

# Don't just “weight and see”

## Cultivating inclusive conversations about bodies

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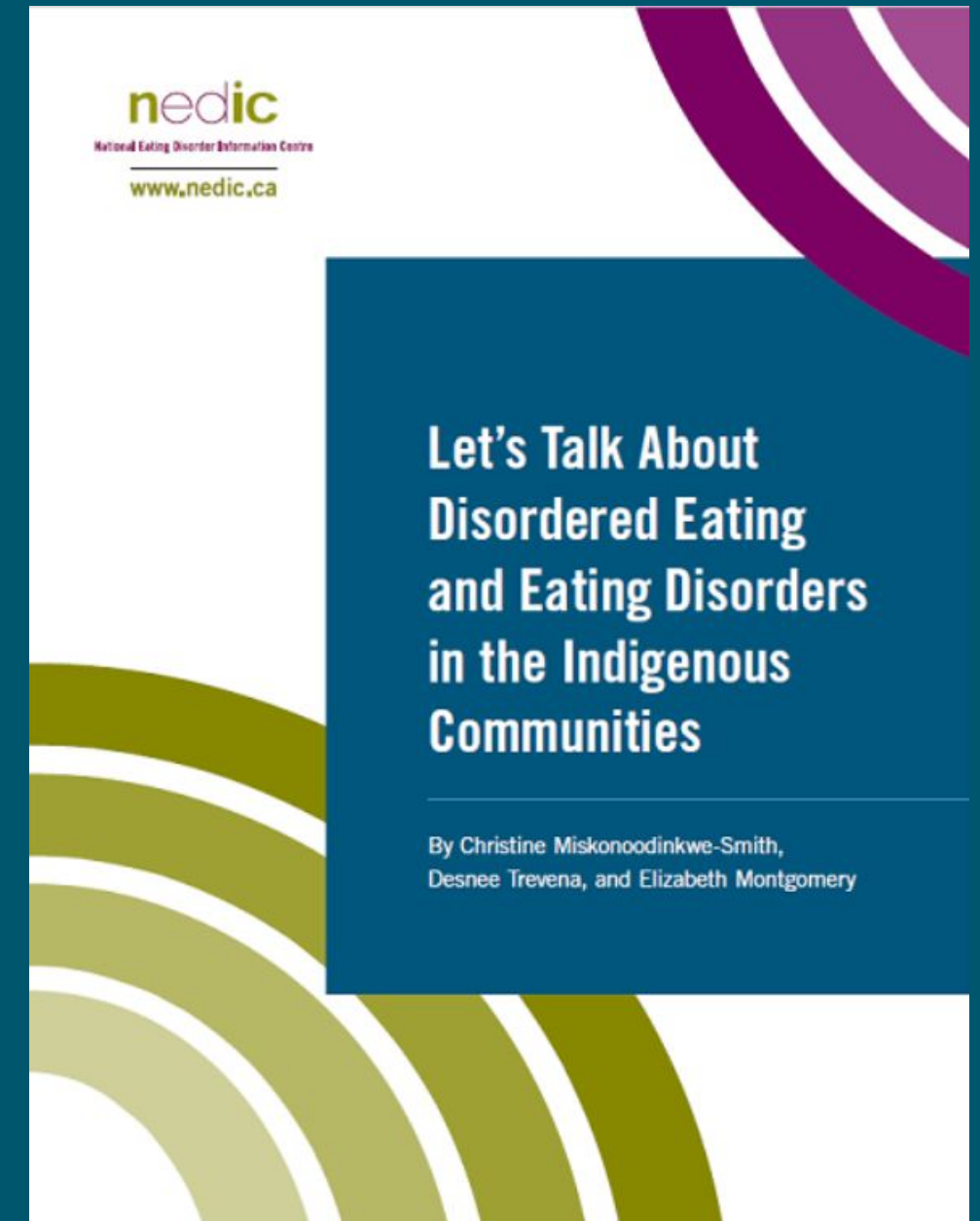
National Eating Disorder Information Centre

# Land Acknowledgement

- [Decolonizing Eating Disorders \(Podcast\)](#)
- [How to decolonize the way you think about your body](#)
- [Beyond "Eating Disorders Don't Discriminate"](#)

## [Let's Talk About Disordered Eating and Eating Disorders in Racialized Communities:](#)

*Guides to eating disorders in the Black, Indigenous, and People of Colour communities by and for community members and carers*



# The National Eating Disorder Information Centre (NEDIC)

## Helpline services

**Our national toll-free telephone helpline and live chat services staffed by trained support team**

Available to anyone across Canada, free of charge, by self-referral; anonymous, confidential, no diagnosis necessary

[Learn more](#)

- Information, resources, referrals, and in-the-moment support
- People directly affected by eating disorders and those supporting them (friends, family members, partners, carers, professionals)
- Navigating provincially-funded healthcare system, community-based agencies, and private options for support

## Community education

**Live, educational workshops available in-person (GTA) and virtual (Canada-wide)**

Prevention- and early intervention-focused work that aims to create body-inclusive environments, where people feel accepted and respected

[Learn more](#)

