

Students arrive having absorbed years of cultural messaging about bodies, food, and weight, much of it biased, much of it internalized as fact. As an educator, you are one of the few people positioned to interrupt that. Not by telling students what to think, but by modeling critical examination of assumptions that usually go unquestioned, including your own.

Comments about bodies and food made casually, in passing, by someone students respect don't just reflect bias. They confirm it.

Students in higher education are at one of the highest-risk periods for eating disorders to develop or intensify, and the environment you create is part of what makes that risk higher or lower. What follows are some practical ways to examine those habits and support students in doing the same.

IN THE CLASSROOM

1. Consider the language you use around food.

Avoid framing foods as “good,” “bad,” “clean,” or “junk,” even casually. Offhand comments like “I was so bad this weekend” or “I really need to eat fewer carbs” signal to students that there is a universal right and wrong way to eat. Students who are already struggling may hear these as confirmation for disordered behaviors.

2. Don't connect food or exercise to appearance.

Comments like “I need to burn off what I ate this weekend” or “This will go straight to my hips” model the idea that food requires compensation and body size needs vigilance. Students who look up to you are listening and connecting it to themselves. You can make the food and exercise choices that are right for you — you just don't have to narrate it.

3. Be mindful of how you talk about bodies in the content you teach.

When you comment on a celebrity's weight, a character's body in a film clip, or a case study subject's appearance, you are signaling that body appearance is to be evaluated. Students who are struggling (or who could be on the cusp of struggling) are listening to all of it and connecting your reactions to their own lives. What you visibly notice and value shapes what students believe they should notice and value about themselves. When body ideals appear in your materials, you can name them as constructed — appearance ideals exist to sell things, and your students are well- equipped to analyze that critically.

4. Be thoughtful about weight and BMI (Body Mass Index) if they appear in your course.

Weight and BMI are blunt tools that don't capture the full picture of health, and presenting them as primary indicators can cause real harm. Where you can, shift the frame to function — what bodies do, what food does for cognition and energy — rather than appearance or weight. Talk openly about how weight and BMI are not substitutes for actual health. (One can be a “normal” weight and be very unhealthy; one can be “overweight” and very healthy.)

Where the curriculum requires this content, name its limitations: “These metrics are widely used, and they are also incomplete measures of either health or well-being.” Think about the framing embedded in your slides, readings, and case studies. You often can't change the textbook, but you can invite students to think critically about what it assumes.

What You're Actually Protecting Against

Weight stigma is one of the most normalized forms of bias in our culture, so common we rarely notice it. The research is unambiguous: it doesn't motivate healthier behavior. It increases the likelihood of disordered eating, body dissatisfaction, and over the long term, even mortality risk.

You teach students to interrogate assumptions and question what's hidden in plain sight. Weight stigma deserves that same lens. It does not matter if a comment about a body is intended as neutral or positive. Students are not always able to separate your intention from your impact, and it is the message they receive that shapes how they see themselves. Noticing that, and choosing not to reinforce it, can save a life.

What to Do When Concerned

If a student's relationship with food or their body has you concerned, trust that instinct. You don't need to be an expert. Speaking up early can change — or save — a life.

You don't need certainty to act.

- ✓ Disordered eating is serious and common in college students. Warning signs include changes in eating behavior, excessive exercise, weight preoccupation, withdrawal, or frequent bathroom visits after meals. If something feels off, trust that instinct.

1 Request a Private Conversation

Keep it simple and low-key. A caring approach opens the door.

"Hey, do you have a few minutes? I'd like to check in with you about something."

Choose a private setting — your office or a quiet hallway, not in front of classmates.

2 Share What You've Observed — Specifically

Stick to objective, factual behaviors. Don't diagnose — just describe.

"I've noticed you've seemed tired and mentioned not eating much. Some comments about your body have stayed with me."

Avoid: accusations · nutrition lectures · comments about appearance

3 Ask and Listen

After sharing, open it up. Then genuinely listen — don't fill the silence.

"What do you think about what I've shared? Can I hear more about how things are going?"

Your goal is not to solve it. It's to make the student feel seen, not judged.

4 If You Hear "I'm Fine," Stay Calm and Stay Firm

Defensiveness is expected—usually a sign you're on the right track.

"I hear you. I'm not fully convinced everything is okay. Would you be open to talking with the counseling center — just to check in?"

Offer a resource, suggest a follow-up, or let them know you'll check back in. Then do it.

Follow Up — This Is Not a One-Time Conversation

- 5 Check in again in a few days. Keep the focus on **care, safety, and connection to professional support**, not weight, food rules, or appearance. Your role is to be a consistent, non-judgmental presence. If you believe a student may be at immediate risk, involve campus counseling, student health, or dean of students. **You don't need to handle this alone.**

GET HELP

National Alliance Helpline

866-662-1235 — Receive free support & referrals from clinicians.

Find Treatment

finedhelp.com — Locate eating disorder specialists near campus.

Learn More

withall.org — Warning signs, conversation guides & financial support for treatment.

JOIN THE WITHALL COMMUNITY

Sign up for our email newsletter to get exclusive event invites, learn how your support helps recovery, and get more What to Say tips.

Join Us



WANT MORE FREE RESOURCES?

Get free guides and articles on picky eating, big appetites, body comments, sports, and more at withall.org/resources

 Feel free to share this guide with whoever needs it. Print it, email it, or text a link.

follow us!

 @withallorg

 /withallorg

 @withall_org

GO DEEPER IN YOUR ROLE

- **Parents and families:** Learn the 3 Simple Shifts at withall.org/shifts
- **Coaches:** Get your free What to Say certification at withall.org/coaches
- **Teachers:** Build a body-healthy school culture at withall.org/schools
- **Healthcare providers:** Earn CME credit at withall.org/healthcare

Support This Work

This guide is one piece of WithAll's work to help kids feel good in their bodies and with food. That work only happens because individuals and businesses fund it directly. If it helped you, consider making a gift at withall.org/donate.

Get Financial Help

If you or someone you love is facing an eating disorder, you are not alone. Our Recovery Support Program provides grants for groceries and housing during intensive treatment. Apply at withall.org/apply.