

## Case Study 7: Eating Disorders

### Not so live on stage: high drama in the performing arts

#### Journalism Lecturer notes

This case study is designed to give students some practice in considering issues associated with reporting or communicating about mental illness and suicide so they will be better prepared to deal with such a situation, should it arise, when they are working as journalists or public relations practitioners.

Eating disorders, mental illness and suicide are very sensitive and complex issues, and it is natural that some people may feel uncomfortable talking about them. Usually, these feelings are temporary and do not cause serious distress. Talking about mental illness or suicide in an educational and supportive environment provides lecturers with an opportunity to advise students about counselling and other services available on campus, and also to encourage students experiencing problems to seek professional help by talking to a GP, health professional or call a crisis counselling service such as:

- Butterfly National Support Line 1800 ED HOPE / 1800 33 4673 Mon-Fri 8am to 9pm
- National Eating Disorders Collaboration 02 9419 4499 or [www.nedc.com.au](http://www.nedc.com.au)
- Eating Disorders **Victoria** (03) 9885 0318 (metro) OR 1300 550 236 (non-metro);  
[edfv@eatingdisorders.org.au](mailto:edfv@eatingdisorders.org.au)
- Kids Helpline 1800 55 1800 (5-25 years)
- Lifeline 13 11 14
- Suicide Call Back Service 1300 659 467
- Online information:
  - [www.headspace.org.au](http://www.headspace.org.au) and [www.reachout.com](http://www.reachout.com)

For further information and advice about preparing your class for this case study, you should refer to:

- **Mindframe Reporting and Portrayal of Eating Disorders resource** [here](#)
- **Discussing sensitive issues** [here](#)

Further reading and resources can be found on the *Mindframe* for journalism and public relations education website at [www.mindframe-media.info](http://www.mindframe-media.info)



The media can play a positive role in stimulating balanced messages about healthy eating attitudes and behaviours by presenting eating disorders as a complex mental and physical illness rather than as a lifestyle choice.

The media has a major role to play in community education regarding eating disorders and could be a powerful tool for strengthening community capacity to make good health decisions and create supportive environments for people at risk (Keleher & Armstrong, 2005).

The media is a known risk factor in the development of eating disorders. The National Eating Disorder Collaboration (NEDC) states that people living with an eating disorder are *“bombarded with words and images in the media that contribute to the development of their Eating Disorder and impede their recovery”* (NEDC, 2013).

Studies have confirmed that the mass media is one of the principal factors behind body dissatisfaction, drive for thinness, internalisation of the thin ideal, endorsement of surgery and bulimic symptomatology (Levine & Murnen, 2009). Further research also suggests that journalists pursue an entertainment agenda for their reporting of health stories. Personal profile stories involving celebrities have much more currency than reports of scientific knowledge (Shepherd & Seale, 2010).

People engaged in athletic activities, including sports, dance and fitness, may consider disordered eating practices or excessive exercise to be part of a necessary pathway to achieve their optimal health and fitness level. However, the most effective communication approach will provide education that enables people to engage in their chosen activities in a healthy way (Rocci, 2002).

Media literacy can help decrease risk factors for eating disorders and increase healthy body image among different age groups and individuals. Individuals who are media literate are also less likely to have body dissatisfaction and compare themselves to others (Yager & O’Dea, 2008).

Through accurate and sensitive communication, journalists can play an important role in minimising harm to persons living with, or who are at risk of developing an eating disorder. Journalists can also assist with increasing community understanding of the associated risk and protective factors and provide help-seeking options.

## **Background reading: What are eating disorders?**

Eating disorders are serious mental illnesses characterised by severe disturbances in eating and exercise behaviours and potentially can be life threatening. They are driven by distortions in thoughts and emotions, especially those relating to body image or feelings of self-worth. They are not a lifestyle choice or a diet gone ‘too far’ (CEDD 2014).

Eating disorders cover a range of distinct disorders – Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder and Eating Disorder Not Otherwise Specified (EDNOS) (NEDC 2013).

Eating disorders have an adverse impact on physical and mental health and development and are often associated with other psychological and physical illnesses such as depression, anxiety, personality disorders and substance abuse. A person with an eating disorder may also experience long term impairment to their social and functional roles, and without effective treatment they can cause serious and permanent harm or even death (NSW Service Plan 2013).

Eating disorders affect people of all age groups, genders and socio-economic and cultural backgrounds. They may arise in response to a range of risk factors and are often a way of dealing with underlying personal, emotional and psychological difficulties (CEDD 2014).