- Taking a whole-school approach in K-12 schools (workshops for students, educators and school support staff, parent evenings for caregivers)
- Training student leaders and campus partners on post-secondary campuses
- Building capacity with healthcare providers
- Organizing Eating Disorders Awareness Week

## Resource & partnership development

**Our online resource library, national service provider directory, and engagement with non-profit partners**

[Learn more](#)

- Informational checklists, pamphlets, and guides for those directly affected and people supporting them
- Guidance for healthcare providers looking to better support patients accessing care
- Running a blog and engaging on social media
- Acting as a knowledge broker for research and community-based grants, and building sector-wide capacity in mental health

# Considerations for this learning

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1. Approach this material with curiosity
2. Stay engaged
3. Be brave and willing to explore
4. Expect a lack of closure
5. Speak through your truth
6. Trying on is not taking on

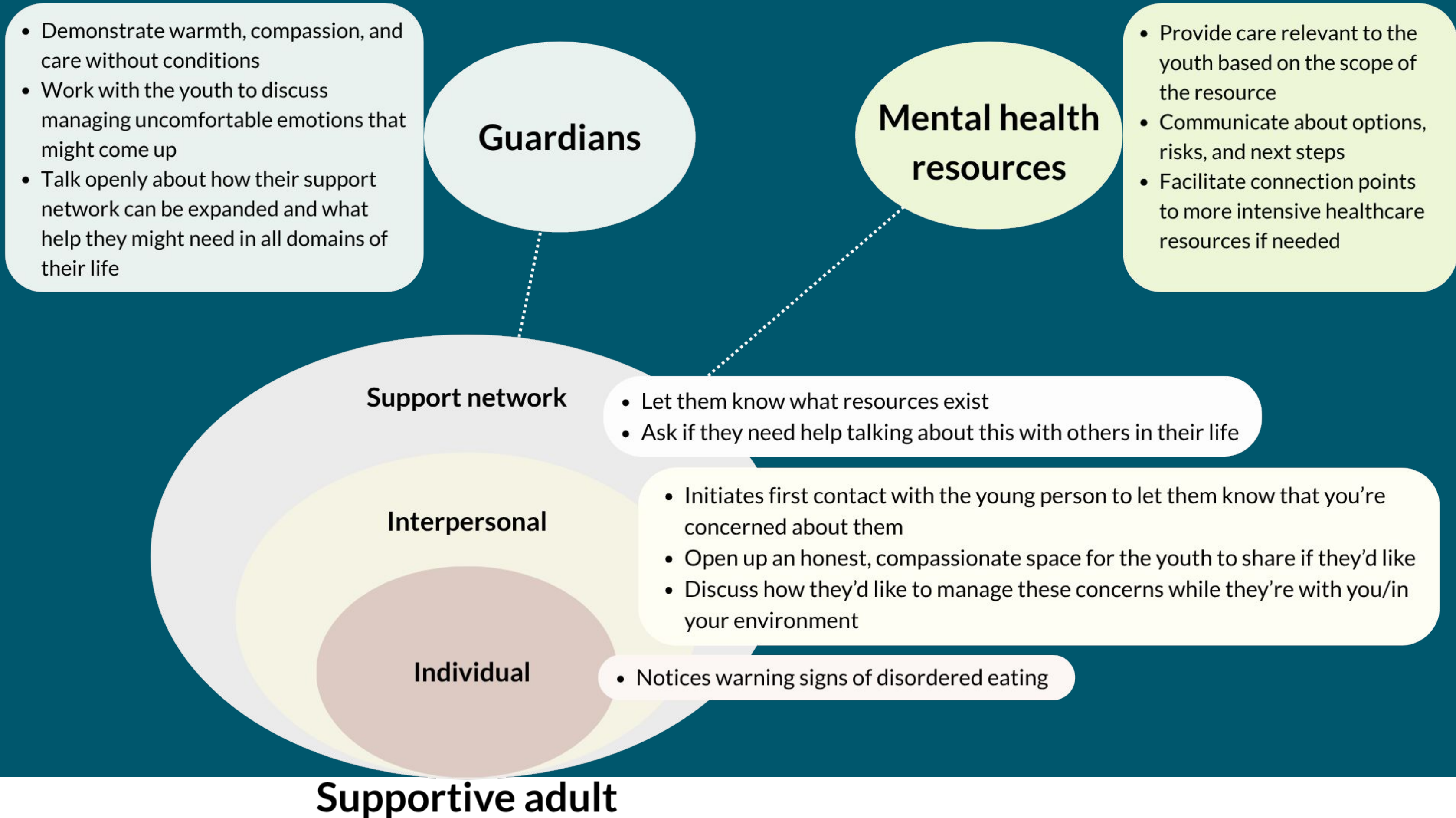
Adapted from Alatorre, L. M., Southern Law Project, and Training for Change, via Acle, A. (2022)

## Accessibility Reminders

- You will receive a copy of the slide deck following today's workshop
- For an anonymous way to participate and ask questions, join us on *Mentimeter* (QR code to follow)

