

Welcome

We respectfully acknowledge that we are grateful to do this presentation on the traditional and unceded lands of the Qualicum and Snaw-Naw-As First Nations





Food Insecurity and Eating Disorders

for Service Providers
Dec 2022

By Janet Krenz & H el ene Dufour
Public Health Dietitians



With humility and respect

We aim to share
accurate, evidence &
experience-based
information

We respect other
ways of knowing



Note: this session includes

- Eating disorders
- Mental health
- Trauma
- Body image

Please step away if you need to
and take time afterward to
practice self-care



What age group(s) do you work with?

Early years | School age children & youth | Adults & seniors

How confident do you feel working with people with an eating disorder (ED) or suspected ED?

5 fingers = very confident | 1 finger = not confident

True or False?

'Our body shape and size are mostly determined by what we eat and how much we exercise'

A woman with her hair in a braid, wearing a white tank top, orange leggings, and sneakers, is performing a sit-up exercise on a black mat. She is lying on her back with her knees bent and feet flat on the floor. Her hands are clasped behind her head. The background shows a large window with a view of trees and a building.

False

What affects body size? (1 of 2)

Genetics

- up to 70% of variation
- appetite, satiety, metabolism



In-utero/early years

- In-utero malnutrition
- In-utero smoke exposure
- Low/high birthweight
- Early feeding practices
- Childhood trauma



Photo by Camylla Battani on Unsplash

Adapted from Jessie's Legacy

What affects body size? (2 of 2)

Environmental factors

- Food insecurity/poverty
- Food marketing
- Processed foods
- Sedentary culture
- Stress
- Inadequate sleep



Outline

- Types of eating disorders (ED)
- ED - the 'shadow pandemic'
- Risk factors, signs & symptoms
- Food insecurity & eating disorders
- Helping children & youth with suspected ED
- ED supports & treatment
- ED prevention
- Additional resources





Types of Eating Disorders

Eating Disorders

A type of mental illness which causes changes to the way we think and behave towards food, eating and body shape & weight

Serious, life-threatening

Physical & psychological symptoms

Can compromise growth, development, learning



Image by Eric
Ward on
[Unsplash.com](https://unsplash.com)



Binge Eating Disorder (BED)

- Recurrent episodes of eating unusually large quantities during a short period of time
- Feeling out of control over what and how much is eaten and when to stop
- Feelings of shame & guilt afterwards
- Affects ~3.5% of women & ~2% of men in their lifetimes

Bulimia Nervosa (BN)

- Periods of food restriction followed by binge eating, with recurrent compensating behaviours such as purging or restriction
- Purging may include vomiting (trips to the washroom after meals), laxative use
- Guilt and anxiety around food
- Body weight /shape concerns
- Affects 3-4.5% of women and 0.1-0.5% of men in their lifetimes



Anorexia Nervosa (AN)

- Powerful fear of becoming overweight
- Disturbance in how they experience their weight & shape
- Weight loss or lack of gain in children ($\geq 15\%$ less than ideal)
- Anemia & other nutrient deficiencies
- Feelings of inefficacy, hopelessness
- Intense preoccupation with food
- Perfectionism
- All-or-nothing thinking



Avoidant & Restrictive Food Intake Disorder (ARFID)

- Limitations in the amount and/or types of food consumed
- Anxiety around eating certain types of foods or unfamiliar foods
- Food rituals
- Weight loss or lack of appropriate gain
- Nutrient deficiencies
- Typically starts in childhood & may be linked with traumatic experience involving food
- Does not involve distress about body shape or size but may progress to AN or BN



There are other eating & feeding disorders – please see NEDIC

Orthoexia

- Not a diagnosable ED
- A pattern of beliefs & behaviours
- Eating only foods regarded as healthy
- More pleasure in eating 'correctly' rather than enjoying food
- Emotional satisfaction when they stick to their goals but intense despair when they fail to do so
- Can lead to social isolation and ill health
- Weight is a common measure of success
- If weight loss compromises health and body dissatisfaction plays a part, may lead to AN or BN



Photo by Drew Hays on
Unsplash.com

9 Truths About Eating Disorders

1. Many people with eating disorders look healthy, yet may be extremely ill.
2. Families are not to blame, and can be the patients' and providers' best allies in treatment.
3. An eating disorder diagnosis is a health crisis that disrupts personal and family functioning.
4. Eating disorders are not choices, but serious biologically influenced illnesses.

Source: Academy for Eating
Disorders (aedweb.org)

9 Truths About Eating Disorders

5. Eating disorders affect people of all genders, ages, races, ethnicities, body shapes, weight, sexual orientations & socioeconomic statuses.
6. Eating disorders carry an increased risk for both suicide and medical complications.
7. Genes and environment play important roles in the development of eating disorders.
8. Genes alone do not predict who will develop eating disorders.
9. Full recovery from an ED is possible. Early detection and intervention are important.



Why are eating disorders so hard to treat? - Anees Bahji



Watch Later



WHAT IS AN EATING DISORDER?



ed.ted.com/lessons/why-are-eating-disorders-so-hard-to-treat-anees-bahji#watch (5 min.)

Eating Disorders: The Shadow Pandemic

New 'shadow pandemic': How COVID has contributed to a surge in eating disorders in young children



By **Jessica Patton** · Global News

Posted January 21, 2021 9:52 am · Updated January 21, 2021 9:58 am



Possible factors

- Media exposure
- Social isolation
- Disruption of daily activities (physical activity, sleep)
- Fear of contagion
- Limited access to treatment

Hospitalizations for eating disorders among young women jumped by more than 50% during the COVID-19 pandemic

May 5, 2022 — Throughout the pandemic, hospitalizations and visits to emergency departments (EDs) due to eating disorders have surged among young women in Canada. New data from the Canadian Institute for Health Information (CIHI) shows that the pandemic has taken a significant toll on [the mental health of children and youth](#), with hospitalizations for young women with eating disorders age 10 to 17 increasing by nearly 60% since March 2020. This



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Feb. 1, 2022

Eating disorders rose dramatically among young Canadians during COVID's first wave

Social Work research shows 60% rise from pre-pandemic levels



JAMA Network Open

JAMA Network Open

This Issue Views **15,494** | Citations **16** | Altmetric **310**

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Original Investigation | Pediatrics

December 7, 2021

Trends in the Incidence of New-Onset Anorexia Nervosa and Atypical Anorexia Nervosa Among Youth During the COVID-19 Pandemic in Canada

Holly Agostino, MD, CM¹; Brett Burstein, MD, CM, PhD, MPH^{2,3}; Dina Moubayed, MD, CM⁴; [et al](#)

[Author Affiliations](#) | [Article Information](#)

