

Body Project Recruitment & Implementation Guide

The *Body Project* is a dissonance-based prevention intervention that has successfully been delivered to over one million women around the world by researchers, psychologists, teachers, counselors, nurses, college students, and more. Different challenges can arise for facilitators depending on the type of facilitator, delivery setting and competing job demands. The level of facilitator institutional support can also vary widely, with some facilitators receiving full support to deliver the intervention during regular work hours, and others doing so on their own time. Further, some facilitators know some participants in their groups well, whereas others do not. Many facilitators have never worked with a manualized intervention before, which can present some challenges to how they are accustomed to conducting groups. Some facilitators have had years of prior clinical experience, and are not used to the structure and timing of the program, or are unfamiliar with the topic of eating disorder prevention. Others are college students, program coordinators, or active community members who may have limited clinical experience. Whatever the case, it is useful to have specific guidelines and suggestions to deal with common problems that might arise, and we have provided tips on how these issues can be successfully handled so that facilitators can focus on engaging participants in critiquing the appearance-ideal, which is key to inducing dissonance and central to the success of this program.

Securing Administrative Approval

Most individuals have been interested in offering the *Body Project* in high schools or universities. Securing administrative approval for such prevention programs should be relatively straightforward for school counselors, nurses, and psychologists who work in the school. In most settings these individuals should only have to propose that they be given permission to offer this program to students at elevated risk for eating disorders. Informing supervisors of the benefits of the *Body Project*, such as reducing current eating disorder symptoms, future onset of eating disorders and obesity, and improved psychosocial functioning, which have been found in several controlled trials conducted by independent research groups, should increase the chances of gaining approval. It can also be useful to point out that offering eating disorder prevention programs can serve an important public relations tool for the school. Given the prevalence of eating disorders among young women, it is likely that there are students in high schools or universities with serious eating disorders, which can be fatal. Parents of students with eating disorders are typically relieved to know that prevention programs are being provided. It also might be useful to highlight that data suggests that for every 100 high-risk young women who complete the intervention, there should be approximately nine fewer future cases of eating disorders (Stice, Marti, Spoor, Presnell, & Shaw, 2008). Thus, offering effective eating disorder prevention programs should reduce the clinical load for those who treat eating disorders and mental health concerns.

In general, school administrators are most receptive to offering prevention programs such as the *Body Project* when a) it is demonstrated that research supports the beneficial effects of the intervention for participants, b) implementing this program does not interfere with regular school activities (e.g., classes), and c) the program reduces rather than increases burden on school administrative staff by preventing future cases of eating disorders.

Recruitment

We recommend recruiting approximately eight female participants with body image concerns per group, as this is large enough to ensure that participants feel publicly accountable for statements they make against the appearance-ideal during the session, but small enough to ensure that everyone can participate verbally. This population is at elevated risk for eating pathology, and effects for prevention programs tend to be larger for young women at elevated risk (Stice, Shaw, & Marti, 2007). As noted, another advantage to this approach is that the intervention can be described as a body acceptance class, rather than an eating disorders prevention program, which reduces risk of stigmatization. However, several trials have found that this intervention is also efficacious for young women without body image concerns (Becker, Smith, & Ciao, 2005; Becker et al., 2008).

In some settings, it may be difficult to identify this many participants without active recruitment. Research suggests that many women who have or are at very high risk for developing an eating disorder do not seek or receive treatment on their own (Fairburn, Cooper, Doll, Norman, & O'Connor, 2000; Johnson, Cohen, Kasen, & Brook, 2002; Stice, Marti, Shaw, & Jaconis, 2009), suggesting that recruitment efforts should include an active outreach component.

We have identified several important factors that facilitate recruitment for *Body Project* groups. First, it is critical that potential participants know that the program is being offered in their school or community. A second feature of successful recruitment involves presenting the program as an interesting and fun opportunity for students. For many individuals, these topics are inherently interesting and provocative, so it is essential to capitalize on this during recruitment. Since many students are already overloaded with schoolwork; it is particularly important to avoid presenting the program as simply another instructional class requiring more work. However, we have described the *Body Project* as a “class” rather than a “group” to avoid any stigma associated with seeking treatment and to facilitate recruitment and retention. Third, participants are more likely to enroll in this program when potential barriers to attendance have been removed. For example, conducting the sessions on the school campus, rather than requiring participants to travel to another location, makes it easier to participate in the groups. The timing of the sessions can also impact recruitment. In our experience, the most effective times to hold sessions in high schools are immediately after school (generally, within 30 minutes of school dismissal), or at times (during study hall for high school students) that do not conflict with class schedules or compete with popular extracurricular activities (e.g., band practice). Holding sessions no more than once per week can also help increase attendance and avoid potential scheduling conflicts.

Participant Retention

Once participants have been recruited, a primary goal is retaining group members. One way of accomplishing this is to hold groups in a relaxed atmosphere, such as a conference room or other comfortable space, where participants can face each other in a circle or around a table, and sit in comfortable, casual seating. Physical features of the group (e.g., sitting in a circle or around a table) help create a space where people are willing to actively participate. Another key aspect of retention involves reminding participants about the sessions and home exercises. This is built into the intervention of the script, where in the first session participants are told of the importance of attending all sessions. In addition, we strongly encourage facilitators to send participants a text or email the day before each scheduled session and bring in their home exercises. Also, in the beginning of each session, group members publicly commit to actively participating, which we believe increases the odds that they will attend subsequent sessions. Lastly, making the sessions fun and engaging, particularly the first one, seems to facilitate attendance.

