Eating Disorders

A guide for people with an eating disorder





Ontario Health is committed to improving the quality of health care in the province in partnership with patients, caregivers, health care professionals, and other organizations.

To do that, Ontario Health develops quality standards. These are documents that outline what high-quality care looks like for conditions or processes where there are large differences in how care is delivered, or where there are gaps between the care provided in Ontario and the care patients should receive. These quality standards set out important steps to improve care. They are based on current evidence and input from an expert committee that includes patients, caregivers, health care professionals, and researchers.

The care described in the patient guide is intended to outline the best way to provide care for people with an eating disorder in Ontario. But this may not always reflect how care is currently delivered or the services that are available right now. There are challenges in the health care system that need to be addressed, and this can be frustrating for patients and their family and caregivers. The goal of this document is to help you understand the type of care you should be receiving to help you get healthy and stay healthy. Your family or caregivers can provide support during appointments, assessments, and treatment, depending on the circumstances and your preferences.

This patient guide accompanies the <u>quality standard on eating disorders</u>. It outlines the top nine areas where providers can take steps to improve care for people with an eating disorder. The patient guide also includes suggestions on what to discuss with your health care providers, as well as links to helpful resources.

For caregivers:

If you're helping to care for someone with an eating disorder, please review the <u>caregiver guide</u>. It presents this same information in a way that addresses your unique role. The needs of the person you're caring for may change over time, depending on how they're feeling and the severity of their condition.

Are you in crisis? If you need immediate help, please do one of the following:

Go to the nearest hospital or emergency room

Call 9-1-1

Call a helpline:

- Health811—24/7 health advice (call 811 or TTY: 1-866-797-0007; available in English and French)
- Ontario Network of Sexual Assault/Domestic Violence Treatment Centres—for community services and resources about sexual assault and domestic violence (available in English and French)
- <u>Kids Help Phone</u>—24/7 e-mental health service for young people (text CONNECT to 686868 or call 1-800-668-6868)
- <u>ConnexOntario</u>—for help for mental health and addictions (1-866-531-2600)
- <u>Distress and Crisis Ontario</u>—to find a crisis centre near you
- <u>Hope for Wellness Help Line</u>—24/7 help for Indigenous peoples across Canada (available in Cree, Ojibway, and Inuktitut upon request)
- <u>Trans Lifeline</u>—a peer support phone service run by trans people for trans and questioning peers (available in English and Spanish)

Below is a summary of the top nine areas to improve care for people with an eating disorder.



Quality Statement 1: Comprehensive Assessment

What the standard says

People with signs and symptoms of an eating disorder have timely access to comprehensive mental and physical health assessments. The assessment is used to determine whether they have a specific eating disorder, the severity of their symptoms, the degree of impairment, and whether they have any comorbid conditions, and to establish a plan of care.

What this means for you

- Your health care providers should ask you questions about your thoughts, feelings, behaviours, and physical health. They will do this to find out whether you have an eating disorder, and to make a plan for your care as soon as possible.
- Your family, caregivers, or other supportive people in your life can be involved in these steps too.



Quality Statement 2: Level of Care

What the standard says

People with an eating disorder receive the most appropriate level of care, which takes into consideration their needs, goals, and experience with previous treatment.

What this means for you

- Your health care providers should offer you the treatment option that has the best chance of helping you and is the least disruptive to your life (for example, is as close to home as possible).
- If your symptoms don't improve with this treatment, your health care providers should offer you the next most appropriate treatment option for you. This should be done in a coordinated way.

Level of care for eating disorder treatments include:

- Self-directed interventions: activities you can do on your own to address your eating disorder (e.g., using books, manuals, online resources)
- Group therapy: therapy provided to a small group of people with similar eating disordered behaviours
- Individual therapy: therapy provided by a heath care professional in one-onone sessions
- Outpatient treatment: shorter visits at a clinic or hospital
- Day treatment: longer visits at a hospital or other facility that does not require overnight stay
- Live-in treatment (formerly referred to as residential treatment): longer-term 24-hour care that requires overnight stay at a facility that is not an acute care hospital
- Inpatient treatment: overnight care at a hospital, which may include *medical* stabilization (more intensive treatment to help your body recover)



Quality Statement 3: Transition From Youth to Adult Health Care Services

What the standard says

Young people with an eating disorder who will transition out of youth-oriented services to adult-oriented services receive transitional care that focuses on continuity and helping the young person develop independence.