JAMA Netw Open. 2021;4(12):e2137395. doi:10.1001/jamanetworkopen.2021.37395

Click on images to link to articles

ED Risk Factors

Biological

Genetics

Family history of ED or
mental health condition
or substance use disorder

History of dieting

Type 1 Diabetes

Psychological

Anxiety

Depression or
depressed mood

Body dissatisfaction

Strict control or lack of
control by carers

Trauma

Social

Perfectionism

Experience of weight
stigma

Teasing/bullying

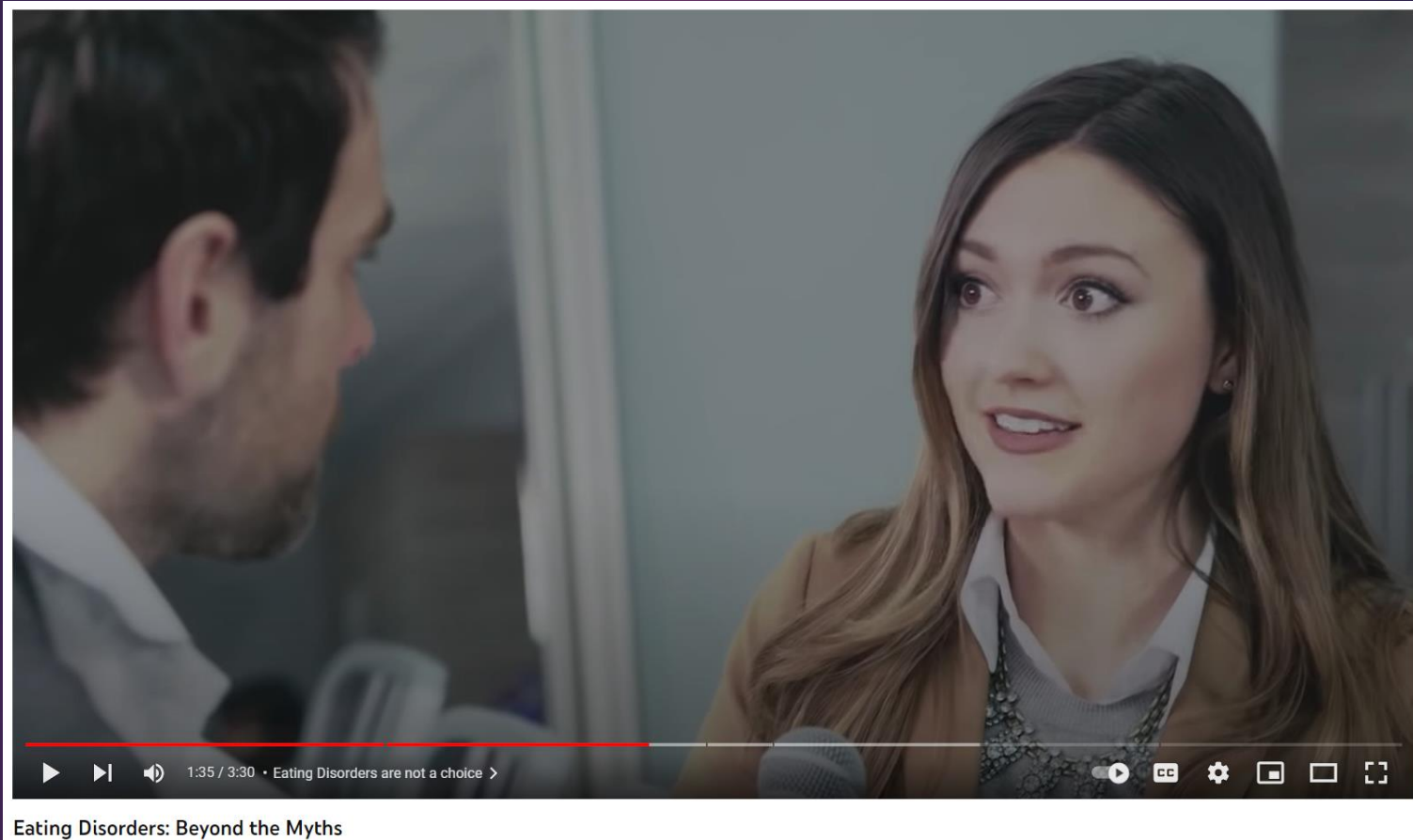
Low self-esteem

Limited social network

Historical trauma

Food insecurity

ED Possible Signs & Symptoms



[Eating Disorders: Beyond the Myths \(NEDIC\)](#)

Possible Signs & Symptoms

Weight loss or gain (but often not present) Suboptimal growth in children/youth	Change in attitude or behaviours about food, size or weight
Frequently leaving class/bathroom breaks, especially after eating	Refusal to eat certain foods or food groups Extreme interest in fad diets or 'clean' eating
GI complaints Anemia; other nutrient deficiencies	Food rituals; preoccupation with food New interest in cooking shows
Feeling cold	Calorie counting, weighing
Dressing in layers that disguise body shape even when not appropriate for the weather	Not eating lunch or treats; throwing away food; not eating with others
Dizziness, fainting Fatigue, difficulty with regular activity	Negative or distorted self-image Concern with body weight or shape
Cuts or calluses on hands from purging	Sleep issues
Dental issues, tooth pain, discoloured teeth	Social withdrawal; disconnecting from peers
Using laxatives or diuretics	Mood swings, irritability, crying easily
Excessive exercising	Anxiety, depressive or OCD behaviours
Difficulty concentrating Hard time making decisions	Rigid, black and white thinking

Disordered eating ≠ Eating disorder diagnosis

Disordered Eating

- Body Acceptance
- Healthy Eating Habits
- Healthy Weight for age, height & body type



- Weight & Shape Preoccupation
- Excessive exercising
- Striving for perfection
- Compulsive Overeating
- Restricting
- Fasting
- Purging
- Yo-yo dieting
- Steroid Use
- Laxative use

- Anorexia Nervosa
- Bulimia Nervosa
- Binge Eating Disorder



Image: Jessie's Legacy

But, disordered eating can cause just as much harm as an eating disorder.
Many people with disordered eating will develop an eating disorder.

True or False?

‘Teaching children & youth about eating disorders is a form of prevention’

False

Teaching about signs & symptoms of eating disorders may be harmful

Evidence supports upstream/protective activities that build positive body image, self-esteem & media literacy



Food Insecurity



Photo: Nathan Dumlao, Unsplash

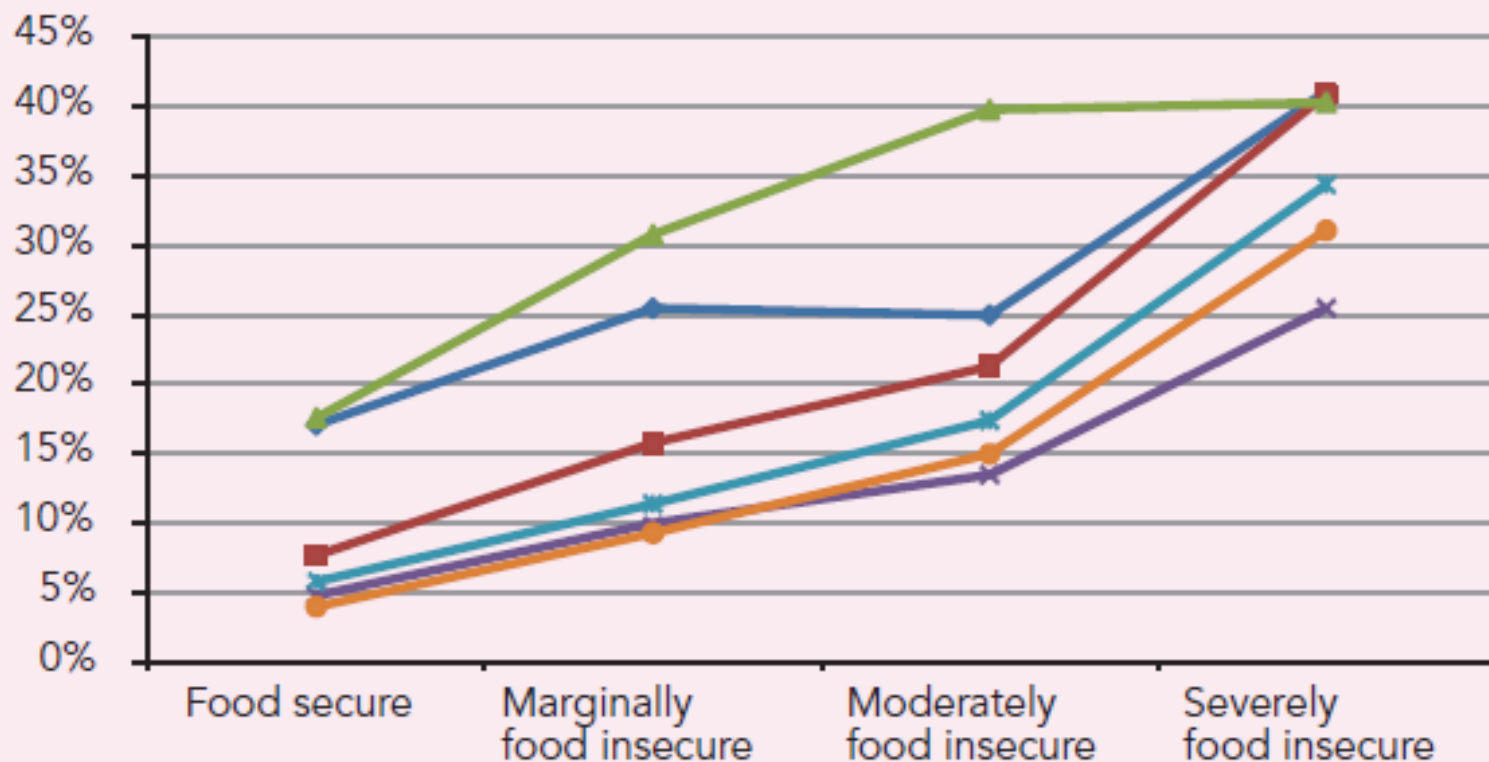


Photo: Maria Lin Kim, Unsplash

Food insecurity is linked with increased risk of some types of ED in adults and youth

1 in 3 children in BC live in poverty

Adverse mental health outcomes reported by Canadian adults (18-64 years of age), by household food insecurity status²

