BANA BRYOURSELF

A publication of the Bulimia Anorexia Nervosa Association

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TABLE OF CONTENTS

Discovering EDitable	3
Taking the First Steps to Mental Health	
Ditch Diet Culture and Cultivate a Positive	
Relationship with Exercise	5
SoIf I wanted to contact BANA for Treatment	6
Amplifying Wellbeing at Work and Beyond	8
The Importance of Fall Prevention	10
Beauty Standards and White Supremacy	12
Reflection Tools for the use of Intersectionality in Therapy	16
Social Prescribing: What is it?	18
Feature Recipe: Mango Chicken Wraps	22

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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.

As BANA enters our 40th year of service provision, we ask that you take forth the message to be kind to yourself, generous with others, and stay healthy.

Sincerely, Luciana Rosu-Sieza, Executive Director

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.



On August 2nd, 2022 I started something that I didn't realize would change my life so drastically! I was the 2nd cohort in the WEIOP program, a partnership between BANA, weCHC and WRH, and I can't believe how far I have come. I have struggled with an eating disorder since I was a kid, but this was the first time I was finally seeking help. For those 8 weeks of online programs, meal support, and individual programs, I learned so much about who I was and who I could be without an ED. The staff and support within the WEIOP were amazing, and I can't thank them enough for everything they helped me with!

Once the 8 weeks were done I still had individual sessions. The challenges I felt grew more, but I was prepared. Those 8 weeks of intense programming allowed me to learn what I would need to fight ED's outside of the support I had come to rely on. As I continued through the weeks of individual IOP, I continued to tackle new challenges and I was able to get my life back. To be honest, it was more of finding my life, and who I was rather than getting it back. Now that I am done IOP, I can officially say how much my life has changed.

I continue to work on my recovery because over 10 years of living with an ED is very hard to completely get rid of in 20 weeks. I can say that I feel confident in my ability to use the tools I have learned to make to a full recovery. I am now confident in who I am outside of ED. I am confident to use my voice to fight for myself and others; and I am confident about how much programs like WEIOP can help others. I want to help make sure others can access these programs and learn how to fight EDs, so I have decided to start a fundraiser to support BANA and programs like WEIOP.

The fundraiser is called EDitable because during the program I wanted to encourage myself during meals outside of meal support, and work on editing the voice of ED. I hand stamped positive messages on my cutlery, so that every time I ate I was reminded to keep going. I wanted to share this tool with others as well as design some shirts that would spread the message of rewriting and owning the stories that we all have.

I will be selling the hand stamped cutlery, cups, and shirts in an effort to raise awareness and give everyone the positive messages they deserve to hear.

All of the proceeds from this fundraiser will go to BANA because I am so appreciative of everyone who has helped me, and believe so strongly in the programs and messages BANA has. I have a voice that I have gained through recovery and want to make sure others can get their voice too! Everyone deserves to have that voice, and this program helped to give me my voice and my life back.



BE YOU DO YOU

FORYOU





TAKING THE FIRST STEP TO MENTAL HEALTH



Taking the first step to seeking help can be scary. Am I ready for change? Will people understand? Will it be hard? These are some frequent questions many individuals may ask themselves prior to seeking help. Yes, the first step can be the most difficult because it takes the most courage, guts, and determination; however, once you take that first step it signifies the beginning of change.

If you have decided that the time is now to seek out therapy, but it feels overwhelming because you do not know where to start, consider writing down a couple of things you want your therapist to be knowledgeable in. Are you looking for a therapist for your child? Are you looking for help in your relationship? Are you wanting your therapist to be trained in a certain form of therapy? Are you looking for in-person or virtual sessions? These are some things to consider, which will help narrow your search when looking for a therapist.

Once you have reached out to a therapist and booked an appointment, you may feel relieved or even a bit nervous as the first appointment approaches. If you are feeling nervous, that is okay. It is very normal. You are giving yourself permission to be vulnerable, to ask for help and to talk about thoughts and feelings that you may never have done in this type of environment before. We understand. Our job is to create a safe space where you feel comfortable expressing yourself freely. Everyone's reasons are personal, and there is never a right or wrong reason to seek therapy.

Sometimes we struggle to start something due to the fear of failing at whatever it is we desire to do, so it tends to keep us stuck at the starting line.

As a therapist, one of the most common conversations I have with clients once I get to know them is how nervous they were for the first appointment. The majority said they worried about what they would say. Conversations typically come naturally, with somewhat of a guideline for first sessions so that the therapist can gather valuable information relating to the issue you are struggling with to help you with your treatment plan.

If clients are highly anxious to take that first step, I often encourage them to write down these fears; this allows you to acknowledge these fears rather than just think of them. Then I will have clients physically rip up the paper, throw it away or stomp on it which signifies them taking control. It allows them to see that they are in control of these fears and that is when we take into consideration various treatment methods to meet the clients needs and allow them to stay in control of those fears.

Recognizing that you need help and taking the first step is the most important thing you can do for yourself.

The good news about taking the first step is that the second, third, and so forth come a lot easier. Therefore, I encourage you to take the first step - you never know where it will lead you or the lessons you will learn along the way. It is never too early or too late to seek advice from a professional.



Solutions Counselling is a mental health clinic located in Windsor, Ontario. We offer friendly, compassionate counselling in a comfortable environment that includes in person, virtual or phone sessions. We are open 7 days a week and serve individuals (children, teens, adults, elderly), couples and families.

