

BANA BE YOURSELF

A publication of the Bulimia Anorexia Nervosa Association

FALL 2022

A Mental
Health and
Wellness
Magazine

Featured Columnists:

Frankey Renaud
Former CFL Player
Mental Health Advocate

Jill Cadarette
CADDRA-certified Adult ADHD
Healthcare Professional

Also In This Issue:

- Indigenous Enough?
- A Parent's Influence of Children's Eating Habits
- Be Yourself Spotlight
- Is It Really Workplace Wellness?
- Youth Gender Diversity Clinic
- This Autumn, Fall In Love With Yourself
- 12 Self-Care/Self-Love Practices for this Fall
- Minding the Classroom: Promoting Mental Wellness for Local Students

TABLE OF CONTENTS

Indigenous Enough?.....	3
A Parent's Influence of Children's Eating Habits.....	4
Be Yourself Spotlight.....	5
Is It Really Workplace Wellness?.....	6
Let's Keep Going... ..	12
Youth Gender Diversity Clinic.....	15
This Autumn, Fall In Love With Yourself	16
12 Self-Care/Self-Love Practices for this Fall	18
Adulting with ADHD	20
Minding the Classroom: Promoting Mental Wellness for Local Students.....	22

Publisher:

Luciana Rosu-Sieza
BANA Executive Director

Editor-in-Chief/Contributing Writer:

Patrick Kelly
BANA Communications and Office Administrator

Associate Editor/Contributing Writer:

Sara Dalrymple, MSW, RSW
BANA Clinical Therapist

Associate Editor

Alexis Sauls-Ramos, MSW, RSW
BANA Eating Disorder Prevention Specialist

Volunteer Reviewers:

Jenna Broad
Sarah Bricker

Guest Contributors:

Frankey Renaud

Kia Peters, RD

Jill Cadarette, MSW, RSW

Hiba M. Hamed MSW, RSW



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. Direct email subscriptions are available by request to info@bana.ca.

Owned and operated by the Bulimia Anorexia Nervosa Association, 1500 Ouellette Ave, Suite 100, Windsor, Ontario, Canada, N8X 1K7.

Click an Icon to Follow and like us at: @BANAWindsor on



Publishers Note:

Hello Readers!

I am honored and delighted to welcome you to 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, 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 our editing team and all of the contributing writers and photographers.

With so much uncertainty when it comes to mental health and wellness in the world today, our goal is to provide an accessible forum for education, discussion and acceptance for both the general public and professionals alike. We hope, that in some small way, this publication can help.

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

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

Sincerely, Luciana Rosu-Sieza, Executive Director, BANA

DISCLAIMER*

Content within this publication may include details from lived experience that can be triggering to some. Reader discretion is advised. Should you find yourself feeling triggered, please seek support.

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



Indigenous Enough ?

By: Kia Peter, RD

Boozhoo, Aanii (Warm greetings, Hello). My name is Kia, I am Anishinaabe Kwe (Ojibwe woman) from Caldwell First Nation, turtle clan. I am also a daughter, friend, scholar, dog-mom to a spunky rescue dog named Dobby, and a Registered Dietitian.

You would never guess I'm Indigenous just by looking at me. My physical traits identify me as Euro-Canadian, but my core values, heritage, and worldview identify me as Indigenous.

When I meet someone new and share my identity, I am usually met with the same response, "Wow, really!? I would never guess you're Indigenous...You're so white!".

If I'm being honest, I am grateful to be white presenting because it's given me the privilege and protection from systemic racism, stereotypes, and hurtful assumptions that have been long perpetuated in Canadian history.

On the flip side, the mismatch between my core identity and my physical identity, has left me in a perpetual state of identity crisis.

When you're labeled a certain way because of how you look, it feels like someone is trying to tell your life story, rather than giving you the opportunity to define it yourself.

I remember being interviewed for a research paper on Indigenous perspectives of post-secondary education, and the interviewer asked me, "How do you identify?"

I remember being very confused on how to answer because of my ongoing identity crisis and said, "I identify as an Indigenous person, but also as a Caucasian because I am white presenting." The interviewer went on to say, "oh, I meant your preferred pronouns, such as she/her, she/they, etc."

It was in that moment that I realized how other's may feel when their gender identity mismatches their physical identity. It's stressful to question your identity and sense of self, especially when you identify with a social minority that is not accepted positively by societal norms.

Not understanding your sense of self creates a barrier to exploring, understanding, and defining yourself. When I was a young girl, I struggled to learn about my Indigenous heritage out of fear of bullying and being outcasted as the "savage/bush girl".

In my teens, I struggled to share my identity because I didn't feel I had a right to be Indigenous. I hadn't suffered systemic racism to the extent other Indigenous peoples have as I was protected by my physical traits of being "white".

How could I be Indigenous if I hadn't experienced hate? How could I be Indigenous when I didn't live on a reserve? How could I be Indigenous if I didn't speak the traditional language of Anishinaabemowin?

In my early adulthood, I struggled to share my identity because I didn't want to be tokenized. I wanted to achieve things because of my training, skills, experiences, and hard work – not because I checked a box for the organization's Equity, Diversity, and Inclusion initiatives.

Now? I have decided that no one can define my identity for me. I always thought that to be "Indigenous enough" meant I needed to experience more, be more, learn more, grow more, work harder and longer to be the final product of "Indigenous".

But really, being Indigenous "enough", means that I don't have to be perfect. I can continue to grow, change, learn and pursue my heritage and identity. And it is with confidence I can say, "I am Indigenous enough."

I hope that you can find comfort in my story. I want you to know that whatever identity you may be discovering and growing into, that you too, are enough



Kia Peters is a Registered Dietitian with the Bulimia Anorexia Nervosa Association in Windsor, Ontario, Canada

Recipe:

Wild Rice & Berries (Manoomin & Ode'immin)

Ingredients:

- 1 cup wild rice uncooked
(Budget friendly: substitute 1 cup of wild rice/brown rice blend)
- 1 cup fresh berries
(Strawberries, raspberries, saskatoon berries, blackberries, etc.)
- 1/4 cup real maple syrup
- 1/4 cup roasted hazelnuts
- 1 tsp cinnamon
- 1/2 tsp black pepper
- Pinch of salt
- Chives for garnish

Instructions:

1. Add 1 cup of wild rice, 2 1/2 cups of water, and 1/4 cup of dried cranberries to a pot and simmer on medium low heat until water is gone (about 45 minutes).

2. Mix in fresh berries, maple syrup, and cinnamon

Picture from: Marcus Nilsson for The New York Times.
Food Stylist: Maggie Ruggiero. Prop Stylist: Paige Hicks.

<https://cooking.nytimes.com/recipes/1020564-wild-rice-and-berries-with-popped-rice>

A PARENT'S INFLUENCE ON CHILDREN'S EATING HABITS

A supportive and positive eating environment can be instrumental to your children developing good eating habits. Here are a few tips:

Have regular meal and snack times

Having regular meal and snack times everyday creates a healthy routine. Snacking too close to meals can impact what they choose to eat. Plan small snacks or meals every 2 to 3 hours during the day.

Eat together as a family

Children who eat meals with their family tend to eat more nutritious foods like fruits, vegetables and whole grains. Research shows that eating meals with family members also has many other benefits like increased vocabulary in young children and decreased risk for substance abuse in teenagers. Try themed meals to get your kids excited about coming to the dinner table.

Avoid pressuring your children to eat

Insisting that your children eat certain foods may actually cause them to eat less. Let your children decide how much to eat at meals and snacks based on how hungry they feel.

Avoid using food as a reward or punishment

Using food as a reward or punishment may lead to unhealthy eating habits. Offer a variety of nutritious foods at meal and snack times and let your children serve themselves without any pressure. Try not to label foods as "good" or "bad" or "healthy" and "unhealthy."

Have nutritious foods at home

The foods available in your fridge, freezer, cupboards and pantry are what your children will get used to eating. Plan nutritious shopping trips and meals as a family!

Make nutritious foods the usual choice

What you eat sets an example for what your children will eat. When your children see you eating nutritious foods, they are more likely to want to eat them too. But remember to incorporate "fun foods" on occasion, as all foods fit.

For article resources visit: <https://bana.ca/magazineresources/>



Be Yourself Spotlight: Dana Dupuis

MSW RSW

Photo Credit: Marisa Casey



The Staff and Board at the Bulimia Anorexia Nervosa Association would like extend our most heartfelt congratulations to Staff Alumni Dana Dupuis on being selected by the Ontario Association of Social Workers to receive their 2022 Community Contribution Award.

"This award celebrates social workers or other professionals who support social justice, equity integration and/or inclusion in their communities."

Dana Dupuis has been an asset to the field of eating disorders, and can be found behind many historical initiatives for EDs - both at the local and provincial level. For over ten years, she has been an advocate, leader, innovator, educator, and critical-thinker in the field of eating disorders. Her accomplishments will have rippling and long-lasting effects for those struggling with eating disorders in Windsor/Essex and beyond, and for that she deserves to be recognized.

For many years, Dana was the intake specialist at the Bulimia Anorexia Nervosa Association (BANA); clients knew her as the kind and welcoming first contact on their recovery journey, and she worked hard to create a safe and accessible space for clients to share their story - often for the first time.

For the last few years, Dana contributed greatly to the development of the Windsor/Essex Intensive Outpatient Program (WE-IOP) that was recently launched by BANA x Teen Health x Windsor Regional Hospital; ultimately being named program coordinator of the WE-IOP.

A higher level of care for eating disorder treatment in the Windsor area has been long awaited; as the first-stop for many reaching out for help. Dana's knowledge through her intake role was an asset to demonstrate 'need' in order to make this funded program possible.

Dana advocated for and aided in the development of a centralized intake line for people of all ages in Windsor-Essex who struggle with eating disorders - the first of its kind in the province. Anyone in the area concerned that they or a loved one are struggling with an eating disorder only have to call one phone number in order to seek support. This has made access and system navigation easier for those who need ED services.

She has also acted as a clinical liaison for a provincial-level prevention initiative (also a first of its kind), lead by Eating Disorders Ontario (EDO), to help guide program development from the perspective of a specialized clinician. The program - known as the EDO-Prevention - is still under development, preparing to launch in the near future.