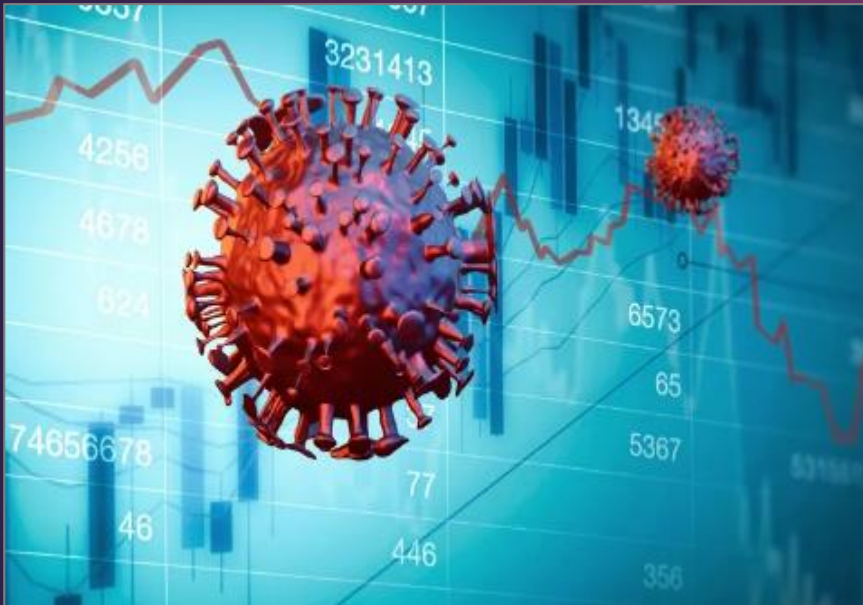


- ◆ Depressive Thoughts in the Past Month
- ◆ Suicidal Thoughts in the Past Year
- Major Depressive Episode in the Past Year
- ◆ Physician Diagnosed Mood Disorder
- ✕ Physician Diagnosed Anxiety Disorder
- Self Reported Mental Health Status

Data Source:
 Statistics Canada,
 Canadian Community
 Health Survey (CCHS),
 2005-2012

*Proof Food
 Insecurity Policy
 Research (2018)
 Food Insecurity and
 Mental Health
proof.utoronto.ca*

Food Insecurity, Eating Disorders & COVID-19



“Food insecurity is associated with a range mental disorders. There is a need for food insecurity interventions and improve access to mental health services for food-insecure populations.”²

“COVID pandemic has affected individuals with ED diagnosis or at risk for an ED, especially women, children and adolescents, and those with anorexia nervosa.”¹

1. Meier, K., van Hoeken, D., & Hoek, H.W.. (2022) Review of the unprecedented impact of the COVID-19 on the occurrence of eating disorders.

2. Food insecurity and its associations with bulimic-spectrum eating disorders, mood disorders, and anxiety disorders in a nationally representative sample of U.S. adults. *Social Psychiatry and Psychiatric Epidemiology*, 2022

Food Insecurity & Eating Disorders: Challenging Stereotypes



- Food Insecurity being linked to insurgence of eating disorders challenges the stereotype associated with high-income, Western, white young women. ¹
- There is a need for ED research to include marginalized populations who have historically been overlooked in the ED field.²

1. Food Insecurity and Insurgence of Eating Disorders: A Legal and Policy Appraisal, Global Jurist June 2022

2. Food Insecurity and Eating Disorders; A Review of Emerging Evidence. Current Psychiatry Reports,

Food Insecurity & Dietary Restraint

People with food insecurity engaged in dietary restraint for several reasons:

- Minimizing the effect of hunger for other family members (i.e. children)
- ‘Stretching’ food to make it last longer
- Prioritizing medical expenses.

Intentional efforts to limit food intake were correlated with increased ED pathology.¹



Image: Helena Lopes on Unsplash

1. Food Insecurity & dietary restraint in a diverse urban population. *Eating Disorders*, 2021

Food Insecurity & Feeding & Eating Problems & Disorders (FEPD) in Children

“COVID-19 had great impact on young children with FEPD and their families ”



Potential causes: Parents reported

- More stress
- More difficult eating behaviour of children
- More negative behaviour between family members
- Less support

Food Insecurity & Eating Disorders in Youth



1. *Students with Food Insecurity Are More Likely to Screen Positive for an Eating Disorder at a Large, Public University in the Midwest, Academy of Nutrition and Dietetics, 2021*
2. *Experiencing Household Food Insecurity During Adolescence Predicts Disordered Eating and Elevated Body Mass Index 8 Years Later, Journal of Adolescent Health , 2021*
3. *Results of Online Survey about Food Insecurity and Eating Disorder Behaviors Administered to a Volunteer Sample of Self-Described LGBTQ+ Young Adults Aged 18to 35 Years, Academy of Nutrition and Dietetics 2021*

- *Food insecurity is associated with stress, irregular eating patterns, weight change, depression and body dissatisfaction. All risk factors for the onset of eating disorders.¹*
- *College students with food insecurity at any level were more likely to screen positive for an eating disorder compared to students with high food security.¹*
- *Longitudinal study suggest that household food insecurity during adolescence is a risk factor for disordered eating 8 years later.²*
- *Members of the LGBTQ+ community are at greater risk for food insecurity, eating disorders, and depression, particularly those who identify as trans males.³*

Food Insecurity & Eating Disorders in Young Adults

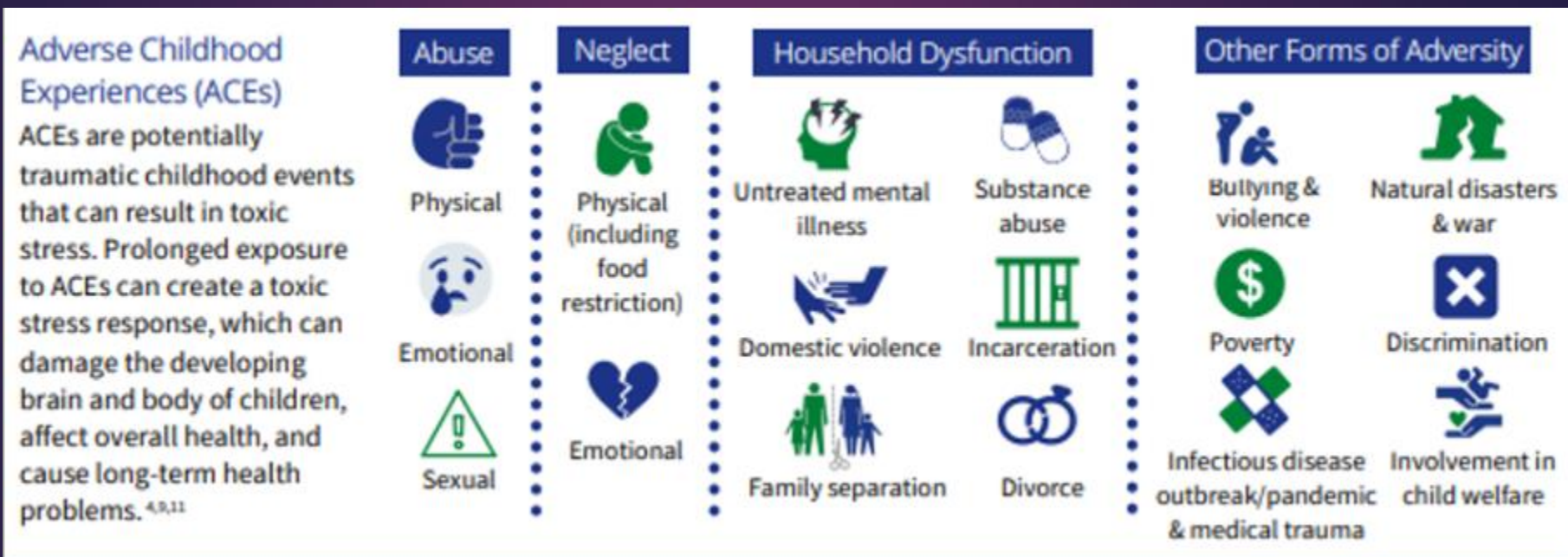
Emerging evidence an association between food insecurity (FI) and disordered eating among adults.¹

Adults who reported having hungry children in their household were found to have higher levels of binge eating, overall ED, dietary restraints, weight self-stigma and worry compared to participants with lower levels of food insecurity.²



1. *Associations between severe food insecurity and disordered eating behaviors from adolescence to young adulthood: Findings from a 10 year longitudinal study. Preventive Medicine June 2021*
2. *Food insecurity and eating disorder pathology. International Journal of Eating Disorders. May 2017*

Adverse Childhood Experiences (ACEs)



6 in 10 people have at least one ACE

1 in 6 people have four or more ACEs

Women, several ethnic groups, and **food insecure families** are at greater risk of experiencing multiple ACEs

Adverse food-related experiences

Unreliable/unpredictable meals
Restriction & control over food
Body shaming
Loss of food traditions
Manipulation, punishment or rewarding with food
Shame, bias, or stigma when utilizing food assistance
Untrustworthy or inadequate nutritional supports

Dietary behaviours that may result

Hoarding food, binge-eating or compulsive over-eating
High fat/sugar/salt diets
Reliance on convenience foods
Eating disorders, food addiction
Decision making to meet short-term needs
De-prioritization of planning & budgeting

Helping children
& youth with
suspected eating
disorder -
What adults say
matters!



