

# BANA BE YOURSELF

A publication of the Bulimia Anorexia Nervosa Association

Fall 2020

## A Mental Health and Wellness Magazine



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- Fat Shaming: Problem or Solution?
- You mean Men have Eating Disorders too ?
- Tips from our Dietitian
- The Perfect Challenge
- Distress Tolerance Skills List
- Taking Care of Yourself during the Covid-19 Isolation
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BANA Be Yourself magazine is delivered virtually to community members, businesses and organizations throughout the Windsor-Essex Region, and is also available online at [www.bana.ca/magazine](http://www.bana.ca/magazine). Direct email subscription are available by request to [info@bana.ca](mailto:info@bana.ca).

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### **Publishers Note:**

Hello Readers!

I am honored and delighted to welcome you to our first issue of BANA BE YOURSELF- A Mental Health and Wellness magazine. Whether you're reading through these pages with your cup of morning coffee (tea), learning new tips about wellness, our organization, or just enjoying the beautiful positive messages, we are here for you.



A big thank you to all of the people who have contributed to this magazine, especially to Patrick Kelly, Editor-in-Chief and all the contributing writers and photographer.

With so much uncertainty, with daily reports on new cases of COVID-19, new measures to protect us, new restrictions, it is frightening- and it is ok to feel that way. However, we must also maintain community and social cohesion in the midst of this physical distancing. We hope this publication helps.

Thank you in advance for the support, we are looking forward to bringing you many more issues in the month to come.

Be kind to yourself, generous with others and stay healthy during this time.

Sincerely, Luciana Rosu-Sieza, Executive Director

Hosting & production of this publication are thanks in part to the support of the **Paradise Charitable Gaming Association.**



# 4 Ways to Stay Encouraged Throughout Recovery

By: Stephani Fenkany, BANA Health Educator



The journey of healing from an eating disorder has its ups and downs. No experience is the same, and it's important to acknowledge that it will look different for everyone.

However, one thing we know that is true for all is that recovery is never linear. In a perfect world, we would see a straight line towards a final destination. In this ideal situation, rainbows, butterflies and streams of sunshine would be waiting and a harpist would come out to serenade us and give us accolades. Wouldn't this be nice?

Well, we know it doesn't work like that. Recovery looks more like a mix of sunshine, rain clouds, clear skies and large thunderstorms. There is no destination, but rather, it is made up of consistent effort. Not to mention the playlist would probably not be a harp melody, but perhaps a mashup of all genres of different tempos, from fast heavy metal to slow pop ballades, depending on the day!

That being said, there is hope. It does get easier. YOU get stronger. You add more to your mental health toolkit. You release what you are able to when you are ready. The small wins and adaptations you make as you progress add up. Along the recovery journey, it is completely normal to feel like you've reached a point where you can't go on, you're exhausted, or you feel you've heard it all. It is normal to have those days. The most important factor is to keep going.

**Here are 4 suggestions that may help you stay motivated throughout recovery:**

1. Continue to express your emotions.
2. Slow down and be kind to yourself
3. Surround yourself with supportive people who make self-care a priority
4. Relish in activities that help you connect to yourself

## **1. Continue to express your emotions regularly**

It may be that you are feeling great, and that is wonderful, nevertheless, it is still important to talk to someone you trust (therapist, friend, peer, family member, etc) regularly. Although you may be asymptomatic one day, the internal process is still underway. The more you discuss and talk about it, the more unearthing and healing that will take place.

## **2. Slow down and be kind to yourself**

Keep in mind that you're going through periods of deep learning. Your mind and body need rest. Take it step by step. Remember that you won't have it all figured out in one day. Give the healing process time and really place your attention on it while you are working on it, so that it won't interrupt your day to day in a bigger way going forward.

## **3. Surround yourself with supportive people who make self-care a priority**

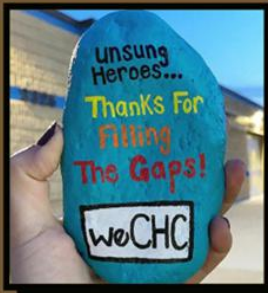
Positive energy and encouragement are contagious. Be aware of who makes you feel uplifted and hopeful. You need to fill yourself up, rather than be around those who might further drain you. Think about qualities you like in certain people and make time to be around their positive influence.

## **4. Relish in activities that help you connect to yourself**

Throughout recovery, you may find out things about yourself and gain more clarity of who you are. Nourish this new you with activities and hobbies you enjoy. This could be as simple as reading a book before bed, learning about gardening online, or listening to music while sitting outdoors. Whatever it is, make sure you end it feeling happy, calm and satisfied, like you've just fed your soul.









# Fat Shaming: Problem or Solution?

by Sara Dalrymple, RSW MSW BA Psych., BANA Clinical Therapist



Body shaming is the act of criticizing one's overall body-appearance; more specifically, fat shaming is to criticize one's weight/shape for being above-average, and for not meeting societal standards of a "beautiful weight". Often this is done through passive aggressive comments, and attempts to mask fat-shaming as "just a joke" is a frequent defense.

There have been some who have argued that fat shaming is necessary to combat the "obesity epidemic" (now considered a "pandemic") in North America and worldwide, suggesting that acceptance for all body types only allows the public to believe that being obese is "okay" and is not a health concern. These individuals and groups believe that showing compassion towards obesity will send the message that taking care of oneself and one's body is not necessary or important. They argue that shaming obesity and fat is the way to motivate individuals to lose weight, eat well and be healthy.

Before we look at the research suggesting fat shaming is more harmful than helpful, we want to note that health and wellness is of course a top priority at BANA. We understand that being of above-average weight increases one's health risks, but we argue that not everyone who is of above-average weight – even "obese" by BMI standards – is unhealthy, and many may never see those risks come to fruition.

