

## **Mindframe media alert**

### **Netflix feature film: 'To The Bone'**

#### **Mindframe advice for media reporting on Eating Disorders**

**4<sup>th</sup> July 2017**

**Newsrooms: Please cascade to all staff**

The latest NETFLIX production ***To the Bone***, which follows the journey of a 20-year old woman living with and recovering from Anorexia Nervosa, is set to be released in Australia on 14 July 2017. Butterfly Foundation has released a statement regarding the film content and the potential risk to vulnerable communities, and is also distributing guidance for viewers across the country through an [Information Sheets for Parents](#) ahead of the film's release next week.

The media plays a powerful role in increasing community understanding of the risk factors and impact of eating disorders. Certain types of reporting can potentially lead to harmful impacts on those living with or at risk of an eating disorder.

*Mindframe* would like to remind media professionals that they can access our resources (and call us) if eating disorders or mental illness issues become relevant to their stories. We ask for journalists to be cautious with regards to broad statements around mental health when reporting, and to provide context. Certain language and stereotypes can lead to negative community attitudes and stigmatise people living with an eating disorders as well as present inaccuracies about this serious mental illness or mental health care.

**Please refer to the *Mindframe* guide for safe reporting of Eating Disorders [HERE](#)**

We remind journalists, and those working in the media, that covering these topics can also have an impact on their own welfare. To support media professionals, *Mindframe*, in consultation with the [DART Centre Asia Pacific](#), has developed journalism self-care resources which include helpful tips for journalists as well as advice for editors and line managers. These resources can be found [here](#).

Adding help-seeking information to stories (online, print and broadcast) can also provide somewhere for people who may be adversely impacted by coverage to find professional support, and we encourage media professionals to include the following information in their stories:

**Key national crisis support services include:**



- **Butterfly's National Helpline on 1800 33 4673** (AEST 8:00am – 9:00pm, MON – FRI) or live chat: [HERE](#)
- **Lifeline 13 11 14** or [www.lifeline.org.au](http://www.lifeline.org.au)
- **Kids Helpline on 1800 55 1800** or live chat [HERE](#)
- **Headspace on 1800 650 890** or live chat [HERE](#)

## QUICK TIPS FOR REPORTING

- ▶ Present eating disorders as serious mental illnesses accompanied by physical consequences rather than as a lifestyle choice or part of an entertainment story;
- ▶ It is useful to focus on how the eating disorder impacts on the person and on their family;
- ▶ Detailing specific behaviours, measurements or quantities can be problematic as these may prompt others at risk to engage in these harmful behaviours;
- ▶ Avoid use of images of people with extreme body weights or shapes, as this may motivate some people at risk to strive to achieve an unrealistic shape or size;
- ▶ Language is best if it does not label the person by their illness or present eating disorders as glamorous or an option for dealing with problems (refer to media guide on use of language);
- ▶ If someone is telling their personal story it is best if they are supported by an appropriate organisation;
- ▶ Consider how celebrity stories are handled and try to avoid glamorising the illness or presenting it as entertainment;
- ▶ Eating disorders are a specialised field, so consult with recognised experts for accuracy and clarity;
- ▶ Promote help-seeking by adding information about support services.



## What language is best to use?

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                         |  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>  |

## Can certain information or images be problematic?

Certain information and images can be associated with greater body dissatisfaction and disordered eating behaviour in people who may be at risk. Some common issues faced, and possible recommendations to address these, are presented below.

|  Issue   |  Options   |
|---|---|
| Detailed and specific information of how a person engaged in behaviours associated with an eating disorder may prompt others at risk to engage in harmful 'copycat' behaviours.   | Discuss behaviours in general terms (e.g. purging) without reference to the steps taken, frequency of the behaviour or any implements used. |
| The inclusion of measurements or other quantifiable details in text or visual captions (e.g. weight, BMI, number of hours of exercise, kilojoule intake) could promote harmful competition or comparison (e.g. <i>"I only lost 43kg not 50, I only did 3 hours of exercise, not 5"</i> ). | Try to present images, information and captions which relate to health and wellbeing.   |
| Images of people with extreme body weights or shapes can have adverse effects by motivating some people to try to achieve an unrealistic body shape or size.  | Include a diversity of images, including people who have a variety of sizes and shapes.   |
| Specific references to or visuals of pro-eating disorder websites can promote places where people at risk can be introduced or exposed to unhelpful tricks and tips.  | Discuss sites in general terms only or where possible refrain from any reference to them.   |

## Contact information

All enquiries relating to the need for expert advice on Eating Disorders can be directed to Butterfly's National Communications Manager, Sarah Spence – [sarah@thebutterflyfoundation.org.au](mailto:sarah@thebutterflyfoundation.org.au)

The *Mindframe* National Media Initiative can provide media comment or expert advice when reporting on suicide and/or mental illness. Our spokesperson is: Marc Bryant, Program Manager *Mindframe* National Media Initiative.

For further information or advice, please visit the [Mindframe website](#) or contact:

### **The *Mindframe* project team**

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