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Study c	haracteristics								Formatted: Font: Italic
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Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	Formatted: Font: Bold, No underline
1.	Brinchman	Explore therapists'	• <u>Eight</u> 8 MFT therapists	Convenience and	Norway	Qualitative	Grounded	5 (B)	Formatted: Font: Bold, No underline
	n, Moe, Valvik.	practices in	working with adults with	tTheoretical sampling.		interviews	theory		Formatted: Normal, No bullets or numbering
	Valvik, Balmbra,	multifamily therapy (MFT)	severe <u>eating disorders</u> (EDs) and their families.	Data collected over			(theoretical frame of		Formatted: Normal, No bullets or numbering
	Lyngmo,	merupy (IVII 1)	(LDS) and their rainines.	a twoyear period			Aristotle's		Formatted: No underline
	and Skarbø		 Convenience sampling 	with MFT therapists.			virtue ethics)		Formatted: No underline
	(2017)		C						Formatted: Font: 11 pt, Bold, No underline
			Core professions: NNursing (six6) and					_// //	Formatted: Font: (Default) Arial, 11 pt, Bold
			psychology (two2).					///	Formatted: Font: (Default) Arial
								-	Formatted: Indent: Left: 0 cm
2.	Cameron,	Examine the	35 health workers,	Homogeneous	Tasmania	Focus	Thematic and	5.5	Formatted: No underline
	Willis, and Richter	perceptions, knowledge and	including some students, comprising of final year	sampling (precise sampling procedures		groups and interviews	discursive analysis	(B)	Formatted: Left
	(1997)	beliefs of health	nursing and dietetic	not specified)		interviews	(phenomenol		Formatted: No underline
		workers about EDs	students and practicing				ogical		Formatted: No underline
			dietitians and school				framework)		Formatted: No underline
			nurses (both with ED experiences).						Formatted: No underline
			<u>experiences).</u>					• //	Formatted: Centered, Indent: First line: 0 cm
			• <u>Convenience</u>					\	Formatted: No underline
			<u>sampling</u>						Formatted: No underline
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Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	
3.	Carter,	Explore	• 21 healthcare	Convenience	Canada	Focus	Sandelowski'	8:5	Formatted: Right: 0 cm, No bullets or numbering
	Webb,	healthcare	providers <u>.</u>	sampling:-		groups and	s (2000)	(A)	
	Findlay,	providers'	Sample included:	Clinical mManager		interviews	qualitative	4	Formatted: Indent: Left: -0.5 cm, Right: 0 cm
	Grant, and	experiences	Convenience sampling	invited all			description		
	Blyderveen	caring for youths		members of the			method	4	Formatted: Right: 0 cm, No bullets or numbering
	(2012)	with EDs, and	six6 Rregistered nNurses	service to take part				4	Formatted: Indent: Left: 0 cm, Right: 0 cm
		understand the	in fFocus group 1 and	in either the focus					
		barriers and	eight8 MDT members in	groups or					Formatted: Font: Not Bold
		facilitators to	focus group 2 (included	interviews. No					
		integrating a new	pPsychologists, nurses,	further detail given					
		specialist ED	and -dietitians).	on the actual					Formatted: Font: Not Bold
		nurse role	Seven7 interviews with	sampling strategy.					
		in an inpatient	nursing staff (both with						
		nursing unit	and without ED						
			<u>experience).</u>						Formatted: Font: Not Bold
4	Ъ	T 1 4 1	403 303	D	1117	d .	TPI 4'	0.(1)	Formatted: Table, No bullets or numbering
4.	Davey, Arcelus,	Explore the work demands	• 12 healthcare workers -s-from an	Purposive sampling -: 25 eating	UK	Semi- structured	Thematic analysis	9•(A)	Formatted: Font: Bold, No underline
	and Munir	experienced	Eating disorder D service	disorderED staff		interviews	anarysis		Formatted: Normal, No bullets or numbering
	(2014)	by healthcare	. The sample was (-seven 7	were approached		11101 (10 (1)			Formatted: Font: Bold, No underline
		workers in an	nurses, three-3 health	and; they were				\	Formatted: Normal, No bullets or numbering
		adult ED	care workers, and two2	required to have					romatted. Normal, No bullets of numbering
		inpatient service	oOccupational	over three3					
			ttherapists). All had over	months' fulltime					
			five5 years' experience of	experience of					
			working with EDs. D	working with					
			inpatient ward	people with EDs.					
			 Purposive sampling 						Formatted: Font: Not Bold
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Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
5.	Dejesse and Zelman (2013)	Understand collaboration between dieticians and mental health professionals, and consider sources of conflict, their prevention and resolution	•-22 care providers, including 12 mental health practitioners (six6 had PhDs, one4 had a Psy.D, three3 were—qualified MFT practitioners, one4 was a LCSW practitioner and one was a counsellor). All worked across a range of ED services (inpatient, day and outpatient). Purposive sampling	Purposive sampling: — Responded to an online advert to take part-and; each participant needed to work with EDs withand have two years of experience.	US-based researcher s; internation al sample	Semi- structured interviews	Critical incident qualitative methodology	8•(B)	Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering
6.	Hage, Rø, and Moen (2017 ^a)	Identify inpatient staff perspectives on teamwork during meal times on an inpatient eating disorder unit (EDU)	20 milieu therapists • <u>(nine9 nursing staff and 11 were a mix of other staff groups fi.e., -sSocial wWorkers, cChild wWelfare oOfficers or 'similar').</u> All worked within a specialist EDU. • Convenience sampling	Convenience sampling: A—all staff were invited to take part providing they were involved in managing mealtimes on the EDU. No other inclusion criteria provided.	Norway	Semi- structured interviews	Cultural historical activity theory	9.5 (A)	Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm
7.	Hage, Rø, and Moen (2017 ^b)	Explore staff deliberations and actions	• 20 healthcare professionals.	Convenience sampling (sampling is the	Norway	Semi- structured interviews	Inductive content analysis	8:5 (A)	Formatted: No bullets or numbering Formatted: No bullets or numbering

