

“Stop Propagating it is ‘Normal’ to Look Like Models”

TV Programs and Their Role in the Context of Eating Disorders in Germany

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Eating disorders are one of the most common psychosomatic illnesses among girls and young women in western industrial countries. This study aims at giving a voice to girls currently receiving therapy for an eating disorder. Our informants were n=95 girls between 11 and 18 years of age. They filled out questionnaires with open and standardized questions regarding the role of TV shows in the context of the participants’ eating disorders. There was one program mentioned, unprompted, above all others: *Germany’s Next Topmodel (GNTM)*. It fosters unrealistic standards and body dissatisfaction when the girls started to compare every detail of their body with the candidates’ bodies. They adopt the implicit logic of the format and disconnect from their own perceptions, feelings and needs in order to succeed. If this happens at a time of identity crisis and among girls with corresponding psychological dispositions it can lead to an eating disorder.

Nora is 13, almost 14 years old. When she was 11, she couldn’t hide it anymore: she was anorexic. The deeper reasons for the serious psychosomatic disorder are extremely complex. Predispositions are very likely to play a key role, it has to do in many cases with a performance-oriented family and with herself because she fits into the typical pattern of the self: “ambitious, shy, perfectionist”. From Nora’s perspective, however, it was mostly the ideal of beauty that drove her illness in its formative stages: “Beauty is when you glow. When people see you and think: ‘Wow, I want to look like that’, ‘She’s perfect’, ‘She doesn’t have an extra gram anywhere on her body.’” Those are ideas she got from the media, as in the show *Germany’s Next Topmodel* “You see how you’re supposed to look [...] thin, tall, pretty, natural, long legs, etc. If you don’t look like that, you’re not pretty, or at least not pretty enough to put yourself on display too much.” She has watched *Germany’s Next Topmodel* “as often as possible” since she was 9, first mostly because she wanted to be “cool” and wanted to be able to talk to the other girls at school on Friday mornings. When she describes what she particularly enjoyed about it, she

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says it was “to gossip about it and laugh about the candidates’ emotional breakdowns”. She completely rejects moderator Heidi Klum. Together with this distanced reception, however, she often compared herself with the candidates, especially during “photo shootings on the beach, working out at the gym, and situations in which they ate”. Nora is certain that *Germany’s Next Topmodel* can make an eating disorder worse. She finds it very important to say, though, that: “The boys/girls first have to fit into the pattern of eating disorders, that is, e.g. ambitious, shy, perfectionist. The media shows them what is good, pretty, and cool.” Since she started watching *Germany’s Next Topmodel*, she has had the dream of becoming a model, and every extra gram would work against this goal. At the same time, she knows that she is too young and “not pretty enough” to become a model. Unfortunately, she doesn’t think of the fact that the one-dimensional norms of beauty and the logic of the show and the fashion business – which she can discuss clearly and concisely – aren’t good for her. For three years she has been in treatment, has been in hospital numerous times and now lives in a living community for girls with eating disorders. Without constant supervision, she wouldn’t have a chance of finding her way out of the illness.

Eating disorder and significance of media content

Eating disorders are one of the most common psychosomatic illnesses among girls and young women in western industrial countries. One third of the adolescent girls in Germany can be called “at risk”. At least two in 100 girls have developed a serious eating disorder such as anorexia, bulimia or binge eating and another two per cent per cent have developed other forms of eating disorders (Swanson et al., 2011). The reasons behind the respective illness are always complex and are often a combination of individual and biological risk factors, pushed and triggered by problems in family (Costin, 2007). But there is often also the so called socio-cultural factor for eating disorder, like the dominant beauty image widespread by the media, that is communicated and pushed for example by the peer group. In the research there is barely any doubt that media exposure influences young people’s body image and predicts eating pathologies concurrently and over time (Harrison, 2013). Bell and Dittmar for example have shown in experimental studies that the exposure to pictures of thin model bodies, the satisfaction with the own body spontaneous decline in some girls (e.g. Bell & Dittmar, 2011). Dissatisfaction with one’s own body is, in turn, a proven risk factor for the onset of eating disorders (The McKnight Investigators, 2003). Regular viewers of *Germany’s Next Topmodel* who are underweight have a five times higher risk to think of themselves at least sometimes as “too fat” than the ones not watching the reality TV show (Götz & Mendel, 2015). Nevertheless the significance of media in identity development or in a psychosomatic disorder is not a simple stimulus-response mechanism. Media reception is always an active appropriation, a process of making meaning and integrating selected parts of the media text into identity work, communication, structuring everyday life etc. (Lemish, 2015). So far, there are

