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Developing a justice-focused body image program for U.S. middle schoolers: a school-based community-engaged research process

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ABSTRACT

We describe a community-engaged research process to co-create and implement an evidence-informed, diversity-focused body image program for early adolescents. Our team included middle school staff, students, and teachers, and university faculty and students. Team members had a diverse range of intersecting cisand transgender, racial, sexuality, and disability identities. Specific steps to the research process included: (1) establishing team leads at each site to maintain a collaborative and non-hierarchical team structure; (2) bi-weekly advisory team meetings to establish program needs and discuss curriculum and implementation options; (3) a year-long youth co-design process to generate content ideas, pilot pieces of programming, and incorporate youth leadership through an equity lens; (4) inclusive program writing from members of socially marginalized groups; (5) program piloting to solicit feedback from teachers, facilitators, and students; and (6) collaboratively incorporating feedback. The resulting 8-session (6 hours total) Body Justice Project has both dissonance-based and media literacy foundations, with topics related to cultural appearance ideals, diet culture and non-diet nutrition, media and appearance pressure, and body autonomy. It is designed for in-class delivery to middle school students by trained college and youth co-facilitator teams. We emphasize guiding principles and lessons learned, along with next steps in implementation.

Clinical Implications

- Community-engaged intervention development centers needs of underserved communities.
- Intervention co-development supports implementation, sustainability, and equity.
- Successful school-based implementation requires multi-level, multicontextual support.

Negative body image is consistently associated with poor mental health including low self-esteem, depression, and eating disorders (e.g., Neumark-Sztainer

et al., 2006; Paxton et al., 2006). Interventions to improve body image are a key strategy for promoting broad psychological well-being as well as preventing the onset of eating disorders and their significant comorbidities (e.g., J. I. Hudson et al., 2007). Body image interventions within early adolescence (e.g., ages 11-14) are a particularly important target for the eating disorders prevention field. In this age range, puberty and sociocultural influences (e.g., social media) can converge to create body image concerns and increase eating disorder risk (e.g., dieting) (e.g., Westerberg-Jacobson et al., 2012). When initial symptoms of eating disorders are present in later adolescence, they tend to remain stable or worsen—over time through young adulthood (Neumark-Sztainer et al., 2011), suggesting that prevention interventions during early adolescence could be beneficial in breaking this chain. Despite the compelling evidence to intervene within this developmental period, early adolescents are relatively under-served by the existing evidence base. For example, a 2022 meta-analysis on schoolbased media literacy body image interventions for children ages 10-15 reported on just 17 controlled studies (Kurz et al., 2022), and a 2020 meta-analysis with a slightly broader scope (universal body image interventions among children ages 5-17) identified 24 controlled studies (Chua et al., 2020). In contrast, a 2017 meta-analysis and review of body image interventions identified 101 randomized controlled trials across all ages (Le et al., 2017).

Existing body image interventions for children and early adolescents most often utilize universal prevention approaches (Le et al., 2017), where all children in a particular context (e.g., school) receive an intervention, regardless of their current body image concerns. While selective prevention approaches—where individuals are selected into programs based on elevated risk—are associated with larger effects compared to universal ones (Chua et al., 2020), there may be practical reasons for opting for school-wide interventions for young people. Universal programs can be an effective way to address the ubiquitous nature of body image concerns during adolescence and offer solutions for combatting greater than normative concerns without singling out individuals who are struggling. Universal body image programs ideally reduce the negative mental health consequences of body image concerns, prevent concerns from becoming more serious, and reduce risk for those with an elevated likelihood of developing an eating disorder over time (e.g., cisgender girls and gender diverse young people; Diemer et al., 2015). There is evidence for the benefit of both media literacy approaches (targeting critical awareness of the unrealistic portrayal of bodies in the media) and cognitive dissonance interventions (which use active exercise to directly challenge sociocultural body messages) for early adolescents in universal schoolbased body image programs, as well as interventions that address peer relationships (Chua et al., 2020; Kurz et al., 2022). Importantly, effects are not different based on gender (Chua et al., 2020), providing further evidence for universal programs that include all students within a classroom.



Inclusive body image interventions

Although the eating disorders field has recognized that there is elevated eating disorder risk aligning with female gender socialization and identity, individuals with specific intersecting and other socially marginalized identities may also be quite vulnerable. This includes marginalized racial and ethnic, sexual, and gender identities (e.g., Bucchianeri et al., 2016; Diemer et al., 2015; Roberts et al., 2021; Rodgers et al., 2018). It is important to address intersectional body image concerns in universal prevention settings, where individuals likely have a range of identities impacting body image pressures.

