



Annual Report



2021-22

Acknowledgement

BridgePoint works from the Treaty 6 Territory and the Homeland of the Métis —the traditional and ancestral territory of the Cree, Dene, Blackfoot, Saulteaux and Nakota Sioux. We pay our respect to the First Nation and Métis people of this place, past and present, and reaffirm our relationship with one another.

We are committed to uplifting indigenous voices, respecting traditional lands, and working with communities towards reconciliation. We acknowledge the harms and injustices of the past and present. We dedicate our efforts to working together in a spirit of collaboration and reconciliation.

OUR VISION

All persons affected by disordered eating experience discovery, recovery and healing.

OUR MISSION

BridgePoint Center for Eating Disorder Recovery is a provincial resource providing recovery based programming for people who are experiencing disordered eating.

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Interwoven Identities

Bridgepoint's Crocus Symbolism

"My understanding of the symbolism of the Crocus at Bridgepoint is that it was chosen in community long ago, and is still honoured today. It is seen as a symbol representing new beginnings, strength and resiliency."

Nêhiyawak (Plains Cree) Crocus Symbolism

"The Cree word for Crocus is Moostoos Ohtis (ᓄᓂᓂᓂᓂ ᓂᓂᓂ). My Nêhiyawak roots offer a teaching about the Buffalo Belly Button. Its emergence each year indicates the beginning of a new season. The Crocus itself is Medicine from Creator to help us with various types of pain and a promise that more Medicines will be able to be harvested in the upcoming seasons. Each year we anticipate the Buffalo Belly Button peeking up through the snow on the Prairies.

Experiencing Bridgepoint through Retreats, Module 1, 2 and 3, weekly Deep Dives and a Book Club, I have come to believe when I enter programming that something new is on the horizon and each and every time my pain is soothed in some way."

**Crocus, Buffalo Belly Button,
Interwoven Identities
yes,
Medicines are coming...**

Until our stories meet again,
Hai, Hai, Merci, Thank-you,

Tasha
BridgePoint Participant

Bringing Our Values to Life...

VALUES DRIVEN ORGANIZATION

Safety

A place where all are respected without judgement and experience physical, spiritual, emotional well-being

A Participant Centred Focus

The participant is the expert in their experience and free to be their authentic self and the voice of their healing journey

Compassion

Embracing the uniqueness of each person with empathy, caring and kindness to build a sense of trust and belonging

Expertise

Excelling through competence in our specialty, knowledge, continuous learning, and a multidisciplinary holistic approach

Collaboration

The best outcomes result from working together and empowering our strengths through partnerships with others



Our team

BOARD OF DIRECTORS

Amy Pickering - Chair
Anne Rankin - Past Chair
Kayla Seipp - Vice Chair
Marie Kleven - Secretary/Treasurer

Karen Gibbons
Sharon Lyons
Rebecca Rackow

2021-22 BRIDGEPOINT TEAM

Leadership

Carla Chabot, BAdmin, CHE, ADII, Executive Director
Lauralyn Blackburn, MSW, Clinical RSW, CEDS-S, Clinical Program Director
Helen Uhrich, Senior Program Facilitator

Financial Office

Sharie Jensen, Financial & Office Co-ordinator (in training)
Joline Watt, Financial & Office Co-ordinator

Program Facilitation & Recovery Support Team

Pay Aylward
Kara Carlson, B.A., ADII
Lindsay Crowley, LPN
Jenn Frehrichs, RN
Becky Giles
Janelle Kapeller
Chandra LePoudre, RSW, MSW, ADII
Janine Wager, RD (Maternity Leave)
Joline Watt
Sydney Wright, RD

Kitchen & Night Support

Sandra Hellings, Kitchen Coordinator
Joline Watt
Pat Aylward

Housekeeping & Maintenance

Barb Hannah
Barry Craig

A special **thank you** to everyone who makes sacrifices to be a part of our team and make such a positive impact on our program.

what we've been up
to... where we are
going...

