

BANA BE YOURSELF

A publication of the Bulimia Anorexia Nervosa Association

Winter 2021

February 1-7 is
EDAW

Eating Disorder Awareness Week

A Mental
Health and
Wellness
Magazine

What
Happened
While We
Waited

Special Features:

Interview with
**NDP-MPP
Jill Andrew**

**The Need
for NIED**
(National Initiative
for Eating Disorders)

Also In This Issue:


- Eating Disorder Awareness Week
- What Are Eating Disorders ?
- Eating Disorder Do's and Don'ts
- Power of Permission
- Show Us Your Purple Challenge
- Digital Dieting: Food for Thought
- The Therapy of Art
- My Eating Disorder Recovery
- What to do if you Suspect an ED

....And Much More!

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BANA IS PLEASED TO ANNOUNCE THAT WE WILL BE OPENING UP OUR 2021 SPRING, SUMMER AND FALL ISSUES FOR LIMITED ADVERTISING OPPORTUNITIES.

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BANA Be Yourself magazine is delivered virtually to community members, businesses and organizations throughout the Windsor-Essex Region, and is also available online at www.bana.ca/magazine. Direct email subscriptions are available by request to info@bana.ca.

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Publishers Note:

Hello Readers!

I am honored and delighted to welcome 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, our organization, or just enjoying the beautiful positive messages, we are here for you.

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

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

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

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

Sincerely, Luciana Rosu-Siezia, Executive Director



Happy Eating Disorders Awareness Week!

What is Eating Disorders Awareness Week?

Eating Disorders Awareness Week (EDAW) runs annually **February 1st- 7th**. EDAW has been commemorated across Canada since 1988 by established eating disorder organizations, education and public health institutions, and concerned members of the public. It draws attention to the causes, prevalence and impact of eating disorders. Traditionally, organizations around the country host local events, light notable landmarks in purple, and engage in public education campaigns in an effort to raise awareness of eating disorders.

The year's national theme is **What Happened While We Waited**. This theme was chosen to highlight the lived experiences of those with eating disorders who are in need of quality and accessible mental health treatment in our country. The theme also emphasizes the nuances of this time, including both the positive and negative implications of the pandemic. It is estimated that over 1 million Canadians have an eating disorder, although that number is like under reported, given the secrecy around having an eating disorder, as well as the stigma of mental illness and seeking help. To highlight this year's theme, you will find within BANA's Be Yourself Magazine and on our social media, features on Canadians with lived experience, and their stories on how they navigated accessing treatment and their recovery.

Some good news that occurred in December of 2020 surrounding EDAW within Ontario. Ontario MPP Jill Andrew (Toronto—St. Paul's), the NDP critic for Women's Issues, announced the passage of her bill proclaiming the first week of February Eating Disorders Awareness Week. Learn more about Jill and her passion for eating disorder advocacy on page 6.

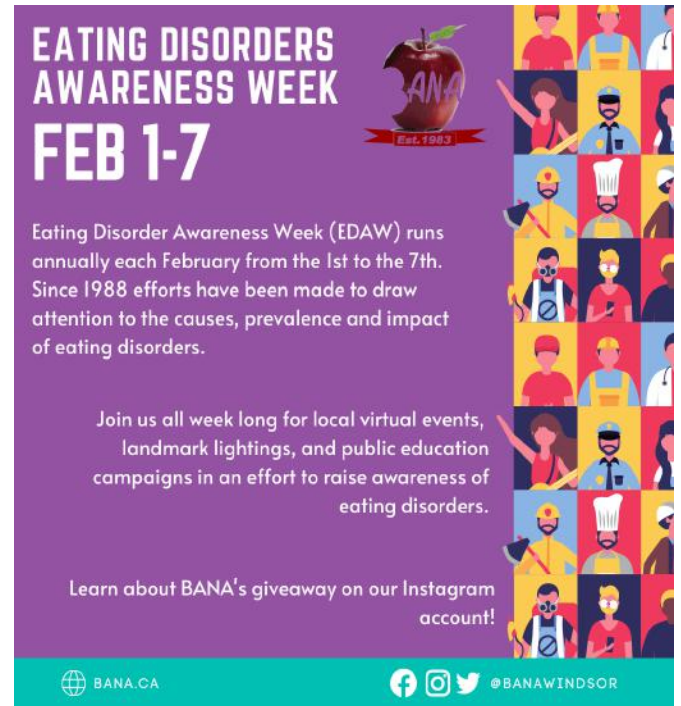
What does BANA have planned for EDAW 2021?

COVID-19 will not stop us from educating the public and raising awareness! Given the changes the pandemic has brought to the way we do outreach, BANA will be hosting our Eating Disorders Awareness Week events virtually this year!

On the week of February 1st-7th, 2021, we will be hosting various virtual educational events you won't want to miss; a virtual yoga class in support of eating disorder awareness; and special EDAW edition of our 'Be Yourself Podcast' with a guest from The National Eating Disorder Information Centre (NEDIC). You can also expect us to be on our social media channels, @banawindsor, with special guests and additional eating disorder awareness information the week of EDAW. Be sure to look out for a special giveaway on our Instagram for those who show their support for this cause! Want to get involved? Check out our schedule below for more details on what we have planned for EDAW 2021!

Want to donate?

We accept donations! To help support local services in Windsor-Essex, visit this link: <https://bana.ca/get-involved-donate/> to give back to BANA. This year, you can also sign up for our virtual yoga class hosted by local studio, Strong Body Yoga & Fitness. You will be able to access this class all week long. Your sign-up fee comes back to BANA. Follow this link to register: ondemand.strongbodystudio.ca. Another way you can donate is to buy a BANA 'Be Kind To Yourself' T-shirt for \$10 to support BANA by emailing us at info@bana.ca.



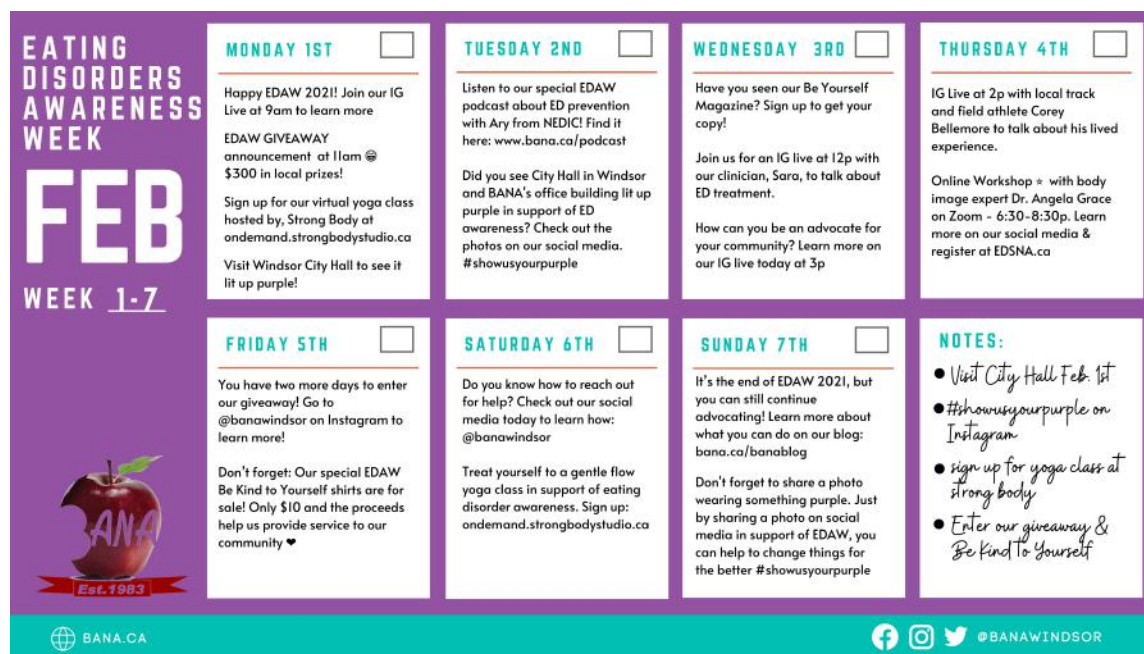
EATING DISORDERS AWARENESS WEEK
FEB 1-7

Eating Disorder Awareness Week (EDAW) runs annually each February from the 1st to the 7th. Since 1988 efforts have been made to draw attention to the causes, prevalence and impact of eating disorders.