## How to Participate

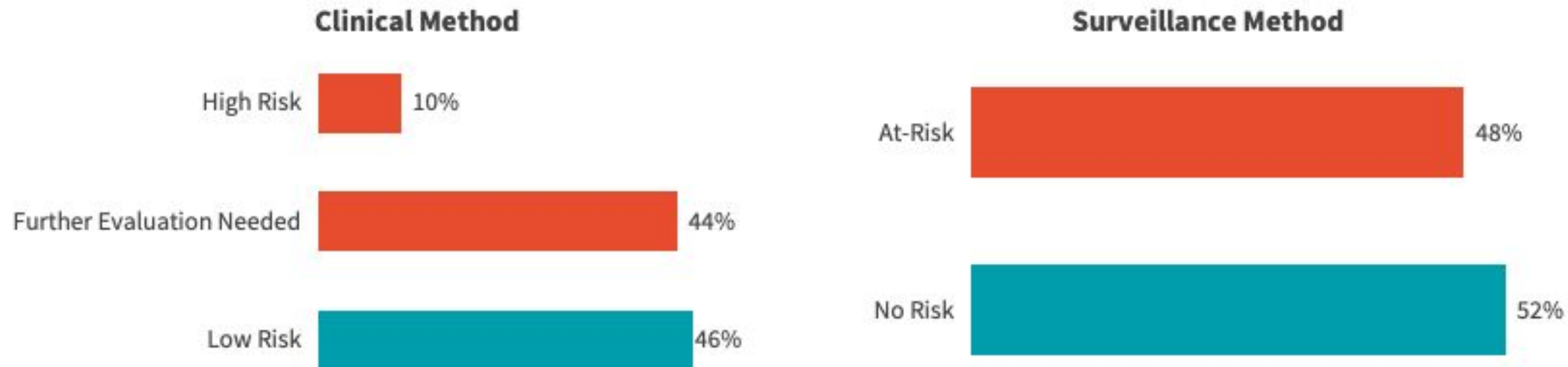
- You will be invited to participate in some group conversations and some with your seat neighbours
- Feel free to ask questions throughout — no need to hold them until the end!



# Half of Canadians have the potential for having an eating disorder

- Based on the ODES-Y screener, 10% of Canadians are at high risk for an eating disorder. An additional 44% report eating behaviors and preoccupations that warrant further evaluation for a potential eating disorder. Using the Surveillance analysis 48% are at-risk for having an eating disorder.
- Almost three-fifths of women have the potential for having an eating disorder (59% vs. 47% of men), with 13% being at high risk (6% of men) and 46% needing further evaluation (41% of men). Likewise, 52% of women are At-Risk, compared to 42% of men.
- Individuals self-reporting high levels of anxiety or depression (rated 8-10) are more likely to be at high risk of eating disorders (25% and 26%, respectively) and show signs of being at-risk (77% and 81% respectively). The same is true for those showing signs of alcohol (high risk 20%, at-risk 85%) or cannabis (high risk 20%, at-risk 87%) dependency. Additionally, those with a physical disability (high risk 16%, at-risk 63%) and members of 2SLGBTQ+ communities (high risk 17%, at-risk 62%) are more likely to have sign of eating disorders. Additionally, visible minorities are also more likely to be at-risk (53%)

## RISK OF EATING DISORDER



**A15B:** In the past four weeks, how often did you worry so much about your weight, shape or muscles that you couldn't get it out of your head?

**A15C:** And in the past few weeks, how often did you do each of the following: Base: (Total n= 3,213)

Thank you to Nicole Obeid from the CHEO Research Institute and Shaleen Jones from Eating Disorders NS for their guidance over the topic of eating disorders.

# The eating continuum

## Positive relationship with food and body

Expressing compassion towards body — even during tough moments

Flexible and spontaneous around food and movement

Approaching food and body image from a stance of neutrality

## Eating concerns

Noticing some worries about body weight and/or shape

Engaging in body checking or social comparison

Feeling guilt after eating certain foods

Chronic lack of appetite

## Disordered eating

Sometimes preoccupied by body image

Food is a source of anxiety

Changing eating or movement habits in an effort to change body weight/shape

Sensory-based avoidance of certain foods

## Eating disorder

Frequently preoccupied by body image, food and/or movement

Food and movement are one's only coping strategies

Taking significant toll of important parts of their life

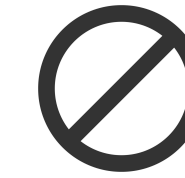
Learn more: [Eating Disorders and Treatment](#)