Leadership UPDATE

Governance

Board Chair Report

I am privileged to have worked on the “front lines” and witness the powerful support and care that BridgePoint has to offer. As the current Board of Directors Chair-person, I am grateful to continue to be part of this in a different capacity.

The leaders and team members at BridgePoint continue to be resilient, adaptive, and creative, finding a groove by offering both in-person and virtual programming and support.

Eating disorders and disordered eating are life-threatening, severe illnesses that affect someone’s emotional, physical, mental, and social functioning. Although the physical impairment is essential to address, it is not the only factor in helping people recover. There is a time and place for medical stability and food as medicine, and there is a place to address other important factors that help people recover long term, such as self-compassion, communication skills, mindfulness, and coping skills, to name a few.

When we treat eating disorders, we are not treating a weight, or a number, we are caring for a human being.

BridgePoint considers the whole person in their approach and, over the past almost 25 years, I have no doubt that many lives have been saved and relationships repaired.

BridgePoint has been working hard to continue providing a human-centered approach, while striving for on-going improvement and integration of evidenced-based practices in the complex field of eating disorders. BridgePoint is achieving its goal of a supportive, collaborative, interdisciplinary, community based center that truly makes a difference in people’s lives.



Amy Pickering (she/her)
B.Sc. (Nutr), Registered Dietitian (RD), CEDRD
BridgePoint Board Chair-person

Who are we?

Executive Director Report

BridgePoint continues to be a leader in the field of eating disorders in the province of Saskatchewan. The need for disordered eating programs and services has never been greater. As we moved through the second year of the COVID-19 pandemic, more people than ever have reached out to us, and we recognize that many have not reached out and continue to struggle in secrecy and isolation. It is estimated that only one in ten people will seek help for their disordered eating.

We were mindful to bring our focus to the silver linings in the chaos of the pandemic and carefully consider what parts of our response serve us well to help us advance our mission. As restrictions lifted throughout the year, we were excited to offer a hybrid model of both in-person and virtual programs. We got curious about new perspectives, practices, and opportunities with the goal of finding clarity on what the new normal looks like.

BridgePoint is positioned to continue to offer leading-edge onsite and virtual care options for eating disorder recovery to meet the increasing demand for our program. We provide step-up and step-down program options in the rural and urban communities across Saskatchewan. With the ongoing addition of our virtual programs, we have been able to continue to offer low barrier and timely programs to meet the needs of our communities.

The time for a sustainable integrated approach to digital mental health is now. We continue to solidify and find diverse funding and developmental opportunities to expand and grow our services.

Virtual care has emerged as an important trend that makes programs like ours more accessible, timely, equitable and economic. For us, virtual care will never replace our onsite programs, but it has provided a crucial bridge in our pandemic response. We were able to reach more individuals and their loved ones, provide more aftercare options, while being tailored to our participants and their needs.

I am grateful for our team and board as we continue to put our organizational values into action. Our biopsychosocial and relational approach to programming is increasing the quality of life of those who are experiencing disordered eating. We are so grateful to do this work and hope to secure sustainable funding and frameworks for our stepped care model.

Please take a moment to celebrate and reflect as you go through this annual report. Thank you for walking this journey with us.

With gratitude,



Carla Chabot (she/her) B. Admin, CHE, ADII
Executive Director



Everyone has a story...

Clinical Program Director Report

Dr. Brene Brown released her newest book *Atlas of the Heart* in 2021. One of the concepts she wrote about was Story Stewardship. Story Stewardship means "honoring the sacred nature of story - the ones we share and the ones we hear - and knowing that we've been entrusted with something valuable or that we have something that we should treat with respect and care." The people that access BridgePoint, whether individuals with lived experience, their loved ones or professionals, each have stories that need to be witnessed and heard.

BridgePoint also has a story. One of challenge, hard work, growth and clarity. We were able to re-open our doors to on-site participants after COVID temporarily forced us to move all our programming virtually.

We welcomed new members to the team, found clarity about our vision for programming with core components as well as new content that would be offered onsite and virtually, as well as the completion of major projects including the creation of workbooks/manuals for participants and team.