Join us all week long for local virtual events, landmark lightings, and public education campaigns in an effort to raise awareness of eating disorders.

Learn about BANA's giveaway on our Instagram account!

BANA.CA @BANAWINDSOR



EATING DISORDERS AWARENESS WEEK
FEB
WEEK 1-7

MONDAY 1ST ☐

Happy EDAW 2021! Join our IG Live at 9am to learn more

EDA W GIVEAWAY announcement at 11am @ \$300 in local prizes!

Sign up for our virtual yoga class hosted by, Strong Body at ondemand.strongbodystudio.ca

Visit Windsor City Hall to see it lit up purple!

TUESDAY 2ND ☐

Listen to our special EDAW podcast about ED prevention with Ary from NEDIC! Find it here: www.bana.ca/podcast

Did you see City Hall in Windsor and BANA's office building lit up purple in support of ED awareness? Check out the photos on our social media. #showusyourpurple

WEDNESDAY 3RD ☐

Have you seen our Be Yourself Magazine? Sign up to get your copy!

Join us for an IG live at 12p with our clinician, Sara, to talk about ED treatment.

How can you be an advocate for your community? Learn more on our IG live today at 3p

THURSDAY 4TH ☐

IG Live at 2p with local track and field athlete Corey Bellemore to talk about his lived experience.

Online Workshop with body image expert Dr. Angela Grace on Zoom - 6:30-8:30p. Learn more on our social media & register at EDSNA.ca

FRIDAY 5TH ☐

You have two more days to enter our giveaway! Go to @banawindsor on Instagram to learn more!

Don't forget: Our special EDAW Be Kind to Yourself shirts are for sale! Only \$10 and the proceeds help us provide service to our community ♥

SATURDAY 6TH ☐

Do you know how to reach out for help? Check out our social media today to learn how: @banawindsor

Treat yourself to a gentle flow yoga class in support of eating disorder awareness. Sign up: ondemand.strongbodystudio.ca

SUNDAY 7TH ☐

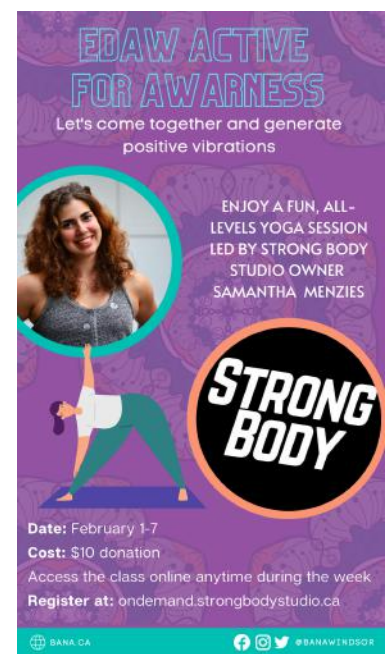
It's the end of EDAW 2021, but you can still continue advocating! Learn more about what you can do on our blog: bana.ca/banablog

Don't forget to share a photo wearing something purple. Just by sharing a photo on social media in support of EDAW, you can help to change things for the better #showusyourpurple

NOTES:

- Visit City Hall Feb. 1st
- #showusyourpurple on Instagram
- sign up for yoga class at strong body
- Enter our giveaway & Be Kind To Yourself

BANA.CA @BANAWINDSOR



EDA W ACTIVE FOR AWARENESS

Let's come together and generate positive vibrations

ENJOY A FUN, ALL-LEVELS YOGA SESSION LED BY STRONG BODY STUDIO OWNER SAMANTHA MENZIES

STRONG BODY

Date: February 1-7
Cost: \$10 donation
Access the class online anytime during the week
Register at: ondemand.strongbodystudio.ca

BANA.CA @BANAWINDSOR

So What are Eating Disorders?

Disclaimer: The following article includes information derived from our clinical team's impressions as specialized professionals working directly with Eating Disorders in Windsor/Essex County.

Eating disorders are complex mental health challenges. They often develop as an unhealthy way to cope with psychological and emotional distress. Eating disorders are typically characterized by ongoing disturbance of eating or eating-related behaviours, as well as distortions in self-evaluation on the basis of weight and shape. This behavior results in altered consumption or absorption of food that significantly impairs a person's physical health, mental and emotional well being and every day functioning.

Some Characteristics of Eating Disorders

- Obsessive calorie counting and Dieting
- Dissatisfaction with your Body Shape
- Body shape avoidance, or excessive checking/fixing
- Binge eating
- Chronic loss of appetite
- Overvaluation of shape and weight
- Excessive exercising
- Strict dietary rules
- Dietary Rules * not related to a medical condition
- Delayed Eating
- Food Avoidance
- Chronic Grazing
- Purging

It is important to remember that only medical professionals (i.e. physicians and nurse practitioners), psychiatrists or psychologists can diagnose an eating disorder.

Engaging in one of these behaviours or occasionally struggling with dieting and body image does not necessarily mean that you meet the diagnostic criteria for an eating disorder. As a society, we are constantly flooded with messages from the prevailing diet culture around food and weight. This has contributed to an increase in disordered eating patterns for many people that aren't necessarily grounds for a diagnosis.

However, it can be very easy to dismiss the early signs of an eating disorder by brushing it off as "just dieting". Even if someone does not necessarily meet the criteria for a diagnosis, disordered eating and compensatory behaviours can still present with serious medical issues.

If you are concerned that you or someone you know may have an eating disorder, do not hesitate to contact your family doctor or make an appointment with BANA through our general intake line. We can meet with you to discuss potential symptoms, and can support you through some of your concerns.

Our general intake number is: 1-855-969-5530

Eating Disorder Diagnoses

There are several different kinds of Eating Disorder diagnoses; each has its own diagnostic criteria, features, risks and prognosis. The following diagnoses are outlined in the 5th edition Diagnostic Statistical Manual:

- Anorexia Nervosa (AN)
- Bulimia Nervosa (BN)
- Binge Eating Disorder (BED)
- Avoidant and Restrictive Food Intake Disorder (AFRID)
- Other Specified Feeding and Eating Disorders (OSFED)

BANA works with all eating disorder diagnoses, most commonly (but not limited to) AN, BN and BED

Who is at Risk?

While eating disorders can affect all kinds of people, there are some factors that can contribute to their development:

- Biological – your genetics and body's biochemistry
- Psychological – personality traits (perfectionism, low self-esteem) and overall mental health
- Social – the cultural and familial norms that a person grows up with in regards to food, eating, dieting and body image; challenges with identity and self image; and a history of trauma

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



Eating Disorder: **Do's** and **Don'ts**

One way to be an eating disorder advocate is to be informed! At BANA, we are often asked how you can support a loved one living with an eating disorder and the very first piece of advice is to educate yourself. Gaining information about eating disorders is power and it will help you be the best advocate for those you love who may have an eating disorder.

See below for our eating disorder do's and don'ts, what to do if you suspect an eating disorder and why it is important to be mindful about your language around food.

DO:
Act quickly

DON'T:
Talk about food
in terms of "good,"
or "bad"

DON'T:
Comment on
weight or
appearance

DON'T:
Spy or invade your
loved one's privacy

DO:
Encourage your
loved one to
get help

DO:
Be available
when the person
needs to talk

DO:
Educate yourself
on eating disorders

DON'T:
Blame yourself
or someone else

DON'T:
Criticize your
own weight
and shape

DO:
Discuss your
concerns with a
professional

DON'T:
Expect
immediate
results

DO:
Be patient



Special Feature:

Interview with Jill Andrew, MPP

Ontario NDP Culture Critic and Women's Issues Critic

Sponsor of Bill 61: Eating Disorder Awareness Week



We sat down with MPP Jill Andrew, Toronto-St. Paul, to talk about a variety of Health and Wellness topics and her two year journey to bring Bill 61 to ascension; proclaiming Feb 1-7 as a provincially recognized "Eating Disorder Awareness Week." In addition to her MPP role, Ms. Andrew is also co-founder of Body Confidence Canada and is an award-winning educator and former columnist, equity and body-image advocate, speaker and writer. She advocates to end size, weight and appearance-based discrimination, harassment and bullying and is one of the driving forces behind #SizeismSUCKS and Body Confidence Awareness Week. We are honoured to have her as the first Interviewee for our magazine and we are thrilled to share excerpts from our conversation.

With all the health issues facing those in our province, how do eating disorders get to the forefront of a MPP's agenda? What future role do you see the government having in supporting mental health issues?