A person has an eating disorder when their attitudes to food, weight, body size or shape lead to marked changes in their eating or exercise behaviours, which interfere with their life and relationships. Eating and exercise behaviours that people with eating disorders may engage in include: dieting, fasting, overexercising, using slimming pills, diuretics, laxatives, vomiting, or binge eating (consumption of an unusually large amount of food accompanied by a sense of loss of control).

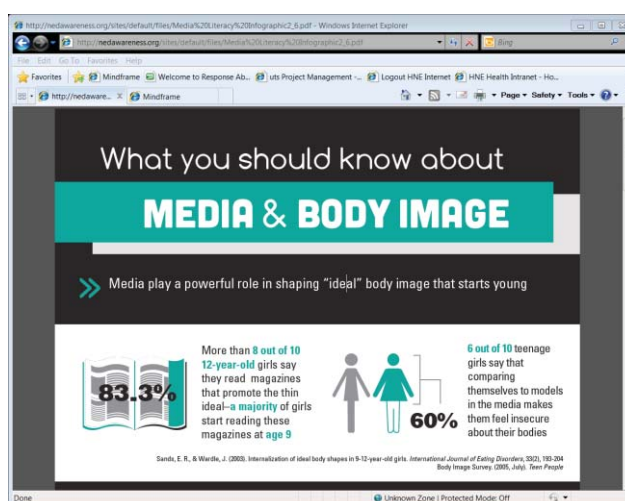
A person with an eating disorder may experience long term impairment to social and functional roles and the impact may include psychiatric and behavioural effects, medical complications, social isolation and disability. The mortality rate for people with eating disorders is the highest of all psychiatric illnesses, and over 12 times higher than that for people without eating disorders. About one in 20 Australians has an eating disorder and the rate in the Australian population is increasing (NEDC, 2013).

### Implications for reporting of eating disorders

Given that the media is a known risk factor in the development of eating disorders, there are implications for the way eating disorders are represented in the media. In particular, it becomes important to consider the potential effect of a report on emotionally vulnerable individuals, who may be influenced by what they read, view, or hear. The effect may be more profound if an individual identifies with the person portrayed in a media article or news item, perhaps because they are in the same age group or share similar experiences or ideals.

Eating disorders are legitimate topics for serious discussion in the media, like other mental health issues. However, the presentation of eating disorders should be considered with great care. It is important to remember the factors contributing to the onset of an eating disorder are complex. No single cause of eating disorders has been identified; however, known contributing risk factors include: genetic vulnerability, psychological factors and socio-cultural influences (NEDC 2013).

Evidence shows that socio-cultural influences play a role in the development of eating disorders, particularly among people who internalise the Western beauty ideal of thinness. Images communicated through mass media such as television, magazines and advertising are unrealistic, airbrushed and altered to achieve a culturally perceived image of 'perfection' that does not actually exist. The most predominant images in our culture today suggest that beauty is equated with thinness for females and a lean, muscular body for males. People who internalise this 'thin ideal' have a greater risk of developing body dissatisfaction which can lead to eating disorder behaviours (NEDC, 2013).



Click [here](#) for link



## Eating disorders and suicide

The risk of premature death in people with eating disorders relates in part to medical complications associated with the disorder. However, suicide has also been identified as a major cause of death in people with eating disorders.

- Research shows that 1 in 5 individuals with Anorexia Nervosa who died prematurely had taken their own lives.
- Research on suicide in people with Bulimia Nervosa and EDNOS is less available; however, suicide attempts have been identified in people with Bulimia Nervosa (NEDC, 2013).

## The scenario

A ballet performance is being held in a major city and the 'full house' sign is up. Numerous media reporters are present for the opening gala night and guests include prominent community figures, international guests and politicians. The principal dancer Amelia has completed rehearsals and is anticipating her debut performance at the nationally acclaimed venue. She has been on a severely restricted diet and on the night of the performance, collapses before interval and needs to be carried off stage by paramedics.

Amelia has a history of an eating disorder. During her early teens, Amelia spent some time in a residential program for eating disorders, with follow up sessions with a psychologist to monitor her progress and learn strategies to attain her healthy weight goal. She has many close friends in the performing arts arena and is also a ballet teacher, with many of her pupils in the audience.

