## Supplementary File 2 – Summary of Emergent Themes

## Table 1. Summary of content areas of focus and emergent themes in adolescent participants

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| Content areas of focus Emergent themes  |  Number of participants  | Number of references across participants |
| Understanding of transition processes Limited understanding of transition processes Some knowledge of transition processes Types of services offered in adult health system  Age cut-off for pediatric health services Negative perceptions of adult health clinic Source of information about transition processes Pediatric healthcare team Caregivers  | 533352 | 1264452 |
| Barriers of transition process Re-explaining and re-sharing information in the adult health system Timing of transition discussions in the pediatric health system are late Uncertainty surrounding parental involvement Managing health system transitions with other life transitions (e.g. post-secondary education) Geographical location of adult health services Lack of support while waiting for uptake into adult health system Private nature of adult health services (i.e. financial challenges) Lack of options and choices for appropriate adult health services for ED management | 33222111 | 73542311 |
| Facilitators of transition process Involvement of pediatric healthcare team  Parental involvement Supporting adolescent in ED management Researching and finding suitable adult ED management services Feeling prepared for the transition Specific appointments with pediatric healthcare team to discuss details of transition Appropriate timing of transition discussions in the pediatric health system Establishing relationships with adult healthcare providers Friends and social support  | 555355411 | 16131131413411 |
| Recommendations of interventions to improve transition processes *A coordinated meeting among adult and pediatric healthcare teams* A meeting among adult and pediatric healthcare teams would be beneficial Associated challenges for a meeting between adult and pediatric healthcare teams Time constraints of health professionals Feeling uncomfortable when others speak about the adolescent’s condition *Transition passport* A transition passport would be beneficial *Transition coordinator* A transition coordinator would be beneficial A transition coordinator would not be beneficial *Transition phone application* A transition phone application would be beneficial A transition phone application would not be beneficial *Other recommendations mentioned by participants*  Phasing out pediatric healthcare services  Booklet with information about transition processes Education on the adult health system Extending pediatric health services beyond 18th birthday Implementing more structure in the transition process *Special considerations for implementing these interventions for individuals with EDs* Ensuring sensitivity when displaying information related to ED (e.g. weight) Unable to obtain a comprehensive understanding of the adolescentGeneral themes arising throughout interviews  Feelings of anxiety and stress Autonomy Worry about ED relapse Feelings of excitement | 5115233221111315532 | 811523323211141161143 |

## Table 2. Summary of content areas of focus and emergent themes in caregiver participants

|  |  |  |
| --- | --- | --- |
| Content areas of focus Emergent themes  |  Number of participants  | Number of references across participants |
| Understanding of transition processes Limited understanding of transition processes Some knowledge of transition processes Negative perceptions of adult health clinic Age cut-off for pediatric health services Types of services offered in adult health system Transition processes are difficult   Source of information about transition processes Pediatric healthcare team Other parents (e.g. parent support group) Other healthcare professionals Media (e.g. television) | 533224111 | 2693326211 |
| Barriers of transition process Lack of support while waiting for uptake into adult health system Uncertainty surrounding parental involvement Finding suitable adult healthcare providers Timing of transition discussions in the pediatric health system are late Managing health system transitions with other life transitions (e.g. post-secondary education) Beliefs that adolescent is not ready to manage ED independently in adult health system Differences in opinions surrounding ED management between caregiver and adolescent Managing demands of current ED treatment with future planning Re-explaining and re-sharing information in the adult health system Family doctors are ill-equipped to manage eating disorders Private nature of adult health services (i.e. financial challenges) Geographical location of adult health services  Perceptions of lack of funding for eating disorder programs Lack of options and choices for appropriate adult health services for ED management | 55555433322221 | 1611106116109854221 |
| Facilitators of transition process Parental involvement Supporting adolescent in ED management Researching and finding suitable adult ED management services Providing input in ED management Judging the effectiveness of ED management  Involvement of pediatric healthcare team Support in transition process Recommendations and referrals of suitable adult ED management services Feeling prepared for the transition Information from the pediatric healthcare team Appropriate timing of transition discussions in the pediatric health system Establishing relationships with adult healthcare providers Family doctors are helpful in ED management Having options and choices of available adult healthcare services Beliefs that adolescent is ready to transition to the adult health system | 554115434432211 | 199531135991045241 |
| Recommendations of interventions to improve transition processes *A coordinated meeting among adult and pediatric healthcare teams* A meeting among adult and pediatric healthcare teams would be beneficial A meeting among adult and pediatric healthcare teams would not be beneficial Associated challenges for a meeting between adult and pediatric healthcare teams Time constraints of health professionals  *Transition passport* A transition passport would be beneficial Neutral or uncertain  *Transition coordinator* A transition coordinator would be beneficial *Transition phone application* A transition phone application would be beneficial A transition phone application would not be beneficial *Other recommendations mentioned by participants*  Phasing out pediatric healthcare services  Keeping in contact with youth after they leave the pediatric health system Education on the adult health system Extending pediatric health services beyond 18th birthday *Special considerations for implementing these interventions for individuals with EDs*Each adolescent’s ED is unique and thus it would be beneficial for families to have options of different interventions  Security and confidentiality of personal information related to ED Sensitivity surrounding information that are ED triggers (e.g. weight) General themes arising throughout interviews  Feelings of anxiety and stress Autonomy Worry about ED relapse Comparison of transition to pediatric clinic and pediatric-to-adult health system transition Communication between former and new healthcare providers  Supportive pediatric healthcare team Difficulties gaining admission to pediatric healthcare services Waitlists | 5113253222114215542221 | 10113210342242621372865441 |