

# BRIDGEPOINT

CENTER FOR EATING DISORDER RECOVERY



*Annual Report*

**2023-24**



Accredited  
IMAGINE CANADA







# 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.





# Core Values

**Our organizational values matter.** They authentically define our organizational philosophy and culture, programs, and are embedded in our day-to-day operations including decisions, hiring practices, and policies, ensuring integrity and alignment across the organization. By embedding these values into every aspect of our operations, we foster a cohesive and principled culture that drives long-term success. Integration of values with the strategy, mission, and goals has a direct and measurable impact.

## BRIDGEPOINT

CENTER FOR EATING DISORDER RECOVERY

### Values Driven Organization

#### **Safety**

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

#### **A Participant Centered 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



# Strategic *Priorities*



**Integrate Equity, Diversity, and Inclusion principles into practice**

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**Enhance stakeholder awareness and relationships**

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**Advance the technology, innovation, and virtual capacity**

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**Strengthen organization sustainability**

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These priorities are crucial for BridgePoint as they ensure that our services provided are inclusive, culturally sensitive, and accessible to all individuals regardless of their background. By integrating Equity, Diversity, and Inclusion principles, enhancing stakeholder awareness, advancing technology, and strengthening organizational sustainability, we can offer effective and comprehensive support tailored to the diverse needs of individuals struggling with eating disorders, ultimately improving outcomes and promoting recovery.



# Leadership

## EXECUTIVE DIRECTOR REPORT



Reflecting on another year brings so much gratitude, as this has been another monumental year.

This year marks many achievements, collaborations, and a sustainable path forward. BridgePoint continues to pilot and deliver onsite and virtual care for those experiencing disordered eating. Our programs have shown a significant impact and have increased the quality of life for our participants, demonstrating the success of our biopsychosocial participant-centered approach. We successfully expanded our suite of stepped-care program options, integrating innovative and leading-edge programming. Our balance of onsite and virtual care has allowed us to reach more individuals and families than ever before.

Exciting highlights of the year include the filming of a feature-length documentary, the piloting of an expansion of our One-on-One Support, and a self-paced Recovery Support Program.

The demand for our services continues to grow, with eating disorders affecting 2.7 million Canadians. We are committed to closing the access gap and have adapted our services to meet these needs despite funding constraints. Our partnerships within Saskatchewan and across Canada have been crucial. Collaborative efforts have allowed us to enhance our service delivery and share valuable resources.

Looking ahead, we aim to formalize our stepped care options and virtual care framework to address emerging needs. Continuous improvement and ongoing education remain key focuses to ensure the highest quality of care.

**Thank you.** I extend my deepest gratitude to our dedicated team, board members, funding partners, and generous community supporters. Your unwavering support makes our work possible. We encourage everyone to continue supporting our mission. Together, we can achieve even greater heights in the coming year.

*With gratitude,*

A handwritten signature in black ink, which appears to read 'Carla Chabot'.

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





# Clinical

## PROGRAM DIRECTOR REPORT



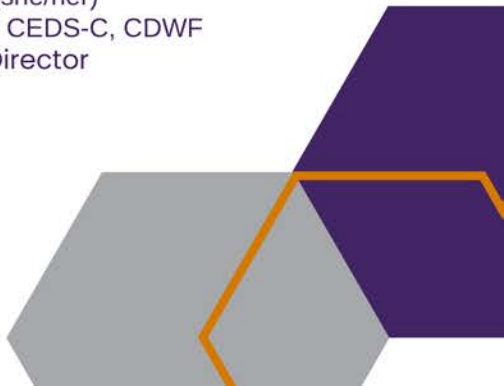
The power of community lies in its ability to foster deep connections. As American philosopher David Spangler stated, "True community requires commitment and openness. It is a willingness to extend yourself to encounter and know the other."

This past year BridgePoint has dedicated itself to engaging in discussions with numerous stake holders within the field of eating disorders, adding to the collective sharing of knowledge and action plans for eating disorder prevention, treatment and recovery. We have piloted new avenues for building the connections necessary for healing, including the introduction of virtual counselling and nutrition support. BridgePoint has also embodied its commitment to diversity, equity and inclusion, engaging in team learning opportunities and making space for courageous conversations. Our filming of the documentary is giving voice to the lived experience of those struggling with disordered eating and the recovery journey. Participating in various conferences and training opportunities has confirmed that BridgePoint is offering quality programming to Saskatchewan residents and has an important voice not only provincially, but also nationally and internationally.

I am so proud of the community that BridgePoint is building and look forward to all the possibilities for connection in 2024!

Thank you,  
*L Blackburn*

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





# Multidisciplinary

## 2023-24 BRIDGEPOINT TEAM

### Leadership

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

### Financial Office

Sharie Jensen, Financial & Office Co-ordinator

### Program Facilitation & Recovery Support Team

Kara Carlson, B.A., ADII  
Lindsay Crowley, LPN  
Jenn Frehrichs, RN  
Becky Giles  
Janelle Kapeller  
Chandra LePoudre, RSW, MSW, ADII  
Jackie Reimche, M.A., B.Sc.(Nutr.), RHN, CCIEDC, ADII  
Janine Wager, RD (Maternity Leave)  
Sydney Wright, RD, ADII

