Supplementary Table 1: Attitudes of Health Professionals towards Risk Communication for Genetic Susceptibility to Psychiatric Illness Survey

A: Demographic of respondents

1.	Do you work in a clinical setting?	
	o Yes	
	o No	
2.	What is your gender?	
	o Male	
	o Female	
2	What is your ago	
٥.	What is your age o 18-29	
	0 30-39	
	0 40-49	
	0 50-59	
	0 60+	
4.	What is your professional background?	
•	o Psychiatrist	
	Genetic counsellor	
	 Clinical geneticist 	
	Other (please specify)	
	o other (prease speerly	
5.	How do you predominantly spend your professional time?	
	 In a public hospital (general and/or psychiatric) 	
	 Community clinic 	
	Academic	
	o Private practice	
	o Other (please specify)	
	o other (pieuse speerry	
6.	Did you receive your training in Australia?	
	o Yes	
	 No (please name the country in which you received training)
7.	How long ago was your most recent training in psychiatric genetics?	
	 Within the last 2 years 	
	o 3-5 years ago	
	o 6-10 years ago	
	o 11-20 years ago	
	o more than 20 years ago	
	o no psychiatric genetics training	
	o no genetics training	
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B: Beliefs about the influence of heritable components on psychiatric and non-psychiatric illnesses

This section asks about your beliefs about the influence of heritable components of psychiatric and non-psychiatric diseases. Please click on the response that most closely describes your beliefs.

- 1. How much influence does genetics or heredity have on a person's mental health?
 - o None at all
 - Weak influence
 - Moderate influence
 - o Strong influence
- 2. How much of the risk for the following disorders is attributable to genetics?

a)	Huntington Disease	None	Weak	Moderate	Strong
b)	Cardiovascular disease	None	Weak	Moderate	Strong
c)	Breast cancer	None	Weak	Moderate	Strong
d)	Colon cancer	None	Weak	Moderate	Strong
e)	Bipolar disorder	None	Weak	Moderate	Strong
f)	Schizophrenia	None	Weak	Moderate	Strong
g)	Depression	None	Weak	Moderate	Strong

C: Self-rated confidence towards risk communication about genetic susceptibility to psychiatric illnesses

This section asks about how confident you feel in providing patients with risk information about genetic susceptibility to psychiatric illnesses, as well as any area that you think may be improved. In this survey 'psychiatric illness' refers to schizophrenia, bipolar disorder and major depressive disorder. Please rate your agreement with each of the following statements.

- 1. To what extent do you agree that it is your role to discuss genetic information regarding psychiatric illness with patients and their families
 - Strongly disagree
 - o Disagree
 - o Neutral
 - o Agree
 - Strongly agree
- 2. To what extent do you agree that you feel competent to discuss genetic information regarding psychiatric illness with patients and their families
 - Strongly disagree
 - o Disagree
 - Neutral
 - o Agree
 - o Strongly agree

3. In relation to psychiatric illness, to what extent do you feel that:

a)	Your professional training has prepared you to discuss genetic information regarding these psychiatric illnesses with patients and their families	Not at all strongly	A little strongly	Somewhat strongly	Strongly	Very strongly
b)	You are competent to obtain a concise family history and use this information to provide a risk assessment	Not at all strongly	A little strongly	Somewhat strongly	Strongly	Very strongly
c)	You would be competent to offer genetic tests, if they were available, for these psychiatric illnesses and interpret the results	Not at all strongly	A little strongly	Somewhat strongly	Strongly	Very strongly
d)	You are able to answer patients' questions about the genetic basis of these psychiatric illnesses	Not at all strongly	A little strongly	Somewhat strongly	Strongly	Very strongly
e)	You need to undertake research e.g. reviewing journal articles in order to answer patients' questions	Not at all strongly	A little strongly	Somewhat strongly	Strongly	Very strongly

4. In regard to expert/genetic counselling for psychiatric illness, how important are the following aspects?

a)	Taking a detailed family history	Not at all important	Not important	Neutral	Important	Very important
b)	Identifying patient beliefs	Not at all important	Not important	Neutral	Important	Very important
c)	Conveying genetic risk information clearly	Not at all important	Not important	Neutral	Important	Very important
d)	Conveying recurrence risk information	Not at all important	Not important	Neutral	Important	Very important
e)	Emphasising the role of environmental factors in disease occurrence	Not at all important	Not important	Neutral	Important	Very important
f)	Emphasising the role of genetic factors in disease occurrence	Not at all important	Not important	Neutral	Important	Very important