Over the past decade, our research team has created and tested a universal, inclusive body image curriculum for college-aged individuals called the EVERYbody Project (Ciao et al., 2021, 2023). The EVERYbody Project is a dissonance-based intervention adapted from the Body Project, which was created for presumed cisgender girls and women (Stice et al., 2006). The EVERYbody Project encourages young adults in diverse social groups to critique the narrow diversity representation in appearance-based norms and challenge appearance pressures on the individual and societal level; groups are gender-inclusive and open to all interested. The EVERYbody Project maintains a dissonance-based orientation to address how the internalization of cultural appearance norms and size-based oppression intersects in important ways with race, class, gender, sexuality, and other factors. Research on the EVERYbody Project suggests it can produce reductions in eating disorder risk factors and eating disorder symptoms over short-term follow-up relative to control and comparison interventions (Ciao et al., 2021, 2023), with benefits for college students with marginalized social identities and for those in majority identity groups. To our knowledge, no similar work exists within younger age ranges. However, many adaptations of the Body Project address the needs of specific cultures and contexts (e.g., Chinese girls and young women; Luo et al., 2021), although the majority of these adaptations are with young adults (e.g., for gay men, Brown & Keel, 2015; for female college students in Saudi Arabia; AlShebali et al., 2021; for male and female college students in Brazil; T. A. Hudson et al., 2021). While existing school-based body image programs for young people may allow for critical conversations about diverse body image experiences to emerge spontaneously, we believe it is important to have intentional adaptations to create structured opportunities for participants to directly explore the impact of the lack of diversity within cultural appearance ideals (Ciao et al., 2021).

When staff in a local public middle school approached our team about their concerns for students with negative body image and disordered eating, we worked to develop shared goals and to co-imagine ways to address these issues with a younger audience using an inclusive approach. At the same time, we knew that modifications —and potentially new programming—would be required in order to tailor diversityfocused body image interventions to this age range and to this school context.

Community-engaged intervention development

We started this project with a flexible goal of delivering an evidence-informed body image intervention within the middle school setting (aligning with implementation research practices; Aarons et al., 2011), but we were not interested in simply taking our existing college-level curriculum and making age-appropriate adaptations. Rather, we set out to engage in a more comprehensive curriculum development process driven by the community. Our goal was to collaboratively determine what an optimal curriculum would be and co-develop both the curriculum and an implementation plan that would be sustainable over time within the school. In order to maintain maximum flexibility, we intentionally did not use an implementation framework upon starting this work. At each step, we aimed to engage the knowledge and involvement of a key group of school community partners to inform intervention co-development and determine our implementation plans.

This community-engaged research approach is ideal for bringing an evidence-informed program into a new context through an equity lens (S. E. Collins, Clifasefi, Stanton, The LEAP Advisory Board, Straits, et al., 2018). Evidence-based mental health interventions often are evaluated in highly-controlled research contexts among participants with limited diversity, and context-specific adaptations may be required for these interventions to be acceptable for implementation in other settings, particularly among marginalized groups (S. E. Collins, Clifasefi, Stanton, The LEAP Advisory Board, Straits, et al., 2018). Community-engaged implementation work can address researchers' assumptions about perceived problems and desired interventions, which can ultimately create barriers to acceptability and sustainability and perpetuate oppressive systems if left unexamined (Sanchez et al., 2023).

While community-engaged research practices are underutilized in psychology broadly (S. E. Collins, Clifasefi, Stanton, The LEAP Advisory Board, Straits, et al., 2018), they are more regularly utilized in the body image intervention field. For example, Becker et al. (2009, 2017). used a community-engaged research approach to implement many iterations of dissonance-based body image interventions in college women. They identify these interventions as ideal for this work, since their evidence base is formed by traditional efficacy and effectiveness research trials and community-engaged methods. Given this, and considering the success of the many adaptations of dissonance-based body image interventions to new contexts, we decided to use the *EVERYbody Project* as a foundational evidence-based tool for our curriculum development process.

When embarking on this project, our team's specific guiding values included collaboration, co-learning, and power-sharing, with the school making key decisions according to their needs and timeline. We also aimed to leverage group strengths, acknowledging that while roles would differ within



Figure 1. Equity within community-engaged research in psychology (from S. E. Collins, Clifasefi, Stanton, The LEAP Advisory Board, Straits, et al., 2018).

the team, the strength of the process relied on active involvement from all parties. Figure 1 describes how these principles align with equity-based community-engaged research practices described by S. E. Collins, S. L. Clifasefi, J. Stanton, The LEAP Advisory Board, K. J. E. Straits, et al. (2018). We conducted this research collaboration with attention to the lived experiences of social marginalization that shape the ways that members of a team work together and operate within a community, maintaining the goal of centering voices of those frequently marginalized in these spaces (Sanchez et al., 2023). To maintain the value of reflexivity, we consistently evaluated team members' positionality within the partnership and transparently navigated the tension between listening versus bringing ideas forward (Sanchez et al., 2023).