### Practicum Students

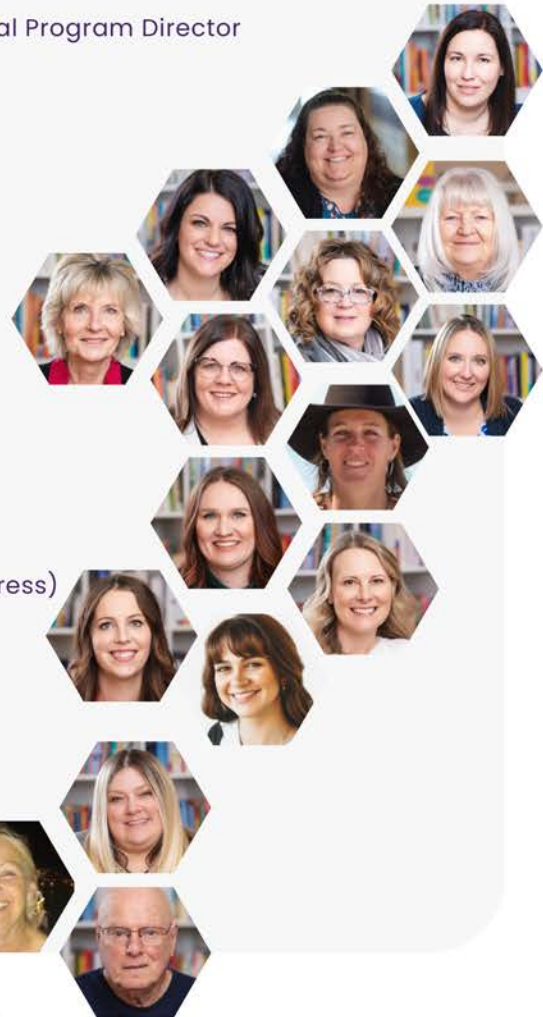
Kelsi Kowalchuk, B.Sc.(hon)., B. A., M.Sc., M.Ed. (in progress)  
Shayna Southern, B.Ed., M.C. (in progress)

### Kitchen & Night Support

Sharie Jensen  
Rhonda Willis  
Barb Hannah

### Housekeeping & Maintenance

Barb Hannah  
Barry Craig



## Governance BOARD OF DIRECTORS

Amy Pickering - Chair  
Sharon Lyons - Vice Chair  
Kayla Seipp - Secretary/Treasurer

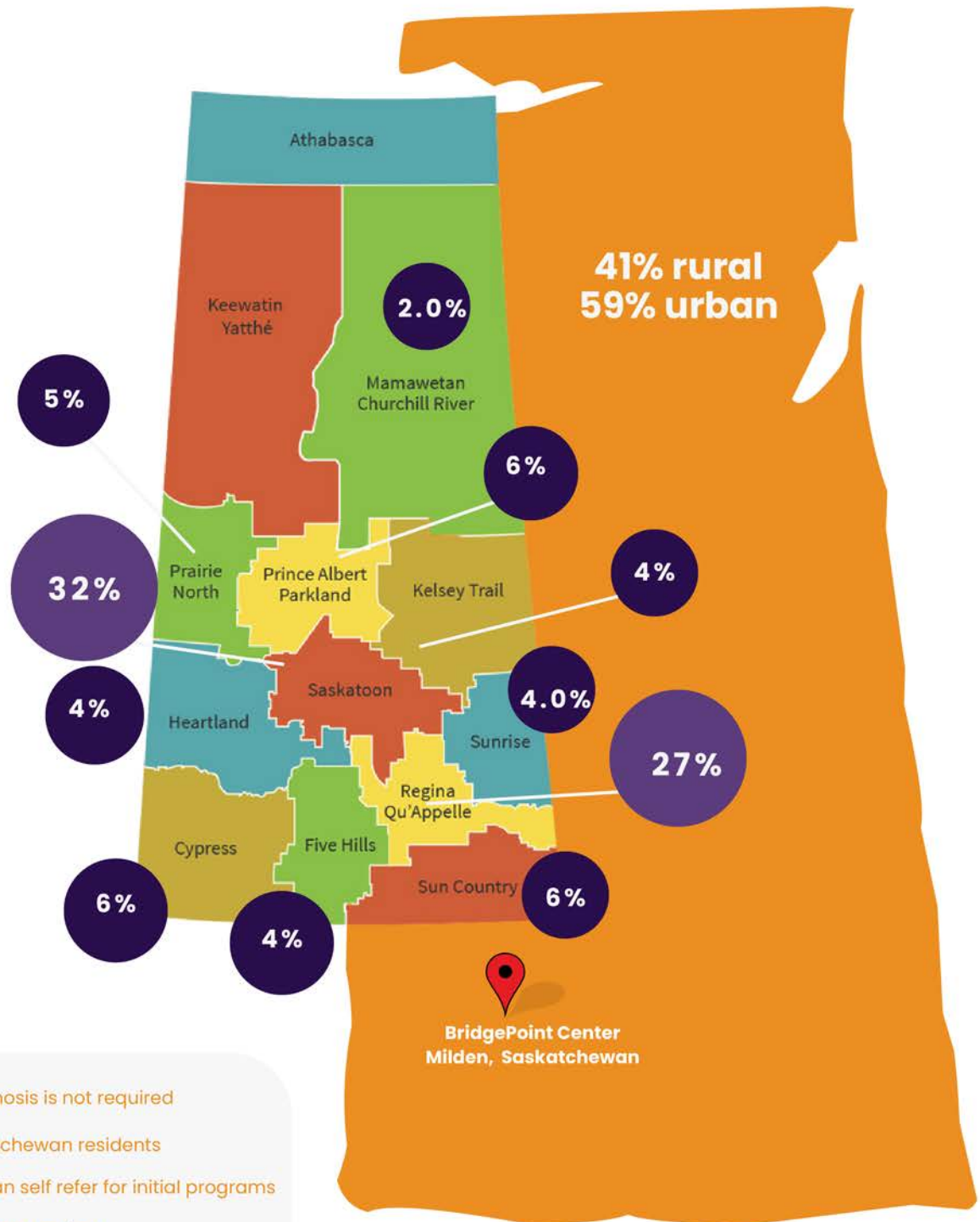
Alison Bokitch  
Karen Gibbons  
Valerie Maxemniuk  
Clare McNab  
Rebecca Rackow  
Anne Rankin

