1 2	Identifying Key Targets for Interventions to Improve Psychological Wellbeing: Replicable Results from Four UK Cohorts
3 4 5	Stochl, J. <sup>1,3*+</sup> , Soneson, E. <sup>1+</sup> , Wagner, A.P. <sup>2,3</sup> , Khandaker, G.M. <sup>1</sup> , Goodyer, I. <sup>1</sup> , Jones, P.B. <sup>1,3</sup>
6 7 8 9 10	Financial support:
11 12 13 14 15 16 17 18	The NSPN study was supported by the Wellcome Trust Strategic Award (095844/Z/11/Z). JS, APW, and PBJ received support from the NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) East of England (EoE). The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health. GMK is supported by an Intermediate Clinical Fellowship from the Wellcome Trust (201486/Z/16/Z).
19 20 21 22 23 24 25 26	Word count: 3,613
27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42	+ joint first authors <sup>1</sup> Department of Psychiatry, University of Cambridge, Cambridge Biomedical Campus, Herschel Smith Building for Brain & Mind Sciences, Cambridge, CB2 0SZ, Cambridge, UK <sup>2</sup> Norwich Medical School, University of East Anglia, Norwich, UK <sup>3</sup> National Institute for Health Research (NIHR) Collaboration for Leadership in Applied Health Research and Care East of England (CLAHRC), Cambridge, UK
42 43 44 45 46 47 48 49 50 51	* Address for correspondence: Department of Psychiatry University of Cambridge Cambridge Biomedical Campus Herchel Smith Building for Brain & Mind Sciences Cambridge, CB2 0SZ United Kingdom Phone: +44 07587146299 Email: js883@cam.ac.uk
	1

## 52 Introduction

Mental health and wellbeing are becoming increasingly prominent in national and 53 54 international health policy (Department of Health and Social Care, 2011, Mehta et al., 2015, World Health Organization, 2002, 2004). At a societal level, they represent 55 important resources closely linked to social, human, and economic capital (Friedli and 56 Parsonage, 2007, Knapp et al., 2011), and are associated with lower levels of 57 inequality, less community violence, and higher life expectancy (Friedli and World 58 Health Organization, 2009). For individuals, mental health and wellbeing are closely 59 connected to normal functioning and quality of life and are instrumental in creating and 60 maintaining good relationships (Jané-Llopis et al., 2005, World Health Organization, 61 62 2004). Clinically, the growing evidence for the existence of a 'continuum' of psychopathology (also referred to as 'common mental distress' or the 'general 63 psychopathology factor') (Caspi et al., 2014, Stochl et al., 2015) suggests that improving 64 65 mental health and wellbeing may also help to prevent the development of mental disorders. 66

67

Several approaches have been suggested for improving mental health and wellbeing,
including psychological therapies (Fava *et al.*, 1998, Galante *et al.*, 2017, Slade, 2010),
school and workplace interventions (Jané-Llopis *et al.*, 2005, Jané-Llopis and Barry,
2005, Knapp *et al.*, 2011, Weare and Nind, 2011), improvement of housing and
nutrition, reduction of substance misuse, and prevention of violence (Jané-Llopis *et al.*,
2005, World Health Organization, 2004). Despite their promise, however, many of these
approaches have been criticised for their lack of supporting empirical evidence (Mehta

*et al.*, 2015). Indeed, current methods used to inform intervention targets are mainly
limited to theoretical models (e.g. Ryff's model of wellbeing; general stress theory),
literature reviews, and qualitative methods (e.g. interviews with experts and service
users), and do not consider any type of quantitative method.

79

Psychological network analysis is an innovative statistical approach that can 80 complement theoretical knowledge and clinical expertise by providing quantitative 81 evidence for the identification of intervention targets. Essentially, it examines 82 relationships between different items on clinical questionnaires, and determines which 83 items are most 'central' to the condition of interest due to having strong relationships 84 with other items. Central items may then serve as indicators for clinical intervention 85 targets (Fried et al., 2017), as their improvement is most likely to destabilise harmful 86 network structures and prevent exacerbation of other items (Smith et al., 2018). 87 Network analysis has been used to suggest potential intervention targets for depression 88 (van Borkulo et al., 2015), PTSD (Fried et al., 2018), and eating disorders (Smith et al., 89 2018). Furthermore, it aligns with the clinical characterisation of psychopathology as a 90 91 system of causal relationships between symptoms, where some symptoms are more influential than others (van Borkulo et al., 2015). 92

93

To make valid inferences in network analysis, comprehensive tools to measure mental
health and wellbeing, such as the well-established Warwick-Edinburgh Mental
Wellbeing Scale (WEMWBS), are crucial. In this study, we have used psychological
network analysis to identify items central to the WEMWBS, which we present as

- 98 potentially optimal targets for interventions aiming to improve mental health and
- 99 wellbeing.
- 100
- 101 Methods
- 102 **Participants**
- 103 This study sample comprises 47,578 participants from four different UK cohorts.
- 104
- 105 National Child Development Study (NCDS)
- 106 The NCDS (University of London, 2012) is a major longitudinal British cohort study
- initiated in 1958. As such, this sample is homogeneous for age. At age 53, 8,643 NCDS
- <sup>108</sup> participants (51.8% women) completed the Warwick-Edinburgh Mental Well-being Scale
- 109 (WEMWBS) as part of a set of self-report questionnaires. Full details on sampling
- design and data collection can be found at https://tinyurl.com/y7q2m66z.
- 111
- 112 Northern Ireland Health Survey (NIHS)
- 113 The NIHS (Department of Health Northern Ireland, 2016) covers a range of health
- topics important to the lives of people in Northern Ireland. The survey has been annually
- 115 conducted since 2010. Respondents are sampled from those aged 16+ living in private
- households. The 2010-2011 survey collected wellbeing data from 4,161 individuals of
- which 3,873 (58.8% women) had complete WEMWBS data. Details about the data
- 118 collection methodology can be found at https://tinyurl.com/ybfakdsm.
- 119

120 Neuroscience in Psychiatry Network (NSPN)

The NSPN (Kiddle et al., 2018) cohort consists of 2,403 participants, aged 14-25, 121 recruited from Cambridgeshire, London and surrounding areas. The sample analysed 122 here was recruited between November 2012 and July 2017. Study invites were sent 123 through general practice (GP) surgeries and schools with the aim of recruiting 200 124 women and 200 men for each of five age strata (ages: 14-15; 16-17; 18-19; 20-21; 22-125 24). Complete WEMWBS data was available from 2,337 individuals (53.8% women). 126 127 Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 128 The SALSUS (NHS National Services Scotland, 2013) survey was set up by the 129 Scottish Government to monitor progress on reducing smoking and substance misuse. 130 Information from the survey helps national planning and facilitates the monitoring of 131 policy implementation. The WEMWBS data used in this study were collected in 2010 132 from 32,725 individuals (49.4%, women) from the second (age 12-14) and fourth (age 133 14-16) years of secondary school. Full details can be found at 134 https://tinyurl.com/ya66mdq4. 135

136

### 137 The Warwick–Edinburgh Mental Well-being Scale (WEMWBS)

138 The WEMWBS (Tennant *et al.*, 2007) is a 14-item, self-report measure designed to

assess a range of wellbeing concepts including affective-emotional aspects, cognitive-

evaluative dimensions, and psychological functioning in the general population. All

items are worded positively and have 5 response categories (1-None of the time; 2-

Rarely; 3- Some of the time; 4-Often; 5-All of the time). The wellbeing score is

computed as sum of all items (range: 14-70), with higher scores representing better
wellbeing. The WEMWBS was found to be a uni-dimensional measure and to have
desirable psychometric properties (Tennant *et al.*, 2007). The scale is well-regarded by
service users and their carers, who tend to prefer it to other mental health and wellbeing
measures (Crawford *et al.*, 2011) for the way that it asks about positive aspects of
mental health.

