

# Changing how we teach weight and nutrition



By Dr Vivienne Lewis



How many of us recall having to calculate our body-mass index (BMI) as children at school, prompting comparisons of our weight with that of our peers? Or perhaps we remember references to calories and diets in the classroom.

Now, the Australian curriculum is changing how children and young people are educated about their bodies and what they eat, in a bid to prevent eating disorders.

Hundreds of references to terms including BMI, weight, calories and diets have been removed from school resources by the Australian Curriculum, Assessment and Reporting Authority, replaced with terminology such as “balanced nutrition”.

As a clinical psychologist specialising in the treatment of children and young people with body image and eating disorders, I welcome these changes. Given what we know about the links between weight stigma and the development of eating disorders, they’re long overdue.

## **Weight stigma starts early**

Weight stigma and diet culture are rife in our society.

People will often use words such as “fat” and “guilt” to cast shame over their own or others’ body size and food choices. On the flip side, the latest diets and other weight loss techniques are regularly hot topics of conversation among friends and colleagues.

Evidence shows this sort of talk around children and young people can be very damaging, in some cases contributing to the development of disordered eating. So in the school environment we need to be especially mindful of the language we use

around people's bodies and food.

Children learn about their bodies and nutrition when they start school, and this can be where a lot of misinformation (such as being fearful of certain foods because they're deemed to be "bad" for us) and stigma begins. Peer teasing for size, weight and shape is common and increases the risk of a child or young person developing an eating disorder.

I treat many adults who have severe eating disorders partly as a result of growing up in a society that overvalues thinness, promotes dieting for weight loss, and shames people who are overweight or obese. Much of this appears to have come from the influences of their schooling.

### **Fostering positive body image**

We've known for a long time that early intervention through educating our children about wellbeing and positive mental health strategies is important to reduce the incidence of severe mental health conditions.

For eating disorders specifically, positive role modelling by adults around how we talk about our own and others' bodies is crucial.

This can include describing people for their interests and qualities rather than their appearance, and teaching children about gratitude and respect towards each other.

Research shows learning about body acceptance and appreciation is important for both males and females in developing a positive body image. Those children and young people who have a positive relationship with their bodies and food are much less likely to develop eating disorders.

Teachers have an important role in educating our children about body respect and having a healthy relationship with their bodies and eating.

This can be achieved through actions including avoiding comments about people's appearances, talking about food for its function in our bodies, and not attaching moral values (such as "good" or "bad") to the foods we eat. Indeed, the curriculum overhaul warns teachers against using these descriptors.

### **How to talk about food with kids**

Learning about the importance of feeding our bodies and listening to our body's needs is important for children.

We need to talk about food for its function in our bodies (such as carbohydrates for energy and fats for our brain). We should talk about foods we eat to help us concentrate and fuel our bodies as well as making us strong and helping us feel well.

The curriculum changes appear to be designed to connect nutrition to physical and mental health in these ways.

Food should also be presented as an enjoyable and a social activity (for example, sharing food with others).

Everyone's appetite is different at different times and that's ok. Helping children understand how to respond to their appetite and knowing when they're hungry and full is important, as we know this helps with issues such as restrictive and binge eating, two common disordered eating behaviours.

### **Everyone has a role**

Hopefully we are on the way to saying goodbye to the harm of weight stigma and diet talk in schools.

The biggest challenge is that we live in an appearance-obsessed world with a diet culture and many people have a fixed way of thinking about food and bodies that's hard to shift. As adults we have to work really hard to be better role models.

While teachers play a crucial role, children also need other adults to go to who make them feel understood and accepted. Being a positive role model means listening to children's concerns, and being mindful of the way you talk about yours and others' bodies, as well as the sort of language you use around eating and food.

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