## Weight does not equal health.

The perspective that "fat shaming is a solution" undermines not only a large body of research to argue the contrary, but it also makes vast generalizations about individuals of a certain weight. Moreover, it makes the assumption that obesity is solely the cause of personal factors – such as individual control (or lack thereof) – when there is a great body of evidence that has linked other factors to the development or maintenance of obesity that are not the individual (we will not be over-viewing these causes in this article). This perspective also makes the assumption that BMI – the tool used to label obesity – is a reliable indicator of overall health. At BANA, we see many clients who have a BMI considered "obese" but are in outstanding health, exercise regularly, and have normalized their eating. These individuals' health struggle is arguably more mental than physical – likely due to many years of being shamed for their weight and appearance. Examples like these beg the question: is fat shaming the solution, or does it perpetuate the problem?

### THE RESEARCH

There is a significant body of research that has linked fat shaming to health consequences. It has been shown on numerous occasions that individuals who are the recipients of weight stigma are more likely to overeat and binge eat after being stigmatized, and experience lowered motivation to exercise: both of these outcomes could perpetuate weight gain. In fact, Schvey and his colleagues found that after research participants watched a weight-stigmatizing video, they consumed 3x as many calories (2011). Similarly, it was found by Sutin and Terraccino that individuals who had experienced weight stigma were 2.5-3.2x more likely to develop or maintain obesity than their counterparts who had not been stigmatized (2013)

Research has also shown that those who have experienced weight stigma may be more likely to turn to food to cope with negative emotions (like depression, anxiety, guilt, shame, humiliation, embarrassment, etc.) – emotions that could be triggered by fat shaming. Some research has even demonstrated that individuals who have been discriminated against based on weight have higher levels of cortisol – a stress hormone which has been linked to numerous health consequences. Furthermore, individuals who have been fat shamed and experienced weight stigma have higher rates of substance abuse, mental health problems, and suicidality/self-harm. These results were maintained even when weight/"fatness", sex and age were controlled for; what this means is that the only common denominator between participants was that they had been shamed for their weight, whatever their weight was.

In a study conducted in developing nations where weight-stigma had previously been low, researchers monitored the outcomes of increasing weight stigma messages through anti-obesity initiatives (Brewis et al., 2018). What was found was as weight stigma went up within a country, so did health consequences – specifically depressive symptoms and disordered eating behaviours.



It is important to note that weight stigma and fat shaming messages are heard by everyone – not just individuals who are overweight or obese. The highest rate of mortality across any mental health diagnosis exists for clients with Anorexia Nervosa – not Binge Eating Disorder, where many individuals may be considered to be overweight. In other words, being of significant low weight can be more deadly in the realm of eating disorders than being overweight or obese.

Troop and his colleagues wanted to identify how different types of shaming – whether internal from self-blame (likely adopted from a fat-phobic culture) or external from societal messages and weight stigma – impacted eating disorder behaviours in anorexic and bulimic individuals (2008). What they found was that anorexic symptoms increased more when external shame was experienced, whereas bulimic symptoms increased more with internal shame.

What this means is that individuals with anorexia nervosa, who are typically of underweight status, are more symptomatically impacted by external shaming (such as weight stigma) than individuals who have bulimia, who are typically average-weight or overweight. Keep in mind, this study did not include individuals with Binge Eating Disorder, although these findings are still quite interesting: underweight individuals are also affected by body shaming messages, and experience more harmful symptoms and health consequences when exposed to weight stigma.

The bottom line across research is that weight stigma creates health consequences rather than solves them. And to further this point, it can be argued that fat shaming is more a cause of obesity than a resolve.

## BODY MASS INDEX – FRIEND OR FOE

Many use BMI as a method of assessing whether or not someone is obese, or to draw conclusions regarding one's health standing. The problem with BMI is that it was developed in the 1800's and is therefore outdated (Walden Behavioral Care, 2019). Moreover, BMI overlooks variance in body mass and other factors that can contribute to "the number on the scale" (muscle-to-fat ratio, fluid retention, bone density, etc.). Most importantly, however, is that *BMI is not an indicator of health, yet it is often used alone to facilitate applying pressure for weight loss and dieting.*

BMI serves medical purposes that are still important and informative. However, it is highly recommended that BMI is used in collaboration with other medical indicators and treatments to ensure best practice and reduce the risks of "categorizing" individuals in a weight-stigmatizing way. To learn more about these recommendations, Balanced View offers a free online course about weight bias and stigma in healthcare settings. Visit <https://balancedviewbc.ca/> to register!

## MESSAGES OF WEIGHT STIGMA

By and large, one of the largest culprits of weight stigmatization are media platforms. Most media messages that focus on body argue the same points like a broken-record: "fat is bad, thin is ideal". These repetitive messages often condone weight-discrimination by inadvertently (or sometimes directly) telling the public that being over-weight or obese is wrong, and that fat-shaming is okay. The more the public sees these messages, the more "normal" fat-shaming becomes.

One major thing that is often overlooked by the media and those who fat-shame is this: individuals who are above-average weight, over-weight or obese KNOW they are. They've been reminded of this on a regular basis, by absorbing media messages, being lectured every time they visit their primary healthcare practitioners, and/or with self-shame and criticism whenever they experience their body (while looking in the mirror, getting dressed, etc.).

They do not need to be reminded of their weight, because they are the ones who live in their body day-in and day-out. They've likely been shamed for their weight for most of their lives, and many may desire to reach a more "ideal" body weight/shape rather than accept the body they currently live within. Imagine being diagnosed with a physical condition requiring a wheelchair, and every person you come across says "hey, did you know you're in a wheel chair"? Imagine how silly that would sound. Those who argue that fat-shaming is a solution to obesity forget one key point: fat shaming has existed all over society for decades. If fat shaming worked, by now there would be no one of above-average weight left in our society. Yet the opposite is true; obesity has been identified as a global "pandemic" during the same generation that has seen a drastic increase in weight stigmatizing messages in the media and society at large. Coincidence? We think not.

