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THE EMBRACE COLLECTIVE

# Creating Safe School Environments for All Bodies

# Background: Body image and eating disorders

Young people, teachers and parents tell us that body image, eating disorders and mental health challenges are big issues for young people.

Eating disorders are serious psychological illnesses that have the highest level of mortality of all psychological conditions (Arcelus et al., 2011). According to recent Australian research, 22% of the adolescent population, 33% of girls and 13% of boys aged 11-19 met the criteria for an eating disorder (Mitchison et al., 2020). Eating disorders affect people of all cultures and genders, across the lifespan, and in disadvantaged areas more than high socioeconomic status (Mikhail et al., 2021). There has been a 63% increase in eating disorder presentations to the Children's Hospital in Melbourne alone since the Covid Pandemic (Springall et al., 2022) and in particular, incidence among children aged 5-12 has doubled (Morris et al., 2022). These conditions affect one third of all girls in secondary schools - they are no longer considered 'rare'.

> ## 22% of adolescents meet the criteria for eating disorders, and 77% are in body image distress.

Given the challenges of accessing treatment for eating disorders, it is important that we come together to prevent these issues. The main goal of prevention is to increase the protective factors and decrease the risk factors for body dissatisfaction in order to promote the development of positive body image. Prevention can be about adding programs in, but more often than not, it's about avoiding triggering activities and practices that cause unintended harm.

> ## Prevention can be about adding programs in, but more often than not, it's about avoiding triggering activities and practices that cause unintended harm.

Schools are powerful settings that can support wellbeing. Young people spend roughly half of their waking hours in the school environment, and this is a key setting for interaction with their peers - one of the strongest influences on the development of body image. While social media is often blamed for poor body image, and it does have an influence, it is not the only contributing factor.

Over the past 20 years, the focus of the majority of health messaging we have received has been about weight. Much of the messaging in this space over the last 20 years has actually exacerbated body image concerns, eating disorders and discrimination on the basis of weight. The focus on weight, and 'anti-ob*sity' campaigns, media and programs have created an environment where young people are terrified of sugar and fat, and of gaining weight. Research has shown that the approach to these public health campaigns has triggered eating disorders (Bristow et al., 2022).

According to reports from parents around Australia, and research that reviewed case reports of people with eating disorders, there are many activities and lessons in school that are inadvertently harmful to young people who are at risk for, experiencing, or in recovery from eating disorders (Chen & Couturier, 2019).

This document aims to update and inform teachers to create awareness about the nature of activities that may cause harm, so that we can keep our kids happy, healthy and focused on learning at school.

# Key research updates

**1**   There is now a lot of evidence that suggests it is the shame and discrimination that people experience about their weight that is more strongly associated with health conditions, not weight itself. [1]

**2**   Creating shame around weight does not motivate people to engage in health behaviours, and usually results in weight gain over time, not weight loss. [2]

**3**   Appearance-based comments and bullying in childhood and adolescence are serious. Research shows that appearance and weight-related comments and teasing are associated with body dissatisfaction and disordered eating. [3]

[1] Hunger & Tomiyama, 2014

[2] Daly et al., 2019; Major et al., 2014; Sonneville et al., 2016; Andrew et al., 2016

[3] Chen & Couturier, 2019; Lie et al., 2019; Menzel et al., 2010

# Key messages for school settings

**Positive messages that promote wellbeing**

- All bodies are different, and it is our differences that make us unique and special.
- You are OK, just as you are.
- What our bodies can do, who we are and what we are doing in the world is more important than what we look like.
- There is no need to be so critical of ourselves. Being kind to ourselves will support us for life and help us to be happy and healthy.
- What we see on screens is not a reflection of reality.
- There are so many things that influence our appearance, body size and shape - we are not in control of all of them.

**Problematic messages**

- Anything that suggests that young people need to change to be accepted.
- Anything that promotes social comparisons in terms of bodies, weight and appearance.
- Anything promoting shame about appearance, bodies and weight.
- That we can and should 'control' our weight through tracking, counting and restriction of food.