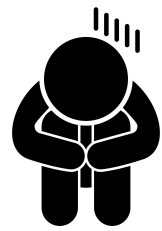
Labelling foods as good or bad



Food anxiety



Eliminating food groups



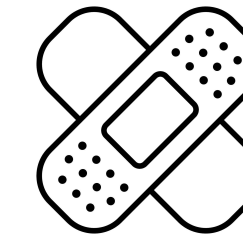
Food guilt



Feeling the need to justify your eating



Food rules



Exercising as punishment



Avoiding social situations because of food

### ENGAGEMENT

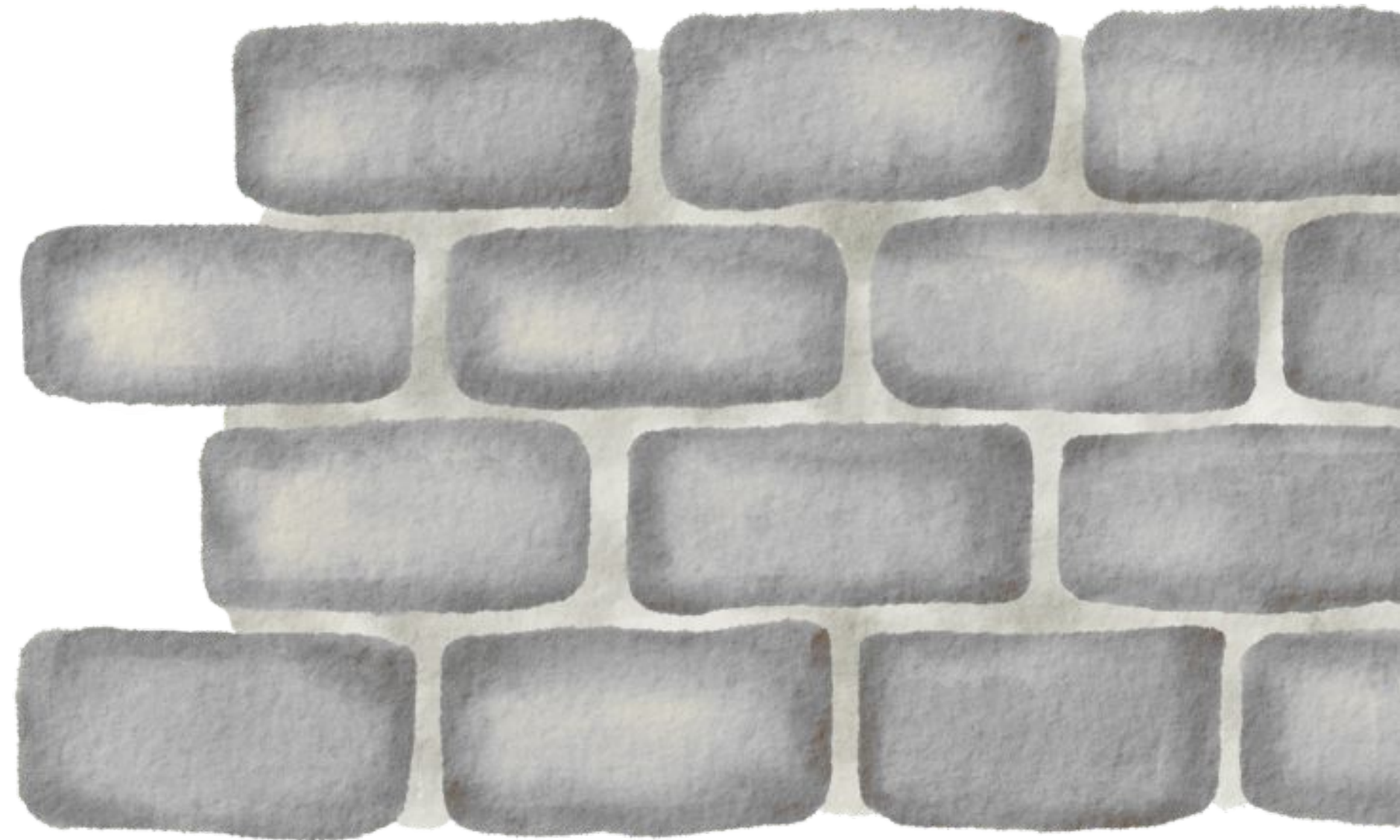
Normalize discussing food, body image and movement

Would it be okay if I asked you some questions about your relationship with food and your body?

I talk about these things with all the people I see because challenges in this area often go hand-in-hand with other parts of our mental health

# Establishing a fire-proof environment

As educators / counsellors, there are measures that we can take to create an environment that encourages conversations about divisive topics that are constructive rather than conflictual