Our therapists are experienced in helping clients who are struggling with issues such as stress, anxiety, depression, grief, ADHD, life transitions, ASD, among others. To better serve the needs of the community, we offer a sliding fee scale based on client's needs. If you would like more information or to book an appointment with one of our therapists, please call us at 226-280-3016. We look forward to meeting you!

Ditch Diet Culture

and Cultivate a Positive Relationship with Exercise

By Martha Monroe



Parts of the fitness industry, sadly, capitalize on our insecurities and market a version of physical activity that over-focuses on appearance and weight-related outcomes which are actually not supported by research.

Three good reasons to ditch the diet culture fitness messaging:

- 1 It actually doesn't work research does not support the idea that exercise leads to long term weight change. It does support pursuing health and well being without body modification.
- **Tocusing on appearance undermines the wellbeing benefits of working out** turns out the mood-boosting benefits of exercise are low when we're focusing on appearance, (and highest when we're mindfully aware of what we're doing).
- Part of a bigger picture of divesting from diet culture, supporting wellbeing and recovery diet culture is pervasive and costs us in our mental wellbeing, time and energy. Gradually unpacking and divesting from diet culture is beneficial in many ways; a more positive relationship with movement is just one piece of the puzzle.

What can we do instead? While a lot of activity promotion that doesn't focus on weight chooses to focus on health, this may not be particularly motivating as health is a long-term outcome and can be less noticeable in the short term. What we can explore instead is the path of enjoyment and attunement. If long-term health does motivate you, that's wonderful, you can keep that focus and explore adding in some enjoyment and attunement as well.

"Joyful Movement" has been proposed as an alternative to exercise that is objectifying and appearance-oriented. It is part of the Intuitive Eating framework and means choosing exercise that you enjoy for the sake of feeling good.

Three ways to practice joyful movement:

- Get outside time in nature, getting under the sky and getting a literal breath of fresh air has been shown to boost mood and can be combined with movement for the best of both worlds. Walks outdoors are a great place to start noticing how movement makes you feel.
- Get social spending time with others, people we can connect to, share a laugh with, or even just be next to other people can also double the joy factor. Aim to connect with classes and workout buddies who share your philosophy of joyful movement to avoid the comparison trap.
- Be playful and explore new things what types of movement did you love as a kid? Do you remember the joy of climbing a tree, playing catch, or jumping in a lake? Back then, it was play, not a thing called 'exercise.' You were guided by fun and weren't too attached to any kind of 'result.' Invite some of that back into your life by approaching movement with a sense of exploration and fun.



The invitation to practice Joyful Movement may sound great for some, but what about those who are athletes or already highly active? More structured forms of movement, like progressive strength training, or being on a sports team can demand from us something more intense than the joyful suggestions offered above.

If we're ditching diet culture does that have to be the end of sports? It definitely doesn't. Some people do need a full break from structured exercise for a while, but when you feel ready, attunement with exercise offers a path to more structured physical pursuits that can still be free of body-change pressure. Keep in mind that many athletic spaces and athletic coaches may be affected by diet-culture's influence too, so be a wise self-advocate.

Attunement with exercise

- Notice how you feel in your body before, during, and after training, check in with how you're feeling. Many times with hard endeavors we try to ignore our bodies and push ourselves to the limit. Invite in a sense of noticing how you feel in your body. Are you feeling loose or stiff? Energized or sluggish? Focused or unfocused?
- Explore less intensity research has shown that the most consistent positive mood and enjoyment benefits come from low to moderate intensity. We may be conditioned to believe that more is better and hard workouts are more important than the less-intense ones, but you can still progress without always going at the max.
 - Practice greater flexibility in your identity as an exerciser or athlete you are so much more than your athletic performance. Notice how your relationship with fitness relates to the rest of your life and the bigger picture of who you are; notice if the role exercise plays in your life feels balanced, and sustainable. It's normal for your relationship with exercise to go through ebbs and flows in your life, by being flexible we can move through the chapters of life with greater ease.

A positive relationship with exercise is possible and can support a healthy relationship with your body, your mental wellness, and your long-term health. By ditching diet culture, we can refocus on enjoyment and attuning to your body and cultivate a life-long, energy-giving relationship with exercise.



Martha started working in the fitness industry 18 years ago and has been a personal trainer, group fitness instructor, and worked in a physio team setting. She has an MSc in Applied Positive Psychology and Coaching Psychology and has done graduate training in Sports and Exercise Psychology. Her academic research focus is Positive Embodiment and Wellbeing. She is passionate about the wellbeing benefits of a more harmonious relationship with our embodied

So... If I Wanted to Contact BANA for Treatment.

(and other frequently asked questions)

By Rose Verzosa, MSW, RSW

Throughout the first 10 issues of the magazine, many of our readers have asked about accessing treatment services at BANA, so we've put together answers to your most popular questions.

How do I get into BANA treatment? What are the steps?

In order to access 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 (please note: these steps are a guideline, and may not always follow along exactly depending on client needs).

- Complete intake (have your primary care practitioner send a referral to BANA for eligibility screening)
- 2) If eligible, complete a comprehensive, specialized eating disorder assessment (approximately 2-hour session, comprised of an interview, medical screener, and psychometric testing)
- 3) Await results, while the BANA clinical team reviews the assessment and determines a diagnosis (if applicable) and treatment plan
- 4) Have follow up with intake team to learn about diagnosis (if applicable) and treatment plan
- 5) Be placed on waitlist for treatment
- 6) When a client arrives at the top of the waitlist, a clinician will contact the client to schedule a meet-and-greet to overview treatment expectations and schedule sessions
- 7) Begin treatment

How long is the waitlist to get into treatment?