Some important facts are:

- The event occurred at a large public venue and was witnessed by the entire audience
- The performance was scheduled for a national tour
- Comments have started appearing on the ballet company's Facebook page
- Many defamatory comments have started appearing on Amelia's Facebook and on Twitter
- The performance had to be cancelled and patrons are mostly angry and upset at being deprived of viewing the entire show, despite being offered tickets to future performances
- There is considerable traffic on the ballet company's website and a large volume of media interest and coverage of the incident
- There is little to no information available about Amelia's mental health and wellbeing

## Questions for consideration

- Question 1:** Should this story be reported and what is the rationale?
- Question 2:** How can ethical issues inherent in this story be balanced with journalistic values?
- Question 3:** Who would you interview?
- Question 4:** Discuss the impact and use of social media in this situation.
- Question 5:** What other decisions need to be made before deciding to post on facebook or Twitter, publish or broadcast the story?
- Question 6:** How should the story be reported?
- Question 7:** What are the specific issues associated with reporting this as a TV news story?
- Question 8:** How could this scenario be used as a basis for a feature story?
- Question 9:** Using this scenario for ethical debate, discuss pros and cons for reporting the story.



**Note:** The student notes contain only brief prompts for each question. The information provided in the following pages can be used to facilitate class discussion or to assess students' work.

Alternatively, you may decide to provide students with a copy of this information.

## Question 1: Should this story be reported?

### News values

Audiences globally are usually considered to be most interested in things that affect them directly, which is why the deaths of five people in a local community is more newsworthy to that community than the deaths of 500 in a foreign country. Similarly, strong value is attached to information that could affect audiences directly in the future and also information about things that could potentially cause them harm. The basic news values are: impact, timeliness, proximity, conflict, currency, unusualness and relativity (White, 1996).

**Impact:** refers to the relevance the story has to the audience's lives. In this case, the theatre is in the local community and is well known to the audience, some of whom may have or have had children, relatives or friends working or performing there.

**Timeliness:** refers to information that helps people organise their lives. People may feel they need this information to determine how the incident might impact on them personally, their loved ones or whether they send their children to have lessons or perform at the theatre.

**Proximity:** refers to how 'close to home' a story is. This story is a local issue affecting local people.

**Conflict:** is the news value most people associate with media, and is often seen as the most important news value in today's media. Conflict is also present in news that 'afflicts the comfortable' by making them anxious or guilty. It's also what is meant by the tabloid dictum to 'anchor every story to its emotional base'. In this case, the anxiety felt by peers, parents, students or workers is a form of conflict.

**Currency:** is the term used to describe how 'hot' an issue is at any one time. Stories relating to eating disorders and celebrities or performers are usually always 'hot'.

**Unusualness:** refers to an incident or story being unexpected. In this scenario it is an unexpected collapse of a performer and how this impacts on the wellbeing of others.

**Relativity:** describes whether a story is news-worthy in relation to other possible stories, and across different media. The case at the theatre is new and the type of incident is not common. The story also meets the test of relativity in that it works for TV, radio and print.

### 'Public interest' and the impact of reporting

#### Public safety

Students, parents and staff at the theatre would be the target groups which would need to be considered when determining public interest issues. There may be students who are vulnerable and the theatre needs to consider what support they can offer to those who may be directly affected.

Helplines and support services need to be included in the story and also by the theatre.

**Note:** Students will need to determine if they need further information before they can conclude this, and how they would obtain information relevant to their local area, as well as national helplines.



## Discrimination

Issues related to discrimination need to be considered. What is the corporate responsibility of the theatre and how might publishing personal as well as professional details about the ballet dancer be interpreted.

***Note:** Students need to consider risk management. For example, if they need further information or details to add to their story, how would they access this information? How would they verify the source and ensure it is authentic and reliable, and also maintain privacy and confidentiality? Students may also need to consider the repercussions of the story and how it might affect future career prospects for Amelia.*

**Refer to Mindframe Reporting and Portrayal of Eating Disorders resource [here](#)**

## Community attitudes

Reporting about eating disorders accurately can increase community awareness, challenge public misconceptions and myths, provide public health messages to raise awareness about risk factors, and provide helpline and support options. However, it takes time to change community attitudes. The way the story is reported will be a crucial factor in the community's reaction to the person at the centre of the story

## Right to privacy

The ballet dancer may feel vulnerable and victimised, thus it is important to be authentic and respectful.

If she feels she is being discriminated against, she may want to tell her side of the story. This could be of benefit, but much consideration needs to be given to how soon after the event she is able to provide her own account of the circumstances behind the event.

She may not want her situation made public and could fear the resulting stigma and impact on her professional opportunities in the future.

Her right to privacy may be mitigated by the fact that the theatre is liable for the cancellation of the show, but they could provide a general message to the public of 'performer illness' to explain the circumstances behind this event.