This was my first private-members bill, introduced in the winter of 2018. It was very rewarding to be a new MPP; to be able to stand in the legislature and speak the truth of so many women and girls, men and boys, people of all genders – queer, trans, gender non-conforming people – disabled people, racialized, black, indigenous people who are impacted by eating disorders.

This bill, Bill-61 - a bill to proclaim the first week of February as Eating Disorder Awareness Week – it's a start. It's a proclamation. It's something that is going to hopefully get us talking more about what's needed in this sector so that no one is left misdiagnosed, undiagnosed, underdiagnosed, or falling into this stereotypical place of: "I'm not white; I'm not thin; I'm not heterosexual; I'm not middle-class so therefore I can't possibly have an eating disorder". We know that's not true, but a lot of people still believe that – even service providers still believe that. So this bill is a way to start changing the conversation, one that's really focused on breaking the stigma.

I think from a government standpoint we need to invest consistently in mental health supports

I know as a proud NDP-er, we've always been of the thought that an independent ministry of mental health and addictions is crucial. It is important for us to have access – no matter what community we're in – to mental health supports. It is important for us to have a legislature that recognizes the need for addressing anti-racism. All of these things go hand in hand.

So I think right now is a moment where the government and all of us – whether official opposition or independent party member, or not – we have to be looking at how we can make this world better for those who are made most marginalized by systems of inequity. And when you have an eating disorder and you're unable to get care in your own province, or you have to wait 6 months to a year, that's not equity. That's not having access. It ruins lives when it is unattended to, when it's misdiagnosed, when there's no supports.

I'm very excited; very excited that this happened. I'm excited that it received unanimous support across the legislature – which is not something that happens very often in these times. But I think that also speaks to the fact that everyone understood this was not a partisan issue, this was an issue about how do we raise awareness; how do we create a sound, sturdy, and sustainable foundation to help save lives? And that's really what it comes down to.

You've spoken about "the pervasive messaging towards women and girls in our society and popular culture". Where do you think the responsibility lies in addressing these issues?

I strongly believe that the responsibility lies with all of us. We have to look at our visual culture, and demand accountability from those who legislate certain images and messaging to be allowed. We have to look at our curriculum in our schools. We have to ask questions around "are we talking enough about mental health? Are we making that intersectional connection between body image and eating practices?"

This also comes down to our homes and the messaging we share with each other and our little ones. I am not a parent, but I strongly believe parenting is THE hardest job – the most rewarding, but certainly the most challenging role anyone can play. And I certainly can't speak to how hard it is to navigate what's right and what's wrong to say as a parent. It's easy for us to say "it's what's inside that counts", or "all shapes, sizes, weights, and colours matter". Often our words don't match our actions, so then what are our kids are seeing? We need to have a safe environment where kids can talk about lookism, colourism and shadeism; about fat-hatred and fat-phobia; about being made fun of because of facial differences, disabilities and diversity.

Another big piece that I've learned so much about over this time is the role of the essential caregiver. We've seen it with COVID-19, we've seen it with loved ones in long term care who have disproportionately been impacted and have died across our province. But the unheralded; the unsung hero – the essential caregiver! The mom, the dad, the partner, the best friend who has had to take time off work, unpaid for the most part, to support that person who is struggling with an eating disorder, possibly at home without access to care.

We can talk about the way in which exercise and dieting is pushed onto our society, and pushed onto those who tend to encompass a "fat" body. The emphasis – sometimes the inappropriate emphasis – we place on regimented exercise, as opposed to movement for wellness. What we know from "health at every size" research is that our bodies have their own clock, and many of us can be healthy and larger. Some of us can be healthy and thinner.

I am not an MD, so I never try to say this is what "the medical way is" because I recognize that is not my lane. But what I can say is this notion that "dieting is necessary", it's just not factual. There's a reason why the word "die" is in dieting, in my opinion.



Photo taken Dec 6, 2020: Bill 61 assension

How do we educate or influence those behind the messaging to increase their social responsibility?

Statistics have shown that there's over a million folks who are battling eating disorders in Canada. We need timely, relevant research that helps us with educating the public, building awareness, prevention and intervention. As I've dug in deeper and spoke with more stakeholders, it was clear! People are waiting too long for help, and many have died while on wait lists for service. The crisis, I would call it, includes not having enough beds in Ontario to take care of folks who need support

There is simply not enough eating disorder education happening in medical schools. I was shocked, blown away to learn how few hours are dedicated to training our future leaders, our front-line workers, our healthcare workers, our doctors, our psychiatrists, our psychotherapists on eating problems and body image issues. This is something we have to change.

We need a whole systems overhaul to address this. I know BANA, along with many organizations, have been speaking up and advocating for a provincial and national eating disorder strategy. These are things we need, and we need them now so we can get a better handle on how to manage this; how to support people who are surviving with this – in schools, in the workplace, in our communities, in our social services.

Our community organizations need more funding; many of them are fundraising and relying on philanthropy. I am all for philanthropy, but it cannot replace good government policy and funding for organizations that are doing extraordinary work with few staff, and are offering programs that are always full before they are even announced. We can't have people waiting; as the saying goes: "eating disorders can't afford to wait".

But...these things can only be done if we have legislation so people can get the care they need through OHIP, in their home communities instead of having to travel to the U.S or elsewhere to get those supports.

With Eating Disorder Awareness Week fast approaching, what would you want the people of Ontario to know about eating disorders?

There is still so much stigma around talking about eating disorders and asking for help. We need to really ensure that people understand that this is a life-and-death conversation that we are trying to have here. We know eating disorders are a significant mental health illness, and many people – if they don't get support - will find their demise. We don't want that to happen. We also know, that with help, with support, with interventions, people can "heal". They can come out on the other side.

EDAW is a week for our educators to be able to reflect on the curriculum. What are the body types of the people in the books we are reading, or in the movies we're showing? What internal messages or what hidden curriculum is there? Much like [Body Confidence Awareness Week](#) was a very important accomplishment for the body-positivity community, the eating disorder community, and all communities across the province, EDAW reminds us to look at the bigger picture.

The reality is we know that there is size-discrimination in the workplace. Research documents show on average, "plus-sized" individuals tend to make less money doing the same job than their thin counterparts. We know that there are certain morality judgments that often stem from fat stigma, which can impact the person sitting across the table from you making the hiring decision.

Sizeismsucks – a project that's still in the back pocket - is still something we are hoping to one day achieve: to have size, weight and appearance added as protective grounds against discrimination to our Ontario Human Rights Code, and maybe even one day our national codes.

We all make mistakes. We are all works in progress. But that's the one thing I want people to remember: eating disorders do not discriminate. I want people to remember that when others say they need help, believe them. I really want us to be mindful of the way we talk about our bodies and other peoples' bodies.

In my humble opinion, we shouldn't be talking about other people's bodies at all. We shouldn't be adding to a culture that over-polices, hyper-visualizes, sexualizes, and objectifies bodies. Because that is the root of eating disorders and body image issues, as well as the stigma that can literally mean life or death for near half-a-million of us here in Ontario.

Eating disorders disproportionately affect women and girls, but they also impact boys, men, and non-binary people. What could and should we be doing to break down the stigma for these populations?

First and foremost, we cannot disaggregate eating disorders from all the other social issues that impact us in our lives. Anti-black, anti-indigenous, anti-Semitism, islamophobia, transphobia, homophobia, sexism, ageism – all of these can operate at once. If you are the person being impacted, sometimes the one place you may feel a sense of "control" is your body.

All of that hate and inequity we're experiencing can sometimes be misplaced and transferred back to ourselves through self-harm. For some with eating disorders, it's their way of speaking out, of being seen, of being heard; of feeling and having some control in a world they feel is completely uncontrollable.

I think it was NEDIC who said this so poignantly – “eating disorders do not discriminate”. We have to remember that once we start to put people into boxes, we are taking away their chances at accessing resources, of feeling empowered to advocate for themselves, and receiving culturally-relevant supports. Remember, certain communities have good reason to be cautious and to be weary.

In today's society, we shouldn't be trying to take things away from people. We should be trying to uplift people, to amplify their voices and to acknowledge them.

If you could give a 10-year-old Jill Andrew one piece of advice, what would it be?

The issue of eating disorders, body image issues and body dissatisfaction impacted me personally. It is quite the story of a 180, where I was a young 20-something and I stumbled into Sheena's place - a key stakeholder here in Toronto in helping people who are surviving with eating disorders and eating problems.