BridgePoint's story is one of doing the same thing we ask of participants - leaning into the uncomfortable and unknown, focusing on the 1% and understanding that owning our story is the bravest thing we can do.

I look forward to writing the next chapters of BridgePoint's story with both the team and participants.



Lauralyn Blackburn (she/her)
MSW, Clinical RSW, CEDS-S, CDWF
Clinical Program Director

MAKE A DIFFERENCE

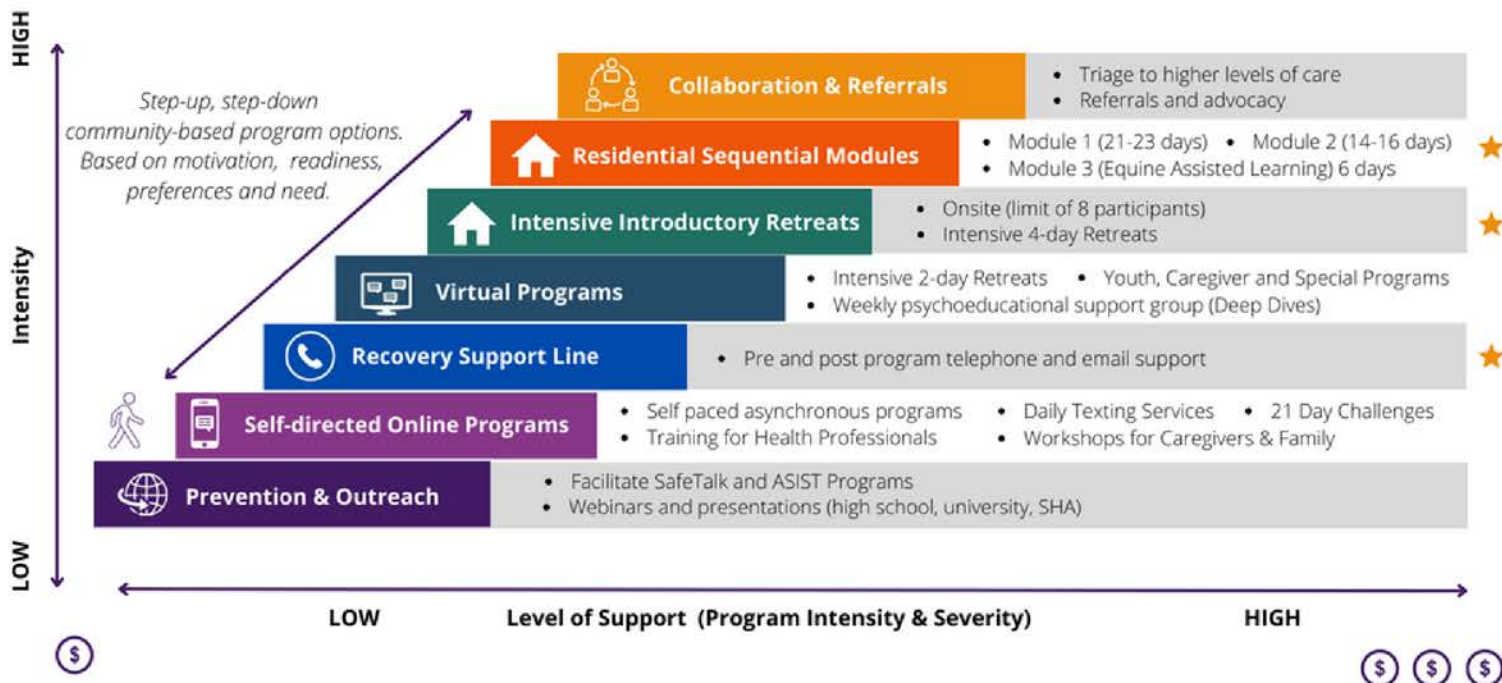
Evolving Our Programming

The pandemic allowed us to embrace a culture of creativity and innovation as we created new ways to offer and deliver our services. During the last year we have been able to provide both onsite and residential program options to our participants and their caregivers. The creation of virtual care options allowed us to provide timely program options that will help us increase capacity and relieve some pressure on our waiting lists. We have more demand than ever before, and we are grateful that our efforts in piloting and developing virtual program options have allowed us to fill some of the gaps. Access to low-barrier, inclusive, timely, participant-centered care remains a high priority. As recovery is not linear, participants are able to utilize our services along the recovery journey continuum as needed to support their recovery.



