



RAINBOW PLATE PROJECT

**A PROGRAM FOR THE PREVENTION OF DISORDERED
EATING IN LGBTQ+ COLLEGE STUDENTS**

TABLE OF CONTENTS

PROGRAM OVERVIEW	4
PROGRAM DESCRIPTION	4
MISSION STATEMENT	5
VISION STATEMENT	5
GOALS & OBJECTIVES	6
LOGIC MODEL	7
NEEDS ASSESSMENT	9
TARGET POPULATION	9
RISK FACTORS & SOCIAL CLIMATE	11
RESOURCES & DATA	12
PROGRAM THEORY	14
INTERVENTION	17
SESSION 1 OUTLINE	17
SESSION 1 CURRICULUM	18
SESSION 3 OUTLINE	25
SESSION 3 CURRICULUM	26
SESSION 5 OUTLINE	33
SESSION 5 CURRICULUM	34
IMPLEMENTATION PLAN	43
EVALUATION PLAN	45
FORMATIVE EVALUATION	46
PROCESS EVALUATION	46

SUMMATIVE EVALUATION	47
EVALUATION SUMMARY DIAGRAM	48
PROGRAM BUDGET	49
BUDGET JUSTIFICATION	51
RESOURCES	57
REFERENCES	58

PROGRAM OVERVIEW

PROGRAM DESCRIPTION

The purpose of the Rainbow Plate Project is to promote healthy living in LGBTQ students at the University of Georgia through the prevention of eating disorders, which can cause significant physical and mental health consequences. The program will equip LGBTQ students with the knowledge and skills needed to develop positive relationships with food and body image while addressing maladaptive methods of weight and shape control and the thoughts that motivate disordered eating behaviors. In addition to providing information, the program will use a cognitive dissonance-based intervention model to target psychosocial factors, such as thin-ideal internalization and negative affect, that increase eating disorder risk. Research from previous eating disorder prevention programs has shown that dissonance-based interventions are effective in reducing body dissatisfaction, negative affect, dieting, and eating disorder symptoms in both short-term and long-term follow-ups after the program. An essential element of the Rainbow Plate Project is the inclusive, identity-affirming environment. Because topics such as body image can be particularly sensitive for individuals with sexual and gender minority identities, it is important that the students feel supported and understood by the personnel. The program will be facilitated by LGBT Resource Center staff and student ambassadors, who are LGBTQ students themselves. Peer-led eating disorder prevention programs have been shown to produce similar results to prevention programs led by clinicians.

The Rainbow Plate Project will recruit LGBTQ student participants through the LGBT Resource Center's email lists and social media. Interested students will complete an eligibility questionnaire to ensure that they are enrolled as a student at the University of Georgia and identify as lesbian, gay, bisexual, transgender, or queer. Once 35 students have been recruited for the program, each participant will complete a self-report survey including questions to measure the beliefs, knowledge, and behaviors related to disordered eating as well as items to assess psychosocial factors such as self-compassion and sense of belonging. The six sessions of the program will take place on campus at the University of Georgia in Athens, Georgia. The sessions will be divided into three modules. The first module will cover information on healthy eating. The second module will focus on body image, and the third will target emotional regulation. Attendance and participation in these sessions will be highly encouraged. After the conclusion of the six program sessions, participants will be given a posttest survey with the same questions as the pretest survey to measure changes in beliefs, knowledge, attitudes, and behaviors. This will indicate how effective the program was in accomplishing its goals and provide insight into areas for improvement.

MISSION STATEMENT

The mission of this program is to promote the physical and mental wellbeing of LGBTQ students at the University of Georgia by preventing eating disorders and associated issues with food, weight control, and body image. This program will provide sessions to increase students' understanding of eating disorders and allow them to identify disordered behaviors and patterns of thought related to food and body image. Students will participate in dissonance-based interventions to challenge negative self-talk, thin-ideal internalization, and body dissatisfaction. Students will gain an understanding of healthy strategies for emotional regulation and intuitive eating. The overall goal is to reduce eating disorder risk factors and reduce the prevalence of disordered eating in the population.

This program will benefit the individuals involved in the program, but it will also have impacts on the broader LGBTQ community at the University of Georgia. The program will increase awareness of eating disorders in sexual and gender minority populations. Additionally, students involved in the program can contribute to a culture of body acceptance within the community.

VISION STATEMENT

The program envisions an eating disorder-free campus community for LGBTQ students. In five years, this program will be integrated with the LGBT Resource Center at the University of Georgia. The program will be administered once per year in the spring by LGBT Resource Center Ambassadors, staff, and volunteers. Participants in the program will be given the opportunity to volunteer with future programs or apply to be an ambassador to have a greater role in program administration. LGBT Resource Center Ambassadors will receive experiential learning credit with the university for their involvement. In the fall of each year, new ambassadors will receive training from LGBT Resource Center staff and returning ambassadors. The program training will include a training guide and resource manual for staff and ambassadors. There will be a facilitation guide for the program that includes detailed directions for each step of the program including recruitment, communication, administration of program curriculum, and follow-up with participants. The program workbook for participants will be updated annually with new resources for LGBTQ students. Slideshow presentations for each of the six sessions will be included in a library of resources to be used yearly, and these will undergo review for updates before being presented. These resources, including training and facilitation guides, program workbooks, and slides, will be shared with LGBT student centers at other universities so that they may also implement this program.

GOALS AND OBJECTIVES

The overall goal of the Rainbow Plate Project to prevent eating disorders in LGBTQ students at the University of Georgia.

Goal 1: To improve emotional regulation strategies in LGBTQ students.

Objective 1A: By the end of the second session, students will be able to name 5 healthy ways to manage stress in their own life.

Objective 1B: By the end of the program, self-reported measures of self-compassion will increase from pretest to posttest in the program participant population.

Goal 2: To reduce thin-ideal internalization and body dissatisfaction among LGBTQ students.

Objective 2A: By the end of the third session, students will be able to define the thin-ideal and explain the costs of pursuing an idealized body.

Objective 2B: By the end of the fourth session, students will know how to challenge body image concerns and negative self-talk in role-playing practice scenarios.

Goal 3: To increase knowledge of eating disorders and disordered eating in LGBTQ students.

Objective 3A: By the end of the fifth session, students will know what eating disorders are and whom they affect. Students will learn the difference between eating disorders and disordered eating. Knowledge of eating disorders will be measured in pretest and posttest surveys.

Goal 4: To increase knowledge of nutrition and healthy eating in LGBTQ students.

Objective 4A: By the end of the sixth session, students will know the components of a balanced diet and be able to name the basic functions of each macronutrient.

Objective 4B: By the end of the sixth session, students will know how to plan a nutritionally balanced meal that includes foods they enjoy. Students will demonstrate this skill with an in-session activity.

LOGIC MODEL

The purpose of the program is to reduce disordered eating in LGBTQ students at the University of Georgia. Within this target population, the program aims to (1) increase knowledge of eating disorders and disordered eating, (2) to increase knowledge of nutrition and healthy eating, (3) to reduce thin-ideal internalization and body dissatisfaction, and (4) improve emotional regulation strategies. The logic model below illustrates the relationships between inputs, outputs, and outcomes of the program.

Figure 1. Program Logic Model

INPUTS	OUTPUTS	OUTCOMES
<p>Partners LGBT Resource Center at UGA</p> <p>Personnel Program Director LGBT RC Staff LGBT RC Ambassadors Volunteers Dietitian Data Analyst</p> <p>Space UGA Classroom in MLC Memorial Hall Ballroom</p> <p>Equipment Dell XPS 13 Laptop Projector Printer</p> <p>Session Materials Printer paper Poster paper Ink</p>	<p>Activities Developing LGBTQ-inclusive educational curricula on eating disorders, nutrition, body image, and emotional regulation. Developing a directory of online and local LGBTQ-friendly health and wellness resources. Recruiting LGBTQ college students through email lists. Training of LGBT Resource Center Ambassadors, volunteers, and staff on program implementation. Implementing six interactive educational sessions in three modules: eating, body image, and emotional wellness.</p> <p>Participants 35 LGBTQ Students</p>	<p>Short-term Increased knowledge of eating disorders, nutrition, body image, and emotional regulation in program participants. Increased awareness of thoughts that motivate disordered eating in program participants. Increased self-efficacy for using healthy emotional regulation strategies in program participants. Increased knowledge of LGBTQ resources in program participants. Increased awareness of eating disorder risk in LGBTQ populations at the campus level. Increased knowledge of program curriculum and program implementation in LGBT Resource Center Ambassadors, volunteers, and staff.</p> <p>Mid-term Increased levels of body acceptance in program participants. Decreased prevalence of maladaptive weight and shape control methods in program participants.</p>

RAINBOW PLATE PROJECT

<p>Half-inch binders Three-hole punch Pens Markers Magazines Scissors Painter's tape Name tag holders Utility cart</p> <p>Incentives Amazon gift cards Lunch for trainings</p> <p>Program Funds \$50,000</p>	<p>Direct Products Promotional flyers, social media posts, and emails for recruitment</p> <p>Pretest and Posttest survey</p> <p>Educational curriculum for each of six sessions.</p> <p>Workbook for in-session activities including session summaries, optional reflection prompts, and directory of additional LGBT-friendly health and wellness resources online and in the Athens area.</p>	<p>Increased use of healthy stress management strategies in program participants.</p> <p>Increased levels of self-compassion in program participants.</p> <p>Long-term Improved physical and mental health of program participants.</p> <p>Reduced prevalence of disordered eating in LGBTQ students at UGA.</p> <p>Long-term integration of eating disorder prevention programming at the LGBT RC.</p>
<p>ASSUMPTIONS: The LGBT Resource Center, its staff, volunteers, and ambassadors are prepared to invest time and resources into the program. Participants are willing to attend and participate in the program sessions and complete surveys.</p>		<p>EXTERNAL FACTORS: University of Georgia policies for program recruitment and implementation, meeting limitations imposed by the ongoing pandemic.</p>

NEEDS ASSESSMENT

TARGET POPULATION

The program targets lesbian, gay, bisexual, transgender, and queer (LGBTQ) students between the ages of 18 and 24 at the University of Georgia in Athens, Georgia. Based on demographic data of the student population in previous years, it is estimated that 12% of University of Georgia students hold a sexual minority identity, and 2% identify as transgender or genderqueer (Rankin & Associates Consulting, 2016). In total, there are approximately 5,500 LGBTQ students at the University of Georgia today. This population is diverse, representing a myriad of backgrounds, racial and ethnic identities, and socioeconomic statuses. As a whole, the LGBTQ community faces a unique set of issues on both systemic and individual levels. Mental health disparities persist, as LGBTQ individuals are more than 2.5 times more likely to experience depression, anxiety, and substance abuse than their non-LGBTQ peers (Kates et al., 2018).

The LGBTQ population experiences disordered eating symptomology at a higher rate than heterosexual, cisgender populations (Nagata et al., 2020). Eating disorders are a significant issue, affecting 1 in 9 Americans in their lifetime and an even greater proportion of individuals who experience subclinical disordered eating (Galmiche et al., 2019). In LGBTQ populations, eating disorders may be as common as 1 in 4 (Nagata et al., 2020).

Key areas for intervention have been identified to promote the health of LGBTQ students at the University of Georgia. This program takes a preventative approach to eating disorders for several reasons. First, an educational and behavioral intervention can benefit any individual within the community, not just those with clinical diagnoses for eating disorders.

Maladaptive weight-control behaviors are most common among adolescents and young adults in the LGBTQ community (Bell et al., 2019). These behaviors include purging, use of diet pills, obsessive exercise, and skipping meals, which were found in high rates among gay and bisexual college men. Participants in the study reported a strong belief that engaging in these disordered eating behaviors would relieve stress (Bell et al., 2019). This finding highlights a need for the intervention program to address outcome expectancy and to educate the population on healthy practices for emotional regulation.

Second, preventive programs can reduce the need for medical treatment later. This is especially important for the target population of LGBTQ young adults because a high proportion of the population reports being unable to access or afford necessary mental health care (The Trevor Project, 2020). According to a survey of over 400,000 LGBTQ adolescents and young adults, affordability is the biggest barrier that LGBTQ young adults face to receiving care (The Trevor Project, 2020).

