

Diversity Committee E-Blast

February 2022

By: Mimi Morison & McKenzie Lockett

This Month's Newsletter At a Glance

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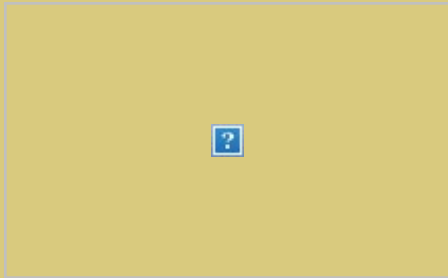


Black History Month: Celebrating Black Culture

February is Black History Month, a time to reflect on the historical and ongoing oppression of

In particular, “**blackfishing**” is a term coined by Wanna Thompson that refers to non-Black people adopting aspects of Black culture, such as hairstyles, fashion, make-up, and skin tone to gain clout, popularity, or profit.

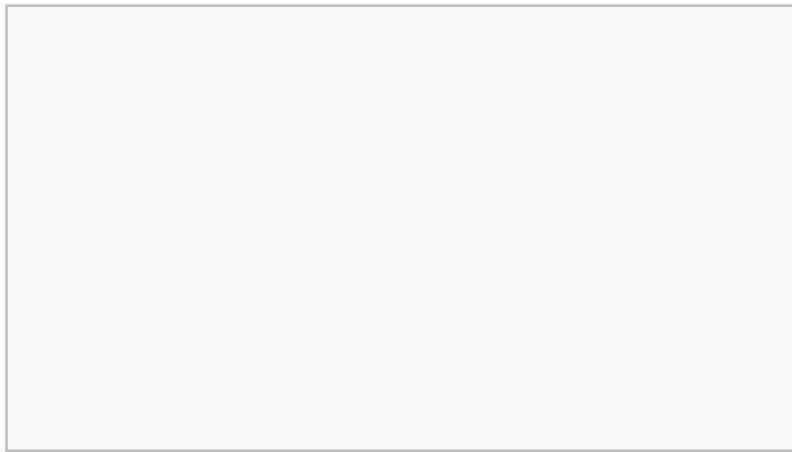
Black individuals and to honor the cultural, political, and social impact of Black people. The impact of Black artists and Black culture on the United States and globally is immense. For Black History Month, consider reflecting on your own engagement with Black culture and intentionally engaging with media that celebrates Black people. Black culture has historically been appropriated, particularly by White individuals. **Cultural appropriation**, which refers to the inappropriate adoption of an aspect of a minority culture, differs from other cultural practices as it is not based in the equitable exchange of cultural practices.



Blackfishing has been practiced by many White celebrities (such as Ariana Grande and Kim Kardashian) in an effort to appear attractive and trendy without experiencing the actual oppression or hardships faced by Black people. To learn more about the harmful effects and implications of blackfishing, click [here](#) to check out an informative Instagram post.

Additionally, consider checking out films focused on the experience of Black people that do not center “**Black trauma**” which refers to racial violence and trauma. Consuming only or primarily films that focus on black trauma (e.g., slavery films or films that focus on the Civil Rights Movement) inadvertently centers our cultural understanding of the Black experience as negative, traumatic, and based in oppression. Check out this [article](#) by Jordan Lewis highlighting 30 films that celebrate Black resilience, culture, and joy.

Lunar New Year vs Chinese New Year



*A photo of the Vietnamese New Year Celebration, *Tết Nguyên Đán*

Did you know many Asian countries celebrate the new year around the same time as Chinese New Year? Countries such as Korea, Vietnam, Tibet, Mongolia, and Japan have similar traditions to celebrate the new year, revolving around their respective lunar calendars. These Lunar New Year celebrations may or may not overlap entirely with the Chinese lunar calendar. Learn more [here](#).

Unsure what name to use? If someone who celebrates refers to their celebration as Chinese New Year, follow their lead! If you're not sure, a safe option may be to refer to the celebration as Lunar New Year so as not to inadvertently exclude those from different countries.

Thank you to our very own Stacy Yun (Geropsychology PhD Candidate) for bringing awareness to this distinction!

Upcoming Events

UCCS Office of Research: Gender, Intersectionality, Workload, and Academic Leadership at UCCS - A Project CREST Webinar (Thursday, February 10th)

Learn more about Project CREST in this webinar focused on intersectional identity and inclusion among faculty at UCCS. Click [here](#) to learn more and register.

Clinical training opportunity: Treating Diverse Populations (February 17th-18th)

Learn more and register [here](#).

UCCS Mosaic: Black History Month Slam Poetry Night (February 24th)

Learn more and register [here](#).

