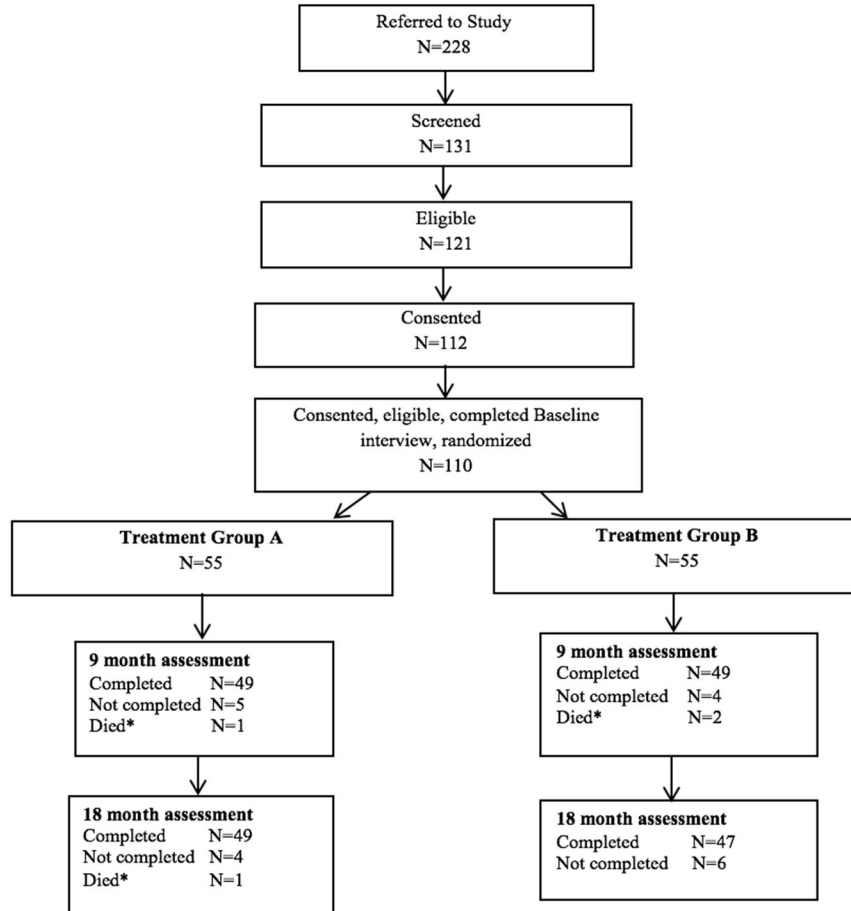


**SFigure 1. Consort chart of recruitment and follow-up process.**



\*Causes of death: lung infection, pulmonary embolism, brain tumor, cardiac event.

**STable 1a. Domains and items from WHO-QoL-BREF**

<b>Domains</b>	<b>Items</b>
General items	1. How would you rate your quality of life? 2. How satisfied are you with your health?
Physical Health	3. To what extent do you feel that physical pain prevents you from doing what you need to do? 4. How much do you need any medical treatment to function in your daily life? 10. Do you have enough energy for everyday life? 15. How well are you able to get around? 16. How satisfied are you with your sleep? 17. How satisfied are you with your ability to perform your daily living activities? 18. How satisfied are you with your capacity for work?
Psychological Health	5. How much do you enjoy life? 6. To what extent do you feel your life to be meaningful? 7. How well are you able to concentrate? 11. How much are you able to accept your bodily appearance? 19. How satisfied are you with yourself? 26. How often do you have negative feelings such as blue mood, despair, anxiety, depression?
Social Relationships	20. How satisfied are you with your personal relationships (friends, relatives, acquaintances, colleagues)? 21. How satisfied are you with your sex life? 22. How satisfied are you with the support you get from your friends?
Environment	8. How safe do you feel in your daily life? 9. How healthy is your physical environment? (climate, noise, pollution) 12. Do you have enough money to meet your needs? 13. How much is the information that you need in your day-to-day life available to you? 14. To what extent do you have the opportunity for leisure activities? 23. How satisfied are you with the conditions of your living place? 24. How satisfied are you with your access to health services? 25. How satisfied are you with your transport?