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





## URBAN AND RURAL REACH PROVINCIALY ACROSS SASKATCHEWAN



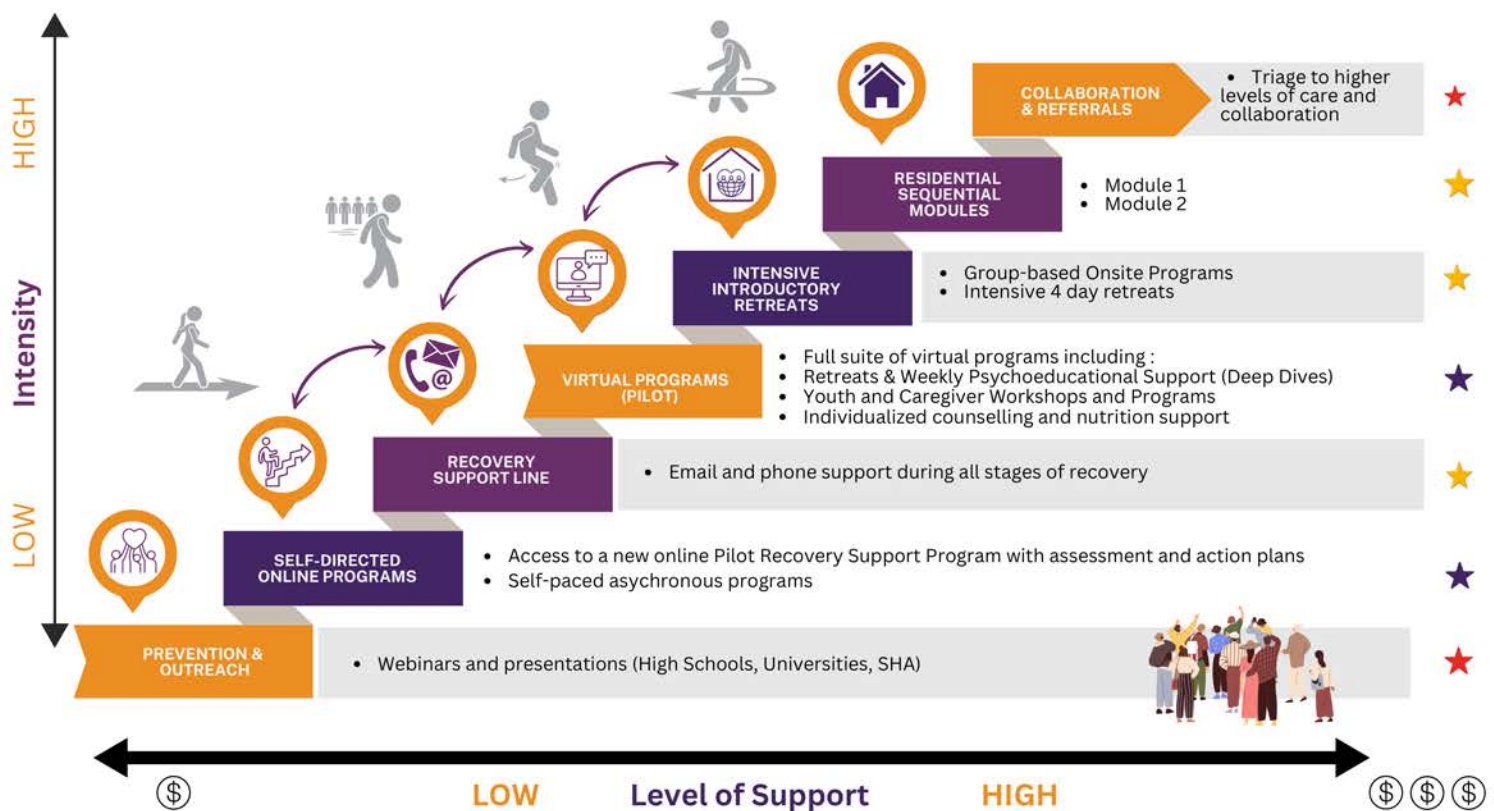
- ✓ A formal diagnosis is not required
- ✓ Free for Saskatchewan residents
- ✓ Participants can self refer for initial programs
- ✓ Inclusive program options



# Program

## STEPPED MODEL OF EATING DISORDER CARE

**Empowering Recovery, One Step at a Time.** We pride ourselves on embracing creativity and innovation in delivering our services. Our stepped care model for eating disorder treatment ensures individuals receive personalized treatment intensity, optimizing resource allocation and enhancing outcomes. With interventions ranging from low to high intensity, we offer flexibility, accessibility, and tailored care, ultimately fostering long-term recovery. Recognizing that recovery is a journey with ups and downs, participants can utilize our services along the continuum as needed to support their progress.