149

## 150 Analysis

Psychological network analysis (Borsboom and Cramer, 2013) conceptualises 151 behaviour as a complex interplay of psychological and other components. Recently, this 152 methodology has become popular in psychometrics partly due to its ability to identify 153 worthwhile items for intervention development in guestionnaires and surveys. In typical 154 network analysis applied to questionnaire data (Gaussian graphical models), nodes 155 (representing questionnaire items) are interconnected via edges (representing partial 156 correlations) (Costantini et al., 2015). The use of partial correlations ensures that 157 bivariate relationships between nodes are not confounded by relationships to other 158 variables in the network and provides unbiased computation of centrality indices. 159 Networks in this paper utilise the 'spring' layout (Fruchterman and Reingold, 1991b). 160 where nodes are positioned on a plane so that distances between them relate to the 161 162 size of their partial correlations.

163

Typically, the network in each cohort is estimated separately and sparsity (and thus improved interpretability) of such networks is achieved by the application of an adaptive

graphical LASSO penalty (Friedman et al., 2008). However, recent developments allow 166 for joint estimation of multiple networks using fused graphical LASSO (FGL) (Danaher 167 et al., 2014). FGL extends traditional graphical LASSO by extending the penalty 168 function to incorporate differences among corresponding edge-weights estimated 169 across networks. This strategy neither masks nor inflates similarities across networks 170 (Fried et al., 2018). In this study, the optimal value of this penalty was achieved by k-171 fold cross-validation. A detailed explanation of FGL and its use in psychological 172 networks is given elsewhere (Costantini et al., 2017, Danaher et al., 2014, Fried et al., 173 2018). The similarity of networks was assessed by calculating the Spearman correlation 174 of edge-weights between each pair of networks (Borsboom, 2017). 175 176 The relative importance of questionnaire items is subsequently evaluated using 177 measures from graph theory, using typical centrality indices such as *strength*, 178 closeness, and betweenness (Newman, 2010). A strong central node (item) (Barrat et 179 al., 2004) is one that can influence many other nodes (or be influenced by them) 180 directly, without considering the mediating role of other nodes (Costantini et al., 2015). 181 As such, strength is the crucial index for identification of items for developing the most 182 effective interventions. Nodes with high *closeness* (defined as the inverse of the sum of 183 distances of the focal node to all other nodes in the network) are those whose 184 responses are likely to be quickly affected by changes in other nodes, either directly or 185 indirectly. If nodes with high betweenness are removed from a network then the 186 distance among other nodes will generally increase (Costantini et al., 2015). As such, 187 188 nodes with high *betweenness* speed up the flow of information in networks.

189

Lack of accuracy and network stability have been recognised as an important issue in 190 psychological networks (Epskamp et al., 2017, Forbes et al., 2017). Thus, bootstrapping 191 procedures have been developed for psychological networks to address this issue and 192 prevent biased inferences about the importance of individual nodes (Epskamp et al., 193 2017). To evaluate accuracy and stability we have followed recommendations made by 194 Epskamp et al. (2017). They proposed the correlation stability (CS) coefficient to 195 investigate the stability of the order of centrality indices after observing only portions of 196 the data. Its computation is based on case dropping bootstrap methods. The CS 197 coefficient can be interpreted as the maximum proportion of cases that can be dropped, 198 such that with 95% probability the correlation between the original centrality indices and 199 the centrality of networks based on subsets is 0.7 or higher (this figure can be changed 200 but is taken as a default based on a simulation study by Epskamp et al. (2017)). This 201 coefficient should not drop below 0.25 and should ideally be above 0.5 to justify robust 202 interpretation of centrality indices. 203

204

Functions from the R (R Core Team, 2017) packages 'qgraph' (Epskamp *et al.*, 2012), 'EstimateGroupNetwork' (Costantini and Epskamp, 2017), and 'mgm' (Haslbeck and Waldorp, 2016) were used to estimate the network graphs. Given that the WEMWBS items are ordinal, polychoric correlations are used in the input weight matrix. The resulting networks were plotted using the *spring* layout (Fruchterman and Reingold, 1991a) where more related edges are plotted closer together. Bootstrapping of networks was accomplished using the R package 'bootnet' (Epskamp *et al.*, 2017). To

212	assess network differences (global network strength, edges) with respect to gender,
213	permutation tests implemented in the package 'NetworkComparisonTest' (van Borkulo
214	et al., 2016) were used with 5,000 iterations. All p-values were corrected for multiple
215	testing (using Holm-Bonferroni correction), where applicable.
216	
217	Ethical approvals
218	Ethical approval was not required for the present secondary data analysis.
219	Results
220	Table 1 shows the basic item descriptive statistics for each cohort.
221	
222	
223	insert Table 1 about here
223	
224	
225	Estimated networks are shown in Figure 1. Visual comparison reveals similarities
226	across them: for example, items 8 ( <i>I have been feeling good about myself</i> ) and 14 ( <i>I</i>
227	have been feeling cheerful) are always central. Item 10 (I have been feeling confident)
228	seems to have a more prominent role in both the older (NCDS) and younger adult
229	(NSPN) cohorts. Conversely, items such as 1 (I have been feeling optimistic about the
230	future), 2 (I have been feeling useful), and 5 (I have had energy to spare) are generally

on the periphery of the networks and less connected with other items. The formal

232 comparison of networks (using a permutation test) revealed statistically significant

233	differences in global network strength between NCDS and SALSUS (network strength
234	NCDS=6.75, network strength SALSUS=6.23, p<0.001) and also between NIHS and
235	SALSUS (network strength NIHS=6.54, network strength SALSUS=6.23, p=0.002). On
236	average, around six edges between each pair of networks are statistically different.
237	Information about significant differences in edge weights is available from the authors
238	upon request. We formally compare centrality indices later in this paper.
239	
240	insert Figure 1 about here
241	
242	Comparison of edge-weights and their accuracy
243	To improve visual comparability of edges, we also estimated the average layout of
244	these four networks and plotted all networks using this layout (see Figure 2). The
245	patterns of relationships among items are similar across samples. Items 8 and 10,
246	which evaluate self-perception, are highly related. The same holds for items 4, 9, and
247	12, which assess relationships with other people, and items 6, 7, and 11, which deal
248	with processing ideas and problems. It is less clear why items 1 (I have been feeling
249	optimistic about the future) and 2 (I have been feeling useful) are related.
250	
251	
252	insert Figure 2 about here
253	

254 The visual similarity of networks was confirmed by investigating Spearman correlations

of edge-weights for all pairs of networks, presented in Supplementary Table 1. They

ranged from 0.75 to 0.87, suggesting high similarity across networks.

257

Supplementary Figure 1 depicts point estimates and bootstrap confidence intervals of the edge values for each network. In general, confidence intervals suggest that the accuracy of edges is satisfactory. As expected, the confidence intervals are smaller in larger samples.

262

## 263 **Centrality indices and their stability**

Standardised centrality indices for each item, computed for each network, are shown in 264 Figure 3. The indices are remarkably similar across all networks. With respect to 265 strength and closeness, the three most central items across all networks are items 8, 266 10, and 14. Betweenness of these three items is also highest in NCDS and NSPN. The 267 top three betweenness items in NIHS are items 8, 7, and 9. In SALSUS, the top 268 betweenness item is item 8 but next highest betweenness is indistinguishable for items 269 4, 9, and 10. These results suggest that the wellbeing intervention targets (as measured 270 by strength) replicate well across cohorts. The same holds for closeness. Mediating 271 items which speed up influence of changes in the network (betweenness) vary only 272 273 slightly across cohorts.

