

visions

finding safety
in your body

diet for
depression

nourishing and
moving our
bodies

visions

Published quarterly, *Visions* is a national award-winning journal that provides a forum for the voices of people experiencing a mental health or substance use problem, their family and friends, and service providers in BC. It creates a place where many perspectives on mental health and substance use issues can be heard. *Visions* is produced by the BC Partners for Mental Health and Substance Use Information and funded by BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority.

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bc partners and heretohelp

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* footnotes reminder

If you see a superscripted number in an article, that means there is a footnote attached to that point. In most cases, this is a bibliographic reference. For complete footnotes, see the online version of each article at www.heretohelp.bc.ca/visions.

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remembering
dan reist

It's with heavy hearts that everyone at *Visions* and the BC Partners for Mental Health and Substance Use Information marks the passing of a beloved colleague, Dan Reist. Dan was a senior leader with the Canadian Institute for Substance Use Research and a founding member of the BC Partners. *Visions Journal*, our HeretoHelp website and Healthy Minds | Healthy Campuses would not exist as the knowledge-sharing mechanisms they are today without Dan's influence. Dan was a frequent past contributor to *Visions*. (To read some of Dan's past articles, go to heretohelp.bc.ca/search and type in "Dan Reist" including the quotation marks).

Dan was a dynamic facilitator, advocate and educator but, first and foremost, he was a thought leader. Dan taught me almost everything I know about substance use education and health promotion. He always anchored his work in theory, application and deep humanity. He helped the BC Partners learn how to adopt a nonjudgmental stance around substance use, how to centre personal agency and resilience, how to normalize drug use, how to take a settings-based approach, and how discussing substance use is discussing mental and social well-being.

Thank you for your legacy and friendship, Dan. We will always remember you.

— Sarah Hamid-Balma, *Visions* Editor-in-Chief, 2007-2020

editor's message

It is my pleasure to be the new Editor-in-Chief for *Visions Journal* and to lead this issue on nourishing and moving our bodies and the role they play in mental health. Putting together this issue was a challenging but rewarding task because as a young person growing up in the era of social media, I have seen our culture's obsession with looking a certain way and often times it comes under the guise of "health." "Looking good" is misconstrued as being the leanest and toned while "eating well" can be diet culture wrapped in a bow. As the editorial board and I cultivated the stories in this issue, we wanted to ensure we teased out those toxic threads that can give way to some harmful rhetorics around "health." Instead, we aimed to showcase nourishment and movement in all its diverse forms which includes self-compassion, body inclusivity, intuitive eating and movement for the sake of feeling good.

As a Pakistani-Canadian, food is a big part of my culture and so is sharing food with others. *Dawats* (read: dinner parties) with friends and family fill up my weekends which allow everyone to come together over food and to connect. Research and personal experiences tell us that social connection is a major booster in mental health¹ and there is perhaps no better way to bring people together than over food.

Our Guest Editors, Zarina Giannone and Karen Giesbrecht, so eloquently describe how factors such as income, location and networks influence what we eat and often times what we eat impacts our mental health and vice versa! The same can be said for movement. Physical activity requires more than willpower; it is impacted by our built environments, work schedules, and other responsibilities. And while movement can help boost mental well-being, if someone is facing mental health issues, they may face additional barriers that limit their ability to exercise. As you'll read in the articles below, there is a close connection between food, movement and mental health and our contributors describe some of these interacting factors as well as lay out strategies and techniques to help boost mental well-being while sharing their personal stories.

So, with the recognition that nourishing and moving our bodies looks different across cultures, communities and bodies, we hope that there is a piece in this issue for everyone to enjoy. ▽

Bakht Anwar

Bakht Anwar

Bakht Anwar is Visions Editor-in-Chief and Leader of Health Promotion and Education at the Canadian Mental Health Association's BC Division.

Live, Work & Play for Your Mental Health

ZARINA A. GIANNONE, PHD, RPSYCH, CMPC
KAREN GIESBRECHT, MA, RD

While we must all take responsibility for how we live our lives, many of our health behaviours are shaped by the environments in which we live, work and play. In this article, we review connections between nutrition, physical activity and mental health.



Zarina A. Giannone



Karen Giesbrecht

Do we choose what we eat?

On one level, this is a simple question. You almost certainly have a good sense of what you like to eat and what you will pass up. But in many ways, we do not choose what we eat. There are numerous influences on our food choices, some which we can control and some which we cannot.

The biggest influence is our income. If people can afford good food, they usually choose it. And by good, we mean both good for us and tastes good. With enough income, we can even choose foods that are grown and produced in ways that are good for the environment, like organic vegetables

and free-range eggs. But for those who struggle to make ends meet, such choices are usually a luxury beyond reach, especially with climbing food prices.

Another big influence on what we eat is who we live with. Those who live with others and can share the work of grocery shopping, cooking and cleanup usually eat reasonably well, especially if everyone in the household is committed to healthy eating. Those who live in institutions or rely on community food programs can only choose from what is offered. Those who live alone must work harder to make good food choices.

Zarina is a Registered Psychologist and Certified Mental Performance Consultant. She works at the Vancouver Psychology Centre, where she offers psychotherapy, assessment and sport/performance psychology services to adolescents and adults. A high-performance athlete in her own right, Zarina has worked with recreational to Olympic-level athletes from various backgrounds. She is currently the team psychologist for the BC Lions

Karen is a registered dietitian with a particular interest in mental health, strong communities, good stories and real food. She wove all these together in Happy Colon, Happy Soul: An Exploration of Why and How we Share Food (Wipf & Stock, 2019). At home in Vancouver, Karen takes great delight in sharing good meals with her family, friends and those in her community who know hunger

Beyond our home, another influence is how close grocery stores and restaurants are to us, especially if we do not have access to a car. Individuals and families with lower income must often spend more money (for example, on cabs or ride shares), time and effort to get the groceries they need. It is harder to make good food choices if the foods we need are not accessible.

Another factor is our mental health. When overwhelmed with anxiety, depression or other strong emotions, it is really hard to find the energy to cook and eat well. Eating poorly amplifies mental health challenges. Medications are often helpful, but

some have side effects that impact appetite and digestion. We will not feel our best if we have too much ultra-processed food, caffeine or sugar. Everyone copes better with a regular rhythm of meals and snacks, plus enough water and fibre.

Other influences, like our culture, the weather, daily schedules and commitments, gut bacteria and our genetics also influence what we eat. So, consider for a moment the wisdom of the serenity prayer: accept what we cannot change and change what we can. Many of these influences we cannot change, but a few little steps can make all the difference. Eat

something with protein within a few hours of getting up. Have a glass of water when you finish reading this, or wherever you feel sluggish or have a headache. Try a new vegetable this week. Even if you just eat five percent better, it could be enough to help you cope with whatever your day throws at you.

Can movement be medicine?

Physical activity has a wide range of health benefits. Movement can help us reduce our risk of diabetes, sleep better and boost overall fitness and health. A lesser-known but powerful truth is that physical activity can also be extraordinary medicine for our minds. Physical activity means any voluntary body movement, ranging from structured exercise routines to everyday activities like using the stairs. It can be training for a marathon, active housework or simply going for a walk or wheel around the block.

The benefits of physical activity on our mental health cut across our biology, psychology and socio-cultural environments, or the customs, people and organizations we interact with often.

Biological advantages of physical activity include the release of “feel good” endorphins that make us feel happy and improve our mood. Other gains include less muscle tension and stress, better memory and more creativity and energy.

Psychological benefits of physical activity can involve building a sense of achievement that enhances self-esteem and body image. Physical activity also offers opportunities to focus our attention on a single task. When we are focused, we tend to worry less and



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Physical activity offers opportunities to focus our attention on a single task. When we are focused, we tend to worry less and we stop overthinking. Staying focused over time can make us more mindful and help us develop healthy coping behaviours and routines.



we stop overthinking. Staying focused over time can make us more mindful and help us develop healthy coping behaviours and routines.

Finally, social advantages of physical activity include things like engaging in positive social interactions, connecting with others in nature and establishing a sense of community and belonging.

The physical activity choice

Life can be hard sometimes, and many things get in the way of being active. We cannot always choose how close we live to parks, trails and community centres, or whether it will be too hot or too wet to get outside. Depression is another experience that can make physical activity feel much less attainable. But just as making small changes to how we eat can help us to feel better, there are things we can do to incorporate more movement into our lives.

1. Think small, think simple. Even small amounts of physical activity can make a big difference. If you are unable to walk, run or work out for longer periods, start with five to 10 minutes a session and slowly increase over time. You don't have to do anything elaborate. No bootcamp or expensive gear is necessary to get moving. Consider simple options that are accessible to you, like going for a walk, stretching or body weight exercises (like a push-up or yoga posture).

2. Do what you enjoy. Find activities that suit your personality and lifestyle. For example, if you enjoy the social component of physical activity, find a walking group or community sports team. If you prefer to exercise alone, music or an audiobook can make the

activity more enjoyable. Choosing the right activity for you will set you up for long-term success.

3. Overcome obstacles. Taking the first step is easier said than done. Identify barriers that may stand in the way of your physical activity routine and develop a plan to navigate them. Remember, you do not have to do it all alone. Consider consulting health and fitness professionals to help you set goals and support your movement journey (see sidebar).

Overall, choosing physical activity and good food every day will build up to significant changes over time. Your good choices will pay off! ▼

related resources

Some BC health and fitness professionals

- **Psychologists:** BC Psychological Association – psychologists.bc.ca
- **Clinical Counsellors:** BC Association of Clinical Counsellors (not yet regulated under the Health Professions Act of BC): bcacc.ca
- **Dietitians:** Dietitians of Canada – dietitians.ca/ and Dietitian Services at HealthlinkBC – healthlinkbc.ca/health-services/healthlink-bc-811-services/dietitian-services
- **Physiotherapists:** Physiotherapy Association of BC – bcphysio.org
- **Sports medicine practitioners:** SportMedBC – sportmedbc.com

Join Us at the Table

FOOD CONNECTIONS

BRUNO FELDEISEN, WITH JUDITH LAW OF ANXIETY CANADA

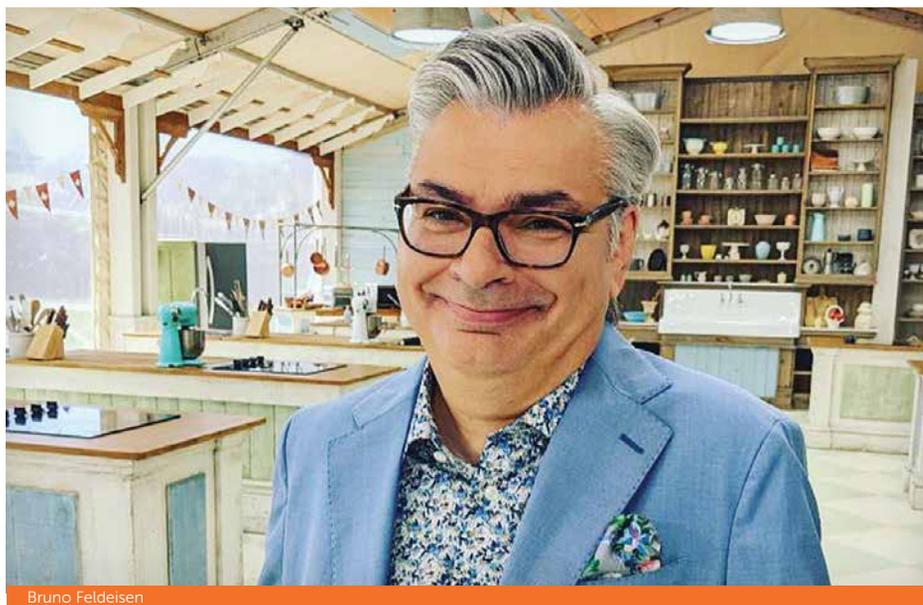
Bruno Feldeisen has achieved tremendous success in his career as a chef. He has also lived with debilitating anxiety that has, at times, interfered with his professional and personal life. During the past five years, Bruno has collaborated with Anxiety Canada to destigmatize anxiety and anxiety disorders.

Great Canadian Baking Show judge

Bruno Feldeisen was named one of the Top 10 Pastry Chefs in America by Chocolatier Magazine two years in a row and has been nominated twice for the James Beard Award for Outstanding Pastry Chef. He is also an Anxiety Canada Champion

Judith Law is the CEO of Anxiety Canada.

A management expert with decades of experience in public health programming, she is passionate about mental health



Bruno Feldeisen

He has done so as a Champion for Anxiety Canada by appearing on the #OurAnxietyStories podcast and regularly sharing his lived experience with anxiety and how he overcame posttraumatic stress disorder. The following is a conversation between Anxiety Canada's CEO, Judith Law (JL), and Bruno (BF) about his perspectives on the connection between food and mental health.

