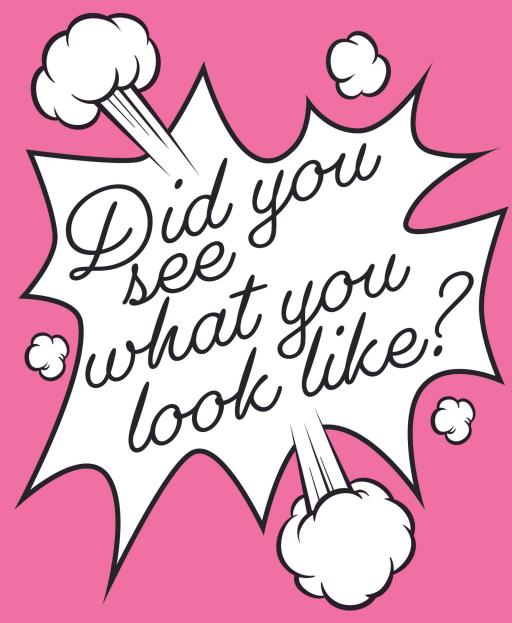
ACTIVITY GUIDE FOR TEACHERS AND YOUTH WORKERS



NO ONE SHOULD TALK TO THEMSELVES THAT WAY. If you're struggling with an eating disorder, we're here for you.



NATIONAL EATING DISORDERS AWARENESS WEEK February 1st to 7th 2022 semainetroublesalimentaires.com #EDAW2022

AN INITIATIVE OF







NATIONAL EATING DISORDER AWARENESS WEEK



FEBRUARY 1 to 7 2022

No one should talk to themselves this way. If you're struggling with an eating disorder, we're here for you.

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NATIONAL EATING DISORDER AWARENESS WEEK



Ressources

Anorexia and Bulimia Quebec

- (L) 1-800-630-0907 or 514-630-0907
- info@anebquebec.com and info@anebados.com
- mww.anebquebec.com et anebados.com

Clientele: 12 years and over across the province. The services are offered for people suffering from an eating disorder and their loved ones.

Services: A help and reference line, intervention support by chat or texting, group chats, a help forum, open and closed support groups for people suffering from an eating disorder and their loved, conferences et training sessions, kiosks, webinars.

Maison L'Éclaircie

- **(**) 418-650-1076
- www.maisoneclaircie.qc.ca

Clientele: 14 years and over in the Natonial Capital region and the Chaudière-Appalaches region (with exception of the help line and the chat service). The services are for people suffering from or who have behaviors associated with anorexia or bulimia and their loved ones.

Services: A help line and a chat service, individual therapy or group meetings (psychotherapy and nutrition), individual therapy for people suffering from anorexia or bulimia and for their loved ones, a reference service, group discussions, kiosks, school and community prevention conferences.



For a full list of our partners or for other references in the province, please visit the NEDAW website at live.semainesemainetroublesalimentaires.com or anebquebec.com website.

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ACTIVITY GUIDE FOR TEACHERS AND YOUTH WORKERS

Introduction to the NEDAW of 2022



No one should talk to themselves that way. If you're struggling with an eating disorder, we're here for you.

This year's National Eating Disorder Awareness Week (NEDAW) campaign slogan focuses on the inner voices of people with eating disorders (EDs). It's often said that people with EDs have two voices in their heads: the voice that's been there from the beginning, and the voice of the eating disorder. It's as if two entities co-exist in the person's mind.

Since an eating disorder is a mental health issue, people grappling with an ED often have unhealthy thoughts about themselves, their bodies, their diets and their eating behaviours. These thoughts can be described as self-talk or the voice in their heads that is constant, demeaning and distressing for the person.

The voice of the illness, sometimes called the "eating disorder voice," is often overpowering and represents a threat to the person's mental health. It's therefore essential to silence this unhealthy voice and so that the person's gentle, caring and healthy voice can be heard again.

In this Activities Guide, you'll find: (1) a description of eating disorders and their characteristics; (2) a quiz on EDs; (3) a mantra creation activity; and (4) an art project on positive thinking.