# Body image friendly language

Much of the language used around bodies, weight and appearance over the past 40 years that has become normalised is actually very problematic. Many government preventive health strategy documents now stipulate that health promotion should be 'non-stigmatising'.

in schools, we recommend the following strategies to achieve this:

- Avoid labelling bodies in ways that may have positive or negative connotations leading to judgement, including 'skinny', 'thin', 'underweight', 'normal weight', 'overweight', 'obese', 'fat' and 'chubby'. While 'obesity' can be used in relation to medical research in certain contexts, it shouldn't be used in relation to individual people. The recommended term to use is 'people in larger bodies'.

- Avoid reference to an 'obesity epidemic' or anything that indicates a problem with weight in Australia, or discusses weight as a health issue or a disease, as this creates a moral panic about weight.

- Avoid calling foods 'junk' foods, and categorising them as 'good' or 'bad' foods. The use of 'healthy' and 'unhealthy' is also becoming problematic. There is no need to categorise foods, just call them what they are - strawberries, chips, chocolate, etc.

- Avoid commenting on appearance – positive or negative. Positive compliments about appearance can reinforce the desirability of smaller body sizes.

- Discourage positive or negative body commentary among students. Comparing our bodies to others is not helpful, and the less we talk about our appearance, the better.

- Negative comments, body shaming and bullying about appearance can be extremely damaging for young people. A zero-tolerance rule for negative body commentary is recommended.

- Avoid commenting on your own body or discussing your own body change behaviours (e.g. dieting, exercise, weight training, use of supplements). Teachers are role-modelling to students even when they don't think they are 'teaching' something.

"Negative comments, body shaming, and bullying about weight and appearance are not 'harmless'. High quality research confirms that **there is an association between weight-related bullying and commentary and body dissatisfaction and eating disorders** (Lie et al., 2019; Menzel et al., 2010). In a Canadian study, 14% of young people in treatment for eating disorders reported that bullying directly contributed to their condition."
Chen & Couturier, 2019

# Lessons that do no harm

Body image is a very complex issue. Unlike some other areas in health education, there are certain approaches that are not recommended when teaching about body image due to the potential to cause unintended harm.

If you've been teaching for a short or a long time, it is likely that you have delivered some of these lessons before. We have all done this. The aim of this document is not to create shame around things that have been done in the past, but to educate about the new knowledge that can be used to inform the way we do things in the future.

As new research shows that some activities are not safe for young people, curriculum and programming needs to be revised accordingly. As we know better, we can do differently.

# When teaching about food, weight and health

In general, food and nutrition classes should focus more on fuelling the body, eating a wide variety of foods, increasing fruit and vege intake, and getting adequate nutrition from food. These classes should not discuss weight, weight loss or weight control, or perpetuate misinformation about the level of control that we have in relation to our body size based on the food we eat.

**Avoid asking students to record food intake or keep a 'food diary', including the use of apps and online tools to do this**

Recording food intake through the use of a food diary and eventual analysis of calories, fat or sugar intake is not recommended. These activities introduce adolescents to known elements of obsessive weight control which could be pursued by those with a predisposition towards disordered eating. The likelihood of inaccurate records; possibility of judgement by the teacher and their peers, which may cause shame; and the high possibility of social comparison are reasons enough to avoid this practice.

**Avoid weighing students or conducting other anthropometric measures**

Weighing students and conducting measures of body fat percentage are known to cause shame and allows for social comparison. There is also generally not the opportunity for proper debriefing about what weight means in the classroom environment. Being weighed at school, or being asked to discuss what they weigh in classroom settings, is often mentioned as a triggering activity by young people in treatment for an eating disorder (Chen & Couturier, 2019) and being labelled in higher weight categories (e.g. 'overweight') is known to lead to weight gain over time (Sonneville et al., 2016).

**Avoid comparison of body measurements or calculation of BMI**

The body mass index (BMI) is flawed, was never intended for use at an individual level, and should not be taught in school. There is evidence that calculating BMI and categorising people into weight categories of 'underweight', 'healthy weight' etc leads to shame and weight gain over time, and there is no evidence that this leads to the adoption of health behaviours (Hahn et al., 2018).