## POTENTIAL SOLUTIONS

There have been suggestions made by many professionals working with obesity who do recognize the consequences of weight stigma; these suggestions also mirror those discussed in much of the research. These solutions are aimed at engaging these clients/patients in healthcare settings in a non-stigmatizing way, increasing their overall health and wellbeing, and working to reduce weight-stigma in society.

**BMI**  
BODY MASS INDEX

is not  
an  
indicator  
of health



Are you or someone you know affected by an  
**Eating Disorder?**

Looking for services? No referral required. Programs free of charge.

CALL TOLL FREE **1.855.969.5530**  
(not a crisis line)

 Bulimia Anorexia Nervosa Association  
 Teen Health

- Improve access to healthcare and physical activity (costs, transportation, time)
- Make nutritious foods more affordable
- Emphasize realistic and balanced long-term lifestyle changes directed at overall health and wellness, rather than focusing on weight loss and dieting
- Encourage healthy behaviours without mentioning weight
- Educate and problem-solve to reduce weight bias in healthcare settings
- (for a free educational course on weight bias and stigma in healthcare settings, please visit: <https://balancedviewbc.ca/> )
- Target media messages to be more representative of all body types
- Educate and address attitudes and behaviours of those who are "doing" the stigmatizing
- Introduce legal protection against weight-discrimination (especially given obesity is considered a "disease" in many nations, and discrimination of other diseases would not typically be tolerated)

## OVERVIEW

Weight-stigma has been connected to an increase in health concerns throughout much of the research, in numerous cultures. Fat shaming, a form of weight-stigma, has been shown to cause individuals to develop or maintain obesity, as well as countless other health concerns. Those who argue that fat shaming is a solution to obesity overlook a great deal of evidence to the contrary.

**Simply put ... fat shaming is not a solution; rather it perpetuates the "problem".**

For a list of article sources please visit: <https://bana.ca/fat-shaming/>



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**BANA**  
Est. 1983

"We accept the love,  
we think we deserve."

- The perks of being a wallflower



Photo credit: Amine M'Siouri via pexels



# You Mean Men Have Eating Disorders Too?

By Patrick Kelly, BANA Communications and Office Administrator



One of the greatest myths in Eating Disorders is that only women are affected. This common misconception can lead to boys and men arriving to treatment later on in the development of the disorder. Historically, males with eating disorders have not received attention due to a variety of sociological and stigmatized reasons, including:

- Lack of recognition of eating disorder symptoms by males and their family members
- The stigma associated with males seeking help for mental illness, predominately from those disorders commonly associated with women
- Lack of research into men with eating disorders
- Strongly feminine branding of eating disorder treatment centers (flowers in branding, no/limited male images on marketing materials, etc.)
- Insufficient consideration to male behaviors in most eating disorder assessment measures
- Gender biased Diagnostic criteria resulting in difficulties in diagnosis'

More recent trends indicate that anorexia, bulimia, and especially binge-eating disorder are on the rise in the male population. According to the National Eating Disorders Association (NEDA), men represent one in three people struggling with an eating disorder – and an estimated 10 million males will struggle with an eating disorder at some point in their lives.

In most cases, eating disorders symptoms – those associated with anorexia nervosa, bulimia nervosa, and binge eating disorder – vary little between men and women. Just like women, men presenting with eating disorders can also run the risk of experiencing depression, anxiety, and substance use disorders.

## Reality Check:

Males with ED's are at a higher risk of death. This is primarily because males are typically under-diagnosed or diagnosed much later in the course of the disorder.

The hard facts are that men represent **25%** of individuals with anorexia nervosa and **40%** of people diagnosed with binge eating disorder.

Influencing factors can start at a young age and in the most innocent of ways. Not unlike the Barbie type icons that have traditionally influenced girls; consider too the design of the average action figure. The exaggerated muscular physique, chest, arms and shoulders can lead to early comparisons in young boys, and can establish a negative baseline for unrealistic ideation.

**Add to that the traditional stressors** that come along with environments like competitive sport, male dominated work places and historic perception of stoic role models. Consider too that support systems for men are often limited and restrictive in terms of developing interpersonal skills for communication, emotional processing...even opening up to friends, co-workers or teammates can be difficult – even traumatizing.

Men/boys can often feel pressure to suffer in silence. In these cases the unaddressed feelings of loneliness and hopelessness may heighten; fueling the eating disorder.

## Talking to someone you suspect of having an Eating Disorder

If you suspect someone you know or care about may have an eating disorder, it's important to share that you have concern about their health in a non-judgemental, supportive manner.

Discuss the behaviors you've witnessed and why their actions and behaviours worry you. Try to incorporate the positive traits (non-physical) about them as well. Make sure to discuss what they would like or are willing to do in terms of support and wellness; and offer to assist them in finding help. In addition to the tips below, BANA has dedicated a section of our online resources to assisting friends and family members with Eating Disorders ([www.bana.ca/resources/](http://www.bana.ca/resources/)).

It is often difficult to understand why someone is experiencing an eating disorder or has weight preoccupation. Many people believe that eating disorders are only about food and weight, but in reality, these are just the symptoms/coping strategies to deal with the underlying problems.. There are things you can do to be prepared to support someone with an ED.

- Gather information and educate yourself on eating disorders.
- Avoid talking about food and weight.
- Assure them by saying that they are not alone; that you care about them, that you want to help in any way that you can without infringing on their rights, and that you respect their need for privacy.
- Encourage them to seek help from a therapist, and get medical help.
- Never try to force them to eat or pressure them to make changes.
- Do not comment on weight or appearances because comments may be taken the wrong way.
- Don't blame the individual, recovery takes time, be patient.
- Make mealtimes pleasant and enjoyable.
- Be a friend and actively listen by reflecting back their needs and concerns.
- Do not take on the role of a therapist.