But, a 10-year-old Jill Andrew was really not sure of what my relationship to my body was at that time, other than knowing I was a sick kid and a kid who often required intervention. I would have to tip my hat off to my mum, who always instilled in me that I was good enough, beautiful, smart, and strong - even though I've had weak times, or times that I have stumbled. She also instilled that it was okay to get support, and that's why I share this. In certain communities, the notion of going to a psychologist, or telling your business outside 4-walls, is still something that is very taboo. It is so important that we recognize the benefit in getting those additional supports when we need them.

I would tell that 10-year old that “the world awaits. It is tough right now, I know you are scared, but you will get through this. And one day you are going to have an opportunity to do something really, really amazing”. And being Jillian myself, I would say that little 10-year-old would be really curious, and would beg big Jill to tell her exactly what she was talking about. But I would say “nope, I'm not telling you. You're going to have to wait and see. Just keep strong, keep trying hard, and keep asking for help when you need it and you will see what the future holds for you”.

Now that EDAW has been proclaimed, what do you hope will be the impact on the public and in government

We have to do better. With Bill-61, I am really looking forward to EDAW 2021 - to celebrate and acknowledge this week in Ontario. I am hopeful to have the minister of mental health and addictions connect with some of our key players across the province, especially survivors from diverse backgrounds. It is one thing to be an MPP – you know, the game of politics has its own performance and sometimes it's hard not to see partisanship. But when you are sitting at a table with people who are not elected officials, you have to listen. You should listen.

I hope the government will do what's best, to amplify Bill-61, and to assemble all the pieces so that there is a whole entity of supports for those living with eating disorders in Ontario.

A MPP Andrew can be contacted at: www.jillandrewmpp.ca or via

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Legislative
Assembly
of Ontario



Assemblée
législative
de l'Ontario

1ST SESSION, 42ND LEGISLATURE, ONTARIO
69 ELIZABETH II, 2020

Bill 61

(Chapter 32 of the Statutes of Ontario, 2020)
An Act to proclaim Eating Disorders Awareness Week
Ms J. Andrew

1st Reading November 21, 2018
2nd Reading December 6, 2018
3rd Reading December 3, 2020
Royal Assent December 8, 2020

Bill 61 2020 An Act to proclaim Eating Disorders Awareness Week

Preamble

Understanding how the development of eating disorders, also referred to as eating problems, and access to treatment and prevention resources are influenced by structural conditions and the social determinants of health is crucial to promoting greater awareness of and providing effective education on eating disorders.

The term eating disorders suggests that disordered eating is solely a mental health and individualized phenomena. Concepts such as “eating problems,” as coined by sociologist Dr. Becky W. Thompson, allows for a more nuanced understanding of eating disorders or problems as responses to sociocultural phenomena.

For example, factors such as visual culture, food and income security, access to housing, access to healthcare, acculturation and mental health supports influence the development, trajectory and treatment of eating disorders. Education on body-related issues such as size and appearance-based discrimination and harassment, body-shaming and bullying also promotes greater awareness of how these factors contribute to the development of eating disorders.

Common assumptions of who gets eating disorders leave out many complexities. Anyone can develop an eating disorder, and eating disorders impact different people in different ways. Sharing stories of how populations such as Indigenous, Black and racialized women and girls, immigrants, queer people, transgender people, people with disabilities, fat people, people with chronic illness, men and boys experience eating disorders is crucial to promoting greater awareness of diverse experiences of eating disorders.

Proclaiming Eating Disorders Awareness Week in Ontario makes a powerful statement about the value of building awareness around healthy relationships with our bodies and the need for culturally relevant and responsive resources for treatments, education and prevention of eating disorders. Therefore, Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

Eating Disorders Awareness Week

1 The week beginning February 1 in each year is proclaimed as Eating Disorders Awareness Week.

Commencement

2 This Act comes into force on the day it receives Royal Assent.

Short title

3 The short title of this Act is the Eating Disorders Awareness Week Act, 2020.

EXPLANATORY NOTE

This Explanatory Note was written as a reader's aid to Bill 61 and does not form part of the law. Bill 61 has been enacted as Chapter 32 of the Statutes of Ontario, 2020. The Bill proclaims the week beginning February 1 in each year as Eating Disorders Awareness Week.

EATING DISORDERS AWARENESS WEEK
BREAK THE STIGMA

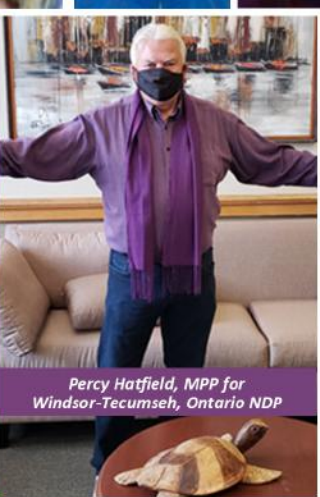


*Thank you to our
community for supporting
Eating Disorders
Awareness Week*
#SHOWUSYOURPURPLE



The Young Women in Leadership program participants wanted to participate in this activity to demonstrate that You are not alone! Creating awareness is part of the solution.

**#ShowUsYourPurplefor
Eating Disorders Awareness Week**



Digital Dieting: Food for Thought

by Sara Dalrymple, RSW MSW BA Psych.

Technology, the media, the internet, podcasts, blogs, online journals, webpage after webpage – access to worlds of information at the click of a button. These days, it takes seconds to stumble across “new research” or “ground breaking” information that “will change your life”!

No longer do we spend countless hours at our local library browsing through catalogues and books, trying to find the information we are looking for. Instead, we log on and are flooded with thousands of articles that make a wide variety of claims about what you “should be doing” for your wellness. The more information that is available, the more we have to sort through in an attempt to find the truth.

We’ve become so inundated with piles of contradictory information, many of us gave up on doing our own investigating. We read an article and BAM, we revere it as fact. Remember years ago when scientists couldn’t agree on how much water you should drink in a day? Or even now, in this COVID-19 reality, we cannot seem to pin-point which arguments and influencers are accurate.

So why do so many believe they know “the secret” to weight loss, or healthy eating and exercise? How many fad diets will we cycle through before we realize the information they’re selling us isn’t all they’re marketing it to be? But the true million-dollar question is: how do we find the good stuff?

Media Literacy with Dietary Information

Arguably, dietary recommendations are one of the densest bodies of online information; for every argument regarding what you should and should not eat, you can find a counterargument (or a hundred counterarguments). There is so much conflicting and inconsistent information on this topic that sometimes even professionals in the field can get confused.

It is a well-established fact that the diet industry is a multi-billion-dollar industry, and they didn’t earn this trophy by selling the public something that lasts. They rely on our insecurities to make this level of profit; they want to ensure we’re not feeling great about ourselves in order to secure us as repeat-customers. Being happy with what we have is not lucrative.

The diet industry tends to diversify, giving us a vast array of diets to choose from and constantly creating the next best thing to keep us intrigued. We buy books, we follow influencers, we watch programs, we invest in food brands and products that are associated with a certain diet. All of the information we absorb from the diet world leads to dollars in the industry’s pocket. The problem is when someone is profiting and/or private interest parties are involved, information tends to be biased, or in some cases down-right fabricated.

Critical thinking should be paramount when evaluating dietary advice; we need to grow accustomed to questioning the information we’ve read before we allow it to influence the way we eat, exercise or feel about ourselves. This is how we become media literate.



Photo Credit: marcus aurelius via pixels

“How many fad diets will we cycle through before we realize the information they’re selling us isn’t all they’re marketing it to be?”



Photo Credit: Andrea Pica via pixels

Finding “The Good Stuff”: Questioning Online Information

When investigating online information further, here are some questions you can ask yourself about how you conduct your search; who contributed to the information; and how the information was developed. Keep in mind: if it sounds “too good to be true”, it often is.

The Search

- Is the wording you used “leading” or likely to filter information in a skewed way? Or are you using neutral language?
- Could your search be distorted by your device’s cache/cookies/advertisements?
- What webpage are you searching on, and is it likely to pull credible sources (google scholar and academic journals, vs. BuzzFeed and Wikipedia)?

Our experience: upon asking a client what words they entered into the search bar when defending a diet that helps improve mood, the client used “does ____ diet help depression?” This likely “filtered in” information that defended this argument, and “filtered out” information that argued otherwise. Instead, the client could have entered “impacts of the ____ diet on mood”.

