

IN·clued Adaptations Guidance for the IN·clued Health Center Workshop

Activity	✓ Green Light	● Yellow Light	✗ Red Light
SECTION 1: Introductions and Warm-Up			
Presenter and Project Introduction	<ul style="list-style-type: none"> ✓ Increasing the interactivity of this activity, such as asking participants to read EQs out loud for the group. ✓ Lengthening facilitator introductions to increase personal connection with the participants; e.g. share a meaningful (and appropriate) story about why this workshop matters to them. ✓ Adding other heads-ups or disclaimers related to logistics or the group. 		<ul style="list-style-type: none"> ✗ Skipping introductions of facilitators and the workshop itself.
Participant Introductions	<ul style="list-style-type: none"> ✓ Lengthening introductions by adding an interactive component (e.g. inviting participants to walk around and introduce themselves to colleagues with an additional prompt). ✓ Expanding on the explanation of why gender pronouns are shared. 	<ul style="list-style-type: none"> ● Doing introductions in smaller groups if participant group is especially large. 	<ul style="list-style-type: none"> ✗ Skipping this activity entirely. ✗ Using a very high-risk introductory game to facilitate introductions.
Agenda, Content Warning, Group Agreements	<ul style="list-style-type: none"> ✓ Adding group agreements to the list, as requested by facilitators or participants (e.g. no taking pictures of participants without consent). ✓ Adding other elements of trauma-informed best practices to the content warning. 	<ul style="list-style-type: none"> ● Referring to posted agenda without reviewing it. 	<ul style="list-style-type: none"> ✗ Skipping this activity entirely.

LGBTQ Terms and Definitions	<ul style="list-style-type: none"> ✓ Lengthening this activity to spend more time clarifying terms. ✓ Adding a review of the LGBTQ Terms and Definitions glossary as a homework assignment prior to the workshop. ✓ Increasing interactivity of this activity by adding a game or movement component. ✓ Updating terms and definitions as language changes. Terms and definitions should always be chosen from reputable sources and developed or approved by LGBTQ people. 	<ul style="list-style-type: none"> ● Moving this content to homework and removing it from the workshop. ● Having peer educators lead this activity. ● Inviting participants to define terms in their own words. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing terms and definitions by using language that was not developed or approved by LGBTQ people and could be considered offensive, inaccurate, or oppressive.
Group Warm-up Activity	<ul style="list-style-type: none"> ✓ Changing the prompts on the warm-up survey to reflect current language or points of interest. ✓ Using new technologies, such as online polling programs, to make this activity differently interactive. 	<ul style="list-style-type: none"> ● Selecting a different warm-up activity to protect confidentiality of participants (e.g. if you have a very small participant group). ● Only selecting a few of the survey statements to read aloud. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Asking people to publicly disclose their personal responses to the survey. ✗ Making any shaming or disappointed-sounding comments about the responses from participants.

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SECTION 2: Statistics, Messages, and Beliefs

Remember Me Poem	<ul style="list-style-type: none"> ✓ Peer educators writing new or revised clauses to the poem to reflect relevant LGBTQ identities. 	<ul style="list-style-type: none"> • Shortening the poem. • Adult facilitator reading some of the lines of the poem. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Rewriting the poem using outdated, offensive, or anti-LGBTQ language.
Believe It or Not	<ul style="list-style-type: none"> ✓ Updating the statistics and facts shared in the activity to reflect current research. ✓ Making the activity more interactive by inviting participants to read from the slide, or asking participants what their ideas are about the statistics to foster dialogue. 	<ul style="list-style-type: none"> • Shortening or lengthening this activity by removing some statistics or adding new ones. • Not taking time to provide any background information about each statistic or fact shared in the activity. • Adapting the activity to another interactive game that does not have the possibility of any of the participants being “wrong” in their responses, to enhance safe space in the workshop. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing the statistics using non-reputable sources or using language that is not affirming of LGBTQ young people.
Exploring Messages and Beliefs	<ul style="list-style-type: none"> ✓ Updating the statements on the slide to reflect relevant stereotypes or biased messages commonly heard in your community. ✓ Making this activity more interactive or spending more time discussing the messages participants received growing up. 	<ul style="list-style-type: none"> • Changing the images on the slides. • Reducing the interactivity of the discussion section of the activity to save time. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Removing the personal reflection element of the activity.
Binary Thinking and Sexual Identities	<ul style="list-style-type: none"> ✓ Adapting the scripting for this activity to enhance clarity of terms and definitions. ✓ Increasing time during this activity for reflection and/or dialogue. 	<ul style="list-style-type: none"> • Adapting this activity to include an educational video or anecdote to deepen participants’ understanding of how binary thinking can be harmful. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing the key message of the activity.