# Defining health: eating

**Healthy eating is about more than what and how much food we eat**

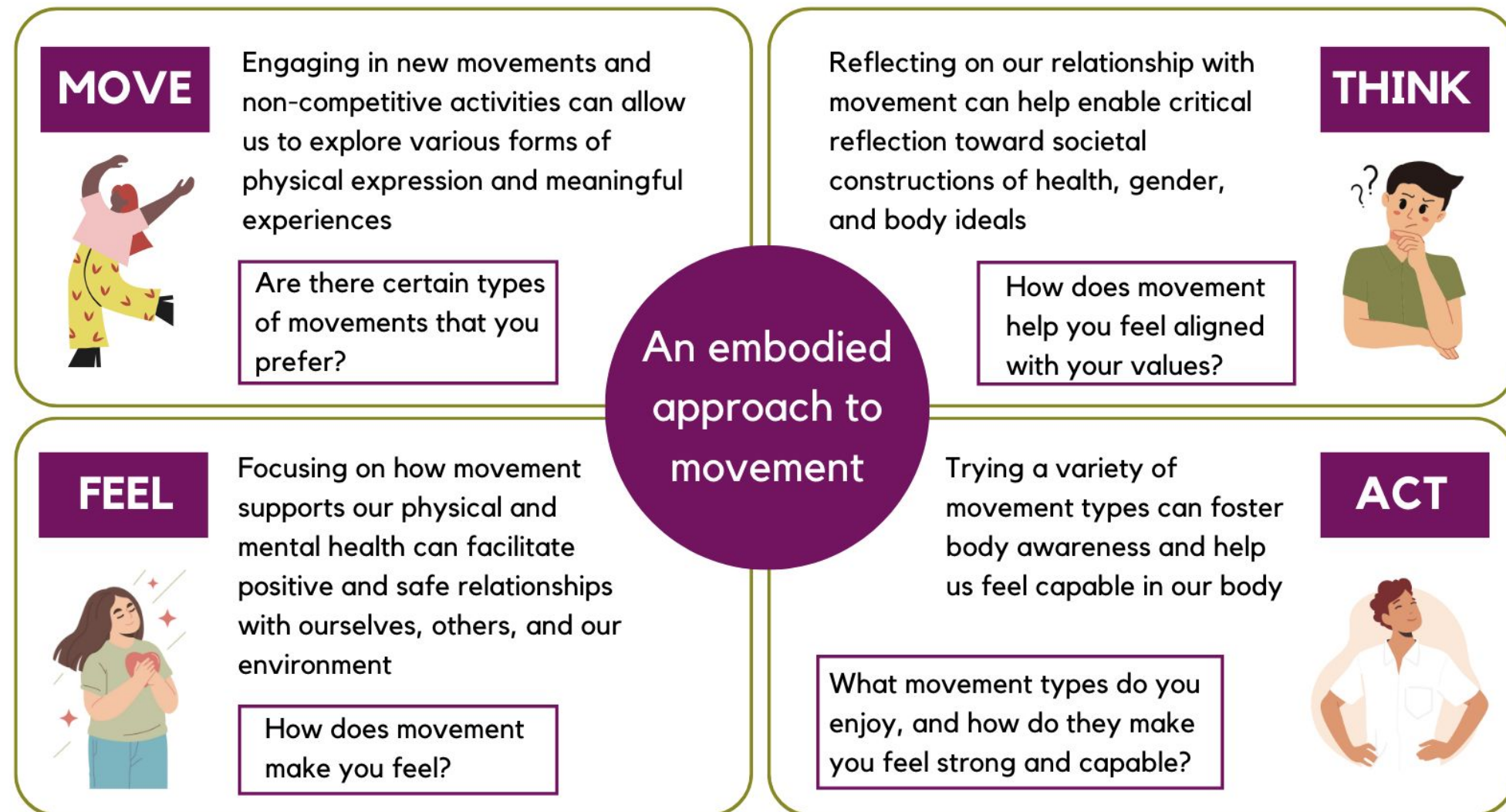
- Balance and variety
- Meeting nutrition needs
- Flexibility, allowing all foods
- Family and cultural foods
- Connection and enjoyment
- Tuning into hunger and satiety signals