These are only but a few examples of the kind of excellence Dana brings to her work. Her passion is strong and her influence is far-reaching; yet, humbly, she is always the first one to say "there is more work to be done".

Thank you for identifying the gaps, coming up with solutions, being a voice for those struggling, and leading the way to change. We cannot think of anyone more deserving of this award.

SAVE THE DATE

WEDNESDAY, MAY 17, 2023

2023 BUSINESS EXCELLENCE AWARDS

WINDSOR-ESSEX REGIONAL
CHAMBER OF COMMERCE

CHRYSLER THEATRE - ST CLAIR
CENTRE FOR THE ARTS

TICKETS GO ON SALE
JANUARY 2023

Presented by



Finalists will be announced at our news
conference at the end of January

Is It Really Workplace Wellness ?

By Sara Dalrymple

One of the harsh realities of our world is that sometimes good intentions can lead to unintended harm.

With "fitspo" and "clean-eating" trends on the rise, we have seen an increase in workplace initiatives directed towards health and wellness. It is such a wonderful thing – employers putting efforts towards the morale and well-being of their staff. We know that a great deal of our lives is spent working. We also know that the quality of a work environment can make or break the quality of the work being done.

A positive and supportive work environment has been connected with the improved physical, mental, emotional, and spiritual health of employees.

A few workplace qualities that have been associated with a positive work environment are:

- Allowing autonomy of employees (trusting relationship); input on decision-making; all ideas are treated as important
- Clear policies and procedures; a sense of safety when reporting errors or conflict
- Supportive and competent leaders, and peers
- Educational/career-growth opportunities
- Open lines of communication and collaboration
- Adequate pay, sick time and personal time; prioritization of breaks
- Limited overtime; manageable workloads and deadlines with support as needed
- Opportunities for team building and connection
- Opportunities for self-care or personal development
- Recognition of employees' work and contributions by leadership

To leaders and management that prioritize the well-being of their employees: I commend you. It is not an easy feat when our society is overwhelmed with pressure for productivity, efficiency, and high-quality work for low-level costs.

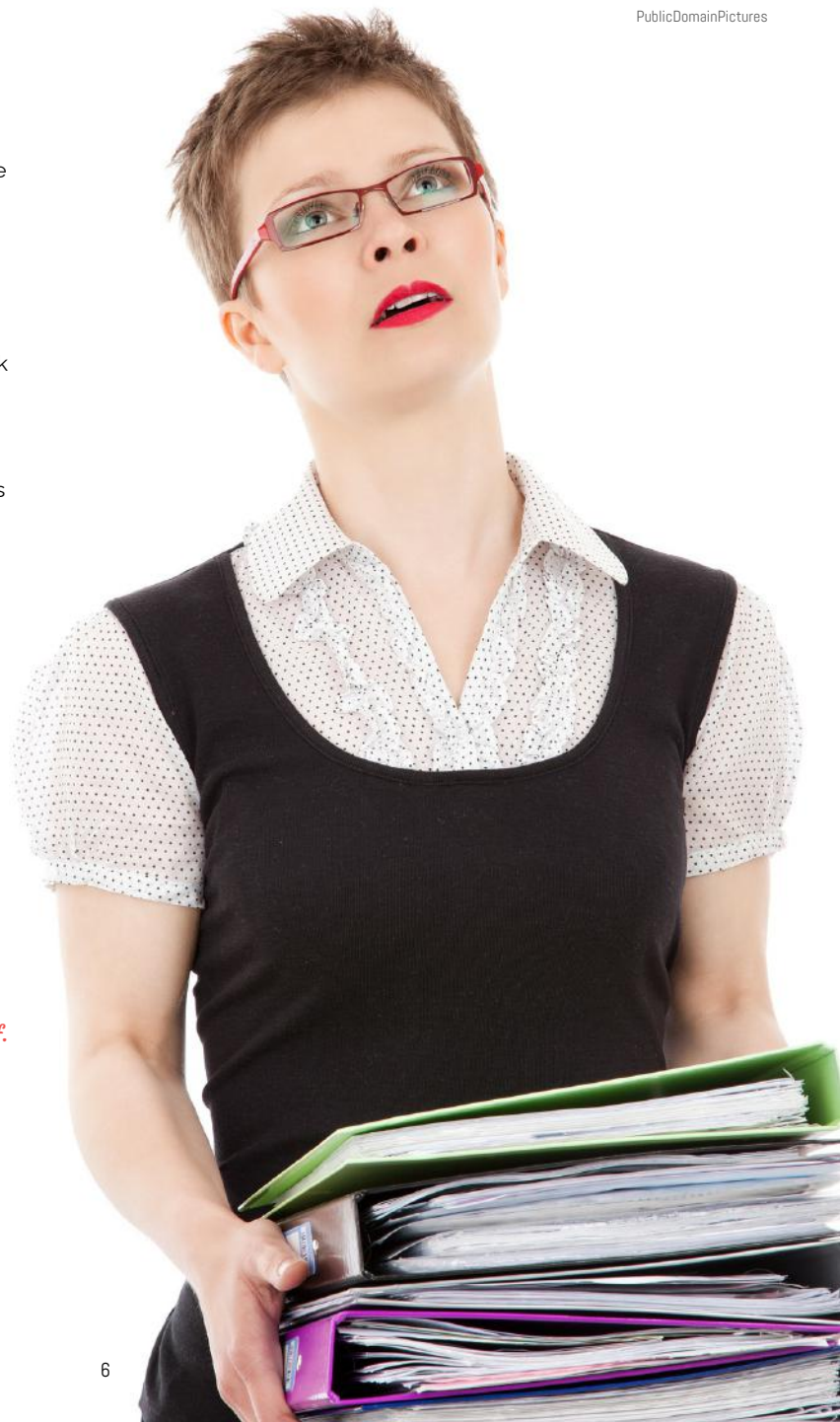
I encourage you to keep reflecting on how to make your work environment better and better.

With that said, I caution that some initiatives may have unseen consequences or unintended (and sometimes reverse) effects for your staff.

It can be hard to honour the unique needs of each individual employee; everyone has their own triggers, limits and areas of vulnerability. It is important to be mindful of what groups of people may not respond well to your good intentions, BEFORE implementing a new health-directed initiative at work.

A team brainstorm of "unintended consequences" may be an effective strategy for reducing harm when your motive is wellness.

I'd like to offer more insight from the eating disorder perspective.



PublicDomainPictures



Photo Credit: Thirdman

According to the National Initiative for Eating Disorders (NIED), approximately 1 million Canadians have an eating disorder diagnosis (2016). According to Statistics Canada (2016), the prevalence rate of eating disorders is approximately 2-3%. Neither of these numbers account for the unreported thousands of people who struggle with disordered eating and/or body dissatisfaction in secrecy.

...And it is always important to remember: eating disorders have the highest rate of mortality of all mental health diagnoses.

Why are these numbers relevant? Well, to demonstrate that statistically speaking, there is a good chance that some of your employees are within this group; therefore, it may be important to consider the vulnerabilities of those with eating disorders when deciding upon a workplace health-initiative.

Workplace initiatives and "competitions" associated with food, physical activity or weight can be particularly risky.

As a clinician, some of the direct and indirect consequences I've observed in clients who reported being triggered by a workplace initiative/competition, are: increased distress and disordered behaviours, both at work and at home; needing time off work for mental or physical health; avoidance of work; inability to focus at work; increased irritability around workload or coworkers; increased fear of judgment; increased and excessive self-monitoring; reduced motivation or productivity; feeling unsafe at work; and in some cases even relapse.

Physical Activity Initiatives & Competitions:

By and large, most of the initiatives we hear being implemented in the workplace revolve around physical activity. We have well-established literature that shows exercise is key for mental and physical health, so a workplace wellness initiative directed at exercise would naturally make sense.

However, excessive or driven exercise can be a symptom of eating disorders. When exercise is built into the workplace and perceived as a means to connect with or relate to colleagues, to gain status, to "get in good" with the boss, and to participate/be included, it can have detrimental effects for those who struggle with disordered exercise.

These individuals may be on an exercise restriction in order to ensure their physical safety, or may already be experiencing medical consequences and injuries due to their harmful level of exercise. They may already be struggling with shifting the meaning and motive behind physical activity to be more positive. They may already be associating their engagement in physical activity with unhelpful meanings, such as whether or not they are worthy as people, lovable, or successful. They may already be comparing their own exercise to others' in a demeaning and self-scrutinizing way. Other areas of their life may be suffering due to the time and energy directed towards physical activity, rather than other things.

They may begin to feel like a failure if they don't meet their own targets, let alone targets outlined by their place of employment.

Healthy vs. Unhealthy Exercise		
FACTORS	UNHEALTHY	HEALTHY
MOTIVES, PURPOSE, OR FUNCTIONING	<ul style="list-style-type: none"> For weight loss Compensation Self-punishment Degrading Impedes on daily life or functioning 	<ul style="list-style-type: none"> For health and general wellness Supportive Fits well into daily life Beneficial
LENGTH OR FREQUENCY	<ul style="list-style-type: none"> Surpasses 60 minutes Sometimes "doubles-up" Adds extra time if concerned about weight or something that had been eaten No rest days 	<ul style="list-style-type: none"> Typically recommends 60 minutes per day Incorporates rest days
LISTENING TO BODY	<ul style="list-style-type: none"> Still exercises despite illness, injury or tiredness/exhaustion Ignores body 	<ul style="list-style-type: none"> Takes rest day – even if unplanned – if body is ill, injured or tired Listens to body
FLEXIBILITY	<ul style="list-style-type: none"> Very rigid and inflexible 	<ul style="list-style-type: none"> Adaptive and flexible
EMOTIONS AND FEELINGS ASSOCIATED	<ul style="list-style-type: none"> Dread the exercise Guilt, anxiety, shame if unable to exercise Punishment Drained 	<ul style="list-style-type: none"> General contentment Excitement "Feel good" Positive Energized

Here is a case example:

Alice's workplace recently began a step-counting competition, where the person with the most steps the end of each week wins a free day-off-work. What Alice's employer does not know is that Alice struggles with disordered exercise.