Another key value within our approach was centering youth experiences. Programs created for young people often neglect to include their voices in the development process, even though they are the ones who stand to gain—or lose—the most. Youth-led participatory action research, a form of community-engaged research, is an innovative and equity-focused solution that includes power-sharing and engaging in a collaborative development process with young people who are the targets of interventions (Cahill & Dadvand, 2018; Sanchez et al., 2023). For our project, youth partners were an intentional and essential component of evaluating, adapting, and creating the intervention. From the outset, we also knew that we wanted to include youth leadership in co-facilitating the intervention.

The current project began with forming a team of middle school staff and university researchers. Together with a team of middle school students, we codeveloped and piloted a body image curriculum that we describe in three phases. While we relied on community-engaged research principles, the specific methods and steps to the project were developed based on ongoing team meetings. Of note, authors of this paper include members of both the research and school team with various levels of training and experience. While this paper is written primarily for an academic audience, it reflects lessons learned from multiple sides of the collaboration. We did not seek IRB approval for this project in order to prioritize community voices in the iterative process, keep curriculum development aligned with the timelines desired by the school, and not impose potential hierarchies of traditional research on our partnership. As such, there were no planned formal qualitative or quantitative analyses of the process or feedback collected. Rather, this paper represents our team's retrospective reflections on the chronological steps to this work, in the hopes that it may serve as a road map for guiding future approaches or to replicating the process in consultation with community teams.

Phase 1: Collaboration formation

The community site is a public middle school in the pacific northwest U.S. with a population of approximately 600 students across three grades (6th, 7th, and 8th). This school has a higher proportion of students from diverse racial and economic backgrounds relative to other middle schools in the district (U.S. News & World Report, 2018). The research team includes psychology-based faculty and students from an undergraduate-focused regional public university in the same city. There is an established history of collaboration between this school partner and members of the psychology department at this institution, with research and educational events occurring intermittently from 2013-2019. In 2019, a research team member (AC) was part of a larger team who worked with this school partner to collect and share survey data on students' perceptions of connection, acceptance, and belonging within the school. In the following year (early 2020), school staff reached out to the researcher to consult about students with concerning behaviors in the domains of food and body image. (e.g., skipping breakfast and lunch, negative body-related comments, and other disordered eating behaviors). In the initial meeting, the researcher and several school staff members (paraeducators, counselors, and the assistant principal) envisioned how to bring in preventative programming to address these issues.

The onset of the COVID-19 pandemic delayed some of the subsequent conversations, but the school remained enthusiastic about this idea. In the 2020–2021 school year, early planning meetings took place virtually with various combinations of the school and research team. Initial meetings discussed the nature of the problems we might target as well as potential action steps. Several key consensus points occurred during these initial meetings:



- A desire for a body image intervention to support body positivity and flexible, healthy eating habits among students at the school.
- A desire to be intentionally intersectional and incorporate appearancebased activism around race and other intersectional body concerns into the curriculum.
- A desire to center middle school student input in the program development process and encourage student leadership in the implementation of programming.
- Explicitly naming our decision-making values that centered powersharing.

These initial steps of establishing the project goals were done slowly (Stadnick et al., 2022), prioritizing relationship-building, listening, and community needs. We aimed to establish mutual buy-in and joint responsibility for the curriculum development process and implementation decisions. Toward the end of this initial process, the research team expanded to include another faculty member with expertise in multicultural counseling, anti-racism, and LGBTQ identity development (KD) as well as undergraduate and postundergraduate research assistants with diverse lived body image advocacy experience. We ended the initial planning year with a tentative timeline for the project, a plan for the research team to apply for university funding to support the work, and a plan to tie this work to a faculty member's professional leave (AC) in order to have protected time to engage in the communitycollaborative process. Approximately one year from our initial meeting (fall 2021), the project began, running through the summer of the following year (summer 2022).

Phase 2: Curriculum development

Developing the curriculum involved several parallel action steps that included (a) regular meetings with advisory and youth teams, and (b) writing and revising the curriculum.

Advisory team

The advisory team consisted of two university psychology professors, two research assistants, the middle school's assistant principal, two counselors, and four paraeducators. All members from the school site were invited by school staff who had attended initial planning meetings. School team members received a stipend as recognition for their time and effort. A majority of advisory team members held multiple marginalized identities, and their lived experience was critical to creating a diversity-focused program through an equity lens (Sanchez et al., 2023). Understanding intersecting social identities

and how they can lead to overlapping experiences of body-based discrimination and privilege is imperative to creating an inclusive body image curriculum (Ciao et al., 2021).