The time of year, the number of available clinicians, and the complexity or readiness of clients already engaged in treatment often impact the length of wait before starting treatment. It is difficult to state a definite timeframe in terms of wait times, as they are constantly shifting.

At the time of writing this, BANA's wait time is between 9-12 months; however, BANA has seen longer and shorter wait lists in the past. When contacting intake, the intake worker can provide some resources and suggestions for support while awaiting services.



How much does treatment cost?

All of BANA's services and programs are free of charge to Ontario residents with a valid OHIP card. BANA is a non-for-profit organization, funded by Ontario Health.

What are some things I should consider before starting treatment?

Beginning eating disorder treatment can be scary. BANA commends any individual who is looking to create change for themselves; it is not easy to seek help, and it takes a great deal of courage!

The BANA clinical team encourages clients to consider the following when beginning eating disorder treatment:

- Expect discomfort and distress
- If change was comfortable, you would have already done it. Change requires you to step outside of your comfort zone, which may cause you to feel uncomfortable and likely face distress. We encourage clients to not let this deter them from continuing on with treatment they are necessary feelings in the change process, and will be inevitable in treatment.
- Practice patience
- You have likely faced the eating problem for quite some time, and it will realistically take time to shift these habits. Patience will be important, as the benefits from changes made in treatment may take time to manifest. We encourage clients to practice skills and tools ongoingly, even if they don't produce results right away.
- Recovery is not a straight line, and set backs are expected
- There is no clear path to recovery; it may involve steps forward and backwards. Set backs are a normal part of treatment, and can be used to gather helpful information for relapse prevention. Expect challenges along the way, and work with your clinical team to overcome them. The more you do, the more familiar you will become with the process of "getting back on track"!
- \bullet The more you commit, the more you'll get out of the process
- Recovery does not occur in your appointments it occurs when you
 apply what is discussed in appointments to your day-to-day life. The
 more you consider and apply skills/tools developed in treatment, the
 more you will increase positive outcomes in your recovery journey.

For more frequently asked questions, such as...

- What will be required of me during treatment?
- What is the role of the dietitian and how frequently do I see them?
- Why do I have to work on my eating if my concern is body image?

Please see https://bana.ca/clinical-services/



Rose Verzosa is the Centralized Clinical Intake Worker for BANA and the Windsor Essex Intensive Outpatient Program

I WANT TO GET EATING DISORDER SUPPORT. NOW WHAT?

*THE FOLLOWING SERVICES ARE AVAILABLE TO RESIDENTS
OF WINDSOR-ESSEX COUNTY.

IF YOU DO NOT LIVE IN WINDSOR-ESSEX COUNTY BUT ARE A
CANADIAN RESIDENT, PLEASE SEE NEDIC.CA



STEP 1

CONTACT CENTRALIZED INTAKE

Get connected to Centralized intake via phone or

internet:

1-855-969-5530

OR

https://bana.ca/intake-services/

TALK TO THE CENTRALIZED INTAKE WORKER



The intake worker will call you within 5 business days. Be ready to share more information about yourself and what you are looking for.

STEP



IF YOU ARE BETWEEN THE AGES OF 12-25

STEP 3

You may be referred to the weCHC Teen Health Eating Disorder Program. The intake worker will book you in for a 30 minute initial intake appointment to get your referral started.

IF YOU ARE 20+ YEARS OLD



You may be referred to BANA outpatient intake services. The intake worker will take you through the steps of having your referral submitted for further screening.

STEP 4



IF YOU ARE CALLING FOR A LOVED ONE, SOMEONE UNDER 12, OR HAVE A QUESTION...

STEP 3

The centralized intake worker answers phone calls Monday to Friday from 8:30am - 4:30pm to answer any questions you may have eating disorder supports in Windsor-Essex.

1-855-969-5530

Amplifying Wellbeing at Work and Beyond

The Growing Importance of Employee Wellness

By: Family Services Windsor Essex



Wellness in the workplace has been gaining the attention of employers in every corner of the country. There is no disputing that the last few years haven't been easy.

The whole world experienced a dramatic event at the exact same time. The pandemic was hard for everyone, and many of us watched on as we found ways to manage it.

It has led to a sharp focus on the world of work like never before.

Employees are realizing their worth in the workplace and they are speaking up about the issues that matter most to them.

That's why employee assistance programs (EAPs) have become increasingly popular across Canada. EAPs offer a wide range of services designed to support employees' physical, emotional, and mental well-being, including counseling, therapy, and crisis intervention.

Whatever the focus may be, the goal is the same - to create a supportive work environment that encourages employees to prioritize their health.

Beth Anne Ternovan, who is a clinical supervisor and workplace consultant at Family Services Windsor-Essex, says workplace wellness is a broad concept, but that its applications can have far-reaching effects.

"Creating a safe workplace culture where everyone is heard, valued, and considered an integral part of the team, allows employee well-being to flourish," said Ternovan. "It enables employee retention to thrive, attracts the best talent, and it goes a long way to reduce stigma across an organization."

According to a study by Oracle and Workplace Intelligence, an HR research and advisory firm, up to 80 per cent of people have been negatively impacted by the pandemic, with many struggling financially, suffering from declining mental health, lacking career motivation, and feeling disconnected from their own lives.