# Defining health: physical activity

## Being physically active is about much more than exercise

- Choice
- Flexibility
- Intuition
- Pleasure
- Celebration

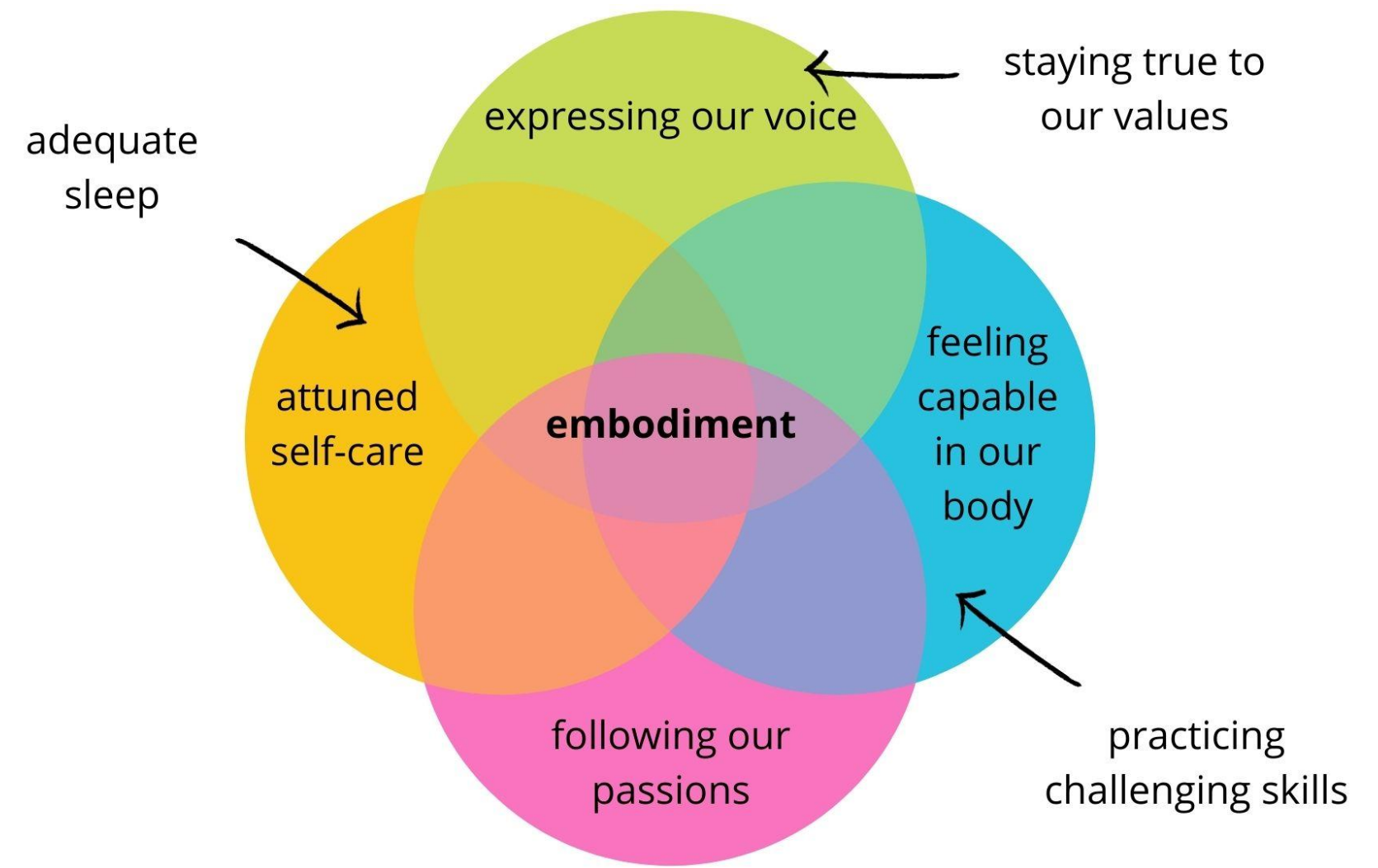


Source: [Joyful Movement](#) (FREEDcan, 2025)

# Defining health: body image

**Healthy body image is about perception and self worth, not size or weight**

- Body connection and comfort
- Agency and functionality
- Attuned self-care
- Experience and expression of desire
- Resisting objectification



# Fire-proofing

## Fire-resistant



“What about [this]?”  
“It’s okay, I can wait”  
“That’s one idea, I wanna add [this]”



- Students trust each other to handle the situation
- Play, joy, humour, connection
- Skills like courage, creativity, empathy

## Sparks flying

Multiple people talking at once

The room oscillates between quiet and loud

- A shift in energy (e.g., tension)
- Students withdrawing or disengaging
- Eye rolls, shifting in seats
- Frustration, defensiveness, bitterness

## Ablaze

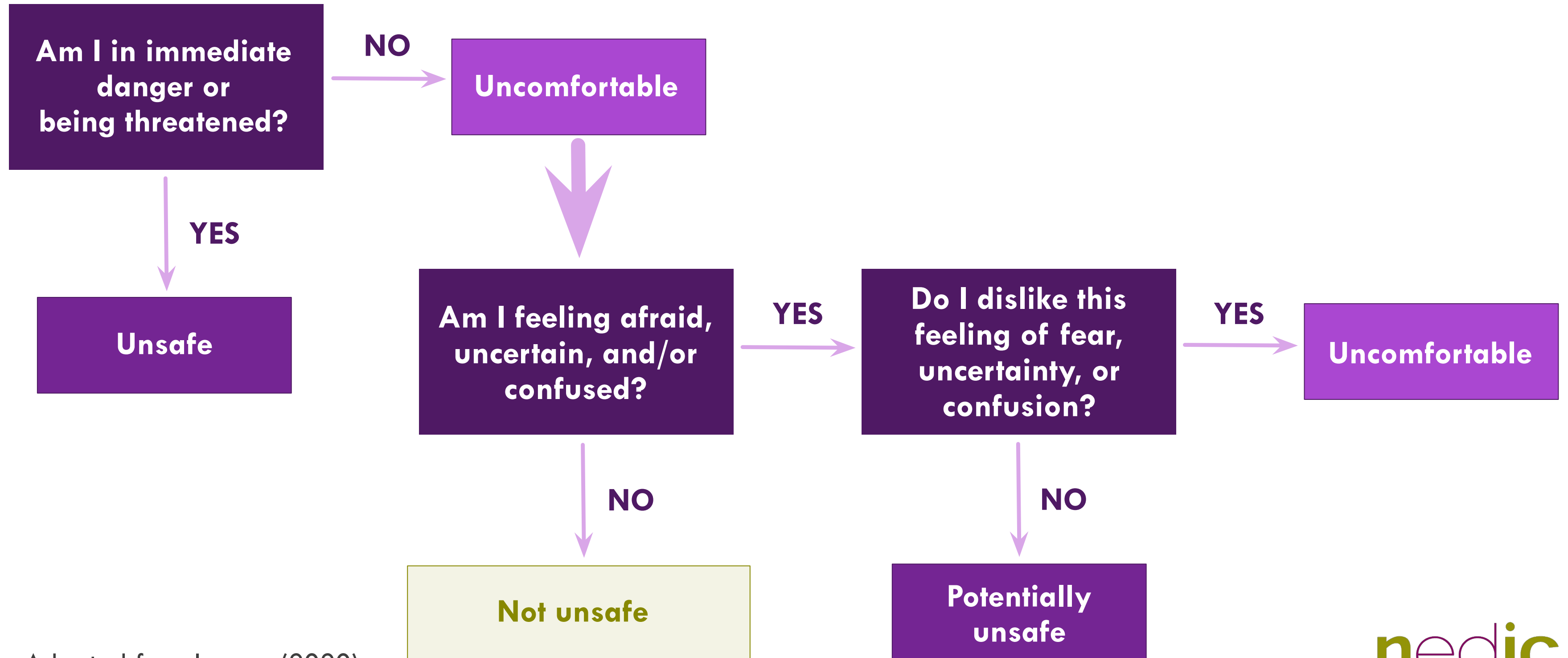
“They’re fat, just like [classmate]”