We hope this Guide will help you and your young people better understand eating disorders, increase your awareness of their causes, and generate discussion about EDs as a mental health issue.

Hoping you find these texts and the activities useful and enjoyable,

Josée Lavigne Education and Prevention Coordinator at ANEB Quebec



Introduction : Dysfuntional Relationship with Food as a Continuum

Anyone can display dysfunctional eating behaviours without having an actual eating disorder. Some experts like to think of eating disorders as existing on a continuum. One end of the continuum represents full-fledged eating disorders and a distorted view of body image, and the other end represents healthy eating attitudes and views of body weight and shape. We're all likely, at one time or another, to have a somewhat unhealthy relationship with food and our bodies. Acting quickly and asking for help in such situations can curb the development of dysfunctional behaviours. For that reason, we at ANEB welcome anyone who needs help, no matter where they are on the continuum.

Characteristics of eating disorders

Eating disorders are complicated disorders, characterized primarily by severe disturbance in eating behaviours, and are usually accompanied by an intense fear of gaining weight and an obsession with body image.

The following definitions are based on those in the DSM-5 (*Diagnostic* and Statistical Manual of Mental Disorders, Fifth Edition).

Anorexia nervosa is characterized by:

- a deprivation of food or restriction of energy intake;
- an intense fear of gaining weight that is not alleviated by weight loss (in fact, concern about weight gain may increase even as a person's weight falls);
- a distorted perception of body weight and shape;
- **significant and rapid weight loss** achieved through risky behaviours, such as drastic dieting, fasting, purging, laxative misuse, and excessive exercise:
- several consequences, including extreme fatigue, slowed metabolism, excessive concern with food and weight, and social isolation.



Bulimia is characterized by:

- **frequent episodes of binge eating**, i.e., eating far more food than most people would eat in a given period of time under similar circumstances. These episodes are often experienced in secret and followed by feelings of shame and guilt;
- a sense of lack of control over eating during the binge-eating episode;
- recurring inappropriate compensatory behaviours following binges to prevent weight gain (such as fasting, self-induced vomiting, misuse of laxatives/diuretics, and excessive exercise);
- distorted negative body image;
- self-esteem that is unduly influenced by body weight and shape.

Binge-eating Disorder is characterized by :

- frequent episodes of binge eating, i.e., eating far more food than
 most people would eat in a given period of time under similar
 circumstances. These episodes are often experienced in secret and
 followed by feelings of shame and guilt;
- a sense of lack of control over eating during the binge-eating episode;
- no compensatory behaviour;
- an obsession with food and dissatisfaction with the body;
- self-esteem that is unduly influenced by body weight and shape.



Avoidant/Restrictive Food Intake Disorder (ARFID) is characterized by:

- an apparent lack of interest in eating or food;
- avoidance of eating based on the sensory characteristics of food;
- concern about aversive consequences of eating;
- persistent failure to meet appropriate nutritional and/or energy needs associated with one or more of the following:
- 1. **significant weight loss or failure to achieve expected weight gain** or faltering growth in children;
- 2. significant nutritional deficiency;
- 3. dependence on enteral feeding or oral nutritional supplements;
- 4. marked interference with psychosocial functioning.

Orthorexia (an obsessive-compulsive disorder) is characterized by:

- an obsession or fixation with eating foods considered healthy;
- refusal to eat or discomfort with eating foods perceived as unhealthy;
- weight loss or thinness is not necessarily the desired goal;
- excessive fear of developing an illness as well as feelings of anxiety or shame when the person deviates from their dietary restrictions;
- an obsession or fixation with planning, choosing, preparing and eating food for health reasons rather than for pleasure.



