

Supplementary table 1. Descriptive data of the initial 44 item pool

Item	Title	Frequencies (%)				Asymmetry	Kurtosis
		Totally agree	Agree	Disagree	Totally disagree		
1	The possibility that people with severe mental disorders have children should be regulated.	36.4	34.7	23.2	5.7	.496	-.733
*2	<i>Even in the most serious episodes patients must be involved in the decisions.</i>	1.5	5.9	42.0	50.6	1.022	1.046
3	<i>It is possible to recover without the intervention of a professional.</i>	5.3	31.7	44.5	18.5	.136	-.554
4	<i>I believe that one should not be involuntarily hospitalised if they do not pose a threat to the integrity of third parties.</i>	4.8	37.9	31.2	26.1	-.017	-1.056
*5	<i>Coordination with community leisure and citizen participation services should be a fundamental part of treatment.</i>	1.0	1.0	20.3	77.6	2.397	7.158
6	Sometimes it is necessary to mechanically restrain patients.	19.5	27.5	44.4	8.6	-.217	-.858
*7	<i>The patients' perspective should be considered in the understanding of mental disorders.</i>	.2	.8	17.8	81.1	2.166	5.098
8	Patients with severe mental disorders require clearer guidelines than other patients.	12.5	39.7	37.4	10.4	.030	-.579
9	A hospital admission is a sign of failure for the professional that takes charge of the case.	33.3	50.7	11.3	4.6	.805	.516
10	Mental disorders are diseases like any other.	13.7	31.7	32.1	22.5	-.096	-1.008

Item	Title	Frequencies (%)				Asymmetry	Kurtosis
		Totally agree	Agree	Disagree	Totally disagree		
11	Professionals should be given higher priority than patients when concerning decisions involving their treatment.	40.0	47.8	9.9	2.3	.797	.516
12	<i>Individuals incapacitated by severe mental health problems should have the right to vote.</i>	2.5	12.4	39.3	45.8	.865	.171
13	I believe that when a patient carries out an aggressive act it is due to their mental disorder.	32.1	55.0	10.9	1.9	.591	.463
14	Declaring someone with a severe mental disorder incapacitated is a good way of taking care of them.	31.6	48.5	18.6	1.3	.360	-.509
15	I believe that individuals with mental disorders now have the same rights as other people.	30.2	42.8	13.2	13.8	.648	-.564
16	I believe that coercive measures are currently applied only when necessary.	22.9	54.1	20.6	2.3	.328	-.143
**17	<i>A person can recover even if they still display symptoms.</i>	.4	1.9	49.3	48.4	.521	.129
**18	The obtainment of a mental health professional qualification should be restricted for individuals with psychiatric records.	49.1	45.1	4.4	1.5	.991	1.286
**19	To prevent the misuse of services, consultations of patients with psychiatric records in other specialties should be controlled.	51.1	40.0	8.1	.8	.889	.314

Item	Title	Frequencies (%)				Asymmetry	Kurtosis
		Totally agree	Agree	Disagree	Totally disagree		
*20	Most individuals with mental health problems have a lower intellectual capacity than the general population.	66.9	28.3	2.9	1.9	1.794	3.612
21	The family relationships of individuals with mental disorders always have an underlying pathology.	27.5	48.2	21.4	2.9	.378	-.377
*22	<i>Contact with recovered patients should be a fundamental part of mental health training.</i>	1.3	1.9	37.3	59.5	1.335	2.429
23	<i>I believe that when a patient behaves aggressively it is due to the situations, that occur for example in involuntary admissions.</i>	11.9	47.0	33.5	7.5	-.175	-.366
24	<i>I would feel comfortable making friends with someone with a severe mental disorder.</i>	2.5	10.8	52.9	33.8	.695	.541
25	I am uncomfortable with patients who regularly use emergency services.	39.0	48.1	12.0	.8	.538	-.225
*26	If a patient questions the treatment this is a sign that the disorder is of a greater severity.	55.6	39.4	3.1	1.9	1.311	2.191
27	People with severe mental disorders always require support to be able to live independently.	34.2	47.2	15.7	2.9	.601	-.072
28	Objective tests should be prioritised over the professionals' and patients' opinion when presenting a case.	16.1	32.0	43.0	8.9	-.172	-.708