Author, Publishing Source:

- Is this a reputable publisher/publication?
- Do they publish a lot on this topic, have previous knowledge or experience, or disproportionately target certain messaging? Is it their niche?
- Are they biased? Do they have affiliations or private-interests with those involved in their messages, and who is profiting?
- Are they skilled or trained to interpret the information or data they are writing about?
- Is this a private or public source? Where does their money come from?
- Do messages go through a review and editing process? Was it reviewed by an ethics board? If the answer is yes, who was the editor and what is their credibility?
- Is it an opinion piece, or is it evidence-based?
- Are there references listed? If so, are those quality references (you can do another review of these references)?
- What is the publishing date, and is it outdated? If there are research-findings referenced, when were those findings published?
- Who is held responsible for the information, or if misinformation is identified? Who is held accountable for any issues caused by the information?

Our experience: when a client brought in a seemingly-convincing article on replacing carbs with protein, it was found that the information was published on a body-building website. Body building is a specific niche, and eating recommendations from these sources typically target the body-building population, rather than general public.

Referenced Professionals:

- Do the professionals referenced in the message have something to gain or profit?
- Are referenced-professionals biased due to affiliations or private-interests?
- Are they qualified? What is their educational and occupational backgrounds?
- Is their profession regulated by a governing body/college? Is their title protected? Many jobs claim to have expertise on the information, but do not require significant training, nor are they regulated by a body that was designed to protect the public (common examples we see in our work: nutritionists and personal trainers)
- Is this person held accountable for their statements, claims or recommendations?
- Is this their niche topic?

Our experience: a client once brought us an article from a well-known and historically reputable publication. Within the article, a physician was quoted. With a quick Google Search of this physician's name, we found they were notoriously partnered with the diet they were promoting.

The Information/Evidence:

- Was the information or data developed/collected through public or private means? Private means tend to have more sway over their experiments/research and findings, and may have interest-parties funding the research. Public means are typically funded through public money (example: tax dollars) and findings are likely submitted to an ethics board for review.
- Is the information inconsistent with other known information on this topic?
- Does the information only argue one side to the story? Does it exclude discussion of exceptions or research limitations?
- Were there research participants involved? Was the sample representative of everyone in the general public, or only certain populations? Was the sample size large or small?
- Were measures or treatments used in the research, and were these tools/techniques empirically supported?
- Has there been any further research conducted to replicate findings?

Our experience: there are thousands of examples of "too-good-to-be-true" findings from research that were never replicated again – meaning, others tried to yield the same results by doing the same things, but did not have success. This may suggest that there were overlooked factors that could have been contributing to results; the findings were fabricated; the sample was not representative; etcetera...

Overview

The mere volume of questions listed above should demonstrate just how much there is to consider when exploring information in the media. It is always important – but perhaps now more than ever – to further investigate what you are reading or seeing. As we continue to have our media platforms swarmed with dietary information that claims just about every stance there is to claim, practice media literacy, do your due-diligence and try not read and believe.

For a list of article sources please 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

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CITY OF WINDSOR LANDMARK LIGHT UP




City Hall in Windsor, Ontario will be lit up in our favourite colour, purple, to celebrate the first official day of Eating Disorders Awareness Week 2021.

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Episode #15: EDAW 2021: Raising Awareness and Encouraging Advocacy with Ary from NEDIC

Hosted By:
Stephani Fenkanyyn
BANA Health Educator

Featured Guest:
Ary Maharaj, M.Ed. RP (Qualifying)
Outreach & Education Coordinator
National Eating Disorder Information Centre

















The Need for NIED



Awareness. Understanding. Action.

Wendy Preskow's daughter Amy developed an Eating Disorder at a young age. Wendy and her husband quickly discovered that not only was it extremely difficult to find physicians and/or therapists who understood and could treat the mental illness, but a scarcity of programs in Canada, long wait lists for admission into residential and out-patient programs, lack of government funding and an overall stigmatization associated with mental illness all impeded Amy's ability to receive the immediate care she desperately needed.

When confronted with this tremendous void within the Canadian healthcare system for families and loved ones affected by Eating Disorders, Wendy decided to take matters into her own hands. In 2012, she created the National Initiative for Eating Disorders (NIED) – a not for profit organization that assists those dealing with, and impacted by, the effects of Eating Disorders – by providing access to educational, informational and other recovery-oriented resources related to the prevention and treatment of Eating Disorders and related mental illnesses in Canada.

NIED's vision is to ensure that all Canadians affected by Eating Disorders and related mental illnesses have equitable access to high quality, publicly funded health care and social services to support their recovery – no matter where they live in Canada. NIED's work was just beginning.

In 2016, the first Canadian conference on Eating Disorders, organized by NIED and held in Winnipeg, marked a turning point for Eating Disorders in Canada. It inspired an alliance known as CEDA – between NIED, the Eating Disorders Association of Canada-Association des Troubles Alimentaires du Canada (EDAC-ATAC); the Eating Disorders Foundation of Canada (EDFC); and the National Eating Disorder Information Centre (NEDIC).

In late 2018, NIED adopted a new, multi-year Pan-Canadian Strategic Plan 2019-2021 with the help of volunteers and new partnership opportunities. The strategic plan focuses on improving outcomes for Eating Disorders in Canada by addressing the gaps in current services, delays in treatment, lack of pan-Canadian data, and insufficient training for clinicians and other healthcare professionals.

On November 7th, 2019, NIED launched its Canadian Eating Disorders Strategy – a 10-year blueprint for change – derived from 4 years of consultation with stakeholders across Canada including the general public, health care professionals, caregivers and people with lived experience. It represents NIED's commitment to caregivers to identify concrete actions, to systematically and sustainably improve health and social outcomes for people directly affected by Eating Disorders in Canada across six pillars of action: Prevention, Public Education and Awareness, Treatment, Caregiver Support, Training and Research.

A critical component of the Canadian Eating Disorders Strategy is the development of evidence-based educational resources to support recovery from Eating Disorders. NIED's educational programming has evolved from extensive feedback received from 70 educational symposia and over 10,000 conversations with people looking for help, support and guidance to address Eating Disorders.

NIED also conducted surveys of caregivers exploring what challenges and successes they experienced in caring for themselves and for someone affected by an Eating Disorder. Insights from these surveys prompted NIED to establish a Caregivers and People with Lived Experience Advisory Committee.

In 2019, building on its success of developing and delivering educational symposia, NIED made a strategic investment of \$15,000 to co-develop Canada's first e-learning platform, aimed at addressing existing gaps in the Eating Disorders field. This project, a collaboration including Hamilton Ontario-based Body Brave, Eating Disorders Nova Scotia and Bridgepoint Centre for Eating Disorders in Saskatchewan, identified existing evidence-based research related to low-intensity, rapid early treatment of Eating Disorders, and adapted such research into an online education resource aimed at caregivers, primary care providers and individuals recovering from Eating Disorders, to be launched early 2021.



BANA's staff donning knitted items to give to their clients from NIED's Hand Knit Hope Giving Back initiative

NIED now provides access to educational, informational and other recovery-oriented resources related to the prevention and treatment of Eating Disorders and related mental illnesses in Canada, and continues to develop new educational programs and resources aimed at improving confidence, communications skills, collaboration abilities and resourcefulness. Referred to as NIEDucation, these programs aim to help improve the quality of engagement between shared-care practitioners, service users and their caregivers and family members. NIED is continually engaging with people with lived experience, and professionals, to design high quality educational resources aimed at providing support for the various needs arising throughout a person's recovery journey.

In late 2021, NIED will once again engage stakeholders to create the Quality Eating Disorders Care and Support Standards for Canada by preparing a set of guidelines meant to standardize the quality of care for people with Eating Disorders across the country.

Michelle D'Amico, Executive Director, NIED stated "Organizations like BANA, Body Brave, NEDIC, The Looking Glass Foundation, Bridgepoint Center for Eating Disorders, Eating Disorders Nova Scotia and many others across Canada, hard at work in the Eating Disorders trenches, are integral to the success of helping those challenged by Eating Disorders and ensuring they receive the care and understanding they rightly deserve".

Needless to say, the Canadian Eating Disorders landscape continues to evolve. There is still much to accomplish to improve the understanding of and treatment for Eating Disorders in Canada. For more information about NIED visit www.nied.ca.

Power of Permission

by Nicole Boulanger, RD.

For those of you who like to kick off the New Year with a resolution, here are some things to keep in mind. Many people see this as a time to change their body and 'lose weight'. Sadly, these weight loss resolutions typically wind up in feelings of failure when the fad diet does not work.

Instead, how about putting your precious time and energy into improving yourself in ways that you can control, and actually benefit your mental and physical health.



