

Every Body Collaborative
Thunder Bay Chapter
Eating Disorder Awareness Week 2025 Toolkit



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Every Body Collaborative-

Thunder Bay Chapter - Toolkit

What is Eating Disorder Awareness Week (EDAW)?

Eating Disorder Awareness Week (EDAW) is dedicated to raising awareness and educating the public about eating disorders. This year, EDAW will take place from February 1st to 7th, 2025. Eating disorders affect individuals of all ages, races, ethnicities, genders, sexual orientations, socioeconomic statuses, body sizes, and abilities. EDAW is nationally recognized and provides a dedicated time to highlight the impact of eating disorders, challenge stereotypes and misconceptions, and offer guidance on how to support those living with eating disorders.

For more information on EDAW, visit the [National Eating Disorder Information Centre \(NEDIC\)](#).

What is the Every Body Collaborative – Thunder Bay Chapter

The Every Body Collaborative Thunder Bay Chapter was established in 2024 to increase awareness, advocate for better community resources, and support local healthcare professionals working with individuals affected by eating disorders.

What is Eating Disorders Ontario (EDO)?

Eating Disorders Ontario (EDO) is a provincially-funded specialized training program that is designed to improve and maintain high-quality service delivery by increasing practitioner competence to support the treatment of eating disorders. Through various training opportunities, EDO equips healthcare providers across all settings with the knowledge and tools necessary to offer effective care. Eating Disorders Ontario- Prevention (EDO-P) is a new service offered by EDO. This program builds local capacity across Ontario for the delivery of evidence-based specialized prevention.

[More Information on EDO.](#)

Eating Disorders Ontario and Every Body Collaborative- Thunder Bay Chapter's Participation in Eating Disorder Awareness Week 2025

EDO and Every Body Collaborative Thunder Bay will participate in EDAW 2025 to raise awareness about eating disorders within the district. This year, we invite you to join us in this initiative to increase your understanding of eating disorders and share that knowledge within your community. By participating, you will also have the opportunity to challenge your stereotypes and beliefs about eating disorders, disordered eating and body inclusivity.

Why It's Important to Participate

Eating disorders are complex mental illnesses with physical manifestations, and it's important to emphasize that they are not lifestyle choices. The development of an eating disorder is multifaceted and is influenced by factors such as genetics, mental health conditions, discrimination, family dynamics, peer relationships, and societal pressures around appearance. Symptoms often include an unhealthy preoccupation with food, body weight, and shape. While there are various types of eating disorders, the most common include anorexia nervosa, bulimia nervosa, and binge-eating disorder.

Disordered eating and eating disorders are related concepts, both involving problematic eating behaviours. However, they differ significantly in terms of severity and diagnostic criteria. Disordered eating refers to a range of unhealthy eating behaviours and distorted views about food, weight, body shape, and appearance. These behaviours may include practices like dieting, skipping meals, fasting, restricting food intake, eliminating certain foods, binge eating, overusing diuretics, laxatives, or weight loss pills, and engaging in compensatory actions such as purging or excessive exercise. While disordered eating can vary in intensity, it does not meet the criteria for a diagnosable eating disorder in terms of frequency, duration, or psychological impact.

Eating disorders, on the other hand, are serious mental health conditions marked by consistent disturbances in eating behaviours that result in significant psychological harm. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5 TR) defines specific criteria for various eating disorders, including anorexia nervosa (AN), bulimia nervosa (BN), binge eating disorder (BED), avoidant restrictive food intake disorder (ARFID), and other specified feeding and eating disorders (OSFED).

(Adapted from the National Eating Disorder Information Centre)

Reducing Barriers

Eating disorders, although treatable, have the second-highest mortality rate among mental health conditions. Sadly, many people are unaware of the significant barriers to recovery, such as a lack of understanding about eating disorders and the profound impact they have on individuals' lives, as well as the longer a person has an eating disorder the harder it becomes to treat successfully. By raising awareness and increasing education, we can help promote early intervention and ensure that individuals have equitable access to the appropriate treatment in a timely manner.

Body Inclusivity and Health

Body inclusivity is crucial for promoting health and well-being for everyone, regardless of body size. Weight bias, stigma, and discrimination are major public health issues that disproportionately affect people in larger bodies, as well as racialized communities, the 2SLGBTQIA+ community, and other groups burdened by structural health inequities. These harmful issues can manifest in various settings—such as healthcare, schools, workplaces, and the media—and often lead to negative health, social, and economic outcomes.