Helping Children & Youth with a Suspected ED

- The goal is not to provide a diagnosis
- Let the student know you are concerned about their well-being or ability to focus/do their school work
- Demonstrate warmth, compassion & care without judgement
- Work with the student about managing uncomfortable feelings such as anxiety, sadness, depression, feeling out of control
- Work with the student to involve parents/guardians
- Share your concerns with parents/guardians
- Support parents in accessing medical care and help
- Avoid comments on the student's weight, appearance or eating

How adults can help

- Connect with family to discuss plans or possible accommodations recommended by physician/ED Program/ED Counselor
- Allow extra time for assignments/tests
- Excuse from curriculum that may be triggering
- Allow students to eat during instructional time
- Offer a quiet, safe, private space for the student to eat, with a parent or supportive friend, if that helps
- Avoid talking about their ED, even with good intentions

Central Island & North Island Island Health Regional ED Program



- Physician or Nurse-Practitioner referral required
- Treatment programs design plans for each individual and their specific needs
- Resources include
 - Support for Parents & Caregivers of Individuals with ED
 - Peer Support for Clients with Eating Disorders
 - Regional ED Program Client Referral Form
- Crystal.frost@islandhealth.ca Regional Eating Disorder Program Coordinator can assist | 250-519-5390 x36925
- www.islandhealth.ca/our-services/eating-disorders-services/eating-disorders-treatment

Children & Family

Philosophy

Eating Disorders Program (EDP)

Sexual Abuse Intervention Program (SAIP)

Living in Families with Teens (LIFT)

Dignity and Respect Program (DRP)

Mental Health Outreach (MHO)

Transitions Program (TP)

Referral Form Download

NARSF Programs LTD Referral – LIFT, SAIP, EDP (PDF)

NARSF Programs LTD Referral –



Eating Disorders Program

The Eating Disorders Program provides a complementary pairing of prevention and treatment services to lessen the impact of harm associated with persistent and serious eating patterns for referred youth and families in the Nanaimo/Ladysmith area. Our approach is strengths-based and collaborative when working with referred clients, caregivers and service providers. Clinical services provide for full screening and assessment and the implementation of cognitive and behavioral interventions to optimize client functioning in the home, school and community setting.

Services Provided

Age of Consent

- There is no age for consent in BC
- Youth must have capacity to understand consent and what they are consenting to
- [Know the Law: Children and Consent to Health Care | Dial-A-Law \(peopleslawschool.ca\)](#)
- Family Based Treatment is the most evidence based recommended treatment for youth which involves caregivers taking control of the refeeding
- Many programs will push/insist that caregivers be involved

National Eating Disorders Information Centre (NEDIC)

Evidence based information about eating disorders, treatment, helpline and more

Helpline (Eastern times)

- Toll-free 1-866-633-4220
- Live chat [nedic.ca/contact](https://www.nedic.ca/contact)
- 9am – 9pm Monday to Thursday
- 9am – 5pm Friday
- 12 – 5pm Saturday and Sunday



NEDIC Webinars and Videos [The NEDIC - YouTube](#)



[Supporting teachers: positive body image and eating disorder prevention - Part II - YouTube](#)

JessiesLegacy.com

Provincial Eating Disorder Prevention & Awareness Resources



Body Image and Self-Esteem Factsheet



Resilience “Bouncing Back” Factsheet



Overlap Between Anxiety Disorders and Eating Disorders Infographic



Media Literacy Factsheet



Young Men and Eating Disorders Factsheet

[Guidelines-for-Helping-a-Student-with-a-Suspected-Eating-Disorder](#)

Upstream Prevention Measures

- ✓ Strategies to ↑ food security & nutrition
- ✓ Division of responsibility in feeding
- ✓ Relationship with food
- ✓ Body image
- ✓ Addressing weight bias
- ✓ Media literacy
- ✓ Social-emotional learning activities



What is the Division of Responsibility in Feeding (DoR)?

Adult Provides, Child Decides

Follow this simple method to help your child eat well



Parent/Adult Decides...

- ✓ **WHAT** foods to offer
- ✓ **WHEN** to offer foods
- ✓ **WHERE** to offer foods

Be Patient!

It is normal for children to eat only foods they know and they may have to see the food many times before they decide to try it.

Free Online Resources

- ✓ [Elynn Satter, Dietitian](#)
- ✓ [Canada's Food Guide](#)
- ✓ [HealthLink BC Dietitian](#) call 8-1-1 (toll-free)
- ✓ [HealthLink BC Nutrition Resources \(Babies & Children\)](#)

Children learn to eat by eating with you!



Trust Your Child!

Offer your child 3 meals and 2-3 snacks a day. Children will eat as much or as little as they need.

Child Decides...

- ✓ **WHETHER** to eat
- ✓ **HOW MUCH** to eat

Eat with your child without pressuring him to eat!

This is the only thing that helps your child accept new foods. Forcing, bribing or shaming kids to eat does not work! It may slow down acceptance of new foods and increase the risk of eating problems.

If you have concerns about your child's growth or nutrition, contact your child's doctor, nurse or call [HealthLink BC Dietitian Services](#) at 8-1-1



To learn more info about raising a child who is a joy to feed, go to www.elynsatterinstitute.org/how-to-feed/the-division-of-responsibility-in-feeding

or scan QR code →



Nurturing Healthy Eaters in Elementary Schools



Parents & Caregivers
decide what foods are available to pack.

School
decides when and where students eat.

Student
decides what and how much to eat from what's available.

Provide a Positive Eating Environment

- Ensure students have enough time to eat within the school's set meal and snack times.
- Limit distractions such as screen time.
- Talk with children in casual conversation. Save nutrition education for the classroom instead of at mealtimes.

Respect Natural Hunger & Fullness Cues

- Allow students to control their own intake – avoid telling them how much to eat or suggesting “one more bite.”
- Allow students to eat food in any order they choose – no need to finish one food before another.
- Trust and respect students when they say or signal they are full or still hungry.

Build Trust with Students & Families

- Respect that many factors influence what foods families provide and that children have different health needs.
- Allow students to eat food items sent from home unless the food relates to an allergy. Students need to trust that their caregivers can feed them properly and teachers need to trust this as well.
- Refer families to appropriate community resources and reliable nutrition information such as Telehealth Ontario (1-866-797-0000), Unlockfood.ca and Canada.ca/FoodGuide.

Healthy eating is more than the food you eat. It is also about where, when, why and how you eat.

Canada's Food Guide

The information in this article is based on Eilyn Satter's principles and guidelines (www.eilynsatterinstitute.org).

Adapted with permission from the Manitoba School Nutrition Action Group

Teach Nutrition in a Positive Way

- Focus on the benefits of fuelling the mind and body with a variety of food.
- Keep all messages positive. Avoid negative/fear-based statements like “that food is not healthy.”
- Create practical opportunities to learn about, see, smell, touch, grow, cook, and try a variety of food.
- Focus on behaviours, such as regular meals, sleep and physical activity to feel good, not for weight control or appearance.
- Avoid weighing students, using weight tables or charts, or calorie counting activities.
- When using food in classroom lessons or school activities, choose foods from Canada's Food Guide.
- Avoid using any food as a reward.

Promote Positive Body Image

- Be mindful of what you say and avoid sharing personal views about food, dieting and body weight.
- Teach about natural body diversity. Each person's body is different, and we should respect, accept and celebrate these differences!
- Teach students how to look at media messages and stereotypes critically. There is no 'ideal' body and all bodies are worthy.



Eating Should Be Enjoyable

www.odph.ca/upload/membership/document/2019-12/nurturing-healthy-eaters-elementary-schools

What does it mean to be a 'good' eater?

A 'good' eater is a competent eater!

Internal Regulation

Food Acceptance

Eating Attitudes

Food Management Skills

What is 'normal' eating?

[www.ellynsatter
institute.org](http://www.ellynsatterinstitute.org)

What is normal eating?

Normal eating . . .

is going to the table hungry, and eating until you are satisfied.

Normal eating . . .

is being able to choose food you enjoy and to eat it and truly get enough of it—not just stop eating because you think you should.

Normal eating . . .

is being able to give some thought to your food selection so you get nutritious food, but not being so wary and restrictive that you miss out on enjoyable food.

Normal eating . . .

is giving yourself permission to eat because you are happy, sad, or bored, or just because it feels good.

Normal eating . . .

is mostly three meals a day—or four or five—or it can be choosing to munch along the way.

Normal eating . . .

is leaving cookies on the plate because you will let yourself have cookies again tomorrow, or eating more now because they taste so great!

Normal eating . . .

is overeating at times, and feeling stuffed and uncomfortable . . . and undereating at times, and wishing you had more.

Normal eating . . .

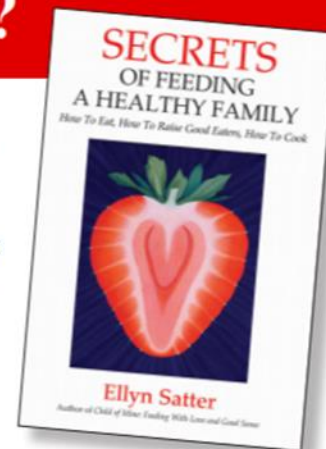
is trusting your body to make up for your mistakes in eating.