only a few qualitative studies of women with an eating disorder which explore in detail the significance of television in the context of their illness. Baumann for example has shown that television is integral to the onset and development of the eating disorder. Particularly at the onset of the illness, young women often feel inferior when confronted with the media ideal of beauty as one of thinness; they feel helpless and imprisoned by the images. Then, in the course of the disorder, they also effectively gather tips on how to manipulate their weight. When something is reported about their illness, they use it as a means of escape or as a source of information and comparison. During the phase of actively overcoming the eating disorder, increased significance is placed upon exposing media stereotypes and dissociating oneself from the beauty ideal of being underweight, from “diet terrorism” and contradictory advertising messages (Baumann, 2009¹). An interview study by Märtschel² reveals: television consumption engenders, among other things, motives specific to eating disorders. Programs provide motivation, recognition and justification for one’s own actions, but they are also a source of information for tips and guidance on optimizing eating disorder behavior. Television is used as a substitute or complement to therapy, sometimes creating a space in which, at least temporarily, individuals do not have to think about the issue of “eating” (Märtschel, 2007). So far, there are no studies that specifically explore the significance of particular television formats in the context of eating disorder and, in addition, facilitate a quantitative evaluation via a broader sample. This is where our study comes in. It aims at giving a voice to the ones currently receiving therapy for an eating disorder and living in clinics or group residential care for eating disorders – like Nora – to explain from their view the meaning of TV series in the development of their own illness.

Method

The study was conducted in collaboration with the Federal Association for Eating Disorders in Germany (BFE) and the contact to the informants was established via members of the Federal Association, mostly the therapists with consent of the institution of treatment.³ The participants, living at that time mainly in hospitals or assisted shared flats, filled out a questionnaire with opened and standardized questions and handed it in to the therapist who gave it to us anonymously. The questions focused on beauty ideals (the participants’ own ideals and the perception of those spread by the media⁴), the participants’ media use at the beginning and during the development of their own eating pathologies,⁵ the role of shows like *Germany’s Next Topmodel* in this context as the highest rated girls’ teen show in Germany. Beyond that the participants were asked to formulate tips and wishes directed towards the media industry from their perspective.⁶

We got answers from 241 informants, mainly girls and young women (96 per cent), with additional 10 young men. Some of the participants of the study are under 16 years old (12 per cent) – the youngest informant is 11 years; almost half are between 16 and 21 years old. The majority of those taking part in the study have been diagnosed with

anorexia (85 per cent); further illnesses are bulimia and eating disorders involving binge eating, sometimes also in combination with one another. In most of the cases the eating disorder got diagnosed between the ages of 12 and 15; for another fifth between 16 and 17 years of age. For this article we will concentrate on the qualitative statements of the under 18-year old girls (n=95) who are looking at their own illness diagnosed in average two-three years ago.

The significance of particular TV programs in the development of eating disorders

In response to our general and open question if there was any TV show that particularly influenced their eating disorder, four fifth (80 per cent) of our informants 18 years and younger (71 per cent in the whole sample) confirmed. This is a hint that TV series do not always play an important role in the development of an eating disorder with girls living in Germany, but often do. And if there was one program mentioned by the adolescence, unprompted, it was above all others: *Germany's Next Topmodel* (48 per cent⁷). Following far behind (6 per cent and lower) were beauty and weight-loss docu-soaps (*Extrem Schön! (Extreme Makeover)*, *Extrem Schwer! (Obese)*) and cooking shows.

We asked the informants to describe in which way this program has influenced their own illness and then typified the answers. In the following we will first present the statements on the programs less frequently mentioned.

