



2024-2025

ANNUAL REPORT



Accredited
IMAGINE CANADA



Land 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.

Our values authentically define our philosophy, culture, and programs, and are embedded in our day-to-day operations—including decisions, hiring practices, and policies—ensuring integrity and alignment across the organization. By integrating these values into every aspect of our work, we foster a cohesive, principled culture that supports long-term success. This alignment between values, strategy, mission, and goals creates a direct and measurable impact.

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

BridgePoint's strategic priorities reflect our commitment to delivering inclusive, culturally responsive, and accessible care for all individuals impacted by eating disorders. By embedding principles of Inclusion, Diversity, Equity and Accessibility (IDEA), enhancing stakeholder engagement, advancing digital tools and technology, and strengthening organizational sustainability, we are cultivating a comprehensive, collaborative recovery-focused system of care.

These priorities ensure that our services remain person-centred, evidence-informed, and responsive to the diverse needs of the individuals and families we serve—ultimately improving outcomes and supporting lasting healing.

Enhance stakeholder awareness and relationships

Integrate Inclusion, Diversity, Equity and Accessibility principles into practice

Advance the technology, innovation, and virtual capacity

Strengthen organization sustainability

Leadership

EXECUTIVE DIRECTOR REPORT

As I wrap up my tenth annual report with BridgePoint, I'm struck by the transformation we've witnessed—both within our organization and across the broader landscape of eating disorder recovery in Saskatchewan and beyond. What began as a solely onsite-based program has evolved into a comprehensive, stepped-care approach grounded in a holistic biopsychosocial philosophy.

Today, participants have more choice than ever in how they access support with options from online self-paced programs and synchronous virtual groups to individual counselling and nutrition coaching. While virtual care will never replace the power of our onsite programs, it allows us to meet people where they are and when they need it most.

One of the questions we often ask ourselves is how we can better honour the recovery journeys of those we serve. This past few years, we found a powerful new way to do that. RecoverED, our first documentary, is now complete and entering the film festival circuit and already earning recognition across Canada and beyond. This project is more than a film—it's a statement of solidarity, strength, and the real, raw stories of healing.

Our “why” is your “why.” Every story of recovery we support is the reason we continue to show up—with compassion, courage, and hope. And there are so many more stories to be told!

I'm incredibly proud of our team. Their ongoing learning, unlearning, and wholehearted commitment to walking alongside others in recovery defines who we are. This work is deeply personal, and that's what makes it transformative.

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. **At BridgePoint, we don't just deliver programs—we walk alongside people in recovery.**

With gratitude,



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



“

As a leader, I do this work to create spaces where people feel seen, supported, and inspired. I'm driven by a deep commitment to improving quality of life—not just through our programs, but by fostering innovation, nurturing creativity, and staying grounded in the ongoing journey of learning and unlearning.

Clinical

PROGRAM DIRECTOR REPORT



As the Clinical Program Director, it has been another year of growth, learnings, and accomplishments. Selected team were active this year expanding their knowledge through the intensive Body Trust® Certification training in collaboration with the Center for Body Trust™, an organization renowned for its compassionate, inclusive, and weight-neutral approach to mental health care. This training strengthened our team's ability to support clients in their healing journeys by emphasizing body autonomy, self-compassion, and dismantling harmful societal norms related to weight, shape, size, food and body.

BridgePoint supported local and provincial community members, offering presentations to school counsellors and students, redesigning and updating the self-paced caregiver workshop, joining panel discussions with CBC, as well as the EDAW (eating disorder awareness week) initiative organized by the University of Saskatchewan. We were also able to welcome new practicum students, providing them with invaluable hands-on experience in a clinical environment, while further enriching our team with fresh insights and perspectives and helping the next generation of service providers feel more equipped to support those struggling with disordered eating.

Reflecting on the collective mental health of both our participants and team, 2024-2025 has been a year of resilience and adaptation. While the mental health landscape has presented ongoing challenges, we have continued to prioritize self-care, collaboration, and community support. Our efforts have fostered a supportive environment where healing and growth are possible, and I am very excited about the continued positive impact of these initiatives in the coming year.

A handwritten signature in black ink that reads "L. Blackburn".

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

“

I do this work because I believe in our innate capacity to heal—ourselves and each other—just as deeply as we've been capable of harm. Every person matters, every person deserves healing, and we all have the power to create meaningful change. My passion is to empower people to live the fullest, most authentic lives possible—finding joy, connection, and celebration along the way.

Governance

BOARD ADDRESS

I was born in the newly built Milden Union Hospital four months after it first opened, sixty plus years ago. I would enter that building probably a hundred times, in my 20 years in Milden, for various reasons; to have a broken bone cast, to visit a friend during a hospital stay, even to have my ears pierced! The warm welcome I received was always consistent, as was the exceptional care given by all the staff of Milden Union Hospital. Now, several years later, as I walk into that same building, now known as BridgePoint Center for Eating Disorder Recovery, I feel that same warmth, kindness and care that comes from the BridgePoint team.