JL: You're a judge on the Great Canadian Baking show. How and when did cooking become important to you?

BF: When I was young my dream was to be a pilot and fly all over the world.

But I grew up in a foster care system. I didn't know my father, and my mother died when I was a young person. I struggled. My home life was difficult and I didn't have much guidance or support. When I got kicked out of high school, I had no choice but to look for a job. I was lucky to find an apprenticeship in a chocolate shop. I didn't know it then, but working as a member of a team helped me with feeling like part of a family, which is something I was missing.

Cooking became important to me because it provided structure and gave me my bearings. Being in the kitchen, your senses are activated

because there are so many smells and sounds. And food is for celebrations, such as birthdays and retirements. Cooking feels important because you create happiness and joy for people who buy the products you create. That feels good.

JL: You are an advocate for mental health. Can you share how food and cooking contribute to good mental health?

BF: I have taught basic cooking skills to young adults in an alcohol and drug program. I told them that if you can make a tasty soup and salad, you can find a job. There are many places looking for cooks. Cooking classes help people to focus, meet other people and have a good time.

Building social skills and connections is part of cooking. For example, when you make that tasty soup, you can reach out to your neighbours, friends or family to share it. You develop community connection this way, which helps to reduce loneliness and create new social networks for support.

When I worked in kitchens, I felt that we were all part of one family. I looked up to the Chef, and there was a strong sense of comradery with those I worked with because we had to work as a team, preparing, presenting and delivering food. I always felt like we would take care of each other because we worked closely together.

JL: As you know, higher inflation and increased food prices are eating into household budgets. Do you have suggestions about meal planning on a budget?

BF: Food becomes very important in the way you select, prepare and consume it. It helps you understand home economics because food is expensive, so it helps you to be selective about where you buy it and how frequently you shop. We also end up creating a lot of waste, which goes into landfills because of extra packaging when we choose to order in rather than cooking for ourselves.

I've noticed that the quality of produce tends to be worse than it was years ago, and produce goes bad very quickly. So I buy groceries every two to three days. I like to have stocked cupboards and essentials in my freezer. I do this by buying what is on sale when I see it. I suggest stocking your cupboards with chicken or vegetable stock, canned soup, cereals, pasta or grains, and having frozen veggies and meat in your freezer. Avoid buying food that is out of season, like berries, because they are expensive.

I do not buy organic because it is expensive and unnecessary. If you buy local and in season, and you cook at home, you can save money. I also advise against buying designer olive oils and different-coloured salts. Most kitchens I know use basic kosher salt.

Leftover food can be made into something else. For example, an entire cooked chicken can be useful. You can shred the meat and add it to a salad or use it in a sandwich. You can save the bones and boil it up with water, garlic and onion, which creates a delicious broth you can freeze.

I also add savories, like tomato, into muffin mixes. Some muffin mixes

are affordable if you don't have time to buy all the ingredients to make it from scratch. These days, bread is expensive, so you want to use it up even when it's dry. I suggest making it into bread pudding or French toast.

When you lose your job, you can land up on the street very quickly. I have also volunteered at the food bank. I want to share that they often have an amazing variety of foods to give away. We should not feel ashamed to go to the food bank.

JL: What role do you think food plays in social connections?

BF: The shape of a table—round, square or rectangle—is designed to bring people together. What you put in the middle is to be shared.

I think we are all afraid to connect with people. For me, the kitchen was the centre of my home in my earlier life. The problem today is that families get distracted by the big-screen TV in the living room, and we're fragmented when we're looking at our own small screens (telephones) instead of at each other. I wish there were more places where people could sit together at long tables. The table brings people back together.

Tune in to #OurAnxietyStories, Anxiety Canada's podcast, to hear an episode in which Bruno talks about his personal experience with anxiety: www.anxietycanada.com/podcast/bruno-feldeisen 

Learning from Individuals with Lived Experience

THE BUILDING BLOCKS OF SELF-COMPASSION

AVARNA FERNANDES
JOSIE GELLER, RPYSCH

It takes a special type of energy to be kind to ourselves during hard times. One name for that energy is “self-compassion.” Self-compassion is defined as being aware of our experiences in times of difficulty and motivated to relate to ourselves with kindness and understanding.¹ Research has shown that self-compassion is widely associated with resilience and good health.²

Avarna is the research coordinator for the Provincial Adult Tertiary Specialized Eating Disorders Program at St. Paul’s Hospital in Vancouver. Under the supervision of Dr. Geller, she is currently investigating the role self-compassion plays in recovery from an eating disorder

Dr. Geller is Director of Research at the Provincial Adult Tertiary Specialized Eating Disorders Program and an associate professor in the UBC Department of Psychiatry. Her program of research focuses on assessing and enhancing motivation for change, overcoming barriers to self-compassion and enhancing factors that contribute to collaborative, patient-centred care



Photo credit: recep-bg at ©iStockphoto.com

Unfortunately, many people find it difficult to be self-compassionate, and this is especially true for individuals who have eating disorders. This presents many challenges, as barriers to self-compassion are associated with less benefit from eating disorder treatment.³

What can clinicians and family members do to support vulnerable individuals to overcome barriers to self-compassion? In order to answer this question, our research team asked

individuals working on recovery and graduates of the St. Paul’s Hospital Eating Disorders Program to share their experiences.

Interestingly, the most prominent theme that emerged was patients’ desire for validation. One definition of validation is the process of understanding, acknowledging and accepting another person’s feelings.⁴ Our team did a deep dive to learn what exactly validation means to our patients and what behaviours from

family members and clinicians can help.⁵ Patients' responses led to the creation of a model for loved ones and care providers (see figure on the next page).

Making time and offering kindness

Shame may play a role in patients avoiding or concealing their needs. As a result, it is common for them to not feel seen. Patients in our study said that being invited to talk about what they were going through and having carers actively listen, show curiosity about their experiences and be fully present set the stage for a deeper connection with them.

This type of support provided needed respite from habitual self-criticism and blame, and planted seeds of acceptance for the challenges they were facing. These experiences helped patients view themselves in a kinder manner. Having time, space and a compassionate perspective created feelings of trust. Here are some comments from patients:

"The feeling is relief, you feel you can be yourself almost... no fear of judgment from others"

"It's compassion and acceptance...makes it so safe to tell her more...suddenly it's not as shameful anymore."

Recognizing readiness

Often, patients feel frustrated by care providers recommending treatment that they do not feel ready for. In our study, some patients who felt unworthy of care described how care providers' acknowledgement of their illness severity helped counteract these feelings and gave them hope

Patients said that when their symptoms began to improve, care providers often assumed they no longer needed support. In fact, this is when they said they needed support more than ever. ”

that recovery was possible. In other cases, patients who did not feel ready for treatment found it helpful when care providers supported them to step away from programming that was not suited to their needs. When care providers advocated for patients' access to treatment that matched their physical and emotional needs, they felt cared for. Patients said:

"Once I saw the [referral] letter, there was a lot of validation with that and all of a sudden this became a real thing... this is the first thing that said the medical community says I have a legitimate sickness..."

"I wasn't made to feel like I was letting anybody down if I were to choose not to go further. And I think that was really important because that actually helped me to decide to go further..."

Noticing and highlighting strengths

Patients said that when their symptoms began to improve, care providers often assumed they no longer needed support. In fact, this is when they said they needed support more than ever. Patients in our study emphasized that change is hard and that it was helpful for their hard work and struggles to be acknowledged along the way. When care providers recognized their strengths, expressed faith in their

ability to make changes and reframed setbacks as a normal part of recovery, they felt empowered. One patient spoke to this recognition:

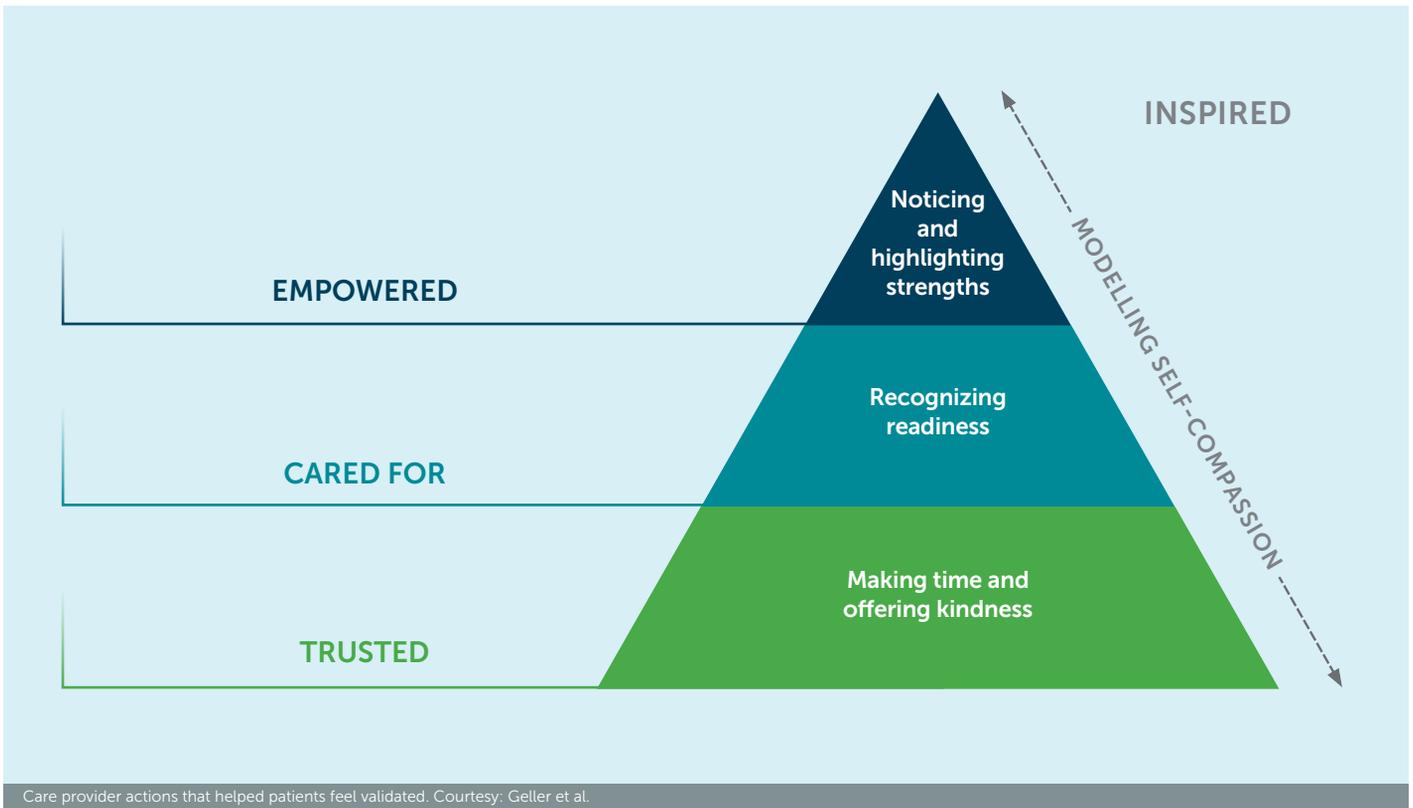
"...helping you see things within you so that you can do stuff. It's like empowerment... Helping you see just how capable you are..."

Modelling self-compassion

It is common for patients to see care providers as having it all together, which at times can contribute to feelings of inferiority. Patients in our study said that when care providers thoughtfully shared minor instances of personal struggle or vulnerability, they felt less alone and had a model for practising self-compassion. Witnessing care providers' humanity and their willingness to show themselves compassion made our patients feel inspired:

"Someone shared that they tripped up the stairs at the SkyTrain station...and they felt embarrassed...it was like, oh man, this is somebody that I viewed as all put together...something small and silly but it was just like... you see somebody trip up the stairs and you don't think, oh my god what an idiot or those thoughts that you have when it happens to you."

Another participant made an analogy between care providers practising



self-compassion and walking down a fashion runway:

“They (care providers) use an example of self-compassion kind of similar to planting a seed—showing us what it could look like...and with the modelling you can... you’re not required to try on the clothing, you just watch everyone on the runway. You can see potential options, you don’t need to put it on yet.”

Self-compassion brings numerous health benefits and increases resilience through difficult life circumstances. Unfortunately, practising self-compassion is not easy for people with mental health conditions. Our work shows that validation is a powerful tool that helped individuals with eating disorders develop and practise self-compassion. Based on our research, we encourage people to use this tool by incorporating the following techniques:

- **be curious:** make time to ask your loved one how they are doing and be open to explore their feelings with them
- **listen:** when we listen actively, we create a deeper connection with our loved one and can identify what they need to feel supported
- **encourage:** let your loved one know you recognize the hard work they are putting in towards their recovery
- **share:** we shouldn’t be afraid to reveal our own struggles and imperfections; sharing lets people in recovery know they are not alone in tough times

Patients who participated in this study taught us that validation makes them feel seen, creates a sense of comfort, reduces conflict and gives them courage. These in turn helped them to overcome barriers to self-compassion.