- 274
- 275 ------ insert Figure 3 about here -----
- 276

Stability of the centrality indices was assessed using the case dropping bootstrap
(Epskamp *et al.*, 2017). The results from are plotted in Supplementary Figure 2, and
corresponding CS coefficients are given in Table 2.
These results show that *closeness* and *strength* are very stable (even with only 25% of
cases, the order of centrality indices has not considerably changed). *Betweenness* is

slightly less stable, but apart from NIHS sample, its confidence intervals are still above
 the recommended cut-off of 0.5. Therefore, *betweenness* in NIHS should be interpreted

with caution.

286 ------ insert Table 2 about here ------

287

## 288 Gender differences

Network structures, and thus wellbeing intervention targets, might be different for men 289 and women. We have therefore tested for statistically significant gender differences in 290 global network strength and edge-weights. Regardless of cohort, there were no 291 statistically significant differences by gender in global network strength (p-values: 292 NCDS=0.163; NIHS=0.422; NSPN=0.696; SALSUS=0.474). No differences in edge-293 weights were found in the NIHS or NSPN cohorts. In NCDS, a significant difference 294 between men and women was found for the edge between items 8 and 10 (0.33 for 295 men, 0.45 for women, p=0.035). This suggests the link between item 8 (feeling good 296 about oneself) and item 10 (feeling confident) is stronger for middle-aged women than 297 for middle-aged men. Even in the very large SALSUS cohort (n=32,725), only six edges 298 (out of 91) were significantly different between men and women (p(item 8, item 299

300	9)<0.001; p(item 8, item 10)<0.001; p(item 2, item 10)<0.001; p(item 7, item 10)<0.001;
301	p(item 8, item 14)<0.001; p(item 9, item 14)=0.017). In this cohort, links between (1)
302	item 8 (feeling good about oneself) and item 10 (feeling confident) and (2) item 9
303	(feeling close to others) and item 14 (feeling cheerful) were stronger for women than for
304	men. Conversely, links between (1) item 2 (feeling useful) and item 10 (feeling
305	confident), (2) item 7 (thinking clearly) and item 10 (feeling confident), (3) item 8 (feeling
306	good about oneself) and item 9 (feeling close to others), and (4) item 8 (feeling good
307	about oneself) and item 14 (feeling cheerful) were all stronger for men than for women.
308	On the whole, the relatively small number of significantly different edges suggests that
309	gender differences in these wellbeing networks are minimal.

### 310 **Discussion**

This study aimed to identify the central aspects of psychological wellbeing, which may 311 312 thus be considered as important intervention targets. Score improvements on these items should have the largest positive impact on other aspects of psychological 313 wellbeing. To find these keystones, we used psychological network analysis to identify 314 315 the most central items within graph networks created from a well-established psychological wellbeing measure (WEMWBS). The WEMWBS data were obtained from 316 four major UK cohorts varying with respect to age (young people (SALSUS), 317 adolescents and young adults (NSPN), general adult population (NIHS), and middle-318 aged adults (NCDS)) and location (England, Northern Ireland, and Scotland). 319 320

Generally, results were consistent across cohorts. Edge-weights showed very similar patterns across cohorts and were accurate enough to make valid inferences about network architecture. This suggests high replicability of the network structure and high generalisability of findings across ages and geographical locations within the UK.

325

To highlight optimal targets that maximise intervention effectiveness, the most important 326 items are those central to a network. The top three items, as measured by strength are 327 items 8 (I have been feeling good about myself), 10 (I have been feeling confident), and 328 14 (I have been feeling cheerful). This suggests that positive self-perception and 329 cheerfulness may play the most important role in influencing other aspects of 330 psychological wellbeing. Due to the undirected character of the network it is not 331 surprising that these items demonstrate the highest levels of *closeness*, indicating that 332 they are easily influenced by other network nodes. The least influential items vary 333 slightly across samples, but often include items 1 (I have been feeling optimistic about 334 the future), 5 (I have had energy to spare), 6 (I have been dealing with problems well), 335 and 11 (I have been able to make up my own mind about things). This suggests that 336 improving upon processing problems, energy, and future expectations may have the 337 smallest effect on other aspects of wellbeing. 338

339

These inferences seem to be robust given the high stability of centrality indices. Apart from *betweenness* in the NIHS cohort (which has questionable interpretability due to poor stability), all other correlation stability coefficients were above the recommended criteria of 0.50 (Epskamp *et al.*, 2017).

344

Gender differences in network architecture (global *strength*, size of edges) were also
assessed to determine if interventions targets might differ for men and women.
Omnibus tests of global network *strength* suggested no gender differences in any
sample. Given there was only a total of seven edge differences by gender across all
four cohorts, our results suggest that interventions targets are unlikely to differ by
gender.

351

### 352 Strengths and limitations

A key strength of this study is that it utilises a number of cohorts, addressing the considerable concern about the replicability crisis in network literature (Forbes *et al.*, 2017). In addition, the considered cohorts are large and cover a wide range of age and geographical locations, supporting the generalizability of findings.

357

A substantial limitation is the use of cross-sectional data, which constrains network 358 analysis to undirected networks. Using undirected networks in turn limits inferences 359 about the direction of influence. Although presented network edges can be interpreted 360 as putative causal paths, it is equally likely that influence flows from A to B as from B to 361 A (other scenarios are also possible including mediation by another node C). Indeed, it 362 seems plausible that feeling good about yourself (item 8), being confident (item 10), and 363 feeling cheerful (item 14) might be the consequence rather than cause of other aspects 364 of wellbeing considered here (e.g. feeling relaxed, loved by others, or thinking positively 365 366 about the future). An intervention affecting only the end-points of a causality chain, as in

this scenario, is likely to have only limited, if any, impact on mental wellbeing (Fried *et al.*, 2018). Experimental studies that intervene directly on the central symptoms are
therefore needed to test whether this would indeed affect other symptoms in an
expected way (Fried and Cramer, 2017).

371

Additionally, as clearly described in Fried, Eidhof et al. (2018), there are at least two 372 other reasons why using central items as intervention targets should be considered with 373 caution. First, feedback loops, which are difficult to detect in undirected networks, can 374 make central items the most resilient to change. Second, peripheral items should not 375 automatically be regarded as clinically unimportant; their importance should be also 376 considered based on substantive clinical arguments. However, despite all these 377 limitations, Fried, Eidhof et al. (2018, page 11) conclude, 'If we had to put our money on 378 selecting a clinical feature as an intervention target in the absence of all other clinical 379 information, [...] choosing the most central node might be a viable heuristic.' 380

381

#### 382 Implications for practice

Our findings have implications for the design of national mental health and wellbeing strategies for all ages. Positive self-perception and confidence in children and young people could be improved effectively at schools (e.g. bullying prevention programmes) or at home (e.g. positive parenting programmes), and in adults at the workplace (e.g. through regular training and supervision; fostering positive and supporting working environments). Indeed, the UK government expects schools and employers to play active roles in promoting population mental health and wellbeing (Department of Health

390	and Social Care, 2011). Furthermore, although our findings are based on general
391	population samples, they may be useful for providing care for people seeking treatment
392	for mental disorders. Since evidence suggests that psychological wellbeing and mental
393	ill health exist on a continuum (Böhnke and Croudace, 2016, Caspi et al., 2014, St Clair
394	et al., 2017, Stochl et al., 2015), it is likely that improving wellbeing in mentally unwell
395	individuals may also lead to improvements in their clinical symptoms. Finally, our
396	analysis may also have implications for the development and trialling of psychological
397	therapies as they indicate that interventions that focus on improving self-esteem and
398	confidence may be more effective in increasing overall wellbeing than those that do not
399	focus on these qualities.
400	
401	Conclusions
402	In conclusion, our study shows that the most worthwhile intervention targets for
403	improvement of psychological wellbeing are aspects related to positive self-perception
404	and positive mood. Regardless of gender, their improvement is likely to have a positive
405	impact on the remaining aspects of psychological wellbeing, either directly or indirectly.
406	
407	
408	
409	
410	
411	
412	

# 413 Acknowledgements

- The authors would like to thank Michele Atiemo for her comments on early versions of
- this paper.