She attends the gym 2 times a day for 1.5 hours each visit, and has fallen behind with her housework. She does not take rest days, and recently overcame a pulled hamstring for not allowing her body to heal between workouts. Her doctor already cautioned her to be careful, and to consider alternative forms of physical activity that are less strenuous on the legs.

On the rare days she is unable to get to the gym, she feels like a complete failure and fears how her body will gain weight without her workout.

She rarely spends time with her friends, and most of her social life exists at work with colleagues.

Alice initially chose not to partake in the workplace competition, knowing her doctor would not advise it. But it didn't take long for her colleagues conversations to focus more and more on the competition...

... **Where is everyone's steps at this week?**

... **Who won last week?**

... **What would you do with the free day off?**

Alice began to feel left out. She also worried that her peers were making stronger connections without her, which to Alice meant less likelihood of networking and moving up in the workplace, less likelihood of being invited to future outings, and less likelihood of impressing her boss, among other fears.

She is especially worried about giving her boss the impression that she is lazy and "not a team player" unless she participates in workplace wellness initiatives.

Alice finally had enough of feeling lonely and excluded, and decided to join the step-counting competition too. She became more preoccupied and rigid about her physical activity, had even less rest between workouts, and started dreading whether her steps would measure up to those of her coworkers'.

When she didn't win the week, she felt like she had failed more than just the steps: she failed at work and within her social circle, too. She would have to try harder next week.

As you can see, the step-counting competition began to exacerbate her disordered exercise. Of course, this was not the intention of her employer, but it was the very real outcome for Alice.

Alice felt like she had to choose between her relationships and status at work, and her physical health and safety.





Food Initiatives & Competitions:

More and more we are seeing a push by employers to incorporate "healthy eating" in the workplace. These food-related wellness initiatives often look like: limiting access to "fun foods" in the workplace, and only offering "healthy" foods in the cafeterias, cafes or vending machines; "team" diets (calorie-counting or calorie-limit diets, food-group omitting diets, or intermittent fasting); or weight loss competitions.

"Healthy Eating"

It is in the nature of most eating disorders to demonize certain food groups and restrict intake. Dictating what foods are available to your staff may seem like a helpful idea, but can undermine your staff's ability to make their own decisions around food, and encourages them to overlook their own hunger/fullness cues and cravings (thereby moving away from intuitive eating).

Furthermore, there is a great body of research that demonstrates labelling certain foods as "bad", or omitting them from one's food intake, actually makes one more likely to overeat those same foods. A more balanced and helpful approach would be offering all types of foods, and encouraging a non-judgemental, "all foods fit" perspective with your employees.

"Dieting and Restricting Caloric Intake"

Many of the medical risks and consequences associated with eating disorders are related to undereating and restrictive behaviour. These medical concerns include (but are not limited to): increased anxiety and decreased mood; increased cortisol (the stress hormone); low blood sugars and electrolytes; impaired cognitive functioning; reduced energy and increased fatigue/exhaustion; fainting and dizziness; loss of menstrual periods, and in some cases infertility; decreased production of both red and white blood cells; slowed GI muscles, which can result in constipation or diarrhea; difficulty producing and maintaining body heat; dry skin, nails and hair; and dehydration.

In chronic or extreme cases of restriction, cardiovascular, respiratory, neurological, gastrointestinal, skeletal, and renal systems can all face significant deterioration, disruption or damage. Furthermore, undereating and restriction have been identified as one of the leading causes of binge eating, and dieting has been identified as a cause of 'obesity'.

"Weigh Loss Goals"

Encouraging employees to compete against one another in terms of body weight and shape, and pushing weight loss, can be a slippery slope and does not promote your staff's wellness. Instead, it can lead to body dissatisfaction, low self-esteem, excessive self-monitoring (thereby distracting your staff from their work), extreme efforts to control one's weight and shape (including attempts to compensate for calories eaten), work avoidance, depression, and many other negative consequences.

When a workplace promotes these disordered behaviours, it can further trigger and exacerbate the eating disorder and symptom severity. Of course, it also risks decreased effectiveness and productivity in the workplace (ie: cognitive impairment or decreased cognitive functioning has been seen in even mildly restrictive diets).

These kinds of competitions can be even more concerning in workplaces that support vulnerable populations and peoples; when a professional's energy and functional systems are impaired by undereating, this also puts their clients/patients at risk.

Here is another case example:

One of the more concerning workplace wellness initiatives regarding food that we have heard of was when a first-response organization was encouraging their staff to limit food intake to 1000 calories a day.

When the average recommended calorie intake for adults is between 2000-2500 a day, the idea of only 1000 calories a day for individuals who work such a demanding and important job is frightening. Not only do first responders need to be physically prepared for the challenges of their job, they also need to be cognitively strong in order to make quick decisions that are the best interest of the public, and to think critically about responses to problems and potential solutions.

Limiting their calorie intake is, in other words, limiting the energy accessible to their brains and bodies. In effect, this means limiting their ability to do their job effectively and ethically.

Alternative Workplace Wellness Initiatives:

Offer "health breaks" for staff to engage in self-care of their choosing

Offer support for transit, groceries/food access, or employee-assistance programs

Provide classes for more restful and mindful-based physical activity (ie: yoga, stretching, walking), or substance use programs (ie: smoking cessation), or extra curricular programs (ie: gardening on-site, reading clubs, cooking classes that include all kinds of foods)

Offer benefit packages that include adequate mental health coverage, or coverage for alternatives to "classic medical" treatments (ie: naturopaths, spiritual healings)

Offer lunches/snacks of all kinds (not just "healthy" foods – allow for choice and agency)

Set up team building activities (ie: volunteer together at a local non-for-profit)

Provide showers, changerooms, "nap-pods", calming break rooms, refrigerators and microwaves, outdoor space (if possible)

Have supervisors ensure all staff take their breaks – make this a non-negotiable (in many workplaces, it is an unspoken "taboo" to take one's break, so many decide to work through it)

Post motivational signs and posters, develop a resource-library, create a self-care brainstorm wall, host discussions about what everyone is doing to take care of themselves, hold "burnout" ratings at the beginning of meetings, allow a safe space for debriefing or expressing frustrations

Try to avoid initiatives that: require competing against one-another; have weight-loss goals or targets; are appearance-oriented; include "clean" or "healthy" eating only, and demonize other foods; encourage staff to ignore their own body cues; or make assumptions about how someone should take care of themselves.

We also recommend, when seeking outside professionals' support in workplace wellness initiatives, only working with professionals who are registered with a regulatory college (as they are required to maintain knowledge and continued education, have a code of ethics that they are required to follow, and have a regulatory body ensuring ethical practice in order to protect the public).

This helps to ensure that the information being shared with your staff, as well as the wellness initiatives being implemented, are not only ethical but empirically supported.

For article resources visit: <https://bana.ca/magazineresources/>



Sara Dalrymple, is a Clinical Therapist at the Bulimia Anorexia Nervosa Association (BANA) and Associate Editor of the BANA Magazine



Photo Credit: Yan Krukov

happily
healthily
safely
proudly
confidently
freely
openly

be yourself here



3400 Grand Marais East, Windsor, ON N8W 1W7 519-944-8000 centralparkathletics.com

Follow us on:



Let's Keep Going . . .

By Frankey Renaud

Trigger Warning:
Content may include self-harm and other mental health triggers.
Please engage in self-care as you read this article.

At 25 years old, I was at the pinnacle of my athletic career and at a place in which I was on the verge of reaching every goal I had ever dreamed of professionally. And then, on July 14th, 2018, I tore the anterior cruciate ligament, otherwise known as the ACL of my right knee. This was the second time I would experience a torn ACL and so when it did happen, I was inspired with the idea that I would recover in five months like I did the first, and rise back to play again.

Unfortunately, however, this was not the case. What followed was the beginning of a deep, dark, and traumatic transformational journey. In order to dive into that experience, it's important for me to highlight how I made it to that fateful day.

When I was 15 years old, I was inspired to play football by my high school coach who sarcastically shared with me that I would become a "big fat offensive lineman" someday. Although this wasn't quite the case, what it did inspire me into becoming was one of the first people in my family to successfully graduate high school, the first person in my family to graduate post-secondary school and the second person in my family to become a professional athlete (second only to my biological dad whom I never met and who passed away while I was in high school... But that's a story for another time).

The inspiration that I received from those simple words my high school coach shared catapulted me into a headspace where I committed everything I knew to the sport. As a result of this commitment, I had the pleasure of experiencing so much more than I could imagine at the time.

I was all in on me and nothing was going to stop me from reaching my dream of football becoming my life.

In fact, nothing did stop me as I went on to play university football at a high level, and despite tearing my left ACL in 2015, I was drafted the following year with the 63rd pick in the 8th round of the CFL draft to the Winnipeg Blue Bombers. My dreams were coming true and they were just beginning.

Upon being drafted I spent a couple of years on and off the field throughout the CFL for both the Hamilton Tiger Cats and the Winnipeg Blue Bombers. I had the absolute pleasure of playing in 21 games in 3 years up to the point of the catastrophic injury on July 14th.

If you haven't noticed up to this point, everything I just shared was about football. Nothing else. Football was my life, and there was nothing wrong with that. But this is where life gets messy.

Everything that followed the traumatic injury in 2018 was the result of one critical question and thought that resurfaced from my youth one morning while I was laying in bed in Winnipeg. After a few months of physical therapy, I woke up one day and realized I was no longer going to be playing football. It finally sunk in that even if I were to recover from this injury, I was damaged goods. I had two traumatic knee injuries on my resume and was as good as done.

I asked myself, "If I'm not a professional athlete, then what am I? Who am I? Why am I here? What is my purpose in life?"

I crumbled, broke down, and cried, realizing that outside of football I was nothing. I felt empty for the first time in my life and was shattered. I'm having a hard time writing this story in the moment because going back to that time of feeling so empty and void of any purpose or life, I felt so weak and scared.

I began to search frantically for meaning and purpose. I was seeking some kind of reason to cling onto my life as I no longer knew what anything meant anymore. For so long I could only see football. I could only see my life within the confines of being a professional athlete.