Normal eating . . .

takes up some of your time and attention, but keeps its place as only one important area of your life.

In short, normal eating is flexible . . .

it varies in response to your hunger, your schedule, your food, and your feelings.



Eating Environment/Culture

- **Allow time for eating and a place for eating**
- Giving no time and no place for eating sends the message that it is not normal or expected that youth should eat or need to eat



Image: CDC, Unsplash

Talking & Teaching about Food & Nutrition



Youtube Good student vs bad student by 123 Go!

Avoid teaching/resources that...

- × Refer to foods as 'trash' or 'junk'
- × Label foods good or bad, healthy or unhealthy, red or green light
- × Assume children are responsible for choosing foods
- × Connect food with morality
- × Suggest serving size or portion control
- × Promote calorie counting, fasting, or weighing bodies

healthyschoolsbc.ca///2021//Teaching-and-Talking-to-Students-About-Food-and-Nutrition

Role Modelling: Talking about Food

Recommend	Instead of this	Say this 😊
Avoid labelling food as good or bad	'Cookies are bad so I shouldn't eat them.'	'I love cookies! All foods fit.'
Avoid justifying food choices	'I can eat these fries because I'm jogging later.'	'I'm hungry – let's eat'
Reflect on the values that food brings to our lives	'If it's not healthy, you shouldn't eat it'	'Eating apple pie reminds me of Grandma'

Role Modelling: Talking about Bodies

Recommendation	Instead of this...	Say this... 😊
Identify & express your core emotions	'I feel fat today.'	'I feel sad today.'
Validate others' emotions (don't argue)	'You're not fat, you're beautiful.'	'I'm sorry you're feeling sad. How can I help?'
Don't join in fat talk	'You hate your thighs? Well, I hate my arms.'	Change the subject. Or: 'I love how my legs got me here today!'
Give non-body compliments	'You look great- have you lost weight?'	'You look so happy and confident!'

Canadian Food & Nutrition Resources for Educators (K-12)



Help students cultivate a positive relationship with food and eating. Avoid messaging about 'bad' or 'unhealthy' food. Focus on balance, variety, mindful eating, and fueling minds and bodies for wellness rather than for appearance or weight. Before age 12, encourage food exploration and teach about food rather than nutrients. See [Guiding Principles for Teaching Food & Nutrition](#).

Resource*	Description & Link *Resources listed in alphabetical order, not priority order
BC Agriculture in the Classroom (K-12)	Teaching resources including lesson plans about food and agriculture, searchable by grade and topic, such as Fresh Stories about foods (Primary or Intermediate) Grow BC Stories, Bee Friendly , CanadaFoodGuideActivities Gr 6-12 and Spuds in Tubs.
BC Dairy Nutrition Education (K-12)	Nutrition education lesson plans such as Food Guide Digital Scavenger Hunt Gr 6-12 BC At the Table Video Lesson Plans Gr 7-12 and free teacher workshops by dietitians.
Canada's Food Guide (K-12)	Food Guide Snapshot in multiple languages, mindful eating, eating together, recipes, eating guidelines & more! Great resources for student-led inquiry!
CRFAIR Food Literacy Food Connections (Gr 6-12)	Educator's package with video and lesson plan to explore food insecurity, with links to other food literacy resources, from the Capital Region Food & Agriculture Initiative Roundtable.
Farm to School BC (K-12)	Live and pre-recorded webinars and teaching resources such as Learning from the Land Toolkit K-12 , Fall, Winter & Spring Planting Guides , Curriculum Connections (K-12) & more.
HealthLinkBC Healthy Eating (all ages)	Evidence-based information on food & nutrition topics; great for student-led inquiry. Includes free calls (811) or emails to a HealthLinkBC Dietitian .
Healthy Schools BC (K-12)	Many resources including lessons & resources searchable by grade and topic, healthy school grants and success stories. Includes many resources in French.
Physical & Health Education (PHE) Canada (K-12)	Practical, fun activities and lesson plans in four health areas: healthy eating, physical activity, emotional well-being, healthy bodies.
ShareEdBC (K-12)	Online sharing platform for BC educators including ready to use resources, planning and pro-D resources, searchable by curricular area. To ensure security, this platform requires an invitation to activate your free account; contact ShareEdBC@gov.bc.ca
Teach Food First Educators' Toolkit (K-8) New!	Toolkit for exploring Canada's Food Guide developed with BC teachers & dietitians. Includes guiding principles for educators and >50 lesson plans searchable by grade & topic, including lessons on Indigenous foods.



Looking for healthy schools support, PHE curriculum resources or Pro-D? Contact your local health unit and ask to speak with a school team member www.islandhealth.ca/our-locations/health-unit-locations



Help students cultivate a positive relationship with food and eating.

Avoid messaging about 'bad' or 'unhealthy' food.

Focus on balance, variety, mindful eating, and fueling minds and bodies for wellness rather than for appearance or weight.

Before age 12, encourage food exploration and teach about food rather than nutrients.

www.islandhealth.ca/learn-about-health/children-youth/school-age-children-5-19-years-old/healthy-schools

Eat well. Live well.

Eat a variety of healthy foods each day

Have plenty of vegetables and fruits

Eat protein foods

Make water your drink of choice

Choose whole grain foods



Discover your food guide at

Canada.ca/FoodGuide

food-guide.canada

Industry-commissioned reports excluded

Eat well. Live well.

Healthy eating is more than the foods you eat



Be mindful of your eating habits



Cook more often



Enjoy your food



Eat meals with others



Use food labels



Limit foods high in sodium, sugars or saturated fat



Be aware of food marketing

Discover your food guide at

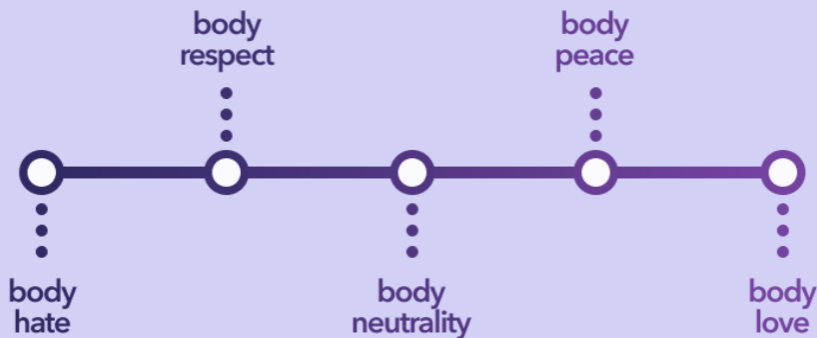
Canada.ca/FoodGuide

BODY IMAGE

- The mental picture we have of our body
- What it looks like
- What we believe about it
- How we feel about it
- Things we do because of how we feel about our bodies
- jessieslegacy.com/body-neutrality

Image by Joey Lee on
unsplash.com

BODY IMAGE SPECTRUM



blog.meditopia.com/en/step-by-step-toward-loving-my-body

Body Neutrality

Living a happy life despite some negative thoughts you may have about your body

Experience being in your body instead of thinking about what it looks like

Abilities over appearance

Body Love

Loving our body and appearance completely, regardless of any circumstances

Teen Body Image

Protective Factors	Risk Factors
School connectedness	Transition to high school
Peer support	Peer influence
Family connectedness	Peer comparison
Extracurricular activities	Family weight talk
Feeling listened to	Weight teasing
Feeling valued	Low self-esteem
Media literacy	Media ideas/stereotypes

Source: BC Dairy Assoc. Innovation in Nutrition Education and
BCdairy.ca/building-a-healthy-body-image-what-you-say-matters

What portion of Canadian women and youth 15 years and up are completely satisfied with their looks?

- 9%
- 19%
- 31%



Source: Billie on Unsplash.com

What portion of Canadian women and youth 15 years and up are completely satisfied with their looks?

9%

19%

31%

52% of healthy weight BC female-identifying youth are trying to lose weight

33% of healthy weight BC male-identifying youth are trying to gain weight

What determines children's body image and by what age is it developed?

- Significantly developed by age 10y
- How adults talk about their bodies and the bodies of others
- Comments children hear about their bodies
- Media messages about beauty & body size ideals
- Weight bias & stigma



[Youtube/DoveOnslaught](#)
(Not for young children)

Comparing your thoughts



Source: blog.johnsonfitness.com



Notice your thoughts, even the subconscious ones.
Did you make any assumptions about each woman's lifestyle,
abilities, intelligence, character?

Weight bias is common and harmful

- Blaming/shaming the individual
- ‘Obesity epidemic...costs soaring...’
- Documentaries such as ‘Fed up’ not appropriate for elementary/middle grades – may contribute to disordered eating
- Media portrayal of larger people as ‘bad guys’



FED UP - Official Trailer

<https://www.youtube.com/FedUp>



What can Schools Do to Create a Weight Inclusive Environment?

