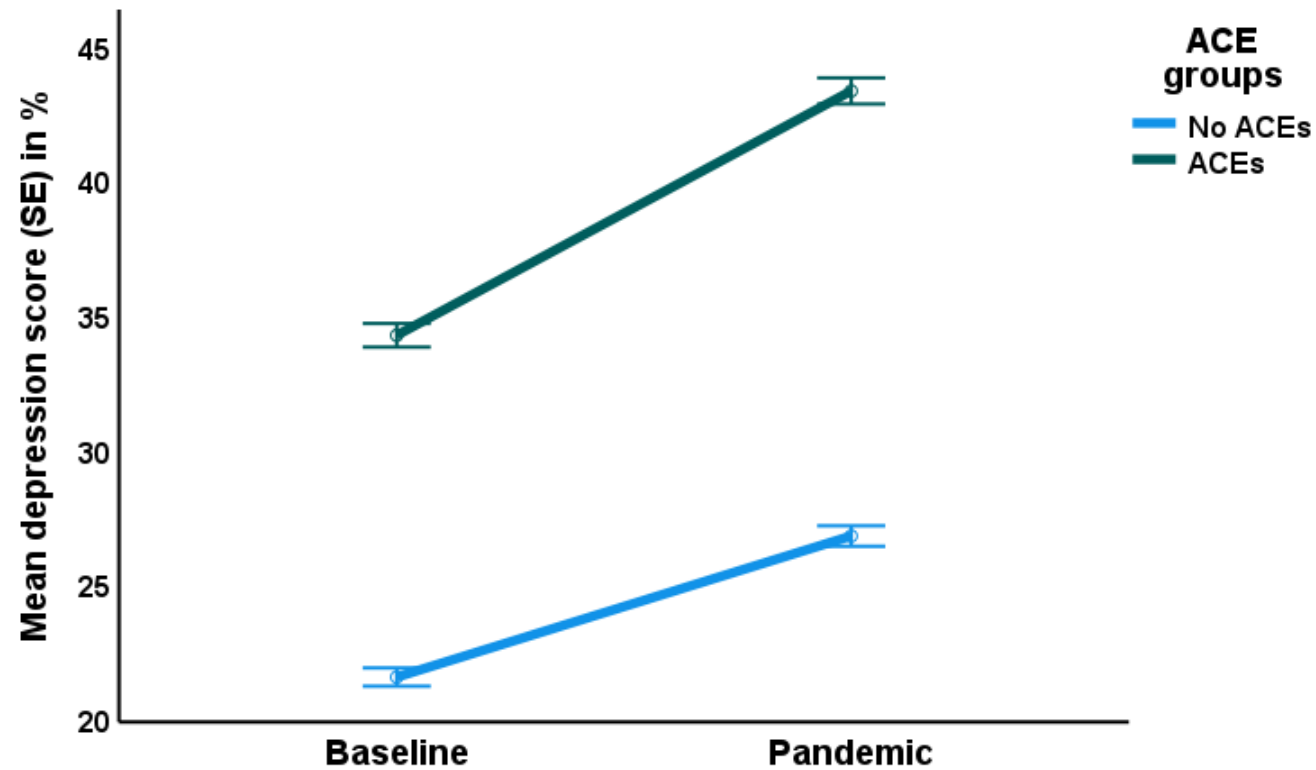


ELECTRONIC SUPPLEMENTARY FILE 2 (ESF2)**Predictors of increased affective symptoms and suicidal ideation during the COVID-19 pandemic: a large-scaled study on 14,271 Thai adults.**