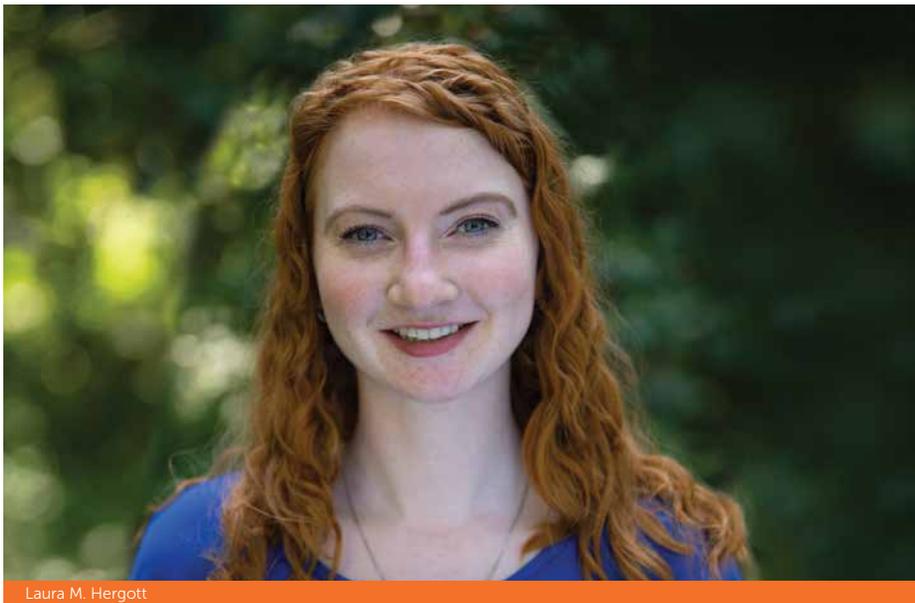
Our patients’ insights remind us that we all need validation and can all benefit from self-compassion. We hope these principles can guide loved ones and care providers in their relationships with individuals who are working on their mental health and recovery. ▼

Your Newest Prescription for Better Mental Health

A DOSE OF NATURE WITH PARx

LAURA M. HERGOTT, MSC

Think about how you feel when you're in nature. What words come to mind? Grounded? Calm? Refreshed? Humans have an intuitive sense that spending time in nature feels good, and there's scientific evidence to back it up!



Laura is the PaRx coordinator for the BC Parks Foundation, where she manages the national nature prescription program. With her background in biochemistry, Laura was drawn to PaRx by the research supporting nature prescriptions. As an outdoors enthusiast, she is passionate about making nature accessible. Laura enjoys rock climbing and hiking with her dog

“Think about how you feel when you're in nature. What words come to mind? Grounded? Calm? Refreshed? Humans have an intuitive sense that spending time in nature feels good, and there's scientific evidence to back it up!

The health benefits of spending time in nature range from lower depression and higher self-esteem to reduced risk of heart disease and stroke.¹ These benefits are so well proven that nature is being adopted worldwide as a health intervention. Canada is leading the nature–health movement with its national nature prescription program, Park Prescriptions (PaRx).

Through PaRx, any regulated health professional can help improve their patient's health by writing a prescription for nature, and any Canadian can get tips on enjoying nature and health.

Doctor's orders

The BC Parks Foundation launched PaRx in this province in November 2020, then expanded across the country. Over 11,000 prescribers have now registered with the program and are writing nature prescriptions for their patients in a wide variety of contexts.

Laura Cohen is one of them. Laura is a registered counselling therapist from

Halifax, Nova Scotia. She recently described why she joined PaRx: “I wanted to be able to offer clients relief from burnout, stress and anxiety with well-needed resources that promote an embodied experience that would benefit their overall health.”

Doctors and nurses consistently rank among the most trusted professionals in the country, which means people are more likely to make a lifestyle change when the advice is coming from a health care professional.² Evidence also shows that people like written prescriptions better than oral advice, hence the fillable digital PaRx prescription template.³ Also available on the PaRx website: evidence-based online resources, like quick prescribing tips and printable fact sheets.

“Nature prescriptions are a game-changer in terms of adding legitimacy to the mental health benefits of nature as an evidence-based intervention for treating stress-related disorders,” enthused Cohen.

Small steps into nature

One of the most accessible parts about nature prescriptions is that there are no rules about what counts as nature time. Health benefits start to add up any time you feel you’ve had a meaningful connection to nature.

That’s why PaRx aims to make nature prescriptions easy and effective for patients, too. We’re not necessarily asking patients to hike a mountain or take up trail running. If that’s their thing, hey, we’re certainly not discouraging it! But anyone, regardless of physical ability, income or age, can increase their time outside. To improve your mental well-being, you can:

- take a stroll in a local park
- garden at home
- relax under a shady tree
- watch the sunset
- listen to the rain

Whatever you decide on, PaRx has set an achievable, scientific green-time target of two hours of nature time per week for 20+ minutes at a time. If this sounds like a lot, start with five minutes. You may be surprised at how good it feels, and those five minutes might just become your favourite part of the day.

PaRx reduces barriers to nature by collaborating with major organizations, like Parks Canada and the UBC Botanical Garden, to offer patients free or discounted admission to outdoor spaces.⁴ We’ve also been having conversations with transportation organizations to see how we can make nature more accessible to city dwellers.

Tailor-made green prescriptions

When practitioners like Laura Cohen prescribe nature, they customize the prescription to each individual client by figuring out together how a prescription would work best with their current lifestyle.

“Essentially, it’s about tapping into your five senses through connecting your sense of sight, smell, touch and sound with natural stimuli to lower stress levels and feel more grounded. Whether it’s a local park, a remote beach nearby or even a view of the sky from their city apartment, I usually prescribe spending a minimum of 20 minutes a day for three to four days a week in that natural space.”

A core idea behind PaRx is that whenever a health care professional is

talking about eating healthy, exercise and getting good sleep—sometimes called the three pillars of health—nature should be recommended as the fourth pillar.

In their recent policy on sustainable health, the Canadian Medical Association (CMA) recommended that nature prescribing be taught in medical schools and that every health care practitioner adopt nature prescriptions into their practice—the first time any national doctors’ association has made this into policy.⁵ Along with the CMA, PaRx is proud and grateful to be endorsed by more than 80 major health partners from across the country.

Green time for our planet’s future

Did you know that the stronger the nature habit, the more likely an individual is to recycle, conserve energy and vote for planet-positive policy-makers?⁶ That’s why nature prescriptions are also supported by the environmental sector for their positive effects on planetary health.

“Research shows that children and adults who are more connected to nature are not only more likely to work to conserve it, but also engage in other pro-environmental behaviours,” says Dr. Melissa Lem, a Vancouver family physician and Director of PaRx. “I like to think that every time one of my colleagues writes a nature prescription, we’re supporting biodiversity values and making the planet healthier, too.”

PaRx is also going global. The World Health Organization recognized PaRx’s commitment to improving patient and planetary health in its



Name A. Patient

Date June 4, 2023

My Outdoor Activity Plan (2 hours/week, 20+ minutes at a time):

- Go for a trail walk in Pacific Spirit Park
- Sit by the ocean at Jericho Beach
- Spend time with a tree in Tatlow Park

M. Doctor

Health Professional's Signature

Prescription #: AA-AA001 - 230604 - AP
(YYMMDD) (Patient's Initials)



Learn more about nature prescriptions.
Register to become a PaRx prescriber.
Head to PARKPRESCRIPTIONS.CA

Sample PaRx prescription.

related resources

PaRx tips to connect to better health through nature:

- Make easy green tweaks to your routine by substituting outdoor activities for indoor ones: take your lunch break outside, write in your journal in the park or run in the forest instead of the treadmill
- Prioritize your date with nature by writing it into your schedule: set a daily alarm in your phone
- Involve others to increase your chances of meeting your goals: phone a friend during your green date or invite a family member to join you
- Listen to your body and do what feels right for you: try a variety of nature-based activities and find the ones that you most enjoy
- Be a leader: help your friends and family develop their own nature habit for their health by planning nature-based gatherings (e.g., have a picnic instead of going to a restaurant)
- Follow up your nature habit with your health care provider: this will help you stay accountable and keep you working towards your goals

COP26 Special Report on Climate Change and Health, where it was featured as a way to inspire protection and restoration of nature as the foundation of our health—one of only two case studies cited from North America.

As a win for people and a win for the Earth, it's easy to understand why spending more time in nature should be a priority for everyone in Canada.

When asked how patients typically react when they're introduced to the concept of nature prescriptions, Laura Cohen explains, "There's either a sense of relief that their love of nature has been scientifically proven to be beneficial with a response like, 'That makes a lot of sense.' Or, they're surprised, and say something like, 'Wow, I didn't know there was a prescription for this!'"

Peaceful. Relaxed. Happier. Committing to a new nature habit of at least two hours a week, at least 20 minutes at a time, might be one of the best things you can do for your mental health.

Visit parkprescriptions.ca to learn more about PaRx and the health benefits of nature, or ask your health care provider about it at your next appointment. ▾

Intuitive Eating

AN ANTI-DIET GAME CHANGER

AVRIL PAICE, RSW, CERTIFIED INTUITIVE EATING COUNSELLOR

“If I want to live long enough to watch my kids grow up, I can’t keep letting myself have treats. I’m freaking out every time I see a cookie.”

Avril is a psychotherapist and certified intuitive eating counsellor with a clientele that spans BC. A survivor of pervasive diet culture, she has used intuitive eating, in conjunction with a love of fresh foods and sensory experiences, to learn what feels good in her own body. Avril lives in the Okanagan Valley



These are my friend Sarah’s words, and there’s no doubt in my mind about why she fears her food choices. As 40-something women, we both grew up steeped in diet culture and its restrictive rules about food, health and appearance. We’re no strangers to feeling like we’re being “good” and “healthy” when we’re restricting our eating choices, and “bad” and “unhealthy” when we’re eating what we want.

Recently, Sarah’s doctor told her that she’s pre-diabetic, with high blood pressure. She wants to know more about intuitive eating, but she’s suspicious that it’s really just eating whatever she wants, all the time. What if she loses all control and

devours an entire grocery aisle of forbidden foods?

Fortunately, her fears about intuitive eating are unfounded.

Intuitive eating is a model for mind-body health that was developed in the mid-1990s by California-based registered dietitians Evelyn Tribole and Elyse Resch. The model is robustly evidence-based: there are more than 120 academic research studies showing that intuitive eating is good for physical and mental health, and wellness. Benefits include:

- less disordered eating
- better emotional functioning
- more body appreciation and self-acceptance

- less shame
- more health-focused behaviours

Contrary to Sarah’s fears, intuitive eating is not just eating whatever we want. In fact, intuitive eating is based on ten structured principles. A person’s journey is supported by a book, workbook, guided journal, audiobook and card deck. There are even intuitive eating books written specifically for teens and parents of young children.

Below, I share the 10 principles and tips for trying out the intuitive eating mindset.

1. Reject the diet mentality. For many, this is the hardest part of intuitive eating. Unlike weight loss programs that claim to be “anti-diet,” or even co-opt the language of intuitive eating, the true model is explicitly anti-diet and weight-neutral (where health and worthiness are not defined by weight). Some people do lose weight using intuitive eating, but it is not the focus of the model.

Tip: Try to notice, then label and rethink, ideas from diet culture that show up in things you read, see and hear. An example is hearing that a person must lose weight in order to have a beach body, and deciding that all bodies belong at the beach.

2. Honour your hunger. To eat intuitively, we have to tune in to, and understand, our body’s cues telling us we need fuel. By challenging diet culture’s teachings about self-deprivation, we get around the primal hunger that leads many to think that their eating is out of control. The practice of self-identifying bodily cues is

Intuitive eating seeks to give people a bigger toolbox for managing emotions. In my case, I discovered that my strongest emotional eating trigger is fatigue. I was adding fuel from food when I really needed rest.



called interoception, and being aware of body signals is also extremely useful for many other forms of self-care.

Tip: Try taking note, throughout a day, of where your hunger fits on a scale of one to 10, with “one” being extremely hungry, and 10 being extremely full.

3. Make peace with food. Many people’s diet histories hold strong narratives about forbidden foods. In this principle, it’s not uncommon for people to discover that, once they fully experience eating them, they don’t actually like the foods they have craved. (This is why I no longer crave fluorescent orange Cheezies.) With unconditional permission to eat, we can be free to enjoy what our body truly needs and wants, and we learn what foods (and quantities) feel good.

Tip: A strategy for making peace with food is to identify a forbidden food and allowing yourself to have that food without guilt, noticing what you like (or don’t like) about it.