Mental illness is a growing concern in most workplaces, and employers are beginning to recognize the need to provide resources and support employees struggling with these issues.

By offering resources like counseling services or stress management programs, employers can help employees manage their mental health and reduce the harmful effects of stress on job performance.

"When an organization considers offering an EAP, it is a way for the workplace to demonstrate a commitment to employee and family wellness," said Ternovan. "It recognizes the many aspects of an employee's overall well-being beyond an extended benefits package."

One of the most important aspects of having an EAP in place is its pre-emptive function, according to Ternovan.

"Employees or family members can get the help they need early before personal or work-related challenges become so severe or acute that personal relationships or work performance become affected negatively," said Ternonvan.

Although EAPs are super beneficial not only for an employee but the workplace as a whole, organizations aren't required to have a program in place.

However, there are many ways an employee can boost their own mental health without having access to an EAP.

Take care of your body by ensuring you are getting regular exercise, good nutrition, and enough sleep.

Find ways to bring joy into your life - pay attention to what brings you joy whether it is physically, mentally, or spiritually.

Don't forget to breathe. Being in the moment and practicing breathing techniques can help you remain calm in stressful situations.

Stay connected to the ones you love the most by reaching out to your friends and family.



"If a workplace is considering a particular wellness provider, consider experiencing a 'day in the life' of an employee or family member contacting the EAP in order to make a real-time assessment of such a critical experience," said Ternonvan. "Really research potential providers in terms of their service delivery values, the comprehensiveness of the programming offered, their dependability, and responsiveness."

Employers' urgency to commit to the overall well-being of their employees is more important now than ever.

A commitment to wellness in the workplace is a mutually beneficial commitment that provides positive long-term outcomes.

The negative stigma that previously surrounded discussions of mental health and well-being at work is thankfully becoming outdated.

More and more employers are increasingly making tangible changes to ensure employees are bringing their whole selves to work.

The research is overwhelmingly in favour of workplace wellness programs. The new generation of employees is prioritizing their wellness in a new way that employers will need to find unique responses to.

A workplace that creates an environment where employees receive highquality recognition, will see tangible benefits - increased productivity, reduced levels of stress or burnout, and improved workplace loyalty.

Since the 1970s, Family Service agencies have been delivering EAPs as they have long recognized the need – and impact – of supporting employee wellness in the workplace.

For more information on EAPs in Canada visit fseap.ca.



Family Services Windsor-Essex (FSWE) is a non-profit, charitable organization serving Windsor and Essex County. We help people to restore their ability to choose their own place in the world through counselling and individual support services. For organizations of all sizes, we offer Employee Assistance Programs (EAP) and wellness solutions.





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.

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.



The Importance of Fall Prevention

By: The Windsor Essex Community Health Centre

Your risk of falling increases with age and one simple accident can alter your life. Fall prevention is an important topic to consider as you get older. It's the leading cause of injury for older adults across Canada, accounting for over 81% of all injury-related hospitalizations. One in three people, aged 65 years or older fall each year, however falls are NOT a "normal" part of aging.

Poor balance, decreased muscle and bone strength, reduced vision or hearing and unsafe conditions in your home, can increase your risk of falling. The fear of falling can lead you to avoid enjoyable activities.

"Anyone can fall but as we age, the risk of injury increases. The good news is that most falls are preventable and there are programs and resources available to help decrease your risk. We want to help decrease the fear of falling and fear of reporting a fall so we can come up with a prevention plan that works best for each client." Caterina Oades, Occupational Therapist with Windsor Essex Community Health Centre (weCHC) Chronic Disease Management (CDMP) and Fall Prevention Program.

5 TIPS TO MINIMIZE YOUR RISK OF FALLING:

There are many things you can do to minimize your risk of falling. Here are a few tips you can consider to stay safe and lessen your risk of falls, fractures and broken bones:

STAYING PHYSICALLY ACTIVE:

Regular exercise improves your muscles, making you stronger.

A proper weekly exercise plan will help your joints, tendons, and ligaments; as well as, improving your overall health and wellbeing. Weight-bearing activities such as walking and climbing stairs can slow bone loss from Osteoporosis. Focus on exercises that improve balance and strength, like yoga,

HAVE YOUR EYESIGHT AND HEARING TESTED:

The root cause of many falls is poor eyesight and/or hearing loss. It is important to attend your vision and hearing appointments and ensure that you take time to adjust to new prescriptions.

WELLBEING:
Daily habits like getting enough sleep, avoiding or limiting alcohol, monitoring side affects of your current prescriptions, and use walking aids if needed can all benefit your wellbeing and ultimately lessen the risk of falling.

BE ALERT:
Take extra precaution when it comes to fall-proofing your home; keep walkways tidy to ensure that you feel safe getting

Some other advice that may be useful when preventing falls: check the weather before going outside and avoid icy or wet surfaces. Stand up slowly to avoid drops in blood pressure, wear and invest in supportive footwear and keep your hands from to hold on to railings if peopled.

FOCUS ON BONE HEALTH:
Having healthy bones won't prevent a fall, but it will prevent a serious injury. Focus on proper nutrition and ensure to get enough vitamin D and calcium (at any age!) to decrease your risk of sprains or breaks. Other ways to focus on bone health include maintaining a healthy weight for your body, avoiding alcohol or tobacco, and daily exercise.