## Professional responsibility

Students may consider that the journalist is going against professional or editorial expectations if they decide not to report the story. The news organisation must consider all options and repercussions if they don't run the story. In this scenario, the editor might say "public performer collapses mid performance" is news. The audience might want information to help them decide how they feel about the issue.

## Personal values

To some extent, establishing the public interest in this case will be influenced by the journalist's own values. For example, how would they feel if their own child or relative attended the theatre as a pupil or audience member? Alternatively, the journalist might feel angry at the news organisation for reporting the story if he/she feels sympathy for the ballet dancer.





## Question 2: How can the ethical issues inherent in this story be balanced with journalistic and commercial values?

Students can refer to the “*Ten questions to guide the journalist through the decision making process*” outlined by Black, Steele and Barney (1997) or to Bok’s (1978) three-step model for making an ethical decision (both included in the document entitled *Additional materials*). A summary of the key issues contained in these models, as applied to this scenario, is outlined below.

### Developing a better understanding of the topic

Journalists (and students) need to reflect on how much they know about eating disorders, and whether their knowledge is based on fact and evidence or public perception. This is particularly important for eating disorders, which is often portrayed inaccurately in fiction and visual media. By developing a better understanding of eating disorders, the journalist can present a more balanced story.

### Checking organisational policies and professional guidelines

Journalists should consider principles provided in the Media and Entertainment Arts Alliance (MEAA) Code of Ethics. Some media organisations also have their own policies and these may provide guidance in relation to issues such as privacy, reporting mental illness and dealing with vulnerable people.

Journalists can also refer to the recommendations provided in *Reporting mental illness and suicide: A resource for media professionals*, available from the *Mindframe* website – [www.mindframe-media.info](http://www.mindframe-media.info).

### Reflecting on the motivations of stakeholders

In this case there is the woman with an eating disorder, her colleagues, the audience, the theatre owners, the ballet company, the news organisation and the journalist. The potential motivations of each of the stakeholders need to be evaluated. Motivations of the stakeholders can affect the credibility of the information provided. For example, the theatre might suggest that they cannot provide information about future performances based on the precariousness of the health of the performer, but must also maintain the favour of their patrons in order to not threaten favourable reviews by theatre critics.

### Exploring alternative ways to report the story

For example, the journalist might consider running the story without names, but this may impact on the news value of the story. The information available to the journalist can be framed in a number of ways. Reporting the case sympathetically and including all the mitigating evidence may minimise the chances of the audience scorning the performer.

### Accepting responsibility

At one level, the journalist has an obligation to truth-telling and to acting independently of influence. However, the journalist also has an obligation to minimise harm and to be accountable for what he/she does. Some journalists seek to consign dilemmas such as the one outlined in this scenario to the ‘too-hard’ basket and seek to shift the responsibility onto others. Such a journalist would produce the story and leave it to someone else to decide whether to report it. Even so, the journalist will have made choices about the angle the story will take and which parts of the evidence will reach the wider public, possibly shaping public understanding of what has happened.

There is no escaping the consequences of individual choices about news. The journalist controls the words they use to tell the story, the points to emphasise, and the extent to which the story is sensationalised. The editor will also have an influence over what is published or broadcast, but the journalist makes the original decisions about what to include and omit.



## Justifying the decision

If journalists have ethical principles as a guide and can articulate their decision-making process and its values, they can ethically justify a decision even when others object to the outcome. Journalists need to consider their professional codes of practice and process for evaluating their decisions as this then allows for the application of values, loyalties and principles to other dilemmas in the future. In this way, decision making will be fair to those who become part of the news.

### Question 3: Who would you interview and are the interviewees appropriate?

The sources the journalist chooses and prioritises will direct what is eventually reported and who is interviewed. Students should consider whether the people interviewed are the most appropriate sources of information, and whether there are any other credible experts in the field who could be interviewed. Students should evaluate the interviewees in terms of their strengths and weaknesses as sources of information and the type of information which can reasonably be expected from them. This would include deciding whether the information is specific or generalised, whether it can be verified, how it can be verified, whether the interviewees seem credible and whether they may have an undeclared motive. All these factors could significantly affect the priority assigned to each source.

*The theatre owners or ballet company* may provide first-hand experience of the alleged problems and be a source of colourful quotes about their experiences that enhance the audience's understanding of the facts. These people may also feel very strongly about the issue, so information provided by them that is outside their personal experience would need to be substantiated in an authoritative or evidence-based way. The theatre owners should also be able to provide facts about theatre policies, official action taken and support available for the performer.