Item	Title	Frequencies (%)				Asymmetry	Kurtosis
		Totally agree	Agree	Disagree	Totally disagree		
*29	<i>Support from other people with mental disorders should be integrated into the mental health care system.</i>	1.5	4.6	44.7	49.2	.993	1.246
30	<i>I would be comfortable if a person with a mental disorder were a teacher in a school.</i>	2.1	12.3	52.4	33.2	.606	.283
**31	Patients with mental disorders unjustifiably visit other health services.	41.9	51.4	6.3	.4	.491	-.057
**32	<i>Social inequalities are as important as psychological and biological factors in the genesis of mental disorders.</i>	2.7	8.4	43.9	45.0	.975	.818
33	Respecting the patients' dignity is important, but at times some aspects of the treatment must be flexible.	29.1	33.9	30.9	6.1	.209	-.951
34	<i>Greater importance should be placed on promoting the patient's independence rather than reducing the patient's symptoms.</i>	.8	11.2	53.1	34.9	.458	-.056
**35	At a glance I can distinguish a person with mental health problems.	40.0	53.7	5.2	1.0	.629	.732
*36	A hospital admission is a sign of a patient's failure.	57.8	39.5	1.9	.8	1.104	1.599
37	If there are not enough staff, mechanical restraints are the only way to manage violent situations.	37.4	48.1	12.8	1.7	.613	.011
38	When dealing with patients it is important for me not to get emotionally involved.	32.4	45.4	19.7	2.5	.448	-.441

Item	Title	Frequencies (%)				Asymmetry	Kurtosis
		Totally agree	Agree	Disagree	Totally disagree		
39	Some patients will never be able to recover.	29.7	41.7	26.1	2.5	.257	-.799
40	In my clinical practice I try to leave my personal values aside.	27.2	41.1	25.9	5.7	.332	-.661
**41	The length of the driving license should be restricted to patients with a history of psychiatric disorders, even if they do not take medication.	45.2	45.2	8.8	.8	.713	.097
**42	The priority of the treatment should be to alleviate the symptomatology rather than adhere to the patient's preferences.	38.6	52.8	7.3	1.3	.647	.578
**43	<i>Collecting the preferences of patients in stable phase with respect to their treatment in acute phase would avoid coercive measures.</i>	.4	3.2	44.0	52.4	.746	.298
44	For the most part, I believe that mental health professionals work collaboratively with patients.	9.2	40.0	43.2	7.5	-.081	-.366

Italicized items are considered reverse. * Removed due to asymmetry and kurtosis scores. ** Removed due to low discriminative capacity (90% of the cases included in one of the two halves of the Likert scale).

Supplementary table 2. Evolution of confirmatory factor analysis fit and discrimination parameters

	MFTS	CFI	TLI	RMSEA	SRMR	IRT / MIRT
CFAs analysing the unidimensionality of the whole structure						New item discrimination***
Unidimensional core structure	479*	.798	.772	.069	.063	
Unidimensional core structure + item 11	507*	.809	.787	.066	.061	1.843
Unidimensional core structure + item 13	505*	.800	.777	.066	.061	0.824
Unidimensional core structure + item 14	516*	.809	.787	.067	.061	1.765
<i>Unidimensional core structure + item 21**</i>	<i>539*</i>	<i>.779</i>	<i>.753</i>	<i>.069</i>	<i>.065</i>	<i>0.413</i>
Unidimensional core structure + item 33	512*	.799	.775	.067	.061	1.006
Unidimensional core structure + item 37	522*	.794	.770	.067	.062	0.960
Unidimensional core structure + item 39	513*	.804	.781	.067	.062	1.266
Unidimensional final structure (25 items)	704*	.821	.805	.059	.057	
CFAs considering each substructure separately						New item discrimination****
Core structure (19 items)	298*	.906	.890	.048	.051	Unidim. / Multidim.
Core structure + item 11 (Paternalism)	341*	.900	.884	.049	.052	1.402 / 1.164
Core structure + item 13 (Justifying beliefs)	324*	.905	.889	.046	.051	0.735 / 0.723
Core structure + item 14 (Justifying beliefs)	362*	.891	.873	.052	.052	1.223 / 1.205
<i>Core structure + item 21 (Discrimination)</i>	<i>351*</i>	<i>.888</i>	<i>.870</i>	<i>.050</i>	<i>.055</i>	<i>0.643 / 0.625</i>
Core structure + item 33 (Paternalism)	336*	.899	.883	.048	.051	0.907 / 0.914
Core structure + item 37 (Coercion)	342*	.896	.879	.049	.052	0.898 / 0.932
Core structure + item 39 (Justifying beliefs)	363*	.886	.868	.052	.054	0.758 / 0.744
Final structure (25 items)	590*	.866	.851	.051	.053	
Unidimensionality of final subscales						
Justifying beliefs (items 3, 10, 13, 14, 15, 16, 39 and 44)	70*	.910	.874	.073	.048	
Coercion (items 4, 6, 23, 34, and 37)	10	.980	.959	.049	.029	
Paternalism (items 1, 8, 11, 27, 28, 33, 38, and 40)	61*	.914	.880	.067	.046	
Discrimination (items 12, 24, 25, and 30)	2	1	.999	.011	.014	

MFTS: Minimum Function Test Statistic, CFI: Comparative Fix Index, TLI: Tucker Lewis Index, RMSEA: Root Mean Square Error of Approximation, SRMR: Standardized Root Mean Square Residual. IRT: Item Response Theory, MIRT: Multidimensional Item Response Theory. Core structure: justifying beliefs (items 3, 10, 15, 16, 44), coercion (items 4, 6, 23, 34), paternalism (items 1, 8, 27, 28, 38, 40) and discrimination (items 12, 24, 25, 30). *p<.0001.**Item 21 was excluded as it does not improve fit and discrimination parameters are generally low. Discrimination for items added using unidimensional IRT unconstrained latent variable models within the whole model (***) and within each substructure unidimensional or using confirmatory MIRT (****).