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SECTION 3: Practice Recommendations for LGBTQ Inclusive Care

<p>What Not To Do Role-Play</p>	<ul style="list-style-type: none"> ✓ Using props and wardrobe changes to improve the drama of the skit. ✓ Changing the names and tweaking language in the role-play to enhance relatability and realism of the characters and plot. ✓ Changing the identity of the protagonist to another LGBTQ identity that resonates with the peer educators or particular community. 	<ul style="list-style-type: none"> • Shortening or lengthening the skit. • Having an adult play the protagonist. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing the script to be less realistic or not center on LGBTQ experience. ✗ Skipping the debrief after the skit.
<p>Six Practice Recommendations</p>	<ul style="list-style-type: none"> ✓ Increasing interactivity of this section (e.g. posting six recommendations on flip chart paper around the room and having participants brainstorm reasons these recommendations make the clinic environment more LGBTQ youth friendly). ✓ Inviting additional dialogue around the recommendations. 	<ul style="list-style-type: none"> • Adding or changing a practice recommendation. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing the practice recommendations to the extent they no longer center on the needs and comfort of LGBTQ young people.
<p>What To Do Role-Play</p>	<ul style="list-style-type: none"> ✓ Using props and wardrobe changes to improve the drama of the skit. ✓ Changing the names and tweaking language in the roleplay to enhance relatability and realism of the characters and plot. ✓ Changing the identity of the protagonist to another LGBTQ identity that resonates with the peer educators or particular community. 	<ul style="list-style-type: none"> • Shortening or lengthening the skit. • Having an adult play the protagonist. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing the script to be less realistic or not center LGBTQ experience. ✗ Skipping the debrief after the skit.

Implementing Inclusive Practices	<ul style="list-style-type: none"> ✓ Bringing in clinic-specific information about the inclusive or problematic policies and practices the clinic is engaging in to discuss with the group. ✓ Lengthening the duration of this activity to accommodate an additional discussion of action planning. 	<ul style="list-style-type: none"> • Shortening the amount of time given for individual reflection and group brainstorming. • Replacing the reminder sticker with a different reminder. 	<ul style="list-style-type: none"> ✗ Skipping this activity entirely. ✗ Changing the prompts to be vague or generic, rather than asking participants to apply what they've learned to their lives and specific clinic workplace.
Closure: Remember Me Revisited	<ul style="list-style-type: none"> ✓ Enhancing interactivity of this activity. ✓ Ensuring every participant gives at least one response to one of the lines of the poem. 	<ul style="list-style-type: none"> • Adding a debrief or additional closure. 	<ul style="list-style-type: none"> ✗ Skipping this activity entirely.

WORKSHOP Part 2

Energizer–LGBTQ Catch Phrase	<ul style="list-style-type: none"> ✓ Updating the terms and words used during the activity. ✓ Clarifying instructions or playing a different version of Catch Phrase. 	<ul style="list-style-type: none"> • Replacing with a different energizer that also gets participants to practice saying words related to LGBTQ experience or sexuality. • Skipping an energizer to save time. 	<ul style="list-style-type: none"> ✗ Adding offensive or harmful words and terms to the pile used.
Review and Preparation	<ul style="list-style-type: none"> ✓ Increasing interactivity of this activity ✓ Lengthening this activity to include more concrete action planning. Inviting additional dialogue around the recommendations. 	<ul style="list-style-type: none"> • Shortening this activity to only include preparation for simulations. 	<ul style="list-style-type: none"> ✗ Skipping this activity.

<p>Patient Simulations (**This activity requires a lot of advance preparation and planning, and will look different with each implementation. The flow and structure of this activity depends on the number of participants, number of peer educators, and number of breakout rooms available in the training space**)</p>	<ul style="list-style-type: none"> ✓ Giving each participant more time for each simulation. ✓ Adapting activity so participants practice more than once with each character in order to incorporate feedback in real time. 	<ul style="list-style-type: none"> ● Shortening this activity. ● Adapting this activity so that participants only get one opportunity to practice with a patient character. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Having adult facilitators play patient characters. ✗ Allowing peer educators to play themselves rather than adopting a character persona. ✗ Allowing someone who has not been adequately trained or prepared to play a patient character.
<p>Simulation Debrief and Q&A</p>	<ul style="list-style-type: none"> ✓ Lengthening this activity. ✓ Increasing interactivity of this activity. 	<ul style="list-style-type: none"> ● Adding additional debrief questions. ● Inviting peer educators to share more general feedback or engage in dialogue with participants. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Removing debrief questions from this activity. ✗ Inviting peer educators to share specific critiques for individual participants during this activity.
<p>Next Steps, Advice from Teens, and Closure</p>	<ul style="list-style-type: none"> ✓ Updating the advice from teens to reflect current advice your peer educators are giving. ✓ Enhancing the closure to encourage more reflection or dialogue on the part of participants. 	<ul style="list-style-type: none"> ● Removing Advice from Teens. ● Changing the closure question. 	<ul style="list-style-type: none"> ✗ Skipping this activity. ✗ Changing the closure question to not ask participants to personally reflect or apply something they learned.