4. Challenge the food police. Many of us have internalized food rules (i.e., “I would never eat peanut butter because it’s so fattening”). Using this principle, we develop the power to assess food based on what feels right to the body, instead of what we’ve been taught. What many intuitive eating practitio-

ners discover is that our inner rebel voice (the one that sabotages attempts to stay on a diet) is a psychologically healthy part of ourselves that protects our ability to follow our intuition.

Tip: Make a list of rules you’ve learned about food and eating, then consider whether following these rules feels freeing or restrictive.

5. Feel your fullness. This principle is all about sensing our hunger and satiety. Diet culture distorts indicators of the amount of food we need to eat. “Drink water when you feel hungry” is an example. People with eating disorders can lose their ability to sense hunger and fullness. For many people, there is also a sadness that accompanies not eating after they’re full.

Tip: A good way to feel your fullness is to practise pausing every few bites to assess how full you are.

6. Discover the satisfaction factor. Things get fun again here. For my clients who are worried about their eating habits, I have one simple assignment: make it satisfying. I ask them to choose what they truly want and to set the scene in whatever way feels most appealing to their senses. It doesn’t matter what or how they eat, but they have to feel the pleasure to its fullest extent.

related resources

Website: intuitiveeating.org

Books: *Intuitive eating: A revolutionary anti-diet approach*, by Evelyn Tribole and Elyse Resch.

You can also find companion resources such as *The Intuitive Eating Workbook*, an audio version, and a version for teens.

Tip: Choose any food you truly want to enjoy. Make a plan to satisfy your senses while eating that food. Journal about the experience, noticing whether your relationship with food changes.

7. Cope with your feelings without using food. Intuitive eating seeks to give people a bigger toolbox for managing emotions. In my case, I discovered that my strongest emotional eating trigger is fatigue. I was adding fuel from food when I really needed rest. When we're using food at times that food isn't really needed, it can indicate that we've been starved for something else.

Tip: When you have the urge to eat, ask: Am I feeling hunger? Or are other emotions also present? What other strategies can I use to meet my emotional needs?

8. Respect your body. This principle promotes appreciative and kind beliefs and behaviours towards our bodies. Weight neutrality includes setting aside ideas about appearance and focusing on what the body can do.

Tip: Make a list of all the things your body helps you do. What are the gifts you receive as a result of living in your body?

9. Exercise: Feel the difference and
10. Honour your health: Gentle nutrition. The final two principles are intentionally left to the end to avoid triggering diet culture beliefs and behaviours. In intuitive eating, movement and nutrition are all about what the body needs to feel good and function well.

Tip: Notice what types of movement and nutrition feel best in your body.

Intuitive eating has given me and many of my clients new freedom. It has also grounded me in a new way to care for myself and feel good about my choices. Unlike diets, intuitive eating isn't a "change your body's appearance in eight weeks" kind of experience. It's a longer, more transformative journey that shifts perceptions about food, our bodies, our health and our culture—and I truly believe it's a road worth travelling. ▾

How to Win Mealtime Battles

LET GO OF CONTROL AND FOCUS ON CONNECTION!

CAROLYN M.

When I introduced solids to my baby daughter, I took a purposeful approach. I read endlessly. I familiarized myself with best practices for feeding kids. I learned how to create an environment that empowered my child to be in tune with her body and her own needs.



Carolyn is a mom of two and a parent peer support worker for FamilySmart. She regularly connects with parents and caregivers whose kids are struggling with mental health and substance use. She lives in the Comox Valley, on Vancouver Island

In the end, I chose to follow an approach called *baby-led weaning*, which encourages babies to feed themselves. When babies are ready for solids, parents offer real food rather than spoon-feeding them the traditional baby food we might find in a jar.¹ It was very messy! Our relatives found it hilarious, and as long as it wasn't happening at their house, they were happy to watch the show.

Baby-led weaning emphasized that, as a parent, I was responsible for what, when and where the food was served. My child was responsible for deciding how much to eat, or whether or not to eat at all.²

This was very different from how mealtimes went when I was child. I can clearly recall sitting at the table for what felt like hours after everyone else had finished eating, compelled to finish my dinner. As I grew older, I discovered ways to discreetly dispose of the food, thinking my parents wouldn't notice. While I know my parents were doing what they thought was best, these mealtime battles reinforced the idea that I didn't know what was best for my body and didn't help me learn my own hunger and satiety cues.

For this reason, I wanted to set my daughter up with a healthy relation-

ship with her body and food. We were hoping to encourage our child to be responsible for her own body's needs, rather than following the demands of her caregivers.

Reality bites

This was great in theory, but sometimes really hard in practice, especially with a child who wasn't following the typical trajectory. Despite the best-laid plans, the division of responsibility no longer worked for us by the time my daughter turned two: I continued to take care of the what, when and where, but she stopped eating. Period. Mealtime became a massive source of stress and frustration and our family started to suffer because of it.

We started to notice that many of the foods she once enjoyed no longer felt safe for her to eat. Before I knew it, her diet mainly consisted of brown foods. You know, the ones that come in a box in the middle aisles of the grocery store or in the freezer section. The ones we're told are not good for our kids. It makes sense when you think about it. A Goldfish cracker is always going to taste the same unless you try a new flavour, but even then, it's very predictable. A blueberry, on the other hand, can taste sweet or sour. It can be hard, soft, mushy or even rotten. For some children, the unpredictability of certain foods can be a source of significant stress.

For the next three years, I became a short-order cook. I'm embarrassed to say that I made two meals every day, one for my picky eater and one for the rest of us. Nobody wants to be a short-order cook when it comes to family meals. Not only is it exhausting, but it comes with the shame that you know

you shouldn't be doing it, that you are giving in to your kids and contributing to their picky eating. But sometimes we have to choose between expending energy cooking two different meals or dealing with the fallout that may come if we don't.

Getting to know our young eater

Right before my daughter turned four, we learned she is autistic. This confirmed why many of the strategies recommended for typical kids weren't working for us. During these years when she existed on a total of maybe five different types of food, we focused on helping her in ways not related to food. As a highly anxious kid, the days were a minefield of stressors, from existing in a busy preschool environment, to adjusting to a new baby sibling, to navigating sleep challenges. We recognized that something had to give, and for us that was mealtime.

We took the demand off dinner by serving safe foods. When she started having the capacity to handle more, our strategy changed. We began serving her what we were eating, but always with her safe foods included. Depending on how her day went, she might happily try something new and even enjoy it. But other days, when she was less regulated after an exhausting day at school or a day when she was pushed to her limits, she would simply refuse to try the food.

This is always a hard one to accept. Sometimes we revert to the parenting techniques we were raised with, such as saying, "How about just one bite?" or, "You won't know if you like it unless you try it." But those phrases never help and only add stress for all of us, which ultimately takes away

from the power of the connection that mealtime can bring.

Once we shifted our focus away from mealtime battles to building connection, things seemed to fall into place. By helping our kid with the struggles of the day, she can arrive at dinner with a less activated nervous system and sometimes be open to new flavours. During meals, we started going around the table to share our highs and lows from the day. This has given us something to talk about and focus on without our kid feeling like the spotlight is on her at every meal.

When it comes to feeding our kids, there are some great resources and best practices to consult. But when those don't work, it's OK to weather the storm in a way that works for your family. Dealing with challenging meals is stressful enough without the added shame of doing things "wrong." As someone who has done all the wrong things, take it from me: these phases come and go, but what your kids will remember is the time you spent connecting together around the dinner table. **V**

Diet for Depression

DOES IT REALLY HELP?

LESLIE WICHOLAS, MD

Most people know that what we eat can have an impact on our physical health. But did you know it can also impact your mental health? Nutritional psychiatry is a relatively new field of research that explores this connection.



Dr. Wicholas is a psychiatrist with additional training in functional medicine. She founded the Food as Medicine program for the treatment of depression at the Mood Disorders Association of BC. She has extensive clinical expertise in the field of nutritional psychiatry and has presented nationally on the topic

Some studies show that individuals who follow a Mediterranean diet are at lower risk of developing depression.¹

The Mediterranean diet includes a wide variety of vegetables, fruit, whole grains, beans, nuts and seeds, fish and extra-virgin olive oil; followers eat chicken, eggs and dairy in moderation, and limit red meat to two small servings per week or less.

In 2017 a research group in Australia recruited individuals who had been diagnosed with depression and enrolled them in a randomized, controlled trial (a well-designed study) to see if switching to this diet would improve their depression.² The researchers assigned participants to follow a modified Mediterranean

diet for 12 weeks or to attend a social support group for 12 weeks.

At the end of the 12 weeks, 32% of people in the diet group recovered from their depression compared to 8% in the social support group.² One surprising finding was that the people who changed to a Mediterranean diet also spent less money on groceries compared to the people who did not change their diet.

Since 2017, two more randomized, controlled studies have shown similar results: adopting a Mediterranean diet can improve symptoms of depression.^{3,4} Likewise, I have found that approximately 30% of the patients who participated in the Food



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In my experience treating depression, I have noted that many people report better energy, mood and brain fog after switching to a nutrient-dense, anti-inflammatory diet. Many are surprised to find they like eating this way and want to stick with it. ”

as Medicine program at the Mood Disorders Association of BC reported a clinically significant reduction in symptoms of depression after just eight weeks of making meaningful changes to their diet.

Diet and inflammation

One of the mechanisms by which a Mediterranean diet may help depression is by reducing inflammation. Unfortunately, chronic inflammation has become common in our society. Most of us are familiar with acute inflammation, when your immune system gets activated in response to an injury or virus. Inflammatory compounds are released and you may notice pain, redness, fever or fatigue as a result. Inflammation resolves once the virus has been eliminated or the injury has healed.

Chronic inflammation is different. Our immune cells release compounds that continue to circulate in the body, which can cause damage over time. Chronic inflammation can contribute to a wide range of diseases, including depression.^{5,6,7} We don't yet know how many people with depression have chronic inflammation, but there seems to be a link. This is something we are still learning about.

In contrast to the Mediterranean diet, dietary patterns that have a lot of processed food, fast food, sugar and saturated fats can lead to chronic inflammation and have a negative impact on many aspects of our health, including brain health.^{5,6}

The good news is that you can fight inflammation—and, thereby, depres-

sion—by following an anti-inflammatory diet. The Mediterranean diet is one example of an anti-inflammatory diet, which can be applied to many cooking styles and cuisines. It is nutrient dense and rich in plant-based foods. Some basic aspects of the diet include:

- eating a wide variety of vegetables and fruit daily, including every colour from the rainbow
- choosing less processed carbohydrates (i.e., beans or whole grains, like brown rice, barley, quinoa or steel cut oats; whole grain bread; winter squash and root vegetables)
- eating fish rich in omega-3 fatty acids (i.e., salmon, sardines, mackerel, herring)
- using extra-virgin olive oil rather than vegetable oils and butter
- including 1 oz (approximately one handful) of raw, unsalted nuts or seeds daily (walnuts, almonds, flax, chia or hemp are preferred)
- limiting red meat; eating chicken, eggs and low-fat dairy in moderation

Microbiome, nutrients and mental health

Another important aspect of our dietary choices is the impact they have on the bacteria that live in our gut; these make up what's called the microbiome. By increasing plant-based foods we increase the amount of fibre in our diet. Many of the "good" bacteria feed on fibre and create compounds that contribute to our health and reduce inflammation. By eating high-fibre foods, such as in the Mediterranean diet, we are feeding these good bacteria. Eating fermented foods like yogurt, kefir

(milk fermented with a specific strain of bacteria) or kimchi (Korean salted and fermented vegetables) also contributes to a healthy microbiome.

Research has also focused on specific nutrients in the diet that can help improve depression. Two psychiatrists, Drs. Ramsey and LaChance, identified 12 key nutrients that play a role in preventing and treating depression, and the foods that have the highest density of these nutrients.⁸ These foods include:

- seafood and bivalves (mollusks with two-halved shells), such as oysters, clams and mussels
- organ meats (liver, heart, kidney) and poultry giblets
- leafy greens (watercress; spinach; mustard, turnip or beet greens; lettuces; chard; cilantro; basil; parsley; chicory greens; kale or collards; dandelion greens)
- cruciferous vegetables (cauliflower, kohlrabi, red cabbage, broccoli, Brussel sprouts)
- peppers (bell, serrano, jalapeño)

Steps toward a depression-fighting diet

Changing your diet can feel overwhelming—you've heard it all before! Yet, making just a few changes can make a huge difference to how you feel. Here are some tips for how to start.

- Add leafy greens to your diet. These can be added to almost any meal—a sandwich, stir-fry, soup, stew or salad. An easy way to get leafy greens is to make a green smoothie for breakfast; you can use fresh or frozen spinach or kale, along with fruit and yogurt or protein powder.