School Policies and Guidelines

- Treat weight acceptance as you would racial or religious acceptance
- Include body shape and size discrimination in the school policies
- Set [guidelines](#) for meal supervision roles and respect people's choices
- Set [ground rules](#) for guest speakers to ensure that they are respectful
- Have staffroom and classroom expectations: no diet talk

Physical Environment

- Commit to creating size inclusive physical environments: gym, playground and playground equipment accommodate all body sizes
- Ensure plus sizes are available for school clothing and shoes
- Remove scales.

Weight Inclusive Classroom

- Ensure books, posters, pictures and materials used in the classroom are weight inclusive
 - [Digital resource library](#) (K-12)
 - [20 children's books about diversity and body positivity](#)
 - [Where we all fit: Body-Inclusive library collection](#) (K-12)
- Watch for and [address weight-based bullying](#)
- Help students recognize weight bias. [Confronting Body-Bias in Schools: A Guide for Teachers](#).

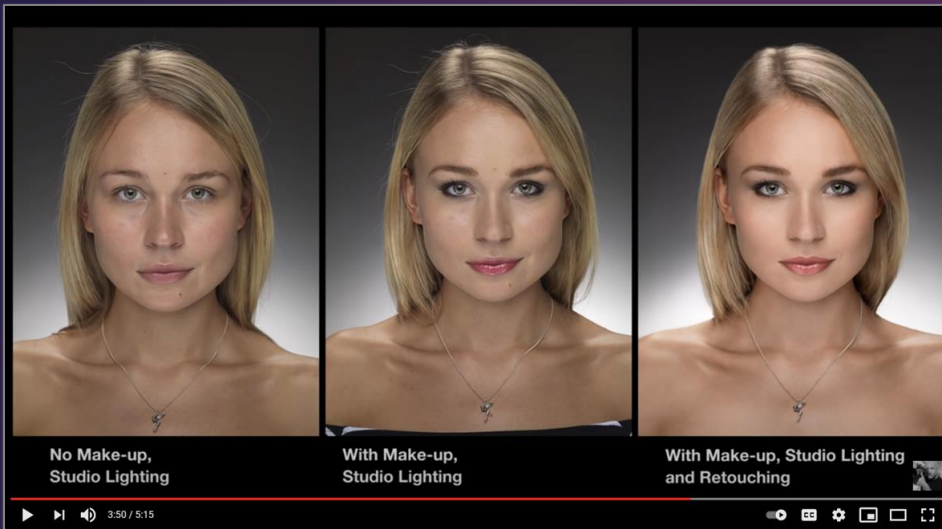
Teach PHE Curriculum in a Weight Inclusive Way

Physical Literacy	<ul style="list-style-type: none"> • Provide inclusive activities for all bodies • Promote the benefits of physical activity for wellbeing • Do not obtain student body metrics (weight, BMI, body fat, etc). Know the facts and concerns about school-based BMI screening, surveillance and reporting.
Healthy and Active Living	<p>Food Literacy</p> <ul style="list-style-type: none"> • Teach about food and nutrition through food exploration • Refrain from categorizing food as healthy/unhealthy or good/bad • Review teaching and talking to students about food and nutrition <p>Media Literacy</p> <ul style="list-style-type: none"> • Teach students to become critical consumers of the media • Create awareness about unrealistic body norms • Check out Teen Talk, Mediasmarts, and Amazing Me (grade 4-6)
Social and Community Health	<ul style="list-style-type: none"> • Include body size as part of diversity and inclusion activities • Teach about body confidence and self esteem • Foster an understanding of weight bias as an equity issue
Mental Well-Being	<ul style="list-style-type: none"> • Normalize increases in weight, body fat, and appetite during puberty • Promote identity safety in schools and in the classroom • Teach the importance of behaviors affecting well-being including sleep, stress, media use, self-compassion and self-care

Provide Resources and Training for Educators

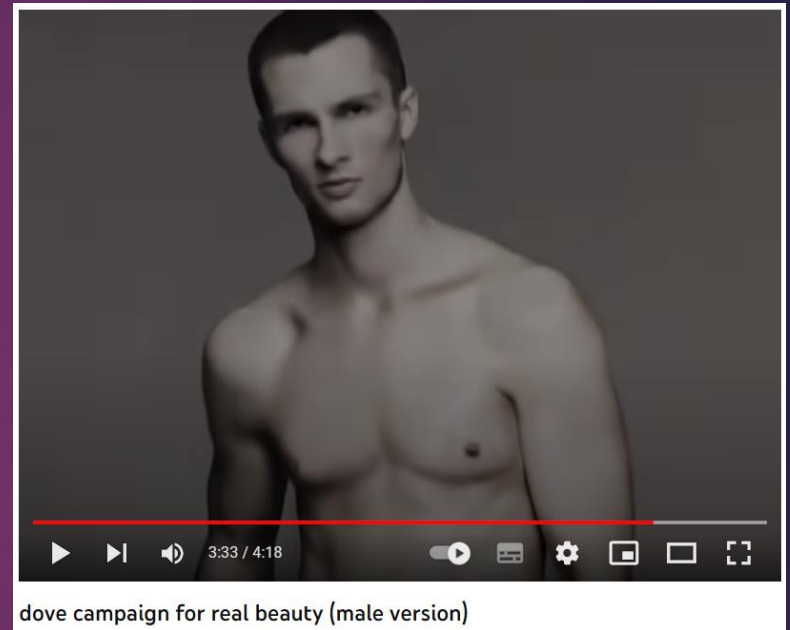
Podcasts and Videos	<ul style="list-style-type: none"> The PodClass – Positive Nutrition Messaging in Schools Teacher's Fan Club – Weight Neutral Wellbeing series Building Body Confidence in the Classroom
Resources	<ul style="list-style-type: none"> Be Nourished online workshop Comprehensive School Health Hub

www.interiorhealth.ca/sites/default/files/PDFS/weight-bias-and-stigma-in-schools



www.iso1200.com///before-and-after-photoshop-ethics Karl Taylor

MEDIA LITERACY



www.youtube.com/watch?v=-_I17cK1ItY

Digital Manipulation is the Norm



[YouTube/Dove Evolution Of Beauty](#) (75 sec.)

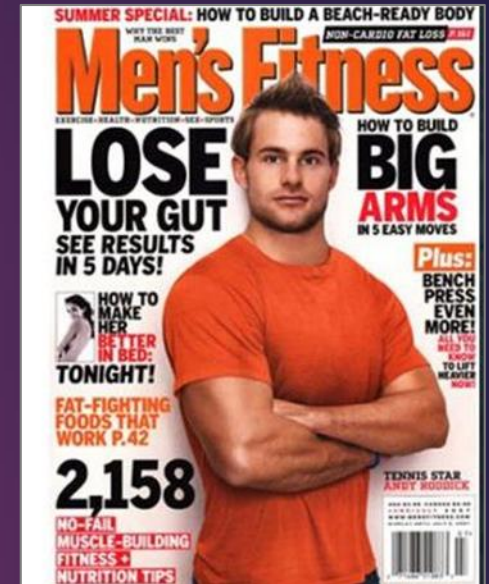
Ask students

- What did you think about this video?
- How did watching it make you feel?

Media Messages about the BODY

- ❑ Thin ideal, Youth as ideal
- ❑ Size/shape can change quickly & easily
- ❑ Lack of body diversity (race, gender)
- ❑ Rigid masculinity & femininity
- ❑ Ignore body's clues (hunger, pain...)
- ❑ Powerless/dependent body positioning
- ❑ Objectification, victimization
- ❑ Unattainable...by design!

Source [Renfrew Center Foundation for Eating Disorders](#)



Media Messages about FOOD

- ❑ Food as good or bad
- ❑ Food items as forbidden
- ❑ Foods as causing guilt
- ❑ Fad diets work
- ❑ Foods as safe or unsafe
- ❑ Food should be cancelled out (by exercise...)
- ❑ Food linked to values (morality, self-discipline...)