Participants may be more likely to attend sessions if they feel confident that their personal information will be treated sensitively. Occasionally, participants discuss personal situations that involve other students or friends outside the group. When doing so, they should be instructed to omit any personally identifying information (i.e., names). Ensuring that sensitive information disclosed in sessions remains confidential can promote group cohesion and trust, as well as encouraging continued participation.

For facilitators in the school settings, we recommend that the full group be offered during the course of a single semester or quarter. Student participants might have to drop out of the intervention if their course schedule changes across quarters or semesters, or if they are starting a new sport or job at this transition point. Further, the flow of the cumulative learning that is crucial to this program might be disrupted if all of the sessions are not conducted weekly.

General Tips for Running Groups

It is always important to set a professional tone when running *Body Project* groups, which entails taking time to review the script before each session and meeting with a co-facilitator (when applicable and possible) to review the management of the session materials (e.g., who will lead each section). It is also advisable to create a checklist of things to do before each session to ensure that you are prepared. When leading sessions, facilitators should always make sure to project their voices and convey as much enthusiasm for the group as they can. If a facilitator has a positive, energetic demeanor, it increases the odds that the participants will follow suit. Getting to know the names of the participants from the onset is also very helpful, as is encouraging participants to get to know each other. Making appropriate small talk with participants as they arrive for groups also helps build rapport. We strongly recommend creating a packet for each participant that includes the handouts for all the sessions. This is in printable form on the body project resource website: <https://bp.nationaleatingdisorders.org>.

Dealing with Talkative Group Members

As with any group intervention, during *Body Project* sessions there may be participants who dominate the discussion, either in a way that is relevant to the material, or takes the discussion off-track. When there is a verbally dominant participant, it is important to tactfully ask the person to wrap up their thought so that others can also have the chance to talk. Saying something like, “Those are really interesting ideas and thanks for sharing; we’re going to give someone else the chance to share now,” can often resolve this issue. Also, because there is a focus on media and sociocultural forces that contribute to the appearance-ideal, the conversation can potentially devolve into a detailed analysis of a particular TV show or celebrity. While some important critiques of the appearance-ideal can happen in this context, it is important to be aware that this can also potentially lead to off-topic discussion. In such a situation, saying something like, “It’s fun to talk about shows and celebrities, but I’d like to stay focused on...,” can get the group discussion back on track. We have seen some facilitators create a “parking lot” on the whiteboard or flip chart in which they draw a box and write down any off-topic conversations to revisit at the end of the sessions if there is time, or encourage the participants to continue the discussion once they leave the group.

Dealing with Quiet Group Members

Another common challenge that arises when implementing the *Body Project* is having very quiet participants, particularly with younger populations (e.g. 9th and 10th graders). Soliciting feedback and ensuring that *everyone* verbally critiques the appearance-ideal is central to the success of this program, thus it is important to draw out the quieter participants. One way to do this is to go around the room when doing exercises. You can ask for a volunteer to start the discussion, and then go around the room from there. Also, when doing role-plays, make sure that each person has at least 2 minutes to assume the anti-appearance-ideal stance. We have found that by using these techniques, even participants who may initially be quiet and reluctant to participate become engaged members of the group.

Preventing Dropout

We have learned through participant and facilitator evaluations that groups usually gel very nicely, that participants are comfortable and willing to participate, enjoying the in-session and home exercises. As noted, the best way to retain participants is to make the group fun and engaging. Although discussion topics should not be trivialized, there is ample room in the sessions for light-heartedness and humor. It is also incumbent on the facilitator to establish rapport with the group and foster group cohesion among participants. In addition, email and text reminders also serve to greatly increase participant retention.

Home Exercises Compliance

Again, it is very important that participants complete their home exercises. We have found that compliance is generally quite good, and participants seem to enjoy and feel empowered by the

exercises. Some of the exercises are challenging; therefore it is imperative that participants understand what they are supposed to do and troubleshoot any anticipated barriers to completion in the group. As noted, it is also fine to ask participants who may have not completed a home exercise (e.g., the letter to a younger girl about the costs of pursuing the appearance-ideal) to do so when the other participants are arriving for the group or reporting on how their home exercises went. If needed, participants can summarize what they would've done if they did not complete the home exercise.

Insufficient Amount of Time

The *Body Project* contains a great deal of material to cover, and experience indicates that it can be comfortably presented as written if the facilitators stick to the scripted material. Because the *Body Project* is often delivered in clinics on college campuses, or in high schools with shorter class periods, occasionally we have heard from facilitators that they find it difficult to cover all of the session material in less than a full hour. Accordingly, researchers developed two versions of the intervention: the four 1-hour session version of the enhanced-dissonance eating disorder prevention program, and a six 45-minute session version of the same program. The latter is easier to fit into shorter 50-minute class periods used in some settings.