For more information on weight stigma visit the [National Eating Disorders Collaboration \(NEDC\)](#).

A Weight-Inclusive Approach

Embracing a weight-inclusive approach means promoting health and well-being without judgment or discrimination based on body size. This approach supports practices that are inclusive of people of all sizes and shapes. In public health, this perspective recognizes that the pursuit of health or well-being is not determined solely by one's size or shape but may also involve improving emotional and mental well-being.

For more information on weight-inclusive approaches, visit [Ontario Dietitians in Public Health \(ODPH\) - Towards a Weight-Inclusive Approach in Public Health: 2024 Position Statement](#).

Wondering how to make your workplace more weight-inclusive? See the [checklist](#) below created by ODPH to learn more.

Campaigns

Mirrorless Monday

University of Waterloo first launched an annual campaign to promote body positivity, and last year, Lakehead University endorsed this initiative. The Every Body Collaborative Thunder Bay Chapter encourages everyone to get involved. The campaign reminds participants that self-worth is not defined by their reflection. We invite you to create a "Mirrorless Monday" in your workplace or personal life, challenging the way we may currently define self-worth based on appearance.

How to Create Your Own Mirrorless Monday:

Contact Kim McGibbon for stickers and posters to participate in Mirrorless Monday.

Email: kim.mcgibbon@tbdhu.com Phone: 807-625-5900

STEP 1: DISPLAY THE MIRRORLESS MONDAY INFORMATION

Post the page that explains what Mirrorless Monday is, along with the message "Today is MIRRORLESS MONDAY".

STEP 2: CHOOSE YOUR MESSAGES

The remaining messages are up to you! If you don't have a large mirror, space may be limited, so select a few key messages that best support the campaign in your workplace or personal life. We encourage diversity in the messages, so feel free to mix them up. To see the posters we created for easy printing head [here](#) to print them off.

STEP 3: SHARE ON SOCIAL MEDIA

Take a photo of your mirror setup and share it on social media using the hashtag #MIRRORLESSMONDAY, along with any other relevant campaign hashtags, such as #BodyInclusivity or #BodyAcceptance.

STEP 4: REMOVE CAMPAIGN MATERIALS

Take down the campaign materials based on needs within your organization, including any sticky tack residue, and recycle the paper. Keep materials used for this Mirrorless Monday for future Mirrorless Monday events!

STEP 5. GIVE US YOUR FEEDBACK

We would love your feedback about this tool once you have had a chance to review and use the tools. Please complete the survey at this [link](#) to give us your input.

Sample email promotion for Mirrorless Monday:

[Greetings,]

February 1-7th 2025 is Eating Disorder Awareness Week (EDAW), a national campaign to highlight the impact of eating disorders, challenge stereotypes and misconceptions, and offer guidance on how to support those living with an eating disorder. Eating disorders affect us all, and it takes a community to foster a culture of awareness and healing.

This year, [we/your organization] are running **Mirrorless Monday** on **February 3rd** as part of EDAW. Mirrorless Monday is a campaign that challenges the too-common notion that appearance defines our self-worth. For one day, portions of washroom mirrors are covered with body-positive and body-neutral messages. [People/students/employees/etc.] are encouraged to take photos of the mirror set-ups, share reactions, and generally promote the campaign on social media.

Weight- and body-based discrimination is sadly one of the most socially acceptable forms of discrimination in our communities. Please take part in Mirrorless Monday and help further the conversation.

More resources can be found on the Thunder Bay District Health Unit [website](#).

[Consider highlighting any resources in the [toolkit](#) that are especially relevant to your setting]

No Diet Day

No Diet Day challenges diet culture and society's narrow beauty standards that promote unrealistic ideals around appearance, food, and exercise. Diet culture is reinforced by fatphobia, racism, sexism, ableism, classism, homophobia, and transphobia, which marginalize bodies that don't conform to the "ideal." the day raises awareness about the harm of diet culture and weight obsession, celebrates body diversity, and affirms everyone's right to health and well-being. It also challenges prejudice against larger bodies and seeks to educate the public on the dangers of dieting, while honouring those affected by eating disorders and weight-loss interventions. For more information on NDD initiatives from NEDIC, check them out [here](#).