Another significant barrier to treatment is the fear of medical professionals being unprepared to provide care that is sensitive to the experiences and identities of LGBTQ individuals. In a descriptive study on transgender and gender-nonconforming adults in treatment for eating disorders, 40% of participants reported hiding their gender identity to healthcare providers; 10% said that their disclosure of gender identity was ignored, and an additional 11% said that after disclosing their gender identity, they were still misgendered (Duffy et al., 2016). Another study found that half of all transgender youth and young adults have forgone necessary care because of concerns for the LGBTQ competence of their providers (The Trevor Project, 2020).

These concerns highlight the need for an identity-affirming program environment and LGBTQ-competent personnel. Identity-affirmation includes the acceptance and respect of a person's self-identified sexual orientation and gender by using their preferred pronouns, not attempting to change their identity, and asking questions for further understanding rather than making assumptions (Duffy et al., 2016; The Trevor Project, 2020). Evidence suggests that identity-affirming spaces can significantly reduce negative mental health outcomes including anxiety, depression, and suicide attempts for transgender and gender-nonconforming individuals (The Trevor Project, 2020). It is important to address these negative mental health outcomes, as they contribute to greater risk of disordered eating (Calzo et al., 2017).

If these needs are not addressed, disordered eating symptoms will continue negatively impacting the physical and mental health of LGBTQ students at the University of Georgia. Eating disorders and disordered eating behaviors can be damaging to health, as undernutrition associated with restrictive eating can result in several consequences to one's physical health, including muscular atrophy, loss of bone density, anemia, and death by starvation (National Eating Disorder Association, 2018). However, one of the most detrimental effects may be the mental health consequences of eating disorders, including increases in depression, anxiety, and suicide. One in 4 people with an eating disorder attempts suicide, but this number is likely higher for sexual or gender minority individuals with eating disorders (Chesney et al., 2014). In the past year alone, 1 in 3 LGBTQ adults have seriously considered suicide, and 1 in 10 have attempted suicide (The Trevor Project, 2020). In the context of our target population, this would equate to about 1,870 LGBTQ students at the University of Georgia considering suicide, and 550 making an attempt (Rankin & Associates Consulting, 2016; The Trevor Project, 2020).

RISK FACTORS AND SOCIAL CLIMATE

Eating disorder risk factors include a history of anxiety disorders or depressive symptoms, low self-esteem, body dissatisfaction, cultural thin idealization, and social rejection (*American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*, 2013; Davis-Waddle, 2019). These risk factors may be especially prevalent in LGBTQ+ populations, as the population is at increased risk of discrimination, peer victimization, violence, and internalized negative beliefs about oneself due to stigma around sexual orientation or gender identity (National Eating Disorders Association, 2018). In a national survey of LGBTQ youth and young adults, 1 in 3 participants reported being physically threatened or harmed because of their sexual orientation or gender identity (The Trevor Project, 2020).

Additionally, body image ideals within the culture of LGBTQ+ communities are difficult to achieve and may contribute to body dissatisfaction within members of the community (National Eating Disorders Association, 2018). Body dissatisfaction is especially prevalent among transgender and gender-nonconforming individuals when physical body appearance and gender identity are not aligned (Duffy et al., 2016). Self-compassion and social support, including family acceptance, have been identified as protective factors in reducing body dissatisfaction and eating disorder risk, but many people with minority sexuality or gender identities lack these social support systems and even experience rejection from their friends and family (Davis-Waddle, 2019; Ryan et al., 2010).

At the University of Georgia, many LGBTQ students experience stigma around their sexual orientation or gender identity. A 2016 campus climate survey revealed trends of discrimination and social rejection of LGBTQ students. Sixteen percent of all respondents to the campus climate survey reported experiencing “exclusionary, intimidating, offensive, and/or hostile conduct,” and many LGBTQ student respondents reported on-campus experiences of homophobia and transphobia. These students described experiences in which others called them homophobic slurs, took pictures of them without consent, and generally created an environment that is unwelcoming to the LGBTQ community (Rankin & Associates Consulting, 2016).

Experiences of stigmatization and discrimination have been shown to increase the risk of depression, anxiety, and negative affect in LGBT populations. These negative mental health factors can contribute to a greater risk of disordered eating (Calzo et al., 2017). Moreover, research has also identified direct associations between discrimination, internalized stigma, and disordered eating in sexual minority populations (Watson et al., 2016).

RESOURCES

To address the complex needs of LGBTQ students at the University of Georgia, this program will require support from both campus and community partnerships. The primary partnership is with the LGBT Resource Center at UGA. It has an established student base of LGBT students, means of reaching the population through email lists and social media, and an inclusive, identity-affirming environment for the implementation of the program. The Resource Center is located on campus in Memorial Hall, where there are open spaces and offices available for programming.

The LGBT Resource Center has four full-time staff members employed by the university as well as a student ambassador program and volunteer network. The Resource Center Ambassadors Program gives LGBTQ students opportunities for leadership and community involvement, and the volunteer network ensures that events and programs are adequately staffed. The staff and volunteers have previously worked with developing and implementing large-scale programs, so they will be a valuable resource to the program.

The LGBT Resource Center also houses several student groups, including PRISM, a group for LGBTQ students of color; Queeries, a group intended to increase dialogue about the LGBTQ community on campus; Women Loving Women, a support group for lesbian and bisexual students; and a Trans and Gender Nonconforming Support Group. These organizations provide outlets for outreach to specific subsets of the LGBTQ population at UGA and the wider campus community. These organizations and resources are furnished by the University of Georgia.

GATHERING DATA & ASSESSMENTS

The 2016 Campus Climate Survey provided relevant information on the demographic makeup of the university's student body and the social conditions affecting LGBTQ students.

More recently, an interview with Riley Kirkpatrick, founder of the Athens Queer Collective, was published by Grady News Source. Kirkpatrick is an influential person in the Athens LGBTQ community, as the Athens Queer Collective provides education, support groups, and outreach to local businesses and nonprofits to share information and spread stories of LGBTQ people. In this interview, Kirkpatrick discussed some of the difficulties of being transgender and stressed the importance of mental health for all LGBTQ individuals (Grady News Source, 2020).

On a wider scale, the Trevor Project National Survey provided a wealth of information based on its study sample of 40,000 LGBTQ individuals. The survey included items on mental

health, discrimination, violence, housing instability, and other conditions affecting LGBTQ youth and young adults. This information provides great insight into the life and health of the population without being limited by a small sample or geographic constraints.

FURTHER DATA & ASSESSMENTS

Planning and implementation of the program would be better informed if more data were available. The following table highlights current gaps in information.

Figure 2. Further data needed.

SOURCE OF INFORMATION	INFORMATION NEEDED	HOW IT WILL BE HELPFUL
Focus group of LGBTQ students at UGA	<ul style="list-style-type: none"> • Attitudes towards disordered eating • Which disordered eating behaviors are most common • Reasons why students engage in these behaviors • Information on beliefs, self-efficacy, self-esteem, self-compassion 	This information will provide a baseline to measure progress in the program.
Updated Campus Climate Survey	<ul style="list-style-type: none"> • Number of students who identify as LGBTQ • How the culture and climate of UGA affect their health and wellbeing • Prevalence of eating disorders and mental illnesses in the UGA student population 	More recent, accurate data will help to inform the need for this program and others and may promote changes to campus policies as well.

PROGRAM THEORY

The theory behind this program integrates the Information-Motivation-Behavioral Skills Model with the Theory of Planned Behavior. The Information-Motivation-Behavioral Skills Model is a theoretical model designed for prevention programming. It asserts that information, motivation, and behavioral skills contribute to changes in behavior (Fisher et al., 2003). Constructs of information and behavioral skills will be used in this program in conjunction with the Theory of Planned Behavior. The Theory of Planned Behavior is a value-expectancy theory, designed to explain the relationship between a person's attitudes, beliefs, and behaviors, and it addresses the various factors that may influence a person's ability to change behavior. These factors include attitudes towards a behavior, subjective norms, perceived behavioral control, and intention (Ajzen, 2006). The constructs of information, behavioral skills, beliefs, attitudes towards behavior, subjective norms, perceived behavioral control, and intention are defined below.

Information

According to the Information-Motivation-Behavioral Skills Model, information is a key determinant of behavior because it empowers individuals to make knowledgeable decisions for their health behaviors (Fisher et al., 2003). In the proposed integrated model, information plays a more complex role, informing beliefs, attitudes, and perceived behavioral control, but it ultimately produces the same effect of influencing behavior. The curriculum presented in this program will include information on eating disorders, nutrition, body image, and emotional regulation.

Behavioral Skills

In the Information-Motivation-Behavioral Skills Model, behavioral skills are a prerequisite for an individual to effectively perform a behavior, or in this case, avoid performing a behavior (Fisher et al., 2003). In the context of this program, behavioral skills may include a participant's ability to plan a balanced meal, challenge body image concerns and negative self-talk, or utilize healthy stress management strategies. In the integrated model used for this program, these behavioral skills will increase an individual's perceived control and reduce their likelihood of engaging in disordered eating behaviors.

Beliefs

In the Theory of Planned Behavior, there are three kinds of beliefs that contribute to a person's behavioral intention. These are behavioral beliefs, normative beliefs, and control beliefs.

Behavioral beliefs are one's expectations of the outcome of a behavior (Ajzen, 2006). Many LGBTQ individuals who engage in disordered eating behaviors report a strong belief that engaging in these disordered eating behaviors will relieve stress (Bell et al., 2019). In the first session, participants will learn about the negative consequences of disordered eating, and this

will help to influence these outcome expectancies and form new behavioral beliefs in the participant population.

Normative beliefs describe what a person believes that others do or expect (Ajzen, 2006). If an individual believes that their peers engage in weight and shape control behaviors in response to body dissatisfaction, the individual may believe that these behaviors are normal (Jurkovic, 2014). In the first two sessions, participants will learn to refute eating disorder myths, including the belief that disordered eating behaviors, such as skipping meals to lose weight, are normal.

Control beliefs describe an individual's perception of factors that may promote or inhibit the performance of a behavior (Ajzen, 2006). In the context of this program, an individual may believe that feelings of stress or body dissatisfaction contribute to their performance of disordered eating behaviors. These beliefs will be challenged in the fifth and sixth sessions, where participants will learn about emotional regulation strategies and develop skills to resist urges to perform maladaptive coping behaviors regardless of their emotional state.

Attitude Towards Behavior

According to the Theory of Planned Behavior, attitude towards behavior is influenced by one's beliefs and contributes to one's intention, the ultimate predictor of behavior (Ajzen, 2006). Attitudes are a person's positive or negative regard for a behavior, and a favorable attitude towards a behavior will contribute to a greater intention of performing the behavior (Ajzen, 2006). Throughout the six educational sessions, participants will learn to recognize the cycle of negative thoughts and actions that contributes to disordered eating. This knowledge, combined with changed outcome expectancies, can contribute to participants' holding negative attitudes towards disordered eating behaviors.

Subjective Norms

In the Theory of Planned Behavior, subjective norms follow normative beliefs and precede behavioral intention. Subjective norms are what an individual perceives to be the expectations and attitudes of a group regarding a behavior (Ajzen, 2006). In the context of this program, participants may have prior notions of social norms in weight and shape control behaviors in the LGBTQ community, believing that disordered eating behaviors are accepted or expected in the community. To shape these subjective norms, the program participants must receive information on eating disorders and be able to identify maladaptive behaviors. The group setting of 35 LGBTQ participants will also be significant in shaping subjective norms because the cohort of group participants will gain a new understanding of eating and coping norms that can be reinforced by peer participants.

Perceived Behavioral Control

Perceived behavioral control describes how much control an individual believes to have over their behaviors (Ajzen, 2006). Throughout the six sessions of this program, participants will gain information about disordered eating behaviors, healthy eating, and emotional regulation. The

information and behavioral skills developed in these sessions will contribute to participants having greater perceived control over their eating and coping behaviors.

Intention

In the Theory of Planned Behavior, intention is the greatest predictor of behavior. Intention is what an individual plans to do, and it is influenced by attitudes, subjective norms, and perceived behavioral control (Ajzen, 2006). Through the changes made to beliefs, attitudes, subjective norms, and perceived behavioral control in this program, participants will have fewer intentions of performing disordered eating behaviors, and as a result, the prevalence of those behaviors will be reduced.

Figure 3. A visual model of the integrated Theory of Planned Behavior and Information-Motivation-Behavioral Skills Model.

