Case Study 7: Eating Disorders

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

Journalism student notes

This case study is designed to give students some practice in considering issues associated with reporting or communicating about eating disorders and mental illness 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. However, if students do become distressed as a result of using these materials or because of other problems, and these feelings continue, they should talk to someone they trust such as a lecturer, tutor, or counsellor at their university.

Students can also talk 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
- Eating Disorders Victoria (03) 9885 0318 (metro) OR 1300 550 236 (non-metro); www.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 and www.reachout.com

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

- Mindframe Reporting and Portrayal of Eating Disorders resource here
- Discussing sensitive issues here

Further resources and information can be found on the Mindframe for journalism and public relations education website at www.mindframe-media.info

The media can play a positive role in stimulating balanced messages about healthy eating attitudes and behaviours and 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 also 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, just like any other mental health issue. 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

National Eating Disorders Association 2013
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, followed up by 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 start to appear on Amelia’s Facebook and twitter sites
- The performance is cancelled and patrons are mostly angry and upset at being deprived of viewing the entire performance, despite being offered tickets to future performances
- There is considerable traffic on the theatre company’s website and a large volume of media interest in 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?

Students, parents and staff at the theatre would be the target groups which would need to be considered when determining news values of impact, timeliness, proximity, conflict, currency, unusualness and relativity and public interest issues. Consider publics and students who are vulnerable and consider what support can be offered to those who may be directly affected.

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

**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. Students will also need to determine if they need further information before they can conclude this, and how they would obtain information relevant to their local area, in addition to national helplines.

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

Students can refer to the “Ten questions to guide the journalist through the decision making process” outlined by Black, Steele and Barney (1997).

**Question 3:** Who would you interview?

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.

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.

Question 4: Discuss the impact and use of social media in 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

Question 5: What other decisions need to be made before deciding to send a twitter message, post on 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.

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.

Question 6: How should the story be reported?

The main issues students will need to resolve in developing a news report based on the scenario are:

Selecting the ‘frame’

- Consider how important are the views of the theatre and local community
- How important are the views of the theatre and local community?
- What facts should be included in the story eg. “who, what, where, when, why and how”
- How would a member of the audience feel after seeing this report?
- Is the report fair as well as accurate?
- Use of non-stigmatising language
- Avoiding stereotypes and sensationalism
Question 7: What are the specific issues associated with reporting this as a TV news story?

Some questions to consider 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?

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

Question 9: Using this scenario for ethical debate:

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 points for consideration are:

- When it comes to reporting eating disorders, is the media 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?
- What is the role/responsibility of the journalist in interviewing people who are distressed or traumatised? What is an appropriate way of reporting this?

NOTE: Refer to Mindframe Reporting and Portrayal of Eating Disorders resource here

Further reference materials are available at www.mindframe-media.info, including links to research on eating disorders, mental health and mental illness reporting.
References


Websites:


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. edfveatingdisorders.org.au


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/