



‘Hit and Miss’: Experiences with Healthcare Professionals

Beat conducted a survey from 16th September 2021 - 11th October 2021 on experiences of people with an eating disorder of seeking help from healthcare professionals.

What did we find in 2017?

A 2017 review of medical training relating to eating disorders found undergraduate and postgraduate eating disorder training to be minimal in the UK (1). Five years ago, we ran a survey of nearly 1,700 people, which sought to better understand the kinds of experiences that people with eating disorders have when seeking help from their GPs (3). The findings of this survey described support for an eating disorder from a GP as a ‘lottery’. Only 42% of people with an eating disorder felt their GP understood eating disorders, and only 34% believed that their GP knew how to help them with their eating disorder.

Five years on, what has changed?

In 2021, ahead of Eating Disorder Awareness Week (EDAW) 2022, we ran a similar survey to understand the lived experiences of people who have had eating disorders in seeking help and accessing treatment. This time, however, we extended it to include experiences with all healthcare professionals (not just GPs) and included a section on whether people felt there were missed opportunities for early intervention. We also focused this survey on people with lived experiences of having had an eating disorder themselves, rather than families or carers.

The following is a summary of the results we found from participants in Northern Ireland.

In Northern Ireland

When we asked survey participants to focus on the **first time they had sought help** from a GP, 22 participants reported that their GP was located in Northern Ireland. Of these participants:

- 45% felt that their GP did not understand eating disorders
- 55% felt their GP did not know how to help them with their eating disorder
- 90% felt that their GP would benefit from more eating disorder training
- 50% felt their quality of care was ‘poor’

A positive experience with a GP or healthcare professional can make a real difference. But many are not well equipped to support people with eating



disorders. The survey results showed a broad range of patient experiences, ranging from very positive to very negative:

- *'Some doctors understand, however [a lot] don't.'*
- *'At first the support was minimal and they were not listening. However after diagnosis my GP (different than before) was very helpful, caring and compassionate'*
- *'my GP dismissed binge eating disorder'*
- *'My gp hadn't heard of it so how could they support me..[?]'*
- *'Took quite a while, and another GP, before I was offered help.'*
- *'They were brilliant for emotional support - someone to talk to but that's about it'*
- *'He told me I would 'grow out of it' and that my parents would be quite disappointed in me.'*
- *'My GP speaks very quickly, asks questions very quickly, left no room in the appointment. It was quite an impersonal process- I felt that I didn't matter to her much as a person- it was immediately trying to get me referred onto a different system. I felt like a problem.'*
- *'They knew the typical signs and referred me on'*

Help seeking can be incredibly difficult for someone with an eating disorder. One person who had sought help from a GP in Northern Ireland told us that:

'It is extremely difficult to make yourself an appointment, walk in alone, and tell someone you are struggling. To have no eye contact, someone typing furiously at the computer, blitzing me with questions and sending me on my way with a vague idea of referral - was not a good experience!'

Our GPs want to provide the best quality care for people with eating disorders. Yet the average GP receives less than two hours of training on eating disorders in their entire medical degree (1). A fifth of UK medical schools don't provide any training on eating disorders at all (1). Lack of eating disorder training has delayed access to treatment for years, and leads to devastating, and even fatal, consequences (4,5).

We are calling for UK medical schools to offer proper training on eating disorders. Eating disorder training should build awareness and knowledge of eating disorders (e.g. knowledge of how to spot the signs of an eating disorder, common



comorbidities and the importance of early intervention) and practical skills (e.g. risk assessment, examination and communications skills) to support people with eating disorders. We need our future GPs to be equipped with the knowledge and understanding they need to support their patients.

References

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- (3) Beat. (2017). *Early Intervention on Eating Disorders: The Crucial Role of GPs*. <https://www.beateatingdisorders.org.uk/about-beat/policy-work/policy-and-best-practice-reports/early-intervention-on-eating-disorders-the-crucial-role-of-gps/>
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- (5) Horstead, Sean. (2021, March). *Report to Prevent Future Deaths*. <https://www.judiciary.uk/wp-content/uploads/2021/03/Averil-Hart-2021-0058-Redacted.pdf>