Congratulations to Carla and her team for leading BridgePoint to exceptional results in 2024. It speaks volumes of the level of dedication, commitment, and expertise all of you bring to your participants, your stakeholders and each other, consistently.

Thank you for your determination to consistently strive to expand awareness and accessibility of the vital in-person and virtual programs to reach more and more people of Saskatchewan. You have truly built a solid foundation from which you continue to align upcoming requirements with future expansion.


Thank you to my Board colleagues, your collaborative approach, exceptional level of expertise and strong desire to consistently contribute to the success of BridgePoint, is a remarkable team to be a part of.

Thank you to my hometown of Milden for creating and following a community dream, then relentlessly working to make it a reality, all those years ago.

I am truly honoured to be a part of future expansion and success of BridgePoint.

"The future belongs to those who believe in the beauty of their dreams"

– Eleanor Roosevelt


Valerie Maxemniuk
Chair, BridgePoint Board



Governance

BOARD OF DIRECTORS

Valerie Maxemniuk, Chair
Rebecca Rackow, Vice Chair
Kayla Seipp – Secretary/Treasurer

Alison Bokitch
Clare McNab
Jeannie Munro
Amy Pickering

Multi-Disciplinary

2024-25 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

Program Facilitation & Recovery Support Team

Kara Carlson, B.A. (hons), ADII
Jenn Frehrichs, RN
Chandra Funk, RSW, MSW, ADII
Becky Giles
Janelle Kapeller
Kelsi Kowalchuk, B.Sc.(hon)., B. A., M.Sc., M.Ed. (in progress)
Janine Wager, RD
Jackie Reimche, M.A., B.Sc.(Nutr.), RHN, CCIEDC, ADII
Shayna Southern, M.C., Registered Psychologist (Provisional)
Sydney Wright, RD, ADII
Hannah Lemke, BSW, RSW, MSW (pending)

Financial Office

Sharie Jensen, Financial & Office Co-ordinator

Kitchen & Night Support

Sharie Jensen, Kitchen Coordinator
Rhonda Willis
Barb Hannah

Housekeeping & Maintenance

Barb Hannah
Barry Craig

“

We **care** about the under-served.
We make a difference. We change lives.
We facilitate **hope**. Hope creates
possibility.

Possibility creates **healing**.

- Helen



“

My why is the sense of fulfillment I get when I see that the organization I work with is making a real difference in people's lives. My favorite part is seeing people gain new tools and understandings that they can take with them. To me, BP embodies inclusivity, understanding, empathy, and care.

- Becky



“

“Caring for participants who come to Bridgepoint “feeling broken”...providing emotional support, building relationships, and helping them to see their value and self worth...to find their light again! I get to be a part of the most amazing team that I am blessed to call my work family...that's “Why”.

- Jenn



Bridgepoint is a wonderful place to work, not only because they recognize that flexibility for a busy work/family life is important, but you also feel like you are doing meaningful work as well. Knowing that you are helping participants with their journey to health - be it by creating a delicious meal, or having a meaningful chat during a night shift with a sleepless participant, work at Bridgepoint is very rewarding. The great collaborative staff is a bonus!

-Sharie



“

My why.... It gives me the opportunity to work outside with all the resources provided to keep the grounds looking good.

- Barry



“

A feeling of doing a little good in the world.

- Barb



“

Why do I do the work I do? This is an easy question to answer because I simply cannot imagine not doing the work I do. Walking alongside and holding space for those in eating disorder recovery has undoubtedly been the highlight of my career. I'm constantly learning, growing, and deeply inspired by the strength and honesty of the people I get to support. It is a privilege to watch the brave journeys of others unfold; it's magic really.

- Chandra



“

I work at BridgePoint for the people that come through the doors and to be witness to their healing journey. I work with the horses and the participants because the horse can hold space for free and with absolutely no judgement.