10

HAVE A PLAN IF YOU DO FALL:

Having a plan in place for a potential fall can ease some anxiety and ensure you are prepared if a fall is to occur. Each fall plan will be unique to the individual, but here are some things to consider:

Take a moment to check-in with your body and stay still. This will give you a chance to asses if you are hurt or need help getting up.

Avoid getting up too guickly and wait on the floor in a more comfortable position if you need medical attention.

Have a plan for getting help by purchasing an emergency call button or ask someone to phone 911.

PREVENT YOUR RISK OF FALLING WITH WECHC:

weCHC has professional programs, workshops, and clinics for fall prevention. Our objective is to help you feel confident and comfortable with your daily activities. Our Falls Prevention Team includes Occupational Therapists, Registered Nurses, Rehabilitation Assistants and a Medical Secretary who will provide a free falls risk assessment to identify potential risks and provide you with a plan to help you decrease your future risk of falling.

If you or a loved one are interested, please call to register at our Chronic Disease Management Program - (519) 997-2823 ext. 341 to

If you are a primary care provider, or community agency in the Windsor- Essex and would like to send a referral for a Falls Clinic please visit our website at https://wechc.org/

Our next Fall Prevention Clinic is April 21 at Solidarity Towers Health Fair from 1:00-4:00.

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



Healthcare for You Des soins de santé pour vous

ARTICLE WRITTEN BY:

Caterina Oades - Occupational Therapist, Cheryl Zaffino - Director of Clinical Practice. Olivia O'Neil - Social Media Assistant





FALLS PREVENTION WORKSHOP

Are you aged 60 years or older? Did you know Falls are not a "normal" part of aging? Would you like to prevent future falls?



Our Falls Prevention team will provide a free, falls risk assessment to identify possible risks and provide you with a plan to help decrease your future risk of falling.

Interested? Check out our website: www.wechc.org or call to register for an upcoming program 519-997-2823 ext. 341



















Beauty Standards and White Supremacy

By Rose Verzosa. MSW, RSW

Disclaimer:

I am a Filipina born and raised in Southern Ontario by two Filipino immigrants. This article is coloured by my own experiences and thoughts about beauty standards and body image issues and does not speak for all racialized and marginalized folks. I will not fully capture the complexities of race, beauty standards and body image. I encourage readers to critically reflect on their thoughts of beauty and the ways in which body image is coloured by their own historical, cultural, and political forces.

In February 1969, American feminist, Carol Hanisch, wrote the essay, *The Personal is Political*. She argued that personal experiences can be traced to one's location within a system of power relationships. These power relationships or hierarchies can be that of any identity, such as gender, class or race.

This suggests that personal problems cannot be solved with personal solutions; rather, Hanisch suggests that these problems can be solved with social change.

The topic of beauty standards and the implications on one's body image is a personal issue that is intrinsically connected with a greater social and historical context.

Therefore, body image concerns are not just personal issues nor cognitive distortions; body image concerns born of dominant western beauty standards are a manifestation of social problems such as racism or white supremacy. In other words, to combat body image concerns born of dominant beauty standards requires more than learning to adjust to these social conditions, but also, to challenge the inherent racist nature of these beauty standards.

This article will briefly explore the implications of race and white supremacy on beauty standards and body image. There are also notable considerations with class, ability, age, gender, etc., that this article will not explore.

Defining Racism and White Supremacy

The American Psychological Association defines racism as "a form of prejudice that assumes that the members of racial categories have distinctive characteristics and these differences result in some racial groups being inferior to others" (https://www.apa.org/topics/racism-bias-discrimination).

Examples of racism include negative emotional reactions and acceptance of negative stereotypes, typically regarding a person who is a minority or who is marginalized. White supremacy can be defined as beliefs and values which assert the natural superiority of lighter-skinned, or "white," human races over other racial groups. A myth about white supremacy is that it is an ideology only upheld by a fringe group of white people.

White supremacy is also the "social, economic, and political systems that collectively enable white people to maintain power over people of other races"





The Marriage of White Supremacy and Dominant Western Beauty Standards

If white supremacy is the set of beliefs and values that value "white" races over others and has enabled white people to maintain power over social, economic and political systems...

What does it have to do with beauty standards? Well, let me ask you...

What's to gain from adhering to dominant beauty standards?

For hundreds of years, the current and dominant Western Beauty standards have favoured white women. If you think of an "All American Beauty", you're likely to picture a tall, blonde, lean, white, cisgender woman with big bright eyes. This is not a random occurrence.

Throughout Western history, racial and religious ideologies have been born to celebrate the superiority of whiteness over other "races". This concept has been written about by sociologist Sabrina Strings in *Fearing the Black Body*. Strings examines the history and legacy of the preference of slimness and aversion to fatness with attention to racial, class, gender and medical factors.

Strings writes that "fatness" was born of the feared imagined "fat black woman" which was created by racial and religious ideologies to punish black women and to discipline white women. In other words, historically, differences in white and black and brown bodies were emphasized to create differences between groups of people which was used to both punish and control.

This does not just apply to body shape, but can also be seen with the celebration of lighter skin. To this day, a large majority of the world's population may avoid the sun or bleach their skin as a way to "earn" beauty, and therefore, power and privilege associated with whiteness.

Growing up in a white community in the early 2000s, I already felt othered on the basis of language, social norms and the food I ate. Appearance and beauty standards were just another factor in making me feel othered.

As a young girl, I internalized the beauty standard of thin eyebrows, pin straight hair, slim noses, light underarms and a body wiped of any trace of hair other than on my head, eyelashes and eyebrows.

