**Supplementary Material**

**Conspiracy Beliefs and COVID-19 Guideline Adherence in Adolescent Psychiatric Outpatients: The Predictive Role of Adverse Childhood Experiences**

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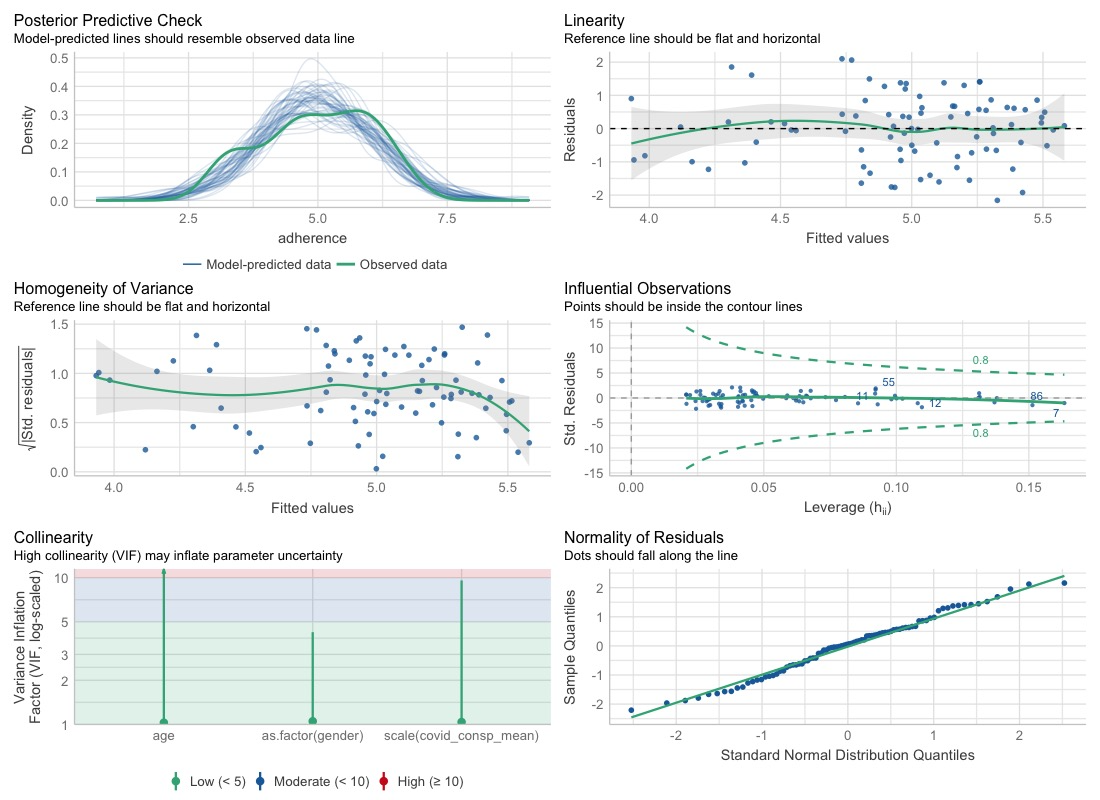
**1: Model Assumptions of Our Confirmatory Analyses**

In this supplementary material, we report assumption tests of multiple regression analyses. The two conspiracy beliefs variables (i.e., specific and generic) were highly correlated in our sample (*r* = .86, *p* < .001). However, they were modeled in separate analyses as separate predictors, and multicollinearity was not an issue or a statistical assumption for these two conspiracy beliefs variables. All subsequent assumption tests of the remaining variables are reported below.

**Associations of Specific Conspiracy Beliefs and Adherence to Protective Guidelines**

For our first multiple regression, the data met the assumption of collinearity (all VIFs < 1.06), normality (Shapiro-Wilk *p* = .459), and independent errors (Durbin-Watson value = 2.45). Supplementary Figure 1 depicts additional model diagnostics—and visual inspection demonstrates that the data also met the assumptions of homogeneity of variance and linearity.

Figure S1: Visual check of model assumptions for the multiple regression of COVID-19-specific conspiracy beliefs and adherence to protective guidelines.



**Associations of Generic Conspiracy Beliefs and Adherence to Protective Guidelines**

For our second multiple regression, the data met the assumption of collinearity (all VIFs < 1.04), normality (Shapiro-Wilk *p* = .314), and independent errors (Durbin-Watson value = 2.48). Supplementary Figure 2 depicts additional model diagnostics—and visual inspection demonstrates that the data also met the assumptions of homogeneity of variance and linearity.

Figure S2: Visual check of model assumptions for the multiple regression of generic conspiracy beliefs and adherence to protective guidelines.