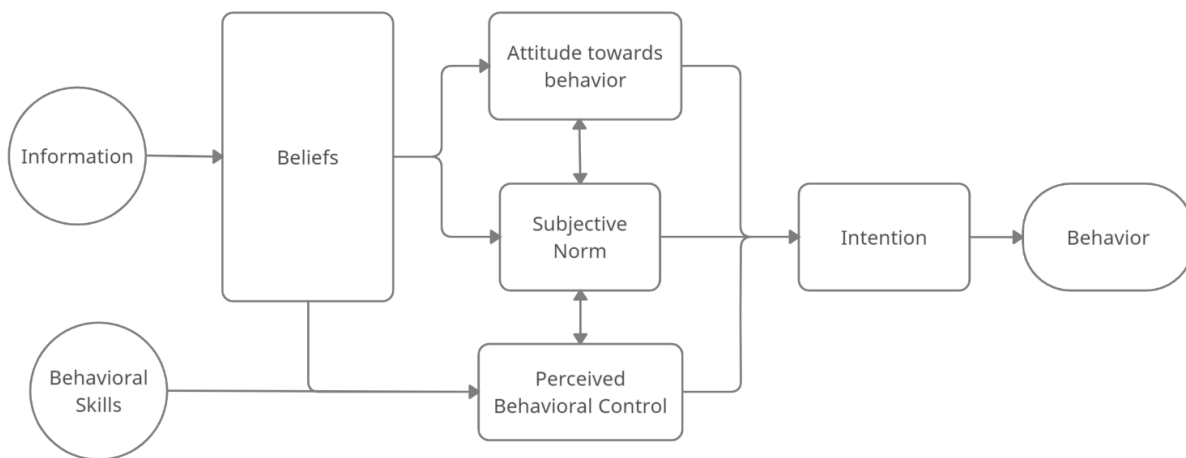
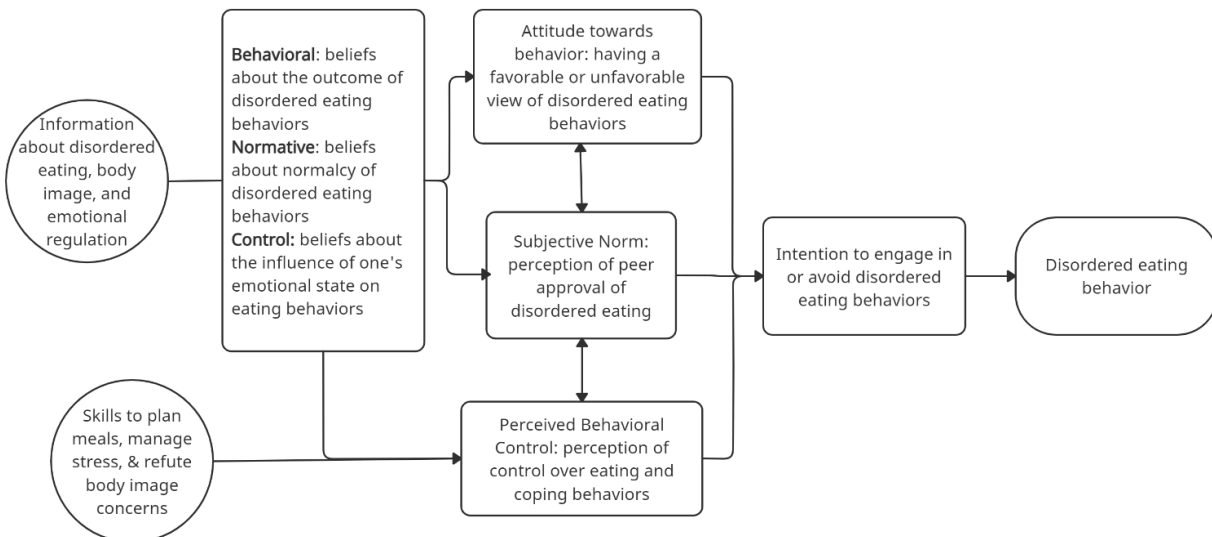


Figure 4. A demonstration of the integrated theories applied to this program.



INTERVENTION

SESSION 1: IDENTITY

Module 1: Emotional Wellness

Date: Tuesday, February 1st, 2022

Location: Miller Learning Center, Room 213

Materials: name tags, markers, participant workbooks, pens, laptop, attendance spreadsheet, poster paper, painter's tape

Goals: The goals of this session are (1) to establish a safe group environment for the program and (2) to teach participants about identity in the context of emotional wellness.

Objectives:

- Introductions
- Establish rules and expectations of the program
- Explore concepts of identity (information)
- Increase awareness of diverse identities represented in the group (subjective norms)
- Increase self-awareness of intersectional identities (information, behavioral skills)

Sequence:

- Welcome (10 minutes)
 - Welcome participants
 - Take attendance as they arrive
 - Have participants make nametags
- Introductions (10 minutes)
 - Introduce LGBT Resource Staff and Ambassadors
 - Participant introductions
- Ice Breaker (5 minutes)
 - Game of stand-up/sit-down
- Program expectations (10 minutes)
 - Explain program meeting schedule
 - Group rules and expectations
- Identity presentation (15 minutes)
- Identity walk activity (45 minutes)
- Debrief/reflection questions (20 minutes)
- Conclusion (5 minutes)

SESSION 1: IDENTITY

DATE TUESDAY, FEB 1

MODULE 1: EMOTIONAL WELLNESS

LOCATION MLC ROOM 213

FACILITATION GUIDE

GOALS & OBJECTIVES

The goals of this session are (1) to **establish a safe group environment** for the program and (2) to **teach participants about identity** in the context of emotional wellness.

- Introductions
- Establish rules and expectations
- Explore concepts of identity
- Increase awareness of diverse identities represented in the group
- Increase self-awareness of intersectional identities

MATERIALS

- Nametags
- Participant workbooks
- Pens, markers
- Laptop
- Attendance spreadsheet
- 8 printed poster sheets
- Painter's tape

NOTE TO FACILITATORS

- This session occurs first in the program because it helps to establish a safe environment for participants to be vulnerable and connect with each other. The Identity Walk activity will allow participants to understand the similarities, differences, and shared experiences they have with the rest of the group. This rapport and trust will be helpful for the formation of new beliefs, attitudes, and subjective norms as the program progresses.
- Remember who is in the room. This program works with LGBTQ students. We want to be respectful of their identities and experiences, especially in conversations in this session. If you are unsure of how to handle a situation, ask LGBT RC staff.

TIME

ACTIVITY BREAKDOWN

NOTES

4:30—5:00pm

Setting Up: LGBT Resource Center Staff and Ambassadors arrive at 5:30 to prepare for the session.

- Staff members will bring all necessary materials to the classroom and connect one laptop to the projector for presenting the video.
- Ambassadors will place one program workbook, pen, nametag, and nametag holder at each of 35 seats and display markers on the first table for participants to choose from.
- Ambassadors will hang the eight printed sheets of poster paper for the Identity activity along the walls around the room using painter's tape.

Before participants arrive, review the Session 1 Supplement for details about personal gender pronouns and gendered language.

5:00—5:10pm	Welcome participants. <ul style="list-style-type: none"> Take attendance as they arrive. Direct participants to customize their nametags with the markers 	
5:10—5:20pm	When most participants have arrived: <ul style="list-style-type: none"> Introduce LGBT Resource Center Staff with “About Me” slides and introduce ambassadors with names, pronouns, and roles in the program. Have participants introduce themselves with their name, pronouns, and year in school. 	
5:20—5:25pm	Ice Breaker: A game of Stand-up, Sit-down. Read the rules aloud: <ul style="list-style-type: none"> “The rules of Stand-up, Sit-down are simple. I will read a statement and if it applies to you, stand up. If it does not apply, stay seated. You can sit down between statements. Feel free to look around and see who is standing and who is sitting.” The presenter will read one statement, giving participants time to stand up or sit down before moving on to the next. Statements: <ul style="list-style-type: none"> I am an in-state student. I am an out-of-state student. I prefer cats to dogs. I have a job. I have attended all of my classes this week. I went to bed before 11pm last night. I prefer sweatpants to jeans. I am an only child. I sleep with more than 2 pillows on my bed. 	The purpose of this activity is to engage the participants. Be enthusiastic and have fun with it. Statements for this icebreaker can be customized! These serve as a guide and starting point.
5:25—5:35pm	Program Expectations Explain the program meeting schedule. <ul style="list-style-type: none"> Sessions are weekly on Tuesdays from 5:00pm to 7:00pm. During sessions, there may be activities to complete in the session workbook. There is space to take notes, but notes are not required. There will be a short homework assignment after each session. We strongly recommend that participants attend every session and complete all activities and homework. Emphasize that participants will get out of the program what they are willing to put in. Outline expectations for the group (following along with the slides): <ul style="list-style-type: none"> Expectation 1: Keep an open mind and approach all activities with a mindset for growth and understanding. Expectation 2: Vulnerability is valued. This is a space where you can be your most authentic self. Expectation 3: What is said here stays here, and what is learned here 	

	<p>leaves here. The things we share in discussions and activities will be kept confidential, but we can still take away the lessons learned.</p> <ul style="list-style-type: none"> • Expectation 4: Remain engaged. Unless an activity requires technology, all phones and laptops should be silenced and put away. • Ask participants what additional rules and expectations would make them feel most comfortable in the group environment. 	
5:35—5:50pm	<p>Identity Presentation</p> <p>Identity is who we are and what makes us who we are. Our identities can help us to feel connected with others who share the same identity, and they can give us a sense of value (Active Social Care, 2021).</p> <p>There are many categories of identities, and these include your gender, sexual orientation, age, race/ethnicity, culture, politics, role on campus, role in the family, spiritual/religious affiliations, income level, education, and more.</p> <p>Recognizing and accepting the different parts of your identity can contribute to greater self-esteem and confidence. When you understand yourself, you are better able to communicate your wants and needs, connect with others, and experience enjoyment in your life (Knez et al., 2020).</p> <p>Understanding the identities of other people can improve your ability to communicate and interact with them (Knez et al., 2020).</p> <p>We will watch a video explaining how our lived experiences differ based on our identities.</p> <p>Video on Intersectional Identities: https://www.youtube.com/watch?v=w6dnj2lyYjE</p> <p>Questions for discussion:</p> <p>In the video, how were the experiences of individuals affected by their identities?</p> <p>How can understanding your identities influence your emotional wellbeing?</p> <p>How can an understanding of identities influence your relationships with other people?</p>	
5:50—6:35pm	<p>Identity Walk Activity</p> <p>Read aloud the following instructions:</p> <ul style="list-style-type: none"> • The following is a silent activity. Please refrain from commentary, non-verbal communication, or side conversations throughout the activity. This is done to support people when they choose to speak and allow them the space to share openly. • This activity is challenge by choice. This means that your participation is voluntary, and if you feel overly uncomfortable you may step out. While we want you to challenge yourself, we also want to make sure you feel supported and safe. 	<p>This activity was developed by the University of Georgia's Engagement, Leadership and Service office.</p> <p>The posters around the room describe 8</p>

	<ul style="list-style-type: none"> • Be mindful that just because someone may share something in this activity that does not necessarily mean they want to discuss it later. • As the following statements are read, please silently walk to the sign that you feel best represents your experiences. If you don't feel that any of these areas best fits you, you can choose to move to the second or third most fitting. • Once you have moved, observe who is around you and where others are standing. Take it in and think about what it means for you. After observing, if you feel compelled to share a piece of your story and why you chose to stand where you do, we welcome you to share with the group. • Are there any questions before we begin? <p>Identity Walk Prompts</p> <ol style="list-style-type: none"> 1. This is the aspect of my identity I have in <i>common</i> with most of my friends. 2. This is the aspect of my identity that I think about the <i>most</i>. 3. I know the <i>least</i> about this aspect of my identity. 4. This is the aspect of my identity that I am <i>most</i> comfortable discussing. 5. This is the aspect of my identity that I am <i>least</i> comfortable discussing. 6. This is the aspect of my identity I have to <i>defend</i> the most. 7. I have experienced the most <i>pain</i> around this aspect of my identity. 8. I have experienced the most <i>joy</i> around this aspect of my identity. 	<p>different aspects of identity:</p> <p>Gender</p> <p>Sexual Orientation</p> <p>Race</p> <p>Ethnicity</p> <p>Ability/disability</p> <p>Religion/spirituality</p> <p>Role in family</p> <p>Physical appearance</p>
6:35—6:55pm	<p>Debrief & Discuss</p> <p>Debrief Prompts:</p> <ul style="list-style-type: none"> • What was it like to experience this activity? • Did you notice any patterns of movement with you or other people? • What did you learn about yourself and others? • How can you apply what you have learned into your daily life and interactions with others? • How has doing this activity shaped your definitions of diversity and identity? 	<p>These questions are designed to open a discussion. Feel free to use some or all of the questions.</p>
6:55—7:00pm	<p>Conclusion</p> <p>In the last few minutes before the session is over, remind participants:</p> <ul style="list-style-type: none"> • The next session is one week away on Tuesday at 5pm. • The homework assignment is to answer reflection questions about the identity session. • If participants need to stay for a few minutes to talk one-on-one, staff and ambassadors are available. 	
7:00-7:30pm	<p>Cleaning Up:</p> <ul style="list-style-type: none"> • Disconnect the laptop from the projector. • Make sure all markers and pens are returned to their boxes. • Remove the posters from the walls of the room. • Collect remaining supplies to pack in the staff members' utility carts. • Turn off the lights and close the door before leaving. 	

