in the manuscript.
	Completion rate (Ratio of users who finished the survey/users who agreed to participate)	The number of people submitting the last questionnaire page, divided by the number of people who agreed to participate (or submitted the first survey page). This is only relevant if there is a separate "informed consent" page or if the survey goes over several pages. This is a measure for attrition. Note that "completion" can involve leaving questionnaire items blank. This is not a measure for how completely questionnaires were filled in. (If you need a measure for this, use the word "completeness rate".)	The completion rate for the current sample is the number of people who progressed far enough through the survey to complete all the variables of interest divided by the number of people who started the survey. This is 4,199/ 8,520= 49.3%. Please see page 9, paragraph 2.

Preventing multiple entries from the same individual	Cookies used	Indicate whether cookies were used to assign a unique user identifier to each client computer. If so, mention the page on which the cookie was set and read, and how long the cookie was valid. Were duplicate entries avoided by preventing users access to the survey twice; or were duplicate database entries having the same user ID eliminated before analysis? In the latter case, which entries were kept for analysis (eg, the first entry or the most recent)?	Page 5, paragraph 2. We prioritized anonymity above all else, therefore there is no way to determine unique visitors. It is possible that there are duplicate entries, however, very unlikely that a respondent would want to complete the survey multiple times.
	IP check	Indicate whether the IP address of the client computer was used to identify potential duplicate entries from the same user. If so, mention the period of time for which no two entries from the same IP address were allowed (eg, 24 hours). Were duplicate entries avoided by preventing users with the same IP address access to the survey twice; or were duplicate database entries having the same IP address within a given period of time eliminated before analysis? If the latter, which entries were kept for analysis (eg, the first entry or the most recent)?	We did not check the IP address because we prioritized anonymity above all else. This detail was not included in the manuscript.
	Log file analysis	Indicate whether other techniques to analyze the log file for identification of	The required use of the random unique identifier for entering the survey made duplicate entries

		multiple entries were used. If so, please describe.	extremely unlikely, and we have no reason to believe participants would engage in a fraudulent process for creating duplicate entries. This detail was not included in the manuscript.
	Registration	In "closed" (non-open) surveys, users need to login first and it is easier to prevent duplicate entries from the same user. Describe how this was done. For example, was the survey never displayed a second time once the user had filled it in, or was the username stored together with the survey results and later eliminated? If the latter, which entries were kept for analysis (eg, the first entry or the most recent)?	Page 4, paragraph 2. Data were drawn from an open web-based survey.
Analysis	Handling of incomplete questionnaires	Were only completed questionnaires analyzed? Were questionnaires which terminated early (where, for example, users did not go through all questionnaire pages) also analyzed?	Page 8, paragraph 2. Only complete cases for the variables of interest were used in the analysis.
	Questionnaires submitted with an atypical timestamp	Some investigators may measure the time people needed to fill in a questionnaire and exclude questionnaires that were submitted too soon. Specify the timeframe that was used as a cut-off point, and describe how this point was determined	Page 5, paragraph 2. There was no clear cut-point to identify outliers, therefore, none were excluded.

	Statistical correction	Indicate whether any methods such as weighting of items or propensity scores have been used to adjust for the non-representative sample; if so, please describe the methods	No weights were developed or used in this survey. This detail is not included in the manuscript.

Consent Form

Q0.0 (Le français suit l'anglais) Welcome to the webpage for the study "Assessing Operational Stress Injuries and Symptoms for Canadian First Responders and other Public Safety Personnel" We are a mental health research team who recognize First Responders and other Public Safety Personnel (e.g., police, firefighters, paramedics, corrections) can suffer from operational stress injuries that are too often hidden. With the support of your associations and executive we have designed a survey to provide you with a voice in the first anonymous Canada-wide assessment of operational stress injuries in First Responders and other Public Safety Personnel. The survey will ask you to reflect on your own mental health, which may be challenging at times, but will add your anonymous voice to those of your peers across the country. The more of you who participate, with or without mental health challenges, the more weight your collective voice will have in fostering better mental health for all Canadian First Responders and other Public Safety Personnel. What follows is the detailed ethics and participation information. We sincerely hope you choose to participate in full, helping us to support your mental health and that of your peers.

Bienvenue sur la page web de l'étude « Évaluation des traumatismes et symptômes liés au stress opérationnel chez les premiers répondants et les autres membres du personnel de la sécurité publique au Canada » Nous sommes une équipe de chercheurs en santé mentale qui reconnaissent que les premiers répondants et autres membres du personnel de la sécurité publique (par ex. policiers, pompiers, paramédics, agents correctionnels) peuvent souffrir de blessures de stress opérationnel qui sont trop souvent cachées. Avec le support de vos associations et dirigeants, nous avons développé le premier questionnaire anonyme évaluant les blessures de stress opérationnel auprès des premiers répondants et des autres membres du personnel de la sécurité publique à travers le Canada. Les questions de l'étude exigeront que vous fassiez une réflexion sur votre santé mentale, ce qui peut parfois être difficile, mais vos réponses s'ajouteront à la voix anonyme de vos collègues à travers le pays. Le plus grand nombre d'entre vous qui participerez, que vous ayez des problèmes de santé mentale ou non, le plus votre voix collective aura de poids pour favoriser la santé mentale de tous les premiers répondants et autres membres du personnel de la sécurité publique au Canada. Ce qui suit est