English Version of the Beliefs and Attitudes towards Mental Health service users' rights Scale

BELIEFS AND ATTITUDES TOWARDS MENTAL HEALTH SERVICE USERS' RIGHTS SCALE				
<i>In relation to patients with mental health problems and as a professional I think ...</i>	1 Totally disagree	2 disagree	3 Agree	4 Totally agree
1. The possibility that people with severe mental disorders have children should be regulated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It is possible to recover without the intervention of a professional.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I believe that one should not be involuntarily hospitalised if they do not pose a threat to the integrity of third parties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sometimes it is necessary to mechanically restrain patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Patients with severe mental disorders require clearer guidelines than other patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Mental disorders are diseases like any other.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Professionals should be given higher priority than patients when concerning decisions involving their treatment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Individuals incapacitated by severe mental health problems should have the right to vote.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I believe that when a patient carries out an aggressive act it is due to their mental disorder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Declaring someone with a severe mental disorder incapacitated is a good way of taking care of them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I believe that individuals with mental disorders now have the same rights as other people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I believe that coercive measures are currently applied only when necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I believe that when a patient behaves aggressively it is due to the situations, that occur for example in involuntary admissions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I would feel comfortable making friends with someone with a severe mental disorder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. I am uncomfortable with patients who regularly use emergency services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. People with severe mental disorders always require support to be able to live independently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Objective tests should be prioritised over the professionals' and patients' opinion when presenting a case.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I would be comfortable if a person with a mental disorder were a teacher in a school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Respecting the patients' dignity is important, but at times some aspects of the treatment must be flexible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Greater importance should be placed on promoting the patient's independence rather than reducing the patient's symptoms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. If there are not enough staff, mechanical restraints are the only way to manage violent situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. When dealing with patients it is important for me not to get emotionally involved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Some patients will never be able to recover.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. In my clinical practice I try to leave my personal values aside.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. For the most part, I believe that mental health professionals work collaboratively with patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Spanish Version of the Beliefs and Attitudes towards Mental Health service users' rights Scale

ESCALA SOBRE ACTITUDES Y CREENCIAS PROFESIONALES EN SALUD MENTAL				
<i>En relación a pacientes con problemas de salud mental y como profesional pienso que...</i>	1 Totalmente en desacuerdo	2 En desacuerdo	3 De acuerdo	4 Totalmente de acuerdo
1. Se debería regular la posibilidad de que las personas con trastornos mentales severos tengan hijos.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Es posible recuperarse sin la intervención de un profesional.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Creo que no se debería hospitalizar involuntariamente si no hay peligro para la integridad de terceras personas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Las contenciones mecánicas a veces son necesarias.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Los pacientes con trastorno mental severo necesitan pautas más claras que el resto .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Los trastornos mentales son enfermedades como cualquier otra.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Los profesionales debemos tener mayor prioridad que los pacientes para tomar decisiones sobre su tratamiento.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Las personas incapacitadas por problemas de salud mental severos deberían tener derecho a votar.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Creo que cuando un paciente lleva a cabo una agresión es por causa de su trastorno mental.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Una incapacitación es una buena manera de hacerse cargo de una persona con un trastorno mental severo.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Creo que las personas con trastorno mental tienen hoy en día los mismos derechos que el resto de personas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Creo que actualmente se aplican medidas coercitivas sólo cuando es necesario.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Creo que cuando un paciente lleva a cabo una agresión es por causa de las situaciones que se dan por ejemplo en los ingresos involuntarios.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Me sentiría cómodo haciéndome amigo de alguien con un trastorno mental severo.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Me incomodan los pacientes que frecuentan los servicios de urgencias.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Las personas con trastorno mental severo siempre necesitan apoyo para poder hacer vida autónoma.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Deberían priorizarse pruebas objetivas sobre las opiniones de profesional y paciente en el planteamiento de un caso.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Me sentiría cómodo si una persona con trastorno mental fuera profesor en una escuela.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. El respeto a la dignidad de los pacientes es importante, pero a veces el tratamiento exige ser flexible con algunos aspectos.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Se debería priorizar la autonomía de los pacientes por encima de la disminución de síntomas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Si no hay personal suficiente, las contenciones mecánicas son la única manera de poder gestionar situaciones violentas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. En el trato con los pacientes para mi es importante no implicarme emocionalmente.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Algunos pacientes no podrán recuperarse nunca.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. En mi práctica clínica intento dejar mis valores personales de lado.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Creo que la mayor parte de los profesionales de salud mental trabajamos de un modo colaborativo con los pacientes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>