**Avoid exploring body types using 'ectomorph', 'endomorph' and 'mesomorph'**

This approach is very outdated and may contribute to further labelling and weight-related teasing of those students in the classroom who fit under each category. Emphasis of the diversity of body types is important, but this could be done by discussing the genetic influence on height and weight, and the lack of diversity of body shapes presented in the media.

# When teaching about body image

It is important that young people learn tools and strategies to support the development of more positive body image. This can be done in a range of ways in the Health and Physical Education Curriculum, or as cross-curricular priorities and wellbeing programs. It is important that body image is taught using a strengths-based approach that does not focus on the clinical diagnosis of body dysmorphia, and that key messages and activities are delivered in age-appropriate ways. The following four approaches and key messages are appropriate across all age levels, and can contribute to more positive body image.

| Key message | Evidence |
| --- | --- |
| Celebrate diversity | The key message here is that, if we celebrate diversity in others and in the world, we can also recognise our own uniqueness and contribution to the diversity of teams, classrooms, schools and communities. Promoting empathy and compassion for others, and reducing appearance-based bullying and body shaming, can support more positive body image and protect against mental health challenges including eating disorders (Fowler et al., 2021). |
| Focus on functionality | The more we focus on what our bodies can do, the less we tend to worry about the way we look. When we teach young people to appreciate the functionality of their bodies, it can help to reduce the extent to which they see themselves as objects, or value their appearance as a key indicator of their worth (Alleva et al., 2015; Alleva & Tylka, 2021; Mulgrew & Tiggemann, 2018). |
| Be kind to yourself | A great deal of high-quality research now supports self-compassion as a critical tool for young people to develop in order to have a broad-spectrum positive impact on physical health behaviours, physical health outcomes, mental health outcomes and body appreciation (Phillips & Hine, 2021; Ferrari et al., 2019; Homan & Tylka, 2015; Siegal et al., 2020; Linardon et al., 2022). While there are specific programs and resources to teach and encourage self-compassion, encouraging young people to be less critical of themselves in everyday situations as they arise is also likely to be helpful, and may help them to use less critical self-talk as a more automatic response than self-criticism. |
| Real role models | A great deal of previous body image interventions have focused on enhancing media literacy, with some success (Kurz et al., 2021) but also some challenges (Gordon et al., 2021). When teaching media literacy in relation to body image, it is important to do this in ways that don't show young people more 'idealised' images. Critiquing the accuracy and credibility of health information perpetuated by 'influencers' can be useful.  Engaging young people in the viewing and development of more body positive social media content has been shown to be beneficial (Rodgers et al., 2022). For example, students could create content showing how they value what their bodies can do rather than what they look like, or role model responses to the judgemental or  hurtful things young people might say to each other about their appearance. |

# When teaching about eating disorders

It is important that teachers are educated about eating disorders and can manage conversations in class when they arise, but many dedicated activities on this topic are problematic as they may be suggestive, glamorise eating disorders, or perpetuate misinformation and stigma.

**Avoid teaching lists of 'symptoms' of eating disorders**

Teaching about the 'symptoms' of eating disorders or the behaviours associated with eating disorders is not recommended in the classroom setting as this may appear as 'instructions' to young people who might want to lose weight (Yager, 2007).

**Avoid using books and videos of those who have eating disorders**

Articles, books and videos about people's personal stories and eating disorder journeys might inadvertently make them alluring to impressionable young people and can describe explicit details of disordered eating behaviours and how to go about engaging in them. Research has found that eating disorder memoirs can increase disordered eating behaviour engagement in young people (Rennick-Egglestone et al., 2019).

**Avoid showing emotive films about food**

Film is a powerful medium. However, films like *Super Size Me* and *That Sugar Film* may be potentially triggering to young people who are vulnerable to, experiencing, or recovering from eating disorders, and there are case reports of films like these triggering eating disorders (Ray & Eddy, 2017). The information in these films is not backed by science, and they are not recommended.

**Avoid using images of people with eating disorders**

You can't tell if someone has an eating disorder by looking at them. There is no evidence that the 'shock value' of images of people in thin bodies helps young people avoid disordered eating behaviours. In fact, these images replicate dangerous 'pro-ana' content that people with eating disorders often seek out online (Mento et al., 2021). Showing only images of thin people perpetuates misinformation about the range of eating disorders that are problematic and may prevent people reaching out for help if they don't think they look like the images they have seen.