**STable 1b. Items and questions from CAN**

<b>Items</b>	<b>Question</b>
Accommodation	Does the person have a current place to stay?
Food	Does the person have difficulty in getting enough to eat?
Looking after home	Does the person have difficulty looking after the home?
Self-care	Does the person have difficulty taking care of him/herself?
Daytime activities	Does the person have difficulty with regular, appropriate daytime activities?
Physical health	Does the person have any physical disability or any physical illness?
Psychotic symptoms	Does the person have any psychotic symptoms?
Information	Has the person had clear verbal or written information about their health condition and treatment?
Psychological distress	Does the person suffer from current psychological distress?
Safety to self	Is the person a danger to him- or herself?
Safety to others	Is the person a current or potential risk to other people's safety?
Alcohol	Does the person drink excessively, or have a problem controlling his or her drinking?
Drugs	Does the person have problems with drug misuse?
Company	Does the person need help with social contact?
Intimate relationships	Does the person have any difficulty in finding a partner or maintaining a close relationship?
Sexual expression	Does the person have problems with his or her sex life?
Child care	Does the person have difficulty looking after his or her children?
Education	Does the person lack basic skills in numeracy and literacy?
Telephone	Does the person have any difficulty in getting access to or using a telephone?
Transport	Does the person have any problems using public transport?
Money	Does the person have problems managing his or her money?
Benefits	Is the person receiving all the benefits that he or she is entitled to?

### STable 1c. Fidelity items and results.

Instructions: From the checklists, transfer each item’s percentage for Rio de Janeiro and Santiago. For each city, add the percentages, calculate the average percentage and select the fidelity score from the ratings likert scale.

Ratings Likert Scale				
1	2	3	4	5
<40%	40%-54%	55%-69%	70%-84%	≥85%
Minimal	Poor	Fair	Very Good	Excellent

Fidelity Items*	Item % by city	
	Rio	Santiago
Early Engagement	28	28
Early Intensive Contact	48	47
Early Community-Based Contact	27	49
Phased Intervention	97	90
Focused	100	100
Stepping Back for Try-Out	62	71
Stepping Back for Sustainability	36	71
Time-Limited	100	100
Continuity of Care	100	100
Progress Notes	100	100
Phase Plans	100	100
Closing Note	100	100
Peer Support Worker Role	100	100
Community Mental Health Worker Role	100	100
Clinical Supervision Role	100	100
Fieldwork Coordination Role	100	100
Appropriate Caseload Size	100	100
Team Supervision Meetings	84	100
Caseload Review	100	100
Coordinator to Supervisor Communication	100	100
Sum of item percentages	1682	1756
Average percentage:	84.1	87.8
<b>Fidelity Rating:</b>	<b>4</b>	<b>5</b>

\* For example, the item “Community Based” reflects whether in Phase One (Initiation) the team had multiple meetings in the community with the participant and informal/formal supports. Ratings were made by FM in Santiago and KS in Rio de Janeiro, based on review of records kept by the CTI-TS teams, observations of team meetings, focus groups with CT-TS workers, and interviews with supervisors.

## Supplement 1d. Sample size calculation

Since this was a pilot RCT, sample size was based on the precision (or margin of error) of our outcomes. Here we describe how precision was calculated for the WHO-QOL BREF. This formula uses the standard deviation (SD=15) for WHO-QOLBREF (19) total score as previously reported in the literature and an intra-class correlation coefficient of .01.

If we consider 30 subjects in treatment group in Santiago are correlated  $\Rightarrow$  No of independent

$$\text{observations in treatment group in Santiago} = \frac{30}{1 + (30 - 1)(.01)} = 23$$

Similarly, 25 subjects in treatment group in Rio are correlated  $\Rightarrow$  No of independent observations in treatment

$$\text{group in Rio} = \frac{25}{1 + (25 - 1)(.01)} = 20$$

Total number of independent observations per arm = 43

$$\text{Width of confidence interval} = 1.96(15) \sqrt{\frac{1}{43} + \frac{1}{43}} = 6.3$$

