

Lived Experience

Safe Sharing Guidelines

Guidelines to follow to ensure you are sharing your story safely when engaging with media.

Sharing your own experience is a remarkable opportunity to empower yourself and others, encourage help seeking, build understanding, raise awareness, challenge stereotypes, reduce stigma and is an opportunity for you to contribute to the community in a meaningful way.

One of the best ways to do this is by sharing your story with the media and this document provides you with an overview of how to do this safely. It outlines the parts of your story that are best to leave out when speaking to media and why. It also provides some thought starters when considering what parts of your story you might like to share.

Eating Disorders and the Media

The media has a powerful role in increasing community understanding of the risk factors and impact of eating disorders. However, eating disorders and body image concerns can sometimes be difficult to portray accurately and sensitively. Certain types of reporting can lead to potentially harmful impacts on those living with or at risk of an eating disorder. The media can also reinforce common and often false stereotypes about eating disorders e.g. focusing on anorexia, being underweight and a mainly female issue. However, there are a range of eating disorders and they do not discriminate against gender, age, ethnicity, socioeconomic status, or body type. It is important that the media show a range of eating disorders, that they can all be associated with serious consequences including mortality and that no person has the same experience.

So what does that mean when sharing your story with the media?

Learning how to safely share your story will help the media to portray eating disorders more accurately and sensitively. This will help to breakdown stereotypes and lower the risk of potentially harmful impacts on those engaging with the content. It is therefore very important to be aware of the things that are best to leave out when engaging with the media as some information can be potentially triggering and may prompt others at risk to engage in harmful behaviours and/or copycat behaviours.

LET'S TALK about the parts of your story that are best to leave out:

You can discuss your past behaviours in general terms (e.g. purging, restricting, bingeing) without reference to the steps taken, frequency of the behaviour or any implements. Please see examples below of specific mentions that are best to leave out:



Specific Behaviours

Some examples of specific behaviours to avoid discussing:

- I engaged in this activity x amount of times per day/week
- I ate x amount of food x times a day
- I went to the gym x number of times a week for x amount of time each time



Measurements and metrics

Some examples of specific measures and metrics to avoid discussing:

- How much you weighed/how much weight you have gained or lost
- What size clothing you were/comparisons of clothing sizes
- What your measurements were/are
- Your BMI
- Calorie intake.



Language that places value judgement on appearance

Words such as thin, skinny, and obese are best to avoid. Try to use phrases such as 'under-weight', 'an unhealthy weight' or 'living in a larger body' instead.



Before and After images

Providing before and after images can be very triggering for some people and we strongly discourage media from using them when reporting on eating disorders.

What if the journalist specifically asks you to talk about/provide the above?

Sometimes a journalist may be pushy and ask for specific details. They may tell you that it will be off the record. Please remember **nothing is off the record**. Anything you say or write to a journalist could be included. If this does happen it is important that you feel comfortable to explain that sharing those details are potentially harmful and decline to answer. It could in fact be an opportunity to educate a journalist as to why we do not include metrics/triggering words/before & after comparisons etc. – because they can be potentially triggering to people engaging with this content.

Now LET'S TALK about the areas we encourage you talking about and some potential thought starters for what to discuss



Talking about eating disorders as a serious mental illness accompanied by physical symptoms rather than a lifestyle choice.



Discuss both the physical and psychological impacts that your eating disorder had on you.



Talk about how the eating disorder and or body image concern impacted you, your family, and your friends. This can include challenges which you and/or loved ones may have faced and how they were overcome.



Try to emphasise the importance and value of help-seeking as the evidence shows that when treated early, people can have very good outcomes.



Your unique view and experiences possibly including what you think led to you developing issues around food.



Your recovery journey to wellbeing.



Talk to the fact the term 'eating disorders' covers a range of food-related disorders and no eating disorder experience is the same.

And please remember:

If you feel uncomfortable at any time during an interview or feel you have been triggered in any way, then you can end the conversation and pull out of the opportunity. If this does occur, please contact the Speaker and Ambassador Coordinator or the Butterfly Helpline for counselling support.

Please contact Kate, the Speaker and Ambassador Coordinator if you have any questions or concerns regarding this document.