# **Conflict of interest**

- **None.**

## 430 **References**

- 431
- 432 Barrat, A., Barthelemy, M., Pastor-Satorras, R. & Vespignani, A. (2004). The architecture of complex
- weighted networks. *Proceedings of the National Academy of Sciences of the United States of America* **101**, 3747-52.
- Böhnke, J. R. & Croudace, T. J. (2016). Calibrating well-being, quality of life and common mental
- disorder items: psychometric epidemiology in public mental health research. *British Journal of Psychiatry* **209**, 162-168.
- 438 **Borsboom, D.** (2017). A network theory of mental disorders. *World Psychiatry* **16**, 5-13.
- 439 **Borsboom, D. & Cramer, A. O.** (2013). Network analysis: an integrative approach to the structure of 440 psychopathology. *Annual Review of Clinical Psychology* **9**, 91-121.
- 441 Caspi, A., Houts, R. M., Belsky, D. W., Goldman-Mellor, S. J., Harrington, H., Israel, S., Meier, M. H.,
- 442 Ramrakha, S., Shalev, I., Poulton, R. & Moffitt, T. E. (2014). The p Factor: One general
- psychopathology factor in the structure of psychiatric disorders? *Clinical Psychological Science* 2, 119 137.
- 445 **Costantini, G. & Epskamp, S.** (2017). EstimateGroupNetwork: Perform the Joint Graphical Lasso and 446 Selects Tuning Parameters. R package version 0.1.2.
- 447 Costantini, G., Epskamp, S., Borsboom, D., Perugini, M., Mõttus, R., Waldorp, L. J. & Cramer, A. O.
- 448 (2015). State of the aRt personality research: A tutorial on network analysis of personality data in R.
- 449 Journal of Research in Personality 54, 13-29.
- 450 Costantini, G., Richetin, J., Preti, E., Casini, E., Epskamp, S. & Perugini, M. (2017). Stability and
- 451 variability of personality networks. A tutorial on recent developments in network psychometrics.
- 452 Personality and Individual Differences.
- 453 Crawford, M. J., Robotham, D., Thana, L., Patterson, S., Weaver, T., Barber, R., Wykes, T. & Rose,
- 454 **D.** (2011). Selecting outcome measures in mental health: the views of service users. *Journal of Mental* 455 *Health* **20**, 336-46.
- 456 Danaher, P., Wang, P. & Witten, D. M. (2014). The joint graphical lasso for inverse covariance
- estimation across multiple classes. *Journal of the Royal Statistical Society: Series B (Statistical Methodology)* **76**, 373-397.
- 459 **Department of Health and Social Care** (2011). No health without mental health: a cross-government
- 460 *mental health outcomes strategy for people of all ages.* Stationery Office: London, UK.
- 461 **Department of Health Northern Ireland** (2016). Northern Ireland Health Survey, 2010-2011. UK Data 462 Service.
- 463 Epskamp, S., Borsboom, D. & Fried, E. I. (2017). Estimating Psychological Networks and their
- Accuracy: A Tutorial Paper. *Behavior Research Methods*.
- 465 Epskamp, S., Cramer, A. O. J., Waldorp, L. J., Schmittmann, V. D. & Borsboom, D. (2012). qgraph:
- 466 Network Visualizations of Relationships in Psychometric Data. Journal of Statistical Software 48, 1-18.
- Fava, G. A., Rafanelli, C., Cazzaro, M., Conti, S. & Grandi, S. (1998). Well-being therapy. A novel
   psychotherapeutic approach for residual symptoms of affective disorders. *Psychological Medicine* 28,
- psychotherapeutic approach for residual symptoms of affective disorders. *Psychological Medicine* 28,
   475-80.
- 470 **Forbes, M. K., Wright, A. G., Markon, K. E. & Krueger, R. F.** (2017). Evidence that psychopathology 471 symptom networks have limited replicability. *Journal of abnormal psychology* **126**, 969.
- Fried, E. I. & Cramer, A. O. (2017). Moving forward: challenges and directions for psychopathological
   network theory and methodology. *Perspectives on Psychological Science* 12, 999-1020.
- 474 Fried, E. I., Eidhof, M. B., Palic, S., Costantini, G., Huisman-van Dijk, H. M., Bockting, C. L.,
- 475 Engelhard, I., Armour, C., Nielsen, A. B. & Karstoft, K.-I. (2018). Replicability and Generalizability of
- 476 Posttraumatic Stress Disorder (PTSD) Networks: A Cross-Cultural Multisite Study of PTSD Symptoms in
- 477 Four Trauma Patient Samples. *Clinical Psychological Science*, 2167702617745092.
- 478 Fried, E. I., van Borkulo, C. D., Cramer, A. O. J., Boschloo, L., Schoevers, R. A. & Borsboom, D.
- 479 (2017). Mental disorders as networks of problems: a review of recent insights. *Social Psychiatry and* 480 *Psychiatric Epidemiology* **52**, 1-10.
- 481 **Friedli, L. & Parsonage, M.** (2007). Building an economic case for mental health promotion: part I.
- 482 Journal of Public Mental Health 6, 14-23.
- 483 **Friedli, L. & World Health Organization** (2009). Mental health, resilience and inequalities.
- 484 Friedman, J., Hastie, T. & Tibshirani, R. (2008). Sparse inverse covariance estimation with the
- 485 graphical lasso. *Biostatistics* **9**, 432-41.

- Fruchterman, T. M. J. & Reingold, E. M. (1991a). Graph drawing by force-directed placement. Software:
   Practice and Experience 21, 1129-1164.
- 488 **Fruchterman, T. M. J. & Reingold, E. M.** (1991b). Graph drawing by force-directed placement.
- 489 Software: Practice and Experience **21**, 1129-1164.
- 490 Galante, J., Dufour, G., Vainre, M., Wagner, A. P., Stochl, J., Benton, A., Lathia, N., Howarth, E. &
- 491 Jones, P. B. (2017). A mindfulness-based intervention to increase resilience to stress in university
- students (the Mindful Student Study): a pragmatic randomised controlled trial. *Lancet Public Health* 3,
   e72-e81.
- Haslbeck, J. M. & Waldorp, L. J. (2016). mgm: Structure Estimation for time-varying mixed graphical
   models in high-dimensional data. *Journal of Statistical Software*.
- Jané-Llopis, E., Barry, M., Hosman, C. & Patel, V. (2005). Mental health promotion works: a review.
   *Promotion & Education* 12, 9-25.
- Jané-Llopis, E. & Barry, M. M. (2005). What makes mental health promotion effective? *Promotion & education* **12**, 47-54.
- 500 Kiddle, B., Inkster, B., Prabhu, G., Moutoussis, M., Whitaker, K. J., Bullmore, E. T., Dolan, R. J.,
- 501 Fonagy, P., Goodyer, I. M. & Jones, P. B. (2018). Cohort Profile: The NSPN 2400 Cohort: a

developmental sample supporting the Wellcome Trust NeuroScience in Psychiatry Network. *International Journal of Epidemiology* **47**, 18-19g.