What this means for you

- If you are moving from care for young people to care for adults, you should receive support that helps you become more independent.
- You should be involved in your own care, and you should not notice any interruptions in your treatment.

Transitions From Youth to Adult Health Care Services

Ontario Health has also developed a quality standard on <u>Transitions From Youth to Adult Health Care Services</u> that outlines key improvement areas for young people undergoing this transition. It includes <u>Resources for Young People and Their Caregivers</u> with websites, apps, transition plans, and other resources to help support successful transitions to adult health care services.



Quality Statement 4: Psychotherapy

What the standard says

People with an eating disorder receive timely access to evidence-based psychotherapy that considers their individual needs and preferences.

What this means for you

You should be offered a type of treatment called psychotherapy. It should be available as soon as possible after your assessment.

Psychotherapy can:

- Help you establish regular eating patterns
- Provide education about eating disorders and how to get better
- Improve your thoughts and feelings about eating and your body shape and weight

If you agree to psychotherapy, you should not need to wait too long to start treatment.

Psychotherapies for eating disorders may include, but are not limited to:

- Family-based treatment (single- or multi-family therapy)
- Cognitive behavioural therapy
- Interpersonal psychotherapy

More information on types of psychotherapy can be found at the <u>National Eating</u> <u>Disorder Information Centre (NEDIC) website</u>. Ask your health provider if you have any questions about any of these treatments.



Quality Statement 5: Monitoring and Medical Stabilization

What the standard says

People with an eating disorder receive ongoing medical monitoring to prevent and address adverse events and complications. They are offered acute medical stabilization when indicated.

What this means for you

- Your health care providers should check in with you regularly to see how you are feeling (physically and emotionally).
- Your health care providers may also suggest medical stabilization to manage your eating disorder. This involves being admitted to a hospital until you are physically healthier.
- They should check on you regularly while you are in the hospital.



Quality Statement 6: Support for Family and Caregivers

What the standard says

Families and caregivers of people with an eating disorder are offered resources, structured support, and education in a way that meets their needs.

What this means for you

If your family and caregivers are involved in your care, your health care providers should ask them how they are doing and offer them support if they want it. Support could include:

- Offering them information about your eating disorder, in the language of their choice, if possible.
- Helping them find a support group where they can talk with other people who are supporting a person with an eating disorder.
- Guided and unguided self-help interventions for family and caregivers of people with an eating disorder based on cognitive behavioural therapy techniques.



What the standard says

People with an eating disorder who have physical, mental health, or addiction comorbidities are offered treatment for their eating disorder and other conditions as part of a comprehensive plan of care.

What this means for you

- If you have other physical, mental health, or addiction conditions, your health care providers should offer you treatment for both your eating disorder and any other condition you have.
- If they are not able to treat your other conditions, they should connect you with another care provider who can, and work with that provider.
- Your health care providers should involve you (and your caregiver, depending on the circumstances) in decisions about your care.



Quality Statement 8: Promoting Equity

What the standard says

People with an eating disorder experience care from health care providers and a health care system that uses an anti-racist, anti-discrimination, anti-stigma, and anti-oppressive approach. Health care providers promote a culture that is compassionate, trauma informed, unbiased, and respectful of people's diversity. They build trust with people with an eating disorder and their families and caregivers, work to remove barriers to accessing care, and provide care equitably.

What this means for you

- You should feel like you are being treated with respect, dignity, and compassion by your health care providers.
- You should receive care in a manner that respects your identity and is free from bias.
- Your care providers should work with you to understand your eating disorder and how treatment is affected by your unique identity. They should be respectful of, and attentive to, cultural differences (among other things).
- You should be able to get highquality health care when you need it, no matter where you go (for example, at your doctor's office or at the hospital).