le consentement éthique détaillé et les directives pour participer à l'étude. Nous espérons sincèrement que vous choisirez de compléter l'ensemble de l'étude, nous permettant ainsi de soutenir votre santé mentale et celle de vos collègues. Veuillez noter que vous pouvez alterner entre le français et l'anglais à votre guise durant le sondage en utilisant the menu en haut à droite. Please note that you may switch between English and French at your leisure during the survey by using the menu at the top right.

Q0.1 PREAMBLE: For this project, the phrase "First Responders and other Public Safety Personnel" (FRPSP) was chosen as an inclusive way to refer to all of the following (alphabetically), even though some may be better characterized as First Responders or Health Care: for example, Canadian Border Services, Canadian Security Intelligence Service, Correctional Officers, Dispatchers, Emergency Call Centre Operators, Firefighters (including volunteers), Municipal Police Officers, Paramedics, EMTs, EMS Personnel, and RCMP. Similarly, Operational Stress Injury (OSI) will refer to the many different clinically significant symptoms of injury that are often currently called disorders (e.g., posttraumatic stress disorder, anxiety disorders, mood disorders, sleep disorders, substance use disorders). There is very little data for OSI rates in Canadian FRPSP. As such, 1) we do not know how big the challenge is; 2) making it hard to obtaining appropriate resources; and 3) hard to know if any interventions are helping. In February 2016, the Minister of Public Safety hosted a day-long Round Table discussion with many FRPSP leaders from across the country. Agencies including CPA, CACP, CAFC, IAFF, PAC, PCC, as well as senior RCMP management, discussed a common way forward to address OSIs. There were unanimous agreements, including needing an evidence-based pan-Canadian pan-Public Safety assessment of OSI prevalence. Accordingly, the data from this study will substantially inform FRPSP leaders and Public Safety officials regarding requests for resources and tracking whether things are improving for FRPSP mental health. Public Safety leaders from across the country (e.g., federal and provincial officials, tri-service leaders, etc.) eagerly await these types of prevalence results so we can all be better informed about FRPSP mental health needs.

RATIONALE AND PURPOSE: Begin to assess levels of traumatic exposure, OSI symptoms and impact on FRPSP and their families, and identify individual differences in risk and resiliency for potential treatment targets.

INVITATION TO PARTICIPATE: You are invited to participate if you are currently serving as part of Canada's FRPSP team. The study involves a team of academics and FRPSP working as part of the Canadian Institute of Public Safety Research and Treatment (CIPSRT).

APPROVALS: The study has been approved by the CIPSRT leadership, which includes representative leadership from Universities across Canada (e.g., Afifi, Asmundson, Brunet, Carleton, Dobson, Griffiths, Groll, Jones, MacPhee, Ricciardelli, Sareen, Stewart), and Public Safety agencies (e.g., CPA, CACP, CAFC, IAFF, PAC, PCC, RCMP, USGE), as well as our partner and supporting organizations

(e.g., CCJS, CIMVHR, CSKA, JIBC, MDSC, MHCC, TEMA, Badge of Life Canada, Families of the RCMP for PTSD Awareness). This study has also been approved by the University of Regina Research Board (File #2016-107; Approval date June 30, 2016). For details please contact the representative lead for this project (Carleton) or either of the coordinating researchers (Duranceau, LeBouthillier) at cipsrt@uregina.ca.

PROCEDURES: The survey ask for demographics, a general history of traumatic exposure, symptoms you may experience, the impact those symptoms may have on you and your family, workplace stress, issues regarding stigma, and differences in risk and resiliency. You are NOT required to answer any questions you do not want to answer. You will be prompted once for unanswered questions to ensure you intended not to answer. Before starting the survey for the first time you will be given a very important randomly generated unique login code. That code allows you to login to your anonymous survey responses from any computer, allowing you to start wherever you left off; however, the current survey will close on January 31, 2017 at 17:00 CST. If you lose your unique anonymous code, we have no way to recover it and you would need to start over. We will not confirm the presence or absence of any code.

TIME: Assessing traumas and symptoms takes about 25 to 45 minutes, depending on your responses and your reading speed; thereafter, 25 to 45 minutes of items assess the influence of your work on your mental health and the health of your family, as well as stigma and variables associated with risk and resiliency. The estimated time required to complete all sections of the survey is 50 to 90 minutes. You can complete the survey in sections or quit at any time. Any time you leave the survey your answers up to that point will be saved on the server, but not your computer. You can return using your code.

