Appendix 1. Figure 1. Flowchart of the sample from baseline (T1) to third survey (T3)

Epidemiological catchment area study:

This study can be classified among the third generation of psychiatric epidemiology studies, involving an in-depth understanding of a specific area and a longitudinal follow-up of the population. It aimed to identify changes in mental health prevalence and associated variables (i.e., unmet needs, in this article) and their determinants, based on a comprehensive framework.

Catchment area: 4 neighborhoods (population of 269,720)

This setting, corresponding to an area served by a psychiatric hospital, is characterized by a high proportion of people with low incomes and affected by psychological distress. Mental health services are also delivered by two health and social service centers (created through the merger of a general hospital, local community service centers and a nursing home), sixteen community-based agencies, about 40 medical clinics and an equivalent number of private psychologists.

Selection criteria:

Age: 15-65

Residing in the study area

Agreeing to sign the consent form (signed by parents if participant aged between 15 and 17 years)

Strategy used for sample representativeness at T1:

Recruiting participants from all 4 neighbourhoods in the area Equal proportions with regard to population density Equal proportions with regard to socioeconomic status (i.e., age, gender, education)

Sampling technique (randomized sampling):

Range of 14 neighbouring addresses One participant selected per household Contact by recruiter

Interviews:

Average duration: 1.5 hrs.

Location: at participants' homes or at the Mental Health University Institute Language: French or English



Baseline sample (T1) June 2007 to December 2008

N = 2434

Follow-up sample (T2) June 2009 to December 2010

N = 1823

Follow-up sample (T3) January 2012 to July 2013

N = 1305 + 1029 newly enrolled = 2334

Lost to follow-up: 611 individuals (25.1%):

Refusal: 138 (5.7%)

Moved outside the catchment area: 230 (9.4%) Not reachable: 231 (9.4%)

> Deceased: 12 (0.5%) Retention rate: 75%

Lost to follow-up: 518 individuals (28%):

Refusal: 133 (7%)

Moved outside the catchment area: 236 (13%)

Not reachable: 137 (8%)

Deceased: 10 (1%) Excluded for mental disability: 2 (0.1%)

Retention rate: 72%

Appendix 2: Table 1. Measurement instruments		
	Name	Description
1	Canadian Community Health Survey (CCHS) 1.2 (1)	Survey questionnaire for socio-demographic characteristics; Yes/No and multiple-choice questions; Likert and non-Likert scale questions
2	Satisfaction with Life Domains Scale (SLDS) (2)	20 items organized in 5 domains: daily living and social relationships, living environment, autonomy, intimate relationships, and leisure (Min = 20; Max = 140). Higher = positive. Cronbach's alpha = .92
3	Sense of Community Index Scale (SCS) (3)	9 items; 2- or 3-point Likert scale questions (Min = 9; Max = 21). Higher = negative. Cronbach's alpha = .74
4	Community Involvement Scale (CIS) (4)	6 items; Yes/No and 4-point Likert scale questions; Higher = negative. Cronbach's alpha = .7389
5	Resident Disempowerment Scale (RDS) (5)	3 items; 10 Likert scale (Min = 3; Max = 30). Higher = positive
6	Sense of Collective Efficacy (SCE) (6)	10 items (social cohesion and informal social control); 5 Likert scale question (Min = 10; Max = 50). Higher = negative. Cronbach's alpha = .8091
7	Neighborhood Disorder Scale (NDS) (5)	11 items; 10 Likert scale questions (Min = 1; Max = 110). Higher = negative. Cronbach's alpha = .84
8	Neighborhood Physical Conditions Scale (NPC) (3)	7 items; 10 Likert scale questions (Min = 10; Max = 70). Higher = positive. Cronbach's alpha = .87
9	Neighborhood Behavior Scale (NBS) (7)	5 items; 9 Likert scale questions (Min = 9; Max = 45). Higher = positive. Cronbach's alpha = .78
10	Neighborhood safety subscale of the International Physical Activity Questionnaire (IPAQ-E) (8)	2 items (safety from crime during the day and the night) (Min = 2; Max = 8). Higher = negative. Cronbach's alpha = .71
11	Social Provisions Scale (SPS) (9)	24 items; 4- point Likert scale questions (Min = 24; Max = 96). Cronbach's alpha = .92
12	Composite International Diagnostic (CIDI and CIDI-SF) (1)	Screening for mental disorders; used in the WMH 2000; Limited to most frequent mental disorders (depression, mania, general anxiety disorder, posttraumatic stress disorder, agoraphobias, traumatic stress disorder, anxiety disorders: social phobia, panic disorder). Screening for substance disorders (alcohol and drugs, based on the CIDI-Short Form - SF).
13	Modified Observed Aggression Scale (MOAS) for aggressive behaviors (10)	Assess 4 categories of aggressive behavior: verbal aggression, aggression against property, self-inflicted aggression, physical aggression. Yes/No questions.
14	K-10 Psychological Distress Scale (11)	10 five-point Likert dimensions (Min = 0; Max = 40). Higher = negative. Cronbach's alpha = .93
15	Barratt Impulsivity Scale (12)	30 four-point scale dimensions organized in three categories: motor impulsivity, cognitive impulsivity, impulsivity due to lack of planning (Min = 30; Max = 120). Higher = negative
16	Montreal Cognitive Assessment (MOCA) (13)	Screening for mild cognitive dysfunction (Min = 0; Max = 30). Higher = negative
17	Mental Health Services Questionnaire, based on CCHS 1.2.	Yes/No and multiple-choice questions; Likert and non-Likert scale questions
18	Questionnaire on life events (14)	25 4-point scale dimensions organized in 5 major themes: events subsequently assembled to income, love, links with family and friends, housing, experiences aggression.

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