Disordered eating is characterized by behaviours and symptoms similar to eating disorders but with less frequency or severity. Symptoms and behaviours include restrictive eating, compulsive eating, or inconsistent and rigid eating patterns. While dieting is one of the most prevalent forms of disordered eating, disordered eating is also a common risk factor for the development of eating disorders. For more on the role of dieting on disordered eating and eating disorders from National Eating Disorders Collaboration, click [here](#).

**Even though No Diet Day is officially recognized on May 6, we offer the idea of adding your own No Diet Day whenever it makes sense for your organization e.g. with your Mirrorless Monday campaign or spread out throughout the year, season, month, or week.*

Resources for No Diet Day

The Dangers of Dieting from The Emily Program

Is Dieting Harmful? from Here to Help BC

Dieting & Weight Loss: Facts & Fiction from NEDIC

The Harmful Effects of Dieting on Mental Health: Insights for International No Diet Day from Waterloo-Wellington Eating Disorders Coalition

Dieting in Adolescence from Canadian Paediatric Society

Diet Culture: How its Harmful to Kids and What Educators can do to Help from Nüton

How to Create Your Own No Diet Day:

STEP 1: Introduce the Campaign

Educate colleagues about *No Diet Day* and its goal to challenge diet culture and harmful beauty standards. This could be through an email or a quick meeting to explain the campaign.

STEP 2: Plan Activities

Organize activities like posting educational materials or hosting a discussion on body image. Utilize resources above and share with your colleagues. You may decide to plan a lunch-and-learn or group discussion.

STEP 3: Promote a Diet-Free Day

Encourage everyone to avoid diet talk (e.g., weight loss, food shaming) and focus on body positivity. Send a reminder the day before your facility participates in No Diet Day. Make your workplace more weight-inclusive for NDD using a [checklist](#) created by Ontario Dietitians in Public Health (see below).

STEP 4: Celebrate Body Diversity

Share body inclusive messages and encourage employees to reflect on their own body image. Post affirmations and encourage social media sharing with a campaign hashtag (e.g., #NoDietDayAtWork).

STEP 5: Educate & Reflect

Provide resources on diet culture's harms and allow time for feedback or discussion at the end of the day. Host a brief debrief or feedback session to figure out how to enhance this campaign in your own workplace.

STEP 6: Make It Annual

Turn **No Diet Day** into a yearly event and offer ongoing body-inclusive resources.

STEP 7. Give Us Your Feedback

We would love your feedback about this tool once you have had a chance to review and use the tools. Please complete the survey at this [link](#) to give us your input.

Sample email promotion for No Diet Day:

[Greetings,]

[Insert date] is No Diet Day at [insert your organization]. No Diet Day challenges society's narrow beauty standards and unrealistic ideals and obsessions around appearance, food, and exercise—keystones of diet culture. The day raises awareness about the harms of diet culture and affirms everyone's right to health, well-being, and dignity. It also challenges prejudice against larger bodies and seeks to educate the public on the dangers of dieting, while honouring those affected by eating disorders and weight-loss interventions.

While dieting is one of the most prevalent forms of disordered eating, disordered eating is also a common risk factor for the development of eating disorders. For more on the role of dieting on disordered eating and eating disorders from National Eating Disorders Collaboration, click [here](#).

For more information on No Diet Day and other initiatives from National Eating Disorder Information Centre (NEDIC), see [here](#).

Eating disorders affect us all, and it takes a community to foster a culture of awareness and healing.

[Consider highlighting any specific ways your organization is recognizing No Diet Day, or any specific mental health supports people in your setting have access to]