POTENTIAL BENEFITS: There is no direct personal benefit to participating. Participation may offer time to reflect on your mental health, which may be beneficial; however, the most likely benefits involve supporting FRPSP mental health. Participation, whether you have symptoms or not, critically contributes to helping those who do have symptoms.

POTENTIAL RISKS AND DISCOMFORTS: There are no anticipated risks for participation. Some questions may cause increased emotionality or distress, but not more than your typical daily experience. Your responses are important to us; however, you may choose to skip questions at any point in order to help reduce your emotionality or distress. If you have questions or would like assistance, you should contact your Employee Assistance Program, where available. If you are unable or unwilling to contact your Employee Assistance Program, there are links to more support below. In an emergency, always call 911 or contact the emergency

service nearest you. Find Canadian Therapists: http://www.cpa.ca/public/findingapsychologist/ Canadian Crisis Resources for Suicide: http://suicideprevention.ca/thinking-about-suicide/find-a-crisis-centre/

CONFIDENTIALITY: Participation is designed to be anonymous. No individually identifying information will be requested. Demographics will be requested so we can describe the participants and assess for any obvious patterns that may benefit FRPSP (e.g., on average group A is different from group B), but none are required. Results will be presented in aggregate forms to maximize anonymity. CIPSRT and the research team will have access to the anonymized data and other researchers may obtain copies of the anonymized data for verification or related research purposes only.

WITHDRAWAL FROM THE STUDY: Participation is entirely voluntary and you may quit any time. If you want your responses removed and have your code you can do so following the instructions on the next page; however, removal will only impact research use going forward from 10 business days after the removal request is received.

QUESTIONS OR ASSISTANCE: If you have any questions during participation about the directions, please feel free to ask by contacting the CIPSRT research team at cipsrt@uregina.ca or by telephone at 306-337-2473 (out of town participants may call collect).

RESULTS: Results will be made available through feedback and summaries offered through CIPSRT, the FRPSP leadership (e.g., CPA, CACP, CAFC, IAFF, PAC, PCC, RCMP, USGE), our partner and supporting organizations (e.g., CIMVHR, CCJS, CSKA, MHCC, JIBC, MDSC, TEMA, Badge of Life Canada, Families of the RCMP for PTSD Awareness) and peer-reviewed journal articles.

UNDERSTANDING AND CONSENT: I understand the current study was approved by my Public Safety leadership team (e.g., CPA, CACP, CAFC, IAFF, PAC, PCC, RCMP, USGE), as well as the University of Regina Research Ethics Board (File #2016-107; Approval date June 30, 2016). If I have any questions or concerns about my rights or treatment as a participant, I may contact 1) the CIPSRT research team at cipsrt@uregina.ca or by telephone at 306-337-2473 (out of town participants may call collect), 2) my Public Safety leadership, or 3) the Chair of the Ethics Board at 1-306-585-4775 (out of town participants may call collect) or by e-mail: research.ethics@uregina.ca. Checking the box below indicates that you have 1) read and understood the above, 2) voluntarily agree to participate in this study, 3) understand the procedure and objectives of the study, 4) understand you are free to withdraw from

this study at any time without penalty, 5) understand your participation will be anonymous. Please note that the masculine form is used throughout the questionnaires for ease of reading but is meant to refer to all persons.

- ❍ Yes, I understand, wish to participate, and am ready to proceed to the login page (1)
- ❍ No, I do not understand and/or do not wish to participate (2)

If No, I do not understand and... Is Selected, Then Skip To End of Survey

Q0.2 IMPORTANT NOTICE Before starting, you can create an access code that allows you to anonymously save your progress and continue later. Please note the following: Please keep your alphanumeric and case-sensitive code safe and confidential. Your code cannot be used to identify you. If you lose your code, we have no way to retrieve it for you. If you want to leave the survey and continue later you can use any computer, but you will need your code. Your code will allow you to participate, anonymously, in future research studies without re-entering all of the same data. That should mean 1) less time spent responding to survey questions and 2) long-term research projects to understand how Public Safety experiences change people over time. Please do not lose this code, even after you finish the current survey. Please select one of the options below:

- ❍ I want to create an access code (2)
- ❍ I lost my access code and need to create a new one (4)
- ❍ I already have an access code (1)
- ❍ I want to continue without an access code (Note: you will not be able to save your survey progress) (3)

Q0.3 R2MR Special Note: If you are about to participate in Road to Mental Readiness (R2MR) the data you are providing in the current survey can serve as "pre-R2MR" data. You will be invited to complete a second, very much shorter survey at least once "post-R2MR" so we can assess the impact of that training. As such, we strongly request you keep your code safe so we can better assess what impact R2MR has for First Responders and other Public Safety Personnel.

Q0.4

	(1)
If you think the confidentiality of your code has been compromised and want the data associated with your code removed, please tick this box: (1)	❑

Q0.5 Thank you. We will remove the data associated with your compromised code; however, please note that the process is not instantaneous. If you have already requested a new code, you will be redirected to it on the next page.