- Snack on vegetables and fruit. Try carrots, celery, cucumber or red peppers with hummus or fresh fruit with nut butter or a handful of nuts.
- Include vegetables with your meals. Frozen vegetables (and fruit) are just as good as fresh.
- Add beans and whole grains to your diet. Breakfast ideas include rolled or steel-cut oats soaked in yogurt or nut milk with berries, or cooked with apples and cinnamon; avocado toast with beans on whole grain bread. Try grain bowls (i.e., brown rice or quinoa) loaded with veggies, or grain and bean salads.
- Eat fish or seafood 2–3 times a week. Remember, canned or frozen are as good as fresh.

- Drink water or other unsweetened drinks. Try carbonated water instead of pop. Add lemon, lime or other flavours to make it interesting.

There are many factors that lead to depression, and not every depression is the same. In my experience treating depression, I have noted that many people report better energy, mood and brain fog after switching to a nutrient-dense, anti-inflammatory diet. Many are surprised to find they like eating this way and want to stick with it.

The key to success is making one change at a time and finding new foods and recipes that you enjoy and look forward to eating. ▽



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 Canadian Centre on Substance Use and Addiction

Your Tent or Mine?

MAC BROWN, PSYD, LP, CMPC (HE/HIM/HIS)

Which tent do I go into? That was the issue I was trying to resolve after having already swum 2.2 miles in the clear waters of Mirror Lake and biked a monstrous 112 miles through the Adirondack region surrounding Lake Placid, New York. I was partway through the Ironman, preparing myself for running the final leg, a full marathon. Instead of focusing on my race and transition zones, I was running up to the tents trying to determine where I belonged.

Mac is a licensed clinical and sport psychologist. He has worked in college counselling centres, private practice, embedded in athletics and, more recently, for the US Olympic and Paralympic Committee. In his spare time, he has enjoyed marathons and Ironman triathlons, snowboarding and other outdoor adventures



Physical activity has always been a part of my life, whether it's been playing street hockey with my father and sister growing up or in more organized fashion, like club basketball. Though I loved all things sport (watching or participating), I often felt like my physique did not fit the mold of an athlete. I was heavier set and uncomfortable in my body, lacked confidence in general and wondered why I felt so different. Fast-forward to my earlier 30s when all the slow-moving puzzle pieces connected. The truth became obvious: I am a transgender man, and I had

been living my life in an anatomically female body.

For many individuals, physical activity can be a place of self-discovery, an avenue for catharsis and a way to build community. I would say I have used sport and physical activity in all these ways—and more—over the course of my life. It has been a means of engaging in my physical environment, like carving a line down a mountain on my board. I developed skill sets that still serve me in my day-to-day life as a result of being a college athlete.

In sport, I found a community of passionate individuals who loved to challenge themselves with not just one, but three activities all lumped into one day. Training for, and immersing myself in, triathlon helped me process grief and loss in both retirement from college athletics and the death of a friend. Sport and physical movement were my safe space, my happy place.

Yet suddenly I found myself feeling compartmentalized by an activity that had historically given me freedom. I had to choose: men's or women's tent to change out of biking apparel into running gear (because, let's be honest, running a marathon wearing padded biking shorts is no one's idea of a good time). I had already been on hormone replacement therapy (HRT) for over eight months at that time; however, I had not had additional gender-affirming care yet, such as top surgery.

Unfortunately, these are the challenges that gender-diverse individuals face every day, and for some, they can become barriers to living a full, healthy and happy life. Our society and physical spaces continue to remind folks that the predominant view is binary. While there are improvements, it can be an obstacle to feel unwelcome or uncomfortable in a setting you are trying to experience to the fullest. Hard to do that when there are reminders, either overt or covert, that communicate a lack of inclusion for all identities. And don't get me started on the possibility of threat, such as harassment, or even, like in Florida as of 2024, of jail time if an individual uses a bathroom in line with their gender identity rather than their biological sex.

As one person, I certainly do not have the answers for how to make all sports inclusive and fair. I do not have the silver-bullet solution for how to make all brick-and-mortar environments include every need for every person and their multitude of intersecting identities. However, that should not stop people, systems or institutions from looking at what can be done to make small but meaningful changes in the here and now.

Not an end-all-be-all roadmap for how to do it, but a few ideas I can think of to help get you on your way include:

- **show inclusivity:** For example, an additional tent designated as "open to all" would have allowed me and others to self-select what environment felt most comfortable to us, rather than someone else deciding what options were available or satisfactory.
- **build in gender neutrality:** Facilities with gender-neutral locker rooms are fantastic—so long as managers make sure cleaning staff don't block the entrance. (This can lead patrons to question whether they really have a space to change into workout gear, even after making it to the gym in the morning, which can be its own challenge...and may have been my own personal experience.)
- **maintain zero-tolerance:** Demonstrate inclusion and a zero-tolerance policy for harassment and discrimination at physical activity facilities. That way, folks know where your values stand and that you would support them, if it ever came to that.
- **self-educate:** It is not the responsibility of folks with

marginalized identities to support your education as an ally or help you advocate for meaningful change in your community. Sure, some people, like me, will offer up personal experiences, resources and recommendations. However, every experience is different, and it is personally exhausting to feel like you are responsible for educating the masses. Take ownership over your own education. Seek it out yourself.

Being active is a healthy and holistic choice that offers new challenges, skills development, social openings and participation in something bigger than ourselves. We as individuals, as settings, as organizations and as a society need to continue to strive to welcome all without placing unnecessary barriers in the way. We will be a happier, healthier, more collaborative and loving society for doing so.

And just in case anyone was curious, the answer to the question I started with is simple: the men's tent, because I am a man. I am grateful that while I had already decided to use the tent that was appropriate for my gender identity, a friend who was volunteering that day found me and accompanied me into the tent while I was changing, for support and backup.

Challenges existed, but not so many as to prevent me from completing my goal. Let's continue to strive to allow others to achieve theirs as their true selves. ▽

Finding Safety in your Body

TRAUMA-INFORMED YOGA

MERCEDES MILLER, MACP, RCC

I first turned to yoga classes at a local community centre when I was going through difficult moments, including struggling with my mental health and difficult relationships. I was feeling depressed and lethargic, and my limbs felt heavy most of the time.

Mercedes currently lives on the unceded Coast Salish peoples' territory known colonially as Vancouver. She works as a registered clinical counsellor, psychedelic-assisted therapist and trauma-informed yoga instructor



Photo credit: Santiago at ©iStockphoto.com

When an instructor invited me to step into *virabhadrasana II* (the Sanskrit term for a form called Warrior II in English), I felt some energy come back into my body, and I felt empowered. This was one of the first signs to me that yoga would support not only my physical health, but my mental health as well. In yoga, I found peace, strength and grounding. But some classes and instructors brought out these positive impacts more than others, and I wasn't sure why.

Later, when I was in school to become a counsellor, we learned a lot about trauma and its impacts on our physical, psychological and social well-being. Some of the books we read

even suggested yoga could assist with recovery from trauma. This piqued my interest, and I dug deeper into the subject.

That's how I came across Yoga Outreach,¹ a non-profit organization in BC that trains instructors in trauma-informed yoga. Now it made sense: the classes where I had felt supported were trauma-informed. I took the opportunity to train as a trauma-informed yoga instructor with Yoga Outreach, and now I feel grateful to be able to share this practice with others.

Before I go on, it's important for me to acknowledge yoga's roots. As a white woman with ancestors from the

Netherlands, Germany and Scotland, yoga is not in my ancestral lineage. Yoga is a practice that is thousands of years old. It has eight limbs, only one of which is asana, the postural practice we often associate with yoga in North America.² Although the blending of East-Asian philosophical and spiritual principles and contemporary research on the impacts of trauma and stress has allowed trauma-informed yoga to emerge, yoga is much more complex than this article allows me to describe. This is simply a small glimpse at one aspect of a rich spiritual and philosophical practice.³

Trauma basics

To understand trauma-informed yoga and how it can aid with recovery, it's best to first understand trauma. Trauma is an event, series of events or chronic circumstances that threatens our emotional or physical safety.⁴ Often, a traumatic experience overwhelms the autonomic (involuntary) nervous system. The autonomic nervous system protects us during the incident by engaging our fight or flight response, but it can also impact our brain's ability to record the traumatic experience as a regular memory.

Our nervous system can get stuck in the fight or flight response. For some people, this response can then be triggered more easily, which can create

a lasting impact on our bodies; this can show up as difficulty regulating emotions, a sense of disconnect from our body and difficulty in relationships.⁵ As the doctor and writer Gabor Maté says, "Trauma is not what happens to you, but what happens inside of you as a result of what happened to you."⁶

Since trauma is as bodily as it is emotional and cognitive, movement practices can support recovery. This is not to say that regular exercise classes, sports or solo movement practices cannot help with trauma recovery, but trauma-informed yoga intentionally takes into consideration the specific needs of trauma survivors. It acknowledges the disconnect that people can feel from their bodies; the emotional and nervous-system regulation challenges that trauma presents; and the difficulties in relationships.

Making yoga trauma informed

So, what makes trauma-informed yoga trauma informed? Some key aspects of the practice include:

Choice: Trauma often involves a loss of choice and control for the survivor. That's why choice is one of the most important elements of this practice. Everything in trauma-informed yoga is an invitation: the teacher guides the class through movements, forms and breathing practices, while reminding

the students that everything they say is just an offer. Students can choose to do a movement, do it differently, do a completely different movement that feels better in their body or simply not do it. This gives the survivor an opportunity to regain a sense of choice, particularly regarding their bodily autonomy.

Inner resources and tools: Another important aspect of trauma-informed yoga is offering people the chance to learn about tools and resources that exist in themselves. This can include breathing practices to calm the nervous system and different yoga forms that support emotional regulation. Since these tools exist within survivors, they are accessible to be used outside the yoga class and in people's everyday lives whenever they experience difficulties regulating their emotions or somatic (bodily) responses.

Reconnection: Spread throughout the whole practice of trauma-informed yoga are opportunities for people to reconnect with their bodies. As mentioned earlier, people can disconnect from their bodies during a trauma as a protective mechanism. Through gentle invitations to get curious about the sensations in their bodies, survivors can rebuild a healthy connection to their bodies and themselves.⁷

Healthy connections and relationships: Trauma-informed yoga instructors strive to be consistent and predictable, as traumatic experiences are often unpredictable and can put survivors' internal alarm systems on high alert for threat or danger. This not only models a consistent and predictable relationship, but also offers occasions for co-regulation. We learn to regulate

Trauma often involves a loss of choice and control for the survivor. That's why choice is one of the most important elements of this practice.



our emotions as children through the relationship with our caregivers, and we continue as adults to co-regulate with one another without even realizing it.⁵ Having space to connect and co-regulate with others is as important as learning self-regulation tools and resources.

If classes aren't accessible to you right now, and you're wanting to try practising some elements of trauma-informed yoga, I would suggest starting out with the *pranayama* (breathing practice) called *Bhramari Pranayama* or bee breath:

1. You can sit in a comfortable position and close your eyes if it's comfortable for you, or just have a soft gaze.

2. You can take a deep breath in and, as you exhale, make a humming sound like a bee.
3. You can inhale again and repeat this five to nine times, or as many times as feels comfortable for you.
4. If you would like to add to this practice, you can place your index fingers on the cartilage between your ear and your face and gently press down as you exhale.

This practice can support some people in calming anxiety or agitation and can offer relief from tension.

Trauma-informed yoga is one of many types of somatic work that can help some people heal and recover from trauma. I believe it is an important step in the direction of offering supportive

resources to survivors of trauma. It also acknowledges the bodily disconnect that some survivors of trauma can experience. Trauma-informed yoga continues to guide me through difficult times in my life, and I feel very grateful to be able to share this practice with others and learn about yoga's roots.