Faculty Spotlight: Dr. Heather Littleton, PhD

Dr. Heather Littleton (Director of Research Operations of the Lyda Hill Institute for Human Resilience and Associate Professor) currently has several research initiatives related to EDI. First, she is currently Co-PI with Dr. Katie Edwards of the University of Nebraska-Lincoln on a National Science Foundation funded grant that seeks to evaluate a novel multilevel sexual stigma model of intimate partner violence risk. This project seeks to examine how sexual stigma operating at both structural (e.g., campus policies, initiatives, resources) and individual (e.g., faculty/staff and student discriminatory beliefs and behaviors) levels affects risk for intimate partner violence victimization and perpetration among sexual minority (LGBQ+) college students via a longitudinal study of college students attending 18 medium and large-sized universities throughout the U.S. Second, she is currently Co-PI with Dr. Katie Edwards of the University of Nebraska-Lincoln on a National Institute of Alcohol Abuse and Alcoholism funded grant that seeks to develop and evaluate a telehealth delivered intimate partner violence (IPV) and alcohol use prevention program for LGBTQ+ youth. Existing research supports that LGBTQ+ youth and young adults are at greater risk for IPV and that existing prevention programs are less efficacious for LGBTQ+ individuals. Therefore, the to-be-evaluated intervention integrates existing evidence-based prevention strategies with intervention strategies addressing minority stress and seeking to enhance positive self-identity and community for LGBTQ+ youth. Finally, Dr. Littleton is currently supervising two racial/ethnic minority (REM) clinical health psychology doctoral students at East Carolina University on a project exploring experiences of different forms of racism (e.g., microaggressions, discrimination, harassment) on campus for REM college students, including evaluating how colleges/universities responded to the racial unrest/protests this past summer and the impact of these incidents and their universities' responses on students' well-being.

Learn: Black Students' Experiences Attending Predominantly White Universities

What are Black students' experiences attending predominantly White universities? This qualitative study by Osbourne, Barnett, and Blackwood (2021) surveyed Black students in the United Kingdom, exploring how a predominantly White environment impacts their self-perceptions regarding their racial identity (e.g., feeling "othered"). These findings have important implications for Black student's sense of belonging on campuses and their academic well-being. See the study [here](#) for more details.

Editorial: Weight Stigma and Implications for Psychological Science, Education, and Practice

By: McKenzie Lockett

Fatphobia, also known as weight stigma, refers to negative bias towards fat or larger size people. Weight stigma typically involves a sense of blame and moral failing, including labeling overweight people as lazy, self-indulgent, and greedy (Atherton, 2021; Vartanian, 2010). Fatphobic biases are often justified with simplistic beliefs that weight loss is easily gained through diet and exercise. However, other factors also influence weight, including sleep, stress, hormonal disruptions, and medications (Chaput et al., 2014). Thus, assuming that an overweight person could easily lose weight – or is larger due to their exercise and diet – is incorrect and harmful. These negative beliefs directly impact the quality of care that fat people receive in medical and psychological settings. For example, overweight people report that experiencing stigma and discrimination from medical professionals leads to anxiety, low self-esteem, and avoidance of medical services (Puhl et al., 2014).

Kinavey and Cool (2019) highlight how anti-fat bias influences psychotherapeutic outcomes. Qualitative and quantitative research has shown that therapists are prone to centralizing weight to a client's presenting problem (Puhl et al., 2014; Schafer, 2014), which – in addition to distracting from other important issues – may negatively influence the therapeutic relationship (Kinavey & Cool, 2019). Similarly, weight stigma has implications for students in educational settings. Overweight students on college campuses report experiencing weight stigma from college peers, leading to psychological distress, including depression and anxiety (Stevens et al., 2018). Across different domains, physical limitations in spaces that do not consider size diversity lead fat people to engage in social and occupational contexts less (Stevens, 2018).

Additionally, it is important to consider that there are several social determinants of obesity, which refer to economic and social conditions that influence people and communities (Bryant et al. 2015). For example, neighborhood socioeconomic status is a strong social determinant of weight among US children and adolescents (Rossen & Talih, 2014). Similarly, quality of schooling and safety of workplaces contribute to health and obesity (Bryant et al., 2015). An intersectional approach to understanding fatphobia and weight-related discrimination is important for further contextualizing fatphobia. Women report experiencing weight stigma more frequently compared to men (Papadopoulos & Brennan, 2015), and this is likely due to the beauty standards that women are held to (Fabrizo et al., 2014). Along these lines, one study found that people are more likely to see fat, versus lean, women (but not men) as guilty in a simulated courtroom setting (Schvey et al., 2013). Similarly, weight stigma aimed at people of color may further serve to justify discrimination and

prejudice (Justin, 2021). Additionally, people of different races may cope with weight stigma differently – one study found that, compared to White women, Black women were less likely to cope with weight stigma with disordered eating, whereas Hispanic women were more likely to cope with disordered eating (Himmelstein et al., 2017). Intersectional considerations must be made when considering individual's different experiences with weight stigma and the ways in which it affects them.

Healthy at every size (HAES) is a framework based on social justice and body acceptance that shifts the focus from weight loss to health-sustaining among individuals of all sizes. Within the HAES framework, weight is not a factor in determining health. Instead, HAES focuses on improving one's relationship with their body and food while encouraging social justice activism that resists weight stigma and its intersections with other prejudices (Bombak, 2014). Studies have shown that HAES-based interventions are associated with improvements in health behaviors, biological health indicators (e.g., blood pressure), as well as psychosocial outcomes; additionally, this approach appears to be associated with long-term utilization of health behaviors compared to typical weight loss approaches, which are more difficult to maintain (Medvedyuk et al., 2018).

In summary, fatphobia is pervasive and damaging. Considering one's internalization of weight stigma and how this influences one's relationship with one's own body as well as their work with others is an important first step in engaging in weight-related and body-related activism. The impact of weight stigma on students, patients, and vulnerable communities has significant implications for social justice, education, and health services. For people who have internalized fatphobic beliefs, engaging with and adopting a framework like HAES can have positive benefits.

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