BridgePoint's Stepped Care Model

The Connected Participant Recovery Journey



★ Residential programs funded through Service Contract with SHA

On the Road to Recovery...

Participants rated
our programs
4 out of 5
overall based on
presentation style,
quality, content, tools
learned, and facilitator
knowledge.

The recovery
journey can be a
life-long endeavor,
on average between
2-9 years.

**And recovery
is possible**

Many individuals
who have never
struggled before
experienced
disordered eating
during the pandemic.
Demand for our program is
expected to continue to
increase exponentially.

We aim
to increase
the quality of life
of our participants
through increased:
Self knowledge & Insight,
Sense of Hope,
Strong Relationships,
Personal Perspective &
Meaning

Program Stats

We currently
are funded
for 8 beds onsite,
with single
occupancy rooms.

247

unique individuals
attended onsite and/or
virtual programs

2896

Program Emails

(Doesn't include
administrative, internal
or leadership email)

8800

Website Visits

76% were new users,
with the largest age
range between
24-35 .

80

**Onsite
program days**

70+

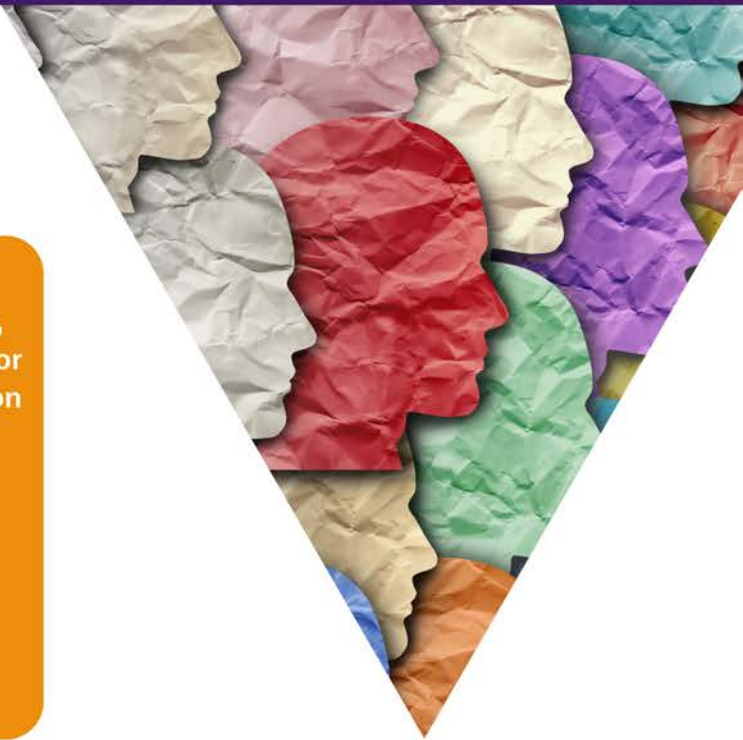
Virtual Programs

(Deep Dives, Retreats, Book
Clubs, ACT Weekly Series
Group, Nourished Weekly Series
Groups, Youth
programs and check-ins
and Caregiver Workshops)