I remember feeling insecure and comparing myself to white girls in my school. I have vivid memories of girls asking me why I had body hair, questioning the hygiene of keeping my leg hair, and on one occasion being told that my legs looked like "chewbacca" or that I resembled "Ugly Betty".

It wasn't just my peers or the Western media I consumed that pushed this narrative regarding beauty - but it was also evident in the Filipino media I consumed with my family.

I desired to look like the white girls in my school and believed that if I could look more like them, the more beautiful I would be and the better I would be treated.

As a child and teenager, I spent years mulling over my appearance and daydreaming of waking up one day looking similar to that of a Barbie doll. It wasn't until I was in University, sitting in a Women's and Gender Studies class that it clicked for me - my body image concerns are bigger than myself.



My body image concerns were a symptom of 300+ years of colonization my ancestors experienced by the Spanish Empire and then the United States of America.

These concerns are also a symptom of white supremacy and racism in North America. To dismantle and challenge these beauty standards would not just benefit me or other Filipinx people, but all people who are touched by these social histories.

Intentionally or not, many marginalized folks may feel extra pressure to adhere to beauty standards to earn more respect, power, or recognition in a world that values "whiteness". To address body image concerns born of western beauty standards is to also challenge the inherent racist and white supremist structures and cultures that uphold it.

I constantly check-in with myself when I question and analyze my appearance. It's an ongoing battle, but surrounding myself with and talking to other women of colour has helped me along the journey. When I am struggling, I ask myself:

- How is this helping? What is my goal here?
- Is ____ going to make me feel better in the long term? Has it in the past?
- What external forces are at play that are making me feel this way?
- Is this what my ancestors would've wanted? Is this what I want for other people?

My past personal solutions to this problem were to adhere to beauty standards to gain more "power" or respect, and to seek therapy to cope with and adjust to the stress and anxiety of being othered. As part of my healing journey, I've been incorporating more social solutions to this social problem.

To me, this looks like loudly deconstructing beauty standards, supporting and boosting marginalized folks and advocating for and consuming more diverse images of beauty.

We can go into fine details about how white supremacy influenced standards on body shape, body hair, hair, skin, and facial features. My goal is not to go into the details of this in this article; instead, I encourage you to do your research and seek to learn from the experiences other marginalized folks.

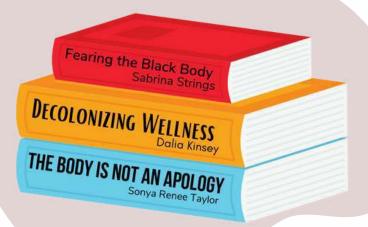
I am not implying that you should immediately call your racialized friends and ask them about the dirty details of their experiences, rather, I encourage you to seek out creators who speak or write of this topic and to listen to the deeper context of the stories that your racialized or marginalized peers may share with you.

This is a personal journey with many social implications. This will be experienced differently and look differently for every person. The following article by my wonderful colleague, Heather Leblanc, reviews the various identities people hold and suggestions for therapists in addressing social issues like these.

Try A Journalling Break

- I. What are some beauty standards that you see that uphold white supremacy? How do these affect you?
- 2. What are some personal solutions you've utilized to cope or adjust to these standards?
- 3. What are some social solutions you've utilized to cope or adjust to these standards?
- 4. What are some things that you can do to help you feel better in the present?
- 5. What are some things you can do to help you feel better in the long term?

Suggested Reading:



For article sources please visit: www.bana.ca/magazineresources



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be yourself here





Reflection Tools for the use of Intersectionality in Therapy

By Heather Leblanc, MSW RSW

Disclaimer:

The following article aims to prompt therapists to consider the application of intersectionality in their therapeutic work. Practical tools are discussed as a starting point for therapists to use for their own personal reflection.

This article does not fully capture the history and use of intersectionality or the ways it can be incorporated into practice. Therapists are encouraged to seek out additional training as ongoing critical reflection on oneself is key. A list of recommended reading is attached for further learning and reflection.

"There is no thing as a single-issue struggle because we do not live single-issue lives." - Audre Lorde (1984)

Coined by Kimberlé Crenshaw, intersectionality refers to a way of understanding the various identities people may hold and the effect on how they experience the world.

The concept of intersectionality describes the ways in which systems of inequality based on gender, race, ethnicity, sexual orientation, gender identity, disability, class and other forms of discrimination "intersect" to create unique dynamics and effects" (Center for Intersectional Justice, n.d.).

It is crucial to understand social identities within a broader framework as they interact on multiple levels and cannot be analyzed in isolation from one another. As therapy does not occur within a vacuum, exempt from society at large, therapists must attempt to broaden their understanding of the power dynamics at play both inside and outside their own practice.

Considerations:

Therapists cannot effectively provide responsible and holistic services if they do not honour their clients' full identities. Incorporating intersectionality into practice allows therapists the opportunity to broaden their understanding of their clients' lived experiences, overall health, and well-being.

Research has shown that applying an intersectional framework allows for an open dialogue between therapist and client, and aids in depathologizing clients and their presenting concerns, altogether fostering a stronger therapeutic alliance.

In order to properly incorporate intersectionality in practice, therapists must not only be aware of their clients' identities and their relationship with systems of oppression, but also their own identities and how they may or may not be complicit in those very same systems.

It is necessary to be aware that a client's identities will interact with those of the therapist as the impact of greater power structures cannot be separated from the relationships which occur on a micro level.