5.	Further training programs would aim to improve professionals' ability to approach various aspects of
	genetic counselling. In the boxes beside each option, please rank the following aspects of genetic
	counselling in order from the one you think would be least useful (rank order=1) to most useful (rank
	order=7) in benefitting from further training.

a)	Taking a detailed family history	
b)	Calculating risk information for an asymptomatic person with a family history of psychiatric disorder	
c)	Effectively communicating genetic information to patients	
d)	Effectively presenting risk values to patients	
e)	Calculating recurrence risk values from patient history	
f)	Exploring patient concerns	
g)	Providing advice to assist in patient decision-making processes	

Any additional comments:		

6. Additional training materials may be presented in various forms. Please rank the following possible training material from the one you think would be least useful (rank order=1) to most useful (rank order=5) in the boxes beside each option.

a)	Face-to-face workshop group with other health professionals and experts	
b)	Online training module	
c)	Paper based training materials	
d)	Talks or seminars with experts	
e)	Information video with role-playing and presentation of typical scenarios	

Any additional comp	ents:
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D: Clinical practice patterns

This section asks about your clinical practice patterns in regard to communication of risk information for psychiatric disorders. In this survey 'psychiatric illness' refers to schizophrenia, bipolar disorder and major depressive disorder. Please rate your agreement with each of the following statements.

- 1. To what extent do you agree that you routinely take detailed family histories of psychiatric illness during the evaluation of your patients?
 - o Strongly disagree
 - o Disagree
 - o Neutral
 - o Agree
 - o Strongly agree

2. If you knew a psychiatrist or geneticist who could provide expert/genetic counselling to patients at an increased genetic risk for a psychiatric illness, in which of the following situations would you refer the patient to that colleague and in which would you address the issue yourself?

a)	A person with a family history of one or more of these psychiatric illnesses who wonders about his/her own risk of developing the disorder	Address this myself	Refer to a colleague
b)	A person who wonders about the risk of passing the illness to his or her child/ren	Address this myself	Refer to a colleague
c)	A couple with a family history of mental illness and family planning questions	Address this myself	Refer to a colleague
d)	A couple with a family history of one or more of these psychiatric illnesses who are concerned about their child who is displaying behavioural problems	Address this myself	Refer to a colleague
e)	A pregnant couple with a family history of one or more of these psychiatric illnesses who are considering terminating the pregnancy	Address this myself	Refer to a colleague
f)	A woman who is considering taking medication for one of these illnesses during her pregnancy	Address this myself	Refer to a colleague

- 3. Are you aware of any other professional, such as a psychiatrist, clinical geneticist or genetic counsellor, who provides expert/genetic counselling to patients at increased genetic risk for a psychiatric disorder in the geographic area where you practice?
 - o Yes
 - o No

E: Perspectives on genetic information

This section assesses your perceptions of the benefits and limitations of increased knowledge of genetic information regarding psychiatric disorders. Please indicate your agreement with each of the following statements.

1. To what extent do you believe will increased knowledge of the genetic basis of these disorders influence the following:

a)	Discovering new and better treatments	No influence	Weak influence	Moderate influence	Strong influence
b)	Diagnostic clarification of affected patients	No influence	Weak influence	Moderate influence	Strong influence
c)	Predictive testing for asymptomatic patients at risk	No influence	Weak influence	Moderate influence	Strong influence
d)	Targeting of resources to at-risk populations	No influence	Weak influence	Moderate influence	Strong influence
e)	Prenatal testing to guide reproductive choices	No influence	Weak influence	Moderate influence	Strong influence
f)	Destigmatisation of psychiatric illness	No influence	Weak influence	Moderate influence	Strong influence
g)	Denial of insurance to patients with high-risk genes for psychiatric illness	No influence	Weak influence	Moderate influence	Strong influence
h)	Reduced interest in psychosocial therapies	No influence	Weak influence	Moderate influence	Strong influence
i)	Denial of resources to symptomatic patients who do not carry high-risk genes	No influence	Weak influence	Moderate influence	Strong influence
j)	Increased stigmatisation of psychiatric illness	No influence	Weak influence	Moderate influence	Strong influence
k)	Elimination of psychiatric illness through genetic selection against genes that contribute to psychiatric illness	No influence	Weak influence	Moderate influence	Strong influence