- Janelle





Utilization

443
Discrete
Individuals
Served

Doesn't include many more
individuals supported
by telephone, or email

371

Attended one
or more
virtual
options

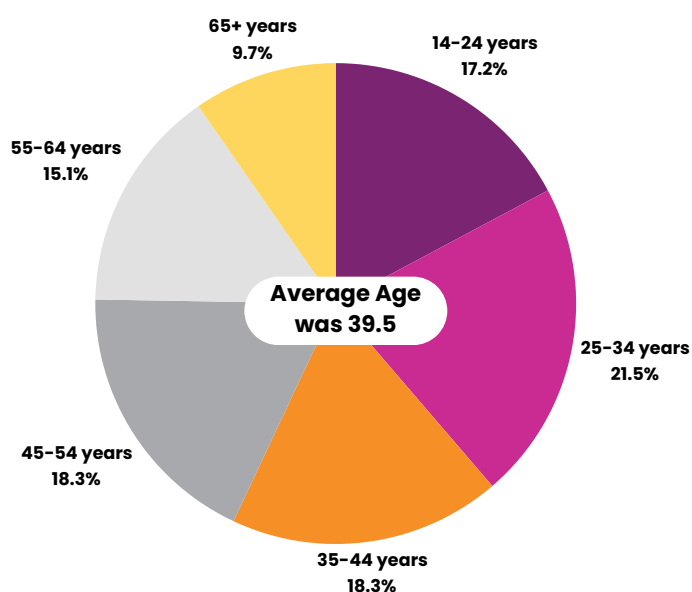
72

Attended
Onsite
Programs

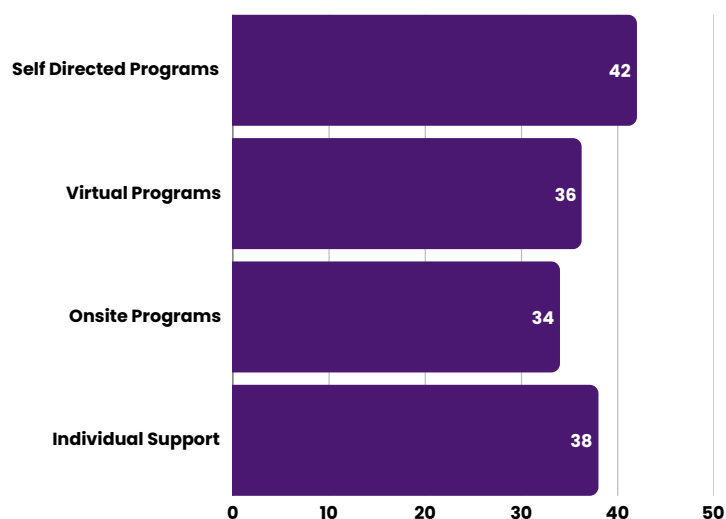
Only 14%
of onsite
participants
did not
engage in
virtual
programs

BridgePoint programs are accessed by individuals across a broad age range, reflecting the diverse reach of our services. What's surprising—and important—is that the majority of participants engaging in our services are well into adulthood. This challenges the common misconception that eating disorders primarily affect teenage girls. Instead, our data reveals that eating disorders often persist or emerge in adulthood, particularly during major life transitions like parenthood, aging, or relationship changes. The higher average age in the self-directed program suggests that older adults may prefer more flexible, accessible supports due to competing responsibilities or stigma-related barriers. These insights underscore the importance of age-inclusive, adaptable care and highlight BridgePoint's unique role in serving individuals across the lifespan.

PARTICIPANT AGES



AVERAGE AGE (BY PROGRAM)



Who we support

Our participants come from diverse backgrounds and stages of recovery, underscoring the need for flexible, accessible care rooted in compassion and evidence-informed practice.

All of our programs are inclusive of gender, with 88% of participants identified as female; others included transgender, non-binary, and Two-Spirit individuals, reflecting BridgePoint's commitment to inclusive and gender-affirming care.

Nearly two-thirds had some post-secondary education, supporting the delivery of psychoeducational and skills-based approaches. Over 50% were employed or self-employed; students made up 21%, and 20% were either unemployed or receiving disability benefits.

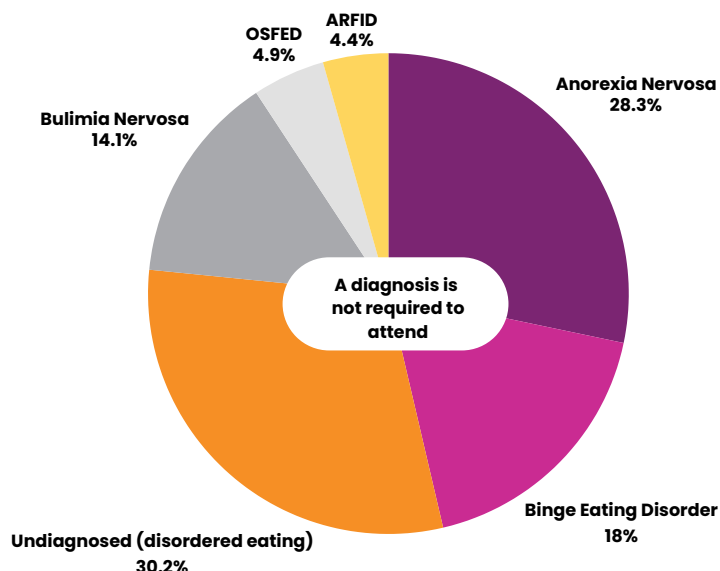
30%

of participants had no formal diagnosis but identified with disordered eating, affirming BridgePoint's value in early intervention and non-diagnostic support options.

97%

of our participants have more than one mental health condition alongside their eating disorder

BREAKDOWN BY DIAGNOSIS



While some might assume that most of our participants have anorexia, we actually provide services to address a broad range of eating disorder behaviors. 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.