- 504 **Knapp, M., McDaid, D. & Parsonage, M.** (2011). Mental health promotion and mental illness prevention: 505 The economic case.
- 506 Mehta, N., Croudace, T. & Davies, S. C. (2015). Public mental health: evidenced-based priorities.
- 507 Lancet **385**, 1472-5.
- 508 Newman, M. (2010). *Networks: an introduction*. Oxford university press.
- 509 NHS National Services Scotland (2013). Scottish Schools Adolescent Lifestyle and Substance Use
- 510 Survey, 2010. UK Data Service.
- 511 **R Core Team** (2017). R: A Language and Environment for Statistical Computing.
- 512 Slade, M. (2010). Mental illness and well-being: the central importance of positive psychology and
- 513 recovery approaches. *BMC health services research* **10**, 26.
- 514 Smith, K. E., Crosby, R. D., Wonderlich, S. A., Forbush, K. T., Mason, T. B. & Moessner, M. (2018).
- 515 Network analysis: An innovative framework for understanding eating disorder psychopathology.
- 516 International Journal of Eating Disorders **51**, 214-222.
- 517 St Clair, M. C., Neufeld, S., Jones, P. B., Fonagy, P., Bullmore, E. T., Dolan, R. J., Moutoussis, M.,
- 518 **Toseeb, U. & Goodyer, I. M.** (2017). Characterising the latent structure and organisation of self-reported
- thoughts, feelings and behaviours in adolescents and young adults. *PloS one* **12**, e0175381.
- 520 Stochl, J., Khandaker, G. M., Lewis, G., Perez, J., Goodyer, I. M., Zammit, S., Sullivan, S.,
- 521 **Croudace, T. J. & Jones, P. B.** (2015). Mood, anxiety and psychotic phenomena measure a common 522 psychopathological factor. *Psychological Medicine* **45**, 1483-93.
- 523 Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S., Weich, S., Parkinson, J., Secker, J. &
- 524 **Stewart-Brown, S.** (2007). The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development 525 and UK validation. *Health and Quality of Life Outcomes* **5**, 63-63.
- University of London (2012). National Child Development Study: Sweep 8, 2008-2009. UK Data
   Service.
- van Borkulo, C., Boschloo, L., Borsboom, D., Penninx, B. W. J. H., Waldorp, L. J. & Schoevers, R.
- A. (2015). Association of symptom network structure with the course of depression. JAMA psychiatry 72, 1219-1226.
- van Borkulo, C. D., with contributions from Sacha, E. & Millner, A. (2016). NetworkComparisonTest:
- 532 Statistical Comparison of Two Networks Based on Three Invariance Measures.
- 533 Weare, K. & Nind, M. (2011). Mental health promotion and problem prevention in schools: what does the 534 evidence say? *Health promotion international* **26**, i29-i69.
- 535 World Health Organization (2002). Prevention and promotion in mental health.
- 536 World Health Organization (2004). Promoting mental health: Concepts, emerging evidence, practice:
- 537 Summary report.
- 538



Figure 1: Networks of WEMWBS items in four general population samples. Nodes represent WEMWBS items and edges partial correlations with LASSO penalty. Distances between nodes and the thickness of edges relate to the size of their partial correlations. Grey doughnut charts surrounding each node show its explained variance.



Figure 2: Networks of WEMWBS items in four general population samples using average spring layout. Nodes represent WEMWBS items and edges partial correlations with LASSO penalty. Distances among nodes and thickness of edges relate to size of their partial correlations. Grey doughnut charts surrounding each node show its explained variance.



Figure 3: Centrality indices across cohorts



Figure 1: Networks of WEMWBS items in four general population samples. Nodes represent WEMWBS items and edges partial correlations with LASSO penalty. Distances between nodes and the thickness of edges relate to the size of their partial correlations. Grey doughnut charts surrounding each node show its explained variance.



Figure 2: Networks of WEMWBS items in four general population samples using average spring layout. Nodes represent WEMWBS items and edges partial correlations with LASSO penalty. Distances among nodes and thickness of edges relate to size of their partial correlations. Grey doughnut charts surrounding each node show its explained variance.



Figure 3: Centrality indices across cohorts

Mean (standard deviation)

		NCDS	SHIN	NGSN	SALSU
Item	Statement				•
i1	I have been feeling optimistic about the future	3.28 (0.87)	3.23 (1.06)	3.44 (0.98)	3.25 (1.08)
i2	I have been feeling useful	3.56 (0.80)	3.50 (0.99)	3.25 (0.92)	3.21 (0.97)
i3	I have been feeling relaxed	3.30 (0.81)	3.32 (0.96)	3.22 (0.94)	3.41 (0.98)
i4	I have been feeling interested in other people	3.54 (0.82)	3.56 (0.97)	3.56 (0.91)	3.42 (1.04)
i5	I have had energy to spare	2.81 (0.91)	2.85 (1.06)	2.94 (1.02)	3.48 (1.06)
i6	I have been dealing with problems well	3.59 (0.78)	3.59 (0.90)	3.35 (0.95)	3.46 (1.06)
i7	I have been thinking clearly	3.71 (0.75)	3.82 (0.90)	3.54 (0.94)	3.65 (1.00)
i8	I have been feeling good about myself	3.39 (0.88)	3.57 (0.96)	3.40 (1.00)	3.49 (1.08)
i9	I have been feeling close to other people	3.58 (0.84)	3.73 (0.93)	3.53 (0.99)	3.72 (1.02)
i10	I have been feeling confident	3.46 (0.88)	3.52 (0.97)	3.37 (1.02)	3.54 (1.06)
i11	I have been able to make up my own mind about things	3.96 (0.79)	4.01 (0.87)	3.63 (0.98)	4.04 (0.93)
i12	I have been feeling loved	3.91 (0.99)	4.04 (0.98)	3.77 (1.08)	3.93 (1.07)
i13	I have been interested in new things	3.60 (0.90)	3.51 (1.02)	3.68 (1.00)	3.73 (1.02)
i14	I have been feeling cheerful	3.58 (0.81)	3.63 (0.86)	3.57 (0.95)	3.79 (1.00)

#### Table 1: WEMWBS item labels, wording, and item means (standard deviations) across samples.

	betweenness	closeness	strength
NCDS	0.67	>0.75	>0.75
NIHS	0.36	>0.75	>0.75
NSPN	0.67	>0.75	>0.75
SALSUS	>0.75	>0.75	>0.75

Table 2: Correlation stability coefficients



Supplemental Figure 1: Point estimates (red) and 95% bootstrap confidence intervals (grey) of network edges (representing partial correlations between items).



Supplemental Figure 2: Stability of centrality indices: point estimates and corresponding 95% CIs.