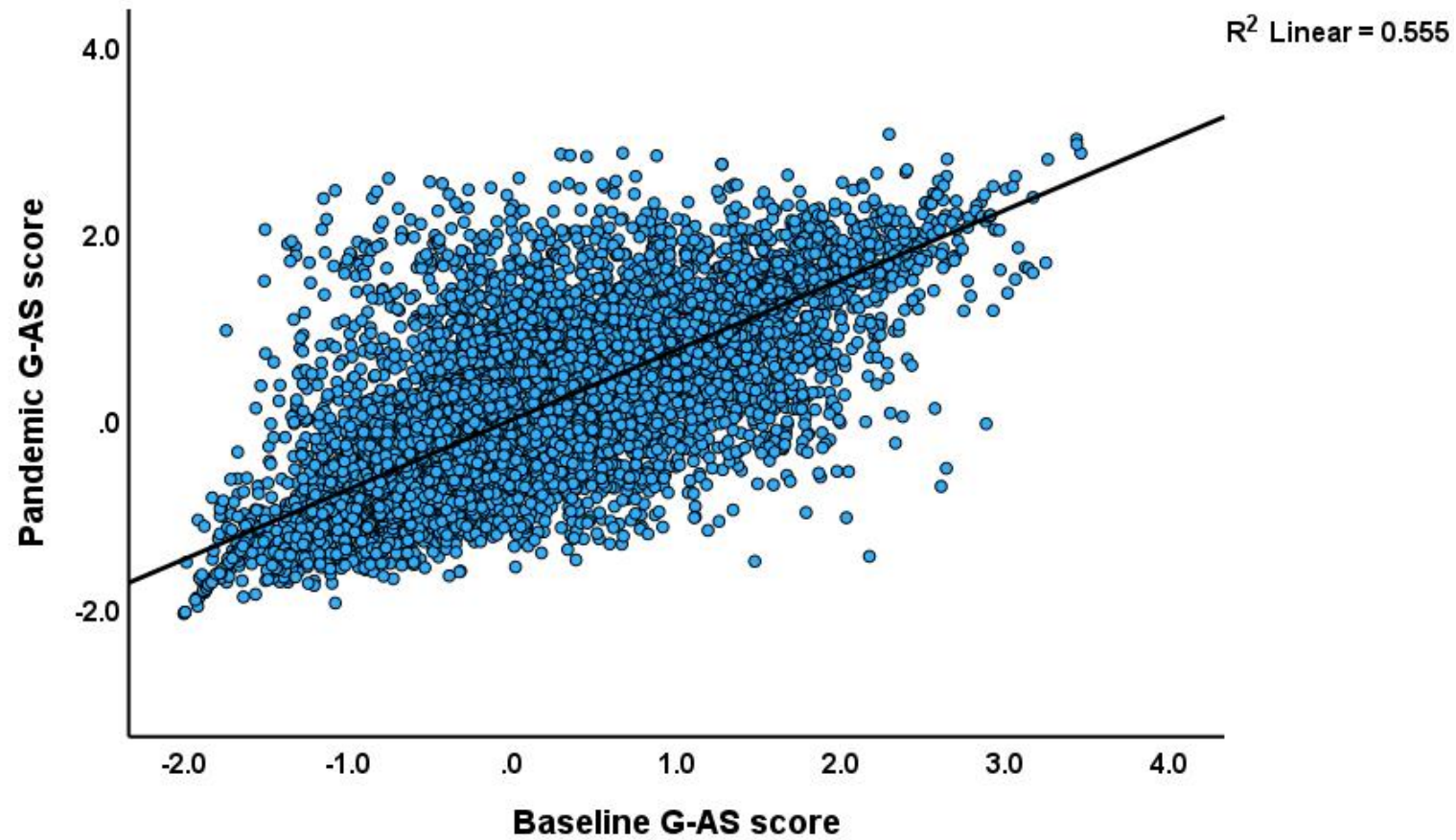
(1) Thitiporn Supasitthumrong*, (1-7) Michael Maes*, (1) Chavit Tunvirachaisakul, (1) Teerayuth Rungnirundorn, (5,6) Bo Zhou, (5,6) Jing Li, (1) Sorawit Wainipitapong, (1) Anchalita Ratanajaruraks, (1) Chaichana Nimnuan, (1) Buranee Kanchanatawan, (8) Trevor Thompson, (9-12) Christoph U. Correll**, (11,13-15) Marco Solmi**.