It's important to remember that when you first approach the person you suspect has an eating disorder, they may react with anger or denial. Be supportive by letting them know that you will be there for them if they need to talk.

In cases where the person has been severely restricting food, or is bingeing/purging several times a day, and the individual's health is in extreme danger, you could contact their doctor or a clinical therapist at BANA. In a case of extreme emergency bring the person directly to a hospital.

No matter how much you want to help, remember that only they can make the decision to get help. It is their responsibility to continue with their own process of recovery. Forcing them to recover can only hinder their recovery process.

Remember, someone with an eating disorder has the best chance for recovery when they are surrounded by people who are loving and supportive. Recovery takes time and is hard work, but with treatment, which could include individual therapy, support groups, medical and nutritional counselling; eating disorders can be managed.

As we encourage men and boys to come forward, together we can set aside the stereotypes so that males can ask for help and get the treatment they deserve.

***"Courage is resistance to fear, mastery of fear – not absence of fear."***

— Mark Twain

For a list of article source please visit: <https://bana.ca/men-too/>

# Be Yourself

HAPPY. HEALTHY. HOPEFUL.

 The Podcast 



Hosted By:  
Stephani Fenkanyn  
BANA Health Educator

Check out BANA's podcast  
for great topics  
amazing guests  
and everything thing  
you need to know  
to be happy,  
healthy and hopeful.

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## Tips from our Dietitian

by Nicole Boulanger, RD., BANA Dietitian

I thought to kick start our magazine, I would touch on the pillars of our overall health and wellness. Here are some tips for improving your quality of life.

**1** Nutrition – Eating well for your health and well-being. Include a variety of foods from all food groups; our body requires protein, fat AND carbohydrates for our bodies to run optimally. It is also important to include foods you enjoy. The restriction of pleasurable foods very often lead to overeating, or even binging on these 'forbidden foods'. On the other hand, when you include these foods normally, along with regular balanced eating, you are more likely to have a reasonable amount.

**2** Physical activity – moving your body in ways that make you feel well. Achieving adequate physical activity is transformational when it comes to our mental and physical health resulting in a positive shift in quality of life.

Remember small steps lead to big changes and the many health benefits will soon follow. Check out the resources below to step up your movement and reduce sedentary time. Keep in mind, as with most things, too much is not always better. Be sure to listen to your body and balance exercise with other important areas of your life.

**3** Sleep – Getting adequate shuteye is critical to your mental and physical health as well. According to [sleepfoundation.org](http://sleepfoundation.org), "Sleep powers the mind, restores the body, and fortifies virtually every system in the body". Check out their website for help with sleep hygiene or challenges to get the 7-9 hours adults need.

**4** Mindfulness – being fully aware and present without judgment; observing with curiosity. This can also be applied to eating. In a world with so many distractions, mindfulness takes some effort; however, anyone can do it. I strongly encourage you to explore [mindfulness.org](http://mindfulness.org) and discover the powerful tool of mindfulness and meditation.

**5** Hobbies/activities – nourish your soul with activities that make you feel good. There are countless activities out there from sports to projects, arts and crafts, spending time in nature and/or with a loved one or pet. Find and make the time for those interests that bring you joy and pleasure.

**6** Don't Diet – Breaking news... Dieting is not the answer! Truth is this has been a well-known fact for a long time. Diets are ineffective and ultimately lead to higher weights most of the time. Oddly enough, despite the diet being responsible for failing, the person on the diet feels like the failure, causing self-esteem to plummet. Unfortunately, I have seen the negative impacts of dieting far too often in my career. Although diets do not cause eating disorders, they are a catalyst that along with other factors such as genetics/personality traits can lead to an eating disorder.

**7** Eat intuitively – honour your hunger and fullness and give yourself permission to enjoy all foods. Learning to tune-in to your body is an important step to meeting your biological and psychological needs. Check out the 10 principles of Intuitive eating at [intuitiveeating.org](http://intuitiveeating.org).

**8** Gratitude – Taking the time to reflect on what you are grateful for is a life-changing practice. We all have reasons to be grateful. Why not take it further by honouring our bodies? With all the focus on changing our bodies, how about appreciating all that our bodies do for us. After all our bodies are fascinating. Perhaps your body birthed a child, allows you to smile and laugh with others, allows you to move and explore our beautiful world and engage in your favourite activities.

Find out more about the astonishing benefits of practicing gratitude at [www.mindful.org/an-introduction-to-mindful-gratitude/](http://www.mindful.org/an-introduction-to-mindful-gratitude/).

## Autumn Soup with Kale and Butternut Squash

Yield: Serves 4-6



### Ingredients

2 cups white beans (such as Borlotti or cranberry)  
3 tablespoons olive oil  
1 onion, chopped  
1 celery  
One 2 -pound butternut squash, peeled and cut into ½ inch cubes  
1 garlic clove, minced  
2 teaspoons finely chopped fresh sage  
10 ounce can diced tomatoes  
6 cups no salt added chicken broth  
1 ½ teaspoon salt and ½ teaspoon black pepper  
1 bunch kale leaves, sliced (about 5 cups)  
Freshly grated Parmigiano Reggiano cheese, for garnish

### Instructions

For fresh or dry beans (skip if using canned):

1. Cover beans with cold water, place in the refrigerator for 8 hours or overnight. Drain, rinse and set aside.
2. In a medium pot, cover beans with water and simmer over medium heat for 30 minutes and drain, set aside.