SESSION 1 SUPPLEMENT

PERSONAL GENDER PRONOUNS

The most commonly used pronouns are **she/her/hers**, **he/him/his**, and **they/them/theirs**. Sometimes, a person prefers to use alternative pronouns such as **ze/zir** or a combination of pronouns such as **she/they**. To create a safe, inclusive environment, we want to respect everyone's pronouns and avoid misgendering participants. We will model this behavior by including pronouns in our introductions and providing a space on nametags for participants to specify their preferred pronouns.

HELLO, MY NAME IS

MY PRONOUNS ARE:

Avoiding gendered language: when addressing a group, we often use gendered language such as “you guys” or “ladies and gentlemen.” This language often implies a gender binary and can make people feel excluded.

Try using inclusive terms to address a group.

Instead of:

- Guys
- Girls and boys
- Ladies and gentlemen

Try using:

- Y'all
- Everyone
- Distinguished guests

For more information, check out <https://uwm.edu/lgbtrc/support/gender-pronouns/>

SESSION 1 MATERIALS

These are the 8 posters to be placed around the room for the Identity Walk activity. Staff will have these printed on poster paper prior to session 1.

Gender	Sexual Orientation
Ability/Disability	Race
Ethnicity	Religion/Spirituality
Role in Family	Physical Appearance

PARTICIPANT WORKBOOK

SESSION 1: IDENTITY

DATE TUESDAY, FEB 1

LOCATION MLC ROOM 213

MODULE 1: EMOTIONAL WELLNESS

KEEP IN MIND

You will be responsible for bringing this workbook and your nametag to every session!

SESSION 1 SCHEDULE

5:00—5:10PM Welcome

5:10—5:20PM Introductions

5:20—5:25PM Ice Breaker

5:25—5:35PM Program Expectations

5:35—5:50PM Identity Presentation

5:50—6:35PM Identity Walk Activity

6:35—6:55PM Debrief & Discuss

6:55—7:00PM Conclusion

HOMEWORK

Reflect on your experiences from today's session.

What identities do you hold?

What is something you learned about yourself in the Identity Walk Activity?

What is something you learned about those around you?

NOTES

SESSION 3: BODY IDEAL

Module 2: Body Image

Date: Tuesday, February 15th, 2022

Location: Miller Learning Center Room 213

Materials: name tags, markers, participant workbooks, pens, laptop, attendance spreadsheet, Mentimeter website, fitness and fashion magazines

Goals: The goals of this session are (1) to examine the topic of body idealization and (2) to teach participants how to challenge negative body-related thoughts and comments.

Objectives:

- Examine the definition, origins, and perpetuation of body-idealization (information)
- Discuss body ideals within the LGBTQ community
- Identify costs of pursuing an idealized body (behavioral skills)
- Role-play practice to counter body ideal comments and thoughts (behavioral skills)

Sequence:

- Welcome (10 minutes)
 - Welcome participants
 - Take attendance
- Ice Breaker (10 minutes)
 - Speed-friending
- Review group expectations (5 minutes)
- Magazine activity (15 minutes)
- Body-ideal discussion (35 minutes)
 - Define body ideals
 - Origins and perpetuation
 - Costs of pursuing a body ideal
- Verbal role-play activity (25 minutes)
- Debrief/Discussion (15 minutes)
- Conclusion (5 minutes)

SESSION 3: BODY IDEAL

DATE TUESDAY, FEB 15

LOCATION MLC ROOM 213

MODULE 2: BODY IMAGE

FACILITATION GUIDE

GOALS & OBJECTIVES	MATERIALS
<p>The goals of this session are (1) to examine the topic of body-idealization and (2) to teach participants how to challenge negative body-related thoughts and comments.</p> <ul style="list-style-type: none"> Examine the definition, origins, and perpetuation of body-idealization Discuss body-ideals within the LGBTQ community Identify costs of pursuing an idealized body Role-play practice to counter body ideal comments and thoughts 	<ul style="list-style-type: none"> Nametags Participant workbooks Pens, markers Laptop Attendance spreadsheet Mentimeter website Fashion and fitness magazines

NOTE TO FACILITATORS	<ul style="list-style-type: none"> This session involves activities that should induce cognitive dissonance. Participants will argue against the body ideals, and this will result in reductions in their subscription and pursuit of body idealization. In this session, participants will gain information about body ideals, brainstorm the costs of pursuing idealized bodies, and practice challenging the ideal. The information and behavioral skills gained in this session will contribute to changes in attitudes and beliefs about body image and ultimately disordered eating behaviors. Remember who is in the room. This program works with LGBTQ students. We want to be respectful of their identities and experiences.
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TIME	ACTIVITY BREAKDOWN	NOTES
4:30—5:00pm	<p>Setting Up: LGBT Resource Center Staff and Ambassadors arrive at 5:30 to prepare for the session.</p> <ul style="list-style-type: none"> Staff members will bring all necessary materials to the classroom and connect one laptop to the projector for presenting. Ambassadors will place pens and markers at the front table for participants to use. Extra nametags will be available if participants forgot theirs. Ambassadors will clip or tear out pictures of people from the fashion and fitness magazines so that there are about three pictures for every participant to look at. Keep these aside until the body ideal discussion. 	

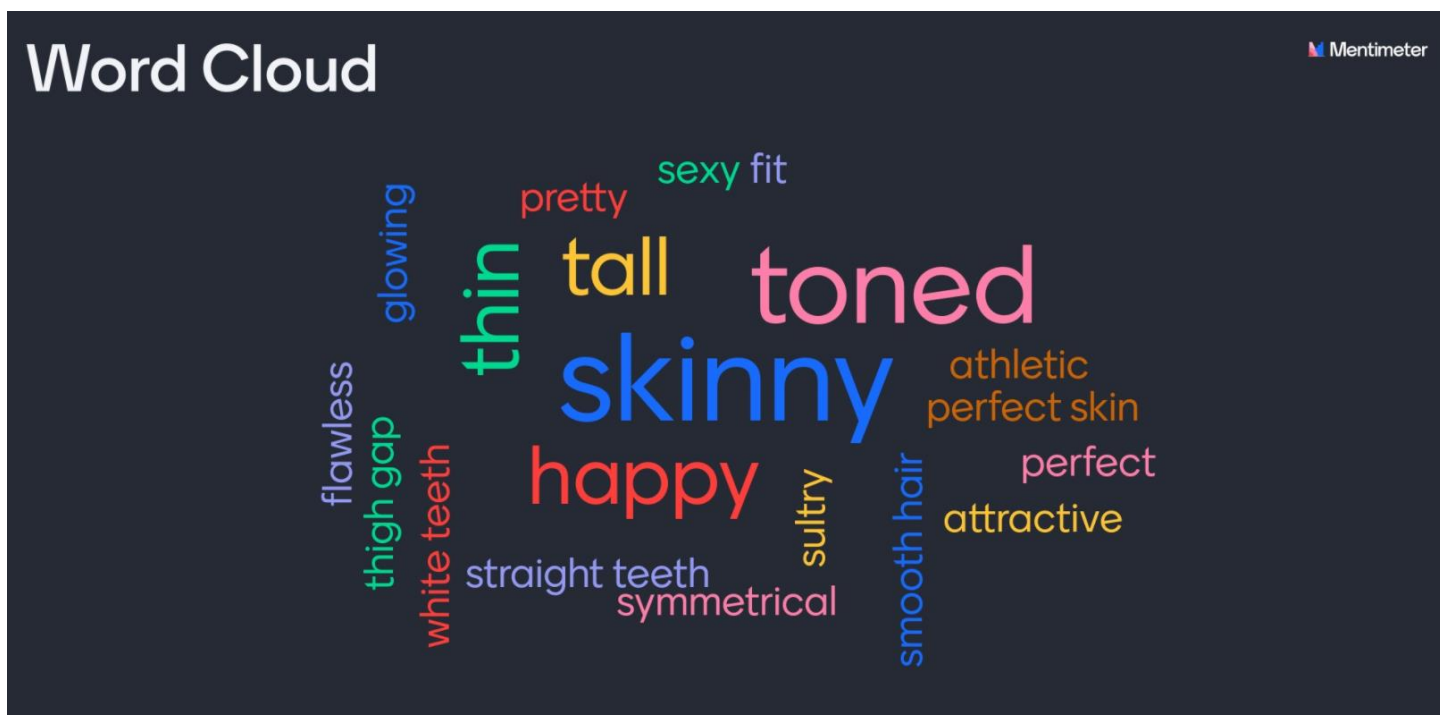
5:00—5:10pm	Welcome participants by name. <ul style="list-style-type: none"> Take attendance as they arrive. Encourage them to sit next to someone they have not already met. 	
5:10—5:20pm	Ice Breaker: Speed Friending <ul style="list-style-type: none"> This activity will have five rounds for two minutes each. Participants will pair up and have one minute to talk about themselves. Tell participants when one minute is up so that the other person in the pair can share for one minute. When two minutes are up, tell participants to find another partner. If there is an odd number of people, student ambassadors may participate to make the number even. Encourage participants to learn as much as they can about their peers! 	This ice breaker activity will allow participants to get to know each other better.
5:20—5:25PM	Review Group Expectations Before beginning the activity and discussion, remind the group of the rules and expectations that were set in Session 1: <ul style="list-style-type: none"> Expectation 1: Keep an open mind and approach all activities with a mindset for growth and understanding. Expectation 2: Vulnerability is valued. This is a space where you can be your most authentic self. Expectation 3: What is said here stays here, and what is learned here leaves here. The things we share in discussions and activities will be kept confidential, but we can still take away the lessons learned. Expectation 4: Remain engaged. Unless an activity requires technology, all phones and laptops should be silenced and put away. Include any other expectations that were set by participants.	
5:25—5:40PM	Magazine Activity Ambassadors will hand out three magazine pages to each participant. <ul style="list-style-type: none"> Tell participants to choose one picture of a person out of the three pages. Next, ask participants what caught their eye when choosing that picture. Try to get a response from each participant. Focus on appearance-based themes. You can ask: “What about this person appealed to you?” or similar questions. Ask participants to submit these answers to the Word Cloud on Mentimeter.com using their phones. Emphasize physical features. Ask the group: Now that you said what you like about these people, what do the pictures say about the “perfect appearance”? <ul style="list-style-type: none"> Have participants continue adding physical traits to the Wordcloud. At this point, transition the conversation to the Body Ideal. 	Have the Mentimeter code projected on the screen for participants to see.
5:40—6:15pm	Defining body ideals: <ul style="list-style-type: none"> The thin-ideal is often promoted for women, while the muscular-ideal is targeted towards men. These body ideals are <i>not the same as being</i> 	