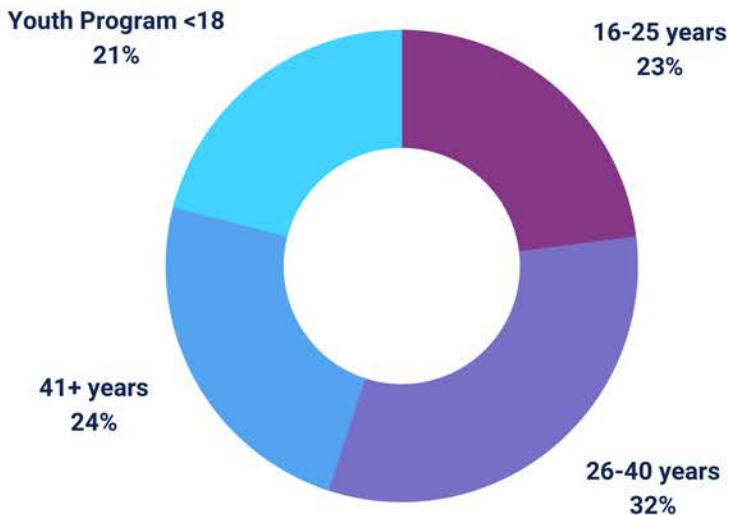
Demographics

Eating disorders don't discriminate. They affect all ages and demographics. People of all ages, genders, races, sexualities, cultures, abilities, socio-economic or educational backgrounds, and so much more. A person with an eating disorder can be any weight, shape or size, including thinner and larger bodies.

- Average age of BridgePoint participant was 35 years old
- Average age of our youth participants was 14.5 years old.
- 69% of our participants this year were new to our program
- 3% of our participants identified as men, transgender or other.



PARTICIPANT AGES



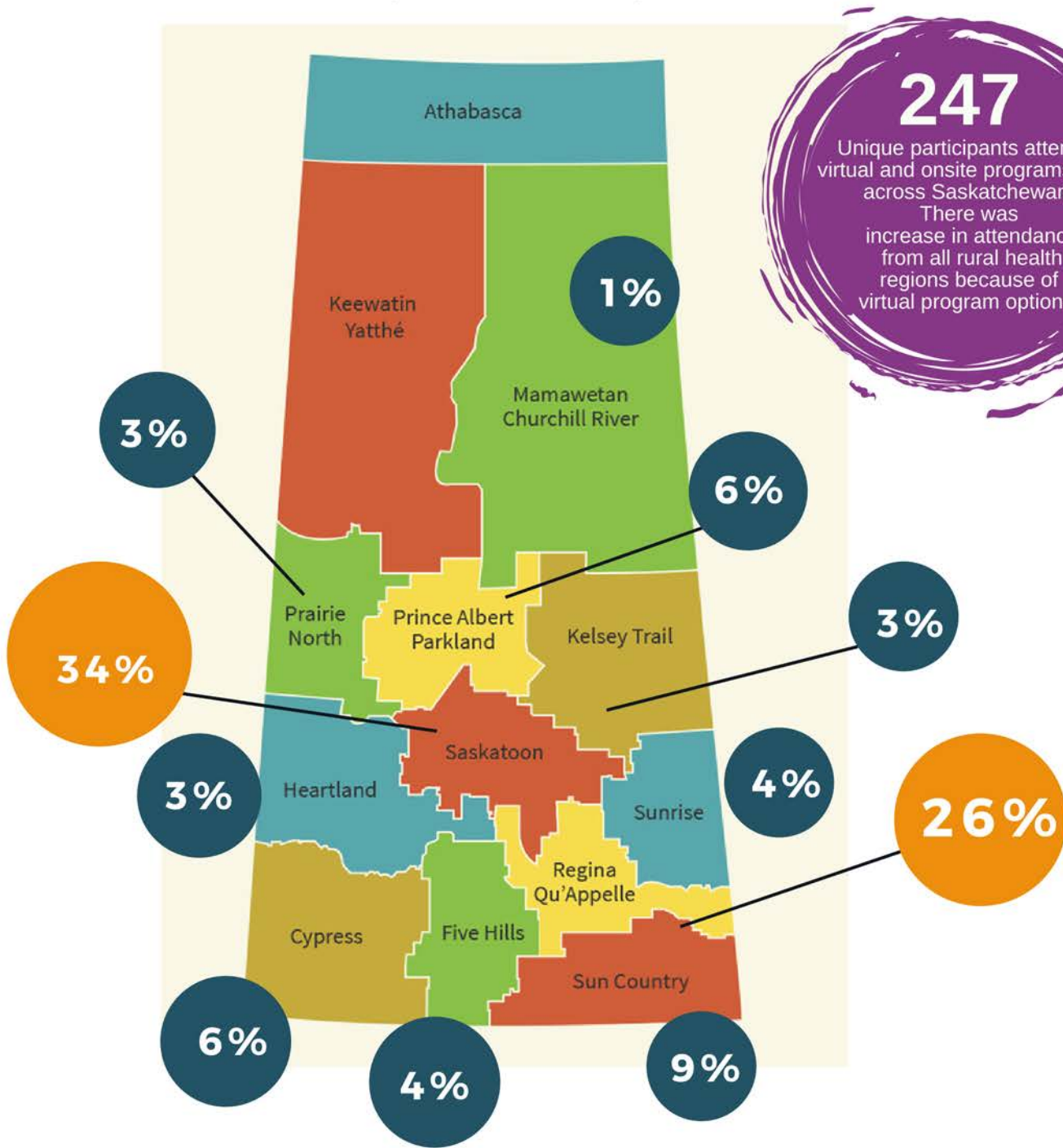
A formal diagnosis is not required to attend our programs.