### For the soup:

1. Heat oil in a large stock-pot over medium heat. Add the onion, celery and cook, stirring occasionally until softened about 4-5 minutes.
2. Add the butternut squash, garlic and sage, cover and cook 5 minutes.
3. Add the diced tomatoes, beans and broth and bring to boil. Reduce heat and let simmer 15 minutes or until squash is tender.
4. Stir-in kale until wilted, about 5 minutes.
5. Ladle the soup into bowls and top with grated cheese.

**Tip: I like to add my favourite noodles to the soup**

Retrieved from: Cooking with Discovery: A glimpse into a day in the life of a Discovery Resident booklet

### Article resources:

[www.unlockfood.ca/en/default.aspx](http://www.unlockfood.ca/en/default.aspx)  
[www.food-guide.canada.ca/en/](http://www.food-guide.canada.ca/en/)  
[www.csep.ca/CMFiles/Guidelines/CSEP\\_PAGuidelines\\_0-65plus\\_en.pdf](http://www.csep.ca/CMFiles/Guidelines/CSEP_PAGuidelines_0-65plus_en.pdf)  
[www.Sleepfoundation.org](http://www.Sleepfoundation.org)  
[www.mindful.org/](http://www.mindful.org/)  
[www.intuitiveeating.org/](http://www.intuitiveeating.org/)  
[www.cpa.ca/docs/File/Publications/FactSheets/PsychologyWorksFactSheet\\_PhysicalActivity\\_MentalHealth\\_Motivation.pdf](http://www.cpa.ca/docs/File/Publications/FactSheets/PsychologyWorksFactSheet_PhysicalActivity_MentalHealth_Motivation.pdf)





# The Perfect Challenge

By: Leta Marchand, BSW, RSW,  
BANA Clinical Manager

Perfectionism – a single word that can have a significant impact on people's lives. A single word that has many layers of complexity – a word that describes a variety of life-interfering, self-esteem busting behaviors. What exactly is perfectionism? According to the *Psychology Today*, someone who is a perfectionist *"sets unrealistically high expectations for themselves and others. They are quick to find fault and are overly critical of mistakes. They tend to procrastinate a project out of their fear of failure. They shrug off compliments and forget to celebrate their success. Instead, they look to specific people in their life for approval and validation"*. One might have perfectionistic tendencies in one or many areas of life, including: work, eating, school work, finances, cleaning, sports or appearance.

Many people often think of perfectionism as a positive thing, a quality that pushes people to do their best and achieve great things in life. Unfortunately, while striving to do well is a good thing, it can go too far and lead to maladaptive perfectionism.

Someone who strives to do well sets goals and standards and works to achieve them. They also expect and accept mistakes and failures and experience them as part of growth and learning. Perfectionism on the other hand; interferes with our growth and learning by triggering excessive and self-defeating behaviors. Let me give you a personal example.

I have been working at BANA for 16 years, and during these 16 years, there have been many opportunities to contribute articles, stories or blogs to newsletters or our social media sites. I enjoy writing and have often thought that it would be great to contribute; however, I have found myself not being able to produce a single piece. What holds me back?

Well when Pat asked me to write this story for our new digital magazine, these were some of my thoughts:

"I have to read **EVERYTHING** I can about perfectionism!" (*an unrealistically high standard*)

"Whatever I write **HAS** to contain every single piece of information I can find – I can't leave anything out!" (*also, an unrealistically high standard*)

"What if I get something wrong, or miss something important?" (*a fear of failure*)

"What if people disagree with my opinion or don't like what I write?" (*a fear of negative judgment from others*)

What holds me back is my own perfectionism! The unbelievably high standards I have set myself to write the most brilliant story on perfectionism elicits fears of failure and judgment, and then a complete avoidance of the task. Why bother if I'm not going to get it right? (Totally self-defeating).

Well these thoughts lead to unhelpful behaviors such as excessive research; excessive editing, waiting until the last minute to actually write something, or avoiding it all together. This gets in the way of growth (practicing writing helps you improve your skills – unless you avoid doing it) and learning (learning that it's ok if not everyone likes my writing).





Photo Credit: Marisa Casey

I know I'm not alone, and neither are you!! Perfectionism is something that is commonly experienced.

**According to Psychology Today “perfectionistic tendencies have increased substantially among young people over the past 30 years, regardless of gender or culture”.**

Whether your perfectionism drives you to over work or to procrastinate, it boils down to over valuing achievement and fearing failure. And it is likely that there are behaviors that you engage in as a result of these values and fears.

According to the Centre for Clinical Intervention, there are things that we actively do to achieve our high standards. Things like excessive list making (e.g. writing and re writing a list of tasks to accomplish), excessive organizing and checking (e.g. *repeatedly editing ones article on perfectionism*), and *not knowing when to stop* (e.g. *not being able to walk away from a project*).

There are also behaviors that we might engage in in an effort to avoid not meeting our standards and feeling like a failure. Things like giving up too soon (e.g. *stopping your eating disorder treatment because you still have symptoms after 3 sessions*), procrastinating (e.g. *putting off writing a story for your organizations magazine for fear that it won't be good enough*), and indecisiveness (e.g. *not being able to make a decision about which phone company to go with*). The consequences of these are feeling exhausted and burnt out, not engaging in self-care or hobbies, feelings of dread and failure, not trusting others work, or feeling like you have to do everything yourself.

**Ok . . . so if you're still with me you may be identifying some perfectionism behaviors in yourself. So what do we do about it??**

I think I could write several other pieces to cover these topics, but I will do my best to challenge my perfectionism in this moment and give you a summary!