Photo Credit: andrea-piacquadio via Pexels

Balsamic Baked Chicken Breast With Mozzarella Cheese



Ingredients

- 4 skinless chicken breasts (90z | 250g each breast)
- 2 tablespoons olive oil
- 1/2 teaspoon dried oregano
- 1/2 teaspoon dried basil
- 1 teaspoon salt
- cracked black pepper, to taste
- 1 1/2 tablespoons minced garlic, (5-6 cloves garlic)
- 2 cups grape or cherry tomatoes, halved
- 1/4 red onion, peeled and sliced
- 1/4 cup balsamic vinegar
- 1 tablespoon packed brown sugar
- 3/4 cup fresh shredded mozzarella cheese
- 2 tablespoons fresh chopped parsley/basil (garnish)

Instructions

1. Preheat oven to 220°C | 430°F.
2. Place chicken breasts in a baking dish and drizzle with olive oil. Season with oregano, basil, salt, pepper and 1 tablespoon of minced garlic. Rub seasoning all over each breast. Arrange the tomatoes and red onion around the chicken in the dish.
3. Whisk together the balsamic vinegar, sugar and remaining garlic in a jug to combine. Pour over the chicken breasts, flip each breast in the sauce to evenly coat.

4. Bake in preheated oven for 20-25 minutes (depending on the thickness of your chicken breasts), or until no longer pink in the middle. Sprinkle with cheese and broil (or grill) for 4-5 minutes, or until cheese is melted and golden.
5. Garnish with parsley, and serve with rice or pasta drizzled with the pan juices

Try with orzo and your favourite green (asparagus, swiss chard, brussel sprouts).

Tip: You can toss in asparagus to the dish in the last 10min of baking.

RD Note: Use salt in moderation. Sprinkle to half the amount suggested or to your taste.

For sources please visit: <https://bana.ca/magazineresources>



Nicole Boulanger is the Registered Dietitian at BANA

Minding your Food Language

By: Marisa Casey, BA BEd MCL Sc,

Language around food is something most people do not think twice about. It is something so ingrained in our culture and everyday talk you probably don't even realize you're doing it. However, the truth is, what we say and do around food may be influencing ourselves and others around us. What do we mean by language around food?

Ask yourself, have I ever said or heard the following phrases:

"Sugar is so bad for you."
"Gluten is evil, don't touch that stuff."
"Saturated fats will kill you."
"Eating clean is so good for you."
"Oh, I can't eat dessert; it goes straight to my thighs?"
"We only get the bad stuff on weekends."
"Stop eating so much junk!"
Sound familiar?

On the surface, this type of thinking and food labeling may not seem like a big deal. For many people, this way of thinking might seem like a helpful way to narrow down overwhelming food decisions during the day. It requires less thinking on our part and more minimal decision making, but what happens when we start to attach an intrinsic value to food? When a "bad" food is eaten, there is usually a tremendous amount of negativity that follows, usually in the form of guilt, shame, or embarrassment. This may lead to more detrimental eating habits that ultimately sabotage our relationship with food and our bodies. This type of talk also impacts how young people in our lives think and feel about food and their own bodies.

The following scenario illustrates this point so well:

A teacher notices a 5-year-old student coming to school everyday with a sandwich for lunch. Each day at the start of lunch the student unpacks their sandwich and proceeds to throw away the bread and only eat the inner meat and cheese. The teacher then asks the child, "is something wrong with your sandwich?". To which the child replies, "Mom said we don't eat carbs". The teacher, taken aback and puzzled, decides to call home to gather more information. After explaining what happened, the child's mother connects the dots and realizes that her child was in the room the previous week and overheard a phone conversation centered around the mother's new 'low carb diet' in which she listed all the foods she was no longer eating (including items like bread, pasta, etc).

What happened in this scenario was that this child (at a very impressionable age) heard the parent categorize foods (in this case carbohydrates) to be bad and made the conclusion that, "if mom can't have them than I can't either."

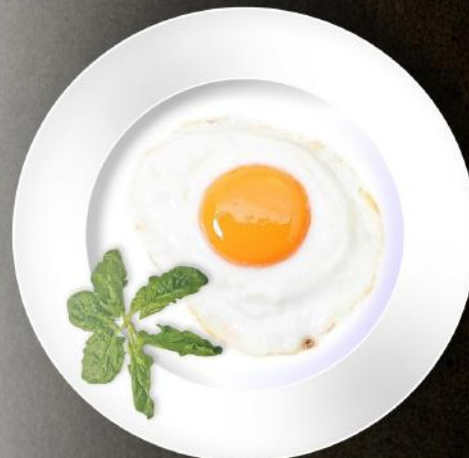
So how do you begin to establish a more neutral approach to food labeling?

Start to listen to your body and make food decisions based on the things you like, want, and crave, not what you think you should eat based on rules or arbitrary labels that diet culture has slapped on food. After all, it is not what or how we eat that truly defines our character or worth as a human being. Adopt terms like "everyday foods" to describe foods you would find on Canada's food guide. Replace the words "junk food" or "bad food" with words like "treats", "fun foods", and "other foods". You could also label food as being "satisfying", "pleasurable" or better yet, use the actual name of the food (e.g. ice cream, chips, etc).

During family mealtimes, take time to talk about how certain foods have lots of vitamins and minerals which help us grow and give us energy. Use mealtimes as an opportunity to create a neutral food and body mentality. Model how to listen to your body when it tells you that you are hungry or thirsty, and respond to those cues.

Ultimately, this brings us back to the foundational truth about food: it is simply meant to be both nourishing and pleasurable. It's not something that should torment our will to live or prevent us from enjoying family meals or dessert with our little ones. Nourish your body and mind by eating a variety of foods from all the food groups and by enjoying pleasurable foods. Moderation is easier without guilt.

Photo Credit: Pixabay via Pexels



Marisa Casey is a Health Educator at the Bulimia Anorexia Nervosa Association (BANA)

The Therapy of Art

By: Lori Market, CTP, MSW, RSW

Pablo Picasso once said... "Every child is an artist. The problem is how to remain an artist once he grows up."

I am a certified trauma practitioner, a trauma survivor, and an artist. I have used art and writing for over 25 years as a form of therapy in my own healing from trauma and grief. I was reluctant to share that I am trauma survivor, but I have concluded that in an effort to de-stigmatize mental health, it is important to mention this personal truth. I believe mental health moves along on a continuum for all of us.

Sometimes our mental health flourishes and, at other times, it needs nurturing. A person may be feeling extremely well, then suddenly a difficult life experience occurs, (the death of a precious loved one or coping during a pandemic) and our mental health may become compromised.

Mental health is not static. No one person is exempt from moving through periods of wellness into periods of stress and unrest because mental health exists on this continuum. In fact, it is normal and even necessary that mental health can fluctuate according to circumstances.

After personal struggles with trauma and subsequent healing, I became a social worker and began to use art interventions in my career. I have used art techniques with clients for over 8 years and have witnessed its healing in the lives of others. This article is based on research and personal reflections from the field.

Art therapy is a combination of art materials and structured interventions to target trauma and other difficult life circumstances.

There are many forms of art therapy including; painting, sculpture, collage, dance, singing, storytelling and expressive writing techniques to name a few. Some people come to therapy and often find that some issues are too painful and difficult to discuss whether it is too traumatic, too overwhelming, or simply too frightening. It is not easy to share our vulnerable feelings, difficult circumstances, or past traumas with a stranger.

For many, counselling is not an option due to simply not wanting to talk. Art therapy is an alternative way to express painful feelings. Art can produce a narrative when words cannot be found and is a therapy option that can be used when traditional talk therapy or mainstream interventions fail. Art can be used to identify what the problem is and also serve as a method to reflect, deconstruct and then imagine and construct future possibilities.

Art and expressive writing techniques can serve as vehicle for anger ventilation and emotion regulation. People can project their emotions, conflicts, hopes and fears into art. When issues are externalized, distance from the intensity and pain can result. This distance allows for objectivity and enables a person to look at their problem or emotion in a different way.

The problem is then positioned outside of our bodies and the art object can serve as a container for these feelings and conflicts. This can help us to process problems in a less intrusive way. Art is soothing and it relaxes people. It is found that art making can reclaim a sense of safety and produce a state of calm while sorting through painful content. Art making is kinetic and can allow people to think and feel and move at the same time. This is particularly important when trauma is present. Art can be a reflection of our lived experience, promote empowerment, and raise issues of social justice for people in marginalized or oppressive conditions. Art therapy is a holistic treatment option that is trauma informed and can be culturally transferrable. Art can be implemented in times where the western model of treatment is not culturally appropriate.