Team leads were chosen from each site to prioritize a collaborative structure. The research team lead (SP) was a paid, part-time post-bachelor's project coordinator who organized meetings, liaised with school staff and students (including facilitating all youth team meetings), led the curriculum writing process, and coordinated the curriculum implementation. The school team leads (CG and JG) were paraeducators who worked closely with the youth team, coordinated on-site activities, co-wrote curriculum elements, and ensured that the curriculum served students' interests.

All members of the advisory team attended bi-weekly virtual meetings during the school day. Early advisory meetings were spent reviewing, discussing, and building consensus around key curriculum content. Later advisory team meetings were used to determine implementation factors including program structure (e.g., number and length of sessions), curriculum leadership, and which classes would initially receive the curriculum. Final decisions reflected a balance between best practices and feasibility within the school day given existing resources, as well as considerations of sustainability over time. While we initially discussed creating targeted programming for students at highest risk of developing eating concerns (e.g., female-identifying students only, or just students with higher body image concerns), we had determined by mid-year that the curriculum would be created for the whole school, with implementation during homeroom classes. Homeroom implementation was a natural fit for the school, as this class period did not have a set curriculum and teachers were used to having short-term educational programming during this time slot (e.g., the school counselors had led a short social-emotional learning program during homeroom earlier in the year).

Youth team

The school team recruited students from all three grades to serve on the youth team, based on their familiarity with students who were potential thought leaders in this domain. They identified students with particular interest in and/ or lived expertise in body image and diversity realities and extended personal invitations to join the youth team. We also prioritized having marginalized youth voices inform the process; as such, the majority of the youth team held multiple marginalized identities. The final youth team consisted of 17 students with at least five students from each grade.

The team leads from the research and school sites met bi-weekly with youth team members throughout the school year. Meetings were held during the school day, and youth team members were incentivized for their attendance (e.g., through snacks and an end-of-the-year field trip). Because students were

missing classes while helping, the research team approached incentives with intentionality to acknowledge students' time and contributions. The primary objective of early youth team meetings was to identify content and activities that were engaging and relevant to their lives. Because body image and appearance-based judgment can be vulnerable topics to explore, a key element of working with the youth team was cultivating a safe and comfortable environment. This included addressing students' existing and emerging social dynamics in addition to soliciting their feedback on relevant topics. For example, when students had disagreements that developed outside of meetings, team leads prioritized guiding the youth team in conflict resolution before proceeding with program planning. Later youth team meetings focused on curriculum co-leadership and implementation.

Curriculum writing

Curriculum writing was led by the research team in an iterative process, with ongoing contributions from the school and youth teams. The advisory team began by reviewing the EVERYbody Project (Ciao et al., 2021) and discussing how to modify and expand this curriculum. Members of the advisory team recommended that topics like nutrition, sexual harassment, and body autonomy would be useful to include, following a recent increase in gender-related harassment within the school. EVERYbody Project content areas were also presented to youth team members for review, who advocated for inclusion of media influences and appearance-based teasing.

Following this feedback, the EVERYbody Project was expanded to include four content sections covering (1) Cultural Appearance Ideals, (2) Health and Non-Diet Nutrition, (3) Media and Appearance Pressures, and (4) Body Autonomy. Content retained from the EVERYbody Project was adapted to be developmentally appropriate for a middle school audience and interactive for the whole-class setting. To get ideas for new curriculum areas, the research team evaluated free online educational materials for body positivity, body autonomy, nutrition, and media literacy. When developing new content, the research team prioritized activities with either dissonance-based or media literacy foundations and activities that addressed body image risk (e.g., reducing ideal internalization) and resilience (e.g., intuitive eating principles) based on the literature. In developing content, we were primarily targeting individual-level changes in body image and other risk factors. To a lesser extent, we created content to address school-level factors like weight bias and the climate around appearance-based comments.

After preliminary drafts of lessons were written by the research team, members of the advisory team reviewed the scripts to make adaptations based on learning goals and learning styles of the middle school audience. Next, the youth team participated in focus groups for a subset of activities

Table 1. Body Justice Project curriculum outline.