	NCDS	NIHS	NSPN	SALSUS
NCDS	1	-	-	-
NIHS	0.87	1	-	-
NSPN	0.79	0.75	1	-
SALSUS	0.80	0.82	0.83	1

#### Supplemental Table 1: Spearman correlations between edges.

# The following code shows the script for our analysis. We had data from four cohorts stored in R as four separate data frames objects called wemwbs\_ncds, wemwbs\_nihs, wemwbs\_nspn and wemwbs\_sals. The structure of each data.frame is outlined below and was the same across all cohorts. # head(wemwbs\_ncds) # ID i1 i2 i6 i7 i9 i10 i11 i12 i13 i14 sex i3 i4 i5 i8 N10001N # Female 4 3 5 5 5 5 5 4 5 2 4 5 5 4 4 N10002P 4 4 4 2 4 4 4 3 4 5 5 4 # Male 4 N10007U 5 5 # Female 4 4 4 4 4 5 5 5 5 5 5 5 4 4 5 5 3 5 5 4 # N10008V Male 4 5 5 5 4 5 N10009W # Male 4 4 4 4 3 4 4 4 3 4 5 4 4 4 N10011Q 4 4 3 4 4 4 # Male 3 4 4 4 4 4 4 # sets working directory setwd("D:/...,/") # please insert the path to working directory where you want to save figures # installs required packages install.packages(c("qqpraph", "NetworkComparisonTest", "bootnet", "networktools", "qqplot2", "qridExtra", "EstimateGroupNetwork", "mgm", "reshape", "lemon", "dplyr"), dependencies=T) # loads required packages require(qqraph); require(NetworkComparisonTest); require(bootnet); require(networktools); require(ggplot2); require(gridExtra); require(EstimateGroupNetwork); require(mgm); require(reshape); require(lemon); require(dplyr) # excludes individuals with missing data wemwbs ncds <- na.omit(wemwbs ncds) wemwbs nihs <- na.omit(wemwbs nihs) wemwbs\_nspn <- na.omit(wemwbs\_nspn) wemwbs\_sals <- na.omit(wemwbs\_sals) # makes Table 1: WEMWBS item labels, wording, and item means (standard deviations) across samples temp1 <- round(colMeans(wemwbs\_ncds[,3:16], na.rm = TRUE),2) temp2 <- round(colMeans(wemwbs\_nihs[,3:16], na.rm = TRUE),2) temp3 <- round(colMeans(wemwbs\_nspn[,3:16], na.rm = TRUE),2) temp4 <- round(colMeans(wemwbs\_sals[,3:16], na.rm = TRUE),2) temp1 <- paste(temp1, " (", round(apply(wemwbs\_ncds[,3:16], 2, sd),2), ")", sep="") temp2 <- paste(temp2, " (", round(apply(wemwbs\_nihs[,3:16], 2, sd),2), ")", sep="") temp3 <- paste(temp3, " (", round(apply(wemwbs\_nspn[,3:16], 2, sd),2), ")", sep="") temp4 <- paste(temp4, " (", round(apply(wemwbs\_sals[,3:16], 2, sd),2), ")", sep="") itemstats <- data.frame('Item label'= paste("i",1:14, sep=""), Statement=c( "I have been feeling optimistic about the future", "I have been feeling useful", "I have been feeling relaxed", "I have been feeling interested in other people", "I have had energy to spare", "I have been dealing with problems well", "I have been thinking clearly", "I have been feeling good about myself", "I have been feeling close to other people". "I have been feeling confident", "I have been able to make up my own mind about things", "I have been feeling loved", "I have been interested in new things", "I have been feeling cheerful"), 'NCDS'=temp1, 'NIHS'=temp2, 'NSPN'=temp3, 'SALSUS'=temp4) itemstats # estimates networks using mgm package and computes node predictability

temp1 <- mgm(wemwbs\_ncds[,3:16], type=rep('g', 14), lev=rep(1,14), k=2) pred\_ncds <- predict(temp1, wemwbs\_ncds[,3:16], error.continuous='VarExpl') temp2 <- mgm(wemwbs\_nihs[,3:16], type=rep('g', 14), lev=rep(1,14), k=2) pred\_nihs <- predict(temp2, wemwbs\_nihs[,3:16], error.continuous='VarExpl') temp3 <- mgm(wemwbs\_nspn[,3:16], type=rep('g', 14), lev=rep(1,14), k=2) pred\_nspn <- predict(temp3, wemwbs\_nspn[,3:16], error.continuous='VarExpl') temp4 <- mgm(wemwbs\_sals[,3:16], type=rep('g', 14), lev=rep(1,14), k=2) pred\_sals <- predict(temp4, wemwbs\_sals[,3:16], error.continuous='VarExpl')

# computes fused graphical LASSO networks

±

groupnetwork\_kfold <-

EstimateGroupNetwork(list(wemwbs\_ncds[,3:16],wemwbs\_nihs[,3:16],wemwbs\_nspn[,3:16],wemwbs\_sals[,3:16]),inputType = "list.of.dataframes", covfun = cor\_auto, method = "crossvalidation", strategy = "sequential", k = 10, seed=1234, criterion = c("ebic", "bic", "aic"), count.unique = FALSE, optimize = TRUE, optmethod = "CG", penalty = "fused", weights = "equal", penalize.diagonal = FALSE, ncores = 4, simplifyOutput = FALSE)

# makes Figure 1: Networks of WEMWBS items in four general population samples

png("Figure 1.png", width=10, height=10, units = "in", res = 600)

# assesses network differences across cohorts

par(mfrow=c(2,2))

g1 <- qgraph(groupnetwork\_kfold\$network[[1]], layout = "spring",theme="colorblind", pie=pred\_ncds\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color='#555555", color='#EEEEEE',DoNotPlot=TRUE); plot(g1); title("NCDS",adj=0, font.main=1, line=2.5)

g2 <- qgraph(groupnetwork\_kfold\$network[[2]], layout = "spring", theme="colorblind", pie=pred\_nihs\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#555555", color="#EEEEE",DoNotPlot=TRUE); plot(g2); title("NIHS",adj=0, font.main=1, line=2.5)

g3 <- qgraph(groupnetwork\_kfold\$network[[3]], layout = "spring", theme="colorblind", pie=pred\_nspn\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#5555555", color="#EEEEE",DoNotPlot=TRUE); plot(g3); title("NSPN",adj=0, font.main=1, line=2.5)

g4 <- qgraph(groupnetwork\_kfold\$network[[4]], layout = "spring", theme="colorblind", pie=pred\_sals\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#555555", color="#EEEEEE",DoNotPlot=TRUE); plot(g4); title("SALSUS",adj=0, font.main=1, line=2.5) dev.off()

comp\_ncds\_nihs <- NCT(wemwbs\_ncds[,3:16], wemwbs\_nihs[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, progressbar=TRUE, edges='all')
comp\_ncds\_nspn <- NCT(wemwbs\_ncds[,3:16], wemwbs\_nspn[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, progressbar=TRUE, edges='all')
comp\_ncds\_sals <- NCT(wemwbs\_ncds[,3:16], wemwbs\_sals[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, progressbar=TRUE, edges='all')
comp\_nihs\_nspn <- NCT(wemwbs\_nihs[,3:16], wemwbs\_nspn[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, progressbar=TRUE, edges='all')
comp\_nihs\_nspn <- NCT(wemwbs\_nihs[,3:16], wemwbs\_nspn[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, progressbar=TRUE, edges='all')
comp\_nihs\_sals <- NCT(wemwbs\_nihs[,3:16], wemwbs\_sals[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, progressbar=TRUE, edges='all')
comp\_nihs\_sals <- NCT(wemwbs\_nihs[,3:16], wemwbs\_sals[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, progressbar=TRUE, edges='all')
comp\_nspn\_sals <- NCT(wemwbs\_nihs[,3:16], wemwbs\_sals[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, edges='all')
comp\_nspn\_sals <- NCT(wemwbs\_nspn[,3:16], wemwbs\_sals[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, edges='all')
comp\_nspn\_sals <- NCT(wemwbs\_nspn[,3:16], wemwbs\_sals[,3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, progressbar=TRUE, edges='all')
comp\_ncds\_nihs\$glstrinv.sep # shows network strength
comp\_ncds\_nihs\$glstrinv.pval # p-value for global strength difference

comp\_ncds\_nihs\$einv.pvals[comp\_ncds\_nihs\$einv.pvals\$`p-value`<0.05,] #shows which edges are statistically significant

comp\_ncds\_nspn\$glstrinv.sep comp\_ncds\_nspn\$glstrinv.pval comp\_ncds\_nspn\$einv.pvals[comp\_ncds\_nspn\$einv.pvals\$`p-value`<0.05,]</pre>

comp\_ncds\_sals\$glstrinv.sep comp\_ncds\_sals\$glstrinv.pval comp\_ncds\_sals\$einv.pvals[comp\_ncds\_sals\$einv.pvals\$`p-value`<0.05,]

comp\_nihs\_nspn\$glstrinv.sep comp\_nihs\_nspn\$glstrinv.pval comp\_nihs\_nspn\$einv.pvals[comp\_nihs\_nspn\$einv.pvals\$`p-value`<0.05,]

comp\_nihs\_sals\$glstrinv.sep comp\_nihs\_sals\$glstrinv.pval comp\_nihs\_sals\$einv.pvals[comp\_nihs\_sals\$einv.pvals\$`p-value`<0.05.]

comp\_nspn\_sals\$glstrinv.sep comp\_nspn\_sals\$glstrinv.pval comp\_nspn\_sals\$einv.pvals[comp\_nspn\_sals\$einv.pvals\$`p-value`<0.05,]