Self referrals are welcomed.

DIAGNOSIS BREAKDOWN (PARTICIPANT PERSPECTIVE)



Provincial Programming



Onsite Programs

Healing happens in connection and community. Residential onsite programs are the core foundation of the BridgePoint program.

Throughout a typical fiscal year, we typically offer 8 onsite introductory retreats, three Module 1, one Module 2, and two Module 3 programs. After moving our programs online due to COVID-19, we resumed our onsite programming in August 2021 and offered 80 onsite days of programming. In a typical year, we would offer approximately 140 days of programming to participants.



We piloted new post program support with a dietitian. Module participants were able to access 3 virtual appointments as they transitioned home.

71

individuals confirmed or attended our onsite programs which include Retreats, Module 1, Module 2 and Module 3 (once COVID restrictions lifted and we resumed onsite programs).

While on a waitlist for onsite programs and for post program support, many participants opted to join our virtual programs.

Virtual Programs

Comprehensive virtual eating disorder treatment creates a sense of community within the comfort of the home environment. These programs enhance capacity, extend reach, and are cost-effective.

Our virtual program options include 2-day retreats, weekly Deep Dive Support Groups, various virtual youth programs, and workshops for caregivers and loved ones. We also offered longer weekly series ranging from 4-10 weeks with different formats and topics including a book club, Acceptance and Commitment Therapy Series and NourishED series with our dietitians. The word cloud below signifies the top words used to describe our participants' experiences with our virtual programs. The top two words identified were **safe** and **hopeful**.

empowering Amazing informative kind eye opening emotional exciting
understanding Supported welcoming Connected connection
knowledgeable community educational insightful calming
safe grateful **hopeful** compassion informative
open encouraging compassionate acceptance positive
enlightening heard supportive vulnerable comforting comfortable hope
relaxing caring Informative comforting helpful

185

individuals attended our virtual pilot program in our online group room

Participants attended an **average of 7 virtual programs** each from all across the province.

Average of 14 registrations per group - nearly double what we can accommodate onsite

We are hope brokers... and proud that this impact extends to our online community

Research

A pilot study was completed to determine the effectiveness of our online two-day virtual retreat and weekly "Deep Dives". This pilot study was a field research, mixed method survey.

Data was collected via non-probability purposive sampling. A total of 92 participants were recruited and completed the surveys between June of 2020 and June of 2021.

Key findings from the research include factors such as accountability, connection, community, hope, knowledge, tools, understanding the self, vulnerability, belonging and support, are all critical components of a recovery journey.

These findings suggest that the online programs provide participants with the critical tools, information, and support needed during the recovery process. This highlights the efficacy of the online programs offered. The online program was able to provide a safe, private space for individuals to access treatment during COVID-19 and beyond.

A special thank you goes out to Kelsi Kowalchuk for her work on the research article.



Our **fears** were that we couldn't replicate connection and community on virtual platforms...