Trauma-informed care:

Trauma-informed care is health care that reflects an understanding of trauma and the impact that traumatic experiences can have on people. This approach does not necessarily address the trauma directly. Rather, the approach acknowledges that a person may have experienced a previous traumatic event that may contribute to their current health concerns. It emphasizes understanding, respecting, and responding to the effects of trauma.



What the standard says

People with an eating disorder who are not receiving active treatment are offered medical monitoring, support, and follow-up that meets their needs and preferences.

What this means for you

You may not be receiving active treatment for your eating disorder for any of the following reasons:

- You are waiting for treatment
- You have finished treatment
- Treatment hasn't helped in the past
- You don't want it or aren't ready for treatment

If this is the case, your health care providers should continue to offer you other support that meets your needs and preferences, and connect you with other available resources.

Suggestions on what to discuss with your health care providers to help you receive high-quality care

Ask the care team:	
	How can I identify early signs of eating disorder behaviours or symptoms?
	What treatment options are available to me, and how do I get quick access to treatment?
	How do I make sure I keep up with my treatment?
	How will I know if I need to seek help? When should I go to the hospital?
	What might my recovery look like?
	Is it possible to fully recover from an eating disorder?
	What community supports are available to me and my family and caregivers?
Share with the care team:	
	Who you want to include in decisions about your care (like a family member or caregiver)
	If you notice any changes in your health or changes to your symptoms
	How you are feeling overall, and what it's like for you and your family and caregivers to manage your behaviours or symptoms
	If there are things that make it difficult to continue treatment, such as cost or long waitlists
	If you are feeling overwhelmed and need extra support
	If you are having thoughts of hurting yourself or others
	The type of information and support you want from your health care team
	Your experience with any previous eating disorder treatment
	If you don't understand why you are receiving a certain treatment or how it will help
	What gives you hope or brings you joy
	Any questions or concerns you have about your condition or treatment



The <u>National Eating Disorder Information Centre</u> (NEDIC) provides information, resources, referrals, and support to people living with an eating disorder, as well as parents, caregivers, friends, educators, and health care professionals. Offerings include:

- A toll-free helpline (1-866-633-4220) and live chat offering support, answers, and assistance in finding eating disorder treatment
- An interactive <u>Find a Provider</u> tool to help people find eating disorder treatment based on their postal code, virtual or in-person care preference, and insurance coverage
- A directory of <u>eating disorder community groups</u> by province and an overview of their services
- Resources, tips, tools, and general information for <u>individuals</u>, <u>children</u>, <u>youth</u>, and <u>adults</u> with an eating disorder, and their <u>caregivers</u>
- <u>Self-Advocacy: Taking Action to Meet Your Needs</u> is a resource from NEDIC that addresses additional issues that individuals with an eating disorder may experience during their recovery journey if they identify as two-spirit, lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, and additional sexual orientations and gender identities (2SLGBTQIA+)

The <u>National Initiative for Eating Disorders</u> (NIED) supports people by providing educational, informational, and other recovery-oriented resources related to the prevention and treatment of eating disorders and related mental illnesses in Canada. Their <u>Eating Disorders Safety</u>, <u>Crisis Readiness and Other Essential Information for Caregivers</u> is a helpful tool for caregivers.

<u>First 30 Days - Families Empowered and Supporting Treatment for Eating Disorders</u> (<u>F.E.A.S.T.</u>) is a free education program that aims to help parents be informed and empowered caregivers. (Available in 12 languages.)

<u>Canped.ca's Understanding Eating Disorders in Adolescents</u> is a free online education tool for parents and caregivers. It includes six modules containing education videos.

<u>Youth Wellness Hubs</u> are "one-stop-shops" offering mental health, substance use, primary care, vocational, housing, and other support services to young people aged 12 to 25 in a youth-friendly space. (Available in English and French.)

Need more information?

If you have any questions or feedback about this guide, please contact us at QualityStandards@OntarioHealth.ca or 1-877-280-8538 (TTY: 1-800-855-0511).

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