*An eating disorder specialist practitioner or researcher* can contribute expert information about eating disorders and offer authoritative generalised opinions, but can't comment on an individual case.

*The ballet dancer* should have an opportunity to approve the story before it is published. Apart from a right of reply, she may offer another perspective and provide insight into the situation, as well as provide colourful quotes to assist in bringing the story to life for the audience.

Bear in mind that these interviewees may react emotionally to the incident and this could affect the credibility of some comments, or the amount or type of information that is disclosed.

### Interviewing a person with an eating disorder

You may want to explore with students whether the ballet dancer should be interviewed and what considerations this involves. For example, many people who have previously or currently live with an eating disorder are willing to talk publicly about their experiences in an effort to promote awareness and positive attitudes. Others may want to keep their experiences private or may find discussing the issue distressing.

Some general principles to consider prior to interviewing a person with an eating disorder are:

- Be sure the person is prepared to discuss their story
- Avoid confrontational interviews
- Allow the person to speak for themselves
- Discuss the questions you propose to ask and inform the person of the context of the interview
- Check the language the person uses to describe their eating disorder
- Do not use names without permission





#### Question 4: How could social media impact on this situation?

Consider some of the social media and communication technologies that may have been used to generate both negative and positive comments, for example, the theatre company's Facebook page and Twitter account, or Smartphone application with push-notification function. How could these be used to manage this situation where there is detailed information about the event, including images, location and identity of the performer circulating rapidly?

- Journalists could respond to this by 'managing the message' and counteracting detailed social media conversation with help-seeking information.
- Images are potentially circulating from the event and the situation;
- It is important that the public is made aware of other risks that exist in the online world. In discussing pro-anorexia and pro-bulimia websites, it is advisable that media refrain from quoting passages from these sites or reproducing images found there. Reproducing messages found on these sites may reinforce the disordered thinking experienced by a person with an eating disorder.

#### **Other considerations:**

- Event organisers will also need to consider how stakeholders such as other performers might communicate about this incident, and the influence this may have on their fan-base and/or followers (e.g. via Twitter) and the wider community;
- The theatre may also want to consider follow-up information they can send out to ticket holders about how to access help if distressed about the incident in the days and weeks following, e.g. via social media or email.
- The event will also need to consider how to communicate with staff to keep them informed and provide support for those who may need it.
- Event organisers will need to consider how to manage staff communication, and whether and how staff should be talking about this incident outside of their professional roles. How will you sensitively communicate responsibilities to staff and generate ideas for how their expertise may be used to support each other and external stakeholders? Would volunteers be managed differently, and if so, how?
- If there are claims of negligence reported, it may seem reasonable to defend those allegations in the media. However, students will need to consider whether more public discussion of the situation will be helpful or potentially harmful to the wider community.

#### Question 5: What other decisions need to be made before deciding to post on Twitter or facebook, publish or broadcast the story?

After completing preliminary interviews, the journalist is in a position to make the crucial decision about whether the emerging story should be posted on social media, offered for publication or broadcast. At this stage the journalist needs to re-visit questions about *public interest, news values and principles, credibility of source and accuracy of information.*



### **What are the facts?**

First, the journalist must check if all the information collected can be verified. If any information cannot be verified, is it important enough to report? If the decision is yes, what news values are being assigned by the journalist when assigning priority to using unverified information?

### **Are the sources credible?**

Sources will appear to be credible once the media is used as a forum for their views. The process of deciding whether sources are credible includes considering whether some sources, for example 'official' ones, are intrinsically more credible than others. The journalist must be satisfied on an individual level that they can substantiate everything that is asserted and that their decision can be defended, in court if necessary. As part of this, the journalist must once again ask themselves if any information is assumed to be 'known' without substantiation.

### **Is there a single statement or quote that embodies the central issue in the story?**

Can a story be structured around this? What news values are given priority as information is considered? Has 'hero' or 'villain' or 'victim' status been assigned to any party?

### **Given the decisions already made about how news values relate to the story, is it still worth telling?**

Throughout the process the journalist has been making decisions based on their understanding of the audience, the public interest and the news values given priority by the news organisation. News organisations usually have a particular audience in mind when they prioritise news values.

## **Question 6: How should the story be reported?**

Students can be referred to the resource '*Fact or fiction?*' for an overview of the issues associated with reporting mental illness. The following information covers the main issues students will need to resolve in developing a news report based on the scenario.