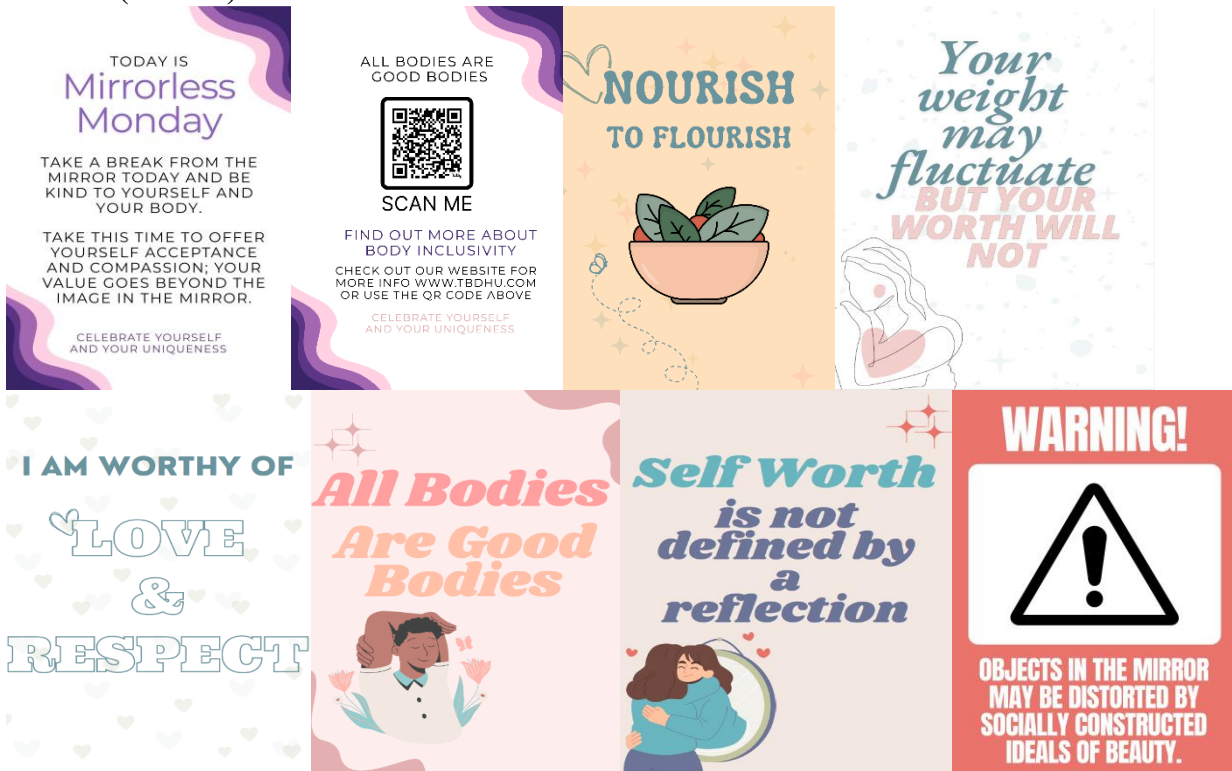
Stickers

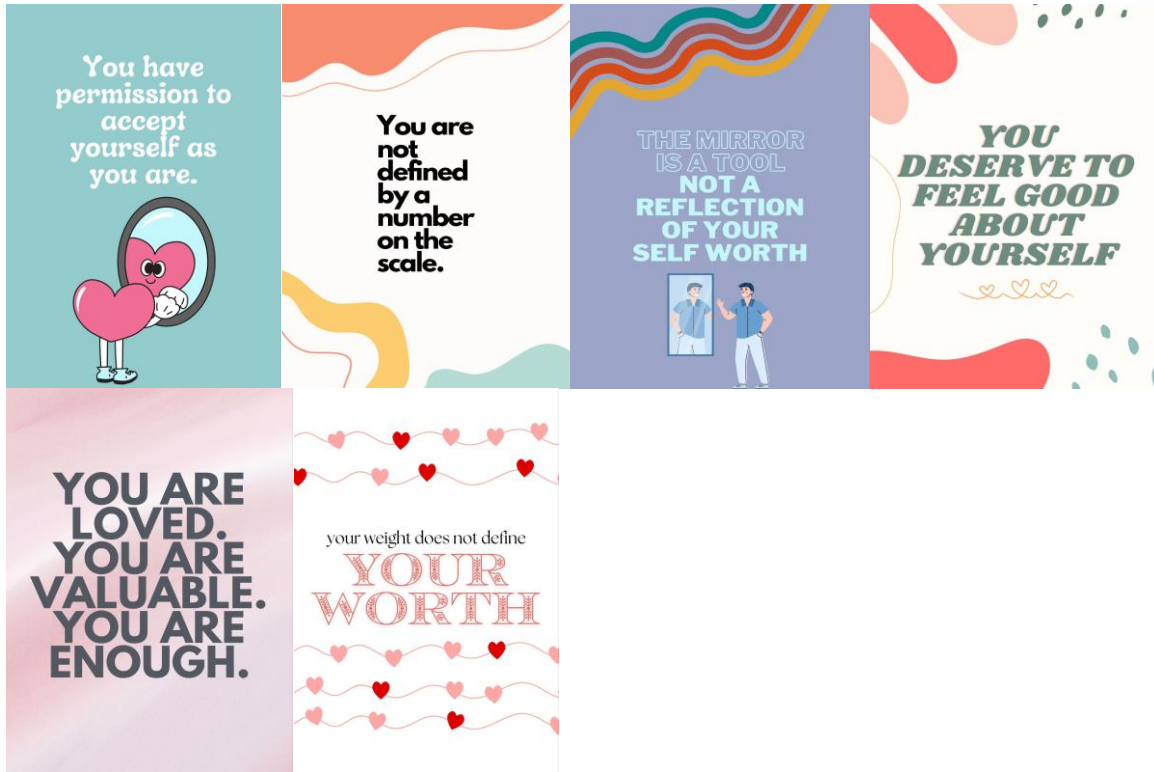




Posters for Mirrorless Monday

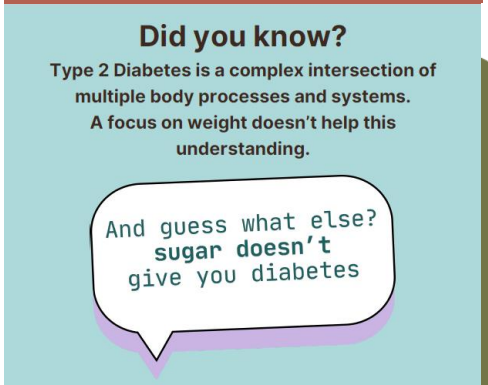
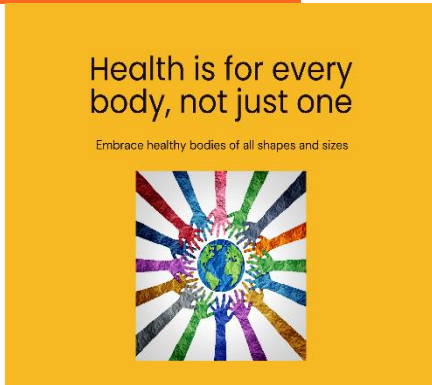
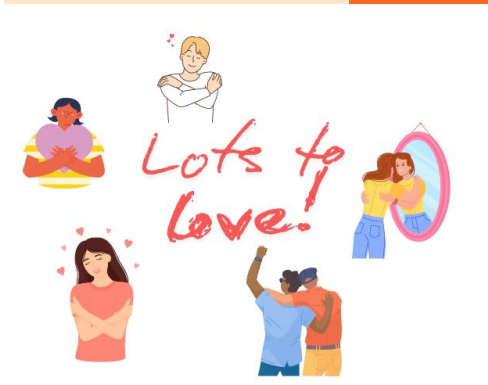
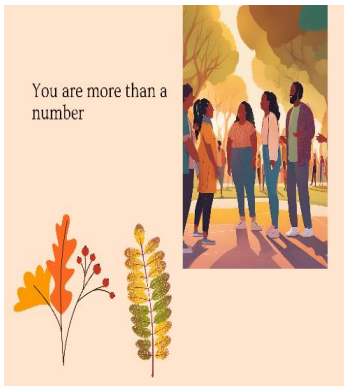
Batch 1 (one file):





Batch 2 (download individually):







Weight Inclusivity Checklist Ontario Dietitians in Public Health 2024

Purpose:

The purpose of this checklist is to serve as a tool for assessing the prevalence of weight bias within your organization and to ensure messaging reflects a weight-inclusive approach. A checklist is one tool to help identify successes and opportunities for improvement.

Recommendations:

Ontario Dietitians in Public Health (ODPH) recommend using a weight-inclusive approach to minimize the harm associated with weight bias and discrimination. Weight bias is pervasive and the work to address it is ongoing. You may still be able to identify other opportunities for training and improvement within your organization beyond this checklist.