But here's what our Virtual Participants Reported.....

enlightening Positive emotional Informative comforting
acceptance compassion encouraging calm safe
supportive hopeful grateful community eye opening
insightful relaxing connection exciting comforting
connected informative self hope caring understanding

understanding great Grateful worthwhile practical support
knowledgeable calm knowledge self-compassion
encouraging connection recovery enlightening always
engaging Refreshing informative
easy comfortable challenging community



Supporting Youth

COVID has contributed to a surge in eating disorders in youth. We have found that our online options for youth and their families has been a welcome addition to our program.



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"As we navigated the changing COVID-19 protocols and regulations, our virtual programming remained a support for many youth. We continued to expand and fine tune the youth virtual care by offering programming in a variety of ways and listening to the feedback from youth. We are continuing to brainstorm new and innovative approaches to deliver programming that is both engaging and supportive. Having the EFFT Caregiver Workshop has been a necessary addition to BridgePoint Programming, specifically when working with both the youth and their families. When common language is used within families and the necessary supports are in place, it can foster an environment of understanding and healing. I am so grateful to be part of the journey with so many amazing youth."

- Kara Carlson, Youth Program Facilitator

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"You have helped me so much and made me feel better about myself, but the biggest thing would be helping me to realize that I'm not alone."

"I just want BridgePoint to know that they made me feel not so alone and made me realize that I deserve recovery every day, and I deserve to live a full and happy life."

Youth reported leaving the group with:
increased motivation,
self-compassion,
having others to share their journey with,
pride in their progress,
and more coping strategies.

Supporting Caregivers

"This was a valuable workshop in helping us learn more about communication and support for our loved one's challenges and recovery. We also appreciate meeting others dealing with similar circumstances."

"I was grateful that I could access a team (not just one member) in a setting that encouraged sharing amongst participants. The workshop gave me great ideas to keep communication open - this is the biggest challenge with her anorexia battle and I am often at a loss for what to do."

Practical enlightening Educational Reassuring supportive
Encouraging Informative safe Helpful hopeful caring
Engaging

"This workshop was excellent. This is very necessary to help caregivers and support them while they support their loved one. There are not enough services in Sask. to help families."

"I just can't believe this was available free of charge! Such life changing information with actual tools I can use every day with my child. I was really struggling with how to communicate to him and now I have a method (and hope) that we will find a way to connect. I learned a lot from the facilitators and the participants too. So so many resources shared to help in this journey. This course is an absolute gift and I am so lucky I found out about it. I hope it continues so others can have the same opportunity to take it in the future."

"The Bridgepoint workshop for Supporting Your Loved One through ED Recovery has shown me how to express my love and concern for my family member in effective ways. I feel informed and empowered by the workshop team, giving me hope. Words don't really describe my gratitude. My heart is lighter. Thank you."

We were able to offer three EFFT 2-day "Supporting Your Loved One with an Eating Disorder" workshops.
We had between 20-25 registrants for each program.

BridgePoint's youth and caregiver programs were funded by the generous support from the following funders:



Learning & Development

BridgePoint prioritizes ongoing eating disorder-specific training and development of our team. We are proud to highlight the accomplishments of the team this year!

Congratulations to Kara Carlson, Carla Chabot, Chandra LePoudre and Sydney Wright who completed the requirements and examinations to earn the Associate Designee iaedp Institute on Eating Disorders (ADII) through the International Association of Eating Disorder Professionals (iaedp). This educational designation has been created to acknowledge and formally recognize those working in the field of eating disorders or affiliated professions who have completed basic coursework with an educational designation. This designation signifies the individual has completed coursework and testing that demonstrates a basic overview of eating disorders, current treatment modalities, medical aspects, and nutritional aspects of diagnosis and treatment. We look forward to getting 100% of our eligible team to obtain the ADII designation this within the next year.



With so many new hires this year, all new and existing BridgePoint team completed a new online BridgePoint orientation course. Included in this were many COVID-19 safety protocols and BridgePoint was awarded a COVID-19 Work Safe Leader Designation.

Kara Carlson and Chandra LePoudre also joined previously trained Lindsay Crowley as new Applied Suicide Intervention Skills Training (ASIST) Facilitators for BridgePoint. The trio makes a great team and has been busy offering ASIST courses onsite and in Saskatoon.