# computes average layout Layout <averageLayout(groupnetwork\_kfold\$network[[1]],groupnetwork\_kfold\$network[[2]],groupnetwork\_kfold\$network[[3]],groupnetwork\_k fold\$network[[4]])

# makes Figure 2: Networks of WEMWBS items in four general population samples using average spring layout png("Figure 2.png", width=10, height=10, units = "in", res = 600)

par(mfrow=c(2,2))

g1 <- qgraph(groupnetwork\_kfold\$network[[1]], layout = Layout, theme="colorblind", pie=pred\_ncds\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#555555", color="#EEEEEE",DoNotPlot=TRUE); plot(g1); title("NCDS",adj=0, font.main=1, line=2.5)

g2 <- qgraph(groupnetwork\_kfold\$network[[2]], layout = Layout, theme="colorblind", pie=pred\_nihs\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#555555", color="#EEEEE",DoNotPlot=TRUE); plot(g2); title("NIHS",adj=0, font.main=1, line=2.5)

g3 <- qgraph(groupnetwork\_kfold\$network[[3]], layout = Layout, theme="colorblind", pie=pred\_nspn\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#5555555", color="#EEEEE",DoNotPlot=TRUE); plot(g3); title("NSPN",adj=0, font.main=1, line=2.5)

g4 <- qgraph(groupnetwork\_kfold\$network[[4]], layout = Layout, theme="colorblind", pie=pred\_sals\$errors\$Error.R2, border.width=2, vsize=10, border.color='#555555', label.color="#5555555", color="#EEEEEE",DoNotPlot=TRUE); plot(g4); title("SALSUS",adj=0, font.main=1, line=2.5) dev.off()

# bootstraps networks
set.seed("12345")

boot\_networklasso\_ncds <- bootnet(wemwbs\_ncds[,3:16], nBoots = 2500, default = "EBICglasso", type = "nonparametric", nCores = 4, verbose = TRUE, computeCentrality =TRUE,lambda.min.ratio=0.001)

boot\_networklasso\_nihs <- bootnet(wemwbs\_nihs[,3:16], nBoots = 2500, default = "EBICglasso", type = "nonparametric", nCores = 4, verbose = TRUE, computeCentrality =TRUE, lambda.min.ratio=0.001)

boot\_networklasso\_nspn <- bootnet(wemwbs\_nspn[,3:16], nBoots = 2500, default = "EBICglasso", type = "nonparametric", nCores = 4, verbose = TRUE, computeCentrality =TRUE,lambda.min.ratio=0.001)

boot\_networklasso\_sals <- bootnet(wemwbs\_sals[,3:16], nBoots = 2500, default = "EBICglasso", type = "nonparametric", nCores = 4, verbose = TRUE, computeCentrality =TRUE, lambda.min.ratio=0.001)

# makes Supplementary Figure 1: Point estimates (red) and 95% bootstrap confidence intervals (grey) of network edges (representing partial correlations between items)

png("Supplementary Figure 1.png", width=10, height=10, units = "in", res = 600)

p1 <- plot(boot\_networklasso\_ncds, statistics=c("edge"), plot="area", CIstyle="quantiles", order="sample", legend=FALSE) + ggtitle("NCDS") + theme(axis.text.y = element\_text(size=4))

p2 <- plot(boot\_networklasso\_nihs, statistics=c("edge"), plot="area", CIstyle="quantiles", order="sample", legend=FALSE) + ggtitle("NIHS") + theme(axis.text.y = element\_text(size=4))

p3 <- plot(boot\_networklasso\_nspn, statistics=c("edge"), plot="area", Clstyle="quantiles", order="sample", legend=FALSE) + ggtitle("NSPN") + theme(axis.text.y = element\_text(size=4))

p4 <- plot(boot\_networklasso\_sals, statistics=c("edge"), plot="area", CIstyle="quantiles", order="sample", legend=FALSE) + ggtitle("SALSUS") + theme(axis.text.y = element\_text(size=4))

grid.arrange(p1, p2, p3, p4, nrow =1)
dev.off()

# correlations presented in Supplementary Table 1: Spearman correlations between edges

cor(getWmat(g1)[lower.tri(getWmat(g1))], getWmat(g2)[lower.tri(getWmat(g2))], method="spearman") #0.87 cor(getWmat(g1)[lower.tri(getWmat(g1))], getWmat(g3)[lower.tri(getWmat(g3))], method="spearman") #0.79 cor(getWmat(g1)[lower.tri(getWmat(g1))], getWmat(g4)[lower.tri(getWmat(g4))], method="spearman") #0.80 cor(getWmat(g2)[lower.tri(getWmat(g2))], getWmat(g3)[lower.tri(getWmat(g3))], method="spearman") #0.87 cor(getWmat(g2)[lower.tri(getWmat(g2))], getWmat(g3)[lower.tri(getWmat(g3))], method="spearman") #0.82 cor(getWmat(g2)[lower.tri(getWmat(g2))], getWmat(g4)[lower.tri(getWmat(g4))], method="spearman") #0.83 mean(c(0.87,0.79,0.80,0.75,0.82,0.83)) #computes mean correlation (=0.81)

# makes Figure 3: Centrality indices across cohorts

strength <- as.data.frame(cbind(scale(centrality(g1)\$InDegree), scale(centrality(g2)\$InDegree), scale(centrality(g3)\$InDegree), scale(centrality(g4)\$InDegree)))

closeness <- as.data.frame(cbind(scale(centrality(g1)\$Closeness), scale(centrality(g2)\$Closeness), scale(centrality(g3)\$Closeness)), scale(centrality(g4)\$Closeness)))

betweenness <- as.data.frame(cbind(scale(centrality(g1)\$Betweenness), scale(centrality(g2)\$Betweenness), scale(centrality(g3)\$Betweenness)))

strength <- mutate(strength, id = rownames(strength))
closeness <- mutate(closeness, id = rownames(closeness))
betweenness <- mutate(betweenness, id = rownames(betweenness))</pre>

colnames(strength)<-c("NCDS", "NIHS", "NSPN", "SALSUS", "Symptoms")

colnames(closeness)<-c("NCDS", "NIHS", "NSPN", "SALSUS", "Symptoms") colnames(betweenness)<-c("NCDS", "NIHS", "NSPN", "SALSUS", "Symptoms")

strength\_long <- melt(strength, id="Symptoms") strength\_long\$Symptoms <- rep(1:14,4) names(strength\_long)[2] <- "Cohorts"

closeness\_long <- melt(closeness, id="Symptoms") closeness\_long\$Symptoms <- rep(1:14,4) names(closeness\_long)[2] <- "Cohorts"

betweenness\_long <- melt(betweenness, id="Symptoms") betweenness\_long\$Symptoms <- rep(1:14,4) names(betweenness\_long)[2] <- "Cohorts"

png("Figure 3.png", width=6, height=6, units = "in", res = 600) p5 <- ggplot(data=strength\_long, aes(x=Symptoms, y=value, colour=Cohorts)) + geom\_line(size=1, aes(linetype=Cohorts)) + geom\_point(shape = 21, fill = "white", size = 1.5, stroke = 1) + xlab(" ") + ylab("Centrality") + scale\_y\_continuous(limits = c(-3, 3)) + scale\_x\_continuous(breaks=c(1:14),labels=strength\$Symptoms) + theme\_bw() + theme(panel.grid.minor=element\_blank(), axis.text.x = element\_text(angle = 60, hjust = 1),legend.position="none") + ggtitle("Strength") + scale\_linetype\_manual(values=c("solid", "twodash", "dotted", "dashed"))