This reality must be confronted in order to provide the very best care possible to clients. Therapists must recognize that the positions and titles they hold, whether that be social worker, psychologist, psychiatrist, and so on, represent a long and complex history of exclusionary and unethical practices that still have present day impacts.

Acknowledging this reality is simply a first step in the indefinite pursuit of critical self-reflection and coalition between parties.

A Starting Place

Wheel of Power and Privilege

The wheel serves as a visual representation of the intersection of social identities in relation to power and privilege.

The wheel can be used as an initial reflection tool. Please see references for various wheels to use and reflect on your identities and how they influence your experiences.

2 Affirm various types of care Increase knowledge of types of care (somatic, acupuncture, spiritual or faith-based practices, etc.).

Create a database of resources for clients looking to build their communities of care.

3 Affirm and honour cultural knowledge

Avoid defining people by a singular identity

Seek out lived experiences to inform your practice Amplify the voices that have been historically excluded in the literature and the dominant narrative.

Reflect on your workplace environment Ask yourself: does diversity show up here?

Research intersectional checklists for guidance and adopt its use in your workplace.

Example reflection questions for therapists: Am I aware of my intersecting identities? Am I aware of how these identities exist in relation to my clients?

How do I uphold and/or benefit from systems of oppression?

Am I aware of my own biases? Where did they come from?

How do I use power in my relationships with my clients? What can I do to reduce the power dynamic between myself and my clients?

How can I affirm my client's intersecting identities? Am I making links between their individual experiences and larger systemic issues?

Is my practice informed by lived experiences and evidence based research?

Am I aware of the history of my profession and how it may maintain oppression or marginalization?

Am I creating opportunities to discuss cultural implications with clients in session?

How can I reduce barriers to care (e.g., fees, transportation, accessibility, etc.)?

What kind of language do I use in practice? E.g., Am I using stigmatizing terms like "non-compliant" or "attention seeking" or gendered terms before discussing the client's identity?

Do I expect minoritized groups of people to educate me? Am I paying them for their labour?

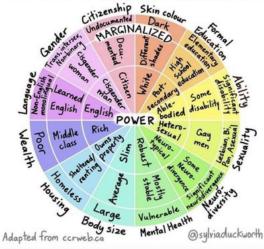
What are my comfort levels when talking about race, gender, disability, etc.?

How do I perpetuate policing when engaging in crisis management?

How can I minimize the use of control in my work? What is the least intrusive intervention?

Am I creating a tailored treatment plan for each client that takes into account their identities and values? Am I ensuring the client is playing an active role in the development of their treatment plan?

MITEEL OF BOMES/BRIMITEGE



Examples of questions to use in practice with clients: How do you want to receive care?

How do you want to receive care in a crisis?

How can we reduce the power dynamic between us/this organization?

How does community play a role in your healing?

How can we increase your access to community care?

How do systems of oppression show up in your life?

How do systems of oppression affect your presenting concerns?

What do you need to feel safe?

Do not assume the space you provide is inherently safe to any client

What are your barriers to care? What would help reduce or eliminate them?

Seek out the points of view from those with different intersecting identities. Below is a list of recommended reading to begin this search:

On Intersectionality: The Essential Writings of Kimberlé Crenshaw by Kimberlé Crenshaw

The Selected Works of Audre Lorde

21 Things You May Not Know About The Indian Act: Helping Canadians Make Reconciliation with Indigenous Peoples a Reality by Bob Joseph

My Grandmothers' Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies by Resmaa Menakem

So You Want to Talk About Race by Ijeoma Oluo

Belly of the Beast: The Politics of Anti-Fatness as Anti-Blackness by Da'Shaun L. Harrison

Fearing the Black Body: The Racial Origins of Fat Phobia by Sabrina Strings



For a list of article resources visit: www.bana.ca/magazineresources

Heather Leblanc (she/her) is a clinical therapist at the Bulimia Anorexia Nervosa

Association (BANA) in Windsor, Ontario

Social Prescribing:

What it is & Windsor's Involvement through Life After Fifty

by Alicia Friel

According to recent research from Queen's University, Social Prescribing can be defined as \dots

"a means for trusted individuals in clinical and community settings to identify that a person has non-medical, health-related social needs and to subsequently connect them to non-clinical supports and services within the community by co-producing a social prescription – a non-medical prescription, to improve health and wellbeing and to strengthen community connections." (2022)

While the notion of healthcare professionals writing a formal prescription for socialization seems like a novel and experimental idea here in North America, in the UK they have been using this mix of holistic and traditional approaches to health for well over a decade.

The goal of Social Prescription is two-fold. It creates a system shift by directing people away from expensive and over-utilized medical services, such as hospital visits, acute care, and community supports for non-clinical issues. It also strives to increase one's wellbeing with focus on the holistic self.

The Older Adult Centres' Association of Ontario (OACAO) partnered with Life After Fifty (LAF), a senior recreation centre, to be the referral destination for Social Prescribing in Windsor, Ontario.

This specific project is geared towards individuals 50 years of age or older who are isolated, lonely, and perhaps suffering from mild anxiety or depression.

We are entering the third year of the project, and so far, Life After Fifty has partnered with over 30 healthcare professionals and received approximately 200 referrals.

We are noticing positive results from implementing Social Prescription and this can be captured through regular self-evaluations from the clients showing a decrease of loneliness/isolation, and an increase in mental and physical wellbeing.

Clients may feel these benefits by acquiring a new skill they are proud of, making new friends, belonging to a peer group, and increasing their physical fitness levels.