We encourage staff to review *"Towards a Weight Inclusive Approach in Public Health: A Position Statement by the Ontario Dietitians in Public Health"* and [resources](#). If you would like support with this work, contact the dietitian at your local public health unit.

Please place a ✓ in the box as appropriate.

✓	Assessment Criteria
	Communications
<input type="checkbox"/>	1. Do not frame "obesity" as a chronic disease, a risk factor for chronic disease, or as a "public health crisis".
<input type="checkbox"/>	2. Do not use terms such as "healthy weights" or "normal weight," or reference BMI categories.
<input type="checkbox"/>	3. Do not use the terms overweight or obesity. If quoting research and use of these terms cannot be avoided, add quotation marks to signify the harm that these terms can cause (i.e. "overweight" or "obesity" and include an explanation of why the terms and quotation marks are used.
<input type="checkbox"/>	4. Do not imply that health or body size is solely determined by individual behaviours or that weight is a behaviour. Instead acknowledge system level influences and the complexity of factors (genetics, epigenetics, social determinants of health) that influence health and body size.
<input type="checkbox"/>	5. Do not use images that depict larger bodied people in a pathologizing or stigmatizing manner. Instead, portray people in larger bodies who have professions, expertise, authority, skills, as well as participating in health promoting behaviours.
<input type="checkbox"/>	6. Use images that reflect a diversity of body shapes and sizes (as well as races, abilities, etc.).
<input type="checkbox"/>	7. Use a weight-inclusive and food-neutral lens when promoting nutrition (e.g., do not emphasize restrictive eating, counting calories, or categorizing foods as "good" or "bad")
<input type="checkbox"/>	8. Use a weight-inclusive lens when promoting active living or physical activity (e.g., not emphasizing weight loss/maintenance, burning calories or burning fat)

<input type="checkbox"/>	9. Regularly review and update internal resources to ensure alignment with a weight-inclusive approach.
<input type="checkbox"/>	10. Regularly review externally linked resources to ensure alignment with a weight-inclusive approach.
<input type="checkbox"/>	11. Ensure staff have weight-inclusive key messages before media interviews.
Staff Training and Education	
<input type="checkbox"/>	12. Train all staff members on weight bias and weight inclusive approaches, including trauma-and violence-informed care. Training should include information on how weight related comments can cause harm.
Community Agency and Client Interactions	
<input type="checkbox"/>	13. Address the needs of all clients/community members in a respectful way, regardless of body size. Do not use guilt, shame, or blame approaches with clients.
<input type="checkbox"/>	14. Recognize that weight is not a behaviour. Health-promoting behaviours are encouraged with no connection to weight (e.g., nutrition, activity, sleep) regardless of body size. Consider social determinants of health and other barriers.
<input type="checkbox"/>	15. Obtain informed consent from clients if their weight is required as part of their care.. Obtain the client's weight in a confidential and respectful manner (e.g., tell them why weight is needed, cover the scale's numbers, do not make <i>any</i> comments about their weight, etc.).
<input type="checkbox"/>	16. Recognize that weight and BMI are not indicators of health. Use alternate indicators such as blood pressure, blood lipids, and blood glucose.
Supportive Policy and Environments	
<input type="checkbox"/>	17. Authentically engage communities and individuals to amplify their lived experiences (e.g., living in larger bodies) and ensure those engaged are compensated appropriately for their time and contributions.
<input type="checkbox"/>	18. Review and develop internal policies to promote and support weight-inclusive care. This includes amending policies related to equity, diversity, and inclusion that address discrimination based on size and appearance.
<input type="checkbox"/>	19. Review programs and activities to ensure they do not perpetuate weight stigma (e.g., promote weight loss, use weight or BMI to restrict access to care, or measure weight when not medically necessary).
<input type="checkbox"/>	20. Work with partners to raise awareness about weight bias, stigma, and discrimination. For example, provide training for community partners and promote advocacy initiatives.
<input type="checkbox"/>	21. Ensure seating and chairs in the waiting areas, exam room(s), and meeting space(s) are suitable for clients and staff in diverse body sizes (e.g., bigger chairs, seats without armrests). Refer to the PEN checklist .
<input type="checkbox"/>	22. Ensure passageways are wide enough to accommodate clients in diverse body sizes and larger-sized assistive devices. Refer to AODA policies.
<input type="checkbox"/>	23. Ensure the equipment being used is suitable for clients in diverse body sizes (e.g., examination tables, gowns, covers, blood pressure cuffs, scales, wheelchairs). Refer to the PEN checklist .
<input type="checkbox"/>	24. Ensure weight scales (when client's weight is required) are located in a private and confidential area and are able to accommodate diverse body sizes (e.g., exam room). Refer to the PEN checklist .

