LBP-TBQ: Supplementary digital content 2

Additional psychometric data

I. Initial homogeneity values for all items

Mokken Scaling analyses were performed with the initial pool of 20 items (Draft LBP-TBQ). Below are the initial item homogeneity values for these items (as part of a 20-item scale), computed separately for each treatment.

Content	H (SE)					
	Pain	Exercise	Manual	Acupuncture		
	medication		therapy			
Credibility	0.51 (0.04)	0.67 (0.03)	0.69 (0.03)	0.67 (0.04)		
Taking/Having [] for back pain makes	0.53 (0.04)	0.70 (0.03)	0.71 (0.03)	0.68 (0.04)		
a lot of sense						
Generally, [] is a believable therapy	0.53 (0.04)	0.67 (0.04)	0. 72 (0.04)	0.71 (0.04)		
for back pain						
I am sceptical about [] as a treatment	0.52 (0.05)	0.66 (0.04)	0.68 (0.04)	0.62 (0.05)		
for back pain in general (r)						
I do not understand how [] could	0.46 (0.05)	0.66 (0.04)	0.65 (0.04)	0.67 (0.04)		
help people with back pain (r)						
Effectiveness	0.60 (0.04)	0.67 (0.04)	0.77 (0.03)	0.76 (0.03)		
[] cannot help people with back pain	0.55 (0.05)	0.60 (0.05)	0.71 (0.05)	0.76 (0.04)		
(r)						
[] can work well for people with back	0.58 (0.05)	0.65 (0.04)	0.80 (0.03)	0.74 (0.05)		
pain						
I think [] is pretty useless for people	0.59 (0.04)	0.65 (0.04)	0.76 (0.03)	0.73 (0.05)		
with back pain (r)						
[] can help people with back pain to	0.62 (0.04)	0.74 (0.03)	0.80 (0.03)	0.82 (0.02)		
get on with their lives						
[] can make it easier for people to	0.62 (0.05)	0.72 (0.03)	0.75 (0.03)	0.77 (0.04)		
cope with back pain						
Concerns	0.35 (0.03)	0.49 (0.03)	0.48 (0.03)	0.43 (0.03)		
I worry that [] could make my back	0.33 (0.04)	0.54 (0.03)	0.60 (0.03)	0.51 (0.04)		
worse (r)						
I think I would find it unpleasant to	0.42 (0.03)	0.54 (0.03)	0.56 (0.03)	0.52 (0.03)		
take/have [] for my back pain (r)						
I have concerns about taking/having	0.44 (0.03)	0.60 (0.03)	0.59 (0.03)	0.58 (0.03)		
[] for my back pain (r)						
I would feel at ease about	0.40 (0.04)	0.56 (0.03)	0.58 (0.03)	0.48 (0.04)		
taking/having [] for my back pain						
I feel that [] would not harm me	0.38 (0.04)	0.46 (0.04)	0.52 (0.03)	0.46 (0.04)		
I am worried that I cannot afford to	0.14 (0.04)	0.27 (0.04)	0.05 (0.05)	0.06 (0.05)		
pay for [] (r)						
Fit	0.72 (0.03)	0.76 (0.03)	0.85 (0.02)	0.72 (0.03)		

I think [] could suit me as a treatment for my back pain	0.69 (0.03)	0.73 (0.04)	0.83 (0.03)	0.70 (0.04)
I think [] would not work for my back pain (r)	0.77 (0.02)	0.75 (0.03)	0.85 (0.03)	0.72 (0.04)
For me, taking/having [] would be a waste of time (r)	0.74 (0.03)	0.80 (0.03)	0.88 (0.02)	0.75 (0.03)
I am confident [] would be a suitable treatment for my back pain	0.71 (0.03)	0.75 (0.03)	0.85 (0.02)	0.74 (0.04)
Given what I know about my back pain, I doubt [] would be right for me (r)	0.70 (0.03)	0.76 (0.03)	0.84 (0.02)	0.67 (0.05)

Note: Italic font is used for items with violations of monotonicity; bold font represents significant violations (at default rest group minsize). Items excluded are shaded.

II. Violations of monotonicity in items regarding acupuncture credibility and fit (final item set)

The final 16-item scale showed good monotonicity across all treatments, with the exception of the three acupuncture items below, each showing one significant violation of monotonicity.

Item number	ltemH	#ac	#vi	#vi/#ac	maxvi	sum	sum/#ac	zmax	#zsig	crit
3	0.62	10	2	0.2	0.07	0.11	0.0112	1.88	1	56
16	0.72	11	1	0.09	0.03	0.03	0.0031	1.72	1	25
20	0.66	12	2	0.17	0.06	0.10	0.0086	2.43	1	48

Note: itemH = Item-scalability coefficient; #ac = number of active pairs that were investigated; #vi = number of violations in which the item is involved; #vi/#ac = proportion of active pairs that is involved in a violation; maxvi = maximum violation; sum = sum of all violations; zmax = maximum z-value; zsig = number of significant z-values; crit = Crit value (Molenaar and Sijtsma, 2000, pp. 49, 74, as cited in van der Ark, 2013)