If you're interested in learning more about trauma-informed yoga, I suggest checking out Yoga Outreach in BC: yogaoutreach.com. **V**



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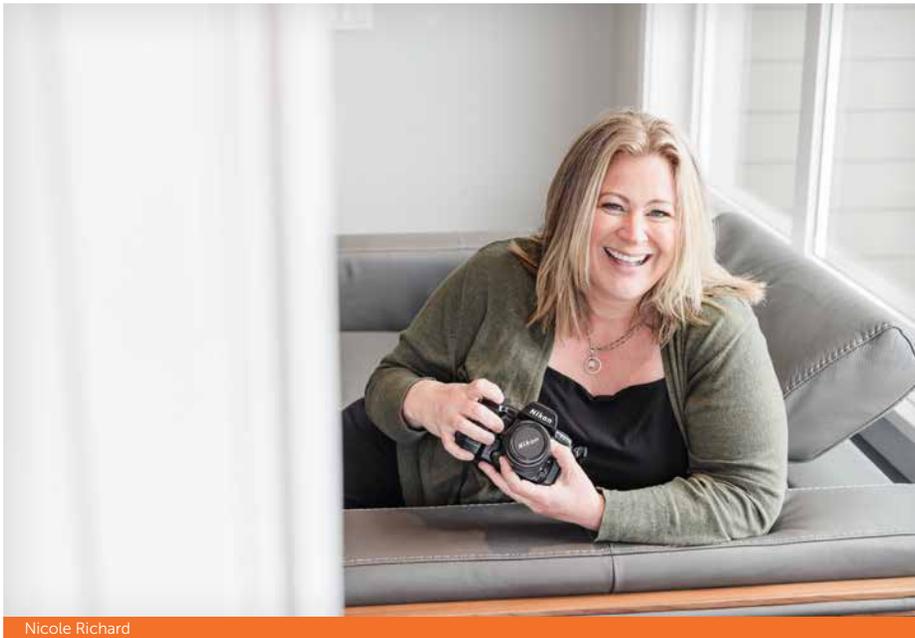
If you would like to add to this practice, you can place your index fingers on the cartilage between your ear and your face and gently press down as you exhale.



Fat, Fit and Setting up Success Through Team Sport

NICOLE RICHARD

This story begins with a vivacious pigtailed girl. Scabbed up knees and sticky chin from the orange slices she wolfed down during halftime at her soccer game. She's joyful, content, full of life and her body just feels right. As a 40-year-old woman, she would learn this feeling by name. She felt *regulated*.



Nicole Richard is a mental health advocate, mediocre athlete and musician in West Kelowna, BC. She pays her team-sport bills as a corporate headshot photographer whose main goal is to make sure every single one of her clients knows how beautiful, valid and worthy they are

As an elementary school-aged child, she was fortunate to feel this way often. Intricate chalk drawings on sidewalks mapping out a whole town for her and her friends to navigate with their bikes. Running through the neighbourhood woods with her mom before the school day started. Chopping down firewood in the forest with her family. She felt good being outside with friends and moving her body.

As she approached puberty, her body and self-esteem started to change. A little extra weight meant she could not continue in soccer on the same

teams with her friends. Her asthma meant she couldn't keep up with her friends in gym class. The gym teacher, although well-meaning, divided the class into heavy girls and skinny girls.

The pigtailed girl began to identify as a fat girl. Fat girls are lazy. Fat girls don't exercise. Fat girls are not athletes. Still, in Grade 8, one more defining moment made an active identity seem possible: high school gym class.

Gym class allowed her to try various team sports. She learned she really

enjoyed volleyball. It didn't require much running, so her asthma stayed in check. Her height gave her an advantage, and the wicked hand-eye coordination inherited from her dad meant that she was quick to respond on the court. She felt good at it! Social interactions with teammates, mixed with exercise and competition, hit exactly the right endorphins for her mind and body to feel right. To feel regulated.

Desperate to continue the sport after gym class moved on to gymnastics, she built up the nerve to try out for the school volleyball team. How could

she know this would be the nail in the coffin of her budding sporty identity?

Deregulating

I think back to that little 12-year-old girl and feel so proud of her. "Yeah, you can kid! Go get 'em!" I remember having extreme anxiety during the tryouts. I had already learned from the world around me that I didn't look like someone who played sports.

I did not make that team and was one of the first girls cut. It hurt. More than that, it confirmed what I had been told: fat girls aren't athletes. The coaches conceded for me to stay on the

team as a manager. I could carry the clipboard and water bottles. I went to a few games, diligently scratching off attendance and filling water bottles, but it did nothing for my mental health and nothing for my fitness.

It doesn't take much to convince a teenager they are not enough. I never tried out for a team ever again. That kind of regulation was lost to me. While my friends continued to play sports, I receded into the world of watching TV and eating chips. Regulation became a feeling of the past, replaced with depression, anxiety and lethargy.

It would take 26 years for me to get it back.

Return to form

At 40 years old, I was invited to play volleyball against my daughter's Grade 7 class. It was a fun end-of-year game, and I remembered how much I loved the feeling of team sports. Regulation! A fair number of the parents involved must have felt the same way. One of them found a recreational league in the city and formed a team of us old, "non-athletic" athletes. What followed was a 10-year love affair with the sport I'd been told at age 12 that I wasn't good enough to play. My life and love of team sport blossomed. I was good enough for this.

In fact, I was athletic. That hand-eye coordination and my height really did make me a valuable recreational player. Most importantly, I LOVED it. My mental health vastly improved with newfound scheduled regulation and my weight started to decline. I felt whole in my body and spirit. This tiny Thursday night recreational volleyball



It strikes me as ironic that the people who stand to benefit most from school sports are often the people who are excluded. It becomes a lifetime opportunity lost. Something we've forgotten is that we aren't raising elite athletes in our schools, although I'm sure there are a few. But we *are* trying to raise healthy adults. ”

league was life-changing. My kids have to have this experience, I thought. And they cannot wait until their 40s to get it. But finding those opportunities for positive physical experiences has not been easy.

Challenges for a new generation of sports lovers

When my kids entered high school, I expected school team sports to have become more inclusive. To my shock and dismay, they had become incredibly exclusive. In Grade 8, any child can play team sports with the promise of no cuts and equal playing time. At the Grade 9 level, things change. You need to be a player with an already developed skill set to make the team, and if you are not one of the better players, you can expect to spend a lot of time on the bench.

The system of school sports and community coaches we grew up with is disappearing. It is being swallowed up by a for-profit, hyper-competitive club sports system. The new system needs wins to maintain its profile and justify its cost. Parents pressure their athletic children to pursue sports like a job because they are lured in with some vague hope of scholarships and a future of playing professionally. Having an awkward kid on the team becomes a threat because it might affect the future of a child who takes sport “seriously.” Now, coaches don’t call your kid fat. They just never call your kid at all.

To be economically successful, the new system has to be inaccessible not only to the fat kid, but also to the awkward kid, the anxious kid, the kid with parents who have no time for practices every evening and tournaments every

weekend and the lower-income kid who cannot afford the astronomical cost of sport. Beyond that, social sports clubs are unlikely to take on the cost of insuring kids for fun leagues. That vivacious, pigtailed kid wouldn’t stand a chance today.

It strikes me as ironic that the people who stand to benefit most from school sports are often the people who are excluded. It becomes a lifetime opportunity lost. Something we’ve forgotten is that we aren’t raising elite athletes in our schools, although I’m sure there are a few. But we *are* trying to raise healthy adults.

I continue the fight to stay active in volleyball and to ensure access for my kids. I have found a few inclusive camps through city or provincially run recreation initiatives, and lately I’m feeling elated because I found a not-for-profit volleyball club that prioritizes sport for every child who is interested! If you are the loving guardian to a child who enjoys sport but struggles to make the cut for teams, do not give up hope. Keep advocating and seeking out other opportunities for your child to engage. The health benefits are so astronomically great, it’s worth all the agony and extra effort you will put in.

For me, I look ahead 20 or 30 years and see myself still playing sports, even if it’s “sitting” or “balloon” volleyball with the other residents of the retirement community. I can’t wait! It’s going to be so fun! I can assure you we are going to have the coolest jerseys and merch around. ▼

A Co-pilot on the Road to Fitness

BENEFITS OF A PERSONAL TRAINER... WITH A FEW CAVEATS

SAM

Personal training is a popular way to build physical activity habits, develop skills and find motivation. Hiring a personal trainer is one way to learn from someone else and develop a plan based on your unique needs.

Sam is a strength athlete and writer in Vancouver, BC



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Personal training can be a great option when you:

- are starting a new fitness journey, setting a goal or want a new skill
- are unfamiliar with fitness spaces (like gyms) or feel intimidated going on your own
- learn best in person or prefer feedback
- do your best with motivation or accountability from someone else

What should you look for in a personal trainer?

The personal training industry is unregulated in Canada, which means that anyone can call themselves a trainer. However, there are a

number of certification programs (see sidebar, page 34). Certification involves a number of hours of study, followed by an exam with a practical assessment component, but it varies significantly between programs. Regardless of which designation fits your goals best, it's important to make sure your personal trainer has liability insurance.

Finding the right personal trainer for you

The best personal trainer for you is the one who meets your needs and goals. Certification is a good general guide, but each trainer will have their own strengths and interests. If you want to learn how to lift, you'll likely

feel more satisfied with a trainer who has expertise in lifting compared to a trainer with an endurance-training focus. Think about what you need to succeed before you start looking for a trainer. Ask yourself about:

- **your overall goals:** Are you working towards general fitness? A specific skillset? Participation in a sport?
- **what type of structure you want:** Is one-on-one training for you? Or would you prefer training with a friend or family member, or in a group?
- **what level of support you need:** Do you prefer a trainer to set you up with a program you'll continue independently? Or do you need someone several times a week?
- **what personality you like:** Do you prefer a super positive, upbeat cheerleader? A drill sergeant? Or minimal conversation with space to get in the zone?

Once you have a defined idea of what you're looking for, it's time to start looking! You can:

- ask about trainers at your gym, rec centre or other facility
- look up the directory of trainers from the certification programs listed in the sidebar
- ask friends and family for recommendations
- search online

Once you've found a potential trainer, you will set up an introductory session. This is an opportunity to get a feel for their approach, discuss goals and decide how well you might work together. If you meet the trainer and aren't completely happy, it's OK to

move on. Any professional understands that fit matters.

The line between personal training and medical advice

It's important to be clear about the role of a trainer or fitness professional.

They are there to provide an exercise plan and support your progress. But medical information, including health monitoring, diagnosis, diet and supplementation, should come from a medical professional, like your doctor, nurse practitioner, physiotherapist or dietitian.

Trainers must screen clients for health conditions affected by new exercise demands and may require a doctor's clearance to continue. A trainer may also recommend that you speak to a doctor, and they can help you execute a physiotherapist's exercise plan as part of injury treatment, but they cannot diagnose you or develop their own treatment plan unless they have medical qualifications.

Training and bodies

The fitness industry generally represents one body type: thin. But that isn't a body type everyone has or wants to achieve. Especially for people who present as feminine, there is significant pressure to measure fitness "success" in terms of weight loss. Even strength goals are often viewed through a lens of having the "right" look, like muscle definition, but not too muscled, because that isn't conventionally feminine.

This can take precedence over your aims, what you can actually lift or other achievements. If you are beginning your fitness journey in a larger body, you may find that some trainers

simply don't provide exercises that feel good. Unfortunately, some trainers blame your body rather than their lack of education in working with diverse bodies. That can be hurtful, or even prevent people from going back to the gym. Some tips:

- when looking for a trainer, look for messages around size inclusivity
- notice whether they state up front that they welcome everyone
- check if their social media presence shows different body types being strong and confident, or whether photos of larger bodies are only used as "before" images

A small directory of trainers are now certified through the Size Inclusive Training Academy (see: www.size-inclusivetraining.com). You can find additional professionals with search terms like "body-positive personal training."

Red flags

Be especially on the lookout for the following issues:

The trainer doesn't listen to you. If you request a new approach and the trainer never seems to take that into account, it may be a sign that you and your trainer are not a good fit.

The trainer isn't realistic. Training, skills mastery, strength, endurance and body appearance are all built over time. If a trainer makes fantastic claims about changing your body shape or making incredible progress in a very short time, proceed with caution.

The trainer makes you feel bad about your body or ability, or they use shame as motivation. Every

related resources

Common certification programs for BC professionals who support the general active population include:

- Canfitpro
- BC Recreation and Parks Association (BCRPA)
- Canadian Fitness Education Services (CFES)
- National Academy of Sports Medicine (NASM)
- International Sports Sciences Association (ISSA)

Your gym may also have its own trainer certification program.

Two certification organizations are geared towards people pursuing a degree in exercise-related fields like kinesiology or sports medicine:

- Canadian Society of Exercise Physiology (CSEP)
- National Strength and Conditioning Association (NSCA)

Sports associations may also offer training specific to that sport. Look for coaching certification from the National Coaching Certification Program (NCCP).

single person in a gym, pool or rink, or on a track or trail started from the bottom and learned to get to the point you see them at today. If you are made to feel bad over the way you move or look, you need a new trainer. You can also consider making a complaint with the organization your trainer belongs to.

The trainer isn't engaged during your sessions. You are paying for a trainer to help you. If your trainer spends much of your sessions disengaged, they aren't actually helping you.

The trainer pushes you to perform at "RPE 11" (a high rate of perceived exertion), even if you're injured or feeling unwell. Training should challenge you and may feel hard, but it shouldn't destroy you. Adjusting programming when needed helps keep you healthy and reduces the risk of injury.

The trainer uses fatigue as a measure of an effective session. If you are just starting to work out, coming back from a long break or increasing training intensity or volume, you should expect to feel sorer or more tired than usual for a short time. But fatigue doesn't mean you're actually working towards your goal. Two hours on the elliptical won't teach you how to lift heavier weights, and a thousand bicep curls won't get you to your "A Goal" (or personal best) marathon time.