- 1. Acknowledge** that you struggle with perfectionism. Knowing is the first step to changing.
- 2. Identify what areas** of your life you struggle with perfectionism the most. It is possible to be a perfectionist in one area of life, such as managing your finances, but not in another, such as your hobby.
- 3. Identify the behaviors** you engage in because of your perfectionism.
- 4. Challenge your perfectionism** behaviors – they are keeping your perfectionism going! Choose one perfectionism behavior that you engage in and set a goal to challenge it. Your goal should involve several small steps working up to the full goal. Here is an example:

**GOAL:** I will reduce my list making to one list per day.

**STEPS:** 1) I will write a list at the beginning, middle and end of my day  
2) I will write a list at the beginning and end of my day  
3) I will write a list at the beginning of my day only

- 5. Stick with it.** Change takes persistence, practice and patience. You will get there, and trust me, the effort is worth it!
- 6. Expect discomfort.** Making changes is uncomfortable.
- 7. Practice often.** Repetition of your goal steps will lead to greater success.
- 8. Find Resources/additional help:** If you feel like you are struggling with perfectionism look into some of the resources below, they are fantastic. Alternatively, you could also seek out additional support from a local therapist.

Make sure to **celebrate your successes!**

**9.** Alright dear readers . . . I have challenged my perfectionism behaviors of avoidance and procrastination by FINALLY writing something for BANA!!!

Yipee! It was stressful and anxiety provoking, but I stuck with it...and you know what?... It feels pretty good!

**What will you challenge?????**





# Distress Tolerance Skills List

In order to cope with difficult emotions, distress tolerance skills become useful. These skills can be used to de-escalate intense emotions; to distract from overwhelming situational triggers; or to take some space and return to resolve the problem later, from a clearer state of mind.

## Interested? Here's How....

Fill in ideas for each letter in order to make your own, personalized list of distress tolerance skills. Finding something that works for you may be a process of trial-and-error, so keep track!

A helpful acronym to remember your distress tolerance skills is: **ACCEPTS**.

A

= **Activities** – hobbies, interests, or tasks you can engage in to distract. We recommend you pick either something that you enjoy doing, or that makes you feel as though you've accomplished something.

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C

= **Contributing** – giving back by volunteering, helping someone else, or getting involved in a cause greater than yourself.

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C

= **Comparisons** – consider how your ability to manage distress has changed over time. What is different, and what has remained the same? What used to be helpful for you?

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E

= **Emotions** – do something that will bring about the opposite emotion than what you are currently feeling? For example, if feeling sad, aim to feel more cheerful by watching a stand-up-comedy.

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P

= **Push Away** – take a break, mentally and physically. Leave the environment, take some space, think about other things and give yourself time to cool off.

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T

= **Thoughts** – focus on something else that will preoccupy your thoughts, or will require your undivided attention to engage in or complete. The more it makes you think, the more distracting it will be.

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S

= **Sensations** – consider ways to engage your 5 sense in order to ground you in the present; sensations can be soothing.

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## Testimonials

Are you a service recipient of BANA?

Maybe a Community Partner that's worked with us?

Have we done a presentation for your group or school?

## WE WANT TO HEAR FROM YOU!

Here at BANA we want to continue to build the very best practices in care and service provision and your feedback is valuable to us.

Have you had a great experience with us?  
Any concerns or suggestions you'd like to share?

Please contact us today at: [info@bana.ca](mailto:info@bana.ca)

### Donors Needed

Since 1983, BANA has been committed to providing specialized treatment of eating disorders and health promotion.

Over the past 37 years we have prided ourselves in finding the most innovated, interactive and cost effective means to promote positivity, wellness, awareness and inclusion in our community and beyond.

## BUT WE NEED YOUR HELP.

Today, more than ever the need to Mental Health service provision, health promotion, education and intervention are critical to the well being of so many in our community.

Like so many others, as a result of covid-19 restrictions our ability to fundraise to support our community initiatives as been significantly impacted.

To support BANA programs and services visit our website at [www.bana.ca/get-involved-donate/](http://www.bana.ca/get-involved-donate/)

BANA is a registered Charity and offers tax receipts for donations over \$20

## Topic Ideas

While we're confident that you are enjoying our inaugural issue of our BANA Be Yourself Magazine, our mission with this publication is to address the broad spectrum of mental health and wellness issues that affect those both in our care in in our community.

WE WANT THIS INITIATIVE TO BE A VOICE FOR EVERYONE.

That being said, we're putting the question to you...

## WHAT DO YOU WANT TO SEE IN OUR MAGAZINE?

Is there a mental health or wellness topic you'd like us to cover?

What do you need information and resources on?

Do you want more tips...or recipes...or interactive worksheets?

Please share your suggestions with us at: [Info@bana.ca](mailto:Info@bana.ca)





# Taking Care of Yourself During the COVID-19 Isolation

By: Stephani Fenkanyyn, BANA Health Educator

The outbreak of coronavirus disease (COVID-19) may be stressful. Fear and anxiety about the disease can be overwhelming and cause strong and triggering emotions. Being forced to isolate without your normal supports can feel very difficult for some.

First and foremost, it's important to know that it is completely normal and reasonable to be feeling this way! You are not alone. These are unprecedented times of change and transition and no one expected that we would be here. Remember that everyone reacts to stress differently and whichever way you are reacting is valid. We are here for you!

**Here are some tips & strategies you can apply that may help during this time:**

» Set limits around exposure to media and social media. Ensure you are taking breaks from news stories and social media. Know the facts, but don't sink into the hysteria. Create boundaries of how much time you will allow yourself to watch the news. When on social media, seek out positive messages, humour and role models that support you in your health and mental wellness journey.

Here are few Instagram accounts that we like: @thebirdspapaya, @littleearthlings, @bodybravecanada, @jennifer\_rollin, @journey\_to\_wellness, @chr1styharrison

» Move your body in a way that feels good. You may have had a routine in place for physical activity that has been forced to a halt. Without access to your normal fitness centre, gym or instructors, it can feel frustrating! That being said, this is an opportunity to try something new and to think outside of the box. Remember: there was a time where you were once in this same position and, at that time, you were mentally strong enough to work hard and find something that suited you. You can do it again. Celebrate your small wins!

