

Figure 2: Characteristics of the studies examined

Authors	Date	Sample Characteristics	Design	Data Collection	Summary of findings by theme
Anderson et al	2013	UK study of 40 CRC survivors, 20 male and 20 female participants, mean age of 60 years	Qualitative	Focus groups in 6 community-based settings across England and Scotland	<p><b>Dissatisfaction with dietary advice</b> counterintuitive advice - not offered protection in the past; broad/useless advice</p> <p><b>Motivating factors</b> empowerment peer support; maximising health; individualised support</p> <p><b>Barriers to change</b> flatus and diarrhoea</p> <p><b>Sources &amp; formats of info</b> prefer basic, written information</p> <p><b>Impact of symptoms</b> pain and fear of eating</p>
Beeken et al	2016	UK sample of 19 cancer survivors, of which 1 was a CRC survivor. 8 male and 11 female participants, aged between 24 – 77 years	Qualitative	Semi-structured interviews: face-to-face (n=5), telephone (n=14)	<p><b>Dissatisfaction with dietary advice</b> basic or no information received</p> <p><b>Motivating factors</b> empowerment; maximising health</p>
Brown et al	2016	UK study of 19 CRC survivors of British nationals (n=18) and Polish national (n=1). 11 male and 8 female participants	Qualitative	Semi-structured interviews, conducted in participants' homes	<p><b>Dissatisfaction with dietary advice</b> too generalised</p> <p><b>Barriers to change</b> limited personal knowledge or support</p> <p><b>Sources &amp; formats of info</b> importance of support groups; dietitian support</p> <p><b>Impact of symptoms</b> restricting day to day life; too embarrassed to discuss flatus and diarrhoea with HCPs</p>
Burden et al	2016	UK study of 25 CRC survivors, mean age 67 years, 18 male and 7 female participants	Qualitative	Semi-structured interviews	<p><b>Dissatisfaction with dietary advice</b> non-specific - no information on protein and energy requirements</p> <p><b>Motivating factors</b> empowerment; peer support; maximising health</p> <p><b>Impact of symptoms</b> weight changes and anxiety</p>
Corbett et al	2018	UK study of 32 survivors of breast (n=11), colon (n=8) and prostate (n=13) cancer. Mean age of 68.8 years, 18 male and 14 female participants	Qualitative	Semi-structured interviews	<p><b>Dissatisfaction with dietary advice</b> counterintuitive advice - belief that advised changes would negatively impact wellbeing; no reason to change as survived to older age with current diet choices</p>

					<p><b>Motivating factors</b> empowerment; maximising health</p> <p><b>Barriers to change</b> pressure to change; being blamed for consequences of past dietary choices; expected impact of change on well-being; unrealistic role models; poor self-efficacy; limited knowledge and support; mistrust of experts; perceived prohibitive costs of healthy food</p>
Hardcastle et al	2017	Australian study of 24 CRC survivors, mean age of 69.4 years. 11 male and 13 female participants	Qualitative	Semi-structured, face-to-face interviews	<p><b>Dissatisfaction with dietary advice</b> participants without a colostomy felt advice is too non-specific – want more information on calories, food groups, portion sizes, food labelling</p> <p><b>Motivating factors</b> empowerment; peer support; individualised support</p> <p><b>Barriers to change</b> poor self-efficacy</p> <p><b>Impact of symptoms</b> debilitating</p>
Hoedjes et al	2017	Dutch study of 1198 CRC survivors (questionnaire n=1198, focus group n=16)	Mixed methods	Questionnaire (n=1198) Focus group (n=16)	<p><b>Motivating factors</b> peer support; empowerment; individualised support</p> <p><b>Barriers to change</b> poor self-efficacy</p> <p><b>Sources &amp; formats of info</b> face-to-face preferred; importance of support group; individualised support from dietitian preferred</p>
Matsell et al	2020	UK study of 75 CRC survivors and their carers (CRC survivors n=70; carers n=5)	Mixed methods	Descriptive, cross-sectional survey, comprising of closed questions and free text responses	<p><b>Dissatisfaction with dietary advice</b> 69.3% not received advice needed</p> <p><b>Motivating factors</b> empowerment; individualised support</p> <p><b>Barriers to change</b> flatus and diarrhoea</p> <p><b>Sources &amp; formats of info</b> most received written guidance; individualised support from dietitian; support groups important</p> <p><b>Impact of symptoms</b> anxiety whilst travelling</p>