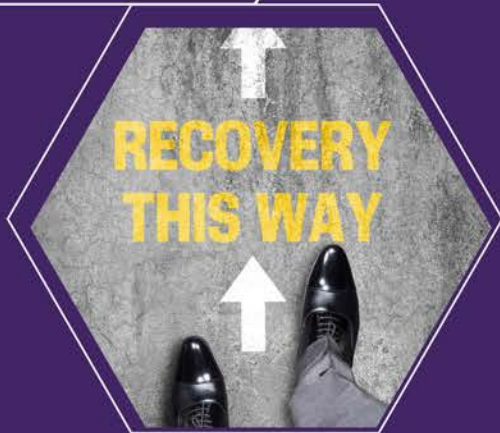


- ★ Residential programs funded through service contract with Saskatchewan Health Authority
- ★ Virtual programs funded through one-time partial grant from Saskatchewan Health Authority and other grants & donations
- ★ Unfunded; fee for service or by donation





# Utilization



345

Discrete  
Individuals  
Served

315

Attended one  
or more  
virtual  
options

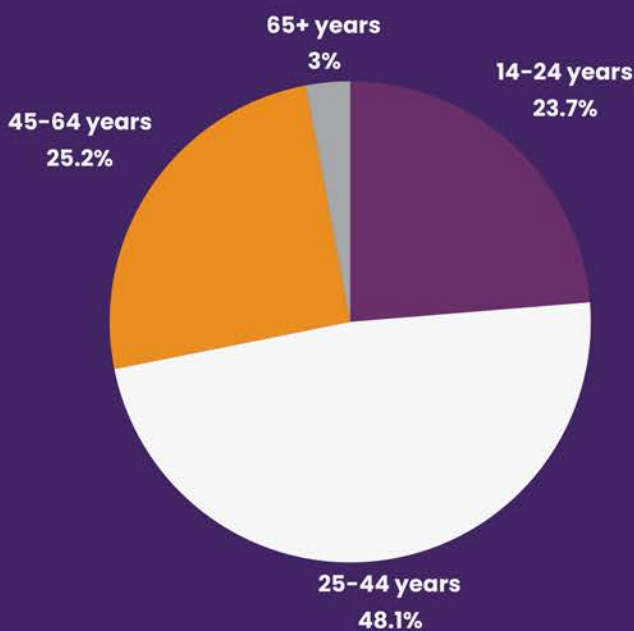
66

Attended  
Onsite

Only 50%  
of onsite  
participants  
did not  
engage in  
virtual  
programs

*Doesn't include  
many individuals  
supported  
by telephone, email  
or online self-paced  
programs other  
than the RSP*

Eating disorders don't discriminate; they affect individuals of all ages, genders, races, socioeconomic backgrounds, and diagnoses. The average age of those we serve is **36.6** years. While some might assume that most of our participants have anorexia, we actually provide services to address a broad range of eating disorder behaviors. Many of our programs are transdiagnostic, meaning they are designed to comprehensively address various types of eating disorders. Our goal is to offer inclusive, effective support to everyone in need.





# Onsite

## SEQUENTIAL RESIDENTIAL PROGRAMMING

### Empowering Recovery, One Success at a Time

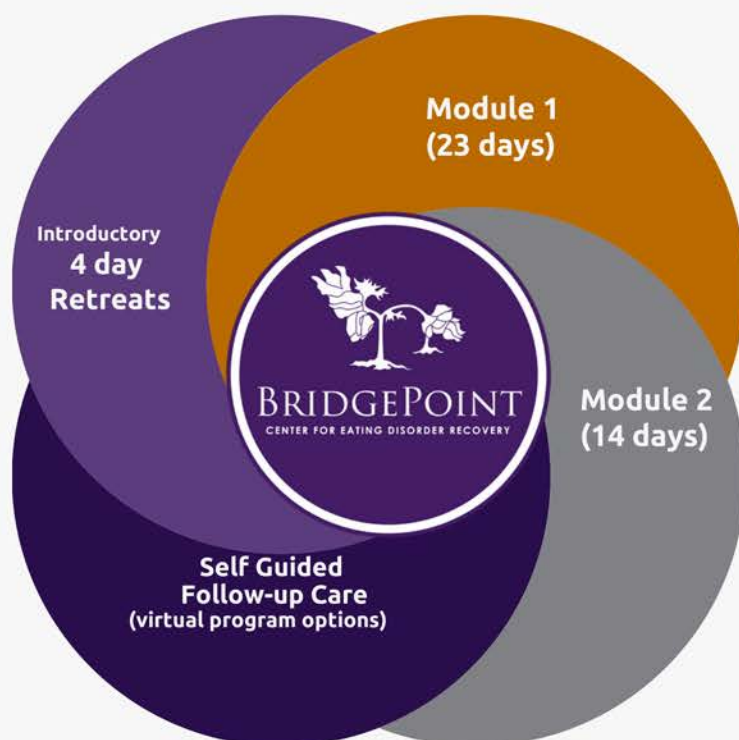
Residential programming is the cornerstone of the BridgePoint program, fostering healing through connection and community. Our biopsychosocial group-based model includes multi-modal groups and experiential activities.