Now, I could not see anything in my future and it terrified me. I was out in open water and I didn't know how to swim. To add onto all of this traumatic energy I was feeling, I came to the realization that all of my relationships, both intimate and professional were rather surface level. I came to realize that I did not have a healthy relationship with my close family.

I realized that as I chased my dreams, I had let no one into my heart and in that moment, I felt so alone. I felt abandoned and scared and like I didn't have anyone to reach out to. So many emotions flooded me and I was overwhelmed. I was physically alone out in Winnipeg and I also felt so alone in my heart and in my mind.

I managed to come across some videos on YouTube that inspired me for a moment to dig deeper into what the meaning of life was and as I went deeper into the videos, a wash of passion, and excitement came over me.

Amidst all the chaos I had found some light and I followed that light. As I followed the light, it led me to reach out to my family and friends, asking for answers to deeper questions surrounding our relationships and peaking into our lives further. Everyone I reached out to was unfamiliar with this side of me as I had never had these conversations with them before or shared this side of myself.

With these questions that I was asking those closest to me came concerns for my health as I was alone and at the time sending all sorts of messages at irregular times of the day. Yes, I was inspired and passionate about something outside of football but what I had lost was a sense of self and relationship with taking care of myself. This is an aspect that crumbled because my self-care was anchored in my ability to produce in football and I had yet to discover that my love for self could extend beyond the sport.

Consequently, I eventually ended up in the hospital and after some very traumatic events, I was diagnosed with bipolar disorder and told I'd be spending the rest of my life suffering from depression, anxiety, and this disorder.

In summary, the journey through football to the abrupt end of my career in 2018 cultivated a mile long list of amazing qualities that I had developed however all that I could extract from the entire experience at the time was anxiety, depression, bipolar disorder, and eventually suicide.

Near the end of the 2018 calendar year, I went through a deep depression where I could no longer handle the trauma and thoughts going through my head. I felt weak, numb and on the verge of giving up. It was at that moment where I contemplated ways to end my life. In those dark moments, I summed up the courage to reach out to someone close to me to let them know how I felt and got the support I needed.

This was merely the beginning of a journey even deeper into a cave of depression, self-doubt, self-beat up, and more. What inspired me to keep going through that journey was knowing that somehow, someday, I'd be able to leverage the experience and support someone else going through what I have been going through, if not in some way be there to show that it's possible.

Here I stand today, a man that decided that he would no longer be a victim to his thoughts. A man who decided that he would take these beliefs on and do something about them. A man who would choose to dig deep, and figure out what was really going on for him underneath it all, despite what other people believed to be the best practice for him.

Once again, I decided to go all in on me.

By no means can I sit here and share that I have arrived to some kind of godly success, because this journey of life, the ups AND the downs, and will never end. I have gone into deep, dark, traumatic depression, suicide and more and climbed out of those dark places. I have also gone BACK into those places many times. What I can share however is that what I have been able to absolutely, beyond a shadow of a doubt, anchor into my very being and essence is that **IF I DO NOT GIVE UP, I WILL GET THROUGH IT.**



As I share these words, I am reminded of the mountain of challenges I have faced, I face today, and I will face while also having the pleasure to shift into remembering the incredible qualities that I have developed during the course of my life that are no longer limited in my mind to just football.

As a result of me deciding to take on my life and further pursue this passion for being in support of others, I was guided to dive into a transformational leadership and emotional intelligence course which ripped my soul wide open and allowed me to deepen my relationship with myself, heal some core wounds that had implanted into my awareness near the beginning of my journey after football, and begin to unearth my desires for sharing, communicating and impacting others.

Since 2020, I have had the honor of speaking and sharing my stories of both personal battles and insights within my community. I have been able to study and practice reiki, which is an ancient healing modality that supports others in clearing energetic blockages in their body. I am now a qualified neurolinguistic programming practitioner which has provided me the tools to support others in transforming the language of their minds to transform their lives.

The accolades are great but the core message here lies in the transformation that I have gone through (**AND AM STILL GOING THROUGH TODAY**). Four years ago I was on the brink of ending my life. Today, I am on the brink of yet another incredible transformative breakthrough and this piece that I get to share is in fact a part of that. At a time when I felt alone, dark, scared, and with nothing left, my decision to share even just a few words of what was going on in my mind was just the beginning of so much more.

We as men often don't feel safe to share or to even admit that there may be something going on. To deepen that statement, some of us may not even have a clue that there is anything to talk about. My wish for this share is that I get to support someone in seeking support as well as to show that it isn't all sunshine and rainbows, **AND THAT IS OKAY**.

I write this with the knowing that I am currently battling new challenges that at one point would have made me crumble. I write this knowing that I am currently utilizing the tools that I developed battling challenges that at one point, I could have, but didn't crumble. We are here today because we have overcome, and we have a 100% success rate of overcoming. My invitation to you is to anchor into that forever more, because your breakthrough is just around the corner my friend.

Let's keep going.



Frankey Renaud is a retired CFL athlete, a graduate of the University of Windsor in the Kinesiology program. After a long and difficult journey, Frankey has risen above his demons. He speaks passionately about mental health, practices reiki, and provides coaching, leadership and growth-training as well as mentorship and support to youth and adults alike. His mission in his life has been to aid in building a world of strong men and women with a focus on creating a safe space for all to express themselves and heal from any mental health challenges they may face.

Find out more at www.frankeyrenaud.com

"The Strength to Show Weakness"

They have been lying to us all our lives . . .

We were misled and brainwashed to believe
Through centuries of predispositioned roles
Heralded onward from a draconic ideology
And the myth that if one is not
The pillar of stoicism
Strong in the face of adversity
Able to bare the brunt of society's burdens
Albeit physical or mental . . .

**Then they have no right
To be called a man.**

Furthermore, those inadequate souls
Should be branded with a mark
Of shame and disgrace
And be shunned as less than worthy.

Well . . . they and their narrow-minded
misconceptions can all go to hell.

Hide your pain they say . . .

Hide your insecurities
Hide your stress
Hide your anxieties
Hide your depression
Hide your anger
Hide your fear. . .

Who are they to say "real men" don't ask for help?

Or are you saying that a "real man" hides?

I don't think so . . .

A real man would
Heal his pain
Confront his insecurities
Manage his stress
Work to understand his anxieties
Seek solutions for depression
Resolve his anger
Face his fears . . .

But to do that,
He must be allowed to admit they exist . . .

And ask for help
And support
And guidance . . .

**A real man would find
The strength to show weakness.**

- Mindfeelings21



SOUTHWESTERN ONTARIO Youth Gender Diversity Clinic

In partnership with the Windsor Essex Community Health Center (weCHC) and the Chatham-Kent Community Health Centers (CKCHC), we are pleased to announce new services for transgender children and youth in the Windsor-Essex, Chatham-Kent and surrounding areas. To meet the eligibility criteria, your child must be **18 years or younger**, a referral from a doctor/ NP is preferred but not required and we will accept individuals without access to primary care.

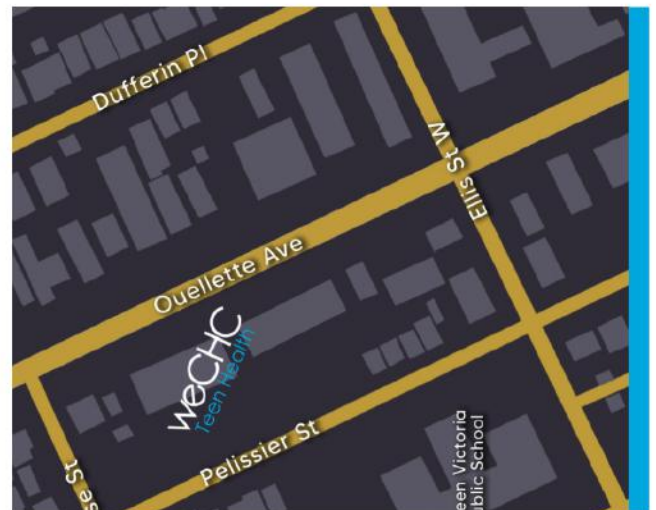
WHAT WE DO:

At the Youth Gender Diversity Clinic, we provide assessment and diagnosis of gender dysphoria, management of common comorbid mental health conditions, assessments for starting hormone blockers and affirming hormone therapy, prescriptions of hormones or blockers and monitoring of treatment.

Dr. Ian Johnston is leading these services. He has 10 years of experience working with transgender youth as a general pediatrician in Chatham-Kent. His services are available at CKCHC and weCHC Teen Health.

Please direct your referrals to:

Chatham-Kent Community Health Centers
Pediatric Affirmative Care Clinic
Call: 519-397-5455 ext. 164
Fax: 519-397-5497



This Autumn, Fall in Love with yourself: A 101 Guide to Empower Oneself

By: Hiba M. Hamed, (H)B. Arts &Sci., MSW, RSW, Social Worker, Psychotherapist



The individual you must be the most patient with on a day-to-day basis is yourself. When things are not aligned as you would like them to be remember: there are things we can control and things we cannot control. Everything will happen at the right time when you least expect them to happen. This article will emphasize the beauty of taking care of oneself this fall, even when facing tough moments or times in life. As the good old saying goes: "The grass is not greener on the other side, it's greener where you water it." Remember you've got this! -Hiba H.



THE FATAL ROUTINE OF WORK, HOME, SLEEP (RINSE AND REPEAT)

As we transition to going back to work, school, and our daily routine this fall, it is essential you do not lose yourself, spread yourself too thin, or even burn out. We are used to the routine of work, home, sleep, and repeat. But do we find the time to take care of our mind, body, and soul? Are we pleasing others more than ourselves?

When asking my clients, "When you are on a plane and the oxygen masks come down, will you place the oxygen mask on your face or your children's face first?" Believe it or not, about $\frac{3}{4}$ of the answers I receive are the clients would place the oxygen masks on their children before themselves – despite safety recommendations being the opposite. This right here is a lack of self-care and demonstrates more compassion and care for others than oneself. With this said, let us define the three key empowering words: self-care, self-love, and self-compassion.

WHAT IS SELF-CARE?

According to verywellmind (2022), self-care is defined as a conscious act a person takes to promote their physical, mental, and emotional health. Self-care comes in numerous forms, which we will touch on later in this article. Some quick examples would be writing in a journal to express your emotions, or taking a walk outside for a few minutes to get some fresh air.