Lauralyn Blackburn continues to expand her learning and completed the Accelerated Resolution Therapy (ART). ART is an innovative, evidence-based therapy for PTSD, anxiety, depression, stress and eating disorders.

Carla Chabot convocated from the Certified Health Executive program through the Canadian College of Health Leaders. The Certified Health Executive (CHE) Program is the only leadership designation in Canada for all health leaders. The CHE is aligned to the LEADS Domains which supports self-directed, life-long learning. Stay tuned as BridgePoint continues to integrate the LEADS framework into our organization.



Kara Carlson



Chandra LePoudre



Sydney Wright



Carla Chabot



Lauralyn Blackburn

Impact

Our participant testimonials...

"This program was the best decision I have ever made for myself and I am grateful for the team and all their knowledge... and most of all their compassion."

"So thankful for this opportunity. I feel like it could have a lasting transformative impact on my life. The way the program/residence is designed to foster community is fantastic. I come to understand my eating disorder better, but also more than that, myself and my interactions with others. Having a secluded, dedicated space and time to reflect is perfect."

"Thank you so much for creating this safe space and guiding my through my pain to achieve growth. I will be forever grateful for this experience."

"I feel more confident going home this time. I feel like I can do this more than ever!"

"This program has given me hope for the future which is something I haven't felt in a very long time. I will forever be grateful for the program, staff, and people I have met."

"I know for a fact that BridgePoint changed my view on life and recovery. I'm not too sure I would be alive today if I hadn't come back for more treatment."

"This place, the staff, knowledgeable women have given me the opportunity to change my life and be the boss of my eating disorder."

"Immediately I knew I did the right thing coming here. This is what I needed. The approach and philosophy make me feel secure, alive and supported. The mix of structure and space/flexibility is wonderful."

"The sense of community at BridgePoint is prevalent, which I thrive on. I found comfort and loved the safe space provided to be myself. I will keep this experience close to my heart forever and will recommend the program to others struggling."

"Groundbreaking experience for me on my recovery journey. I felt a strong sense of connection and community that I have been craving for years. I can move forward in my journey with these valuable insights and make small changes in my life that will affect me long term."



Eating Disorders Don't Discriminate

Prevalence of Eating Disorders

- Based on available data, at least **one million people** in Canada have a diagnosable eating disorder.
- However, based on global data of individuals affected, it is estimated that **1 in 13** people or **2.7 million in Canada**
- Eating disorders have the **highest mortality rate** of any mental illness, with anorexia nervosa at 10-15% and bulimia at 5%
- Have a **suicide attempt** rate at 26%
- With appropriate and quality treatment, approximately **75% of people with eating disorders recover**.

COVID-19 created the perfect storm for eating disorders. Isolation, lack of structure, uncertainty create crisis among many - including youth.



For almost 25 years, BridgePoint has provided an essential service as part of the continuum of healthcare in Saskatchewan. We look forward to continuing to develop our relationship and share our expertise with the SHA for years to come. The Saskatchewan Health Authority remains our primary funding partner. As our growth continues beyond our current funding, we rely on community partnerships, in-kind donations and social enterprise.

We continue to update the center to ensure that we can offer a comfortable and inclusive setting. All rooms will now be single rooms. We are so proud to offer a comfortable and modern facility to welcome our participant onsite.



How to Support...

Donate once or monthly, give securities or fundraise for BridgePoint using Canada Helps or via the PayPal Giving fund on Facebook. Thank you for all personal donations, in-kind support and discounts, and memorials again this year. BridgePoint is registered as a Canadian charity and can provide tax receipts for all in-kind and cash donations over \$20.

Thank you to the Province of Saskatchewan for proclaiming Eating Disorders Awareness Week February 1-7, 2022.



Eating Disorder Awareness Week
#EDAW2022



Thanks to Everett Hindley, Saskatchewan's Minister of Mental Health and Addictions, for spending the morning with us as we discussed the challenges and opportunities in the eating disorder community.

We look forward to support and continuing these important conversations.



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