### **Selecting the 'frame'**

In considering whether this story should be reported (see Question 1) a number of alternative frames or story angles can be identified. Some of the possible frames include:

- The performing arts puts people at risk of developing an eating disorder
- The public lacks understanding and knowledge about eating disorders and may discriminate against people living with eating disorders
- People with eating disorders face significant stigma and isolation
- The theatre company is trying to cover it up (the mistake could be either not checking the person's history earlier OR breaking confidentiality by disclosing personal information)
- A public figure and advocate for people with eating disorders has proposed a public meeting

*You may wish to have students make a list of the many alternative 'angles' which could be applied to this scenario, and discuss the potential impact of each angle.*

### **How important are the views of the theatre and local community?**

When it comes to describing how the community feels about the issue, there is a lot of information at the students' disposal. Students need to think about the aim of reporting the story. On the one hand, it is fairly likely that the audience will speculate about the case. On the other hand, is it the journalist's job to encourage that speculation by providing unsubstantiated opinions? As students reflect on the choices they've made, they need to consider the public interest in terms of their aims in reporting the story.

### What facts must be included in the story?

The frame chosen will dictate the type of information that is included or prioritised. Within a given frame, students can provide the audience with a balanced story by including all relevant information. Students should also ensure that the key message of their report is based on fact and evidence.

Deciding which facts are relevant also involves several related questions. For example, are the answers to “*who, what, where, when, why and how*” always appropriate to the story? In this scenario, the identity of individuals involved is important to the story, and if it is reported without using names, the theatre can’t be identified either.

This is significant because the public will inevitably know which organisation is involved. If names are used, does this mean the public interest in them is a more important value than the individual’s right to privacy? Students need to consider carefully the potential impact on an individual before deciding to publicise that they have an eating disorder.

**Eating disorders myths**

**Myth**  
Eating disorders are not serious; they are a lifestyle choice or about vanity.

**Truth**  
Eating disorders are serious and potentially life threatening mental illnesses. A person with an eating disorder experiences severe disturbances in their behaviour around eating, exercising and related self harm because of distortions in their thoughts and emotions.

**Myth**  
Families, particularly mothers, are to blame for eating disorders.

**Truth**  
There is no evidence that eating disorders can be caused by parenting styles. Although a person’s genetics may predispose them to developing an eating disorder this is certainly not the fault of their family.

**Myth**  
Eating disorders are a cry for attention or a person ‘going through a phase’.

**Truth**  
Due to the nature of an eating disorder a person may go to great lengths to hide behaviour, or may not recognise that there is anything wrong. Eating disorders are not a phase and will not be resolved without treatment and support.

**Myth**  
Eating disorders only affect white, middle class females, particularly adolescent girls.

**Truth**  
Eating disorders can affect anyone. They occur across all cultural and socio-economic backgrounds, amongst people of all ages, from children to the elderly and in both men and women.

**Myth**  
Dieting is a normal part of life.

**Truth**  
Eating disorders almost invariably occur in people who have engaged in dieting or disordered eating. Dieting is also associated with other health concerns including depression, anxiety, nutritional and metabolic problems, and, contrary to expectation, with an increase in weight.

**Snapshot**  
National Eating Disorders Collaboration  
nedc.com.au

To find out more visit [nedc.com.au](http://nedc.com.au)

### Eating disorders myths

#### How would a member of the audience feel after seeing this report?

If the answer is sad, frustrated or worried, students might consider the role of the media in providing support for their audience instead of simply tapping into their anxiety as a news value. Accurate information about eating disorders and contact details for specialist or other support services can be provided to give the story ‘balance’.

News reports should not give the audience the impression that eating disorders are untreatable or that people can never recover.


**Is the report fair as well as accurate?**

Some considerations are:

- References to eating disorders or mental illness are confirmed and relevant: For example, if the headline or lead asserts certain facts about mental illness, is this confirmed in the report and is it relevant to the story?
- Appropriate use of medical terminology: If medical terminology is used, has this been quoted from an expert source?

**Use of non-stigmatising language:**

While decisions about language selection will reside with the journalist, certain language can alienate members of the community, sensationalise the issue or inadvertently contribute to disordered eating being presented as glamorous or an option for dealing with problems. The context in which language is used is important. Some general issues, and suggestions of how these may be addressed, are presented below.