	<p><i>healthy</i>. With thin-idealization, people may strive for ultra-thinness and use extreme measures to get there. The same is true for muscular-idealization, as individuals will engage in unhealthy weight and shape control behaviors along with excessive exercise (Stice, Shaw, & Rohde, 2015).</p> <p>Ask: What are the body-ideal standards in the LGBTQ community?</p> <ul style="list-style-type: none"> • Allow participants to share their experiences. • Answers may include a drive for thinness among gay men and androgynous or nonbinary people, wanting to change body appearance among trans men and women (Nagata, Ganson, & Austin, 2020). <p>Ask: Have these body types always been the ideal for attractiveness?</p> <ul style="list-style-type: none"> • Encourage participants to give examples of other time periods when beauty standards were different. <p>Ask: Where do these body ideals come from?</p> <ul style="list-style-type: none"> • Answers include fashion, television, social media. Have participants describe their experiences with body ideals in the media. <p>Ask: Why do you think body ideals are so heavily promoted?</p> <ul style="list-style-type: none"> • Allow participants to give their answers. • If it was not already brought up, discuss how companies <i>profit</i> off of body ideals. • According to a former fashion magazine editor, the function of fashion media is “to convince women that something is wrong with them (e.g. hair, body, sex life, etc.) so that they can sell their product to fix it” (International Conference on Eating Disorders). <p>Ask: Have you ever been the recipient of a negative comment about your weight or shape from your friends, family, or partners? How did that make you feel?</p> <ul style="list-style-type: none"> • Give participants time and space to share. • Be okay with waiting in silence for someone to share. <p>Ask: How do messages about beauty and attractiveness from the media impact the way you feel about your body?</p> <ul style="list-style-type: none"> • Allow participants to share their experiences. • If a participant has not yet spoken or shared, encourage them to answer. <p>Ask: What does our culture tell us will happen if we are able to achieve these body and appearance ideals?</p> <ul style="list-style-type: none"> • Answers may include acceptance, happiness, love, wealth, success. <p>Transition the conversation to now discuss the Costs of Pursuing an Idealized Body</p> <p>Ask: What are the costs of trying to achieve a thin or muscular ideal?</p> <ul style="list-style-type: none"> • Encourage participation. • Answers include decreased self-worth and self-esteem, physical and mental exhaustion, physical harm to oneself, health problems, depression. <p>Ask: Are you benefitting from the body ideals in our culture? Who IS benefitting?</p> <ul style="list-style-type: none"> • Participants should answer no. Companies profit. <p>Ask: Given these costs, does it make sense to try to strive for the ideal body?</p> <ul style="list-style-type: none"> • Again, participants should say no. If someone answers yes, probe them, and 	<p>This activity and its question are adapted from the Body Project (Stice et al., 2015).</p> <p>These discussion questions are were developed by the Body Project.</p> <p>Allow this to be a discussion. You do not have to read this like a script but stay generally on topic and within the time parameters.</p>
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	<p>try to understand what they are thinking and why.</p> <p>Conclude the body ideal discussion. Ask if anyone has any additional thoughts or questions before moving on to the next activity.</p>	
6:15—6:40pm	<p>Verbal Role-Play Activity</p> <p>Divide the class into four groups. Each ambassador will lead one break-out group. Each group should have 8 to 9 participants.</p> <p>The ambassador will act as the “dieter” and will argue for the unrealistic benefits of pursuing the body ideal.</p> <p>Examples of statements for the ambassador to say are:</p> <ul style="list-style-type: none"> • “If I’m thin, I’ll be happy all the time.” • “I can get a perfect partner and be in a happy relationship if I just change how I look.” • “Being muscular will solve all my problems.” • “Swimsuit season is coming up, so I won’t be having dinner tonight.” • “I just keep forgetting to eat, but I don’t mind because I’ve lost 5 pounds.” • “If I want to go out tonight, I’ll have to skip lunch and dinner.” <p>Each participant will have two minutes to try to dissuade the dieter to stop pursuing this body ideal.</p> <ul style="list-style-type: none"> • Be difficult to persuade. This should create a back-and-forth argument with them. Eventually, concede when their time is up. • Make sure every person gets the opportunity to participate in this activity. 	
6:40--6:55pm	<p>Debrief/Discuss</p> <p>Come back together as a large group and go over the Debrief Prompts:</p> <ul style="list-style-type: none"> • What was it like to experience the discussion and activity today? • What was difficult about the activity? • What are ways you can challenge “body talk” statements in your life? • How can you resist the pressure to pursue an idealized body? 	<p>These questions are designed to open a discussion. Feel free to use some or all of the questions.</p>
6:55—7:00pm	<p>Conclusion:</p> <p>In the last few minutes before the session is over, remind participants:</p> <ul style="list-style-type: none"> • The next session is one week away on Tuesday at 5pm. <p>There are two homework activities:</p> <ul style="list-style-type: none"> • Self-affirmation mirror exercise: stand in front of the mirror and identify ten (or more) positive things you like about yourself. These qualities can include physical, emotional, and intellectual traits. Bring this list back for next week. • Write a letter to the younger version of yourself about body image and the costs of pursuing a body ideal. • If participants need to stay for a few minutes to talk one-on-one, staff and ambassadors are available. 	

7:00—7:30pm	Cleaning Up: <ul style="list-style-type: none"> • Disconnect the laptop from the projector. • Make sure all markers and pens are returned to their boxes. • Collect all magazine pages and clippings from the tables and floor. • Collect remaining supplies to pack in the staff members' utility carts. Turn off the lights and close the door before leaving.	
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EXAMPLE WORDCLOUD FROM MAGAZINE ACTIVITY



Features that are mentioned more than once will appear larger on the screen than other results. This will allow the participants to see emerging themes in our standards of beauty and help them to define societal ideals for attractiveness.

PARTICIPANT WORKBOOK

SESSION 3: BODY IDEAL

DATE TUESDAY, FEB 15

MODULE 2: BODY IMAGE

LOCATION MLC ROOM 213

SESSION 3 SCHEDULE

5:00—5:10PM Welcome

5:10—5:20PM Ice Breaker

5:20—5:25PM Review Expectations

5:25—5:40PM Magazine Activity

5:40—6:15PM Body-Ideal Discussion

6:15—6:40PM Verbal Role-Play Activity

6:40—6:55PM Debrief & Discuss

6:55—7:00PM Conclusion

NOTES

SESSION 3: BODY IDEAL

HOMework #1

Stand in front of the mirror and identify 10 or more positive things you like about yourself. These can include physical, emotional, and intellectual traits. Bring this list for next week.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

HOMework #2

Write a letter to a younger version of yourself about body image and the costs of pursuing an idealized body.

[illegible]

SESSION 5: DISORDERED EATING

Module 3: Eating for Life

Date: Tuesday, March 1st, 2022

Location: Miller Learning Center Room 213

Materials: name tags, markers, participant workbooks, pens, laptop, attendance spreadsheet

Goals: The goal of this session is to (1) dispel common misconceptions about eating disorders and disordered eating and (2) to increase knowledge of the consequences of disordered eating.

Objectives:

- Increase knowledge of the spectrum of disordered eating and eating disorders (information)
- Refute myths about eating disorders (information, normative beliefs)
- Examine the short-term and long-term consequences of disordered eating (information, behavioral beliefs)
- Discuss local and online LGBT-friendly resources for disordered eating (information)

Sequence:

- Welcome (10 minutes)
 - Welcome participants
 - Take attendance
- Ice Breaker (10 minutes)
 - 3-6-9 Clap
- Review Group Expectations (5 minutes)
- Debunking Disordered Eating trivia game (60 minutes)
- Resource Guide (15 minutes)
- Debrief/Discuss (15 minutes)
- Conclusion (5 minutes)

SESSION 5: DISORDERED EATING

DATE TUESDAY, MARCH 1

LOCATION MLC ROOM 213

MODULE 3: EATING FOR LIFE

FACILITATION GUIDE

GOALS & OBJECTIVES	MATERIALS
<p>The goal of this session is to (1) dispel common misconceptions about eating disorders and disordered eating and (2) to increase knowledge of the consequences of disordered eating.</p> <ul style="list-style-type: none"> • Increase knowledge of disordered eating and its consequences • Refute eating disorder myths • Discuss local and online LGBT-friendly resources for eating disorders 	<ul style="list-style-type: none"> • Nametags • Participant workbooks • Pens, markers • Laptop • Attendance spreadsheet

NOTE TO FACILITATORS	<ul style="list-style-type: none"> • While we discuss eating disorders and disordered eating, we focus on the feelings and beliefs behind eating behaviors. We will not discuss specific disordered eating habits in detail because that can be prescriptive and increase students' knowledge of what maladaptive behaviors exist. In addition to avoiding mention of specific behaviors, we will stay away from using numbers to describe weight or calories. Eating disorders can be competitive, so numbers may be triggering (Yager, 2007). • Remember who is in the room. This program works with LGBTQ students. We want to be respectful of their identities and experiences.
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TIME	ACTIVITY BREAKDOWN	NOTES
4:30—5:00pm	<p>Setting Up: LGBT Resource Center Staff and Ambassadors arrive at 5:30 to prepare for the session.</p> <ul style="list-style-type: none"> • Staff members will bring all necessary materials to the classroom and connect one laptop to the projector for the trivia game and presentation. • Ambassadors will place pens and markers at the front table for participants to use. Extra nametags will be available if participants forgot theirs. 	.
5:00—5:10pm	<p>Welcome participants by name.</p> <p>Take attendance as they arrive.</p> <p>Encourage them to sit next to someone they have not already met.</p>	

5:10—5:20pm	<p>Ice Breaker: 3-6-9 Clap</p> <p>Everyone will stand up and form a circle around the room. Starting with one person and continuing around the circle, the group will try to count up to 100 with each person saying one number. However, you cannot say any number that has a 3, 6, or 9 in it. If one of these numbers lands on you, you must clap instead of saying the number.</p> <ul style="list-style-type: none"> • An example of the sequence would look like this: • One, two, CLAP, four, five, CLAP, seven, eight, CLAP, ten, eleven, twelve, CLAP, fourteen, fifteen, CLAP, and so on. <p>If someone makes a mistake, the group must start over from “One” with the next person.</p> <p>Continue playing until the group reaches 100, or until the ten minutes is up.</p>	This game is a challenge and promotes engagement and teamwork.
5:20—5:25pm	<p>Review Group Expectations</p> <p>Before beginning the activity and discussion, remind the group of the rules and expectations that were set in Session 1:</p> <ul style="list-style-type: none"> • Expectation 1: Keep an open mind and approach all activities with a mindset for growth and understanding. • Expectation 2: Vulnerability is valued. This is a space where you can be your most authentic self. • Expectation 3: What is said here stays here, and what is learned here leaves here. The things we share in discussions and activities will be kept confidential, but we can still take away the lessons learned. • Expectation 4: Remain engaged. Unless an activity requires technology, all phones and laptops should be silenced and put away. <p>Include any other expectations that were set by participants.</p>	
5:25-6:25pm	<p>Debunking Disordered Eating Trivia Game</p> <p>One presenter will read the statement and the answer choices. Some questions will be multiple-choice, some will be true/false, and some will be fill-in-the-blank. Participants will have two minutes to answer the question in their workbooks. Then take two minutes to gather responses from the students to hear what they think. Finally, take two minutes to provide the correct answer and explain why it is correct or why other proposed answers may be incorrect.</p> <p>Questions</p> <ol style="list-style-type: none"> 1. True or False: Eating disorders are a choice, like an extreme diet. This statement is false. Eating disorders are caused by a combination of genetic and environmental factors, including life stressors and body-ideal internalization. People with a family history of eating disorders may have a greater biological predisposition to developing one (NEDA, 2018). 2. Short answer. Pick three words to describe what a person with an eating disorder looks like. This is a trick question. There is no right answer or wrong answer, but the 	This trivia game is designed to engage participants, see what they believe about eating disorders and debunk common myths about disordered eating.