The trainer relies on outdated knowledge. Exercise science constantly evolves. What was considered general knowledge 20 years ago may be out-of-date today. For example, you will not die if your knees go past your toes when you squat, unless there is a legitimate reason to limit knee travel. This may be a sign the trainer either isn't staying on top of their continuing

education or subscribes to dogmatic training philosophies.

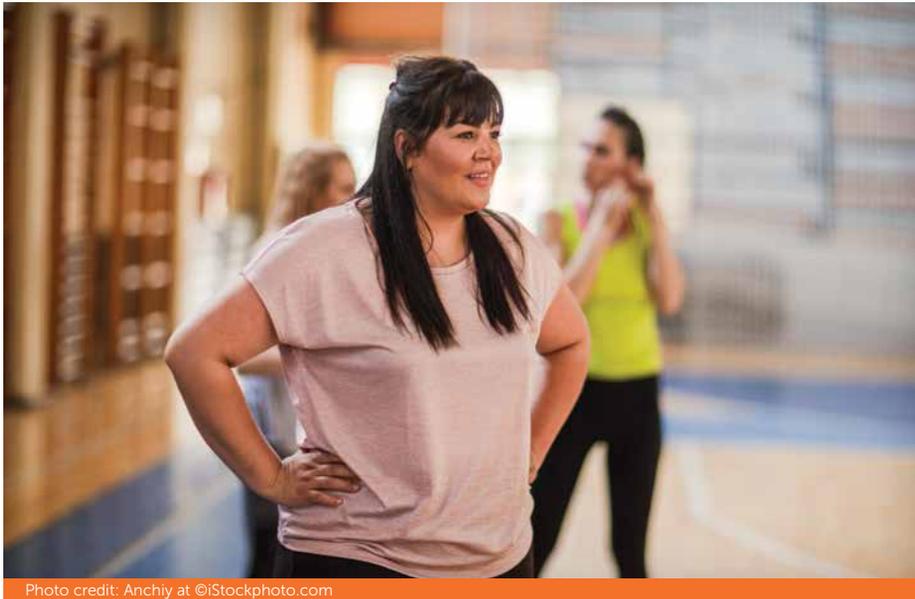
Final thoughts

Personal training can be an incredibly rewarding tool in your active lifestyle. However, it isn't accessible for everyone. It can be very expensive. It can also be difficult to find a safe place if you belong to a group traditionally excluded in gym culture, such as queer and trans people, women and racialized community members. The politicization of trans bodies in particular is worsening and harming gender-diverse folks who just want the same opportunities to participate as everyone else. Ultimately, the most important part of finding a personal trainer is finding someone who treats you and your goals with respect. ▼

A Body that Danced

TERRYL ATKINS

In my mid-thirties I joined a modern dance class specifically for large people. I was a dancer with “Big Dance,” run by the Victoria, BC, choreographer Linda Raino, and later, for ten years, the Big Dance troupe. That was 30 years ago, and in the 20 years since, I have had time to reflect on all that being a dancer gave me.



Terryl is an associate teaching professor at Thompson Rivers University in Communication and Visual Arts. She teaches art history, visual culture, drawing and curatorial studies. One area of her research is embodiment in relation to perception, imagination and art making. Her art practice includes drawing, photography, collage and film

I learned to embrace my body as it is and for what it can and cannot do. Rather than worrying about fitting into societal norms, through dance I got to explore grace and expression through movement and stories. Not only did this experience fill me with joy while dancing, but it also affected my mental health. And those effects lasted long after leaving behind the safety of the studio, the pleasures of being part of a dance community and the ecstasy of performing on a stage. I became confident in my own skin—and still am.

First moves

My journey started with the seemingly endless climb up three flights of stairs to the dance studio and that first timid

step onto the dance floor. My first year, Big Dance class was one hour per week on Friday evenings, after which we would go for coffee and share our histories of being fat. We formed a core peer group of about eight.

Over our first few years the classes got longer, we got better and we were asked to perform at a local community centre—a raucous routine to k.d. lang’s “Big Boned Gal.” We were a hit! That’s when we started thinking of ourselves as a dance troupe and our dance classes, rehearsals and notoriety increased.

Rather than we large folk feeling like the “handicapped” group in the

It can be hard to confront this kind of judgement head-on, but every body can be expressive, conveying beauty and power. ”

school, we were now an intriguing challenge for well-known choreographers who had never worked with our body type. I found myself in the studio six days a week, and dance changed me. It helped me take ownership of my self-esteem and redefine what it means to be beautiful regardless of size or shape. I also realized that my mental health was, and is, inextricably linked to how I view and accept my body.

That said, dancing with a fat-friendly troupe wasn't all sunshine and roses. I faced a lot of social ridicule from outsiders who didn't understand what we were doing. We dancers were dashing people's expectations that we couldn't be graceful or athletic, or that we wouldn't contribute anything significant to the world of dance. We were sensitive to criticism because we went against well-established conventions that all dancers should be thin and willowy. On the other hand, as a group, we were more immune to people's opinions. Safety in numbers!

It can be hard to confront this kind of judgement head-on, but every body can be expressive, conveying beauty and power. Every body deserves love and respect. The experience gave me the courage to speak out against body shaming messages that lead to dysmorphia, and to instead support fat advocacy. I learned I could push back against ideas of "normal" behaviour

that try to dictate how people, particularly women, should look, act and simply occupy space.

As Lynda was fond of saying, "No pee-pee steps." Reach and move as far as you can—take up space! So we did.

Training body awareness

I developed great respect for training properly. My knowledge of my own body became more sophisticated. I knew what foods to eat and what not to. I discovered I had an intolerance for dairy, wheat, nightshades and several other foods. I felt much better during class and would not seize up afterwards when I took them out of my diet. At that time, there was very little research on dancers of size to help guide us. (Of course, dancers would be thin, right?) So as a group, we investigated what affected our health and performance and what would help in body maintenance and repair.

Often, people make flash judgements about others who are considered fat: that they are lazy, unintelligent, not sexual and cannot control their eating or eat poorly. Well, we weren't lazy, ate extremely well, were professionals in our day jobs and found we had a lot to convey in terms of sexuality and sensuality.

Mental health pluses

I'm not alone in having experienced the positive effects of dancing with

a fat-friendly troupe. Many who struggled with stress, anxiety or low mood have said that both dance and our community gave them validation and self-satisfaction. Dance turned self-consciousness and body scrutiny into consciousness of our presence in the world and body celebration.

After-class coffees became full-on potluck parties where we shared, laughed and laughed some more! We laughed at predicaments common to us but that aren't even a thought to others. Like the care needed when sitting in a chair, particularly with arms. Or the embarrassment of taking the chair with you when you stand up again. We howled at Lynda's expectations of us as dancers. She didn't really grasp that our bodies couldn't bend like a body half our circumference, turn as fast or leap about without sounding like furniture movers.

Joy on the stage

One of the most empowering experiences of my life was being onstage with my fellow fat dancers. It reminded me that we all have the right to own our truth. It took incredible bravery to step out onto that stage in front of hundreds of people, but it was worth it! I felt my own power as an athlete and a performer—something I would never have been able to do, had I not taken a chance and discovered a part of myself outside my intellectual life.

All of us know what it feels like to stand up in a room full of people and feel completely invisible. In the rare instances when these feelings creep up on me now, I remember how amazing it felt to train, socialize and dance.

May Street Productions made a documentary film called *Big Dance* featuring the troupe, which was a real acknowledgement of how far we had come. The film premiered in the David Lam Auditorium at the University of Victoria in 1998. The place was packed, and it became clear we were more than fat dancers. We represented so many people who feel sidelined due to social intolerance.

Carrying on the body-positive message

Today I use the knowledge I gained to help students get in touch with their bodies in class. When I feel a mass drain of energy because everybody has

been sitting slumped over too long, we stand up, breathe deeply and noisily, find the expressive value of flinging our arms around, become oxygenated, then continue class.

The first time I introduce group movement in any course is the most awkward—this is not normal behaviour! But students get into the groove, and those who celebrate its value drag the more self-conscious ones along with them.

The best is movement in drawing classes. In life-drawing, especially, seeing the pose makes more sense when you have the memory of the

pose in your body as you draw. Students learn that, when you draw, your whole body is engaged in the process—no pee-pee steps! The unacknowledged benefit of expressive movement during the act of drawing is also a practice of empathy. Even though I am no longer a dancer, this is how I pay it forward. ▽

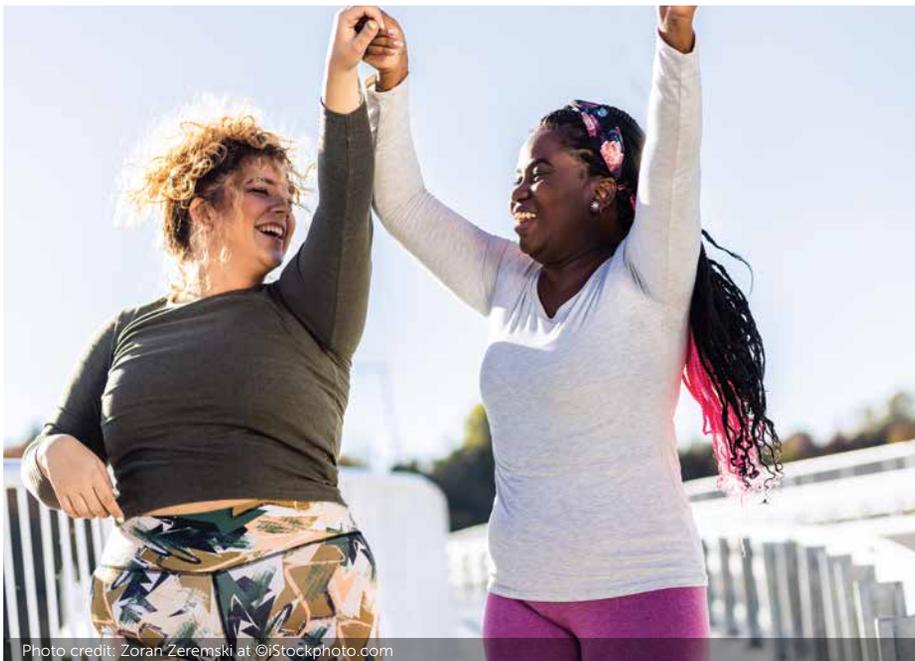


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When I feel a mass drain of energy because everybody has been sitting slumped over too long, we stand up, breathe deeply and noisily, find the expressive value of flinging our arms around, become oxygenated, then continue class.



Addiction in Young People

A NEED FOR CONNECTION

HARSIMRANJIT NOTRA, BA

Children have an innate need to form safe connections with loved ones. However, when those connections are unavailable, children learn to attach to “things” rather than people. These things may be food, gambling or substances, which may help them *self-regulate*, or manage stressors, but over time, can cause harm.

Simran was born in the land of five (Punj) rivers (Ab) and emigrated to Canada in 2007. As a substance use liaison for Surrey School District #36, on unceded Coast Salish lands, she supports young people experiencing substance use issues and connects them with community resources. Simran is completing a graduate degree in social work focused on Indigenous trauma and resilience



Simran Notra

In my work as a youth and family counsellor and substance use liaison, I connect with many individuals whose stories of trauma have impacted them in this way. As I write this, I do not mean to blame caregivers. Instead, I want to provide some educational background on the workings of the brain and how our reward and stress-management systems operate.

I often suggest to people that addiction may be a result of events in their lives. Because trauma does not discriminate, it also comes in many

forms. Some of the main traumas I have come across relate to history, childhood and immigration or forceful migration. These, combined with systemic barriers (like poverty, poor support for addiction and mental health issues, and lack of resources for newcomers), heighten people’s survival mode. In survival mode, we tap into the brain’s primitive “fight, flight or freeze” response.

As a parent of a child or loved one who is struggling with addictions, please know that some factors are beyond your control. The most impor-

tant thing you can do is to support them. Below, I explore some aspects of this support.

Self-care

When we find out that a young person we love is using substances, our first instinct might be to stop them. This might look like grounding your child or taking away things they love doing (sports, video games, etc.). You may also think about instilling in them the fear that if they do not stop using, you will kick them out or forbid them go out. You may shame them for using and may call them an “addict” or a “crackhead.”

All these things will cause you stress, but they also promote a narrative in your child’s brain that they are not good enough for you. For that reason, even if they quit, they will most likely go back to substances. This is not because they do not care about you or themselves, but because they want to be cared for and loved, and the only thing that may help them with that is substances.