Media Leverage Points of Manipulation

- ❑ Physiological - shelter, sleep, reproduction
- ❑ Safety - employment, resources, health
- ❑ Love/belonging – friends, family, intimacy, acceptance
- ❑ Self-esteem – confidence, achievement, respect
- ❑ Self-actualization – morality, creativity
- ❑ Power – recognition, success, prestige
- ❑ Fun – enjoyment, laughter
- ❑ Freedom – from distress, dependence



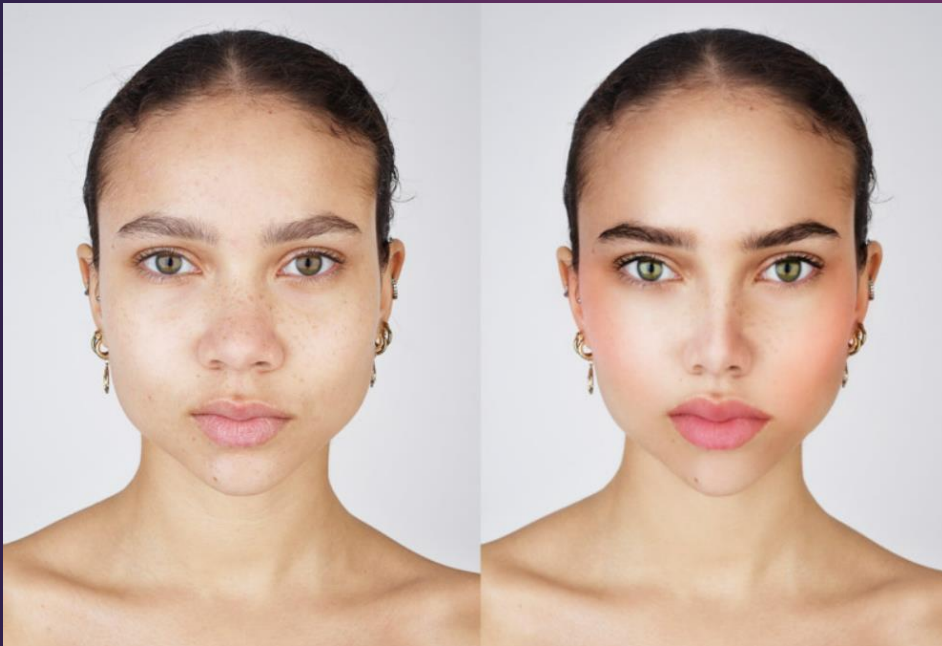
Source: Renfrew Center Foundation
for Eating Disorders

Thinking critically about media

- ❑ Who is providing the information?
- ❑ Why are they providing this information?
- ❑ What human need is it targeting?
- ❑ Could the information be biased?
- ❑ Could the information be false?



What percentage of young women filter or edit their images before posting?



60%

70%

80%

90%

petapixel.com/2019/02/07/these-teens-were-asked-to-edit-their-own-portrait-for-social-media/

www.sciencedaily.com/releases/2021/03/210308111852.htm

Social Media Questions for Students

- ❑ How many social networks are active on?
- ❑ How many hours per day (or week) do you spend on social media?
- ❑ How do you feel after spending long periods on social media?
- ❑ Do you or your friends use tools to change the images you post?
- ❑ Does social media affect how you feel about your appearance?
- ❑ On your social media networks, what values and points of view are represented... or missing?

Excerpts from [MediaSmarts.ca/////media_effects_on_body_image](https://www.mediasmarts.ca/mediasmarts/2014/05/15/media-effects-on-body-image/)



Body Image & Media Literacy Teaching Resources

Free &
downloadable

- BeyondImages.ca Gr 4-8
English & French
- MediaSmarts.ca K-12
- TeachBodyImage.com K-8



Promoting Positive Body Image – A Resource for Educators



This resource supports school staff and others with promoting positive body image and relationships with food for children and youth. It also offers tips and resources to guide staff with addressing weight-based bullying and what to do if they are concerned about a student's eating.

Supporting Health and Educational Outcomes with a Comprehensive School Health Approach

Environment:

- Use body diverse visuals
- Remove scales
- Avoid comments around dieting, weight or body shape (yourself and others)
- Schedule adequate time for eating
- Frame physical activity as fun and social, not as a way to control weight
- Ensure desks and chairs fit all bodies
- Talk about all foods neutrally (e.g. No good foods, bad foods)
- Do not connect food, eating, or activity to body size

Teaching and Learning:

- Use Teach Food First for nutrition education in grades K-8
- When teaching about health, disconnect weight from health. Instead, focus on adequate sleep, physical activity, self-compassion, self-regulation, and mindful eating.
- Avoid food logs and calorie counting
- Encourage critical thinking skills around social media/messaging related to food/weight/shape
- Normalize increase in weight, body fat, and appetite during growth and puberty

Policy:

- Ensure anti-bullying policies include body shape and size
- Create policies on meal supervision roles
- Have weight-neutral rationale for non-food reward policies
- No calorie information on school food menus
- Respect parents' roles in food selection and offer support as needed

Partnerships:

- Work with public health staff
- Vet guest speakers (weight-inclusive, trauma-informed)
- Refer to appropriate supports when disordered eating/eating disorders suspected
- Partner with Jessie's Legacy, Foundry, Health Authority, MCFD, and other youth service providers

jessieslegacy.com/promoting-positive-body-image-a-resource-for-educators

Positive Practices

- Self-care
- Practice self-compassion
- Practice gratitude
- Surround yourself with positive people
- Shut down negative self-talk
- Social-emotional learning activities
- Practice compliments & affirmations that are not appearance-related



Sharing

Please share about successes in talking with children or youth about

- Body image
- Self-esteem
- Self-compassion
- Media/advertising
- Food & nutrition



Discussion | Q and A



Please take a moment to complete the feedback form

Feel free to be in touch for resources/training

Helene.Dufour@islandhealth.ca

With thanks to:



- ANEBquebec.com
- BC Dairy
- Carol Tickner, RD
- Crystal Frost, RD
- Dove Real Beauty
- EllynSatterInstitute
- Jessie's Legacy
- Katie Maki | FEAST
- Kelty Mental Health
- [National Eating Disorder Information Centre \(NEDIC\)](http://National Eating Disorder Information Centre (NEDIC))
- Renfrew Centre for Eating Disorders
- Island Health Public Health Dietitians

MORE RESOURCES



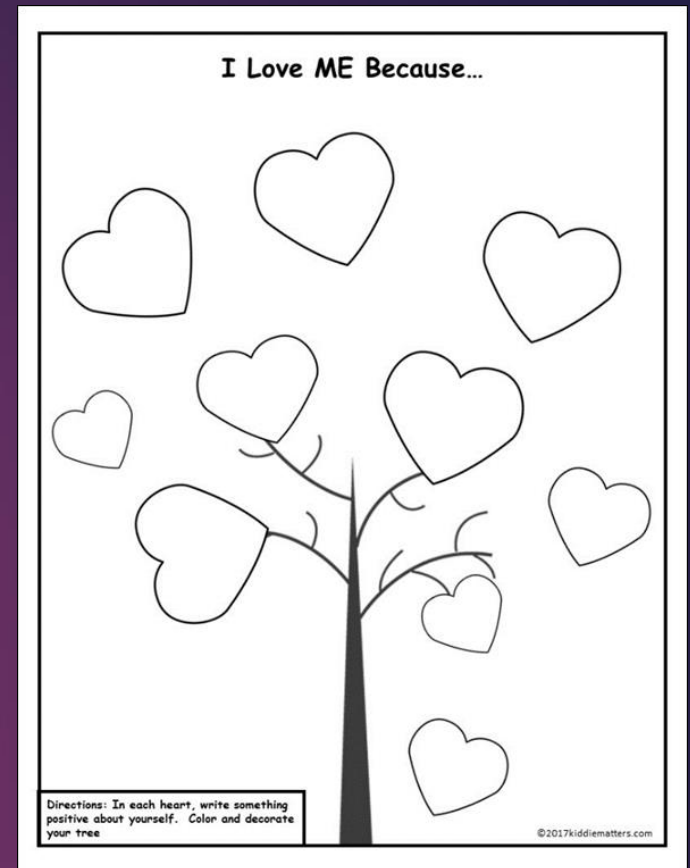
I am... Amazing Adventurous Articulate
 Awesome Affectionate Adaptable
 Ambitious Athletic Able Beautiful Bold
 Brave BRIGHT Busy Brilliant Charming
 Capable Caring Calm Creative Co-operative
 Considerate Daring Devoted Dependable Diligent
 Determined Efficient Exuberant Energetic
 Eager Faithful Fair Funny Friendly Flexible
 Forgiving Generous Gentle GRATEFUL
 Genuine Happy Helpful Honest HEALTHY
 Imaginative Independent Inventive Intelligent
 Jovial Joyful Jolly Kind Knowledgeable
 Loving Loyal Likeable Motivated Mature
 Modest Marvellous Neat Noble Nice Observant
 OPTIMISTIC Organised Open Proud Patient
 Polite Positive PERSERVERANT Punctual
 Quick Quiet Respectful Relaxed Reliable
 Responsible Resourceful RATIONAL Supportive
 Strong Successful Sincere Thoughtful Trustworthy
 Truthful Tactful Understanding Upbeat
 Unique Vibrant Vivacious Victorious Witty
 Warm Wise Worthwhile EXCELLENT Exciting
 Youthful Yielding Zany Zealous Zesty



Self-esteem activity

Break into groups of 2-4 and talk about what you like about yourself that are not related to your appearance.

Answers can be shared with the larger group, or given in a written form for the teacher.



