



Physical Activity in the Treatment of Eating Disorders: A Mixed-Methods Study of Current Practice in Norway

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Physical activity (PA) is recommended in the treatment of most psychological and physical disorders, with the exception of eating disorders (EDs). In ED treatment, physical activity has largely been restricted due to concerns about patients' medical condition and the risk that it may reinforce compulsive exercise behaviors and hinder weight gain.

The aim of this study is to investigate the extent to which PA is used in the treatment of EDs, to explore experiences with such practices, and to identify factors that may hinder or facilitate their implementation.

This is a cross-sectional study with a mixed-methods approach. Unit managers from all ED units in Norway were invited to complete a questionnaire regarding the provision of physical activity. A random sample of clinicians from different units was invited to participate in semi-structured interviews exploring experiences with the implementation of physical activity, or reasons for its absence.

A total of 28 units responded to the survey (7% of all eligible units), of which 50% reported offering physical activity as part of treatment. In-

patient units more commonly provided physical activity, whereas outpatient clinics rarely did so. Facilitating factors included managerial engagement, financial prioritization, and professional PA competence within the clinical team. Barriers included low financial prioritization, the absence of PA in national treatment guidelines, and the perception that provision of PA depends on a small group of passionate individuals within each treatment team.

The results indicate a positive attitude toward PA in the treatment of EDs, irrespective of whether PA is currently provided. Clinicians call for greater financial prioritization to enable the hiring of staff with professional PA competence as part of treatment teams, as well as the development of national treatment guidelines. The low response rate raises concerns about potential sampling bias.