

Report Supplementary Material 1:

Table 1: Study 1 Focus Group Topic Guide

	TASKS	
1	Can you give me a couple of examples of tasks you remember from doing CR? A B C Don't remember	
2	What was your favourite task?	
3	Why?	
4	Did you find the tasks difficult?	Yes / No / Don't remember
5	Any particular ones? If yes, which ones.	
6	Did you ever use any of the tasks in real life – outside the actual therapy? Tell me about that.	
7	Did you improve after the tasks?	Yes / No / Don't remember
8	If you improved, did that make you feel better	Yes / No / Don't remember
9	If you did not improve, was that frustrating?	Yes / No / Don't remember
	SESSIONS	
10	Did the time pass quickly	Yes / No / Don't remember
11	If it did, why was that?	

12	Did you like the attention you got during therapy?	Yes / No / Not bothered
13	Did you find that the therapy occupied your mind and filled up your spare time?	Yes / No / Not really
14	Were there the right number of sessions per week for you?	Too many / about right / too few
15	Were you sorry when the therapy ended or were you relieved?	Sorry / Relieved
16	Why did you feel that way?	
	THE COMPUTER	
17	How did you find using the computer?	Easy/not too bad/difficult
18	Do you think you have learned to use a computer during therapy?	Yes/No
19	Was the computer therapy too difficult?	Yes/No
20	Were the computer sessions too long?	Yes/No
21	Did you understand the use of the strategies on the computer?	Yes/No
	YOUR THERAPIST	
22	Did you like your therapist?	Yes / No / Not bothered
23	What did you like or dislike about this person?	

24	Was your therapist a good teacher?	Yes / No / Not really
25	Did you miss him or her when the therapy ended? Yes / No / I didn't expect to see them again / Yes, but I didn't want to be a nuisance.	
26	Do you feel you formed a friendship with your therapy that you missed when the therapy was over? Yes / No / She was just a therapist / Would have liked to stay in contact but I didn't want to be a nuisance.	
27	Do you think your therapist learned anything from you?	Yes / No / I hope so
GENERAL BENEFITS AND COSTS OF CR		
28	Would you say the therapy helped you get back on track mentally after you had a particularly bad time? Yes a lot / Yes a little / No difference / Not really / Not at all	
29	Did the therapy make you more aware of your limitations and disability?	Yes / No / Don't know
30	If it did, was this frustrating for you – something you would have preferred not to happen?	Yes / No / Don't know
31	Did the therapy make you feel better about yourself – for example give you new interests? Or any other examples?	
32	Did these effects last beyond the actual therapy?	Yes / No / Not really
33	What was the single most helpful thing for you about CR?	
34	What was the worst thing?	
SPECIFIC ABILITIES		

35	Could you tell me if CR helped with the following things and if this lasted? Please give examples if you can.	
36	Concentration Yes, at the time Yes, permanently Example:	
37	Memory Yes, at the time Yes, permanently Example:	
38	Being alert and focussed Yes, at the time Yes, permanently	
39	Do you like cooking? What is the most complicated meal you can cook?	
40	Do you like fixing things? (eg. electronics, woodwork). What is the most complicated thing you can fix?	
41	Do you like looking after other people, eg. children? How complicated is that?	
42	Could you tell me which are the most important things in helping you to live a better life for yourself: Medication CR Other therapies eg. from the hospital or CMHT Housing Having enough money If you can, please rank these in order. For example, if medication is most important, mark it '1', if housing is second most important, mark it '2' and so on.	

43	In terms of CR as a whole, did you think there was too much testing?	Too much / about right / too little
	General issues for computer CR	
44	Is there anything you would like to change about the computer programme? If so how would you change it?	
	Thank you very much for completing this interview	