

Supplementary table 1. Overview of study characteristics

First author/ year	Study Design	Population at baseline and follow up	Gender at baseline	Target group	Sector/ Size of organization	Intervention	Intervention Intensity	Country
Bond et al, 2021	longitudinal cohort study	284 pre 98 post	212 female 72 male	support services, police, educators and general community networks	public sector	Mental Health First Aid for the Suicidal Person course	4-hours course	Australia
Dimoff 2016	controlled study active vs wait list	183 pre 142 post	77 female 65 male	Leaders in telecommunication companies	large company, private sector	Mental health awareness training	3 hours training	Canada
Dobson et al, 2021	cluster-randomized trial	123 pre 101 post	115 female 8 male	office workers kitchen and maintenance staff	large company, public sector	The Working Mind program: <ul style="list-style-type: none"> • trained facilitators, • workshop manuals, • contact-based videos • discussion exercises, • personal goal setting. Participants allocated to immediate or delayed intervention groups.	4-hours group program	Canada
Dobson et al., 2019	open trial methodology	1292 pre 1155 post	male 419 female 719	government, education, health, energy supervisors and frontline staff	public sector	The Working Mind Program <ul style="list-style-type: none"> • trained facilitators, • workshop manuals, • contact-based videos • discussion exercises, • personal goal setting. “train-the- trainer” model	Two versions: 4-hour group program for frontline workers 8-hour program for managers	Canada
Eiroa-Orosa et al, 2021	cluster randomized-	371 pre 260 post	314 female 57 male	primary health and mental health care professionals	public sector	awareness-raising intervention The Targeted, Local, Credible, Continuous Contact (TLC3)	4 workshops 1. Training: pedagogy and contact (face-to face +video) – 4 hours	Spain

	controlled trial			administrative officers, general practitioners, odontologists, nurses, psychiatrists, psychologists, and social workers.		methodology adapted to the Catalan healthcare context	2. self-diagnosis and prioritization – 4 hours 3. self-organized activities 4. follow-up session	
Griffith et al 2016	Randomised controlled trial	507 pre 386 post	MH-guru: male: 29%, female: 70%;	multi-departmental government workplace	public sector	online depression and anxiety educational workplace induction program (“Mental Health Guru”): two modules: depression and General anxiety disorder	1 hour long online depression and anxiety educational program (1 module/week, 30min/module)	Australia
Haman et al., 2016	Longitudinal cohort study	580 pre	210 women 370 men	Leaders, members of the workers' council, workers in HR department	not specified companies (n=30)	“Mental-health-at-the-workplace” educational workshop	1-1,5 days training	Germany
Hanisch et al., 2017	Longitudinal cohort study	48 pre	92% male, 8% female	Leaders	private sector – large enterprise	“Leadership Training in Mental Health Promotion” (LMHP), a digital game-based training program for leaders which is combining games and simulations in a virtual environment.	1.5- 2 hours long single session	UK
Kristman et al., 2019	quasi-experimental	89 pre 61 post	59 male 24 female	Leaders in HR, occupational health and safety management	public and private sector, different size companies	Multi-faceted: 1. “Standard to Action” training program designed to help employers implement the Standard in	2 years	Canada

						<p>their workplaces – 6 sessions;</p> <p>2. Education sessions: MH First Aid sessions;</p> <p>3. Social marketing campaign including a photovoice exhibit.</p>		
Kubo et al, 2018	Single arm pilot trial	91 pre 83 post	male 77% female 23%	office workers	no specific information	“Mental Health First Aid” (MHFA) training program modified for workplace settings.	2-hour training course	Japan
Moffitt et al, 2014	random allocation design	106 pre 89 post	N/A	fire service line managers	public sector	<p>Participants randomly assigned to:</p> <ul style="list-style-type: none"> Looking after Wellbeing at Work” (LWW) Mental Health First Aid (MHFA) leaflet session (LS). 	<p>LWW- 2days</p> <p>MHFA – 12 hours</p> <p>LS- 1 hour</p>	UK
Moll et al, 2018	randomised, parallel-group trial	192 pre 167 post 150 by 6 mo follow up	female 88.5% male 11.5%	Healthcare workers	public sector	<p>“Beyond Silence” (Beyond Silence program includes a contact-based educational approach)</p> <p>Mental Health First Aid training</p>	comprising 6 in-person, 2-h sessions + 5 online sessions co-led by employees who personally experienced mental health issues standardised 2-days training program	Canada

Paterston et al, 2021		134 pre 57 post	not specified	not specified	public and private, different size companies	Headtorch WORKS - mental health and well-being intervention	3 online episodes + discussion group 6 hours original filmed drama and specialist documentary	UK
Quinn et al, 2011		101 pre 87 post	77% male 23% female	housing association and telecommunication workers	public and private sector	Training course on mental health awareness	One day training (6 hours each) combination of service user narratives, experiential group learning, and didactic teaching approaches.	Scotland
Reavley et al., 2018	Randomized controlled trial	608 pre 289 post	449 female 159 male	public servants	public sector	Participants randomized to -eLearning MHFA, -blended MHFA -PFA eLearning	- 6-hour eLearning MHFA online course - 6-hour eLearning MHFA plus 4-hour face-to-face session - 4-hour eLearning PFA online course	Australia
Shann et al., 2018	Randomized controlled trial	311 pre 196 post	148 male 163 female	Leaders	public private non- profit other sectors 1%	“Beyondblue” online materials for leaders: Main focus on depression: -written information, -video clips of organizational leaders speaking about mental health in the workplace, -interactive exercises in which participants can calculate the cost of untreated depression and the	30 – 45 min	Australia

						specific risk factors in their organization.		
Svensson and Hansson, 2014	Randomized controlled trial	416 pre 277 post	151 female 48 male	Not specified employees	public sector	Mental Health First Aid training	12 hours course, spread over two days	Sweden
Szeto et al. 2019	non-randomized quasi-experimental	5598 pre 4649 post Frontline staff 75.8% (3,449) Supervisory staff 26.4% (1,210)	male 55.9% female 44.1%	Corrections 9.0% (418) Emergency Services (9-1-1) 3.9% (192) Fire Services 17.7% (821) Police Services 56.5% (2,623) Paramedics 13.0% (605)	public sector	“Road to Mental Readiness for First Responders” program (R2MR) 3 main components: stigma reduction through video contact-based education, the Mental Health Continuum Model, and “Big 4” coping and resilience skills. Additional skills for supervisors.	4-hour program for employees 8-hour program for supervisors	Canada
Tynan et al. 2018	Non-Randomized controlled trial	1275 pre 1163 post Supervisor: 117 pre 114 post	1014 male; 135 female; Supervisor or training: 92 male; 10 female; 12 not specified.	Manager Professional Trades worker Machinery operator Admin or other	private sector, medium and large	“Working Well Mental health Program”: peer-based, multi-component mental health and suicide prevention program supervisor training	- 1 hour ‘general awareness training’ (GAT), - 4 hours of ‘gate-keeper training’, -2-day ‘Applied Suicide Intervention Skills Training’ (ASIST) for key workers.	Australia