Throughout a typical fiscal year, we offer eight onsite introductory retreats, three Module 1 sessions, and two Module 2 sessions. This year, we integrated equine-assisted learning (EAL) into Module 2 for enhanced integration and processing. We aim to include EAL in more onsite programs when possible.

Our onsite programs are designed for medically and psychiatrically stable individuals who are motivated and ready for change.

With our capacity of eight rooms, we accommodated a few extra participants in our onsite modules through a hybrid format. This approach allowed more individuals to benefit from our comprehensive programming while maintaining a supportive and connected community. Although not all activities translate online, this method enabled inclusivity for those unable to join us onsite.

The waitlist for onsite programs averages three months. While waiting for onsite programs and for post-program support, many participants opted to join our virtual programs. Due to the ongoing high number of cancellations and no-shows, individuals with flexibility often have the opportunity to secure last-minute spots in the program.



# 127

### onsite days

of programming structured through closed cohorts (as opposed to continuous intake)

# 66

### onsite participants

attended our programs which include Retreats, Module 1 and Module 2

### Late Cancellations and Not Showing Up Remain High

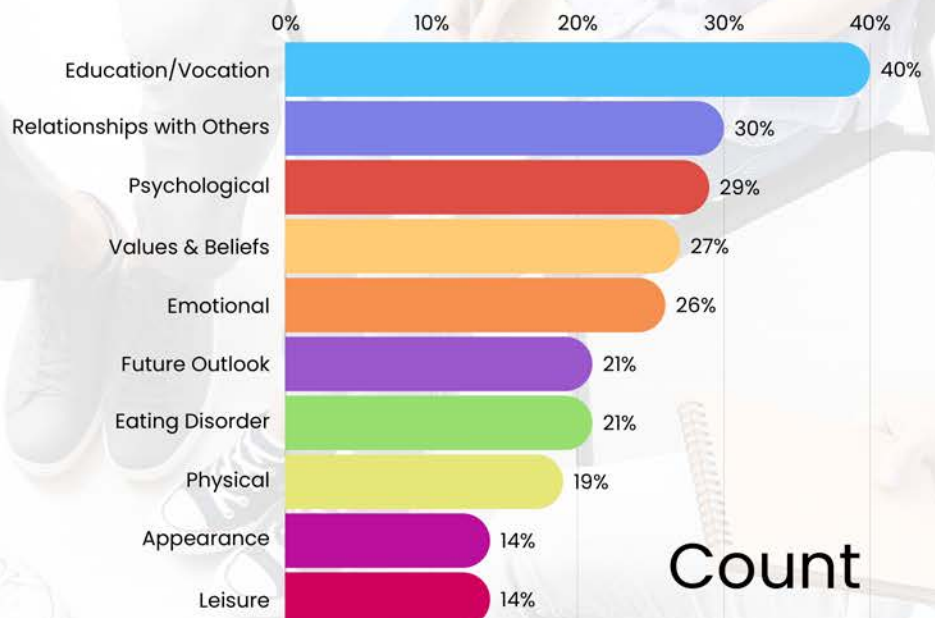
- 13 cancelled spots (short notice)
- 13 did not show up to program
- 32 declined spots after application
- 13 applicants didn't respond after application

### Measurement Based Outcomes.

Utilizing the Eating Disorder Quality of Life survey, our participants perceive their quality of life (QoL) to be improved after attending a BridgePoint Module.

Improving quality of life is an essential goal in the treatment of eating disorders, as it directly impacts both the immediate and long-term success of recovery efforts. Of the 24 individuals who attended Module 1, **88%** reported an increase across **all 12** domains measured.

### Residential EDQLS Subscale Improvement From Module 1 Admission to Discharge (2023-24 Annual Data)



“ I am grateful for my time here. I feel like I am actually equipped to take the next step in my healing. I am feeling hopeful in a way that I have not been brave enough to do for a long time. ”

“ The onsite program exceeded my expectations as it was safe, open and a comfortable space. BridgePoint's philosophy is very compassionate and understanding. ”

“ I was really able to open up and be vulnerable because I was given the space to be without judgement. ”

“ I learned more in 4 days about my eating disorder than I have in the past 4 years of being diagnosed. Recovery is not a straight and simple process. It is a long journey that must include patience and self-trust in order to progress. ”

“ I love and appreciate the team. Thank you for everything. I'm confident that I would not be alive without BridgePoint. ”

“ BridgePoint helped me feel more confident in my ability to continue on my recovery journey. ”

“ I really appreciated being in a group and being able to hear from others who experience similar struggles to normalize my experience. ”



# Virtual

## INDIVIDUAL AND GROUP PROGRAM OPTIONS



As we step into our 4th year of virtual care provision, we're thrilled to continue evolving an enhanced range of program options for our participants. From self-guided pathways to immersive weekly Deep Dives, there's something for everyone, year-round. These initiatives have flourished thanks to generous one-time grants and will continue to expand as funding allows.

Virtual care has been transformative, offering timely alternatives that boost our capacity and alleviate pressure on our waiting lists. With demand soaring, virtual accessibility has become indispensable, recognizing that not all individuals can access, or prefer to access, onsite attendance. Our virtual programs have effectively bridged this gap, catering to diverse needs and preferences.