* Joint first authorship.

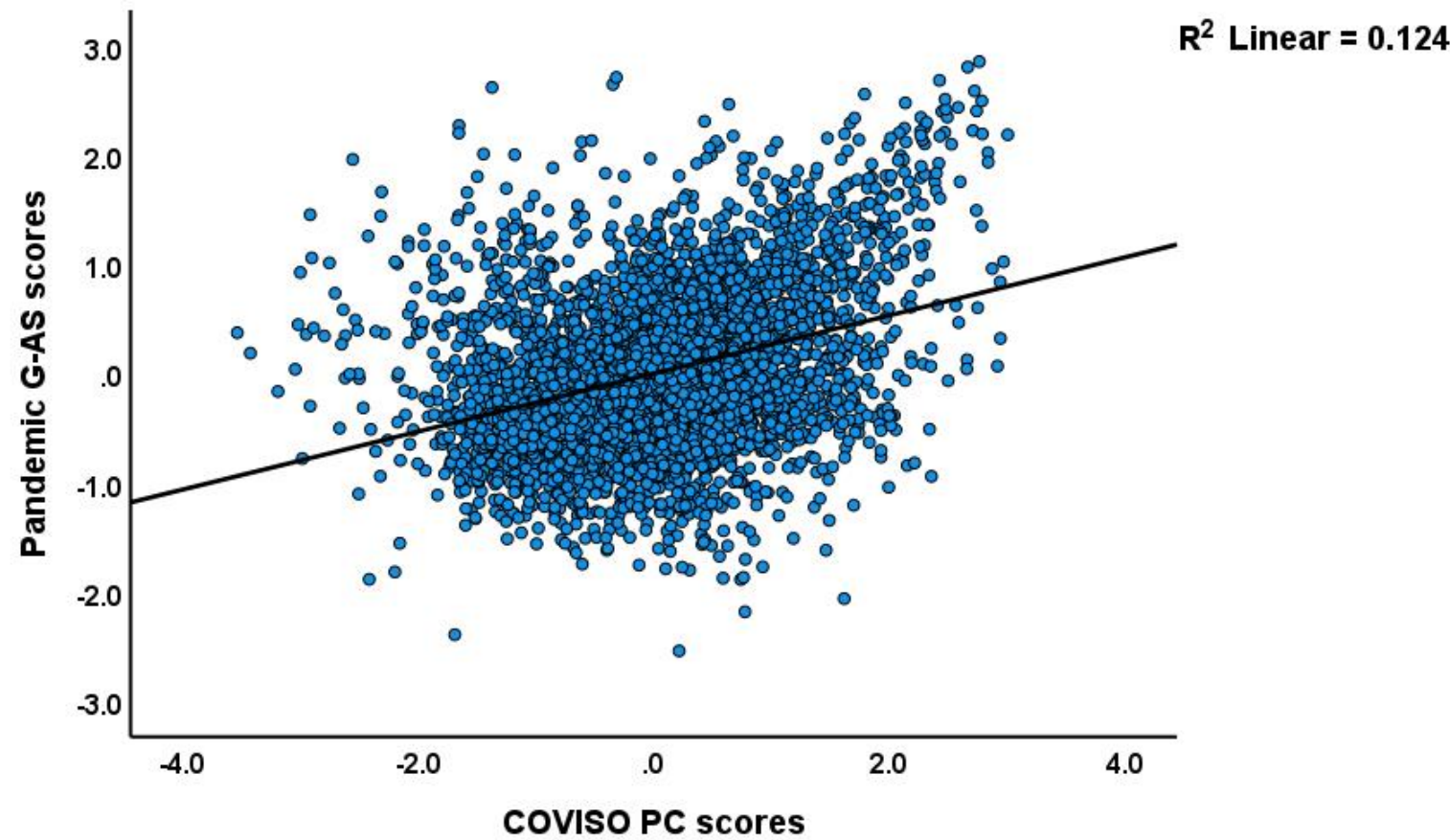
** Joint last authorship



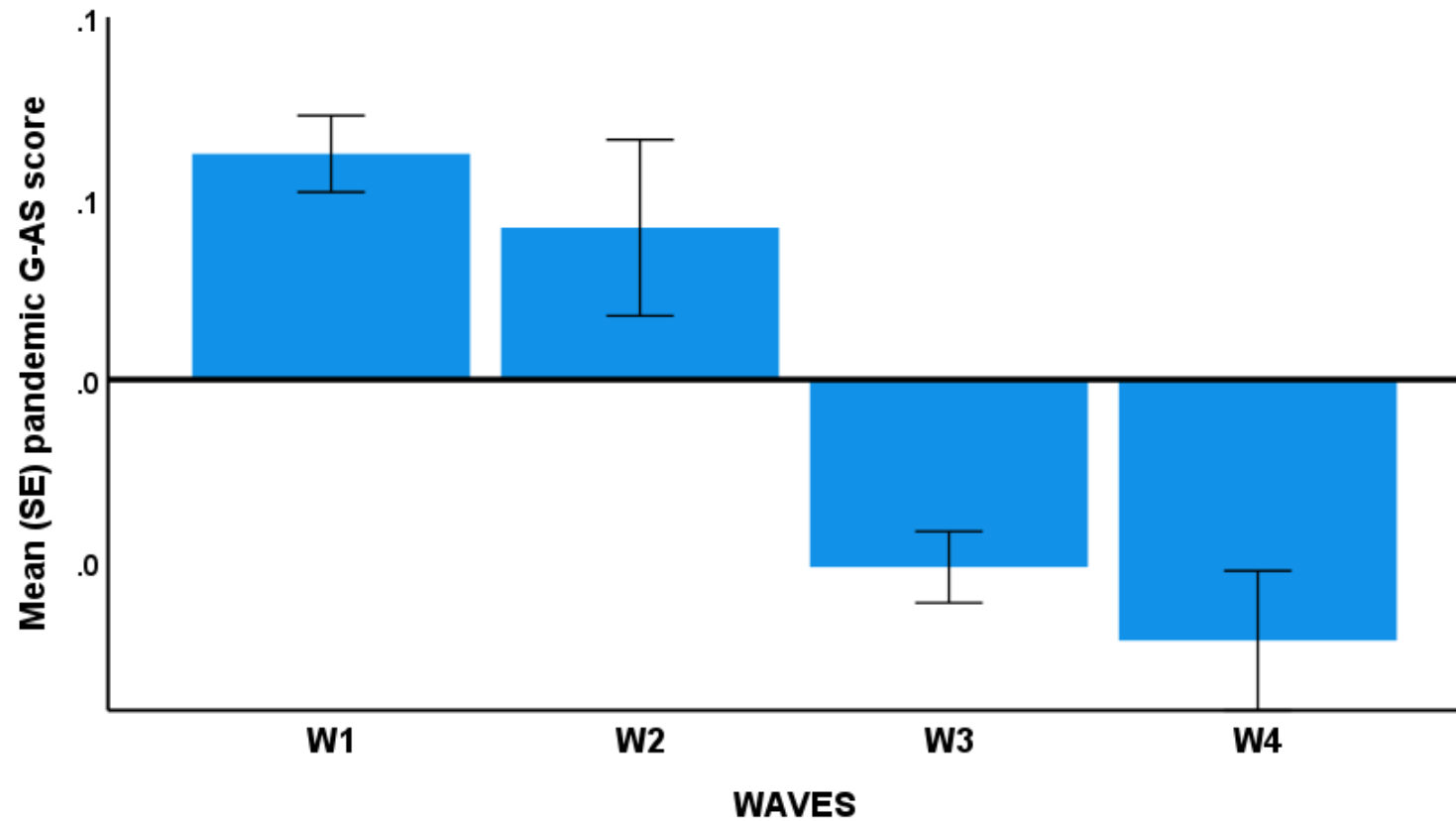
ESF2, Figure 1. Mean (SE) depression scores in subjects with and without adverse childhood experiences (ACEs). The interaction pattern time (baseline – pandemic) and ACE groups is significant ($p < 0.001$). The response in depressive complaints during the pandemic is higher in subjects with one or more ACEs than in those without.