Many movement and fitness videos can be found on You Tube, or instructors worldwide are offering free live stream sessions. We liked this one by Yoga with Adriene.

Link: [www.youtube.com/watch?v=jHZPtn15agE](https://www.youtube.com/watch?v=jHZPtn15agE)

» Take care of your body – Get enough sleep, start your day with a warm shower, get dressed, hydrate, take deep breathes, stretch and practice mindfulness if you can. One easy way to do this is to count your own breathes. Count ten in/out breathes and then start again. Another way is to pick an affirmation for the day and come back to it often throughout your day. An example may be: "I am capable of accomplishing all I would like to today."

» Connecting with others. The benefit of technology is using it to our advantage to connect with people while still being physically distant. Facetime, Skype and Zoom are options to connect with people while seeing their face and hearing their voice. Text, IMessage, WhatsApp and Facebook Messenger are all ways to send and receive love and support. Send voice notes, memes that make you smile and emojis to friends to start your day on a positive note. Talk to people about your concerns and how you are feeling and consider that you are also allowed to set boundaries and opt out of difficult discussions.

Visit [www.nedic.ca](http://www.nedic.ca) here for more information on how to access the National Eating Disorder Information Centre's hotline and online chat for eating disorder specific support.

**Bonus tip!** Chrome has an extension called Netflix Party that allows you to simultaneously stream Netflix with friends. It has a chat window & pay/pauses for everyone watching so you can enjoy together! Pretty cool, right?



» Remember the importance of nourishing yourself. You've come a long way in establishing what your relationship with food is today. Take a moment and acknowledge your progress. Remember that it is constantly changing and evolving. At this time, grocery stores can be anxiety provoking and availability to some of your favourite foods may be limited. Come back to the principle that food is food, and that every day we should do our best in not labelling foods good or bad. All foods have a place. It is okay if you're eating differently than usual right now. It's normal that you may be eating foods you wouldn't ordinarily be eating, eating more than usual or eating at unfamiliar times. Have compassion for yourself. This may be a triggering time. Reach out to us if you need help.

» Try to do some activities that you enjoy. Go for a walk with family members. Think about what you may want to work on personally and write down your thoughts. Learn a bit of coding while you have the time. Experiment with a new skill such as crocheting. Do some spring cleaning while listening to music. The benefit of right now is the time we've been gifted with. Create a vision board of all you desire with pictures and words from old magazines. Try painting a masterpiece or find a creative 'Do It Yourself' project on Pinterest. We like this one.

Link: [www.thinkmakeshareblog.com/macrame-keychains/#\\_a5y\\_p=6450821](https://www.thinkmakeshareblog.com/macrame-keychains/#_a5y_p=6450821)

We are going to get through this! This too shall pass. And when it does, we will be stronger for it. If you need additional support, please contact BANA at 519-969-2112 - [info@bana.ca](mailto:info@bana.ca). - [www.bana.ca](http://www.bana.ca).



# HELP! For the Holidays

by Sara Dalrymple, RSW MSW BA Psych.,  
BANA Clinical Therapist



The holidays are upon us. You know that that means: tables filled with your favorite holiday meals and snacks. If you feel nervous around food, or find yourself feeling out of control around buffets or big feasts, this can be a difficult time of year; the holidays present with a lot of nerve-wracking, food-focused events. Despite these concerns, there are lots of tips we can suggest for feeling more comfortable during this triggering time of year.

## ACKNOWLEDGE THAT OVEREATING CAN BE NORMAL

That's right, you heard it here first. Overeating can be a relatively normal occurrence when fun meets feast. If your overeating is occasional, and tends to be isolated to the rare social event, it may just be normative. Many people – including "normal" eaters – have instances of overeating. Accepting this fact may give you a sigh of relief; just remember to get back to your normal eating routine the next day.

## PICK FOODS THAT MAKE YOUR MOUTH WATER

There will likely be loads of foods that you enjoy eating, so start by scanning the table for what is available. Make a mental note of what foods appeal and stand out to you. Tune into which foods make your mouth water, or that you can picture satisfying you.

Don't feel rushed – if you have to wait in line or check things out from a distance, that is perfectly okay! Once you're ready, try starting with small amounts of your top 3-4 favourites – remember, if you're not satisfied and want more, you can always go back for seconds. When you're finished your first plate, give yourself a breather to tap into your hunger and fullness cues. Try mingling for a bit, people-watching, taking a few sips of water, going for a walk around the room, or admire the festive decor.

If you find that you are still hungry, head back to the food table and sample a few more food options or grab seconds of your initial favorites.

## EAT MINDFULLY

Mindfulness includes two main things: being aware and being non-judgemental. While eating, make sure to focus on the experience of eating – multitasking can make an already overwhelming situation more difficult to navigate. Try to not eat with too many distractions like TV, cell phones, or intense conversations. Think about your five senses: what does the food smell like, taste like, or sound like when you're chewing it? Are there certain temperatures or textures that the food has? What words would you use to describe how the food looks to someone who has never seen it before?

Also check in with yourself; are there are physical sensations happening while you're eating, or moods that are present? Are you eating foods that trigger you, or that you feel guilty about? If so, try taking a non-judgemental stance over these foods. Food is not inherently good or bad – we, as people, apply the values, opinions, and labels attached to food. How do you think you might feel if you strip all the opinions and values away from the food choices you have made?



## OVERCOME OTHERS' JUDGMENTS

Sometimes at food-related gatherings, you may feel nervous about judgements and comments from others. It is important to remember that many of these people will be eating similar foods during the holidays as you are. It is also worth noting that you know your body best; others may tell you to eat more or less, but only you can know when you are still hungry or already full.

It may be helpful to develop a "script" before the holidays that you can repeat to those who do have comments about your eating or body. Having a "script" prepared of calm, non-blameful responses to these comments can be useful so that you do not have to think as critically during an often overwhelming time.