To support someone in this situation, you must support yourself. I like the example of the oxygen mask on the plane: during an emergency, you must put the oxygen mask on yourself before you help your child. The same goes for supporting your loved one with addiction. When you practise self-care and engage in healthy living practices, supporting—with boundaries—becomes easier. Self-care may include having a safe place where you can talk about your feelings, or doing whatever grounds you or gives you joy. Joy can be hard to focus on, knowing your loved one is struggling, but remember, only they can bring changes in their life.

How support works

In my conversations with adults and young people, some themes that emerge are trauma, chronic stress and lack of support. Trauma and chronic stress can originate from family violence, neglect, poverty, racism, cultural pressures or lack of supports and resources for families. Children pick up on these issues and, to manage stressors, may use substances that help them escape their reality. They may also connect with other children going through similar stressors and may be influenced by those people to use substances.

Lack of support can include a child not being heard. Many times, when children do reach out for help, their concerns are disregarded or not taken seriously. Young people experience many other factors in school, too, including bullying and gang involvement. If no one is supporting them, chances are they probably will stop reaching out for help. To counteract this, we have to promote connection.

This does not mean enabling. Enabling can mean covering for your child (like lying to their school when they are absent or giving them money). It often happens because you fear your loved one may end up doing something illegal or more destructive to their

health. But enabling becomes problematic behaviour for your child or loved one and may cause an increase in your stressors as well.

There are more constructive ways to offer support:

- **Talk** to your loved one about what you have noticed about their substance use, and tell them you are worried about their health.
- **Ask** what they would find helpful in their journey.
- **Do not take away the things they enjoy** (activities, games). Instead, focus on building a relationship and connection with your child and bring up your concerns in a respectful and non-judgmental manner.
- **Connect with school counsellors and administration teams** who can put the child into contact with internal and external supports. These supports will not be forced on the child; instead, they will play an active role in conversations to get them the help they need.
- **Focus on boundaries.** Make clear boundaries with your child related to how you can support them.
- **Try to understand the causes of their substance use without judgment.** Remember, you may not get a single answer.

Lack of support can include a child not being heard. Many times, when children do reach out for help, their concerns are disregarded or not taken seriously. ”

Sometimes children may use to focus on their schoolwork or to fit in. It's important to have honest conversations so you can support them accordingly.

- **Educate yourself on brain and body development.** The brain's pre-frontal cortex (part of the brain involved in decision-making and understanding causes and effects) is not fully developed until the age of 26. That means young people will continue to learn in this area. It is important to have conversations that will not shame them for this, but rather, allow them to learn in healthy ways.
- **Focus on yourself and your goals.** Engage in self-care so you can better be there for your child or loved one. Remember, this is not an easy path, so it is important to take care of yourself.

A role for schools

The Surrey School District actively supports young people experiencing substance use and addiction issues. In the Safe Schools department where I work, our goal is to build relationships with students, families and community

resources so we can keep our schools and communities safe.

In my liaison role, I provide students with a sense of safety in our sessions. I allow them to talk about their lives and share their stressors, and I connect them with community organizations for sustainable supports. From my knowledge, schools all over BC can similarly connect students with internal and external programs. If your child or loved one is struggling with substances, do not hesitate to reach out to schools. It can be the first step in getting support.

Please know that as a caregiver, parent or a loved one, you are not alone. There are many resources in the community that can help you navigate the stressors you may be feeling. This includes substance-affected counselling you can access for free from agencies that support individuals in navigating substance use issues.

Know that you are doing the best that you can. Sometimes, that is more than enough. ▼

related resources

Some books on substance use that I recommend include:

- *Beyond addiction: How science and kindness help people change*, by Jeffrey Foote, Carrie Wilkens, Nicole Kosanke and Stephanie Higgs (Scribner, 2014). simonandschuster.com/books/Beyond-Addiction/Jeffrey-Foote/9781476709482
- *In the Realm of Hungry Ghosts: Close encounters with addiction*, by Gabor Maté (Knopf Canada, 2009). drgabormate.com/book/in-the-realm-of-hungry-ghosts
- *Loving an Addict, Loving Yourself*, by Candace Plattor (Candace Plattor, 2016). lovewithboundaries.com/wp-content/uploads/2019/01/Loving-an-Addict-Loving-Yourself.pdf

Effectively Supporting Others is a Radical Act

DOES IT REALLY HELP?

JENN CUSICK

“I don’t feel seen, heard or understood.” This is one of the most common types of anguish of our time. We live in an era where technology connects us in ways that would have felt like science fiction 30 years ago. Yet it seems we are more disconnected than ever. Not to mention that our post-pandemic world is still healing from so much isolation. In November 2021 the federal government released a document about loneliness.¹ It reported that one in 10 people aged 15 and older say they *always* or *often* feel lonely.



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Likely, living in this high-tech, capitalistic era has contributed to loneliness. Many people face new levels of poverty, while others strive to get even richer. For so many people, significant time is required just to meet our basic needs, leaving less time to spend on our well-being. Referring to Gabor Maté’s book, *The Myth of Normal*, journalist Chris Hedges writes that, “The engine of capitalism, defined by the cult of the self, thrives on the fostering of psychological and

physical chronic disorders, including high blood pressure, diabetes, anxiety, depression, addictions, and suicide.”²

Writing about our lack of connection and community, BC’s own Dr. Bruce Alexander notes that, “People adapt to this dislocation by concocting the best substitutes that they can for a sustaining social, cultural and spiritual wholeness, and addiction provides this substitute for more and more of us.”³



Photo credit: Vladimir Vladimirov at ©iStockphoto.com

Change starts with becoming better supporters. That is the radical act. Putting effort into building intentional community and connection with people shouldn't be radical, but in this hyper-individualistic era it is! Being a supporter means going against the grain. ”

As a larger societal collective, we must develop safe spaces within our neighbourhoods, schools and workplaces.

Taking radically intentional action

So is there anything I can do as one person to increase connection? How do I support my loved one who is lonely or suffering? I have no idea where to start... These are the thoughts and questions so many of us have in relation to disconnection. There aren't easy answers, but I'm going to share some words that may bring hope.

I was lucky enough to write the free "Where We Are At" peer support curriculum for the province of BC (see <http://peerconnectbc.ca/>).⁴ I have been working in peer support for decades. As a result I've spent

years reflecting on and researching these tough questions. I have known pain and isolation myself, and I've supported family members and friends as they've struggled. The question I always come back to is this: how can we support individuals who are struggling and slowly impact our communities so that fewer people suffer in the future?

The peer support curriculum addresses this question. The project involved several working groups with people who have lived and living experiences of mental health and substance use issues, who are also committed to creating change for individuals and society. I believe we really have something useful to offer British Columbians and that the

curriculum has applications outside of peer support.

Change starts with becoming better supporters. That is the radical act. Putting effort into building intentional community and connection with people shouldn't be radical, but in this hyper-individualistic era it is! Being a supporter means going against the grain. We have to become positive deviants—someone, or a group of people, whose uncommon behaviours and strategies let them find better solutions to problems than their peers.⁵

This can happen when we help out a neighbour, sit with someone grieving without trying to fix them, call a friend we haven't heard from in a while or advocate for a colleague who is struggling. Such small acts are simple, but cumulatively, they can change someone's world and, perhaps, even society as a whole.

The peer support curriculum aims for this change by embracing the following core values:

- **Hope and Wholeness for all:** connection has to be universal to bring lasting change
- **Acknowledgement:** all of us long to know and be known, and seen for who we are
- **Mutuality:** this value recognized the importance of reciprocal and co-created relationships
- **Strengths-based:** it's more motivating to move towards a goal, than away from a problem and to build on existing strengths
- **Self-determination:** it is essential to create an environment where people can tap into inner motivation, free from coercion

- **Belonging and Community:** all humans need to belong; we work towards safe spaces where people feel connected
- **Respect, Dignity and Equity:** all humans have intrinsic value, and we serve with an understanding of cultural sensitivity and a trauma-informed lens, while mindfully addressing bias
- **Curiosity:** being curious fuels connection, growth and deeper learning

As supporters, embracing these core values means we must do our own healing work. This often begins with self-reflection and self-awareness, while practising self-compassion.

But we must also recognize our biases and judgments because we all have them—our brains are wired to judge. Awareness creates opportunities to deconstruct bias. We must embrace curiosity and a sense of “not knowing” so we can see someone else for who they are, and not just a projection of our own experiences and world view.

And, while it’s easy to want to motivate or change someone else, lasting change must come from within. When people are motivated *extrinsically* (from the outside, for example, with rewards and punishment), change doesn’t stick. *Intrinsic* motivation (from the inside) is much more powerful. This happens when we tap into meaning, purpose and enjoyment. As supporters, we can help by shining a light on someone’s strengths through encouragement.

We can pay attention to their growth, no matter how small, and celebrate

the small wins. This encouragement is more than cheerleading. If we notice a loved one has done something hard, we can say something like, “I noticed how you stood up for yourself, and I know how hard that is for you.”

As supporters, we also need to understand the effects of trauma on the body. After a traumatic event, a person is more likely to experience long-term trauma when they feel alone and helpless right after the event. When pain and helplessness are unprocessed, they continue to live in the body. People can also experience re-traumatization when they are triggered by something that has similarities to their original trauma. For example, when someone who’s experienced domestic violence hears people yelling on the street, their sympathetic nervous system can react as it did when it first experienced trauma. This is not an echo—their bodies react the same way. As supporters we must be trauma-informed to try to prevent the sympathetic nervous system from engaging. Learning this, and cultural humility and sensitivity, is essential for creating safe spaces.

This is just the tip of the iceberg. The answers to these tough questions are both simple and complex. Change requires a paradigm shift. But that shift is accessible when we have support and guidance along the way. Please check out the full free training at peerconnectbc.ca.

I also offer in-person and Zoom training for teams that want to work through the curriculum collectively. (Let’s face it, not all of us can get through an online training indepen-

dently.) I am currently working on a version of this training for supporters and loved ones. For more information about training, visit my website peersupportededucation.com. ▼

resources

Promoting Positive Body Image: A Resource for Educators jessieslegacy.com/promoting-positive-body-image-a-resource-for-educators

Resources and recommendations for educators and school staff from Jessie's Legacy Eating Disorders and Prevention and Vancouver Coastal Health. This resource offers information about building positive body image and a positive relationship with food as a well as quality teaching tools.

Accessible recreation in BC

- **Recreation and Leisure directory from BC Disability:** An extensive list of organizations or resources that help people with disabilities participate in sports, stay active, and participate in their community, such as adaptive programs and inclusive gyms or facilities. BC Disability also has a directory of funding opportunities to cover some recreation costs. Visit bcdisability.com/recreation.
- **Recreation Resources in BC from ConnectTra:** A directory of resources in BC including adaptive sports, outdoor recreation and camping, and inclusive gyms or training facilities. Visit connectra.org/accessible-recreation-resources-in-bc.
- **Accessible hiking:** AllTrails allows users to filter for wheelchair-accessible hikes. Find a list of BC recommendations at alltrails.com/canada/british-columbia/ada. possAbilities also has a list of accessible hikes at posabilities.ca/14-accessible-hikes-in-bc.

Exercise and Depression Toolkit exerciseanddepression.ca

Exercise is a stand-alone treatment for mild to moderate depression and a treatment component for moderate to severe depression. The Exercise and Depression Toolkit from the Population Physical Activity Lab at UBC is a tool to help health care providers work collaboratively with people who want to increase their physical activity to manage depression.

Eating Well

keltymentalhealth.ca/eating-well

Guides for parents and caregivers of young people with a mental illness from Kelty Mental Health. Find tips for reducing conflict or stress at meal time, building healthy relationships with food, and developing healthy body image.

Resources from HealthLinkBC

Talk with a dietician or exercise professional and find resources in your community. Call 8-1-1 and state which service you want to access. Translators are available in over 100 languages.

- **Dietitian Services:** Ask a registered dietician questions about food or nutrition. You can also email a dietician at healthlinkbc.ca/health-services/healthlink-bc-811-services/dietitian-services. Available Monday – Friday, 9AM – 5PM.
- **Physical activity services:** Ask a qualified exercise professional questions about getting started, overcoming barriers, building a healthy lifestyle, and finding fitness programs or health professionals in your area. You can also email an exercise professional at healthlinkbc.ca/health-services/healthlink-bc-811-services/physical-activity-services. Available Monday – Friday, 9AM – 5PM.

Mental Health and Physical Activity Toolkit Guide 2: The relationship between physical activity and mental health mind.org.uk/media/7594/mind-mental-and-physical-activity-toolkit-guide-2.pdf

This guide from the UK-based Mind outlines important mental health benefits of physical activity and strategies to navigate challenges of mental illnesses or treatments, such as what to do when physical activity brings up anxiety or panic attacks. Mind also offers tips for building healthy relationships with activities and signs of over-exercising, including guidance for coaches and fitness professionals.

 This list is not comprehensive and does not necessarily imply endorsement of all the content available in these resources.



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