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
		during mealtimes at an EDU	• Convenience sampling • Sample appears to be the same as in Hage, Rø, and Moen (2017 ^a).	same as in above study).					Formatted: Font: Not Bold
8.	Harken, Maxwell, Hainline, Pollack, and Roberts (2017)	Describe the perceptions of hospital staff regarding caring for adolescents with EDs and elicit feedback about changes to service	20 hospital staff. Sample consisted of seven7 paediatric hospital physicians, four4 cCare aAssistants and nine 9-rRegistered nNurses. Sample was between 10-20% of eligible participants on the unit. Purposive	Purposive sampling: A—all recruited via an internal email across the pPaediatric hospital); a. All participants needed to have worked with one ED patient.	US	Semi- structured interviews	Content analysis	8:5 (A)	Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering
9.	Hunt and Churchill (2013)	Explore GPs' understandings and experiences of diagnosing and managing people	• 12 pPrimary- cCare pPhysicians (GPs) drawn from three3 pPrimary-cCare hHealth cCentres	Convenience sampling. N—no further details were provided.	UK	Focus groups	Corpus linguistic and discourse analytic	7:5 (B)	Formatted: Font: Not Bold Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Font: Not Bold
		with AN	(including a uUniversity health centre). GPs Convenience sampling				approaches	•	Formatted: Indent: Left: 0 cm Formatted: Indent: Left: 0 cm

Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	
10.	Jarman, Smith, and Walsh (1997)	Examine clinicians' experiences and understandings of treating young people with AN, with a focus on control	The sample consisted of one1 clinical nurse specialist,- two2 social workers, one1 community nurse and one1 clinical psychologist). Purposive sampling	Purposive sampling:— Participants were recruited from a cChild and aAdolescent team (eEmotional and bBehavioural difficulties). No ED experience specified.	UK	Semi- structured interviews	Interpretati ve phenomenol ogical analysis (IPA)	7:5 (B)	Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm
11.	King and Turner (2000)	Explore the lived experiences of nurses caring for adolescents with AN	 Five5 nurses without specific training in mental health or psychiatryie nurses. Purposive sampling 	Purposive sampling: A—all participants needed to have had direct ED experience in the last six6 months. No further sampling details were given.	Australia	In-depth interviews	Colaizzi's procedural steps of analysis	8:5 (A)	Formatted: Font: Not Bold Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm Formatted: Font: Not Bold
12.	Linville, Aoyama, Knoble, and Gau (201 <u>2</u> 3)	Provide a description and meaning-makingmeaning making of how training affected	Five5 primary- care providers (. The sample consisted of two2 fFamily pPractitioners (GPs), two2 nurses, and one4 paediatrician). No	Purposive sampling: Participants were drawn from a larger study on ED training (initial	US	Interviews	Sandelowski 's (2000) qualitative description method	7:5 (B)	Formatted: No bullets or numbering Formatted: No bullets or numbering

