



# Champion COMMUNITY Page

## Pulling self esteem, health back from brink

By IRENE GENTLE

The Champion

In the age of the super-slim supermodel, only the fear of fat is getting bigger. Ever since Twiggy burst onto the scene in a blaze of bone and sinew in the 1960s, fat phobia has taken on a life of its own.

Today, about 70 per cent of women at any given moment are on a diet. About 40 per cent are on a roller coaster of yo-yo dieting, while about 15 per cent show many signs of an eating disorder, according to The National Eating Disorder Information Centre (NEDIC).

Although only about five per cent of the population are in the throes of a full-blown food disorder, the sufferers are getting younger.

Nowadays, girls entering kindergarten are learning to just say no to excess flab.

"Kids as young as five or six are developing negative connotations around the word 'fat,'" said Colleen Sigmundson, a public health nurse at the Halton Region Health Department (HRHD). "Beginning as early as age nine, they might begin dieting."

By the time they reach age 18, about 80 per cent of females have dieted, with a startling 90 per cent expressing unhappiness about their bodies.

Media pressure, combined with confusing parental messages, are two villains of the piece, said Ms Sigmundson.

"We see a lot of double messages," she said. "Adults will be preoccupied with their own weight and shape but they'll say that every shape and size is beautiful."

When it comes to role modeling, though, kids mimic what they see, not what they hear.

"If you have a mother who is smoking to control her weight, kids will pick up on that pretty quickly," said Ms Sigmundson.

While cutting calories to cut out flab isn't always a direct route to a food fixation, it could be the start of a slippery slope that can lead to anorexia or bulimia.

Anorexia, or drastic dieting, is often accompanied by food rituals and restrictions. It is characterized by extreme weight loss.

Anorexia usually hits fairly young, often in the teen years.

Bulimia features out of control binge eating followed by purging, either through vomiting, laxatives or over-exercise.

Bulimics tend to be slightly older than anorexics and of a more normal weight.

Either disorder can lead to troubles such as heart palpitations, dizziness, nausea, hair and tooth loss, infertility, depression, anxiety, infertility and osteoporosis.

"Not everyone that diets develops an eating disorder but everyone with an eating disorder started by dieting," said Ms Sigmundson. "We reinforce that diets don't work."

Standing on the front line of the problem is Halton psychiatrist Jane Gilbert.

For 18 months, Dr. Gilbert has been doing hand-to-hand combat with the eating disorders of almost 200

patients in her out-patient clinic, located at 345 Lakeshore Road East in Oakville.

The clinic is up and running courtesy of a two-year funding deal through the Oakville-Trafalgar Memorial Hospital Charitable Corporation.

Now, with just five months of funding left, the situation, as they say, is critical.

"We've really proven that the need has outstripped what we can do," said Ms Gilbert, who has been running the clinic on the shoe-string budget of just \$17,500 per year.

That pays for a nutritionist and various support groups, as well as one-on-one counselling with Dr. Gilbert herself.

With society imposing such impossible standards for women, self-esteem building and healthy food attitudes should start almost in the crib, said Dr. Gilbert.

Hiking self-esteem can begin by praising more than just the looks of even the youngest girls.

"If you're always telling girls that they're cute and pretty, a lot of other qualities get lost," she said. "You're fighting a lot of media pressure that really enforces the idea that you're a good person if you're good looking."

Whenever possible, parents should avoid using food as a reward or turning meals into a battleground, said Dr. Gilbert.

"Any kind of association with food and performance is not good," she said. "We see a lot of people who think that if you're good, you can eat. Then they'll deprive themselves if they've done badly on a test."

Replacing meal time wars with patience and a daily vitamin is another good way to build healthy attitudes around food.

"Picky eaters aren't starving. If you make a big deal, there could be a lot of problems down the road," said Dr. Gilbert.

Letting kids follow their own natural hunger cues as often as possible is also a good idea.

"Biologically we eat when we're hungry and stop when we're full. If you manipulate that, you get into trouble," she said.

At the clinic, Dr. Gilbert spends much of her time coaxing back hunger cues that have been engulfed for years in eating disorders.

In the clinic's short life, four patients, or two per cent of the total, were male.



Patient ages ranged from 14 to a woman in her 60s, who had battled her disorder for 40 years before getting help.

Many of the patients had dual disorders, with about 50 per cent also being diagnosed with depression. Twelve per cent also had a substance abuse problem.

For more information, call the NEDIC at 416-340-4156, Sheena's Place at 416-927-8900, or the HRHD at 905-6060. Referrals to Dr. Gilbert's clinic at 905-337-2190 must come from a family doctor.

Psychiatrist Jane Gilbert has been running her eating disorder clinic on a shoe-string budget. She says the need exceeds her current resources.

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