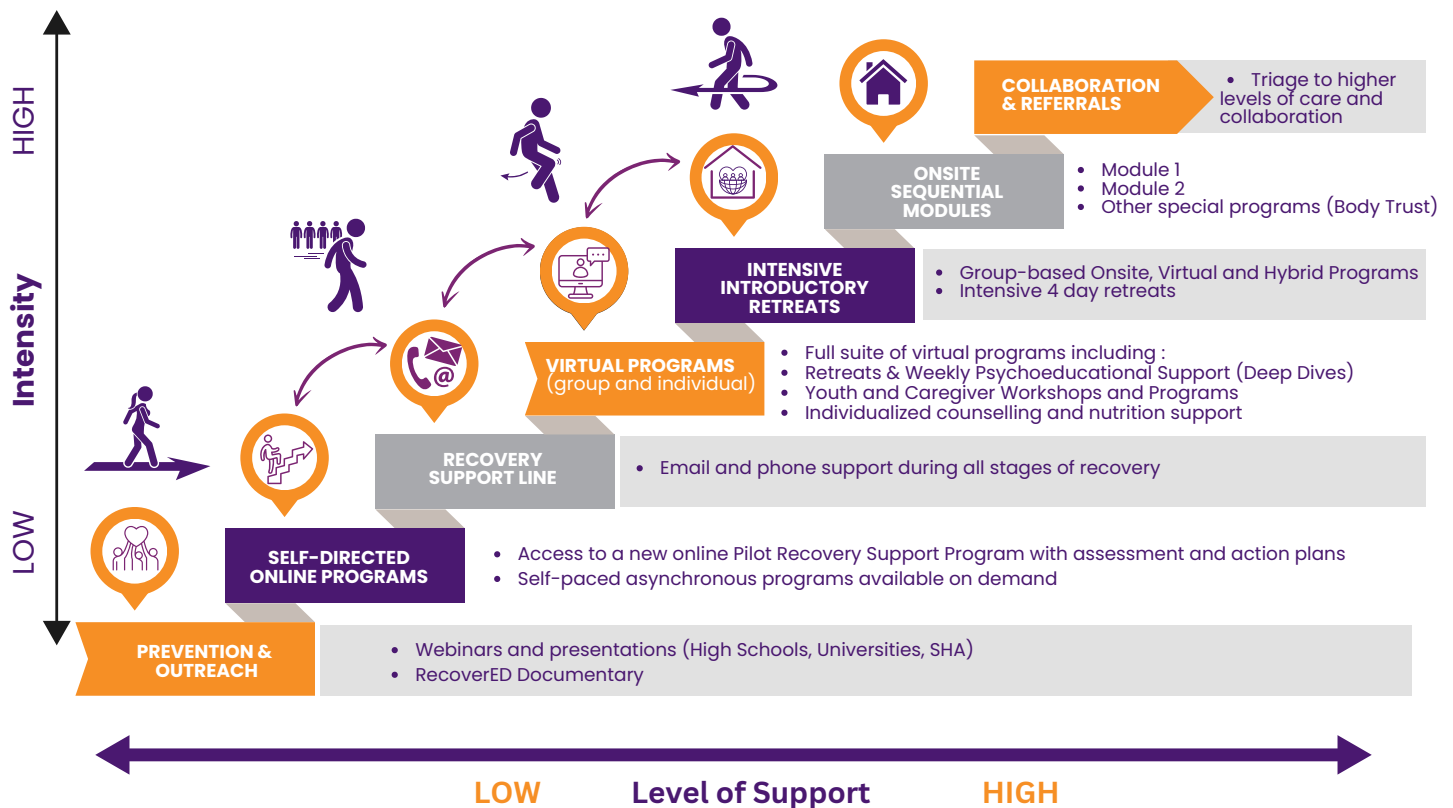
Approximately 97% of participants report at least one additional mental health condition (and often others that aren't diagnosed) alongside their eating disorder. This emphasizes that eating disorders rarely occur in isolation and reinforces the need for holistic, integrated approaches that account for anxiety, depression, trauma, ADHD, chronic thoughts of suicide, perfectionism, and more.

Program

STEPPED MODEL OF EATING DISORDER CARE

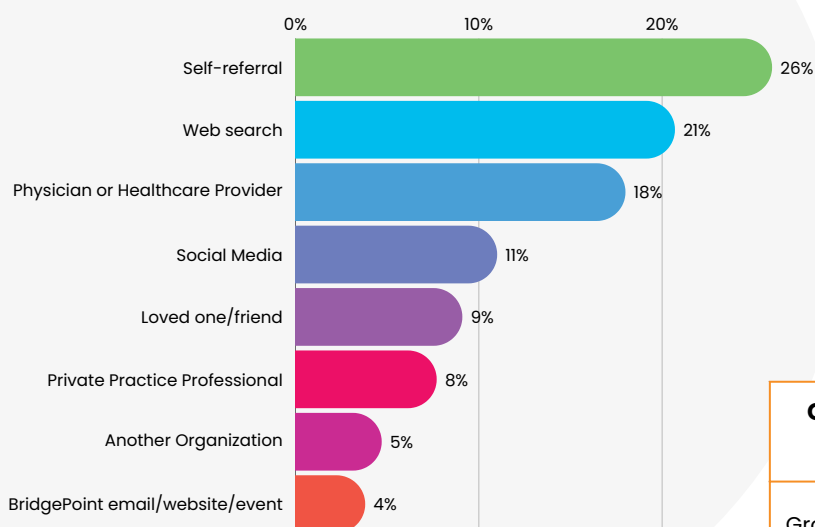
Empowering Recovery, One Step at a Time. Recognizing that recovery is not linear...

