

Table S1a. TAU content, including details on treatment type, intensity and provider according to interviews with parents

ID	Medications / Indication	No. of visits, incl initial psychiatric assessment	Psychological or psychosocial treatment	No. of sessions	Other intervention (no. visits)	Comments
1	Antidepressant (SSRI, 25 mg Sertraline)	–	CBT	5 sessions of CBT	–	
2	Antidepressant (SSRI, Fluoxetine, 20 mg)	–	Supportive therapy	1–2 sessions of supportive therapy	–	
3	–	2 visits (psychiatric assessment only)	–	–	–	No intervention was offered after the psychiatric assessment due to improvement.
4	Melatonin	–	CBT	10 sessions of CBT	–	
5	Melatonin + Vitamin D	–	CBT	7 sessions CBT	–	
6	–	–	Supportive therapy	10 sessions of supportive therapy	–	
7	Promethazine (Lergigan) + Melatonin	–	–	–	Neuropsychiatric assessment	
8	–	–	CBT	7 sessions	–	

9	Antidepressant + sleep medication + antihistamine (unknown types and dosage)	See comment	–	–	–	Initially this participant was referred to the CAMHS and received 1 visit (classified as psychiatric assessment), and later self-referred to primary care and received the specified medications.
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Table S1b. TAU content, including details on treatment type, intensity and provider according to medical records

ID	Medications	No. of visits, incl initial psychiatric assessment	Psychological or psychosocial treatment	No. of sessions	Other intervention (no. visits)	Target for the intervention/s	Comments
1	Antidepressant (SSRI, Sertraline, 25 mg x 1)	3 visits	CBT	5 sessions of CBT	–	Social anxiety	
2	Antidepressant (SSRI, Fluoxetine 20 mg x 1)	3 visits	PDT/Supportive Therapy	5 sessions of PDT	–	Depression and unspecified anxiety	Medical records imply that it was mainly Supportive therapy, but classified as PDT according to treatment plan.
3	–	1 visit (psychiatric assessment only)	–	–	–	Depression	
4	Hydroxyzine (Atarax, 25 mg x 0,5-1) + Melatonin (Melatonine, 2 mg x 1-3)	–	CBT/Supportive therapy	8 sessions of CBT	–	Depression	No visits or telephone calls registered with a psychiatrist. The therapist seems to have consulted the doctor who initiated medical treatment without patient visit.
5	Melatonin (Melatonine, 4 mg) Vitamin D (Benferol, 800ie)	1 visit	CBT	11 sessions	–	Depression	
6	–	–	Supportive therapy	10 sessions	–	Depression	

7	Promethazine (Lergigan, 25 mg as required) + Melatonin (Melatonin, 3 mg x 3)	1 visit and 1 telephone call	–	–	Neuropsychiatric assessment, 5 visits plus 3 telephone calls	Melatonin for sleep problems, and Lergigan for unspecified anxiety; Suspected neuropsychiatric symptoms	
8	–	–	CBT	8 visits	–	Depression	
9	–	1 visit (psychiatric assessment only)	–	–	–	Depression	Psychiatric assessment included brief psychoeducation, then a referral was sent to primary care since the patient turned 18 years