Bigorexia (or muscle dysmorphia) is characterized by:

- preoccupation with the idea that the body is insufficiently lean or muscular;
- social isolation and withdrawal from important social, occupational and/or recreational activities may be consequences of the person's desire to maintain a strict routine of physical or dietary activities;
- the likelihood of social avoidance to prevent exposing one's body to others;
- a pattern of persistent behaviours due to preoccupation with the body despite significant physical and psychological consequences. These behaviours may include regular workouts, dieting, and/or taking performance enhancing substances;
- the likelihood of experiencing high levels of anxiety and distress.

Unspecified eating disorders: Unspecified eating disorders include issues that do not meet the full criteria for specific eating disorders like anorexia nervosa, bulimia and binge-eating. However, people struggling with an unspecified eating disorder can suffer from low self-esteem, have an obsession with body image, and experience significant distress.



It is also important to mention the following eating disorders and emerging issues that are not yet well known:

Pica: A DSM-5 classified eating disorder characterized by an irrepressible and persistent urge to consume non-food substances.

Rumination: A DSM-5 classified eating disorder characterized by the voluntary regurgitation of food into the mouth which may then be rechewed.

Alcohorexia: The practice of planning periods of restricted eating in order to consume large quantities of alcohol without gaining weight.

Mummyrexia (or pregnorexia): A form of anorexia observed in pregnant women, in which the woman goes on a strict diet during pregnancy to avoid gaining weight at all costs for fear of having difficulty losing it after delivery.

Diabulimia: A form of bulimia among people with type 1 diabetes, in which the person binges then engages in the compensatory behaviour of restricting insulin in order to lose weight.

THE EDAW 2022 QUIZ ON EATING DISORDERS

Clientele

Objectif of the activity

14 years and over

Become more knowledgeable on eating disorders.

Material

- paper 8.5 x 11
- pencils
- questions and answers (for the teacher or youth worker)

Guideline

This quiz can be done individually or with the entire class or group.

It is recommended that the teacher or a student reads aloud one question at a time and asks the group to answer. The correct answers can then be given with its explanation.



- 1.True or false: An eating disorder is the most common mental illness among adolescents.
- 2. True or false: In Quebec, the number of young people hospitalized with eating disorders has doubled since the pandemic began.
- 3. True or false: An eating disorder is not considered a mental illness.
- 4. True or false: An eating disorder has the highest mortality rate of all mental illnesses.
- 5. True or false: Only people who are underweight have an eating disorder.
- 6. True or false: Only adolescents are affected by eating disorders.
- 7. True or false: People who have an eating disorder or who have recovered from one may be more at risk of developing some form of substance abuse.

QUESTIONS



- 8. True or false: Only women can and do suffer from eating disorders.
- 9. True or false: There are only two types of eating disorders: anorexia and bulimia.
- 10. Which of the following is not classified as an eating disorder in the DSM-5?
- a. Anorexia
- b. Bulimia
- c. Binge-eating
- d. Bigorexia
- e. None of the above
- 11. True or false: There is only one type of anorexia.
- 12. True or false: Everyone with an eating disorder needs to be hospitalized.
- 13. True or false: A person can go from one eating disorder to another, even if they've been diagnosed with a specific ED.
- 14. True or false: Once a person recovers from an eating disorder, they're no longer be at risk of developing one.
- 15. True or false: Excessive exercise is one of the compensatory behaviours of people with bulimia.
- 16. True or false: There are risk factors that predispose a person to developing an ED.

QUESTIONS



- 17. True or false: Low self-esteem necessarily means that an individual will develop an eating disorder.
- 18. True or false: Eating disorders can be accompanied by other mental illnesses such as depression and anxiety.
- 19. True or false: A person with an eating disorder may engage in self-harm.
- 20. True or false: An obsession with weighing oneself several times a day may be a sign of an eating disorder.
- 21. True or false: Elementary school girls are too young to display worrisome eating behaviours or be preoccupied with body image.

MANTRA CREATION WORKSHOP



Material

paper

pencils

Clientele

For all ages

Objective of the activity

In light of the theme for this year's Eating Disorders Awareness Week—*No one should talk to themselves that way*—we thought it would be appropriate for you to conduct a workshop with your groups in which everyone would create a positive personal mantra.