BridgePoint remains at the forefront of delivering inclusive, evidence-based virtual intensive outpatient programming, supporting individuals at every stage of their recovery journeys— from contemplation to after-care for our alumni. Participants seamlessly join from their homes or even hospital settings, ensuring accessibility for all. Our steadfast commitment to security ensures all programs operate on secure, encrypted software, maintaining HIPAA compliance and safeguarding data integrity within Canada.

Virtual care has not only eased waitlist pressures but also dismantled barriers to care, bolstered after-care initiatives, and expanded participant capacity. Through ongoing collaboration with our participants, our collaborative partners, and iterative cycles of improvement, we continually refine our programs, ensuring they remain responsive to evolving needs and uphold the highest standards of quality care.



A photograph of a white laptop and a purple mug on a white surface. The laptop is on the left, and the mug is on the right. An orange rounded rectangle is positioned above the mug, containing text about online programming for eating disorders.

Online programming for individuals experiencing eating disorders provides flexible, stepped care that ensures patients receive the right treatment at the right time, tailored to their individual needs. This approach offers convenient access to personalized support, reducing costs and enhancing privacy.

**173**

days of virtual programs

**279**

virtual participants  
attending any of of BridgePoints  
virtual programs

**92%**

of our participants  
utilized our virtual  
program options

“ I find great value in virtual programming. I participate in Deep Dives on Wednesdays and have worked with a counsellor online. These things keep me more focused and I can be consistent. ”

“ BridgePoint has literally saved my life. I learned to completely “take suicide off the table”. I live in isolation in a very small town away from a major center, so help is not easy to access. I learn, am encouraged by Deep Dives and Virtual Retreats and therefore feel connected. My enormous gratitude. ”





# Self-Guided Support

## ONLINE RECOVERY SUPPORT PROGRAM

VIRTUAL

New this year, we piloted a self-guided online Recovery Support Program (RSP). This program was made possible by adapting Body Brave's RSP innovative program and collaborating with Eating Disorder Nova Scotia to provide peer support. This has been the program with the highest number of enrollments this year!

Over 150 users signed up and our engagement levels were higher than many other users of this program. Users were funneled into different action plans based on if they were new to BridgePoint or Alumni.

### KEY FEATURES OF THE RSP

**Self-Guided Approach:** Participants have the flexibility to tailor their level of engagement in the program according to their needs and pace. They can step up or step down their care as required. The program includes a personalized self-assessment and tasks to guide them on their journey.

**Comprehensive Resources:** Participants can access a wide range of resources, including eating disorder information, specific BridgePoint resources, self-guided materials, self-reflection, and assessment tools. There are over 40 support sessions in many categories, including Finding and Maintaining Hope, Building a Recovery Toolbox, Dealing with Challenges and Triggers, and Building a Meaningful Life.

**Self-Reflection Check-ins & Assessment:** The program provides check-in tools that allow participants to reflect on their recovery progress and receive guidance on suitable care and treatment options for their current needs. Participants can complete their check-ins and reflect on their changes over time.

**Collaboration with Their Team:** Participants can share their resources and action plans with their support and health team, fostering a collaborative approach to their recovery.

**Peer Support:** The program also offers peer support services, creating a supportive community for individuals at any stage of their recovery journey.

“

As a past participant, I see the value of continued support from BridgePoint. Recovery is not linear and support during the programs and outside of the programs is vital to recovery.

”

“

I like the accountability when it comes to check-in reminders and access to resources that I can turn to during times of high stress, like the holidays.

”

“

What I like most about this program is the community it provides. You don't feel as alone. I can access it when and where I have time, and at my own pace.

”

### RECOVERY SUPPORT PROGRAM (RSP)

This pilot program is brought to you by the following community based organizations







# Individual Support

## COUNSELLING PROGRAM

VIRTUAL

By integrating individualized counselling into our Recovery Support Program, we can provide comprehensive, effective, and compassionate care to those navigating their recovery from eating disorders.

BridgePoint was fortunate to welcome two practicum students onto the BridgePoint Team. Both Kelsi and Shay were integral pieces in setting up the pilot of the individualized counselling framework. Sessions were scheduled virtually and onsite during programs.

Their efforts significantly contributed to the program's success, as evidenced by the 35 individuals who accessed pilot counselling over 108 sessions.

This pilot program will pause at the end of the fiscal year, and once funding is secured we hope to revamp the framework and make it a core program at BridgePoint to support those without access to counselling in their home communities.

“ I believe that this type of service would be extremely beneficial to continue as there are not enough affordable resources or resources in general for individuals dealing with eating disorders. ”

“ These sessions have been super beneficial in this season of my life and I hope they are able to continue this pilot project because I know it is making a difference. Thanks! ”

# Welcome

## MEET OUR COUNSELLORS



2023-24 Practicum Students  
Kelsi Kowalchuk & Shay Southern

“ You truly  
save  
lives. ”

### Kelsi Kowalchuk

B.Sc.(hon)., B. A., M.Sc., M.Ed. (in progress)

As a counsellor, Kelsi creates a safe, supportive, and non-judgmental environment in which clients feel secure and validated. She meets clients where they are, taking the time to understand their context and struggles to utilize an individualized approach that best fits their therapeutic goals and current needs. Her goal is to walk alongside clients on their healing journey while providing coping tools and support for whatever life may throw their way.