	Part 1 (45 minutes)	Part 2 (45 minutes)
Week 1: Cultural Appearance Ideals	 Group Norms Activity (10 min) Defining Cultural Appearance Ideals (20 min) Feminine Ideal Activity Masculine Ideal Activity Inclusivity of Ideals Introduction 	 Inclusivity of Ideals (15 min) Who is Left Out Activity Appearance Stereotypes Activity The Healthy Ideal (15 min) Flexible Health Activity Body Compassion Introduction Fat and Disabled Bodies Introduction
Week 2: Health and Non-Diet Nutrition	 Health at Every Size Introduction (5 min) Dieting vs. Intuitive Eating Introduction (5 min) Practical Intuitive Eating (10 min) Hunger-fullness Scale Activity Intuitive eating strategies Activity Health Myth Busting Activity (25 min) 	 Good and Bad Foods (15 min) Good or Bad Foods Activity Food is Fuel Activity Favorite Food Memory Activity (20 min)
Week 3: Media and Appearance Pressure	 Mass Media and Body Image (15 min) Representation in Media Activity Analyzing Ads Activity (25 min) 	 Social Media and Body Image (15 min) Positives of Social Media Activity Negatives of Social Media Activity Creating Positive Spaces Activity (15 min)
Week 4: Body Autonomy	 Body Respect (20 min) Body Autonomy Introduction Body Respect and Care Activity Body Boundaries Activity (15 min) 	Respecting Other Bodies (10 min) Body Talk Activity Sharing the Message Activity (30 min)

Note: Each session began with an introduction (5 minutes) and ended with a wrap-up (5 minutes).

from each section of the curriculum to assess their engagement and understanding. After running through the activity, the youth team members were asked questions like: (1) What is the best way to learn these topics? (2) Are the activities enjoyable?, and (3) What about these topics/activities feel most important or relevant? This would result in another round of revisions to reflect the needs and learning goals of the students. Over time, a curriculum facilitator guide was finalized to include two 45-minute lessons per topic area, for a total of 8 lessons (6 hours total). The curriculum was written at a 6th grade reading level and designed to fit during the daily 50-minute homeroom period. Table 1 presents the curriculum outline; each lesson included at least two activities (active exercises to challenge students in thinking about, writing about, or discussing a topic in pairs, small groups, or with the entire class). Once the facilitator guide was finalized, research staff built corresponding presentation materials including a slideshow (to define key terms, provide visual reinforcement of the curriculum, and frame discussion questions) and student handouts for activities and reflection; slideshows and handouts were also translated into Spanish. In collaboration with the youth team and advisory team, the curriculum was named the Body Justice Project.



Phase 3: Implementation pilot

The advisory team determined that an initial pilot of the Body Justice Project would assess the curriculum's feasibility and acceptability in a small number of classes across grade levels. The assistant principal (who was on the advisory team) reached out directly to a small group of teachers to assess their interest in participating. Invitations focused on creating buy-in for the long-term vision of the curriculum, asking teachers to provide structured feedback to guide additional revisions to the curriculum before it was rolled out on a broader basis across the school. The pilot ran with one 6th grade class, two 7th grade classes, and one 8th grade class. Faculty members of the research team (AC and KD) met with each participating teacher briefly to outline the curriculum before it began.

Facilitator selection

While pilot classes were being identified, the advisory team discussed appropriate facilitators and a feasible plan for leading the curriculum within the school day. Different lead facilitator options were explored, including school staff members, teachers, and school counselors. Sustainable implementation was emphasized, as well as facilitation that would protect teachers' time. The advisory team ultimately decided that having college student members of the research team serve as near-peer leaders was both evidence-based (Becker & Stice, 2017) and feasible, given the research team's experience with leading this type of curriculum at the college level (Ciao et al., 2023). This also established a sustainable model over time, since the faculty researchers typically had 5-10 college students on their teams each year who were trained to run body image interventions.

The advisory team also determined that a combination of school staff and middle school student leaders would co-facilitate the pilot classes. In a middle school context, peer-led models can produce positive change in a mental health awareness intervention (Bulanda et al., 2014), and including middle school leadership was an important value within this work. While the involvement of school staff would not be sustainable over time as the program expanded, their presence for the curriculum pilot would allow for a blending of the content expertise (college facilitators), understanding of existing student-classroom dynamics (school staff), and lived experience (middle school leaders). The primary role of school staff and middle school leaders was to help students engage in activities and discuss the topics, sharing their experience when relevant.



Facilitator training

Pilot classes were led by three college facilitators who had previously completed a 16-hour training on the EVERYbody Project and who were designated as expert peer leaders (Ciao et al., 2023). These facilitators received an additional six hours of training across two days to prepare for leading the Body Justice Project. The training consisted of practicing the entirety of each session, including mock activities with all materials, followed by trainer and peer feedback to improve facilitation and adherence to the curriculum. Facilitators also discussed how to handle difficult situations in a classroom setting.