External Dialogue
Mixed Media
2016

The Shadow Between Notes
Acrylic on Canvas
2018



I have implemented art therapy techniques with youth and adults and found that it did not matter what age a person was; that there was an art therapy intervention that would work for them. It is a matter of matching the issues people are struggling with to an appropriate art activity.

People do not have to be an artist to engage in art therapy.

There are art interventions that require little art experience. If you can draw a stick figure, or put tape onto canvas, then you can do art therapy. Art therapy is not about the end art product (although I have witnessed many people delighted by the art result).

Art is a way to get at what hurts from a different angle. Art therapy involves people directly, as active participants, in their own treatment.

While there is a continued need for more robust research methods, many art therapy experts have concluded for decades that art has an empowering impact on mental health.

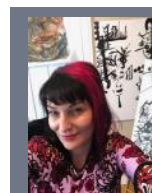
There is evidence that art therapy has led to positive treatment outcomes on its own or in combination with other treatment therapies.

As suggested by my colleague Patrick, to illustrate my points, I have included two of my paintings in this article. The painting entitled "External Dialogue" was created to express the importance of sharing with others and through art when internal dialogue is going nowhere. It is about taking what is inside and externalizing it for relief and support.

The second painting entitled "The Shadow Between Notes" is about resilience and coping with what life presents to us. My Mimi once shared a story about my great-grandmother who had severe rheumatoid arthritis.

She told me that my great-grandmother's fingers were bent, twisted and severely deformed by the disease. She shared that despite the state of her hands, my great-grandmother continued to play the piano every day. This painting represents her heroic perseverance, and how despite the horrors that often accompany life, we can also triumph and find ways to engage in our passions. Her story is captured in my artwork. This work symbolizes that life can be very tough but that it is also very beautiful, how you see it depends on where you are along the continuum at any given moment.

*If interested in art therapy, please stay tuned into future issue where i will be guiding readers through art activities to try at home. So excited you can't wait? You can always explore available art resources in the community!



Lori Market, is a Clinical Therapist at the Bulimia Anorexia Nervosa Association (BANA) as well as a local artist and author.

Practicing Gratitude

Regularly practicing gratitude can be as simple as taking the time to reflect and acknowledge the things you're thankful for. This process, when practiced regularly has been proven to result in more positive emotions, improved sleep, increased positivity through allowing the expression of compassion and kindness, and can even boost immune systems! The best part is that it doesn't need to be saved for momentous occasions and it's free. Simply jotting down a few of your strengths and qualities can increase your life satisfaction.

We encourage you to BE YOURSELF and try the examples below.

I am good at these things:

1. _____
2. _____
3. _____

Things that make me unique are:

1. _____
2. _____
3. _____

I have overcome the following challenges:

1. _____
2. _____
3. _____

Times that I have helped others:

1. _____
2. _____
3. _____

I made others happy by:

1. _____
2. _____
3. _____

I am good at these things:

1. _____
2. _____
3. _____

I have been complimented on:

1. _____
2. _____
3. _____

Things I value the most:

1. _____
2. _____
3. _____

My Eating Disorder Recovery

By Alexandra McGinnis

In the two and half years I was a client of BANA's, I experienced a roller coaster of emotions and thought patterns, and ways of coping with them. I would like to say it was an easy experience; a very poignant uphill battle to success. However, the recovery process for me was not quite like that. There were a series of victories and defeats, the most important of which for me was learning how to "fail up".

The fallbacks were a part of my process, and learning how to dust myself off and continue is how I successfully completed my time at BANA. My therapist and dietitian taught me the tools needed for success; however, it was up to me to practice using them.

After every slip up I learned to reflect, I read more, I journalled more, and the shame started to show up less and less. I have been asking myself the last few days since my final discharge appointment what I have learned over the last two and half years while in recovery, because honestly my whole life has changed.

I learned to love myself

Self-love is a trending subject in our culture lately: self-love, self-care, know your worth, and a myriad of other similar themes can be found in influencer's social media posts and blogs. What does it mean? For me, it meant putting my health first - my mental health, emotional health, spiritual health, and physical health. This translated to not counting my calories; not weighing myself every morning to decide if I need to eat less that day; starting to base my meals off what my body needed that day, rather than nutritional value or macros attained.

This also looked like not staying in the gym until I've decided I burned off yesterday's food intake; instead, I committed to moving my body every day, in a way that feels good - whether that was yoga, a brisk walk, weightlifting, or dancing.

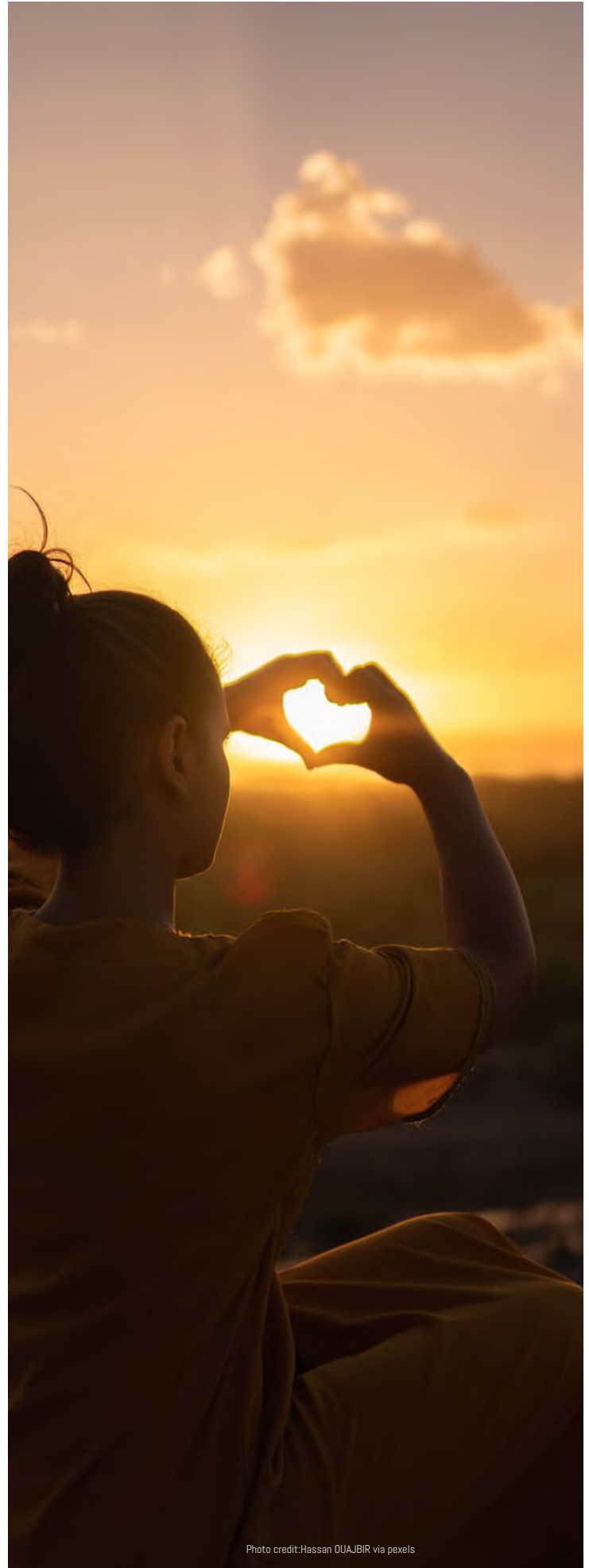
I became gentler with myself; I started listening to my intuition; I became more mindful with the language I used about myself, and in turn I developed more empathy for others. My self-love journey started with staring at myself in the mirror and committing to say two positive things about my body for every negative thought that came up, and honestly this is a practice I may have to do for the rest of my life.

I learned to set boundaries

Body acceptance and self-love has a trickle-down effect, and it showed up in my life in many ways. Setting boundaries with myself and others is one of the greatest practices I learned. A diagnosed perfectionist, I was addicted to the external validation that came along with pleasing others and always saying "yes", even if that meant burning myself out and allowing my mental health to crumble.

I have learned to love others in a way that does not make my own worth or happiness reliant on having access to those people, places, or things. Boundaries show up in miniscule ways but have astounding positive effects. For me, boundaries look like declining social invitations when I need alone time; like not giving access to myself to whoever wants it in that moment; or like simply saying "no", even at the risk of disappointing others.