Issue ?	Other options 
Language that labels a person by their illness can lead to a person feeling alienated or stigmatised.	<p><b>Preferred:</b> 'is living with', 'has a diagnosis of', or 'is being treated for' an eating disorder, or particular disorder.</p> <p><b>Problematic:</b> 'anorexic', 'bulimic', 'binger'.</p>
Language can present eating disorders as a life sentence with no possible recovery.	<p><b>Preferred:</b> 'is living with' or 'is diagnosed with' an eating disorder or particular disorder.</p> <p><b>Problematic:</b> 'afflicted by', 'suffering with' or 'a victim of' an eating disorder.</p>
It may increase risk in those who are vulnerable when the language used places a value judgement on appearance.	<p><b>Preferred:</b> language that does not focus on size or appearance specifically.</p> <p><b>Problematic:</b> 'thin', 'skinny', or 'fat'.</p>
Language can present disordered eating as glamorous or an option for dealing with problems.	<p><b>Preferred:</b> simple language without value judgements.</p> <p><b>Problematic:</b> 'successful pursuit', or 'unsuccessful attempts'.</p>

**Avoiding stereotypes and sensationalism**

News reports can either reinforce or challenge stereotypes and myths about eating disorders. There is also a risk of portraying all eating disorders as being one and the same, when in reality there are many different types of eating disorders and each person's experience is different. People with eating disorders may also be inappropriately portrayed as 'victims', and the illness sensationalised as a 'weak personality' or a 'lack of willpower'.



Students should be wary of reinforcing stereotypes about eating disorders because of the potential harm to the subjects of the story and to other people directly or indirectly affected by the story. Sometimes the demands of the news room seem to be at odds with a journalist's priorities in the private exchange between reporter and interviewee. If a journalist needs to negotiate with an editor who favours sensationalism, they should ensure they are armed with the facts about the potential damage resulting from sensational reporting.

### **Tips to avoid perpetuating stereotypes**

- The term 'eating disorders' covers a range of distinct disorders – Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder and EDNOS. Be careful not to imply all eating disorders are the same or that each person's experience will be the same;
- Show the range of eating disorders that exist, rather than focussing entirely on anorexia nervosa. All eating disorders can be associated with serious consequences including mortality;
- Be mindful not to reinforce the stereotype that only women develop an eating disorder. While eating disorders are more prevalent in women, they can also occur in males;
- Avoid associating eating disorders with weight or being thin, as a person with an eating disorder can be under, at or over their most healthy weight.

### **Language guidelines**

1. The words 'anorexic' and 'bulimic' are adjectives and not nouns and therefore should not be used to describe a person e.g. "Amelia is an anorexic". This use also implies that Amelia is defined by her anorexia, the other aspects of her personality being ignored.
2. The phrase 'people affected by eating disorders' includes anyone who has an eating disorder as well as those around them who are also impacted (families, friends, carers and professionals).
3. The word 'sufferer' implies a poor quality of life. Instead, consider more positively framed language such as 'living with (an eating disorder)', 'has a diagnosis of' or 'being treated for'.
4. Eating disorders are sometimes referred to as 'eating distress'. 'Eating disorder' is less emotive and is the term currently in common use by health care professionals.
5. Eating disorders are a recognised mental illness. When referring to mental illness, it is important to consider the issue of stigma. Many people who would benefit from specialist services may not be ready to consider their eating behaviour in terms of mental illness. An eating disorder is an illness with serious physical and psychological implications that are intertwined. Both physical and mental health aspects should be acknowledged.
6. Although a person with an eating disorder may have maladaptive behaviours, it can be useful to discuss their views about this to facilitate understanding about issues related to resistance to change or treatment.
7. The terms 'illness' or 'condition' are preferred to the term 'disease'.
8. People with eating disorders are sometimes described as 'attention seeking', 'manipulative' or 'devious', terms that have very negative connotations.
9. A person does not make a conscious decision to develop an eating disorder. The perception that an eating disorder is 'self-inflicted' or that a person can easily stop their behaviour should be challenged.



10. Eating disorders can affect both sexes, all ages and all social classes. References to typical profiles are inaccurate and can create feelings of exclusion.
11. When referring to self-harm, either the term 'self-injury' or 'self-harm' are acceptable but the term 'self-mutilation', which is also in common usage, is considered to reinforce stigma.

**NEDC recommends that reporting should not:**

- Describe details of how to engage in eating disorder behaviours
- Use or provide information on personal measurements in relation to people who have experienced an eating disorder (e.g. weight, amount of exercise, number of hospital admissions)
- Normalise, glamourise or stigmatise eating disorder behaviours
- Use judgmental or value-laden language
- Motivate people to act based on fear or stigma

**Question 7: What are the specific issues associated with reporting this as a TV news story?**

Some questions to prompt students are:

- To what extent do the pictures drive the story?
- What news values are attached to the images? Which images take priority?
- Do the images selected affect the way the story is written? How?
- What is the process for deciding which vision to select?
- Should the 'talent' be given equal time? Why?
- What will the message of the story be?
- How should the voice-over be written and why?
- What is the effect of including the question and the answer in a broadcast report?