This year marked a pivotal moment for BridgePoint, as our virtual care programs received sustainable funding that will allow for continued access to essential services across Saskatchewan. We continue to embrace creativity and innovation in delivering care that meets people where they are. Our stepped care model for eating disorder treatment provides a personalized approach, matching individuals with the appropriate intensity of support from low- to higher-intensity program options. This flexible and accessible model not only optimizes resource allocation but also improves outcomes by fostering long-term, sustainable recovery. Recognizing that recovery is rarely linear, and recovery journeys span over many years, our programs allow participants to move along the continuum of care as their needs evolve.



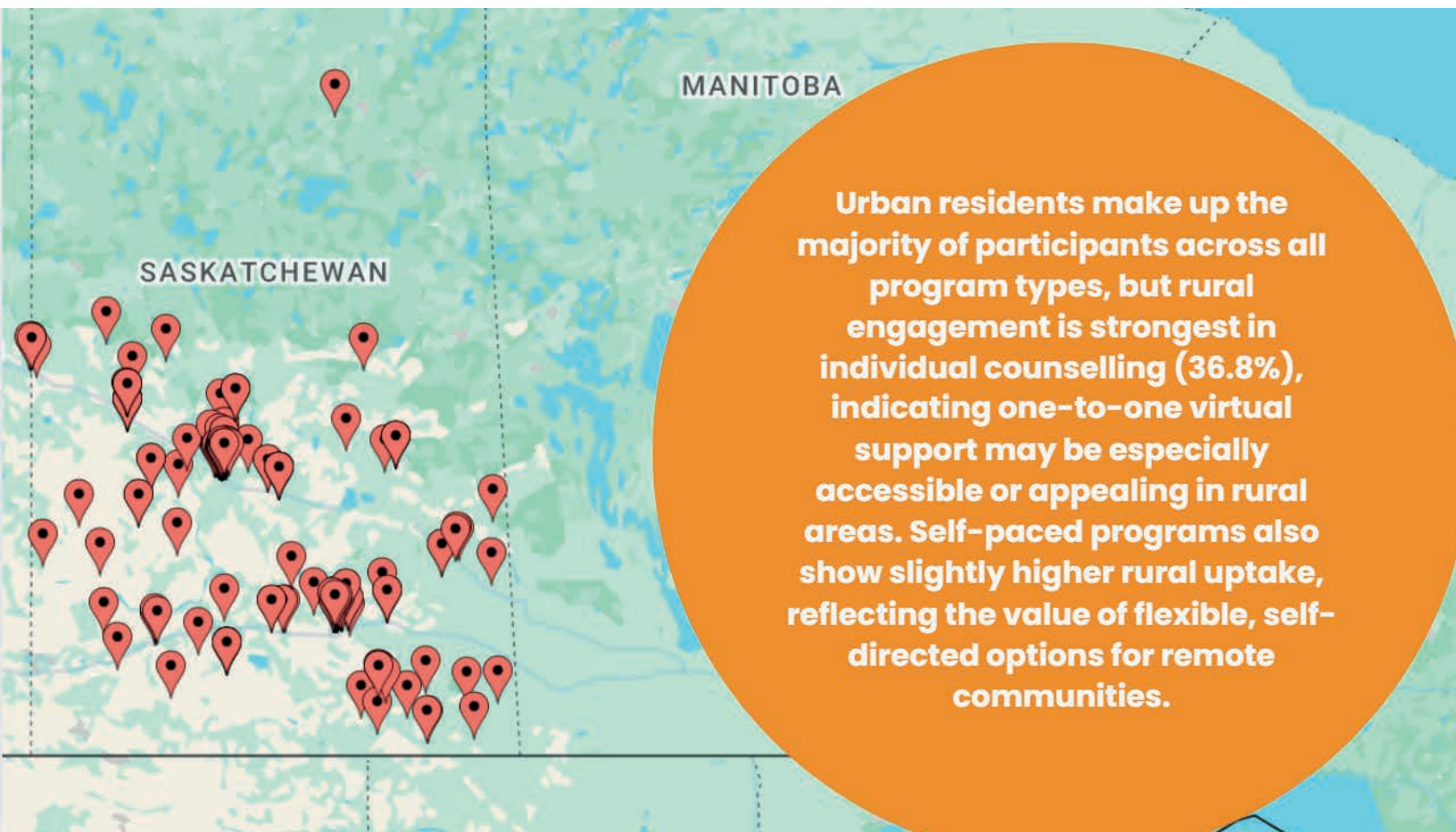
Provincial Reach

HOW FOLKS ARE FINDING US...