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
	(Mixed- methods study)	perceived knowledge, skills and attitudes regarding ED screening and intervention	further details were provided. • Purposive sampling	sample of 41) six months after the training; 15 participants consented to take part and five5 were interviewed.				4	Formatted: Indent: Left: 0 cm
13.	Linville, Benton, O'Neil, and Sturm (2010) (Mixed- methods study)	To identify the screening and intervention practices of medical providers for EDs, and the education programmes that are needed	12 medical providers drawn from a larger survey sample (n=183). The qualitative sample was drawn from 61 people who consented, and 12 people were interviewed (two 2 ppaediatricians, eight8 family physicians and two2 from obstetrics/ gynaecology). Purposive sampling	Purposive sampling: P— participants were invited at the end of the survey study. No further details given.	US	Semi- structured interviews	Thematic analysis	7•(B)	Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Font: Not Bold Formatted: No bullets or numbering Formatted: Indent: Left: -0.5 cm
14.	Long, Wallis, Leung, Arcelus, and Meyer (2012)	Investigate staff perspectives of mealtimes within UK ED units Us	• 16 staff members. A—all drawn from the MDT (no further information providedgiven) providing that they had experience	Convenience sampling: D— drawn from three Eating Disorder EDUsunits in the UK (drawntaken	UK	Semi- structured interviews	Thematic analysis	7•(B)	Formatted: Font: Bold, No underline Formatted: Normal, No bullets or numbering Formatted: Font: Bold, No underline Formatted: Normal, No bullets or numbering

lore the	of working on mealtimes (not specified). Convenience sampling	from a larger sample of 22 units). The three units were child/ adolescent to adult. No further information provided.					
	E'-1-40 1141						
spective of ple with 2-1 diabetes EDs, and of the lthcare fessionals ting them	dietitians.	Purposive sampling:— Drawn from UK diabetes or EDating disorder services. Sampling not explained, but all participants needed to have had at least one1 years's experience of working with EDs and diabetes.	UK	Semi- structured interviews	Thematic analysis	7•(B)	Formatted: Font: Bold, No underline Formatted: Normal, No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm, First line: 0 cm
lore icians' spectives	• Seven7 inpatient clinicians (—sample consisted of members of	Convenience sampling: Pparticipants were	Canada	In-depth interviews	Inductive analytic approach	7:5 (B)	Formatted: Indent: Left: 0 cm Formatted: Indent: Left: 0 cm Formatted: Font: Bold, No underline Formatted: Normal, No bullets or numbering Formatted: No bullets or numbering
lore ician	s' ives	nurses, and two2 dietitians. Purposive sampling Seven7 inpatient clinicians (—sample ives consisted of members of the MDT, but the	nurses, and two2 dietitians. Purposive sampling Seven7 inpatient clinicians (—sample tives g the Nurses, and two2 dietitians. Seven7 inpatient clinicians (—sample to consisted of members of the MDT, but the years's experience of working with EDs and diabetes. Convenience sampling:— Participants were recruited from the	nurses, and two2 dietitians. Purposive sampling Seven 7 inpatient clinicians (—sample consisted of members of the MDT, but the clinicians feer the MDT, but the clinicians feer the model of the model	nurses, and two2 dietitians. Purposive sampling Seven7 inpatient clinicians (—sample ives g the Diagram of working with EDs and diabetes. Canada In-depth interviews participants were recruited from the	nurses, and two2 dietitians. Purposive sampling Seven7 inpatient clinicians (—sample ives gthe consisted of members of gthe gthe gthe gthe gthe gthe gthe gthe	nurses, and two2 dietitians. ◆ Purposive sampling Seven 7 inpatient Convenience Canada In-depth Inductive 7:5 clinicians (—sample consisted of members of the MDT, but the recruited from the convenience based on convenience consisted of members of the MDT, but the convenience convenience canada In-depth Inductive 7:5 clinicians (—sample consisted of members of the MDT, but the coruited from the convenience canada In-depth Inductive 7:5 clinicians (—sample consisted of members of the MDT, but the coruited from the coruited from the convenience canada In-depth Inductive 7:5 clinicians (—sample consisted of members of the MDT, but the coruited from the coructed from