	<p>main point to emphasize here is that you often can't tell if a person has an eating disorder by their appearance. People with eating disorders can be underweight, at a healthy weight, or overweight. People with eating disorders can be any gender, race, ethnicity, and age (Center for Discovery, 2019).</p> <p>3. True or False. Fad diets and strict eating rules are not related to disordered eating. This is false. Strict eating rules and adherence to fad diets are some of the warning signs of disordered eating. These behaviors signal an unhealthy relationship with food and eating, and even if a person does not meet clinical criteria for an eating disorder, these issues should be addressed (NEDA, 2018).</p> <p>4. Multiple choice. What kind of eating disorder is most common? a. Anorexia b. Bulimia c. Binge Eating Disorder d. Orthorexia Of these choices, Binge Eating Disorder is most prevalent. One study found that it affects 1.4% of people in a 12-month period. However, there is another category, called Eating Disorder Not Otherwise Specified (EDNOS) that may be even more prevalent (Galmiche, Dechelotte, Lambert, & Tavoracci, 2019).</p> <p>5. True or False. Eating disorders make people look more attractive. This is false. A lot of people associate disordered eating with vanity or desire to be thin, but in reality, eating disorders are far from glamorous. Eating disorders can cause dry skin, hair loss, increased risk of broken bones, decreased sex drive, infertility, bacterial infections in the gut, and many other consequences (NEDA, 2018).</p>	<p>More questions can be added to refute eating disorder myths and educate participants about disordered eating.</p>
6:25—6:40pm	<p>Resources for Eating Disorders and Disordered Eating</p> <p>Discuss the local and online resources available for anyone who may be dealing with disordered eating. All listed resources are LGBTQ-friendly.</p> <ul style="list-style-type: none"> • Use the Resource Guide in the Session 5 Supplement. • Participants will also have a copy in their workbooks. 	<p>This resource list should be updated yearly.</p>
6:40—6:55pm	<p>Debrief & Discuss</p> <p>Take this time to answer questions from participants and go over Debrief Prompts:</p> <ul style="list-style-type: none"> • What is something you learned from the activity and presentation today? • Did anything you learned challenge your previous beliefs about disordered eating? <p>Pair and Share: Have participants pair up with someone nearby to discuss the next topic. After a few minutes, invite participants to share what they discussed.</p>	

	<ul style="list-style-type: none"> • If you found out a friend was dealing with an eating disorder, how might you go about helping them? (Discuss resources) 	
6:55—7:00pm	<p>Conclusion:</p> <p>In the last few minutes before the session is over, remind participants:</p> <ul style="list-style-type: none"> • The last session is one week away on Tuesday at 5pm. • The homework activity this week is to pay close attention to how your emotions and thoughts impact your eating habits. Journal for at least three days about how your emotions, awareness of emotions, and eating habits interacted. • <p>If participants need to stay for a few minutes to talk one-on-one, staff and ambassadors are available.</p>	
7:00—7:30pm	<p>Cleaning Up:</p> <ul style="list-style-type: none"> • Disconnect the laptop from the projector. • Make sure all markers and pens are returned to their boxes. • Collect remaining supplies to pack in the staff members' utility carts. <p>Turn off the lights and close the door before leaving.</p>	

PARTICIPANT WORKBOOK

SESSION 5: DISORDERED EATING

DATE TUESDAY, FEB 15

MODULE 3: EATING FOR LIFE

LOCATION MLC ROOM 213

SESSION 5 SCHEDULE

5:00—5:10PM Welcome
5:10—5:20PM Ice Breaker
5:20—5:25PM Review Expectations
5:25—5:55PM Disordered Eating Trivia
5:55—6:30PM Presentation
6:30—6:45PM Resource Guide
6:45—6:55PM Debrief & Discuss
6:55—7:00PM Conclusion

Debunking Disordered Eating Trivia

Use the spaces below to record your answers to each question.

1. _____
2. _____
3. _____
4. _____
5. _____

NOTES

SESSION 5: DISORDERED EATING

HOMEWORK

For at least three days this week, pay attention to how your thoughts, emotions, and body image impact your eating habits. Write a brief journal entry for each of the three days.

Day 1

Day 2

Day 3

SESSION 5 SUPPLEMENT

RESOURCE GUIDE FOR EATING DISORDERS AND DISORDERED EATING

Information & Support:

NATIONAL EATING DISORDER ASSOCIATION (NEDA)

Accessible online at [NationalEatingDisorders.org](https://www.NationalEatingDisorders.org)
Helpline accessible during business hours at (800)-931-2237
Crisis text line available by texting “NEDA” to 741741

NEDA is a nonprofit organization that serves to support individuals and families affected by eating disorders. Their website provides lots of useful information about eating disorders, signs and symptoms, body image, prevention, treatment, and eating disorders in LGBTQ+ populations. The website also provides a screening tool that can help you decide if it's time to seek professional help. Their hotline and text lines will connect you with trained support volunteers.

NATIONAL ASSOCIATION OF ANOREXIA AND ASSOCIATED DISORDERS (ANAD)

Accessible online at [ANAD.org](https://www.ANAD.org)
Helpline accessible during business hours at (888)-375-7767

ANAD is a nonprofit organization that provides peer support services in the form of helplines, support groups, and support mentors to anyone dealing with disordered eating. Services are free of charge and available to anyone regardless of age, sex, gender, race, sexual orientation, or background. ANAD also provides a treatment directory to help you find therapists, dietitians, psychiatrists, physicians, and treatment centers in your area with expertise in eating disorders.

Counseling:

UGA COUNSELING AND PSYCHIATRIC SERVICES (CAPS)

Located on campus at the University Health Center, 55 Carlton Street, Athens, GA 30602
Appointment bookings available at (706)-542-2273 or online at uhs.uga.edu/caps
Mental health support line available 24/7 at (833)-910-3371

CAPS is located on the second floor of the University Health Center. It offers mental health support services including counseling, psychiatry, and referrals to therapists outside of the University Health Center. CAPS is committed to providing inclusive care and an affirming environment for all identities. Services are affordable, as the initial intake appointment is free of charge, and CAPS accepts most major medical insurance for financing further appointments.

RESOURCE GUIDE FOR EATING DISORDERS AND DISORDERED EATING, CONT.

UNIVERSITY HEALTH CENTER NUTRITION SERVICES

Located on campus at the University Health Center, 55 Carlton St, Athens, GA 30602

Accessible online at uhs.uga.edu/nutrition/services

Appointment bookings available at (706)-542-8690

Individual nutrition counseling is offered on the first floor of the University Health Center by the Health Promotion Department. Registered dietitians can provide nutrition counseling specific to individuals with eating disorders or disordered eating while considering other nutritional concerns such as allergies, vegetarian or vegan diets, and recommendations for physical activity. For students with health fees paid, the initial visit costs \$40, and each 30-minute follow-up visit costs \$20. Additionally, the Health Promotion Department provides cooking classes in the Nutrition Kitchen for only \$5 for fees-paid students.

KELLY SIMONSON, PH.D.

Located at 2027 S. Milledge Avenue, Athens, GA 30605

Appointment bookings available at (706)-389-8161

Dr. Simonson is a licensed psychologist and specializes in counseling for eating disorders and body image. Her practice is LGBTQ+ inclusive, as she has experience in providing counseling for people with sexual and gender minority identities. Dr. Simonson takes Blue Cross/Blue Shield and UGA student insurance. For those out of network, an intake appointment will cost \$175 and individual counseling sessions will be \$150. However, for individuals unable to pay, Dr. Simonson offers some spots for clients to pay a sliding scale fee.

Eating Disorder Treatment:

EATING DISORDERS RECOVERY CENTER OF ATHENS

Located at 1 Huntington Road, Suite 801, Athens, GA 30606

Accessible online at EatingDisordersRecoveryCenterofAthens.com

Appointment bookings available at (706)-552-0450

The Eating Disorders Recovery Center of Athens provides intensive treatment for individuals diagnosed with eating disorders. Their intensive outpatient treatment involves individual therapy, group therapy, family therapy, psychiatry, and nutrition, and it aims to prevent hospitalization. The intensive outpatient treatment program offers several therapy groups, including a body acceptance group, meal group, process group, and a yoga process group. In addition to the eating disorder program, the center also offers general psychotherapy and additional support groups for individuals with binge eating disorder. The Eating Disorders Recovery Center of Athens accepts most major medical insurance.

INTERVENTION CURRICULUM REFERENCES

SESSION 1 REFERENCES

- Active Social Care. (2021). Supporting Identity, Self Esteem, Wellbeing & Health. Retrieved March 17, 2021, from <https://activesocialcare.com/handbook/work-in-a-person-centred-way/supporting-identity-self-esteem-and-wellbeing>
- Knez, I., Eliasson, I., & Gustavsson, E. (2020, January 21). Relationships between identity, well-being, and willingness to sacrifice in personal and collective favorite places: The mediating role of well-being. Retrieved March 17, 2021, from <https://www.frontiersin.org/articles/10.3389/fpsyg.2020.00151/full>
- TeachingTolerance (Director). (2016, May 18). *Intersectionality 101* [Video file]. Retrieved March 17, 2021, from <https://www.youtube.com/watch?v=w6dnj2lyYjE>
- University of Wisconsin-Milwaukee. (n.d.). Gender Pronouns. Retrieved March 17, 2021, from <https://uwm.edu/lgbtrc/support/gender-pronouns/>

SESSION 3 REFERENCES

- The Body Project*. (2021). <http://www.bodyprojectsupport.org/resources/materials>
- Stice, E., Shaw, H., & Rohde, P. (2015). *Body Acceptance Class Manual: Enhanced-Dissonance Version*. <http://www.bodyprojectsupport.org/assets/pdf/materials/bodyproject4sessionscriptandhandouts.pdf>
- Nagata, J. M., Ganson, K. T., & Austin, S. B. (2020). Emerging trends in eating disorders among sexual and gender minorities. *Current Opinion in Psychiatry*, 33(6), 562-567. <https://doi.org/10.1097/YCO.0000000000000645>

SESSION 5 REFERENCES

- Center for Discovery. (2019). *Common myths about eating disorders: Debunked*. <https://centerfordiscovery.com/blog/myths-about-eating-disorders/>
- Galmiche, M., Déchelotte, P., Lambert, G., & Tavalacci, M. P. (2019). Prevalence of eating disorders over the 2000-2018 period: a systematic literature review. *Am J Clin Nutr*, 109(5), 1402-1413. <https://doi.org/10.1093/ajcn/nqy342>
- NEDA. (2018). *Eating disorder health consequences*. National Eating Disorder Association. Retrieved January 25 from <https://www.nationaleatingdisorders.org/health-consequences>
- NEDA. (2018). Eating Disorder Myths. <https://www.nationaleatingdisorders.org/toolkit/parent-toolkit/eating-disorder-myths>
- Yager, Z. (2007). What not to do when teaching about eating disorders. *Journal of HEIA*. <http://cedd.org.au/wordpress/wp-content/uploads/2014/01/What-not-to-do-when-teaching-about-eating-disorders.pdf>

IMPLEMENTATION PLAN

The timeline for the implementation of this pilot program corresponds with the University of Georgia's academic calendar year, as many of the individuals involved in the program are University of Georgia students. In the fall of 2021, classes begin on August 18th, so students are expected to be on campus starting in mid-August.

DEVELOPMENT PHASE

In the month of July, the Program Director will establish partnerships with the University of Georgia and the LGBT Resource Center at the University of Georgia. This step has been allotted one month and occurs before the start of the semester to account for the time it may take to gain university approval. During this time, the Program Director will develop all necessary curricula for the program sessions and training sessions. In August, the Program Director will conduct the hiring process, purchase program supplies, and book the spaces needed for training and program sessions. Two members of the existing LGBT Resource Center staff will be selected for the program in the first week of August. Hiring and selection of all other personnel will begin on the second week of August and end after the second week of September. During September, the Program Director will develop recruitment materials and have them approved by the university.

TRAINING PHASE

Program training will take place in the month of September. The Program Director will conduct leadership training for two hours, once a week with the LGBT Resource Center staff members in September. Session training will involve the Program Director, LGBT Resource Center staff, student ambassadors, and the dietitian. Session training will take four days and be held on the last two weekends in September (18th-19th and 25th-26th). The first day will be an introduction to the program, its mission, vision, goals, objectives, and the program team. The other three days will each cover two program sessions.

Refresher trainings will occur once per month from October to March. The Program Director will host one-hour virtual training sessions with the LGBT Resource Center staff and student ambassadors via Zoom to review updated curriculum, refresh knowledge of program materials, and answer questions pertaining to program implementation.

LOGISTICS

In the first week of October, the Program Director will work with the Data Analyst to develop the program's pre-test and post-test. Student ambassadors and volunteers will work to assemble program materials, including participant workbooks and recruitment flyers in the month of October. Starting in the second week of October, volunteers will post recruitment materials around campus, and LGBT Resource Center staff will send recruitment emails to those subscribed to the LGBTRC email list. The first twenty individuals interested in the program will be invited to participate in the pre-pilot program in late November. Recruitment for the program will continue until the end of November, or until the program reaches its capacity of 35 students. The pre-pilot program will take place over three, four-hour sessions offered in the third week of November. Each of the pre-pilot sessions will cover one module of the program. Through the end of November and up to December 8th, the Program Director and LGBT Resource Center staff members will conduct interviews with the participants of the pre-pilot program to gain feedback on the session activities and discussions. With this feedback, the Program Director will adjust session activities and curricula in December and January.