URBAN AND RURAL REACH ACROSS SASKATCHEWAN

Geographical Breakdown (By Program)	Rural %	Urban %
Group (Onsite/Virtual)	30	70
Self Paced Programming	31	69
Individual Counselling	37	63



Urban residents make up the majority of participants across all program types, but rural engagement is strongest in individual counselling (36.8%), indicating one-to-one virtual support may be especially accessible or appealing in rural areas. Self-paced programs also show slightly higher rural uptake, reflecting the value of flexible, self-directed options for remote communities.



SEQUENTIAL RESIDENTIAL PROGRAMMING

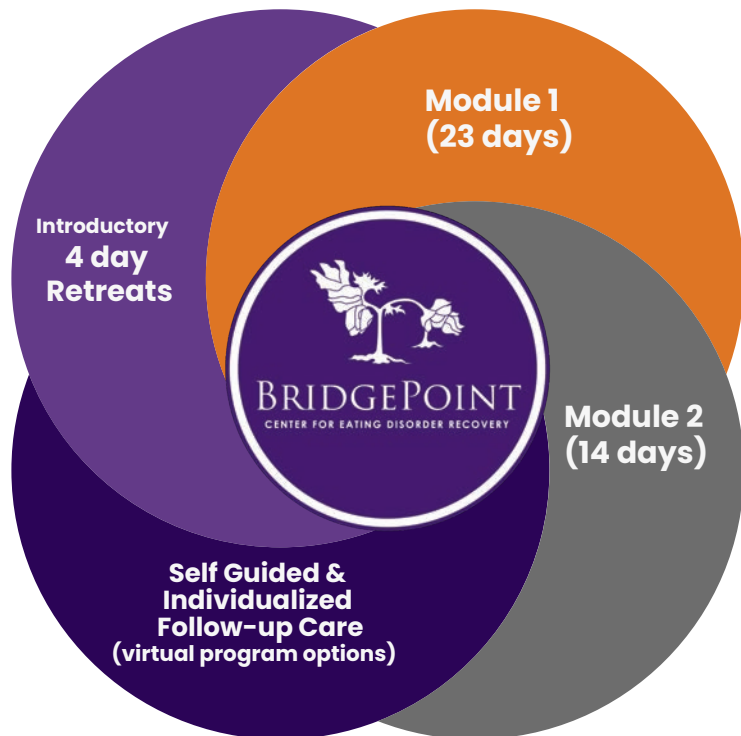
Where recovery comes to life... A Place to Breathe, Connect, and Heal

Residential programming remains the cornerstone of BridgePoint's approach, fostering healing through connection, community, and a holistic biopsychosocial framework. Our group-based model combines multi-modal therapy and experiential activities that support deep personal insight and recovery.

Each fiscal year, we offer eight onsite introductory retreats, three Module 1 sessions, and two Module 2 sessions. This year, we enhanced our programming by integrating equine-assisted learning (EAL) and transformational breathwork into our modules. These experiential additions provided participants with powerful tools for emotional regulation, integration, and personal growth.

BridgePoint's onsite programs are designed for individuals who are medically and psychiatrically stable and ready to engage in meaningful change. With eight available rooms, we maximized capacity by incorporating a hybrid format in select sessions—allowing additional participants to benefit from the programming while maintaining a strong sense of connection and community. While not all elements translate seamlessly online, this hybrid approach created greater inclusivity for those unable to attend in person.

Onsite programs continue to see strong demand, with an average waitlist of approximately three months for the onsite programs. During the wait and for post-program support, many participants engage in our virtual programs to maintain momentum. Due to frequent cancellations and no-shows, individuals with flexible schedules are often able to access last-minute openings.



132

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

72

onsite participants
attended our programs which
include Retreats, Module 1 and
Module 2.

Medical and psychiatric stability
required for onsite programs.

Virtual

INDIVIDUAL AND GROUP PROGRAM OPTIONS



BridgePoint is proud to offer a dynamic and evolving range of programming meeting participants. From self-guided pathways to immersive weekly Deep Dives, our virtual offerings are designed to support diverse recovery needs with flexibility and innovation. Initially supported through generous one-time grants, these programs are now sustained through ongoing operational funding, with future growth aligned to emerging priorities and available resources.

Virtual care has been transformative—significantly expanding access, alleviating pressure on our waitlists, and meeting the growing demand for timely, inclusive support. For many, onsite programming is not feasible or preferred. Our virtual services effectively bridge this gap, providing meaningful care to individuals across Saskatchewan and beyond.