The benefit of self-care is that it is vital to building resiliency towards any stressors in your life. Self-care practices are tools and equipment that will help you to identify when a trigger is in play so that you can implement a self-care activity to help feed your soul and mind with more positive energy.

Unfortunately, many people are hard on themselves, believing they do not deserve self-care.

When assessing self-care, many view it as a luxury rather than a mental health priority. When there is a lack of self-care this could result in feeling overwhelmed, tired, and ill-equipped to handle life's day-to-day challenges (verywellmind, 2022). To make self-care more accessible to you year-round, let us review some of the forms it comes in.

THE 5 ESSENTIAL TYPES OF SELF-CARE AND THEIR IMPORTANCE

Finding balance within work, relationships, and personal life is essential, but not many are able to maintain this balance or make their wheel of life turn smoothly. Remember: self-care is not just about relaxing. Rather, it is meant to fuel your body with positive energy to restore yourself and find coping for stressors in your life. Verywellmind (2022), offers five ways to take care of oneself, which we will briefly touch on below:

- 1) **Physical self-care: when we talk about physical care,** we are discussing how you are fueling your body effectively. Are you seeking physical exams and reviews with a physician? Are you attending appointments for well-being, or taking medication as prescribed? Examples may include: walking, exercising, sleeping well, and fueling the body with food.
- 2) **Social self-care: keeping your circle small with friends, colleagues and family members is essential,** especially when life becomes busy and hectic. Building relationships in time allows you to cultivate a support net for tough and challenging moments in life. Relationships also allow you to explore your needs with one another. Creating time within a week to chat, face time, or meet for coffee will provide a healthy exchange of social energy and can have a nurturing effect.
- 3) **Mental self-care:** as the great Buddha once mentioned, "We are what we think. All that we are arises with our thoughts" (BrainyQuote, 2022). Mental health self-care activities help keep your mind sharp, like puzzles, mandalas, sudoku, or becoming curious about a subject that fascinates you. You could read a book or watch a movie that inspires you and fuels your mind. Practicing self-compassion and acceptance helps to create a healthier inner dialogue of thoughts. Check out educational psychologist, Dr. Kristin Neff - a guru on self-compassion (link in resources).
- 4) **Spiritual self-care:** incorporating a lifestyle with religion or spirituality can help nurture your spirit. Understanding the sense of living or connecting with the universe are ways to incorporate spirituality. More examples include - but are not limited to - meditation, attending religious services, or praying, finding that Zen space in your house. (Spirituality & Health, 2022 - link in resources)
- 5) **Emotional self-care:** emotions can be positive and negative. Regulating our emotions is a significant component to self-care, and it is important to acknowledge and express your feelings regularly and safely. Outwardly communicating your feelings to others can be helpful for processing your emotions.

Exploring assertive communication, role playing and dialect with a partner or close friend will allow for practice in honouring how you are feeling. Check out Dr. Barbara Frederickson a social psychologist who discusses 10 positive emotions we can incorporate into our daily life that oppose the negative emotions of anger, anxiety, and sadness. (Huffpost, 2017 – link in resources)

SELF-CARE: IS IT THE ONLY WAY TO CARE FOR OUR MIND, BODY, SOUL?

Although this article discusses self-care and taking care of oneself before others, it is also significant to look at other factors that aid in daily self-care: self-love and self-compassion.

Self-love is defined as accepting oneself fully, treating yourself with kindness and respect, and nurturing your growth and well-being (Psychcentral, 2019).

When you love yourself, you have an overall positive view of yourself.

Some ways to practice self-love are to review positive affirmations, practice gratitude or mantras that will fuel your day with positive words and actions. Remember: you cannot learn how to love others if you do not love yourself first.

Other examples include valuing your feelings, honouring your needs, saying positive things about yourself, setting realistic expectations, etc. (Psychcentral, 2019). Without self-love you may fall into people pleasing or perfectionism or may grow to be even harder on yourself. You are likely to tolerate abuse or mistreatment from others.

The beauty of self-love is that it allows you to set the foundation to stand by your values, be assertive, set boundaries, create healthy relationships with others, practice self-care and attain your goals (Psychcentral, 2019).

Self-compassion is another fundamental topic that can help you practice acceptance and love inwardly to yourself. Compassion is the ability to show empathy, love, and concern to others, whereas self-compassion is simply the ability to direct these same emotions within and accept oneself (GoodTherapy, 2019).

Many people unfortunately do not show compassion to themselves as much as they do for others. There is a fear of self-indulgence and self-pity. Guru Dr. Kristin Neff - a researcher on self-compassion - mentioned three key elements for self-compassion: self-kindness (i.e., not being self-critical of the self), recognizing one's own humanity (i.e., nobody is perfect, and we all experience pain), and lastly, mindfulness (i.e., focusing on the present and maintaining a non-biased awareness of experiences) (GoodTherapy, 2019).

To conclude, self-love and self-compassion are few of many factors that help feed self-care daily. They are tools that help nurture self-care during tough and challenging times. Focusing on our needs, feelings, goals, and interests are ways that help us engage in self-care practices. Creating a routine for self-care - whether in the morning, night, or even on a weekly basis - will allow for effective results to empower and love oneself this fall season.

SEEKING TIMELY HELP

While self-care, self-love and self-compassion require consistent practice, seeking timely treatment can prevent worsening changes in mood, appetite, burnout, stress, self-esteem, and energy level. If you experience negative emotional symptoms for longer than two weeks, we recommend reaching out to a mental health professional or allied health professionals to develop a treatment plan and work on your short or long-term goals.

(continue reading for our 12 self-care-self love practices)



12 SELF-CARE/SELF-LOVE PRACTICES FOR THIS FALL:

The following 12 ideas for self-care/self-love are a few of many examples you would be able to practice on a weekly, daily, or monthly basis. Not everything works for everyone, but remember, the more you practice, the more you will begin to feel better!

Activity: Choose 2-3 self-care examples from the list below (or from your own list of self-care activities) to practice this fall. For instance, I love to read (reading can be an activity of self-care, and it will help me both mentally and emotionally).

1 Layer up and go for a walk

According to studies through the Journal of Affective Disorder (2021) as the days are becoming shorter, being outside while the sun is shining helps boost happiness, joy, and decreases symptoms of depression. Additionally, exercising will help enhance your mood, reduce stress and anxiety. Find a realistic way to incorporate movement in your daily schedule, for instance: yoga, walking, and hiking. (Psychology Today, 2018). Pro tip: taking a walk for 15-20 minutes a day or few times a week can boost mental health, and you also get to explore your neighbourhood and community.

2 Fall home cleansing

As seasons change, organizing your space is a common self-care practice that can make many individuals feel accomplished. An organized space can help relieve anxiety and stress. According to studies from the Journal of Sleep (2015), people with less hoarding tendencies can have a more restful sleep (Everyday Health, 2022). Pro tip: divide home items into 3 categories: things you want, things you do not want, or in-between to get yourself started.

3 Refresh your bucket list or goals

Having a bucket list allows you to boost creativity, combat dull or stagnant days, and keep what's important to you in focus. Also, according to the American Heart Association, having a bucket list can yield brain and body benefits (Everyday Health, 2022). Pro tip: A change of seasons is the perfect time to take stock of when you might want to tackle short- or long-term goals. Do a 30-day challenge where you do something daily that is out of your norm, and you can check off your bucket list.

4 Dive into fall recipes

Eating more in-season fall ingredients, such as broccoli, squash, apples, pumpkin, and pears, can have nutrition, price, and environmental benefits. One study found that broccoli was richer in vitamin C when bought during peak season than broccoli bought at other times of year (Everyday Health, 2022). Pro tip: Learning nutritional facts about in-season vegetables and fruits can motivate you to meal-prep for the week.

5 Embrace the sunlight (or Consider Light Therapy)

According to the American Academy of Family Physicians (AAFP), Seasonal Affective Disorder (SAD), also known as "major depressive disorder with a seasonal pattern," impacts about 1 in every 20 Americans (Everyday Health, 2022). It can be triggered by the change of season, and happen either due to the spring transition from cooler to warmer weather, or due to the fall transition from warmer to cooler weather. Pro Tip: as the natural sunlight decreases during cold season, utilizing a therapeutic light box on a table or stand will help boost positive mood during cold weather. Remember to reduce the light box as the weather becomes warmer.

6 Bust Out Your Favorite Cozy Sweaters

The idea is that if what you wear brings about joy, it also triggers the release of the dopamine - a hormone that lights up the reward center of our brain and leaves us wanting more of that trigger. A trend that currently has the attention of the internet, #DopamineDressing, has more than 107,000 posts on Instagram (Everyday Health, 2022). Sweater weather has arrived, and feeling cozy and warm during the cold weather is essential. Pro Tip: Get out some of your favorite sweaters from the attic, closet, or luggage and wear them with confidence.



7 Go Ahead, embrace pumpkin spice everything

If you count down to the launch day of the pumpkin spice latte (PSL) each year, go ahead and enjoy that autumnal treat when it hits the coffee shop near you (or try making your own at home). Its limited availability gives us something to look forward to (Everyday Health, 2022). Pro Tip: The smell of PSL or any fall scent alone may lift your day. Scent-sparked memories can increase positive emotions, reduce stress, and decrease inflammation (Everyday Health, 2022)

8 Review personal sleep hygiene

Fall equals days becoming shorter and nights longer. Practice good sleep hygiene for better sleep. For instance, what time will you go to sleep? Are there any distractions before you go to bed (e.g., phone, tv, laptop, etc.)? Is your room fully dark with no light? Do you have a lot of clutter around you before you go to bed? Pro tip: spraying therapeutic lavender on your pillow, having a scented diffuser, humidifier or a Himalayan salt lamp would help set the room aura to cozy and restful.

9 Setting healthy boundaries by simply saying "No"

As humans we tend to be curious and engage in our surroundings. For instance, wanting to attend events, meetings, conferences, concerts, and so on. Be sure to learn assertive communication and to say politely "no" when you are not able to attend, or do not want to attend. Remember: the more you practice asserting your boundaries, the less likelihood of burnout or people-pleasing. Pro tip: reviewing your values and beliefs are a great start to learn how to set healthy boundaries. Note: others have boundaries as well to respect.

