

Supplementary File 3 Text excerpts that potentially refer to public stigma related to treatment carryover from the 25 included articles

Source	Text Excerpt
Braquehais, 2014	“When doctors feel emotionally or mentally distressed, they tend to delay seeking help, in part because of a social and medicine culture where doctors are seen as invulnerable citizens and the social stigma associated with mental and/or substance use disorders.” ^(p.150) (body of text)
Chan, 2014	“The study also aims to further explore the impact of suicide stigma and literacy as predictors of low help-seeking behaviour amongst the younger members of the medical profession.” ^(p.133) (Introduction)
Cheng, 2013	“High levels of personal stigma may mask the clinical presentation of a mental illness and cause delays in seeking treatment.” ^(p.689) (Discussion)
Downs, 2014	“Barriers to seeking mental health treatment in this group include concerns about time, [and] stigma...” ^(p.547) (Abstract: Objective)
Dyrbye, 2015a	“We conducted a multi-institutional study to understand the help-seeking behaviors of medical students with burnout and the role of perceived stigma in their decisions to seek help.” ^(p.961) (Introduction)
Dyrbye, 2015b	“Students personally experiencing symptoms of depression were less likely believe that medical students should report colleagues impaired by mental health problems.... These findings may relate to ... treatment stigma (e.g., people view others less favorably if they have been treated for depression).” ^(p.491) (Discussion)
Estabrook, 2013	“Stigma was also a barrier, with 35% of students having avoided or postponed care to some extent due to feeling embarrassed about their health problem.” ^(p.283) (third paragraph)
Garcia-Guasch, 2012	“The stigma which is attached to these problems will discourage referral by the individual or indeed by friends or colleagues until a catastrophe is either imminent or occurs...” ^(p.206) (body of text)
Gold, 2015	“The authors characterize medical student help-seeking behaviors and examine the relationship with ... stigma.” ^(p.37) (Abstract—Objective)
Hankir, 2014a	“Fear of exposure to stigmatisation from the public and healthcare professionals is a crucial factor contributing to secrecy and symptom concealment and is a barrier to accessing mental health services.” ^(p.4) (Learning Points)
Hankir, 2013	“Stigma is a major issue among doctors who suffer from a psychiatric illness and can hamper disease detection, delay referral and result in doctors not receiving the benefits of early interventions.” ^(p.4) (Learning Points)
Hankir, 2014b	“Fear of exposure to stigmatization is a critical factor contributing to symptom concealment and is a major barrier to accessing mental health services.” ^(p.589) (Abstract: Background)
Hassan, 2016	“Barriers to seeking care for mental illness in Canada include not only a lack of resources, but also stigma which makes patients reluctant to seek help.” ^(p.1) (Introduction)
Hu, 2012	“Barriers [to seeking support] included lack of time (89%) [and] stigma (74%)...” ^(p.212) (Abstract: Results)
Issa, 2014	“[Doctors] often don't admit they have mental health problems nor are they readily subjected to mental health evaluation by their colleagues due to fear of labeling and general stigma.” ^(p.1) (Abstract: Introduction)
Martinez, 2016	“Several roadblocks to care, including stigma, often keep [medical students and residents] from seeking treatment.” ^(p.85) (Abstract: Background)
Menon, 2015	“Many systemic barriers, such as stigma and confidentiality issues, apart from lack of knowledge of where to seek help, were reported exclusively for usage of mental health services.” ^(p.6) (Main Messages)
Moutier, 2012	“Barriers to seeking mental health care among medical students and residents include concerns about time, confidentiality, stigma, and the potential negative effect on career.” ^(p.1) (Introduction)
Orri, 2014	“Stigma, shame, and fears of career repercussions prevent surgeons from seeking mental health care.” ^(p.721) (Introduction)

Rosler, 2012	“Devi stated that ... ‘It seems that students remain scared of stigmatization and adverse effects on their careers if they seek help for any mental health issues.’”(p.567) (body of text)
Sklar, 2016	“[Ey et al reported that] many other residents had concerns related to the [wellness] program’s helpfulness [and] stigma... Dyebye et al have also shown have also shown that medical students may not seek needed care for burnout because of concerns about stigma and lack of confidentiality.”(p.1186) (body of text)
Slavin, 2014	“To date, efforts to improve student mental health have focused largely on improving access to mental health providers, reducing the stigma and other barriers to mental health treatment, and implementing ancillary wellness programs.”(p.573) (Abstract)
Thompson, 2016	“Perceptions of stigma are hypothesized to be a potential source of this lack of care-seeking behavior.”(p.174) (Abstract: Hypothesis)
Tischler, 2015	“Effective use of teaching materials such as this short story will help confront the stigma of physician substance misuse thus helping to improve patient care and increasing the likelihood of addicted physicians reaching out for assistance.”(p.366) (Conclusions)
Wimsatt, 2015	“[Medical students] hold stigmatizing beliefs about depression and individuals with depression that may compromise their care-seeking behavior.”(p.712) (Conclusions)