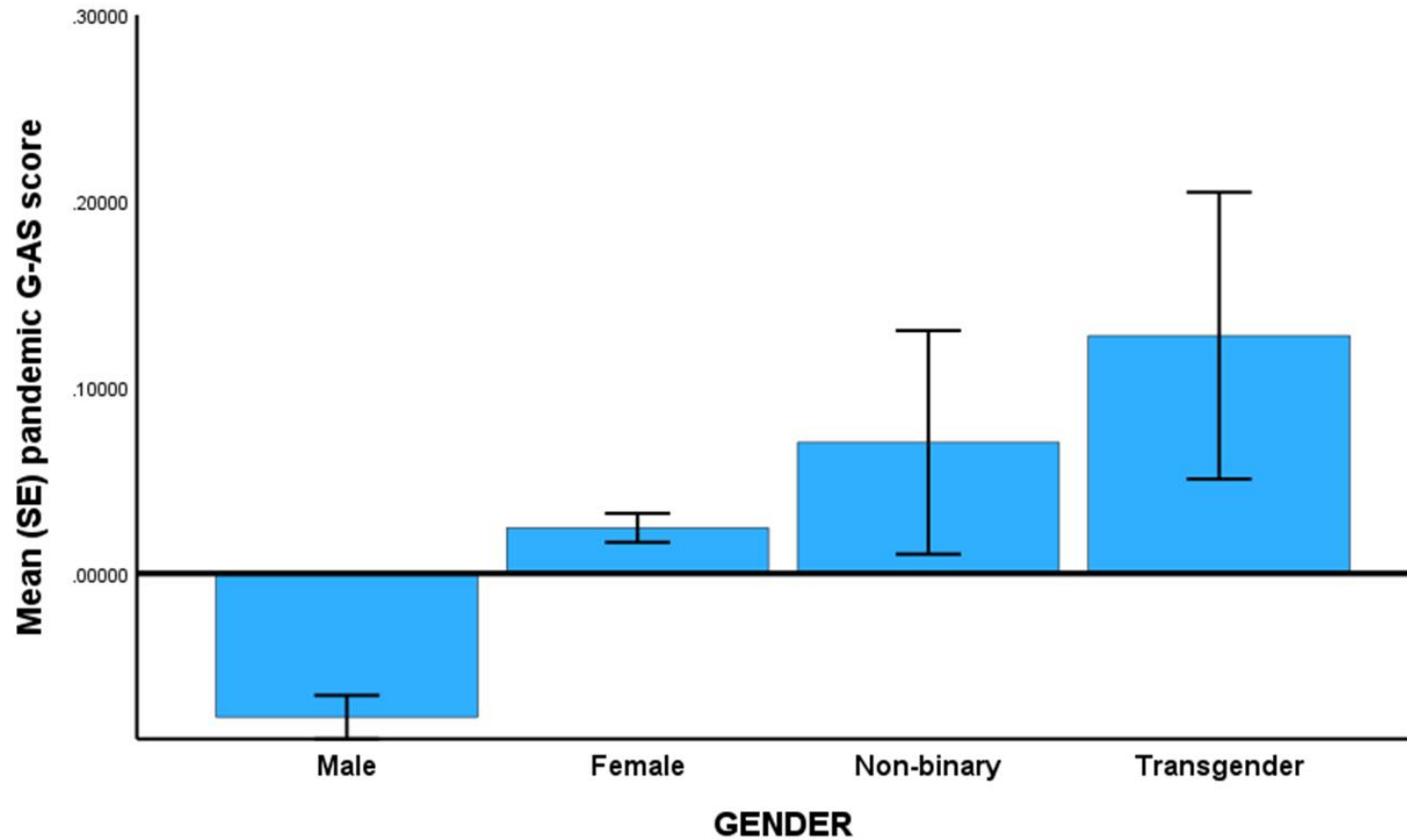
ESF2, Figure 2. Partial regression of the pandemic general affective symptom (G-AS) principal component score on the baseline (pre-pandemic) G-AS score, after adjusting for effects of age, sex, and the 4 pandemic waves ($p < 0.0001$)