We live in a world of immediacy, where instant gratification can sometimes be demanded of you from others. Turning off my phone notifications and deleting my social media apps for 48 hours is a way that I have begun to recharge and set boundaries in order to protect myself. I also "cleaned up" my social media feeds by unfollowing any accounts that use diet-culture language, and replaced them with accounts that promote body-positivity and inclusivity.



I learned about diet culture

For the 18 years that I lived with an eating disorder, I believed my body was wrong. My body did not look like any of the female bodies I saw in movies or magazines; no matter how much weight I lost or how much I toned my body, the goal always seemed unattainable. Instead of looking to myself for the answer of what my body needed for nourishment and movement, I looked outside myself to the beauty industry.

Buying into the unreachable beauty ideals that were being sold to me through diet culture destroyed my self-esteem and body image. I have been on every diet imaginable and yet I was never able to sustain any of those diets, and as a result I would end up feeling like a failure and remained trapped in this constant cycle of dieting.

BANA formally introduced me to the diet culture I was living in, only this time I was an outsider looking in, really seeing it for the first time. Always a rebel at heart, rejecting diet culture was a cause I could get behind and I finally started to feel free. I started respecting and listening to my body, and suddenly I started to have more time and energy to focus on other things, such as my personal goals, relationships, and overall health.

I have been working on my recovery for two and half years and I am sure I will continue to do so for the rest of my life. I am proud of how far I have come; I have been symptom free longer than I ever have been and feel confident and excited for my future. I have not dieted in over two years and guess what? My weight is a non-issue that I hardly ever worry about anymore. I approached my recovery with curiosity and an open-mind - I was my own experiment.

My findings? Being tender with myself and letting go of diet culture was the resolution I had been needing. Doing the work, shifting my thinking, learning how to fail up, and constantly re-inventing my self-care routine has become the long-term solution for sustaining my recovery.



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What to do if you suspect an ED

It is often difficult to understand why someone is experiencing an eating disorder or has weight preoccupation. Many people believe that eating disorders are only about food and weight, but in reality, these are just the symptoms/coping strategies to deal with the underlying problems. Below is a list of helpful hints to keep in mind when approaching someone you suspect has an eating disorder

1

Gather information and educate yourself on eating disorders.

2

Avoid talking about food and weight.

3

Assure them by saying that
a) they are not alone, and
b) that you love them and
c) that you want to help in any way that you can without infringing on their rights, and
d) respect their need for privacy.

4

Encourage them to seek help from a therapist, and get medical help.

5

Never try to force them to eat or pressure them to make changes.

6

Do not comment on weight or appearances because comments may be taken the wrong way.

7

Do not blame the individual, and do not get angry, recovery takes time, be patient.

8

Make mealtimes pleasant and enjoyable.

9

Be a friend and actively listen by reflecting back their needs and concerns.

10

Do not take on the role of a therapist. It's important to remember that when you first approach the person you suspect has an eating disorder, they may react with anger or denial. Be supportive by letting them know that you will be there for them if they need to talk.

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

In a case of extreme emergency bring the person directly to a hospital. No matter how much you want to help, remember that only they can make the decision to get help. It is their responsibility to continue with their own process of recovery. Forcing them to recover can only hinder their recovery process.

Things You Can Do to Act as an Eating Disorder Advocate

By: Stephani Fenkanyyn, CNP, MCS (OT)

Based on available data from 2016, it is estimated that over 1 million Canadians have a diagnosable eating disorder. However, based on global data of individuals affected, it is estimated that 2.7 million people in Canada have an eating disorder.

With such a high prevalence, most people have been impacted by an eating disorder in some way, either directly or indirectly. Furthermore, given the disparity between those affected and the money allocated to this area of mental health, we know more funds are needed to serve individuals in need of specialized and quality care within our country.

You are already being a great advocate by educating yourself and learning more about eating disorders, but you may be asking yourself: What else can I do? How can I help in moving the needle and gain momentum in the fight against eating disorders?

Here are 4 things you can do during EDAW, and beyond, to advocate for eating disorder services:

1. Spread information & start a conversation

Share information and resources including accurate facts about this mental illness and its impacts on Canadians of all sizes, races, ethnicities and genders. You can tell a friend, re-share BANA's educational posts on your own social media, or perhaps do some research and write a blog or article for others to read. Information is power and the more people who have awareness of the financial, emotional, physical, and/or social impacts of an eating disorder, the better the outcomes for change.

2. Donate your time or money

A little bit can go a long way. Volunteer for a local eating disorder organization or use your money to support the cause. Challenge a friend to do so too!

3. Listen and learn from those with lived experiences

We can learn a lot from the experiences of those who have intimately experienced the challenges of an eating disorder. This helps in understanding eating disorders in more detail and encourages learning of the unique experiences of those often neglected in mainstream portrayals such as those of marginalized groups, under-served communities, individuals in larger bodies, men and nonbinary folks.

4. Bring attention to existing services and supports nationally and/or locally

By promoting services in our communities, we can increase awareness of supports for when people need them most. Bring a local organization to the attention of friends, co-workers, or family.

Check out www.nedic.ca for a list of national services throughout Canada.

nedic
National Eating Disorder
Information Centre

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



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Stephani Fenkanyyn is a Health Educator at the Bulimia Anorexia Nervosa Association (BANA)

3 Ways you can support BANA

Testimonials

Are you a service recipient of BANA?

*Maybe a Community Partner
that's worked with us?*

*Have we done a presentation for your
group or school?*

WE WANT TO HEAR FROM YOU!

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

Have you had a great experience with us?

*Any concerns or suggestions
you'd like to share?*

Please contact us today at: info@bana.ca

Donors Needed

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

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

BUT WE NEED YOUR HELP.

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

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

*To support BANA programs and services
visit our website at:*

www.bana.ca/get-involved-donate

Topic Ideas

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

WHAT DO YOU WANT TO SEE IN OUR MAGAZINE?

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

*What do you need more
information and resources on?*

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

*Please share your suggestions with
us at: info@bana.ca*



BANA-QUIRIES

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

Why do I have to work on eating if my concern is Body Image?

Eating and body image are intrinsically linked. Typically speaking, when eating changes, so does the body and vice versa. If eating is disordered or symptoms remain unchallenged, it can result in maladaptive thinking regarding body shape and weight and how these may be influenced or changing. Because eating disorders incorporate both eating and body dissatisfaction, both need to be addressed in order to maximize on recovery.

There are some exceptions to this, such as in the case of ARFID. Exceptional circumstances are considered in treatment planning. In order to access clinical programs at BANA, a client must have an eating disorder diagnosis. For referrals, a diagnosis is not required.

Can I still see a therapist outside BANA during treatment?

Eating disorders have been commonly shown to co-occur with other mental health diagnoses. Many BANA clients are engaged in eating disorder treatment while simultaneously accessing other supports in the community.

Beginning eating disorder treatment with a client who is accessing other mental health supports will depend on the level of intensity of those services. Furthermore, BANA often seeks consent from the client to consult with other mental health supports in order to harmonize care and avoid duplication of services.

I've heard that BANA's Health Promotion Team is offering Virtual presentations. What formats do you offer them in and how do I book?

Since the beginning of COVID-19, we've been using different platforms to complete the presentation. Our health educators are added as guests and/or moderators to virtual meetings created by the group requesting the presentation. We share our screen and it has been working out quite nicely. We've been added to several different platforms including: Zoom, Go-To Meeting, Google Meets and Blackboard.

We are happy to have a 'test run' on your platform prior to the presentation date to ensure all is working as intended.

BANA does have a platform of their own as a second option, however, we have found it to be more seamless if the organizer requesting the presentation invites their own participants, and we join your platform as a guest and/or moderator, as we would if presenting in person.

To book a presentation email us at info@bana.ca or complete our online request form at www.bana.ca/health-promotion/

Are you or someone you know affected by an

Eating Disorder?

Looking for services? No Referral required. Programs provided free of charge.

ADULT SERVICES
Therapy/Counselling (individual/group)
Dietitian Support
Health Promotion/Public Presentations

CALL TOLL FREE
1.855.969.5530

This is not a crisis line. Intake services operate Monday-Friday, 9am-5pm unless otherwise indicated.

 **Bulimia Anorexia Nervosa Association**



Clinical services are limited to residents of Windsor and Essex County, Ontario, Canada



**STAY
HOPEFUL.**

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