Four school staff members and two counselors served as staff co-facilitators. Staff did not receive formal training; all had reviewed the curriculum prior to co-leading, and some had participated in writing curriculum sections and providing feedback (CG, JG). All staff co-facilitators were advisory team members and had in-depth familiarity with the curriculum and its goals. They received a debrief of their responsibilities prior to the pilot, one of which included supporting the student co-facilitators.

Ten (out of 17) middle school student co-facilitators from the youth team were interested in co-leading one or more sessions of the pilot curriculum (four 8th graders, two 7th graders, and four 6th graders). Student co-leaders received information about their role in co-leadership from the program coordinator (e.g., expectations for co-leadership, clarifying level of involvement with activities). Student co-leader roles included helping students engage in activities, passing out and collecting materials, and providing example answers to questions to facilitate discussion around body image topics.

Pilot execution and feedback

Pilot lessons took place in spring 2022, with two 45-minute lessons per week. The entire curriculum was presented by the same college facilitator, and cofacilitators (staff and middle school students) attended the majority of sessions according to their schedules.

Given our goal of incorporating feedback on an ongoing basis, some midstream adaptations were made to meet teacher and student needs. Engagement from students in the 6th grade class appeared to be lower around week two of the intervention, and their teacher requested that the curriculum be made more interactive. One of the school site leads (JG) revised the curriculum based on her own experience in teaching 6th grade to add more interactive components to the rest of the program activities; this successfully improved engagement for the 6th graders. The curriculum for 7th and 8th grade classes was not modified during the pilot, but the changes for the younger grade served as a template for revising the curriculum for older grades after the pilot.

Feedback collection. Feedback was collected from a variety of sources during the pilot. After each lesson, teachers and students completed feedback forms on positives of lessons, questions, and revisions. Students completed a final form after the curriculum with their favorite topic, what they learned, and recommended changes. Similar questions were asked of teachers in postcurriculum interviews conducted by faculty researchers. Informal feedback was solicited from the research site coordinator (SP), who was involved in all aspects of program development and piloted two of the classes. Additionally, research team members recorded informal feedback from advisory team members and youth team leaders during debrief meetings. All feedback collected during the pilot was reviewed closely by the research team, but formal qualitative analysis was not conducted. Feedback themes represent our team's impressions across informants (teachers, students, college facilitators, research team leader, advisory team, and youth team). Table 2 presents an overview of feedback themes and examples related to curriculum (relevant content, improve clarity, increase engagement) and implementation (adequate training, effective facilitation, teacher support, and target audience).

Curriculum modification. After the pilot and feedback process was complete, the research team revised the curriculum, spearheaded by an incoming graduate student on the advisory team (AM). The majority of the curricular changes were made to address student engagement. While we kept the four weekly content areas, we removed or simplified activities to allow for more time, depth, and clarity in exploring topics (e.g., not personalizing the intuitive

Table 2. Themes in Pilot feedback.

Coming to all and	Francisco (compositionally)
Curriculum Feedback	Examples (source of feedback)
Relevant Content	 Overall curriculum was relevant to students lives (teachers, students)
Improve Clarity	 Favorite topics in curriculum were varied across curriculum (teachers, students) Add lesson objectives (teachers) Define terms and allow time for questions with new concepts (teachers, students)
Increase Engagement	 Revise handout instructions for clarity (teachers, students) Limit different topics and activities; more depth (teachers, college facilitators) Less script reading (teachers, students, college facilitators) More interactive activities and group work (teachers, students, college facilitators) More technology use, handouts, and visuals (teachers, college facilitators)
Implementation Feedback	Examples (source of feedback)
Adequate Facilitator Training	 College facilitators were well prepared by training (teachers, college facilitators) Student co-facilitators were underutilized; training needed (college facilitators, youth team)
Effective Facilitation	 Leaders cultivated a safe and comfortable environment/community for sharing (teachers) Leaders and teachers sharing created supportive environment (teachers, college
Teacher Support	 facilitators) Support and expertise from teachers could be utilized prior to and during implementation to leverage classroom norms and get to know students (teachers)
Target Audience	 7th and 8th graders better fit for curriculum than 6th grade (teachers, students, college facilitators, advisory team) 6th grade students had difficulty engaging during lessons Reflection and analysis skills may be more developed in older grades

eating hunger and fullness scale to allow more time to anchor student experiences onto the scale and discuss individual differences). Lesson objectives were added and a glossary was created to explain nuanced or complex words such as "intersectionality" and "privilege." The script was streamlined throughout all lessons by removing long explanatory sections and replacing them with key bullet points that leaders could summarize and share in their own words. As a final step, one of the school advisory team members (JG) modified the curriculum to enhance active learning and participation throughout exercises (e.g., turning a food myth worksheet activity into one where students moved across the room). Supporting materials were revised to include more visuals and videos and were made more accessible for visually impaired students. We also created more structure in the curriculum for middle school co-leadership, designating sections of the script that could be led by a youth team member.