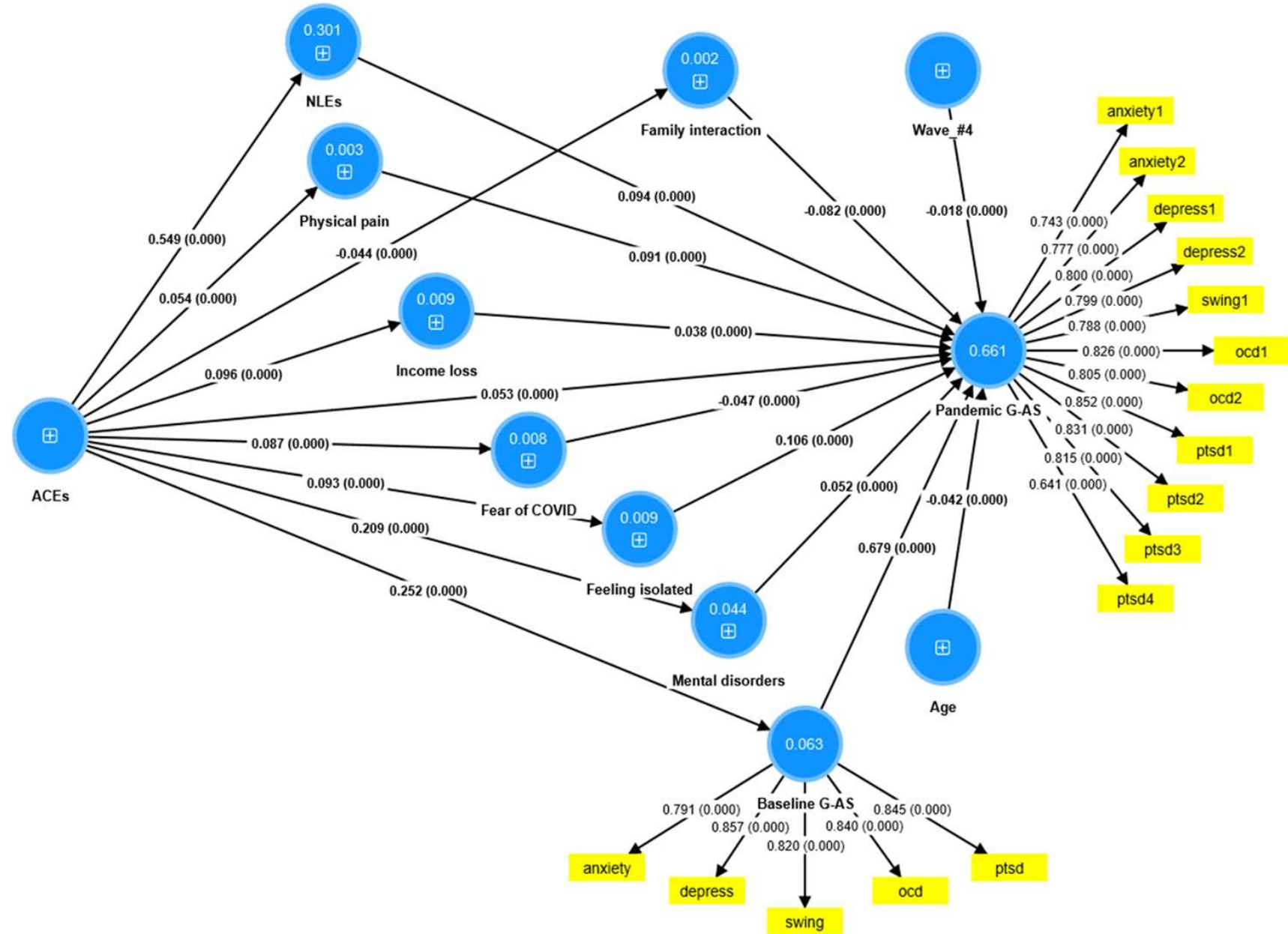
ESF2, Figure 3. Partial regression of the pandemic generalized affective symptom (G-AS) principal component (PC) score on the attributions of G-AS scores to the spread of COVID-19 and the knowledge on the risk of COVID-19 and social isolation/distancing (COVISO), after adjusting for effects of baseline G-AS score, age, sex, and the 4 pandemic waves ($p < 0.001$)