“That doesn’t matter”

“That doesn’t exist”

- Students shaking, anxious, or upset
- Signs of fear
- An individual student is persecuted for sharing their perspective

# Is this unsafe...or just uncomfortable?



Adapted from Ingram (2020)

# Reflection activity

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As a **fat** person, shopping for clothes is hard for Shay because things that they like are rarely available in their size.

No wonder Shay is **fat**; they're eating fries for lunch.

# Letting sparks fly

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Sparks may fly.

It may get hotter.

The heat may be uncomfortable.

But the heat is not unsafe.

# Reflection activity: framework for firefighting

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- **Set the tone and intentions for the conversation:**
  - To be open to considering experiences that are different from our own and tap into the wisdom of the room
  - To make space for new ways of understanding an issue
  - We can disagree without harm
- **Attend to emotions**
  - Use your senses (e.g., eyes, ears, bodies) to guide your observations
  - “I’ll pause here and check-in — does everyone feel okay continuing with this topic?”
- **Frame learning**
  - Listen for values underneath the stories that a student shares; it can help promote more constructive conversation
  - Model imperfection and humility by inviting co-creation of meaning: “How do others in the room understand what just happened?”
- **Engage in repair**
  - Address harm openly by locating power (personal, interpersonal, and structural) in the room
    - “I realize my phrasing centred one experience, let’s reframe that”
  - Get curious to encourage consideration of an issue’s nuances and alternative perspectives
    - “You don’t have to share, but your perspective would add a lot if you want to”

# How might we respond?

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I can't eat breakfast and lunch. If I eat more than one meal a day, I might become obese.

# How might we respond?

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It's as simple as watching what you eat and exercising. People who don't do these things just need to stop making excuses!

# How might we respond?

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Everybody knows that fat people are unhealthy.

# Preparing students for constructive dialogue

*“Throughout this lesson, we’ll explore ideas that might make you think twice about what you already know. That’s a good thing! It’s all part of growing and learning. I encourage you to keep an open mind, consider the research, and reflect on your own perspective. This is a self-reflection-based conversation, so there’s no pressure to share anything unless you feel comfortable doing so. Just remember to be mindful of how we express our thoughts—everyone comes from different places and sees things differently.”*

*“When having an emotionally charged discussion, it’s important to create a space where everyone feels respected, even if we don’t agree. Start by really listening to others before jumping in with your own thoughts—understanding where someone is coming from helps you respond thoughtfully. It’s also crucial to stay calm and respectful, even if emotions run high. If you feel yourself getting upset, take a deep breath and pause before speaking. Use “I” statements to express your own perspective, like saying “I feel” instead of “You’re wrong,” which keeps the conversation focused on your views and experiences without attacking anyone else’s.*

*“Sometimes, we won’t agree, and that’s okay—it’s important to respect that others may have different experiences and perspectives. Approach the conversation with the mindset that you might learn something new, even if it challenges your beliefs. Lastly, be mindful of sensitive topics and words that might hurt someone; this is a space to discuss, not to judge or belittle. By following these principles, we can have a respectful and meaningful conversation, even when difficult topics and emotions are involved.”*

# Resources

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## Eating disorders - general information

- [NEDIC](#)
  - [Myths and truths about dieting and weight loss](#)
  - [Guide for supporting a friend who might be struggling](#), also available in [French](#)
  - [Preparing for a conversation and strategies for how to respond](#)
  - [Understanding the non-linear process of recovery](#)
- OSCA Today, Fall 2024
  - [Fostering Supportive School Settings for All Student Bodies](#)

## Resources to send home

- [How to nurture positive body image in your child](#), also available in [French](#)
- [A parents' and caregivers' guide to supporting youth with eating disorders](#)
- [A checklist to bring to a doctor's appointment](#), along with a [guide for medical professionals themselves](#)