BridgePoint continues to lead in delivering inclusive, evidence-based virtual intensive outpatient programming. Whether participants are contemplating change, actively engaged in recovery, or navigating after-care as alumni, our stepped care model ensures tailored support across all stages. Individuals join seamlessly from their homes, communities, or even hospital settings, with all services delivered securely through HIPAA-compliant, encrypted platforms that uphold Canadian data integrity standards.

Beyond increasing capacity, virtual care has dismantled barriers, expanded after-care access, and enhanced continuity of care. Through ongoing feedback from participants and partners, and a commitment to iterative improvement, our virtual programs continue to evolve—ensuring we remain responsive, accessible, and rooted in quality.



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.

212

Registered for Self Guided Programs

83

Registered for Caregiver Programs

94

Individuals accessed Weekly Deep Dives

63

Registered for Virtual Retreats

62

Accessed Individual Counselling or Nutrition

114

Accessed Recovery Support Line

Counselling



**Accessible Support for Every Step of Recovery.
One Session Can Make a Difference.**

Connection. Clarity. Courage.



By integrating individualized counselling into our Recovery Support Program, BridgePoint is proud to offer comprehensive, effective, and compassionate care for those navigating recovery from eating disorders.

With sustainable funding now secured, counselling is now a permanent part of our programming, offered entirely online through a flexible single-session model. This ensures accessibility for individuals across Saskatchewan—particularly those in rural or underserved areas—by reducing barriers and filling critical gaps in mental health services.

Delivered by master's-level registered counsellors, this model allows participants to book sessions as needed for timely, focused support. Whether used to complement our group programming or as standalone care, this approach provides an essential touchpoint for those who may otherwise go without support.

As demand continues to grow, we plan to expand counselling capacity to ensure continued access to high-quality, person-centred care rooted in recovery and connection.



I do this work because it made a huge difference in my life and I want to share that with others. Because it's challenging and interesting! I also love working 1-1 with clients and being on a multidisciplinary team. Team is what keeps me connected :) what matters most is integrity, challenge, and authenticity.

- Shay Southern M.C., Registered Psychologist (Provisional)



Bearing witness to this work, to hold space for stories of pain, healing and hope, is a profound gift and privilege. It is a sacred space to be, in the messiness, the roaring, the quiet resilience of recovery. To walk alongside others as they change their lives inevitably changes mine.

- Hannah Lemke BSW, RSW, MSW (pending)



My why is to walk alongside participants on their healing journey while providing coping tools and support for whatever life may throw their way.

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



Nutrition

“ It’s about the food...
and it’s not about the food...”



Over the past year, the nutrition team has been active in both onsite and virtual programming to support participants with their recovery journeys.

We continued to provide personalized support to BridgePoint alumni who do not have access to a dietitian or nutritionist through our one-on-one virtual nutrition coaching. Our popular Nourished group was offered several times throughout the year. This year, we also launched Nourished in Midlife, a new virtual group created specifically for women in midlife and beyond who are navigating disordered eating or eating disorders.

We piloted the Recovery Record app to further support BridgePoint alumni. This tool allows participants to track their recovery, access helpful resources, and stay connected with nutrition support in a flexible, individualized way.

In addition, we were excited to develop and deliver nutrition sessions for our new onsite program, the Body Trust Retreat. It has been a true honour to walk alongside participants in their recovery, and we look forward to expanding our nutrition programming in the coming year!

“ My why is for the connection! I want people to feel heard, understood, and seen.

– Sydney Wright, RD, ADII



“ I do this work because I love helping people challenge the harmful myths of diet and wellness culture that fuel shame and confusion around food and their bodies. There’s nothing more meaningful than witnessing the moment someone begins to soften toward themselves and believe that change is possible. Getting to see how powerful it can be to connect with BridgePoint and other participants is also pretty amazing!

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



“ I help build connections that diminish shame and create a sense of safety—especially when the world feels overwhelming. My hope is that this makes a meaningful difference, big or small, in someone’s journey through life.

– Janine Lefebvre, RD



Youth & Caregiver

BridgePoint recognizes the vital role caregivers play in recovery and offers a range of programs to meet their unique needs. Over the past few years, we've delivered a series of caregiver workshops designed to build understanding, provide practical tools, and foster connection and hope through shared learning. Each year, we support approximately 100 caregivers through formal programming, with hundreds more reaching out for guidance and system navigation.

Current caregiver offerings include a self-paced online program, our "Supporting Your Loved One" workshop, and one-on-one support via phone or video through our Recovery Support Line. Caregivers can also access individual guidance to navigate the self-paced program with support from our team. Looking ahead, we are excited to partner with Body Brave to pilot a caregiver focused Recovery Support Program (RSP).

Online program options also continue to be available for youth. We are looking forward to partnering with HomeBase Saskatchewan and their youth co-design team to offer programs and resources to more youth in Saskatchewan.

Stay tuned as we hope to expand our offerings to include virtual counselling and nutrition support for caregivers and youth.