**Avoid using role plays of students with very poor body image, self esteem or eating disorders**

While role plays can be an effective learning tool and may assist in the development of a young person's social and emotional skills, using this approach may raise personal concerns that cannot be fully addressed within a group or school context. It can also increase negative feelings and thoughts about themselves.

**Avoid allowing students to complete research assignments on body image or eating disorders**

Avoid setting assignments or presentations where students research eating disorders as there is a range of information available online that is not developmentally appropriate for young people. Students who choose to do assignments on body image or eating disorders may be interested in this topic due to their own personal vulnerabilities in this area.

**Avoid using pictures of thin or muscular bodies that meet societal 'ideals'**

Many research studies have confirmed that viewing media images of ideal bodies contributes to body dissatisfaction (de Valle et al., 2021). Viewing such images in the classroom setting (including images shown in videos, PowerPoint presentations or cutting out magazine images for collages) is not recommended.

# Body image considerations for physical education

Physical activity and physical education offer opportunities to increase body image, physical and mental health. It is important to ensure that the PE setting is as inclusive as possible in order to create a safe and welcoming environment where all young people feel like they can be active without judgement.

**Focus of attention**

- Adolescents are likely to feel as though everybody is staring at them, even if this is not the case. It is recommended that activities be organised so that small peer groups engage in a number of activities concurrently, rather than the whole class standing by to watch individuals performing a task one at a time.

**Nature of activities**

- Offer alternatives to traditional competitive sports - especially if this offers an introduction to activities that students can access outside of school. Alternative activities (yoga, Pilates, self-defence, kickboxing) can allow for a wider range of students to experience success.
- Allow students to have a say in the activities that will be included in the program.

**Bullying and teasing**

- Students tell us that they feel vulnerable during sport and physical education, when their bodies and skills are on display. Negative comments about student's sporting abilities or their appearance at this vulnerable time may deter them from engaging in physical activity in the future (Greenleaf et al., 2014; Li et al., 2012). Creating an environment where this is not tolerated will be good for all.
- When teachers divide students into teams, there are fewer opportunities for exclusion.
- Utilise pedagogical strategies to ensure that all young people have the opportunity to engage.

**Sports uniform**

- Students are more likely to participate in physical education if they feel comfortable in what they have to wear. Where possible, offering flexibility in the PE uniform is likely to support engagement. A wide range of sizes should be available (Change Our Game).

**Swimming**

- Consider conducting organisational procedures such as taking attendance and providing instruction while students are in the water to minimise the time that students spend exposed, ie. standing outside the pool in their swimming costumes.
- Engage in discussion with students who continually avoid swimming to determine whether small modifications to procedure or uniform could encourage them to participate, e.g. allowing board shorts.

**Fitness testing**

- Fitness testing can increase social anxiety and reduce self esteem, and encourages social comparison on a range of levels (Yager et al., 2021). Completing tasks in smaller groups is preferable (Alfrey, 2023).
- If fitness testing is deemed necessary, the main situations to be avoided are those where the whole class is watching individuals perform (such as the beep test), and comparison of scores in-class or to state or national 'norms'.
- There is no evidence that poor performance on fitness testing will motivate students to improve their scores.
- Setting challenges for physical tasks (eg., a push up challenge) is generally ok as long as students can set their own level of challenge.

# Recommended curriculum-based programs to teach about body image

Ideally, content about body image would be taught at each year level, or at least each stage, throughout the schooling journey for young people. The following programs are recommended for all students and can be embedded into Health and Physical Education or wellbeing programming in schools.