Before you begin, we would encourage you to discuss eating disorders with your students and young people. You can base yourself on the definitions provided at the beginning of this guide.

Introduction

We suggest that you ask participants to form a circle in order to create an atmosphere conducive to listening and learning.

The theme of EDA Week 2022 emphasizes the experience of people with an eating disorder, which is a mental health issue. In every person living with an ED, the voice of the illness dominates the person's healthy, positive voice. It's as if people with an ED have two voices in their heads. The voice of the illness is a powerful, negative voice that bullies the person into having destructive thoughts and behaviours. This workshop is intended to give participants an opportunity to think about what people with an ED experience every day and to reflect on the power of their inner voices and the words they use.

MANTRA CREATION WORKSHOP



What is a Mantra?



Of ancient origin and originally composed by the sages of India and Tibet, a mantra is a word, sound or group of words normally repeated during meditation. It is designed to protect the mind. In this workshop, mantras will be created using words or phrases that are positive and beneficial for the mind. The power of a mantra is based on the repetition of it.

The Workshop (Part 1 – 10 minutes)

Divide the group into small teams of 3 to 5 people. Choose a secretary to write down each team member's thoughts, words, phrases and ideas. Choose one idea, or more if the group is small, to be presented by the team.

(Part 2 – 20 minutes)

After each team has discussed and written down their ideas, the entire group will gather to see and hear each team's mantra. The teacher or youth worker will write down each team's ideas on the board or on a large sheet of paper. The teacher or youth worker will then ask each team to explain why they choose those particular words or phrases. For example, if someone chose the phrase "I'm enough," they might explain that they did so as a result of a need to be accepted for who they are and not for what they have accomplished.

MANTRA CREATION WORKSHOP



(Part 3 – 20 minutes)

Choose the first mantra and have everyone recite it together out loud. Have them repeat the mantra several times (10-20 times).

Depending on how much time you have, you could choose several mantras and have the group recite them together several times.

Conclusion

Through this exercise, I hope you gain a better understanding of what people with an eating disorder may be experiencing and how powerful words and mantras can be. Developing a strong, positive mindset can be a protective factor against EDs or other mental health conditions.

Before you leave, we invite you to choose a mantra that resonates with you personally. You can repeat it to yourself throughout the day and particularly when you feel your mental energy waning.



Référence : https://lameditation.fr/mantra/

ART PROJECT ON POSITIVE THINKING





PART 1: Analysis of the Campaign Poster

Clientele

*14 ans and over

This art workshop is based on the poster designed by Cossette for the EDA Week 2022 campaign.*The analysis section of the activity is adapted to an older clientele but the art workshop can be done with a younger public.

1.Before we begin the workshop, let's take a look together at the poster designed by Cossette for EDA Week 2022. Let's take the time to consider each element of the poster carefully.

Q: Could someone read the message in the thought bubbles and the slogan beneath them out loud? (Wait for someone to volunteer.)

2. An analysis of the artistic/aesthetic elements of the poster:

What do you notice?

Q: Let's start with a discussion about what takes up the most space on the poster.

A: The thought bubble.

Q: Does the shape of the thought bubble make you think of a particular style of illustration? (See the appendix on thought bubbles and discuss this question further with participants.)

A: Comics.

Q: What does the type of writing used here remind you of?

A: Cursive writing that almost looks like handwriting.

Q: What is the message in the bubble?

A: The message in the bubble is an inner message (the person is speaking directly to himself or herself).

The message is negative.

The message reflects the eating disorder voice.

ART PROJECT ON POSITIVE THINKING





Part 1: Analysis of the Campaign Poster

Q: How does this type of statement make you feel?

A: (Wait for participants to answer. There are no wrong answers since their response is subjective.)

Q: How does the slogan at the bottom of the poster provide a better understanding of the message in the bubble?

A: The slogan or statement under the thought bubble emphasizes the negative voice of the illness or eating disorder. It reminds people that this way of thinking is unhealthy and that they need help to get beyond it. It also mentions ANEB and Maison l'Éclaircie, which can provide assistance to people grappling with eating disorders.