Give-one, Get-one Self-esteem Activity

- Can be done in small groups or with the whole class
- Have students practice giving a positive comment that is **not body related**, and to receive one as well (not negate it)



50+ COMPLIMENTS THAT *have nothing to do with* With Appearance

- 1 You're such a good listener.
- 2 Your light shines so brightly!
- 3 I love how passionate you are about ____.
- 4 You make people feel important.
- 5 You're a strong person.
- 6 Your happiness is contagious.

Self-Care

Figuring out your needs and taking active steps to meet them

What do you do for self-care?

Types of Self-Care

Physical



Sleep
Stretching
Walking
Exercise
Nutrition
Yoga

Emotional



Stress Management
Coping Skills
Compassion
Therapy
Journaling

Social



Boundaries
Support System
Positive Social Media
Communication
Friends

Spiritual



Time Alone
Meditation
Prayer
Nature
Sacred Space

Personal



Hobbies
Creativity
Goals
Identity
Authenticity

Space



Safety
Healthy Environment
Stability
Clean Space

Financial



Saving
Budgeting
Money Management
Paying Bills
Boundaries

Work

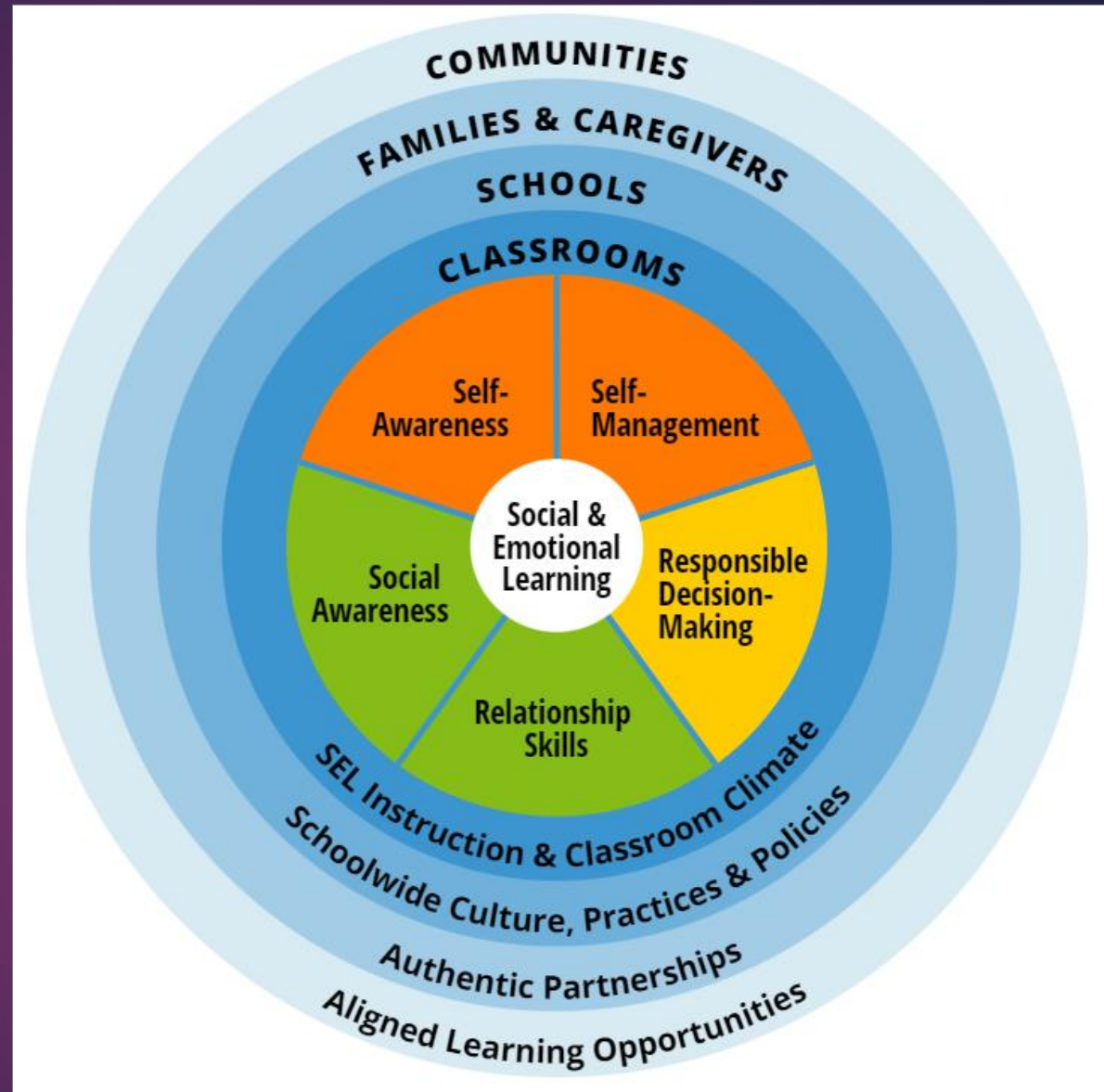


Time Management
Work Boundaries
Breaks

Social-emotional learning (SEL)

Emotional intelligence is the ability to recognize, interpret and process emotions in yourself and others.

- ✓ Self-awareness
- ✓ Self-management
- ✓ Social awareness
- ✓ Social Skills



[CASEL Social Emotional Learning Exchange](#)

nedic

National Eating Disorder Information Centre



SHEENA'S PLACE

Twenty Five Years of
Support for Eating Disorders

Food Insecurity & Eating Disorders: A Panel Discussion

Featuring: Rosie Mensah, jade guthrie, Dr. Carolyn Becker, and Amber Bent

July 27, 2021

Play (k)



0:01 / 55:50



<https://www.youtube.com/watch?app=desktop&v=263HdKaoq7A>

56 minutes

BC Children's Kelty Mental Health

Home - Kelty Eating Disorders

BC Children's
Hospital,
Healthy
Minds
Centre,
Vancouver

Mental health and substance use resources and peer support for BC families with a child or youth up to age 24y, free of charge.

Phone line 1-800-665-1822
Open weekdays 9:30am to 5pm

keltycentre@cw.bc.ca
Zoom video call: call or email to arrange
In-person visits available
Translation services available

Vancouver Island Crisis Society (vicrisis.ca)



Vancouver Island
Crisis Society

*Helping People
Find Their Way*

[Home](#) [News](#) [Crisis Services](#) [Calendar](#) [Volunteering](#) [About Suicide](#) [Workshops](#) [Youth](#) [Shop](#) [VICS / Employment](#) [Donate](#) [Q](#)

Reach out

for support

Vancouver Island Crisis Line: 1-888-494-3888

24/7 Crisis Line

The 24-hour Vancouver Island Crisis Line is a service contracted by Provincial Health Services Authority and Island Health.
*Please see **note** if you are calling from outside of Canada.*

Crisis Text Services



Text to the
number below

250-800-3806

from your mobile.
Available from 6:00 pm to 10:00 pm
Pacific Time, seven days a week.

Crisis Chat Services



Offline. Next session: 6:00 PM,
Pacific Standard Time

Available seven days a week,
from 6:00 pm to 10:00 pm
Pacific Time.

If we are ever offline between 6:00 pm and
10:00 pm, we invite you to call the Crisis Line
at **1-888-494-3888**, available 24/7.

Access Island-Wide Resources



A comprehensive database,
serving Vancouver Island,
provides access to community resources.

Submit or update your resource.

Crisis Society News

Vancouver Island **Crisis Society updates** for and by

Food and Nutrition Myths abound!!

Registered Dietitians (RD) provide evidence-based food & nutrition information



Dietitian Services – HealthLink BC

HealthLink BC
HealthLink BC provides access to non-emergency health information and advice in British Columbia. Information and advice is available on our website or by calling **8-1-1**. For more information visit: www.healthlinkbc.ca

Dietitian Services at HealthLink BC
Our registered dietitians offer telephone, email, and web-based nutrition services to support the nutrition information, education, and counselling needs of B.C. residents and health professionals.

Hours of Operation: Monday to Friday 9am - 5pm Pacific Time

 Call **8-1-1** to speak with a registered dietitian. Translation services are available in over 130 languages.

 Email a HealthLinkBC Dietitian your questions about food and nutrition: www.healthlinkbc.ca/emaildietitian

Visit our website to learn about making healthy eating and lifestyle choices: www.healthlinkbc.ca/healthyeating 

Request referral forms. Health care providers can call **8-1-1** for telephone nutrition counselling referral forms. 

www.healthlinkbc.ca/healthy-eating-physical-activity

In BC, Registered Dietitians (RDs) are dedicated health professionals with education, training, expertise, and accountability to provide evidence-based nutrition advice.

RDs are the only nutrition professionals regulated by law.

Nutritionists, Holistic Nutritionists and Certified Nutritionists are not regulated in their training requirements or their practice.