# Questions...

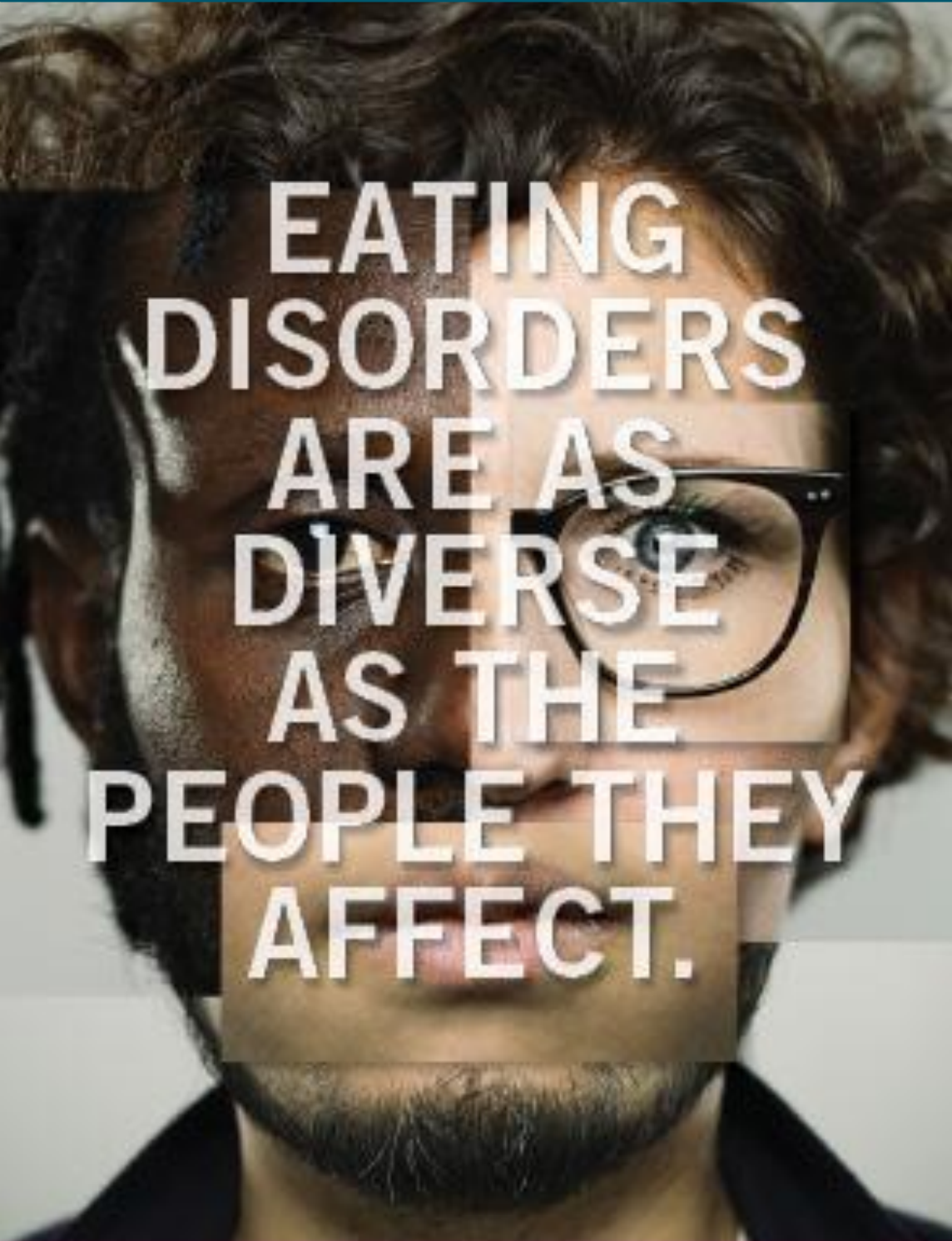
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**About resources (pamphlets, tip sheets, etc.)?**

Feel free to e-mail Emily at [emily.tam2@uhn.ca](mailto:emily.tam2@uhn.ca)

**About community education (offerings, booking presentations)?**

Feel free to e-mail Ary at [aryel.maharaj@uhn.ca](mailto:aryel.maharaj@uhn.ca)



EATING DISORDERS ARE AS DIVERSE AS THE PEOPLE THEY AFFECT.

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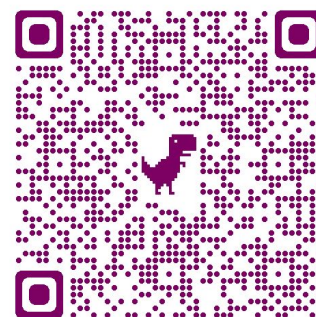
National Eating Disorder Information Centre

TELEPHONE HELPLINE & LIVE CHAT:

[www.nedic.ca](http://www.nedic.ca)

1-866-633-4220

Mon–Thu 9:00am - 9:00pm ET  
Fri 9:00am - 5:00pm ET  
Sat–Sun 12:00pm - 5:00pm ET



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This devastating illness strikes all types of people in different ways, often secretly – sometimes publicly. But talking saves lives.

Call 1-866-NEDIC-20 or 416-340-4156 for support and information.