 $p6 <- ggplot(data=closeness_long, aes(x=Symptoms, y=value, colour=Cohorts)) + geom_line(size=1, aes(linetype=Cohorts)) + geom_point(shape = 21, fill = "white", size = 1.5, stroke = 1) + xlab(" ") + ylab("Centrality") + scale_y_continuous(limits = c(-3, 3)) + scale_x_continuous(breaks=c(1:14),labels=closeness$Symptoms) + theme_bw() + theme(panel.grid.minor=element_blank(), axis.text.x = element_text(angle = 60, hjust = 1),legend.position="none") + ggtitle("Closeness") + scale_linetype_manual(values=c("solid", "twodash", "dotted", "dashed"))$ 

p7 <- ggplot(data=betweenness\_long, aes(x=Symptoms, y=value, colour=Cohorts)) + geom\_line(size=1, aes(linetype=Cohorts)) + geom\_point(shape = 21, fill = "white", size = 1.5, stroke = 1) + xlab(" ") + ylab("Centrality") + scale\_y\_continuous(limits = c(-3, 3)) + scale\_x\_continuous(breaks=c(1:14),labels=betweenness\$Symptoms) + theme\_bw() + theme(panel.grid.minor=element\_blank(), axis.text.x = element\_text(angle = 60, hjust = 1),legend.position="none") + ggtitle("Betweenness") + scale\_linetype\_manual(values=c("solid", "twodash", "dotted", "dashed"))

p7 <- grid\_arrange\_shared\_legend(p7, position='bottom', plot=FALSE)

grid.arrange(p5, p6, p7, nrow =3) dev.off()

# case dropping bootstrap
set.seed("12345")

boot\_networklasso\_centrality\_ncds <- bootnet(wemwbs\_ncds[,3:16], nBoots = 2500, default = "EBICglasso", type = "case", nCores = 4, statistics = c("strength", "closeness", "betweenness"), model = "GGM", verbose = TRUE, computeCentrality = TRUE.lambda.min.ratio=0.001)

boot\_networklasso\_centrality\_nihs <- bootnet(wemwbs\_nihs[,3:16], nBoots = 2500, default = "EBICglasso", type = "case", nCores = 4, statistics = c("strength", "closeness", "betweenness"), model = "GGM", verbose = TRUE, computeCentrality = TRUE, lambda.min.ratio=0.001)

boot\_networklasso\_centrality\_nspn <- bootnet(wemwbs\_nspn[,3:16], nBoots = 2500, default = "EBICglasso", type = "case", nCores = 4, statistics = c("strength", "closeness", "betweenness"), model = "GGM", verbose = TRUE, computeCentrality = TRUE,lambda.min.ratio=0.001)

boot\_networklasso\_centrality\_sals <- bootnet(wemwbs\_sals[,3:16], nBoots = 2500, default = "EBICglasso", type = "case", nCores = 4, statistics = c("strength", "closeness", "betweenness"), model = "GGM", verbose = TRUE, computeCentrality = TRUE,lambda.min.ratio=0.001)

# makes Supplementary Figure 2: Stability of centrality indices: point estimates and corresponding 95% CIs g\_legend<-function(a.gplot){

tmp <- ggplot\_gtable(ggplot\_build(a.gplot)) leg <- which(sapply(tmp\$grobs, function(x) x\$name) == "guide-box") legend <- tmp\$grobs[[leg]] return(legend)}

p1forlegend <- plot(boot\_networklasso\_centrality\_ncds) + ylab("Correlation") mylegend<-g\_legend(p1forlegend)

png("Supplementary Figure 2.png", width=7, height=7, units = "in", res = 600) p1 <- plot(boot\_networklasso\_centrality\_ncds) + ylab("Correlation") + theme(legend.position="none") + ggtitle("NCDS") + scale\_y\_continuous(limits = c(0, 1)) p2 <- plot(boot\_networklasso\_centrality\_nihs) + ylab("Correlation") + theme(legend.position="none") + ggtitle("NIHS") + scale\_y\_continuous(limits = c(0, 1)) p3 <- plot(boot\_networklasso\_centrality\_nspn) + ylab("Correlation") + theme(legend.position="none") + ggtitle("NSPN") + scale\_y\_continuous(limits = c(0, 1)) p4 <- plot(boot\_networklasso\_centrality\_sals) + ylab("Correlation") + theme(legend.position="none") + ggtitle("SALSUS") + scale\_y\_continuous(limits = c(0, 1))

grid.arrange(p1, p2, p3, p4, mylegend, nrow =3) dev.off()

# computes cs coefficients CS\_ncds <- corStability(boot\_networklasso\_centrality\_ncds) CS\_nihs <- corStability(boot\_networklasso\_centrality\_nihs) CS\_nspn <- corStability(boot\_networklasso\_centrality\_nspn) CS\_sals <- corStability(boot\_networklasso\_centrality\_sals)</pre>

# computes values in Table 2: Correlation stability coefficients CSfinal <- rbind(CS\_ncds,CS\_nihs,CS\_nspn,CS\_sals) rownames(CSfinal) <- c("NCDS","NIHS", "NSPN", "SALSUS") CSfinal

# assesses gender differences

gendercomparison\_ncds <- NCT(wemwbs\_ncds[wemwbs\_ncds\$sex=="Male",3:16], wemwbs\_ncds[wemwbs\_ncds\$sex=="Female",3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, edges='all', progressbar=TRUE) gendercomparison\_ncds\$glstrinv.pval # p-value for global strength difference gendercomparison ncds\$einv.pvals\$Var1[gendercomparison ncds\$einv.pvals\$`p-value`<0.05] #which items are involved in significant differences gendercomparison\_ncds\$einv.pvals\$Var2[gendercomparison\_ncds\$einv.pvals\$`p-value`<0.05] #which items are involved in significant differences gendercomparison ncds\$einv.pvals\$`p-value`[gendercomparison ncds\$einv.pvals\$`p-value`<0.05] #p-value gendercomparison\_nihs <- NCT(wemwbs\_nihs[wemwbs\_nihs\$sex=="Male",3:16], wemwbs\_nihs[wemwbs\_nihs\$sex=="Female",3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, edges='all', progressbar=TRUE) gendercomparison\_nihs\$glstrinv.pval gendercomparison\_nihs\$einv.pvals\$Var1[gendercomparison\_nihs\$einv.pvals\$`p-value`<0.05] gendercomparison\_nihs\$einv.pvals\$Var2[gendercomparison\_nihs\$einv.pvals\$`p-value`<0.05] gendercomparison\_nihs\$einv.pvals\$`p-value`[gendercomparison\_nihs\$einv.pvals\$`p-value`<0.05] gendercomparison\_nspn <- NCT(wemwbs\_nspn[wemwbs\_nspn\$sex=="Male",3:16], wemwbs\_nspn[wemwbs\_nspn\$sex=="Female",3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, edges='all', progressbar=TRUE) gendercomparison\_nspn\$glstrinv.pval gendercomparison\_nspn\$einv.pvals\$Var1[gendercomparison\_nspn\$einv.pvals\$`p-value`<0.05] gendercomparison\_nspn\$einv.pvals\$Var2[gendercomparison\_nspn\$einv.pvals\$`p-value`<0.05] gendercomparison\_nspn\$einv.pvals\$`p-value`[gendercomparison\_nspn\$einv.pvals\$`p-value`<0.05]

gendercomparison\_sals <- NCT(wemwbs\_sals[wemwbs\_sals\$sex=="Male",3:16], wemwbs\_sals[wemwbs\_sals\$sex=="Female",3:16], it=5000, binary.data=FALSE, paired=FALSE, weighted=TRUE, test.edges=TRUE, edges='all', progressbar=TRUE) gendercomparison\_sals\$glstrinv.pval

gendercomparison\_sals\$einv.pvals\$Var1[gendercomparison\_sals\$einv.pvals\$`p-value`<0.05] gendercomparison\_sals\$einv.pvals\$Var2[gendercomparison\_sals\$einv.pvals\$`p-value`<0.05] gendercomparison\_sals\$einv.pvals\$`p-value`[gendercomparison\_sals\$einv.pvals\$`p-value`<0.05]