PROGRAMMING PHASE

Participants recruited to participate in the program will be emailed the pre-test survey in January and will be required to complete the survey before attending the first session. The six program sessions will occur once per week on Tuesdays. Weekly attendance compensation will be administered at the end of each program. Participants must complete the post-test survey during the sixth program session in order to receive their final compensation and perfect attendance bonus, if applicable. Program session topics are outlined below.

Figure 5. Session Schedule

Date	Class Topic
February 1 st , 2022	Introduction, Identity
February 8 th , 2022	Coping
February 15 th , 2022	Body Ideals
February 22 nd , 2022	Self-Image
March 1 st , 2022	Disordered Eating
March 8 th , 2022	Nutrition for Life

EVALUATION PHASE

The Data Analyst will gather results from the pre-test and post-test surveys as well as the attendance sheets to examine the impact of the program. In May, the Program Director will work with the Data Analyst to report the findings from the program and an evaluation of whether the pilot was successful in meeting its set goals and objectives.

Figure 6. Gantt Chart

PHASE	TASK	SEMESTER 1						SEMESTER 2				
		Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May
Development	Establish partnerships											
	Develop curricula											
	Purchase materials											
	Book program spaces											
	Hire personnel											
	Make recruitment materials											
Training	Leadership training											
	Session training											
	Refresher trainings											
Logistics	Develop pre and post-test											
	Assemble materials											
	Recruitment											
	Pre-Pilot											
	Adjust sessions											
Programming	Administer pre-test											
	6 program sessions											
	Administer post-test											
Evaluation	Analyze data											
	Create report											

EVALUATION PLAN

OVERVIEW

This program aims to promote healthy living and prevent disordered eating among lesbian, gay, bisexual, transgender, and queer students at the University of Georgia. The

program evaluation will inform the personnel and stakeholders on the effectiveness of the program and provide insight for improvements throughout the planning and implementation of the program. Formative evaluation will take place in the development, planning, logistics, and pre-pilot phases to ensure the quality of program information and implementation. Process evaluation will occur during the programming phase. Summative evaluation will use data from the pretests and posttests to be analyzed in the final evaluation phase.

FORMATIVE EVALUATION

Formative evaluation for this program will include evaluation of goals and session curricula, training and assessment of program personnel, and implementation and assessment of the pre-pilot program. To ensure the quality of the program's goals and curricula, the Program Director will meet with the LGBT Resource Center staff and the dietitian in early September to review and edit goals, objectives, and information within the program curriculum. Later in the month, the Program Director will be responsible for training the LGBT Resource Center staff and student ambassadors. This training period will include a run-through of each session, as the Program Director provides the curriculum to staff and student ambassadors to teach them about program materials as well as facilitation techniques. At the end of each session, the Program Director will ask staff and student ambassadors for feedback on the session information and implementation, and the Program Director can make changes based on this feedback. Additionally, staff and student ambassadors will be tested at the end of training to ensure that they have sufficient knowledge of program topics.

Following the training sessions in September, the Program Director will host periodic staff trainings once per month through the duration of the logistics and programming phases, from October to March. These one-hour refresher training sessions will allow the Program Director to provide feedback to staff throughout the program to ensure that personnel are constantly improving and well prepared to deliver the program material.

The pre-pilot program takes place over three sessions in November. The LGBT Resource Center staff and student ambassadors will implement these sessions as if they were the full program. The Program Director will supervise the sessions and provide individual feedback to staff and student ambassadors on their performance. Additionally, the Program Director and staff will conduct interviews with each participant of the pre-pilot program to receive feedback on the quality of the intervention and preparedness of personnel, as well as feelings about the program activities, time and location, and session content. The qualitative interview design was chosen for pre-pilot program evaluation to ensure that all participants can provide honest feedback in a conversational setting, which is likely to promote more in-depth responses than an open-ended survey. In December and January, the Program Director will make adjustments to the program and incorporate feedback gathered from the pre-pilot program.

PROCESS EVALUATION

Process evaluation for the program will assess how closely the program implementation followed the plan for the program. To assess dosage, one LGBT Resource Center staff member will keep an attendance spreadsheet to track which participants are present in each session and which participants completed their homework activity from the week before. This will indicate how many times participants were exposed to program content. To assess fidelity of program implementation, one LGBT Resource Center staff member will keep a record of the timeline of each session, including which program activities were completed and how long they took. LGBT Resource Center staff are responsible for collecting this information and reporting it to the Program Director.

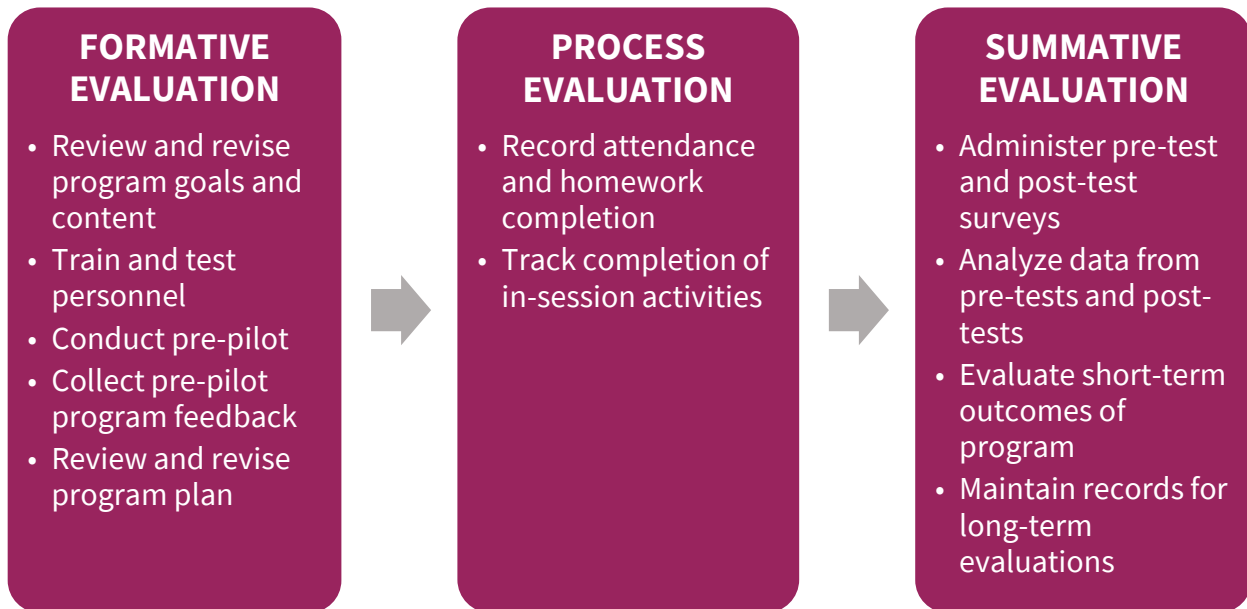
SUMMATIVE EVALUATION

The summative evaluation will assess the outcomes of the program, specifically relating to progress towards the program's overall goals and objectives. The pretest and posttest will be used to collect data on participants' knowledge and awareness of program topics, frequency of disordered eating behaviors, and levels of self-compassion and body acceptance. The Program Director is responsible for collecting pretest and posttest data through Qualtrics survey software, and the Data Analyst is responsible for collecting and analyzing the results.

One of the short-term goals of the program is to increase participants' knowledge of eating disorders, nutrition, body image, and emotional regulation. The pretest and posttest surveys will include knowledge-based questions directly related to the curriculum covered in program sessions to assess changes in knowledge. Another short-term goal is to increase awareness of local and online resources for eating disorder information and treatment. The surveys will include a multi-select item for participants to indicate which resources they have heard of or are familiar with.

One of the long-term goals of the program is to reduce the prevalence of disordered eating in LGBTQ students at the University of Georgia. The frequency of disordered eating behaviors will be measured in the pretest and posttest surveys, and this will indicate results immediately after the intervention. However, this data can be used to assess long-term changes. As the program continues and is implemented every year with the LGBT Resource Center, pretest survey data from the first program can be used as a reference point for comparing pretest survey data over the years. This will allow for long-term effects of the program, including the larger impact on the LGBTQ community at the University of Georgia rather than just the impact on participants who have completed the program. The Program Director will be responsible for maintaining records of this data to assess long-term outcomes.

Figure 7. Evaluation Summary Diagram



PROGRAM BUDGET

Personnel	\$36,118
Space	\$ 2,350
Supplies	\$10,344.52
Program Total Cost	\$48,812.52

Personnel	Number of People	Training Hours	Pre-Pilot Sessions	Session Hours	Out-of-session Hours	Total Hours	Hourly Pay	Total Cost
Program Director	1	46	15	0	450	511	\$50	\$25,550
LGBTRC Staff	2	46	15	18	17	96	\$30	\$5,760
LGBTRC Student Ambassadors	4	38	15	18	0	71	\$12	\$3,408
Dietitian	1	4	2	2	2	10	\$40	\$400
Data Analyst	1	0	0	0	25	25	\$40	\$1,000
Total								\$36,118

Space	Unit Price	Amount of Time	Total Cost
Memorial Hall Ballroom for training	\$35/hour	4 hours per day x 5 days	\$700
UGA Classroom in Miller Learning Center	\$50/hour	5 hours x 3 pre-pilot sessions	\$750
UGA Classroom in Miller Learning Center	\$50/hour	3 hours x 6 sessions	\$900
Total			\$2,350

Technology and Supplies	Count	Unit Price	Total Cost
Dell XPS 13	1	\$1,159.99	\$1,159.99
Data Analysis Software (SPSS) monthly subscription	2	\$100.00	\$200
Zoom Meeting Software 1-year license	1	\$149.90	\$149.90
Printer paper ream (750 sheets)	2	\$5.47	\$10.94
Poster Paper ream (50 sheets)	1	\$16.00	\$16.00
Printer ink	2	\$83	\$166
Half-inch binders	41	\$3	\$123
Three-hole punch	2	\$22	\$44
Pens (144 ct.)	1	\$13.99	\$13.99
Crayola markers (256 ct.)	1	\$94.99	\$94.99
Painter's tape (3 ct.)	1	\$7.97	\$7.97
Utility Cart	2	\$36	\$72
Name tag holders (50 ct.)	1	\$12.99	\$12.99
Fashion and fitness magazines	4	\$3	\$12
Scissors (3 ct.)	1	\$10.75	\$10.75
Amazon Gift Card Incentive for Pre-Pilot	20	\$100	\$2,000
Amazon Gift Card Weekly Incentive	210	\$20	\$4,200
Amazon Gift Card Attendance Bonus	35	\$50	\$1,750
Catering for training	30	\$10.00	\$300.00
Total			\$10,344.52

BUDGET JUSTIFICATION

PERSONNEL

PROGRAM DIRECTOR

The Program Director is hired part-time to create session curriculum and workbook content, design pre-test and post-test surveys, and train LGBT Resource Center Staff and Student Ambassadors on program implementation. The Program Director will be paid for 46 hours of training LGBT Resource Center Staff and Ambassadors in September, 15 hours overseeing the pre-pilot sessions in November, and an additional 10 hours per week for the 45-weeks of program development, training, logistics, programming, and evaluation. This adds up to 511 hours. Based on comparable roles in Georgia, the hourly pay for the Program Director will be \$50. [Link to Glassdoor listing](#)

LGBT RESOURCE CENTER STAFF

Two members of LGBT Resource Center Staff are also responsible for developing and circulating recruitment materials for the program through email lists, social media posts, and flyers. They will manage communications with Ambassadors, volunteers, participants, and the Program Director. LGBT Resource Center staff members are responsible for supervising the six sessions. They will purchase all required materials needed for each session and keep track of program attendance. Finally, they will send pretest, posttest, and follow-up surveys to participants. This role is part-time. The LGBT Resource Center staff members will be paid for 40 hours of training in September, 6 hours of refresher trainings, 15 hours for the pre-pilot in November, 18 hours for program sessions, and an additional 17 hours for miscellaneous responsibilities, including interviews with pre-pilot participants in December. This totals to 96 hours per staff member. The hourly pay of \$30 is based on average salaries for professionals in student affairs at the University of Georgia according to Glassdoor. [Link to Glassdoor listing](#)

LGBT RESOURCE CENTER STUDENT AMBASSADORS

The LGBT Resource Center Student Ambassadors are responsible for the peer-facilitation of the program in the six sessions. All four ambassadors will be present in every session to give presentations, facilitate break-out groups, and lead discussions. The ambassadors will be part-time student employees, paid for attending 32 hours of training, 6 hours of refresher trainings, 15 hours for the pre-pilot sessions, and 3 hours for each program session (2 hours of session, 1 hour of set up and clean-up responsibilities). Student ambassadors will be paid \$12 per hour,

RAINBOW PLATE PROJECT

based on hourly pay for student workers at the University of Georgia, according to Glassdoor. [Link to Glassdoor listing](#)

DIETITIAN

The dietitian will work with the Program Director to develop the curriculum for the nutrition and eating sessions of the program. The dietitian will also present this nutrition curriculum for the program during one session. The dietitian will be paid for 2 hours for developing curricula with the Program Director as well as 4 hours for training (half of one training day), 2 hours for the pre-pilot session, and 2 hours for the program session. This totals to 10 hours. The average pay for dietitians in Georgia is \$40 per hour, according to Indeed. [Link to Indeed listing](#)

DATA ANALYST

The data analyst is responsible for analyzing and reporting data from pretest, posttest, and follow-up surveys. The data analyst will be paid for 25 hours of work, and the hourly pay of \$40 is based on comparable roles in Georgia. [Link to Glassdoor listing](#)

SPACE

MEMORIAL HALL

Training for LGBT Resource Center Staff and Student Ambassadors will take place in the Memorial Hall ballroom for eight hours per day for four days in September for a total of 32 hours. This space costs \$35.00 per hour for UGA-affiliated events.