“

Supporting and holding space for participants and their loved ones through the recovery journey inevitably impacts and enriches my life and I have so much gratitude for the amazing Team I get to work with.

- Kara Carlson, B.A.(Hons), ADII



“

Knowing I have access to tools and knowledge to support myself supporting her is an amazing weight lifted off my shoulders.”

”

“

“I feel more emotionally regulated and equipped to support my child.”

”

Address:

Website:

Stories of Impact

A BRIDGEPOINT AWARD WINNING DOCUMENTARY

A FILM ABOUT EATING DISORDER RECOVERY

RecoverED

Because eating disorder recovery is often invisible—and we wanted to change that.

RecoverED was created to share real stories from real people in Saskatchewan. Stories of courage, healing, and hope.

This documentary is more than a film—it's a movement to break the silence, build community, and remind people they are not alone.

RecoverED is an award-winning documentary produced by BridgePoint Center for Eating Disorder Recovery. This compelling film explores the deeply personal and transformative journeys of individuals recovering from disordered eating. Through raw and honest storytelling, RecoverED highlights the power of hope, the strength of community, and the importance of accessible support in the healing process.

Featuring voices of past participants from BridgePoint's programs, the documentary offers a rare and intimate glimpse into what recovery truly looks like—messy, courageous, and ultimately empowering. We held a special screening of RecoverED in the fall of 2024 for our team, program participants, and their friends and families. Since then, the film has been featured on the festival circuit and been accepted into many festival and brought home some awards.

We're excited to bring **RecoverED** to more communities across Saskatchewan—and beyond. Stay tuned for upcoming screening dates and locations as we continue to share stories of **recovery, hope, and resilience**.



This film has changed how I think about my own recovery journey—it's given me **hope**.

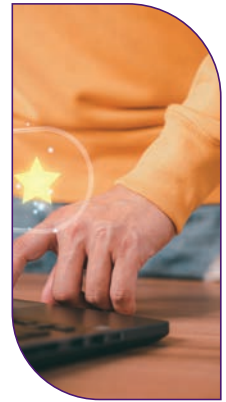
I didn't realize how **diverse** disordered eating recovery experiences could be.

I now see how complex recovery is—it's **not just about food or weight** but so much more.

This film completely shattered my **misconceptions** about eating disorders.

Testimonials

WORDS OF OUR PARTICIPANTS



I came here a shell and leaving here as a person with a new outlook, a list of tools and supports to make real progress. **Thank you for making me feel safe.** This experience could not have been more positive if you tried. Excellent, excellent work.

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

The entire team was very supportive and **I felt seen** for me not for who people think or want me to be. I feel like I play different roles in my life to keep people happy and reduce conflict and this keeps a guard up around me so no-one knows my history, feelings or thoughts.

The retreat was a great first step to recovery!

BridgePoint gave me the space to discover myself, and continue to discover more parts of me.

After having been unable to participate for weeks it felt like "home" to be able to be back on Deep Dive and part of this community. I'm so very grateful.

Ten years ago when I sat in the group room and shared my story for the first time, **I never in a million years could have imagined that I would go on to build a life that I have now.** And I laid the first stone on a path to get there within your walls.



You have given me hope, tools, education, knowledge and support. All of the things I was missing and needed.

I want you all to know how much you really do **save lives.** I am not the same person I was when I came here. With out BridgePoint programming and all the team, I don't know if I would be alive. I have the courage to come, but you a have showed me that **my life is worth living.**





DID YOU KNOW?

Only 20–25% of people with eating disorders ask for help.



The current need for the programs offered through BridgePoint is higher than ever!

1 in 3 Canadians are at high risk for an eating disorder.

An eating disorder is often experienced with a number of other mental health challenges

Eating disorders have one of the highest mortality rates of all mental illnesses.

BridgePoint programming and support targets the root causes of eating disorders, which helps lead to long-lasting recovery?

A 2024 report by Mental Health Research Canada (MHRC) found that approximately 1 in 3 Canadians are at a high risk for developing an eating disorder. This highlights the widespread and often hidden challenge of eating disorders, underscoring the importance of increased awareness, early intervention, and accessible mental health services, particularly as eating disorders can significantly impact both mental and physical health.

To meet people where they're at, BridgePoint offers a range of programming options—including in-person, virtual, and self-led to help reduce barriers and support diverse needs.

Unlike many eating disorder treatment programs rooted in a medical model, BridgePoint takes a whole-person approach—supporting recovery emotionally, mentally, and spiritually.

Eating disorders often begin between the ages of 12 and 25. While they most commonly affect girls and women, boys and men are also impacted. These struggles can be serious, but recovery is possible—and no one is alone in it.


One possible sign of an eating disorder is secretive eating or bingeing. If you or someone you know is struggling, know that you're not alone—and support is available.



bridgepointcenter | Instagram | Facebook | LinkedIn



 www.bridgepointcenter.ca

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