Q: What do you think of the colours used for the background of the poster, i.e., as a backdrop to the thought bubbles?

A: The colours are clear and bright. They also reflect the world of advertising and design.

Let's now start the Art Project.



ART PROJECT ON POSITIVE THINKING





Part 2: Art Project

Materials needed for the workshop:

- sheets of newspaper for the sketch
- thick paper like cardboard, ideally for wet or dry media, 12" x 17" or 14" x 20"
- pencils and erasers
- coloured pencils
- acrylic paint or gouache in a variety of rich colours
- thick-tipped black markers (like Sharpies)

The workshop proceedings:

Now that we've analyzed the poster designed by Cossette for EDA Week 2022, we'll now create a project that reflects positive thinking.

Preparing a draft drawing:

- 1. Choose a positive statement that resonates with you personally. It could be something like "I'm brave," "I'm determined," I'm passionate," "I'm intelligent," or "I have many talents," for example.
- 2. Then decide which type of bubble is most appropriate for your positive thought. This will depend on whether your thought is an actual thought, a spoken comment or a statement you shout to the world?
- 3. Draw your bubble on a sheet of newspaper and write your positive thought in it. Remember that the lettering or writing you choose is one of the aesthetic components of your project. You can use your regular handwriting, being sure to write neatly, or a font you can find online or in programs like Microsoft Word or Adobe Photoshop. We can also highlight your thought with a marker.
- 4. Next, think of one or more shapes, symbols or designs that you would like to include in the background of your bubble, to emphasize your thought or enhance the aesthetic quality of the work. Then go ahead and draw your shapes or designs.
- 5. Optional: Choose a background colour from among those of your coloured pencils.

ART PROJECT ON POSITIVE THINKING





Part 2 : Art Project

Dry media

- 1. Put your draft drawing, pencil, eraser, Sharpie and cardboard on the table.
- 2. Using the pencil, copy your draft drawing onto the cardboard, taking care to include your bubble, your positive thought and the shapes or designs in the background.
- 3. Using the black Sharpie, write over your positive thought, the outline of the bubble and the shapes or designs. You can accentuate it all by going back over it with the marker and making it thicker.
- 4. Once you've completed the drawing, we can go on to the painting stage. Remove the dry media from the table, including the draft drawing.

Wet media

- 5. Put a plate with the colour of paint you've chosen on the table. For my example, I chose magenta and white. Also set out brushes (wide and/or medium and/or fine, depending on your shapes or designs). You can then add a small jar filled with a bit of water and a disposable towel. Be sure to use the water only when the paint is too thick. Ideally you would work on a dry medium and with a dry brush.
- 6. Paint into your shapes or designs, taking care not to hide the lines created in black marker. You may also work with different shades of the color of the paint chosen by adding a bit of white to your main color or by diluting a little bit your paint color with water.
- 7. Wash the brush and plate and allow your work to dry.
- 8. Once the work is completed, you can present it to the group.
- 9. If you wish, you can take a photo of yourself with your work (placing it in front of you) and post it on social media with the tag #EDAW2022.



- 1.**False**: An eating disorder is the third most common mental illness in adolescents.
- 2. **True**: The number of hospitalizations has doubled since the pandemic began, rising from 110 to 220.
- 3. **False**: Eating disorders are mental illnesses and are classified in the DSM-5, the authoritative guide used by psychologists and psychiatrists.
- 4. **True**: Eating disorders have the highest mortality rate of all mental illnesses. This is due to physical complications, such as heart attacks and organ failure, and/or to psychological suffering that leads to suicide. Eating disorders are serious mental illnesses that require a great deal of support, in many cases from a multidisciplinary team.
- 5. **False**: An eating disorder can affect anyone regardless of their weight. It's a common misconception that only extremely thin people suffer from an eating disorder.
- 6. **False**: Eating disorders do not discriminate and can affect anyone regardless of age, culture, religion, gender, socioeconomic background or sexual orientation.