Sustainability. In fall 2022, the advisory team reconvened with 9 out of 11 members returning. The advisory team goals shifted to planning the sustainable implementation of the Body Justice curriculum and a corresponding research evaluation. There was consensus that the curriculum should be implemented with 7th and 8th graders using college facilitators and youth coleaders. Advisory meetings were also used to discuss evaluation plans and identify research outcomes to assess. Together, the advisory team designed a within-participants research trial and sought IRB approval to formally evaluate the acceptability of the curriculum among teachers and students as well as outcomes like positive and negative body image, internalization of cultural ideals, disordered and intuitive eating, and appearance-related school culture. The broad implementation and research trial was initiated in the spring of 2023 with 13 classes across the 7th and 8th grade. Data from this study are forthcoming, and the results of the research study will be used to further modify implementation strategies over time.

Implementation reflection and lessons learned

Our team engaged in an intensive, year-long community-engaged research process to co-develop and pilot an evidence-informed, inclusive body image intervention for early adolescents in a school setting. Our use of communitybased program development allowed the curriculum to target the needs of this particular school and students, and it also provided the opportunity for community partners-including youth-being directly affected by the program to have agency and shared power over the process. There were many lessons learned about what supported and complicated this process, otherwise known as facilitators and barriers.

Implementation supports. Support factors included a *history of collabora*tion with the school that created trust and allowed us to move through the phases of our work at a quicker pace than is typical of some communityengaged research (Sanchez et al., 2023). Time is a common barrier to doing community-engaged research (e.g., Sanchez et al., 2023), and we were fortunate to have money to compensate key team members for their time (stipends for advisory team members, snacks and field trip incentives for youth team, a paid part-time research assistant who worked with the youth team) and the flexibility within the research team to attend meetings at times most convenient to school team members (e.g., during student lunches and during the school day). However, time is still a limited resource that impacted our work.

As a result of time spent developing relationships on the advisory team, we were able to cultivate a dynamic of trust that was bi-directional and facilitated the emergence of program champions. The research team trusted the school team to make many big picture decisions regarding program development and implementation. In turn, school members of the advisory team believed in the potential benefits this program could provide for students and championed the program. School staff advisory team members were instrumental in creating buy-in with teachers, and they were careful to protect teachers' time when planning sustainable implementation (e.g., advocating for college facilitators rather than teacher-led programming). They utilized their social capital and unique understanding of inter-school dynamics to advocate for teachers to allow their classes to be part of the pilot. Certainly, this feat could not have been accomplished by the research team alone, and the success of the pilot is heavily attributed to these program champions.

It is also important to specifically state that a key set of program champions – and an incredible asset in this work—were the students on the youth team who gave their time and expertise to make the curriculum as youth-centered as possible. The youth team role was crucial to understanding how body image concepts affect middle school aged-children in the present day. They were instrumental in supporting the justice-focused framework, with program content designed by and for individuals often marginalized within school and health promotion settings (Pellecchia et al., 2022). Youth team leaders were also strong advocates for the *Body Justice* program itself, from presenting to homeroom teachers why they should sign up to creating posters intended to spread body positive messaging. Youth co-leaders' lived experience and willingness to share their perspectives elevated this project immensely, and they were instrumental in shaping the program into what it is today.

Several structural elements that supported this work included the project funding mentioned above, protected research time for the PI through sabbatical leave, and institutional values that allowed the research team to prioritize community needs over typical research products like data collection and publication (Sanchez et al., 2023). The multi-level team structure was instrumental in accomplishing different goals within the implementation process (Pellecchia et al., 2022). This included team members with more traditional power and influence in the school setting (e.g., the assistant principal who created teacher buy-in and facilitated district approval) as well as those with relatively lesser power who were essential across all phases of the project (e.g., site leads within the school who recruited and sustained relationships with the youth team, helped to incorporate active learning into curriculum design, and consistently championed the program to students, teachers, other staff, and beyond). Collaborators on the research side were also intentionally varied in terms of research experience, with student leads to create mentorship and leadership opportunities for junior research team members (Sanchez et al., 2023). Of note, this particular implementation team came together quite naturally based on interest within each context. As our team looks toward expanding this curriculum-building model within other schools and contexts, we will intentionally build similar multi-level implementation teams throughout.