ESF2, Figure 4. The pandemic generalized affective symptom (G-AS) score (after adjusting for baseline G-AS scores, age, and gender) and the 4 pandemic waves as classes. The scores are significantly lower during waves W3 and W4 than W1 and W2 ($p < 0.001$).



ESF2, Figure 5. The pandemic generalized affective symptom (G-AS) score (after adjusting for baseline G-AS scores, age, and the 4 pandemic waves). The scores are significantly higher in women, non-binary and transgender individuals than in males ($p < 0.001$).



ESF2, Figure 6. Results of Partial Least Squares analysis (PLS) conducted on the four COVID waves. Shown is the complete outer model.

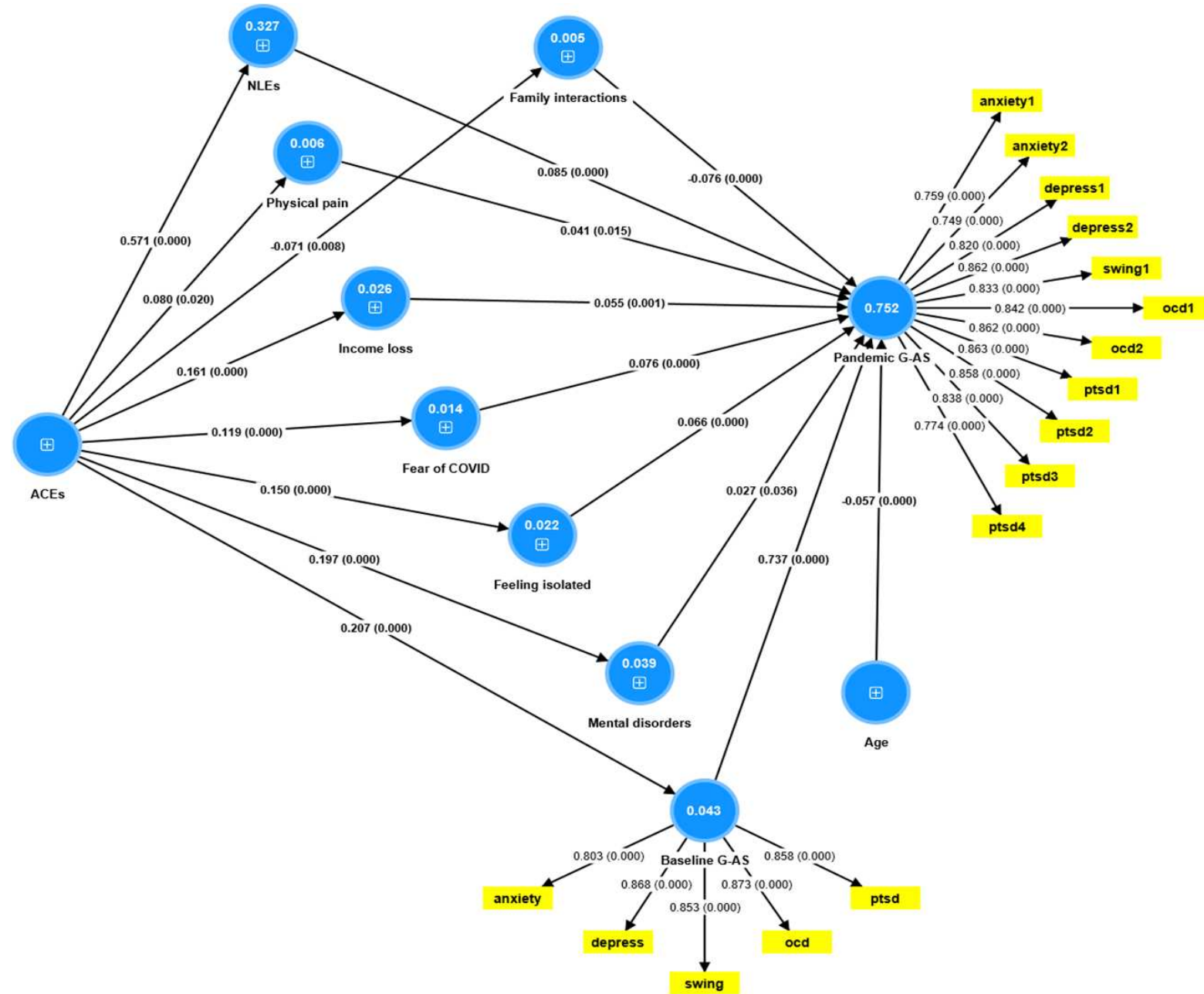
The pandemic and pre-pandemic general factor of affective symptoms (pandemic and baseline G-AS) are entered as factors extracted from 2 anxiety, 2 depression, 2 OCD, 4 PTSD and 1 mood swing item (see Pandemic G-AS and ESF, table 1 for explanation of the items), and one item for each of the 5 baseline G-AS domains. The other variables were entered as single indicators.