Using a resiliency-based, strength-based approach and trauma-informed practice with a dose of compassion and curiosity in the counselling setting, she assists clients in achieving self-understanding, growth, and acceptance. Through a holistic lens and approach, Kelsi continues to draw upon various theoretical influences such as:

- Person-Centered Therapy
- Acceptance and Commitment Therapy (ACT)
- Dialectical Behaviour Therapy (DBT)
- Mindfulness
- Somatic Influences (Mind-Body Connection)
- Positive Psychology

This multifaceted approach ensures comprehensive and adaptable support that is tailored to the unique needs and strengths of each client.

### Shayna Southern

B.Ed., M.C. (in progress)

Shay's primary goal as a counsellor is to create a safe environment that incorporates trauma-informed and anti-oppressive practices. Throughout therapy, Shay supports participants in navigating their unique circumstances as they develop self-worth, self-understanding, and self-acceptance, and build healthy coping mechanisms, relationships, and boundaries.

Shay believes the participants are the experts of their own lives and assists them in uncovering the best course of action to meet their therapeutic goals.

To achieve this, she employs various approaches, including:

- Narrative Therapy
- Internal Family Systems Therapy
- Cognitive-Behavioural Therapy (CBT)
- Motivational Interviewing
- Person-Centred Therapy

These diverse methodologies enable her to tailor support to individual needs, ensuring a holistic and effective therapeutic experience.





# Individual Support

## NUTRITION & RECOVERY COACHING

VIRTUAL

Providing nutrition support in a group setting can be challenging as everyone has a different relationship with food and are at different places in their recovery journey. Individualized nutrition support ensures that participants' unique dietary needs and goals are addressed, promoting personalized care and empowering individuals in their recovery journey.

Our goal with individualized nutrition support, both onsite and virtually, is to help our participants feel more supported and hopeful on their recovery journey. Last year, we piloted aftercare support from our dietitian, Sydney. Building on this extension of one-on-one support, this year we offered virtual Nutrition Recovery Coaching Sessions on a trial basis.

Over the last year the nutrition team has developed new virtual programs. The BridgePoint Nutrition Series is a self-paced virtual option that covers the nutrition basics that we teach onsite. Participants and their caregivers can access this program any time and go through it however they wish. The Nutrition Series consists of six modules with videos and handouts, and more will be added throughout the next year. Virtual Meal Support was a pilot program that ran throughout February and March. This program was created to support participants during lunch. A small group showed up regularly, and we ate together, learned about nutrition, enjoyed light conversation, and we closed with grounding and intentions for the rest of the day. Participants were able to complete their meal with the support of this group. And finally, our one-on-one nutrition coaching pilot program began in January. Nutrition coaching is available to BridgePoint alumni who do not have access to a nutritionist or dietitian, and these sessions happen virtually. This has been an effective way to support participants with their specific situation and help them find their next steps forward in the area of nutrition. It's been an exciting year to be involved in the nutrition area at BridgePoint, and new offerings are currently in the works for the coming year!

## MEET OUR NUTRITION & DIETITIAN TEAM

### Jackie Reimche

ADII, CCIEDC, RHN, B.Sc.(Nutr.), M.A.

Jackie is a nutritionist who combines science, holistic nutrition, and eating disorder recovery coaching to create a unique experience for participants. Fully recovered from an eating disorder, Jackie believes this personal experience is an important aspect of what she brings to the coaching relationship.

### Janine Wagar, RD

For over a decade, Janine has been a part of the BridgePoint family.

Janine is currently on maternity leave and we are so excited to welcome her back once she has completed her 18 months at home with her sweet kids.

### Sydney Wright, ADII, RD

You might have noticed that Sydney hasn't been onsite in our group programs for a good chunk of the year, but she does still pop in virtually as she is able to. Sydney is working on her Masters of Social Work, but has officially left part of her heart at BridgePoint.



**37 UTILIZING SERVICES  
(163 SESSIONS)**

### Our Nutrition Team

Jackie Reimche  
Janine Wagar (maternity leave)  
Sydney Wright (virtual only;  
education leave)

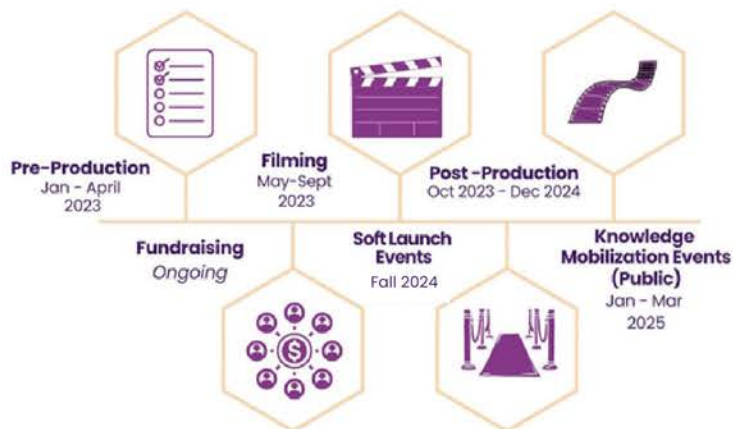


# Stories of Impact

A BRIDGEPOINT DOCUMENTARY

# RECOVERED

## Project Timeline



BridgePoint Center for Eating Disorder Recovery is self-producing a documentary that tells the untold stories of those experiencing disordered eating and the impacts on their loved ones. The documentary will utilize a trifecta of voices of caregivers, those with lived experience, and snapshots of the recovery journey. The goal is to portray a diverse spectrum of stories and cultivate a broader perspective on the issue.