| Program | Brief description | Evidence | Cost | Access |
|---|---|---|---|---|
| **Primary school** | | | | |
| Reading body image picture books | We recommend reading books like *Embrace Your Body*, *Shapesville* and *Your Body is Brilliant* for early years (up to Year 4) students. | * | $$ | Through book providers |
| Butterfly Body Bright | This strengths-based program takes a whole school approach to promoting body image and includes lesson plans and activities for Foundation to Year 6 students. | * | Free | Butterfly Body Bright butterflybodybright.org.au |
| Embrace Kids Classroom Program for Year 5 & 6 | This five-lesson program includes clips from the EMBRACE KIDS film to promote engaging discussion and evidence-informed activities that encourage students to celebrate diversity, focus on the functionality of their body, develop self compassion and compassion for others. | * | Free | theembracehub.com |
| **Year 7 & 8** | | | | |
| Embrace Kids Classroom Program for Year 7 & 8 | This five-lesson program includes clips from the EMBRACE KIDS film to promote engaging discussion and evidence-informed activities that encourage students to celebrate diversity, focus on the functionality of their body, develop self compassion and compassion for others. | * | Free | theembracehub.com |
| Body Kind Schools | Resources that can be flexibly implemented in Body Image and Eating Disorder Awareness Week (held annually during the first full week of September). | - | Free | butterfly.org.au/get-involved/campaigns/bodykindschools/ |
| RESET | This program uses video stories to open up a conversation about body image in boys. | - | Free | Program available from the Butterfly Foundation butterfly.org.au/get-involved/campaigns/reset/ |
| Media Smart (Wilksch & Wade, 2009) | This program (8 x 50-minute lessons) uses a workbook and small group activities that focus on media literacy, including media stereotypes, advertising tactics, pressure to look like images in the media, as well as activism and advocacy. | *** | $$$ | Program available for purchase from website flinders.edu.au/engage/community/clinics/mediasmart |
| **Year 9 & 10** | | | | |
| Goodform | Four-lesson program that critiques the use of muscle-building supplements and hyper-muscular ideals for boys and men. | * | Free | bodyconfidentcollective.org/goodform |

# Programs for students who are already showing signs of concerns

Schools and teachers often identify small groups of students in each year level who would benefit from additional attention and programs that could act as early intervention in relation to body image concerns and eating disorders.

## The Body Project

The Body Project has been developed and tested in the US, and has decades of research evidence demonstrating its effectiveness among young people at risk of developing eating disorders. The program is based on inducing dissonance against the thin societal appearance 'ideals' in order to reduce body dissatisfaction and prevent eating disorders. This program is recommended for students who identify as female and who have existing body image concerns. Access to this program is via a train-the-trainer model through Eating Disorders Victoria.

## I am Media Smart

This online program, based on previously evaluated and effective face-to-face resources, provides the opportunity for young people aged 13-25 to complete one module a week online, over eight weeks. Topics covered include techniques used by the media to manipulate images, ideas for how to analyse and challenge media messages, tips for handling social media pressures around appearance, and planning for how to move through adolescence and beyond as a skilful and confident person. Access the program through this website.

# Taking a Whole School Approach

A whole school approach is recommended due to the known impact that peers, family and the media have on the development of adolescent body image. While curricular components are necessary, they are unlikely to be able to reverse the extensive and long-term exposure to other negative influences that continue to have a detrimental impact. Therefore, curricular initiatives need to be supported by changes in school policy, the physical and social environment, staff professional development, and partnerships with parents and services.

A whole school approach to the development of positive body image therefore includes the following five elements:

1. **Classroom curriculum**
2. **Policy**
3. **School environment**
4. **Staff professional development**
5. **Partnerships with parents and services**



Access these Sport Guidelines for more guidance on creating body image safe environments in sport.

## Also consider:

**Sport Settings:** Consider language used in relation to weight, bodies, and appearance in sports teams and athletics. Students should not be weight or body composition measures taken in sports settings unless absolutely necessary for competition, and if this is the case, consider weighing in ways that students don't know their weight (called 'blind weighing').

**The School Canteen:** Ensure that language around food does not imply that here are "good" or "bad" foods

**Lunchboxes:** Teachers and school staff should not be auditing or commenting on the lunches that students bring to school.

# Recommended resources

For more information about eating disorders in schools, please see the new, updated National Eating Disorder Collaboration booklet for schools.

If you want to know more about how to support a student, see the Butterfly Foundation resources for teachers here. Teachers are also able to call the helpline on 1800 33 4673.

THEEMBRACEHUB.COM

The Embrace Hub is a central portal of engaging, evidence-based resources that help kids fuel, move, appreciate and be kind to their bodies.

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