The model quality criteria are more than adequate:

- model fit is adequate with SRMR=0.018.
- factor loadings are adequate: all loadings (except PTSD4, namely 0.642) are > 0.666 (at $p < 0.001$)
- average variance explained is $> 50\%$, namely 62.5% for pandemic G-AS and 69% for baseline G-AS.
- Cronbach's alpha is > 0.7 , as shown as figures in the blue circles: 0.939 (pandemic G-AS) and 0.888 (baseline G-AS).
- confirmatory Tetrad analysis shows that the two factors are not mis-specified as reflective models.
- PLS Predict shows that all Q^2 values are > 0 , and CVPAT shows that the PLS-SEM outperforms the indicator averages and the linear model as well (all $p < 0.05$), indicating strong replicability of the PLS model.

ACE: adverse childhood experiences; NLEs: negative life events; W4: the fourth pandemic wave (W4)

See Figure 6 and main text for interpretation of the model.



ESF2, Figure 7. Results of Partial Least Squares analysis (PLS) conducted on the representative sample collected during wave 4. Shown is the complete outer model.

The pandemic and pre-pandemic general factor of affective symptoms (pandemic and baseline G-AS) are entered as factors extracted from 2 anxiety, 2 depression, 2 OCD, 4 PTSD and 1 mood swing item (see Pandemic G-AS and ESF, table 1 for explanation of the items), and one item for each of the 5 baseline G-AS domains.

The model quality criteria are more than adequate:

- model fit is adequate with SRMR=0.021.
- all factor loadings are > 0.666 (at $p < 0.001$)
- average variance explained is $> 50\%$, namely 68.0% for pandemic G-AS and 72.5% for baseline G-AS.
- Cronbach's alpha is > 0.7 , namely 0.953 for the pandemic G-AS and 0.905 for the baseline G-AS.
- confirmatory Tetrad analysis shows that the two factors are not mis-specified as reflective models.
- PLSpredict shows that all Q^2 values are > 0 , and CVPAT overall shows that the PLS-SEM outperforms the indicator averages and the linear model as well (all $p < 0.05$), indicating strong replicability of the PLS model.

ACE: adverse childhood experiences; NLEs: negative life events