**What about celebrities?**

- Eating disorders are not entertainment. Placing stories about eating disorders in 'entertainment', 'social' or 'gossip' sections trivialises the seriousness of eating disorders
- Present eating disorders as serious life threatening illnesses – not a lifestyle choice
- Exercise caution when using language associated with eating disorders to describe a celebrity's appearance (e.g. 'looking anorexic'). This may glamorise or normalise eating disorders
- Before reporting on celebrities with an eating disorder, consider the reliability of the source and consider the language and images you use
- Using 'before' and 'after' images of celebrities or other images focussed on their weight can be problematic for those at risk.





### Question 8: How could this scenario be used as a basis for a feature story?

One or more of the alternate frames outlined in Question 5 could be expanded to develop a feature story. The resource '*Fact or fiction?*' may also assist students to identify broader social issues associated with eating disorders and mental illness. This might involve researching:

- The nature of stigma and discrimination against people with Eating disorders
- Current policy and research about eating disorders
- The prevalence of different types of Eating disorders and how they impact on people's lives

You could ask students to brainstorm a longer list of possible stories based on issues demonstrated in the scenario. Once a topic for the feature has been chosen, students will need to consider:

- How might a journalist shed light on the issue?
- What are the key points to get across?
- Who would the journalist need to talk to? What would they ask?
- Where can the journalist get background information?
- Is there anything the journalist needs to know before interviewing a person with an eating disorder?
- How will the article be structured?

**Refer to Mindframe Reporting and Portrayal of Eating Disorders resource - [click here](#)**

### Question 9: Using this scenario for ethical debate

You may choose to use any of the previous questions or the following suggestions:

**Question 1:** Should this story be reported?

**Question 2:** How can the ethical issues inherent in this story be balanced with journalistic values?

Some additional statements that can be used as the basis of a seminar, discussion or assignment are:

- When it comes to reporting eating disorders, the media is always part of the solution or part of the problem.
- How does the Journalist's Code of Ethics deal with reporting eating disorders in the context of mental illness?
- How would use of the Mindframe guidelines affect the reporting of this story?
- Reporting this story has the potential to do greater harm than good. Discuss.
- What is the role/responsibility of the journalist in interviewing people who are distressed or traumatised? What is an appropriate way of reporting this?

The resource '*Fact or fiction?*' is a useful reference for students for an ethics discussion or seminar.

Further reference materials are available at [www.mindframe-media.info](http://www.mindframe-media.info), including links to research on eating disorders, mental health and mental illness reporting.

## QUICK TIPS FOR REPORTING

- present eating disorders as serious mental illness rather than as lifestyle choice or part of an entertainment story
- focus on the impact eating disorders have on the person and their family
- avoid giving details of specific behaviours, measurements or quantities as this can be problematic and prompt those who are vulnerable to engage in 'copycat' behaviour
- avoid use of images of people with extreme body weight or shapes, as this may influence those who are at risk to strive to achieve an unrealistic size, shape or weight
- use language that avoids labelling the person by their illness or framing eating disorder as glamorous or as an option for dealing with problems (refer to media guide).
- ensure that if someone is telling their personal story that they are supported by an appropriate person or organisation
- avoid glamorising or presenting eating disorders within an entertainment context
- consult with recognised experts in the field for accuracy and evidence based perspectives
- promote help-seeking by adding information about support services



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## Useful links:

**Australia & New Zealand Academy for Eating Disorders (ANZAED):** the peak body for eating disorder professionals committed to leadership and collaboration in research, prevention, treatment and advocacy. <http://www.anzaed.org.au/>

**The Butterfly Foundation:** dedicated to bringing about change to the culture, policy and practice in the prevention, treatment and support of those affected by eating disorders and negative body image <http://thebutterflyfoundation.org.au/>

**Eating Disorders Victoria:** provides a comprehensive support and information service on all aspects of eating disorders. [edfv@eatingdisorders.org.au](mailto:edfv@eatingdisorders.org.au)

**Journal of Eating Disorders:** open access, peer-reviewed journal publishing leading research in the science and clinical practice of eating disorders. <http://www.jeatdisord.com/>

**National Eating Disorders Association (NEDA)** is the leading non-profit organization in the United States advocating on behalf of and supporting individuals and families affected by eating disorders <http://www.nationaleatingdisorders.org/>