Here are some examples:

- That looks so delicious but I am quite full and am not sure I'd enjoy it. Can I take some for later?
- Thank you for your concern, but I've been trying to listen to my body and right now it's had enough (OR – if still hungry – "it needs a little more")!
- I know you mean well, but I'd prefer if you didn't comment on my weight (OR, "I'd prefer if my weight wasn't the focus of discussion") because it makes me uncomfortable.

### WANT MORE TIPS?

If interested, you can read more about triggering eating environments in one of our favorite books, "The Rules of Normal Eating: A Commonsense Approach for Dieters, Overeaters, Undereaters, Emotional Eaters, and Everyone in Between!" by Karen R Koenig, LICSW, M.Ed. This topic is covered in chapter nine, titled "Daunting Eating Situations", and much of the information within this article has been adapted from this resource. You can find this book for sale on Amazon!

## Helping Yourself Heal During the Holiday Season

We know that the holiday season can be a difficult time for many of us, but especially so for those dealing with the loss of a loved one, regardless how recent.

Our clinicians wanted to share a link to a wonderful article from the Centre for Loss & Life Transition authored by Alan D. Wolfelt, Ph.D. that we hope might be of assistance to you.

visit: [www.centerforloss.com/2016/12/helping-heal-holiday-season/](http://www.centerforloss.com/2016/12/helping-heal-holiday-season/)

or **CLICK HERE**



## 12 Holiday Tips

- 1** Create a positive mantra
- 2** Laugh and be joyful
- 3** Get some rest!
- 4** Find YOUR reason for the Season
- 5** Open up and share with someone
- 6** Planning ahead makes for less stress
- 7** Establish and maintain healthy boundaries
- 8** Practice Self-love. It all starts with you.
- 9** Take time for self reflection, you're doing great - recognize that
- 10** Give of yourself. Let others see how amazing you are
- 11** Be grateful
- 12** Stay in the moment

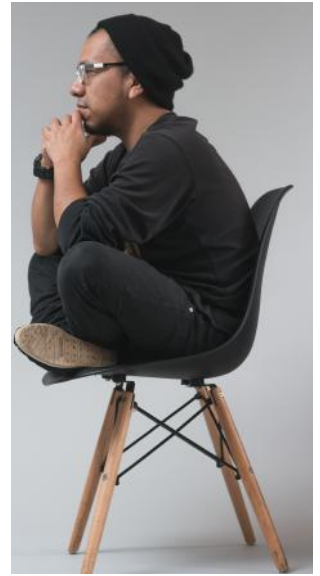
# BANA-QUIRIES

As mental health educators and clinical service providers we get a lot on inquiries about treatment prevention and overall wellness. In each issue we'll try to address a few of these **"BANA-QUIRIES"** for you our readers.

## How Do I Get Into BANA Treatment? What Are the Steps?

In order to access clinical programs at BANA, a client must have an eating disorder diagnosis. For referrals, a diagnosis is not required. Below are the typical steps that are followed for accessing BANA services.

- 1) Contact BANA's intake department (online intake form, or toll free number via 1-855-969-5530)
- 2) Complete intake (initial meeting and form completion)
- 3) Complete a comprehensive, specialized eating disorder assessment (approximately 2-hour session, incl. interview and psychometric testing)
- 4) Await results, (clinical team reviews the assessment and determines a diagnosis (if applicable) and treatment plan)
- 5) Follow up appt. to learn about diagnosis and treatment plan
- 6) Be placed on waitlist for treatment (CBT-E or CBT-T), and simultaneously access skills trainings
- 7) When at the top of the waitlist, a clinician will contact you to schedule an overview of treatment expectations and sessions
- 8) Begin treatment CBT-E or CBT-T



## How Much Does Treatment Cost?

All of BANA's clinical services and programs are free of charge. BANA is a non-for-profit organization, funded by the Ontario Health Teams and the the Ministry of Health and Long Term Care.

## I have a youth group , do you offer presentations?

Yes, BANA's Health Educators are happy to accommodate groups of all ages. Currently due to Covid-19 we are offering several of our presentations virtually including:



### SELF ESTEEM AND BODY IMAGE - GRADES 5-8

During our presentation students will learn about the concepts of self-esteem and body image. We also examine the factors which can influence our self-esteem such as the media/social media and societal pressures.

This presentation includes an interactive jeopardy-style game to encourage and promote participation and reinforce key concepts presented.

### SIZING UP THE MEDIA - GRADE 9 AND UP

Teaching media literacy (which includes the ability to critically evaluate media) skills helps youth develop resilience against negative messages or the comparison trap.

This presentation also includes an interactive game to encourage and promote participation and reinforce key concepts presented.

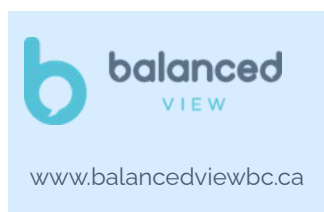
### HOW SOCIETY AFFECTS THE DEVELOPMENT OF A HEALTHY BODY IMAGE WITHIN THE LGBTQ+ COMMUNITY (ages 13 and up)

We discuss the relationship between eating disorders, body image and the everyday language we use about food as well. Build new pathways to self-acceptance, take pride in who you are and learn new tools for individuals and the LGBTQ+ community as a whole so that we can work together towards a healthier mind and body.

To book a presentation email us at [info@bana.ca](mailto:info@bana.ca) or complete our online request form at [www.bana.ca/health-promotion/](http://www.bana.ca/health-promotion/)



BANA often receives requests from other health professionals and educators looking for resources. In addition to [our website www.bana.ca](http://our website www.bana.ca), we recommend checking out the following links.





THINK  
ABOUT  
THINGS  
DIFFERENTLY

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