10 Take a self-care trip

There are numerous fun activities to do this fall. For instance, pumpkin patches, corn mazes, hayrides, haunted houses, or apple picking. Taking a trip with self or family will allow you to take a step back from your daily routine and enjoy something different (Psychology Today, 2018).

11 Read a book on self-care, for self-care

Reading a book will allow you to turn away from your phone or devices, and to dive into a story or self-care plan. In addition, books allow you to enhance your vocabulary and help you discover yourself and your interests (i.e., which genres you prefer: action, comedy, romance, adventure, etc.).

12 Schedule your morning, day, or evening self-care routine

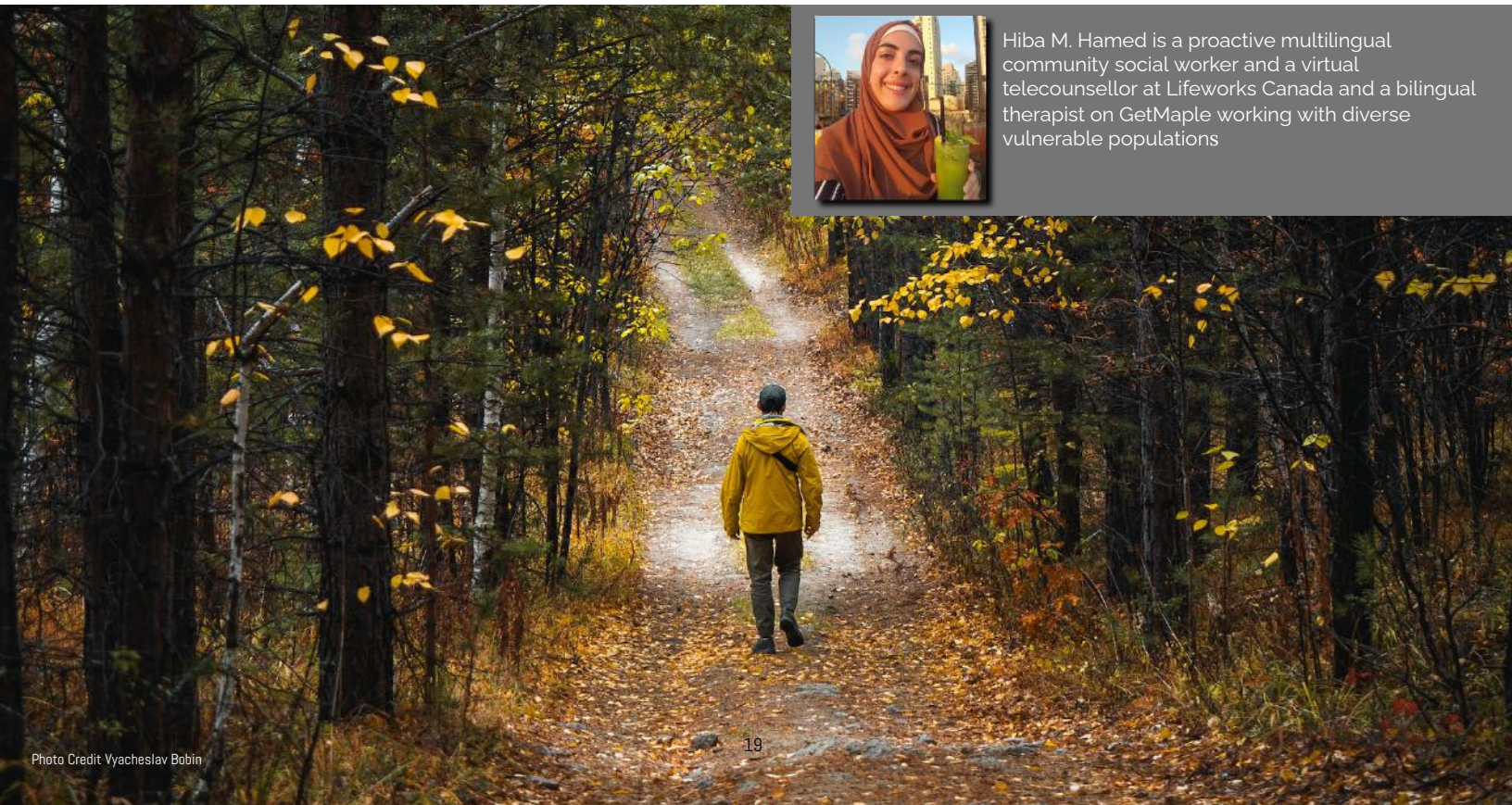
Whether you decide you want to go for a long walk, take a hot bath, or enjoy a good movie with friends, taking time for self-care is imperative. Look for small ways you can incorporate it into everyday life; for example, you might wake up 15 minutes earlier to sit with a cup of tea and practice deep breathing before the chaos of the day begins, or you might take a walk around the block on your lunch break.

The more you can work self-care time into your schedule, the better you'll be able to grow, enjoy your life, and thrive (Psychology Today, 2018). Pro tip: practicing journaling, gratitude or positive affirmations are a great way to start your day. Journaling is also great to begin your day or work schedule. Taking 5 minutes of your day to write in a journal will allow you vent any feelings or tension you may have to tackle on a day-to-day basis.

For article resources visit: <https://bana.ca/magazineresources/>



Hiba M. Hamed is a proactive multilingual community social worker and a virtual telecounselor at Lifeworks Canada and a bilingual therapist on GetMaple working with diverse vulnerable populations



Adulting with ADHD

By Jill Cadarette



Jenna (name changed to protect privacy), who is now in her mid-40s, was told by her primary care provider that there was no way she could have Attention Deficit Hyperactivity Disorder (ADHD) because she achieved good grades in school and has perfectionist tendencies.

Jenna was also frustrated because she'd been on medication to treat anxiety over the past several years and it "never really worked". Jenna's story is a common one that could easily apply to many adults who have been late-diagnosed with ADHD. Jenna and many others are overlooked.

SO WHAT IS ADHD?

According to the 5th Edition of the Diagnostics and Statistical Manual of Mental Disorders (DSM), ADHD is a neurodevelopmental disorder that impacts executive functioning in the brain. Executive functions include: self-awareness, self-restraint/impulsivity, verbal and non-verbal working memory/recall, emotion self-regulation/frustration, self-motivation, planning and prioritizing.

ADHD has three possible presentation types. An individual can be diagnosed with Inattentive Type, Hyperactive/Impulsive Type, or Combined Type. It is also a diagnostic requirement of ADHD that symptoms be present prior to the age of 12 and in more than one setting.

For adults seeking diagnosis, this means digging up childhood memories of report card comments such as "makes careless mistakes" or "talks too much" or asking parents or siblings for input about early behaviours and signs.

The DSM definition of ADHD is helpful but it isn't perfect. It comes from a medical model that pathologizes differences and negatively frames the symptoms of ADHD as a weakness, a defect, or a problem to be overcome.

The stereotypical image of a young boy who can't sit still in class, is messy, talks a mile a minute, and struggles in school, has done a disservice to a generation of people whose symptoms manifested differently.

Diagnostic inequities exist, especially in women, BIPOC and 2SLGBTQQIA communities, however, recent years have seen a dramatic rise in diagnosis among members of these groups.

Adult ADHD looks different than it does in children, although many people learn coping strategies to overcome their symptoms.

With adult symptoms . . .

Inattention can present as:

- Difficulty focusing during work meetings and losing track of the conversation.
- Trouble paying attention, even when someone is talking directly to you.
- Having trouble reading a book, preferring to listen to audiobooks, podcasts or music.
- Frequently being late for work or meetings.

Hyperactivity can present as:

- Leg-jiggling, picking at fingernails, playing with jewelry, or shifting body position when having to sit for periods of time.
- Getting up repeatedly while in a meeting or during dinner.
- Puttering around the house while company is over.
- Trouble getting to sleep or staying asleep.

Impulsivity can present as:

- Difficulty with impulse purchases or overspending.
- Engaging in risky behaviour such as compulsive speeding, or unsafe sex.
- Using substances or gambling more than you would like.
- Monopolizing conversations or interrupting others.

Emotion Dysregulation can present as:

- Crying easily.
- Having difficulty controlling temper flare-ups.
- Feeling easily "triggered".
- Having a sense that your emotional reaction is more than the situation calls for.

ADHD also has a few features that are lesser known by the wider public but are well-established in scientific literature.

Delayed Onset Circadian Phase – This is caused by delayed dim-light melatonin onset (DLMO) significant percentage of people with ADHD have trouble with sleep. Getting to sleep or returning to sleep can be challenging. Sleep hygiene and 'eveningness' practices are important.

Hypersensitivity – People with ADHD can be Highly Sensitive Persons who are highly sensitive to physical, emotional or sensory stimuli and, as such, can be easily moved by a positive experience, respond strongly to a negative experience or feel overwhelmed by too many sensory inputs.

Rejection Sensitive Dysphoria – Some individuals with ADHD have an extreme sensitivity to rejection (real or perceived) or feeling hurt which can lead to an overly emotional response, embarrassment, anger, and/or crying. It can also lead to anticipatory preparation for rejection.

GETTING DIAGNOSED

Primary Care Providers can diagnose and prescribe ADHD medication, if they feel competent to do so. Ideally, a full assessment would be completed by a psychiatrist or a psychological assessment centre. Social Workers who specialize in ADHD can also complete an assessment which can then be forwarded to a primary care provider of choice – social workers are not capable of providing a mental health diagnosis.

A full assessment should include an in-depth social history, assessment for comorbid conditions such as anxiety or depression, differential diagnosis to rule out ADHD-mimicking conditions, adult-specific ADHD assessments tools and, if possible, a collateral account from a family member or someone who knows the individual well. Some assessments also include computer-based tests to assess working memory or distractibility.

In my practice, there are two main triggers for adults to seek diagnosis. First, adults who have a child or immediate family member that has been diagnosed with ADHD may identify similarities between themselves and the diagnosed individual – ADHD is highly heritable. Another increasingly common impetus for diagnosis is social media.