There are many healthcare professionals who can make referrals for clients in need. We have referrals from doctors, social workers, therapists, counsellors, pharmacists, health promoters, and nurses.

Once Life After Fifty receives the completed referral form, a designated staff person begins a quick and easy in-take process by calling the referred person and asking a few questions, followed by an in-person tour of the centre.





We will go over our program schedule in detail, get to know them and their interests, and collaborate with them to choose programs that help them reach their goals.

We have a diverse variety of programs included in our membership such as yoga, fitness, lapidary, sewing, euchre, mahjong, educational workshops, coffee socials, and more. We also offer a few different services outside of membership, including dining opportunities (both in-house hot meals and frozen meals for pick-up), foot care service, telephone assurance program (TAP), and our home maintenance referral program.

Once programs are chosen and the socially prescribed member begins participating, there are scheduled check points to ensure they are having a positive experience and that their needs are being met. While LAF is a membership-based organization, financial support may be available through the Links2Wellbeing program.

Life After Fifty's involvement in the Links2Wellbeing Social Prescription project for older adults has really made a positive impact on the community and we hope to see it continue and grow in the future. If you are a healthcare professional or an older adult who would like to be involved with Social Prescription, please reach out to Life After Fifty or the OACAO:

Life After Fifty

519-254-1108 Ext:123 afriel@lifeafterfifty.ca

. . .

OACAO 1-866-835-7693

1-866-835-7693 L2W@oacao.org

For more information on Social Prescribing in Canada please visit the CISP (the Canadian Institute for Social Prescribing) https://www.socialprescribing.ca/





Alicia Friel has been at Life After Fifty for over three years. She has a background in holistic healing & wellness, as well as teaching, providing her with valuable skills for success in her current role as Social Prescription Coordinator.





What is Social Prescribing?

Social prescribing uses the familiar, trusted process of writing a prescription to refer patients to local, non-clinical services that empower them to improve their health and build invaluable connections within their community.

In doing so, social prescribing:



Gives a structured pathway for healthcare providers to address the social determinants of health.



Bridges the gap between clinical and social care



Empowers people to be co-creators in improving their own health and wellbeing

How does social prescribing work?

A healthcare worker sees a need and refers the patient to a link worker



The link worker connects with the individual to understand their needs and interests



The link worker connects the patient to a wide range of community supports and follows up

What kinds of social prescriptions are there?

Together with a link worker, clients are encouraged to co-create social prescriptions that help them to develop their interests, goals and gifts while connecting with their community. Among other things, a social prescription could look like:



Art class. dance lesson



Community garden, hiking group



Good Food box to support food security



Bereavement network or support group



Caregiver or newcomer support

Why is Social Prescribing Needed?

The effect of social isolation on mortality is comparable to that of other risk factors such as smoking, obesity, and physical inactivity, according to research from the WHO.

Addressing the social determinants of health (political, socioeconomic, cultural factors) is crucial to an individual's well-being.

of an individual's health are related to the social determinants of health

of socially disconnected older adults rate themselves as being less healthy overall

The echo pandemic of COVID-19 restrictions means that experiences of social isolation are common. Throughout the pandemic, in Canada:



43% showed symptoms of moderate to high depression



4% say their mental health has worsened

The Impact of Social Prescribing

Participants in the Alliance for Healthier Communities' research pilot Rx: Community – Social Prescribing reported





12% increase in mental health



19% increase in social activities

The impacts of social prescribing go beyond each client's individual health and well-being. Healthcare systems also benefit from social prescriptions. Results from programs in Shropshire and Frome, UK (2017-2019) meant that from social prescribing, the healthcare system saw a:



14% decrease in emergency room visits



40% decrease general physician visits



20.8% reduction in costs to the health care system

Social Prescribing in Ontario

In partnership with the Older Adult Centres' Association of Ontario (OACAO), the Alliance of Healthier Communities supports participating Community Health Centers (CHCs) and other primary care providers in prescribing social programs to older adults at Seniors Active Living Centers.









How Can I Learn More?

Visit allianceon.org/Social-Prescribing to find out more and join a community of practice

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Patience. Perseverance. Progress.



TOP 100 CANADIAN PROFESSIONALS MAGAZINE

As we celebrate our 40th year of service provision, the Staff and Board of the Bulimia Anorexia Nervosa Association (BANA) would like to extend our most heartfelt congratulations to our Executive Director, Luciana Rosu-Sieza on being selected as one of the Top 100 Canadian Professionals.

Visit:

www.thetop100magazine.com/luciana-rosu-sieza

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Recipe Corner

Mango Chicken Wraps

source: https://www.unlockfood.ca/en/Recipes/School-lunches/Mango-Chicken-Wraps.aspx



Ingredients

Mayonnaise 1/4 cup (50 mL)
Mango chutney 1/4 cup (50 mL)
Multigrain tortillas 4 10-inch (25 cm)
Cooked chicken, cut into strips 8 oz (250 g)
Mango, sliced 1
Red onion, cut into thin rings 1/4
Loosely packed mesclun mix 4 cups (1 L)

Directions

In a small bowl, combine mayonnaise and chutney.

Spread 2 tbsp (25 mL) of the mayonnaise mixture on each tortilla. On the bottom third of each tortilla, place one-quarter of each of the chicken strips, mango slices, red onion rings and mesclun mix.

Fold the 2 sides, then fold the bottom of the wrap up over the filling and roll until tight.



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