<input type="checkbox"/>	<p>25. Remove all weight-stigmatizing reading materials or posters from all office spaces, such as waiting rooms and clinic areas. For example, materials that contain information on miracle diets, weight loss products and supplements, and promoting thin ideals.</p>
<p>Advocacy</p>	
<input type="checkbox"/>	<p>26. Advocate for upstream approaches to programs and policies that address the social determinants of health instead of focusing on individual behaviour change.</p>
<input type="checkbox"/>	<p>27. Promote inclusion of weight as a protected form of discrimination in the Ontario Human Rights Code (OHRC) by advocating for its recognition and protection under the OHRC.</p>
<input type="checkbox"/>	<p>28. Promote weight-inclusive approaches and advocate to update policies, procedures, and resources from other partners/settings.</p>

Helpful Resources for Further Education

Eating Disorder Ontario (EDO) – Decision Making and Implementation Support Toolkit

If you're looking to create an eating disorder prevention program or strategy within your community or organization, EDO provides a comprehensive, evidenced-based online toolkit to guide you through the process. This toolkit is designed to help you develop a tailored, effective plan to raise awareness and promote mental health and healthy body image in your desired setting.

To learn more about creating an eating disorder prevention strategy with EDO, click [here](#).

National Eating Disorder Information Centre (NEDIC) – Community Education

NEDIC offers a variety of educational programs tailored to different audiences, including high school students, elementary and middle school students, educators, parents, post-secondary students, and professionals. These programs are designed to provide evidence-based information and resources about eating disorders, helping individuals gain a deeper understanding of these complex issues. The aim is to increase confidence in addressing eating disorders and to create supportive environments for those affected.

By providing age-appropriate and audience-specific content, NEDIC helps raise awareness, reduce stigma, and encourage early intervention. Their programs are grounded in the latest research and best practices, ensuring that participants receive accurate, reliable, and compassionate guidance on navigating this sensitive and often misunderstood topic.

For more information on scheduling educational programming with various audiences, click [here](#).

National Eating Disorder Association (NEDA) – American Resource Centre

NEDA provides a wide range of resources through their website, catering to a diverse audience, including individuals experiencing eating disorders, their loved ones, patients, children,

educators, and students. NEDA's comprehensive resources are designed to offer support, education, and guidance on various aspects of eating disorders, from prevention and treatment to recovery and relapse management.

To access NEDA resources, click [here](#).

St Joseph's Healthcare Eating Disorder Program and Body Brave Self-Assessment

St Joseph's Healthcare Eating Disorder Program and Body Brave offer a self-assessment to determine the right level of care required for the treatment of an eating disorder. To view this self-assessment, click [here](#).

Comprehensive Resources for Supporting Individuals with Eating Disorders

Resources for Health Care Professionals

- National Eating Disorder Information Centre (NEDIC) – Community Education
 - National Eating Disorder Association (NEDA) – Resource Centre
 - Ontario Health – Eating Disorders: Quality Standard
 - Ontario Health – Eating Disorders: Quality Standard Placemat + Extra Resources
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Resources for Caregivers

- National Eating Disorder Information Centre (NEDIC) – Community Education
 - National Eating Disorder Association (NEDA) – Resource Centre
 - Canped - Online Educational Tool for Parents/Caregivers of a Youth with an Eating Disorder
 - National Initiative for Eating Disorders (NIED) – Caring for Caregivers
 - Ontario Health – Eating Disorder: Quality Standard
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Resources for Educators

- National Eating Disorder Information Centre (NEDIC) – Community Education
- National Eating Disorder Association (NEDA) – Resource Centre
- Emily Program – Schools and Community Resources
- Kelty Eating Disorders - Understanding Eating Disorders in Schools
- Northwestern Health Unit - Promoting Positive Body Image
- NEDA – Educator Toolkit
- Nova Scotia Health – Eating Disorders and Schools