Like so many other issues that have gained awareness through popular social media platforms, some prominent ADHD educators, psychiatrists, social workers, and individuals with lived experience, have begun sharing their knowledge this way. They have created viral videos disseminating valuable insight which has caught the attention of individuals looking for answers to their ongoing challenges.

Medication and ADHD

Thankfully, current medications are very effective at helping to alleviate the symptoms of ADHD but the individual will still need to learn how to live with their diagnosis. Patients should ensure they become familiar with the side effects and risks associated with their medications as well as any contraindications. Psychotherapy from a therapist or social worker who specializes in ADHD or ADHD coaching is recommended for long-term management of ADHD, especially if more than one household member has been diagnosed.

Psychotherapy and ADHD

Adults with ADHD have experienced decades of being corrected by others and feeling different. As children, they were called lazy, unreliable, or messy. They were repeatedly scolded by adults, often parents who had undiagnosed ADHD, themselves. Frequent correction during childhood can lead to a low self-esteem that extends into adulthood. As adults, ADHDers may struggle with romantic relationships, friendships, parenting, and career issues.

Individuals with ADHD understand social norms and expectations but have difficulty delivering. In order to fit in, ADHDers attempt to mask their symptoms and present a more 'socially acceptable' veneer.

Examples of masking include:

- Reluctance to have guests or company over because the home is never perfectly clean.
- Staying late at work to compensate for being distracted earlier in the day – behaviour that is often praised by supervisors.
- Maintaining multiple reminders about appointments.
- Rehearsing checklists and to-dos in your head so you don't forget.
- Compulsive patting of pockets or purse-checking to ensure a phone or car keys have not been forgotten.
- Avoiding people in public because you cannot remember their name or where you know them from.
- Experiencing high levels of anxiety to provide enough motivation to complete tasks.





Symptom masking is physically and mentally exhausting and can have long term impact on mental health.

For ADHD parents, there is often one or more children who have ADHD in the household and therapy can help parents become more compassionate, understanding, and effective in their roles.

Psychotherapy for Adult ADHD involves a variety of elements. First, education about ADHD is important for understanding how ADHD brains work along with a holistic approach to health that includes mindfulness and sleep hygiene practices.

Next, a multi-modal approach is used to help address and heal from past emotional wounds and the chronic trauma connected to ADHD.

Third, personalized strategies for home and the workplace are co-created and implemented in order to foster a functional lifestyle. Lastly, therapy also involves celebrating the strengths of the individual while exploring their values, needs and goals.

If a romantic partner is involved, relationship counselling may be appropriate. If the individual is also a parent to one or more child with ADHD, parental coaching may be useful to provide support for the already-challenging role.

Careers and ADHD

ADHD has its benefits, especially as they relate to the workforce. Individuals with ADHD excel in careers that involve:

Creativity and curiosity – People with ADHD love to explore their interests and take great pride in coming up with creative interpretations and seek beauty. They make great artists, chefs, performers or teachers!

Quick Thinkers - Ability to think and react very quickly when needed (i.e., in an emergency). They make great first responders, doctors, or nurses!

Hyperfocus - Ability to hyperfocus on a subject or task for hours on end until it is complete, especially if it is an interesting subject. They make great editors, writers, or journalists!

Complicated challenges – People with ADHD are known for being out-of-the-box thinkers who enjoy new and interesting problems. They make great software programmers, management consultants, or entrepreneurs!

Strategic Thinking – Individuals with ADHD are great strategic and intuitive thinkers. They will also deep dive on a subject to ensure they have a full understanding of the matter at hand. When it comes to developing a broader vision that can be delegated to a team for execution, they excel. They make great executives, leaders, and analysts!

Getting help for suspected-ADHD is recommended. Although the condition does not get worse, its impact on your quality of life most likely will. Debts accumulate, clutter becomes unmanageable, relationships erode, and jobs can be lost or threatened.

ADHD is a way of being in the world that is simply one layer added to our already complex identities. When an individual has ADHD, everything they do or experience is impacted. Having an awareness of and accepting who we truly are, including ADHD, is part of the natural process of self-discovery that we all navigate as we age.

The goal of therapy is for the client to achieve a sense of radical self-acceptance. Through this acceptance, they will be able to identify their needs and make confident choices. ADHD-affirming choices lead to an ADHD-informed and ADHD-friendly lifestyle that is enjoyable and improves quality of life.

For article resources visit: <https://bana.ca/magazineresources/>



Jill Cadarette is a Registered Social Worker/Psychotherapist with 20+ years experience working with adults and older adults in Windsor-Essex and across Ontario. Her private practice is located at Balanced Life Wellness Centre in Essex. Specializes in Adult ADHD and she provides ADHD-affirming, ADHD-adapted and ADHD-informed psychotherapy services including assessment, psychoeducation, ADHD-specific trauma care, and self-acceptance work.

BANA IS SEEKING DYNAMIC INDIVIDUALS
TO JOIN THEIR VOLUNTEER BOARD OF DIRECTORS

AND WE'RE LOOKING FOR YOU.



BANA specializes in treatment programs, education and support services to individuals affected directly or indirectly by complex eating disorders.

BANA is seeking expressions of interest from individuals who would like to join the Board of Directors to assist in advancing the mission and vision of the organization as a governance volunteer for a three-year term.

Board meetings take place monthly from September to June.

If you are interested in being considered, please forward your resume and cover letter to info@bana.ca by December 1, 2022.

We thank all individuals for their interest, however, only those selected for an interview will be contacted.

All expressions of interest will be kept in confidence.



Minding the Classroom:



Promoting mental wellness for local students

The mental health crisis affecting Canadian youth isn't about to go away any time soon, but front line workers and coordinators of the teams that deal with the issue at the local Catholic school board say they are making significant progress in helping students and staff better cope with the many dilemmas they face on a daily basis.

Stephanie Repsys is a psychotherapist with the Windsor-Essex Catholic District School Board who spends her time working in secondary schools, often in the guidance department, counselling about four or five students a day.

"We're giving them space to talk about what's bothering them, and you often see some relief for these students in just a few sessions," said Repsys, who has been with the board for about three years. *"Many of these students have never had therapy before, and they come in voluntarily to a confidential, non-judgemental atmosphere. It's just the idea that someone is listening and validating that the problems they're experiencing are real."*

Those problems are many and varied.

"We see lots of anxiety, and 'low mood' depressive kinds of symptoms," she said, noting that common sources of those conditions can include academic stress, as well as worries about the state of the world, which were especially pronounced during the pandemic. *"They often have an inability to cope that sometimes affects their ability to attend school. That can also result in difficulty with social relationships, including both peer and family conflict."*

National figures about the state of youth mental health, especially during the pandemic, are telling. According to Statistics Canada, just over 40 per cent of Canadian youth aged 15 to 24 reported having excellent or very good mental health in April of 2020, compared with 62 per cent in 2018 - the largest drop of any age group in the Canadian Perspectives Survey Series.

But Repsys says they are making progress. She and the other psychotherapists she works with typically provide short term counselling for students dealing with less complex issues, but will bridge the gap while they are waiting for community-based services for those dealing with more complex problems beyond their scope, such as trauma, severe grief, and higher-needs disordered eating.

She estimates about 50 per cent of the cases she deals with are successfully resolved, with those more complex cases being referred to outside agencies.

"That's not to suggest that they don't face ongoing concerns," she acknowledged. *"But with therapy, they can focus on what they have control over and develop healthy coping strategies. We help them understand their body's response to stress, and to understand how their thoughts play a part in their anxiety, which empowers them to make changes. They can better deal with the physical feelings that anxiety invokes, challenge their negative perspectives, and develop alternative ways to look at the situations they confront."*

Therapy, however, is just one part of the multidisciplinary, three pronged approach the school board employs to deal with mental health in its schools.

Besides identifying those students who demonstrate warning signs or who have a clinical diagnosis, and ensuring they get the help they need to recover, the board also employs a team of more than 30 Child and Youth Workers (CYWs) whose role is a proactive, preventative one.

By focusing on teaching students coping skills and strategies, their goal is to create school environments that are more more conducive to mental wellness.

The third prong involves programming and professional development - providing teachers with the skills they require to better address issues in their classrooms, and trying to ensure that students are meeting the positive mental health expectations that are embedded in every level of Ontario's curriculum.

Dr. Erin Picard is the board's Chief Psychologist, and she oversees the team of six psychotherapists and five psychologists who conduct assessments and provide counselling to students. She says her team gets about 300 referrals a year, but notes that all of the people in the mental health teams' various "prongs" are working more cohesively.

"We've made a lot of headway, and we've been re-inventing ourselves to meet the needs in new and different ways," she said. *"It's all about embedding support in the schools and building relationships there, getting to know the students and the staff so that they can work towards spotting the signs and intervening early before they worsen."*

"Ideally it's just making everyone more comfortable about reaching out and accessing services, and making educators aware of resources that are available to staff. There's no shortage of work to do, but if we're strategic in how we go about it, we can make it more manageable."

When Senior Program Specialist Diane Tope-Ryan started with the board 15 years ago there were six CYWs. Now she oversees a team of 31, a level of growth which she says speaks to the board's commitment to being proactive about promoting positive mental health in its schools.

CYW typically deal directly with students who may be anxious, either individually or in small groups, who just need some help coping with academic pressures, which might involve developing study plans, or teaching them time management skills.

"Part of that is teaching them about the perils of being too attached to their devices and their social media accounts, and developing healthy habits around that," she said. "A lot of students are talking about how overwhelmed they are since the pandemic."

However, they also do classroom interventions, based on the premise that if one or two students in a group are experiencing difficulty coping there are probably more.

"Not every child is comfortable with opening up and talking with someone about that, so that's why the whole classroom approach is working," Tope-Ryan said.

An essential part of their approach is increasing the visibility of CYWs in schools, which helps them build relationships with students and hopefully, make them feel more comfortable about reaching out for assistance when they need it.

"They need to be part of the school culture," she said. "I want them in the hallways every morning, in the cafeterias, calling the students by name and just getting to know them. And we've had pretty positive feedback from the students. They like the visibility and having that go-to person."

As the board's Student Mental Health Consultant of the last 16 years, Mary-Lou Cortese says the WECDSB has been a pioneer in the field of promoting positive mental health, especially through adopting a "teacher/coach" model.

