**Supplementary Information-Appendix**

***Clinical approaches for recognizing socio cognitive deficits.***

To recognize the presence of any social cognitive deficits, the clinician should observe the behavior of the patient and how much his social response is pertinent to the social context. For example, in a context of group therapy, where everyone must raise their hand to be allowed to talk, a patient might start talking profusely without raising hand and while someone else is talking. Similarly, a patient could start to talk loudly in a context where everyone should be silent or, at least, whispering, such as while watching a movie with other people. Another aspect to observe is how the patient perceives other’s actions and feelings. For example, the patient might have a wrong interpretation and reaction to someone’s laugh, thinking that the other person is laughing because of something that they did, instead of for other reasons. In this sense, it could be also useful to ask the patient what the goal of other’s action is, to see if s/he misunderstands the intentions of the other person. For example, it might be possible to evaluate this specific capacity by asking the patient why a certain person that s/he is watching on a TV show behaves in a certain way. In a similar context, it might also be possible to see how much s/he is able to recognize others’ emotion and empathize with other people by asking the patient to tell what the emotion of a character is. Similarly, it could be also interesting to ask the patient to recognize an emotion by decoding the facial expression, which is, as previously mentioned, often an impaired ability in people affected by schizophrenia (Please see Figure S1).

**Figure S1**. Supplementary Materials- Appendix- Clinical Observational Tools

A diagram of a clinical observation tool

Description automatically generated