termination of treatment in an inpatient ED programme 17. Micevski Describe the and strategies nurses drawn from a pediatric ward in a major hospital). No relationships with adolescents with AN 18. Oyer, Cano O'Hallora na experiences of O'Hallora preceptions and Christoe- Clients with Frazier (2016) the raises regarding how the working alliance was form two to 2—30 the was formed and seen was form two to 2—30 the was form two to 2—30 the major of ED patients formed and seen was form two to 2—30 the working alliance was formed and seen from the formation in-deutral unstructure o	Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
and McCann paediatric nurses use to develop relationships with AN Provided. 18. Oyer, Explore O'Hallora n, and experiences of Christoe- Christoe- Frazier (2016) therapists (2016) therapists regarding how the working alliance was formed and seen were betweenwas formed and seen were betweenwas sampling. N=0 further information in-depth interviews in			treatment in an inpatient ED	professions were not specified).	bed EDU.			•	4	Formatted: Table
Oyer, Explore perceptions and n, and experiences of Christoe-Christoe-Clients with Frazier AN and their regarding how the working alliance was formed and seen were betweenwas Oyer, Explore perceptions and consisting of two2 sampling: R— structured interviews phenomenol ogical interviews phenomenol ogical method of seen were betweenwas O'Hallora perceptions and consisting of two2 sampling: R— structured interviews phenomenol ogical method of structured interviews phenomenol ogical method of analysis Formatted: No bullets or numbering structured interviews phenomenol ogical method of analysis Formatted: No bullets or numbering structured interviews phenomenol ogical method of analysis Formatted: No bullets or numbering provided.	17.	and McCann	strategies paediatric nurses use to develop relationships with adolescents	nurses (—drawn from a pediatric ward in a major hospital). No further detail is provided.	sampling. N—no further information	Australia	d in-depth			Formatted: No underline
individual therapists psychotherapy Purposive sampling	18.	O'Hallora n, and Christoe- Frazier	perceptions and experiences of clients with AN and their therapists regarding how the working alliance was formed and challenged during individual	sampling Seven7 therapists consisting of two2 psychologists, one1 social worker, and four4 unspecified therapists. The range of experience was from two to 2—30 years, and the range of numbers of ED patients seen were betweenwas 20 to -1,000 patients. 7 therapists	sampling: R— recruited via professional eating disorder ED organizsations. No further details	US	structured	s (1994) phenomenol ogical method of		Formatted: No bullets or numbering Formatted: No bullets or numbering

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Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	
19.	Palmer	Highlight the lived	• <u>Five</u> 5	<u>Purposive</u>	US	Semi-	Kvale's	8 (B)	Formatted: Font: Bold, No underline
	(2015)	experience of	dance/movement	sampling: P—		structured	interview		Formatted: Normal, No bullets or numbering
		dance/movement therapists who	therapists <u>– participants</u> needed to be registered	participants were invited via a		interviews	analysis		Formatted: No bullets or numbering
		work with people	therapists. Experience	professional					
		with EDs	ranged from one to 1	website and					
			40 years.	'snowballing,' and					
			 Purposive sampling 	haved at least three3 years'				4	
				experience of					Formatted: Indent: Left: 0 cm
				working with EDs.					
• 0			40						
20.	Ramjan (2004)	Explore the difficulties and	• 10 registered nurses—. Rrange of	Purposive sampling: Six-6	Australia	Semi- structured	Thematic analysis	9:5 (A)	Formatted: Font: Bold, No underline
	(2004)	obstacles in	experience as a nurse	drawn from an		interviews	anarysis	(A)	Formatted: Normal, No bullets or numbering
		forming therapeutic	was from 5—five to 26	adolescent ward					Formatted: Indent: Left: 0 cm, Line spacing: single
		relationships	years, and 2-6 years of	and four4 from a					
		for nurses caring for adolescents	working with adolescent AN was two to six years.	general medical ward of a					
		with AN	• Purposive sampling	children's hospital.					Formatted: Font: Not Bold
			r urpost to sumpring					-	Formatted: No bullets or numbering
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21.	Ramjan and Gill (2012)	An iInpatient pProgramme for	• 10 <u>registered and</u>	Purposive sampling:—	Australia	Semi- structured	Thematic analysis	9 (A)	Formatted: No bullets or numbering
	GIII (2012)	adolescents with	enrolled nurses (on a diploma under the	Participants		interviews –	(hermeneutic		Formatted: No bullets or numbering
		anorexia	supervision of a	needed to have		most	-dialectic		
		experienced as a	registered nurse)	more than one		<u>participants</u>	approach)		
		metaphoric .	participated. No further	year's experience		were · · · · ·			
		prison To explore the experiences of	<u>details were</u>	of working with ED. Participants		<u>interviewed</u> twice.			
		the experiences of		ED. I al ticipants		t WICC.			=