"There were a lot of early efforts by this board in recognizing the role of mental health and its connection to student achievement, and we took a very proactive approach," says Cortese, who provides professional development for educators to help them identify mental health warning signs, but also coaches them in situations where they may have difficulty supporting students who are struggling with negative mental health behaviours.

Cortese is often called in by principals, teachers or special education consultants who are looking for assistance on how to deal with situations.

She'll work with them individually, but will often go into classrooms that may be experiencing difficulties, offering a more universal approach to group instruction that promotes coping skills and positive mental health environments for everyone.



Providing educators with professional development around how positive mental health is incorporated into everyday curriculum, and how students can meet those curriculum expectations, is also an essential part of Cortese's role.

The most obvious place for that is in the health and physical education curriculum, but mental health is embedded in many other areas of Ontario's curriculum.

"It's infused in everything we do," she said, noting that there's even a strand in the new elementary mathematics curriculum on social and emotional learning.

The expectation in that strand is that students will learn how to collaborate on solving problems, which is really all about promoting self-awareness, awareness of others, collaboration, conflict resolution, perseverance and motivation.

The premise is that rather than fostering the anxiety that can result from not satisfactorily solving problems in isolation and the longer term consequences for mental health that can result, students can collaboratively find a better sense of achievement and accomplishment.

"Children don't always come to school with the skills necessary to solve problems and fully engage in the learning experience, so we need to do some work with that," she said.

Cortese says there's a symbiotic relationship between achievement and mental health. By creating environments that promote positive mental health, students will be in a better place to learn. If they learn, and feel like they're achieving something, there's an increased likelihood that they won't be experiencing negative outcomes associated with poor mental health.

"It's really about giving them a sense of hope, which is one of the most important contributing factors to good mental health," she says. *"A sense of hope is one of the most important gifts that we can give to our students."*

An essential part of providing students with that sense of hope is in helping them find their pathway in life, and Cortese points to the board's innovative approach to developing such programming as academies for various sports and skills trades, co-op placements, Specialist High Skills Major courses and other alternative opportunities as examples of helping them find their way in life.

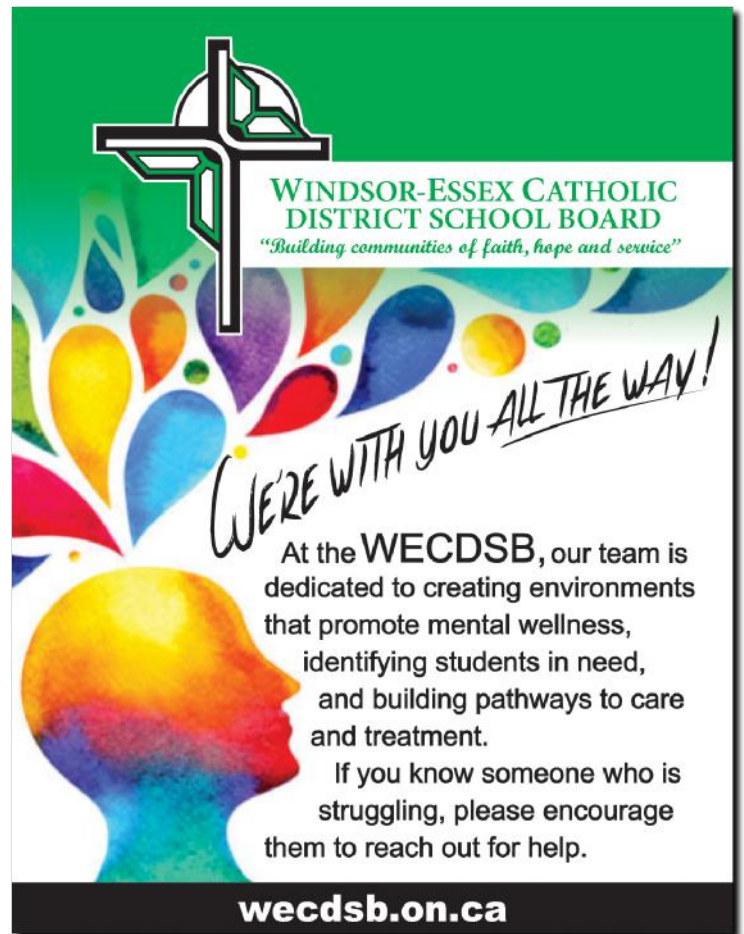
"That does more for mental health than I ever do," she says modestly.

"It's really about finding a place for students where they can fit in and find a sense of belonging, that they're contributing to something meaningful," Cortese said. *"Many students who are at-risk for serious behavioural problems are those who have not found that sense of belonging."*

Not having that sense means that they don't have a sense of achievement, or accomplishment, which can lead to low self-esteem and poor mental health, which can increase the likelihood of risky behaviours like substance abuse that only exacerbate their mental health issues.

From what she sees, the board's overall approach is having a positive impact, Cortese said.

"I feel like we're really making good headway," she said. *"Our work is influenced by science and by evidence, and we've done a good job of keeping up with the research. COVID set everyone back, especially in terms of mental health, but we're coming out of it amazingly well."*



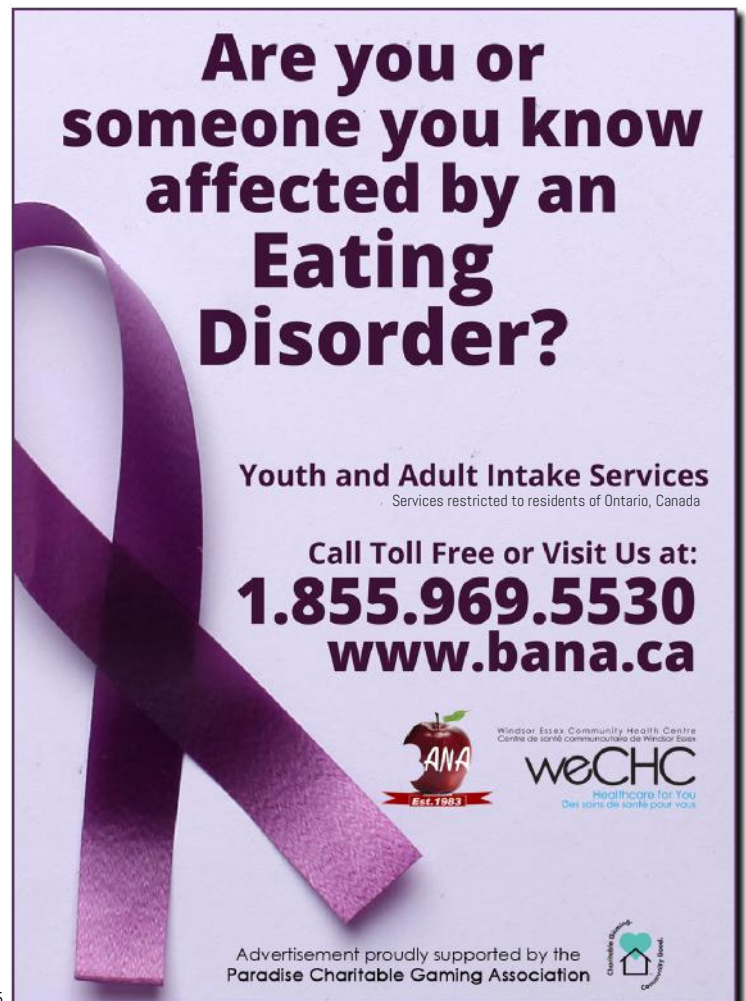
WINDSOR-ESSEX CATHOLIC DISTRICT SCHOOL BOARD
"Building communities of faith, hope and service"

WE'RE WITH YOU ALL THE WAY!

At the WECDSB, our team is dedicated to creating environments that promote mental wellness, identifying students in need, and building pathways to care and treatment.

If you know someone who is struggling, please encourage them to reach out for help.


wecdsb.on.ca




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

Youth and Adult Intake Services
Services restricted to residents of Ontario, Canada

Call Toll Free or Visit Us at:
1.855.969.5530
www.bana.ca

 Windsor-Essex Community Health Centre
Centre de santé communautaire de Windsor-Essex

 weCHC
Healthcare for You
Des soins de santé pour vous

Advertisement proudly supported by the Paradise Charitable Gaming Association

Kitchen Conversations

Mealtime is the perfect family setting to talk about mental health and wellness.
Here's a few questions to get the ball rolling.

Name a coping skill
you can use when
you're feeling scared.

Name 3 things that
trigger you to feel
overwhelmed.

Describe how
your body feels
when you
are angry.

If one of your
friends was feeling
sad, how would you
cheer them up?

Describe a
time you felt
supported and
how it helped.

Describe a
time you had
to be brave.

Describe a time
you felt sad
and how you
handled it.

**Bob
Pedler**
Real Estate Limited
Brokerage
RONDENEAU.CA

PROUD TO WELCOME WITH 'OPEN ARMS'...



REALTOR®
partnered with

RON DENEAU

REALTOR®

A combined **60 YEARS**
of top level Real Estate
experience, award winning
marketing & client relations.

DIRECT CELL:
519-987-4405

*"The names you know.
The voices you trust in
real estate."*





PA DAY CAMPS

DEVELOP YOUR BASKETBALL SKILLS WITH THE WINDSOR EXPRESS

NOV. 18 & FEB. 17

9:00AM – 3:00PM

AGES 5-14 | ALL SKILL LEVELS

ASSUMPTION HIGH SCHOOL GYM

1100 HURON CHURCH RD.

INCLUDES:

-  **PRIZES**
-  **SNACK**
-  **LUNCH**
-  **EXTENDED CARE**

COST: \$70 +FEES

REGISTER ONLINE AT WWW.WINDSOREXPRESS.CA



CELEBRATE 10 YEARS

**2023 SEASON STARTING
JANUARY 2023**

CONTACT US:

519.800.3665

INFO@WINDSOREXPRESS.CA



What Will Be Your Footprint ?



A publication of the Bulimia Anorexia Nervosa Association
1500 Ouellette Ave Suite 100
Windsor Ontario Canada N8X 1K7
P: 519.969.2112 E:info@bana.ca
www.bana.ca