- **7. True:** People who are suffering from an ED or who have recovered from one may be more at risk of developing some form of substance abuse.
- **8. False:** Men also grapple with eating disorders. In fact, 5% to 10% of men suffer from anorexia, 10% to 15% of men are affected by bulimia, and 2 men for every 3 women struggle with binge-eating. Bigorexia, an emerging ED, affects primarily men.
- **9. False:** There are many types of eating disorders, such as binge-eating, avoidant/restrictive food intake disorder (ARFID), as well as emerging disorders such as bigorexia and orthorexia.
- **10. d: Bigorexia:** Bigorexia is not classified as an eating disorder in the DSM-5, but as body dysmorphia. People specializing in EDs consider bigorexia to be an emerging issue.
- **11. False:** There are two types of anorexia: the restricting type, and the binging and purging type.
- **12. False:** Hospitalization is the last stage of care for a person with a severe eating disorder. However, with psychological support and medical follow-up, a person can avoid hospitalization.



- 13. **True**: It's very common for someone with an ED to go from one eating disorder to another. When someone with an ED does not meet the diagnostic criteria, they are considered to have an unspecified ED.
- 14. **False**: Someone who has recovered from an eating disorder may remain vulnerable to relapse.
- 15. **True**: Excessive exercise is, in fact, one of the compensatory behaviours of people with bulimia. Other compensatory behaviours include laxative misuse, fasting and self-induced vomiting.
- 16. **True**: There are individual, family, cultural and genetic factors that put an individual at greater risk of developing an ED.
- 17. **False**: People with low self-esteem do not necessarily develop an eating disorder. Low self-esteem is one of the risk factors. However, a number of other significant factors must also be involved, including psychological factors, such as dissatisfaction with body image.
- 18. **True**: Eating disorders are often accompanied by other mental illnesses, especially mood disorders such as depression and anxiety.



- 19. **True**: There is a correlation in certain individuals between EDs and behaviours such as self-harm.
- 20. **True**: For this reason, it's recommended that the scale be removed so that the person suffering from an ED does not obsess over his or her weight.
- 21. **False**: Unfortunately, some girls as young as 5 years of age exhibit worrisome body image behaviours that can lead to an ED later on.



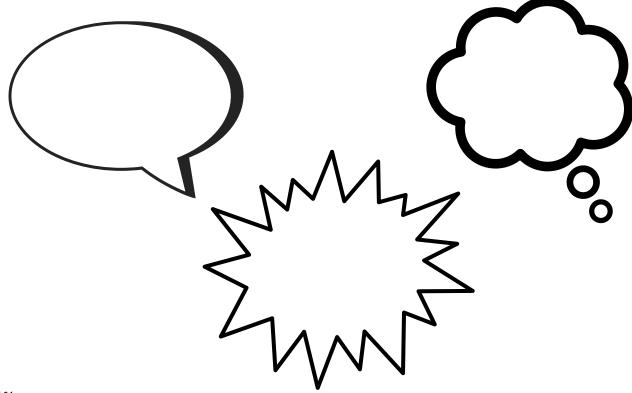
ART PROJECT



The speech bubbles or balloons used in comics illustrate when a character is speaking, thinking or yelling. They are made up of three different parts: (1) the bubble itself which surrounds the text; (2) the actual text; and (3) the tail, which can have different shapes.

When a character is speaking, the basic bubble with an oval shape is used, with a tail pointing toward the speaker. When a character is thinking, the same oval shape is used, with a tail made up of three smaller bubbles pointing toward the character thinking. When a character is screaming or yelling, a jagged-edged bubble is used with a sharp tail pointing to the speaker. (See the three examples of bubbles below.)

It should be noted that there are also other more creative types of bubbles, for example, a bubble in the shape of a star or a heart.



APPENDIX 2.2: AN EXAMPLE OF THE ART PROJECT

ART PROJECT





example by Josée Lavigne, Art Educator