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
		adolescents and nurses within an inpatient behavioural programme for AN	provided.paediatric murses Purposive sampling	with the most experience were interviewed first.				•	Formatted: Indent: Left: 0 cm Commented [JRE1]:
22.	Rance, Moller, and Douglas (2010)	Explore recovered ED practitioners' experiences of countertransferen ce and perceptions about the impact of this and their ED history	Seven7 counsellors with ED history who had not previously disclosed this at work. Therapeutic approaches used were Cognitive Annalytic Ttherapy, Cognitive Bbehavioural Ttherapy, Mmotivational Linterviewing, and psychosynthesis. All had two to 2-17 year2s'	Purposive sampling: R—recruited from four4 specialist eating disorderED services. Seven7 participants were selected from 12 who consented to take part. No reason given for choosing the seven participants.	UK	Semi- structured interviews	IPA (constructiv ist- interpretivis t paradigm)	9·(A)	Formatted: No bullets or numbering Formatted: No bullets or numbering
23.	Reid, Williams, and Burr (2010)	Identify staff perspectives and experiences of providing services to those	 Purposive sampling 18 professionals consisted of 2(two psychiatrists, onea psychologist, twoan oOccupational 	Total sampling: — Ddrawn from ED outpatient services. No detail was given on inclusion	UK	Semi- structured interviews	Thematic analysis	8:5 (A)	Formatted: Font: Not Bold Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
		with EDs	therapists (including one who was also a GP)T, seven7 ward staff/nurses, two2 dietitians,	criteria, such as experience of working with ED.					Formatted: Font: Not Bold
			one endocrinologist, onean art therapist and two support workers). No further details provided. Total sampling						
24.	Reid, Williams, and Hammersle y (2010)	Investigate GPs' perspectives and experiences of assessing, and facilitating care for, ED clients	 20 GPs. —No further information is provided. Purposive sampling 	Purposive sampling: D— drawn from Northern UK GP practices, including a uUniversity pPractice.	UK	Semi- structured interviews	Thematic analysis	6:5 (B)	Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm
25.	Ryan, Malson, Clarke, Anderson, and Kohn	Explore the ways in which "ED nursing" is constituted in nurses' accounts	• 15 nurses. N—no further details are provided. According to the authors, this was done to protect the	Purposive sampling: —Three ED wards (two children's wards and one adolescent	Australia	Semi- structured interviews	Discourse analysis	8·(B)	Formatted: Font: Not Bold Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm, Line spacing: single
	(2006)	of nursing children and adolescents with EDs	anonymity of the participants. Purposive sampling	ward). No further detail given.					Formatted: Font: Not Bold Formatted: No bullets or numbering Formatted: Font: Not Bold Formatted: Indent: Left: 0 cm

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
26.	Seah, Tham, Kamaruza man, and Yobas (2018) (Mixed- methods study)	Explore the training needs of nurses working with people with EDs and their perceptions of their work	19 nurses, which included a sub-sample of seven 7 for the qualitative interviews. Out of the 19 participants, two 2 were enrolled (on a diploma), 16 were registered nurses, and 1 one was an 'other'. All had over one 1 year's 2 experience of working on an EDU. Census/total sampling	Census/total sampling: — Pparticipants were recruited from a tertiary general hospital and had at least three3 months' experience of working with ED.	Singapore	Open-ended questions and semi- structured interviews	Content analysis and thematic analysis	9:5 (A)	Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Indent: Left: 0 cm
27.	Snell, Crowe, and Jordan (2010)	Investigate and theorisetheorize the experiences of nurses in developing a therapeutic relationship with inpatients with EDs	• Seven7 nurses. P— participants were either registered or comprehensive nurses. The sample had, on average, four4 years' experience of working with ED, and between 2.5- and 20 -years' experience of mental health nursing. • Convenience sampling	Convenience sampling: S— sample was recruited via a leaflet campaign within a nNational Eating DisordersEDU-Unit. The unit has an emphasis on 'long- term recovery'.	New Zealand	Interviews	Grounded theory	6*(B)	Formatted: Indent: Left: U cm Formatted: Font: Bold, No underline Formatted: Normal, No bullets or numbering

Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	
28.	Tan,	Explore ethical	• 10 health	Convenience	Singapore	Focus group	"Iterative	6:5	Formatted: Font: Bold, No underline
	Karim,	issues that arise	professionals. Out of the	sampling. —No			process of	(B)	Formatted: No underline
	Lee, Goh, and Lee	for mental-health professionals	sample, nine-9 had worked on an EDU for	<u>further information</u> was given.			analysis" (p.42)		Formatted: Normal, No bullets or numbering
	(2013)	treating EDs in	people aged 13 and	was given.			(p. 4 2)		
		the Singapore	above, and one worked						
		context	at a psychiatric hospital.						
			Three3 were						
			psychiatrists, three3						
			were trainee psychiatrists, two2 were						
			psychologists, one1 was						
			an occupational						
			therapist, OT and one 1						
			was a family therapist.						
			Four4 had experience of						
			working abroad (UK, USA, and, Australia).						
			• Convenience						
			sampling						
29.	Trammell,	Explore the	• 16 registered	Purposive	US	Focus	Open coding	8 (B)	Formatted: Font: Bold, No underline
	Reed, and	self-efficacy	dietitian nutritionists.	sampling: R—		groups	guided by		Formatted: Normal, No bullets or numbering
	Boylan	of dietitian	Attendees at a	recruitment was			social		
	(2016)	nutritionists working with	professional dietitian/ nutrition conferencess.	undertaken by email, and advert,			cognitive		
		clients with EDs	• Purposive sampling	ListsServs and in			theory		
		CHOICE WITH LDS	- 1 ai posive sampinis	nNewsletters prior				4	Formatted: Indent: Left: 0 cm
				to the conferences.					Committee algorithm and the second
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Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	
30.	Walker	Explore the	• 15 qualified	<u>Purposive</u>	Australia	Focus group	Consensual	7:5	Formatted: Font: Bold, No underline
	and Lloyd		health professionals. The	sampling:—			qualitative	(B)	Formatted: Normal, No bullets or numbering
	(2011)	of health	sample consisted of	Sample was			research		Formatted: No bullets or numbering
		professionals	three3 psychologists,	recruited via a					
		towards treating clients with EDs	two2 oOccupational	mental health					
		chemis with EDS	<u>tTherapists, two2</u> medical registrars, one4	<u>clinic, via the team</u> leader.					
			psychiatrist, three2 social	icauci.					
			workers, and four4						
			mental health nurses; 11						
			had previous ED						
			experience.						
			 Purposive sampling 						
21	***		42.55	<i>a</i>	***	0 11	G 1		Formatted: Indent: Left: 0 cm
31.	Warren,	Explore	• 43 ED treatment	Convenience	US	Open-ended	General inductive	7:5	Formatted: Font: Bold, No underline
	Crowley, Olivardia.	treatment providers' n experiences of working with people with EDs	providers <u>– four4 males</u> and 39 females. Sample	sampling: R— recruited via an annual meeting of an eating disorder		questions on questionnair	approach	(B)	Formatted: Normal, No bullets or numbering
	and Schoen (2008)		consisted of				арргоасп		Formatted: No bullets or numbering
			psychologists, nurses,			e			
	(====)		and social workers	ED association					
	(Mixed-		(numbers not specified);	(MEDA).					
	methods		13 had their own history						
	study)		of ED, and ED						
			experience ranged from						
			six6 months to 31 years.						
			 Convenience sampling 						