Implementation barriers. One tension that we navigated from start to finish was the absence of a clear road map for the process. Our implementation planning stages can be loosely mapped onto the Exploration, Preparation, Implementation, and Sustainment framework to identify community needs and tools (Exploration), create the evidence-informed intervention and plan for implementation (Preparation), pilot the new intervention (Implementation), and make long-term plans (Sustainment) (EPIS; Aarons et al., 2011). However, we did not purposely employ an existing implementation framework in our method, and threading a high level of community engagement through each of these steps meant we were without a structured process to follow. There are good community-engaged implementation examples published in the literature (e.g., Orengo-Aguayo et al., 2020), but it is difficult to derive a clear road map from work outside of the school context. While we did this intentionally in order to stay flexible and attuned to emerging needs, it was still sometimes difficult to navigate, especially when planning our resources (e.g., navigating short turnaround times between making decisions and putting them into action).

There also were various practical barriers within the school context that influenced our process including busy schedules that conflicted with meeting times (e.g., school-based members on the advisory team often had to step out to attend to students), constraints of the school schedule itself (e.g., building lessons around the 50-minute homeroom), and sacrificing some small-group discussion-based elements common within dissonance-based curricula (Stice et al., 2006) to accommodate the class-wide delivery. Additionally, when it came time to train students on the youth team to co-facilitate the curriculum, we simply did not have enough time due to student activities and other schoolbased schedule conflicts. Finally, because grade-specific adaptations were not part of the original curriculum, adaptations of this program for younger audiences may need to be a focus of future research.

While we made a repeated and conscious effort to minimize hierarchies within the team throughout the different phases of the project, there were instances where we ultimately had to default to typical power structures familiar to us when making decisions (e.g., letting the assistant principal decide when to hold the curriculum or the research team members propose what outcomes we might want to assess). We aimed to let the school lead in making key decisions; however, there were times when they preferred that the research team made the final decision (e.g., in the total number of sessions in the curriculum, in doing initial curriculum writing). It is hard to distinguish exactly why this occurred—whether it was due to the familiarity of the power structures, the trust in our research team's expertise, the lack of bandwidth to make every final decision, or some combination of all of these factors. Regardless, while we aimed for a high level of shared power and decision-making across the project, in reality, the level of power our partners had at different stages of the project varied. Furthermore, even in instances where our school partners did guide the decision making process, we acknowledge the potential bias of our school team's perspective. Given our snowball sampling approach to recruitment, the viewpoints and perspectives of the advisory team—who we perceived to be thought leaders of the school—may not have been entirely representative of the wider student body. Wherever possible, we tried to anticipate these barriers in advance and name them within the group's communication to keep them from exerting undue influence on the process.

Implications for eating disorders prevention and body image interventions

The creation and initial implementation of the Body Justice Project brings innovations to the eating disorder prevention field in a number of ways. It contributes to the minimal body of literature on inclusive, universal body image interventions, particularly school-based interventions for early adolescents (Chua et al., 2020; Kurz et al., 2022). The lack of diversity-focused programs leaves not only a huge gap in the literature but also a huge need for adolescents with marginalized and intersecting social identities who are vulnerable to the negative downstream effects of body image concerns (Bucchianeri et al., 2016; Roberts et al., 2021). The Body Justice Project provides an opportunity to critically explore the impact of limited diversity representation among body ideals and engage in activities to promote critical media consumption, non-diet nutrition habits, body neutrality, and similar values at a critical stage in development. School-based body image programs with media literacy and cognitive dissonance components are beneficial for middle school aged children (Kurz et al., 2022), and the Body Justice Project brings those frameworks together with body justice themes to promote body

liberation for all, acknowledging the inherent power structures reflected in cultural appearance ideals that primarily show white, cisgender, fit, able bodies. Future research will explore the impact of the Body Justice Project on body image, risk factor, and school climate outcomes, and we are hopeful that other researchers will continue addressing the intersections of different social identities (race, gender, sexuality, ability, and more) to create more inclusive body image interventions for adolescents.

One of the most unique and important facets of this work was the curriculum development process and the opportunity to work in partnership with the community who would receive the intervention. The current paper outlines an innovative process for using community-engaged research to work with students and school staff to co-create an evidence-informed body image curriculum and create sustainable implementation systems within schools. As the evidence-base for body image interventions continues to expand, the use of community-engaged research to connect evidence-based programs with community needs—and make them sustainable over time—will be an important way to center equity in the research and implementation process. We are hopeful that the methods described in this paper can serve as a guide to others who wish to engage in a similar process. While the specifics of the communityacademic partnership will depend on the goals and values of each team and context (including geographic region, where support for a justice-focused curriculum may vary), we believe that the steps we followed are replicable. In particular, we encourage others considering this work to proactively develop implementation supports and anticipate barriers so that they can lead to a smoother collaboration from the start. We invite others in the eating disorders and body image fields to utilize community partners in their future work.

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