# Appendix 1: Topic lists interviews

**1.1: Topic list narrative interview patient**

Part 1: Present

* How does your life look like now, what do you do, daily activities, living situation, etc

## Part 2: Course of life

* What have been important events in your life
* Drawing of the life line
* Important relations throughout your life

## Part 3: Future

* Future in 5 years: how does that look like, what has changed, what has remained the same
* What do you need to find meaning in life

## Part 4: Resourcegroup

* Description of the composition and why
* How are the relations with and between members
* Expectations/hopes/themes to be discussed in the RG

# 1.2 Topic list final interview patient

Part 1: Reflections on the RG

* How would you describe a resource group?
* We started the RG (…) years / months ago, first the interviews with your significant others, then the planning of the meeting, and the meetings themselves. How did you experience the starting phase of the group?
	+ Meeting structure
	+ Gathering together
	+ Personal relation with your casemanager
* Most important developments in the RG
* RG versus previous care: most important change?
* What you do need to start an RG?

Part 2: Influence of the RG on your recovery process

* What does having an RG offer you? What has been its influence?
	+ Have you seen a different side of yourself?
	+ Has something been started? (social, personal, clinical recovery process). If so, what / how / why?
	+ More control over treatment? And life?
* Could you describe your new struggles, new conflicts, new challenges
* RG and moments of crisis/you are feeling severely bad
* Change in interest in the social world?

Part 3: Influence RG on relationship with the people of your group

* Course of the relationship with the people in your group / influence RG on it
	+ Normalizing the relationship
	+ Or professionalize (stigmatization? Control?)
	+ Feelings of dependence

Part 4: Good mental health care

The aim of the research is to improve care. What do you think about the most important steps that still have to be taken?

**1.3** **Topic list interview significant others informal support system**

Part 1: Reflections on the RG

* How would you describe a resource group?
* We started the RG (…) years / months ago, first the interviews with your significant others, then the planning of the meeting, and the meetings themselves. How did you experience the group?
* Most important developments in the RG
* RG versus previous care: most important change?
* Good sides of it; improvements?
* Most important role within the RG? (Do you like that/can you handle it?)
* What is needed to start an RG?

Part 2: Influence of the RG on the recovery process

* What does having an RG do with your significant other? What has been its influence?
	+ Have you seen a different side of him/her?
	+ Has something been started? (social, personal, clinical recovery process). If so, what / how/why?
	+ More control over treatment? And life?
* RG and moments of crisis/your significant other was feeling severely bad

Part 3: Influence RG on relationships

* Course of the relationship with patient/influence RG on it
	+ Normalizing the relationship
	+ Or professionalize (stigmatization? Control?)
	+ Feelings of dependence

Part 4: Influence RG on your personal well-being

* Well-being/burden of being a caretaker
	+ Experience of caretaking and supporting, can you handle it, is there enough space for yourself?
* Acceptation
	+ Feelings about psychological problems of your significant other

Part 5: Good mental health care

The aim of the research is to improve care. What do you think about the most important steps that still have to be taken?

**1.4 Topic list interview mental health professional**

Part 1: Reflections on the method

* We started the RG (…) years / months ago, first the interviews with the significant others, then the planning of the meeting, and the meetings themselves. Experiences with working according to the method.
* How would you describe a resource group/definition
* Most important developments in the RG
* RG versus previous care: most important changes in your work
* Good sides of it; improvements
* Most important role within the RG (Do you like that/can you handle it?)
* Hindering and facilitating factors
* RG and your team (implementation)
* Is the RG needed within FACT?

Part 2: Influence of the RG on the recovery process

* What does having an RG do with your patient? What has been its influence?
	+ Have you seen a different side of him/her?
	+ Has something been started? (social, personal, clinical recovery process). If so, what / how/why?
	+ More control over treatment? And life?
* RG and moments of crisis/your significant other was feeling severely bad

Part 3: Influence RG on relationships

* Course of the relationship with patient/influence RG on it
	+ Therapeutic relationship
	+ Relationship patient and his/her sign other

Part 4: Influence RG on your profession

* + Changes in your work: better/less
	+ Additions of the RG in your work

Part 5: Good mental health care

* Future of the RG
* The aim of the research is to improve care. What do you think about the most important steps that still have to be taken?