Study	Authors	Aim	Participants	Sampling	Country	Data	Analysis	CASP	Formatted Table
			and sampling			collection		rating	
32.	Warren,	Examine perceived	-298 participants who	Convenience	US	Open-ended	General	6:5	Formatted: Font: Bold, No underline
	Schafer,	contributors to		sampling:—		questions on questionnair	inductive	(B)	Formatted: Normal, No bullets or numbering
	Crowley, and	burnout, efforts to avoid or	settings. 146 endorsed multiple theoretical	<u>Undertaken at</u> various ED			approach		Formatted: No bullets or numbering
	Olivardia	manage burnout,	orientations, 88 used	conferences, via		e			
	(2012)	and related	CBT, 31 used	LlistsServes and					
		recommendations	psychodynamic, 13 were	through treatment					
		for early-career ED	eclectic, and seven2 were	centres					
		practitioners	humanistic. Mean ED						
			experience was-13.02						
			<u>vears.</u> • Convenience sampling						
			• 139 participants						Formatted: Font: Bold, No underline
			had their own history						Pormatted: Point: Bold, No underline
			of an ED.						
			•					-	Formatted: Indent: Left: 0 cm
33.	Williams	Investigate	• 11 ED therapists with a	Purposive P	Canada	Semi-	Interpretive	10 (A)	Formatted: Font: Bold, No underline
	and Haverkam	ED therapists' perceptions of	variety of theoretical orientations – CBT,	sampling: P— participants were		structured interviews	description		Formatted: Normal, No bullets or numbering
	пачегкані р (2015)	whether and how	psychodynamic, and,	recruited via		interviews			Formatted: No bullets or numbering
	p (2013)	their ED histories	family therapy. ED	advertisements					
		have ethical	experience was 2.2 to-22	sent out to					
		relevance	years.	members of					
			 Purposive sampling 	professional					
			 Histories of AN, 	organizsations. All					Formatted: Font: Bold, No underline
			BN and/or	<u>participants</u>					
			eating disorder	needed to have					
			not otherwise	two2 years' ED experience, be					
			specified EDNOS. Length	experience, be					_

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
			of ED was between 2— two and 28 years; all did not have formal ED treatment, and all were in recovery.	qualified to, at least, master's level, and have ED clients make up at least 25% of their caseload with ED.					
34.	Wright (2015)	Explore the lived experience of the therapeutic relationship between people with AN and care workers	practitioners (—seven7 nurses, two2 dietitians, care workersone 1 therapist, one1 healthcare assistant, and two2 doctors).	Purposive sampling from two eating disorderED services. No further detail s wasare given.	UK <u>.</u>	Semi- structured interviews	IPA	7•(B)	Formatted: Indent: Left: 0 cm Formatted: Font: Not Bold Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Font: Not Bold
35.	Wright and Hacking	Explore the therapeutic relationship	Experience at the uUnit was between 11 months and seven7 years. Purposive sampling Seven 77 healthcare professionals working in day care	Convenience sampling: R— recruited from a	UK <u>.</u>	Semi- structured interviews	IPA	7.5 (B)	Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering
	(2012)	among healthcare providers and adults accessing day care for AN	(one-1 CBT therapist, one 1 dietitiaon, and five- 5 nurses – (three of the nurses 3 had counselling qualifications)).	day service. No further details about sampling were provided.					Formatted: Font: Not Bold Formatted: Font: Not Bold

Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
36.	Zugai, Stein- Parbury, and Roche (2018 ^a) (Mixed- methods study)	Understand the inpatient therapeutic alliance between nurses and those with AN	• 20 nurses (-14 were-registered nurses, 4 werefour enrolled nurses, and two2 were nursing assistants). • Convenience sampling	Convenience sampling: S— sample needed to be working on a specialist ED unitU. No restrictions were placed on length of experience or designation. Sample was recruited from six6 specialist ED wards.	Australia	Semi- structured interviews	Thematic analysis	8:5 (A)	Formatted: Indent: Left: 0 cm Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Font: Not Bold Formatted: Indent: Left: 0 cm
37.	Zugai, Stein- Parbury, and Roche (2018 ^b) (Mixed- methods	Understand the context of the inpatient setting for the treatment of AN	• -220 nurses. • Convenience sampling • Sample appears to be the same as in Zugai et al. (2018a);); however, they state that the average range length of nursing experience was 12.5 years and the sample's ED experience	Convenience sampling: — Appears to be the same as above, although this is not clearly stated.	Australia	Semi- structured interviews	Thematic analysis	6:5 (B)	Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: No bullets or numbering Formatted: Font: Not Bold Formatted: Font: Not Bold

	Study	Authors	Aim	Participants and sampling	Sampling	Country	Data collection	Analysis	CASP rating	Formatted Table
				wasranged from 0.5 to – 17 years.						-
									-	Formatted: Indent: Left: 0 cm
4										Formatted: Font: Not Bold