MILLER LEARNING CENTER CLASSROOMS

For meetings and events affiliated with, but not sponsored by, the University of Georgia, a medium-sized classroom in the Miller Learning Center costs \$50 per hour. Classroom space will be needed for the pre-pilot sessions, which will be three, four-hour sessions in November, and for the six, two-hour intervention sessions in February and March. For pre-pilot and program sessions, classroom reservations will account for 30 minutes of set-up before the session and 30 minutes of clean-up after the session. Pricing for campus reservations can be found [here](#).

TECHNOLOGY

DELL XPS 13 LAPTOP

One Dell XPS 13 laptop will be provided to the Program Director for use in planning and implementing the program. [Link to Dell Laptop listing](#)

PROJECTOR

A projector will be needed for certain activities in the implementation of program sessions. Miller Learning Center classrooms are equipped with projectors, so this will come at no extra cost to the program.

PRINTER

A printer will be available to use through the LGBT Resource Center Staff's office, but paper and printer ink will be purchased for these printers for purposes of the program.

SOFTWARE

QUALTRICS SURVEY SOFTWARE

Qualtrics Survey Software will be used for the pretests and posttests. This software is available for free to UGA students, faculty, and staff, so LGBT Resource Center staff will have access to Qualtrics at no extra cost to the program. [Link to Qualtrics](#)

UGAMAIL

UGAMail is also available for free to UGA students, faculty, and staff. It will be used for correspondence with LGBT Resource Center staff, ambassadors, and participants in the program.

ZOOM MEETING SOFTWARE

A one-year Zoom meeting software license will be purchased for the Program Director for hosting the one-hour refresher trainings from October to March and for any other meetings with program personnel. A one-year license for a small team is \$149.90. [Link to Zoom](#)

STATISTICAL PACKAGE FOR SOCIAL SCIENCES (SPSS)

A two-month subscription to SPSS will be provided for the Data Analyst to review and analyze data from pretest and posttest surveys during March and April. [Link to SPSS](#)

MENTIMETER WEBSITE

The Mentimeter website will be used for engagement activities like polls and wordclouds in training, pre-pilot sessions, and program sessions. Mentimeter has a free membership. [Link to Mentimeter website](#)

SUPPLIES

PRINTER PAPER

Printer paper will be used to create facilitation guides for the implementation of the program as well as participant workbooks. Pricing for printer paper comes from Amazon. [Link to Printer Paper](#)

POSTER PAPER

Poster paper will be used to print program recruitment flyers, posters for session 1 activities, and name tag templates. Pricing for poster paper comes from Amazon. [Link to Poster Paper](#)

PRINTER INK

Ink will be needed to print all facilitation guides, participant workbooks, nametag templates, and other materials. Pricing for ink comes from Amazon. [Link to printer ink](#)

HALF-INCH BINDERS

Half-inch binders will be used to hold together sheets for the 35 participant workbooks and 6 facilitation guides. Pricing for binders comes from Amazon. [Link to binders](#)

THREE-HOLE PUNCH

A three-hole punch will be used to punch holes in the sheets for participant workbooks and facilitation guides so that they can fit into the rings on the half-inch binders. Pricing for this item comes from Amazon. [Link to three-hole punch](#)

PENS

Pens will be provided to participants in program sessions and the pre-pilot program for note-taking and completion of workbook activities. Pricing for the pens comes from Amazon. [Link to pens](#)

MARKERS

Crayola markers will be provided to participants in program sessions and in the pre-pilot program for completion of workbook activities, group activities, and decorating name tags. Pricing for the markers comes from Amazon. [Link to markers](#)

MAGAZINES

An activity in session 3 requires pictures from magazines. Two magazines will be issues of fashion magazines, such as Vogue, Vanity Fair, or Bazaar. The other two will be fitness magazines such as Shape, Women's Health, or Men's Health. Pricing for magazines is dependent on the season and issue but has been estimated around \$3 per issue for this program.

SCISSORS

Scissors will be used for various tasks in this program, such as unpackaging other supplies and cutting out nametags. Pricing for a three-pack of scissors comes from Amazon. [Link to scissors](#)

PAINTER'S TAPE

Painter's tape will be used to post recruitment flyers and posters for session activities. Painter's tape was chosen because it is safe for the walls and will not cause damage. Pricing for the painter's tape comes from Amazon. [Link to painter's tape](#)

UTILITY CART

Two utility carts will be provided, one for each LGBT Resource Center staff member. The utility carts will be used to transport supplies from the LGBT Resource Center to the Miller Learning Center for program sessions. Pricing for the utility carts comes from Amazon. [Link to utility carts](#)

NAME TAG HOLDERS

Name tag holders will be provided to each program participant, student ambassador, and staff member to wear during program sessions. Pricing for name tag holders comes from Amazon. [Link to name tag holders](#)

INCENTIVES

AMAZON GIFT CARDS

Amazon gift cards will be the program incentive for pre-pilot and program participants. The twenty students participating in the pre-pilot program will each receive a \$100 Amazon gift card after attending the three sessions and completing their exit interview. Program participants will receive a \$20 Amazon gift card as an incentive for attending each program session. If participants attend all program sessions, they will receive a bonus of \$50 Amazon gift card upon completion of the post-test survey.

LUNCHES FOR TRAINING

Lunch will be provided to the Program Director, staff, and ambassadors for each of the four days of training. The dietitian will also receive lunch for the half-day of training. One lunch will be burritos catered from Chipotle, which costs \$8.75 per person. Another lunch will include a chicken sandwich, waffle cut fry chips, and a cookie, catered from Chick-fil-A for a price of \$7.83 per person. Another lunch will be the Jimmy John's Box Lunch, which costs \$10 per person. Finally, the last lunch will be the box lunches from Zoe's Kitchen. For the budget, meal costs are estimated at \$10 per meal per person. Prices were found at the links below.

[Chipotle Catering](#)

[Chick-fil-A Catering](#)

[Jimmy John's Catering](#)

[Zoe's Kitchen](#)

PROGRAM RESOURCES

PERSONNEL

- Program Director
- LGBT Resource Center Staff
- LGBT Resource Center Student Ambassadors
- Volunteers
- Dietitian
- Data Analyst

SPACE

- UGA Classroom in the Miller Learning Center
- Memorial Hall Ballroom for training

SUPPLIES

- Printer paper
- Poster paper
- Printer ink
- Half-inch binders
- Three-hole punch
- Pens
- Crayola markers
- Fashion and fitness magazines
- Scissors
- Painter's tape
- Name tag holders
- Utility cart

INCENTIVES

- Amazon gift cards
- Catered lunches for training

EQUIPMENT

- Dell XPS 13 for Program Director
- Projector
- Printer

SOFTWARE

- Qualtrics Survey Software
- UGAMail
- UGAMail
- Statistical Package for Social Sciences (SPSS)
- Mentimeter Website

REFERENCES

- Ajzen, I. (2006). Behavioral interventions based on the theory of planned behavior. <https://people.umass.edu/aizen/pdf/tpb.intervention.pdf>
- American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*. (2013). American Psychiatric Association.
- Bell, K., Rieger, E., & Hirsch, J. K. (2019). Eating disorder symptoms and proneness in gay men, lesbian women, and transgender and gender non-conforming adults: comparative levels and a proposed mediational model [Original Research]. *Frontiers in Psychology*, 9(2692). <https://doi.org/10.3389/fpsyg.2018.02692>
- Calzo, J. P., Blashill, A. J., Brown, T. A., & Argenal, R. L. (2017). Eating disorders and disordered weight and shape control behaviors in sexual minority populations. *Current Psychiatry Reports*, 19(8), 49. <https://doi.org/10.1007/s11920-017-0801-y>
- Chesney, E., Goodwin, G. M., & Fazel, S. (2014). Risks of all-cause and suicide mortality in mental disorders: a meta-review. *World Psychiatry*, 13(2), 153-160. <https://doi.org/10.1002/wps.20128>
- Davis-Waddle, L. A. (2019). An integrated model of eating disorder risk and protective factors: implications for research and treatment. *East Tennessee State University*. <https://dc.etsu.edu/cgi/viewcontent.cgi?article=5062&context=etd>
- Duffy, M., Henkel, K., & Earnshaw, V. (2016). Transgender clients' experiences of eating disorder treatment. *Journal of LGBT Issues in Counseling*, 00-00. <https://doi.org/10.1080/15538605.2016.1177806>
- Fisher, W. A., Fisher, J. D., & Harman, J. (2003). *The information-motivation-behavioral skills model: A general social psychological approach to understanding and promoting health behavior* [doi:10.1002/9780470753552.ch4]. Blackwell Publishing.
- Galmiche, M., Déchelotte, P., Lambert, G., & Tavolacci, M. P. (2019). Prevalence of eating disorders over the 2000-2018 period: a systematic literature review. *Am J Clin Nutr*, 109(5), 1402-1413. <https://doi.org/10.1093/ajcn/nqy342>
- Grady News Source. (2020). LGBTQ youths struggle with mental health issues, survey finds. <https://gradynewsresource.uga.edu/lgbtq-youths-struggle-with-mental-health-issues-survey-finds/>
- Jurkovic, A. (2014). Normative beliefs as a mediator between body dissatisfaction and disordered eating. *Illinois Wesleyan University*. https://digitalcommons.iwu.edu/cgi/viewcontent.cgi?article=1159&context=psych_hon_proj
- Kates, J., Ranji, U., Beamesderfer, A., Salganicoff, A., & Dawson, L. (2018). Health and access to care and coverage for lesbian, gay, bisexual, and transgender (LGBT) individuals in the U.S. *Kaiser Family Foundation*. <https://www.kff.org/report-section/health-and-access-to-care-and-coverage-lgbt-individuals-in-the-us-the-lgbt-community/>
- Nagata, J. M., Ganson, K. T., & Austin, S. B. (2020). Emerging trends in eating disorders among sexual and gender minorities. *Current Opinion in Psychiatry*, 33(6), 562-567. <https://doi.org/10.1097/YCO.0000000000000645>

- National Eating Disorder Association. (2018). *Eating disorder health consequences*. National Eating Disorder Association. Retrieved January 25 from <https://www.nationaleatingdisorders.org/health-consequences>
- National Eating Disorders Association. (2018). *Eating disorders in LGBTQ+ populations*. Retrieved January 28 from <https://www.nationaleatingdisorders.org/learn/general-information/lgbtq>
- Rankin & Associates Consulting. (2016). University of Georgia campus climate research study.
- Ryan, C., Russell, S. T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family acceptance in adolescence and the health of LGBT young adults. *J Child Adolesc Psychiatr Nurs*, 23(4), 205-213. <https://doi.org/10.1111/j.1744-6171.2010.00246.x>
- The Trevor Project. (2020). *2020 National Survey on LGBTQ Youth Mental Health*. New York, New York: The Trevor Project.
- Watson, L. B., Velez, B. L., Brownfield, J., & Flores, M. J. (2016). Minority stress and bisexual women's disordered eating: the role of maladaptive coping. *The Counseling Psychologist*, 44(8), 1158-1186. <https://doi.org/10.1177/0011000016669233>