**STable 2. Baseline characteristics of the participants recruited in the trial by group and city**

	Rio (N=50)				Santiago (N=60)			
	CTI-TS		UC		CTI-TS		UC	
	n	%	n	%	n	%	n	%
Age								
21-29	6	60	4	40	7	43.8	9	56.3
30-39	6	50	6	50	10	62.5	6	37.5
40-49	6	42.9	8	57.1	8	53.3	7	46.7
50-65	7	50	7	50	5	38.5	8	61.5
Gender								
Female	16	55.2	13	44.8	14	43.8	18	56.3
Male	9	42.9	12	57.1	16	57.1	12	42.9
Diagnosis								
Non-affective psychosis	17	43.6	22	56.4	13	48.1	14	51.9
Affective psychosis	8	72.7	3	27.3	17	51.5	16	48.5
Course type								
Continuous	10	41.7	14	58.3	6	40	9	60
Episodic	8	50	8	50	18	54.5	15	45.5
Other	4	57.1	3	42.9	6	50	6	50
Education								
No school or incomplete	11	47.8	12	52.2	9	45	11	55
Some high school	1	16.7	5	83.3	3	37.5	5	62.5
High school grad	8	57.1	6	42.9	9	52.9	8	47.1
More than high school	3	75	1	25	9	60	6	40
Living situation								
Living alone	5	50	5	50	4	40	6	60
Living with spouse/partner	4	66.7	2	33.3	7	43.8	9	56.3
Living with family	13	46.4	15	53.6	18	54.5	15	45.5
Other living situation	3	50	3	50	1	100	0	0
Employment								
Employed	1	50	1	50	7	38.9	11	61.1
Occasional work	1	33.3	2	66.7	10	71.4	4	28.6
Retired/Pensioner	4	50	4	50	2	33.3	4	66.7
Unemployed	19	51.4	18	48.6	11	50	11	50

**STable 3. Baseline adjusted analyses of primary outcomes WHO-QOL and CAN**

	Baseline adjusted*		
	Estimate **	95% CI	p
WHO-QOL			
How would you rate your quality of life?	-.02	-.21, .18	.875
How satisfied are you with your health?	.11	.09, -.077	.253
Dimensions			
Physical	-.73	-5.35, 3.89	.757
Psychological	-.27	-7.06, 6.53	.938
Social	1.73	-6.14, 9.61	.666
Environment	.13	-5.35, 5.61	.964
Recreation	-.23	-11.43, 11.01	.969
CAN mean total ***	.11	-.43, .21	.20

\* This estimate compares means between CTI-TS and UC participants on WHOQOL and CAN items at 18 months adjusted for baseline score, city, age, gender, diagnosis, course type, education, living situation, and employment.

For WHO-QoL, each individual item is scored from 1 to 5 and then transformed linearly to a 0–100-scale; higher means represent better quality of life.. For CAN, the scores range from 0–9 or more unmet needs; higher means more unmet needs.

\*\* The UC group is the reference for this estimate.

\*\*\* Fourth-square root transformation.

**STable 4. Bivariate analysis for primary outcomes 18 months vs baseline within each arm\***

<b>WHO-QoL</b>	<b>CTI-TS</b>			<b>UC</b>		
	Baseline (n=55)	18 months (n=49)	p-values for paired t- student	Baseline (n=55)	18 months (n=47)	p-values for paired t- student
How would you rate your quality of life?	2.9	3.3	.090	2.6	3.2	<.001
How satisfied are you with your health?	2.6	3.3	.057	2.6	3.1	.112
<b>Dimensions</b>						
Physical	58.1	61.6	.200	51.3	59	.008
Psychological	48.6	56.6	.013	39.8	53.9	<.001
Social	50	55.3	.099	49.1	57	.056
Environment	52.8	58.6	.012	48.4	56.9	.003
Recreation	49.6	52.1	.340	44.1	50.4	.045
<b>CAN</b>	Baseline (n=55)	18 months (n=40)	p-values for paired t- student	Baseline (n=55)	18 months (n=39)	p-values for paired t- student
Mean of number of unmet needs	1.71	.61	.011	1.91	.41	<.0001

\*Here we compare means between CTI-TS and UC participants on WHOQOL and CAN items at 18 months  
For WHO-QoL, each individual item is scored from 1 to 5 and then transformed linearly to a 0–100-scale; higher means represent better quality of life. For CAN, the scores range from 0–9 or more unmet needs; higher means more unmet needs.