Eating disorders are as diverse as the people they affect, including people of all ages, genders, races and ethnicities, abilities, diagnoses, body shapes and sizes, income levels and abilities. This project will have a significant audience reach, viewership, and impact, as most individuals know someone with an eating disorder, are experiencing disordered eating themselves, or are a caregiver. This project will prioritize an intersectional approach with ongoing analysis of spaces we occupy, exploring the narratives of those with different interlocking identities than us and including the voices and stories of those often underrepresented.

## The Impact

Sharing of these stories will empower those impacted by disordered eating to feel that they are not alone, learn from the experiences of others, and have renewed hope that recovery is possible.

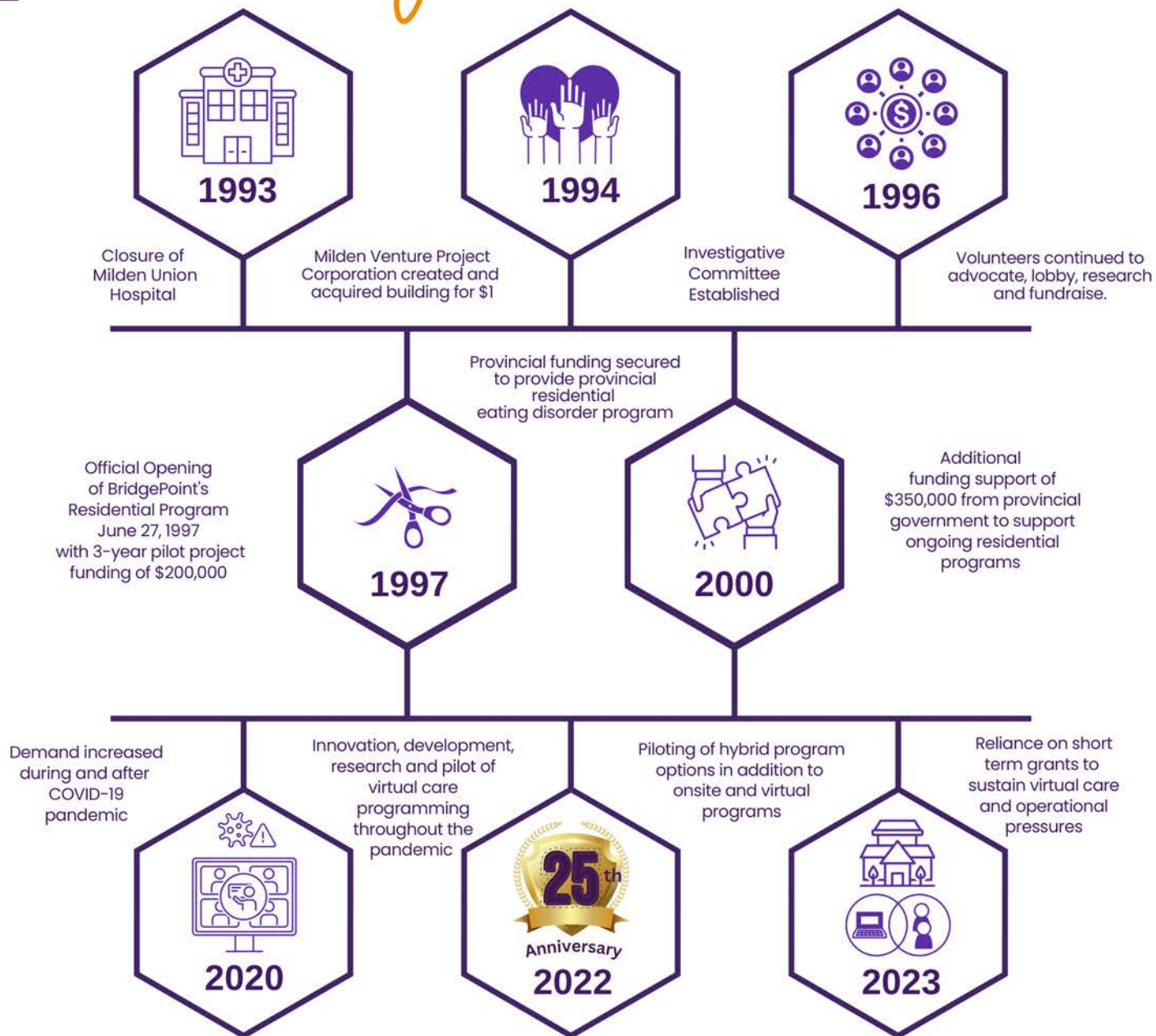
**Sharing these stories will save lives.**





# History

## EVOLUTION & INNOVATION



The Saskatchewan Government announced annual support for BridgePoint's Virtual Care Program in the 2024 Budget, with ongoing pressures expected in 2023-2025 due to partial funding in the first year.



# Funding

Without great community partners and funders, our program would not be able to provide free, accessible and innovative care to those who need it most. BridgePoint receives funds from a variety of sources including the Saskatchewan Health Authority, the Saskatchewan Ministry of Health, grants and donations.

THANK YOU TO THE FOLLOWING ORGANIZATIONS FOR THEIR SUPPORT.







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

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