Beauty docusoaps to feel better for a short time

In the makeover show *Extreme Makeover* a person is followed as they go through the process of plastic surgery. All the details are shown that the people believe need to be changed, from bad teeth to sagging stomachs and breasts. The doctors who participate talk about the nearly unlimited possibilities for aesthetic operations and the status of treatment. At the end, the person's family and friends are there when the person sees themselves for the first time in a mirror after the operation.

Watching the show gave several of the young women with eating disorders a good feeling because they could look down on the protagonists ("Look Downwards Principle"). At least for a moment, this increases their own feeling of self-worth: "[...] how is it possible to look sooooo awful? After that, everything seems better" (Johanna, 18 years old, anorexia). The show also increases the focus on the apparent flaws and problems zones, however, and intensifies the girls' feeling that their bodies can and must be continually optimised.

Weight-loss docusoaps as a role model for losing weight in a very short period of time

In docusoaps such as *Obese* and *The Biggest Loser*, people are followed through a process of losing weight that is in part set up as a competition. For some, this strengthens the logic that drove them to their illness because “these people have success by losing weight and become more popular” (Lilith, 17 years old, anorexia). That was “an ‘incentive’ to see that they also have to work hard, and I can’t allow myself to look that way” (Melanie, 17 years old, anorexia). Several of those interviewed felt more under pressure after watching the show: “Because you can see how people lose weight there: by working out. Then you get a guilty conscience and want to lose weight that way, too” (16 years old, anorexia and bulimia)

Cooking shows to fill up by watching

Cooking shows were also part of the illness; in these shows the candidates watch and evaluate other participants as they prepare and serve dinner. This type of cooking show can take on a completely unique function in the course of the illness, “because you had a lot to do with food and saw all the good things they were eating that you had forbidden yourself” (Angela, 16 years old, anorexia and bulimia). In part, the show took on the function of “filling up’ by watching. Things that I would really like to eat but am absolutely not allowed to because then I would get even fatter” (Melanie, 17 years old, anorexia).

The show gets the attention of people with eating disorders with their typical “obsession with the topic of food”, offers them imaginary “replacement food”, and thus stabilizes their unhealthy actions in a unique way. Nora, who we met at the beginning, also watched cooking shows daily and with enthusiasm: “because there is a lot of food was shown, how you cook, and then I thought of the idea of cooking for other people. Then I could ‘stuff’ others with calories and make what I would have liked to eat. Besides that, I could ‘fill up by watching’ the show” (Nora, 13 years old, anorexia)

Germany’s Next Topmodel

Beauty and losing weight being linked through the media to *Good Times, Bad Times*, cooking shows and docusoaps are individual cases, but they give important information about the possible role of television shows in the context of eating disorders. However, quantitatively another show is named much more often: *Germany’s Next Topmodel* (*GNTM*).

In response to the open question of whether there is a program that reflects society’s ideal of beauty, 92 per cent of the 18 and younger (83 per cent of the whole sample)

mentioned, unprompted (!), *GNTM*. Most of the adolescents (88 per cent) watch the program; many have been watching it for more than 5 years, and one third of them since primary school. It is the format that has most frequently influenced their illness “very heavily”, and the majority (86 per cent) of our adolescent informants agreed with the statement that *GNTM* can intensify eating disorders such as anorexia and bulimia.

What makes the *Next Topmodel* format attractive?

The success of the *Next Topmodel* format is based on the fact that it is attractive to many female fans (Götz, 2014): *GNTM* focuses on young women and their development more than any other program – independent of romantic relationships, in fact. The program offers a variety of types with whom to identify, setting them challenges in a highly appealing setting for the age group, and in attractive locations. The element of competition and rating within the program creates thrill and, simultaneously, the opportunity to join in the guessing, to rate the contestants, and to “bitch” about them within the peer group and the family. Because the contestants in the program have to go far beyond their comfort zones, the young viewers, too, are forced to ask themselves how they would have behaved in this situation. These are forms of identity work which previous studies have regarded with strong suspicion, arguing that this kind of identity development is beset with pitfalls. This is because the contestants and viewers respectively seem to have absolute agency over their actions and the ability to create themselves through self-knowledge, self-exploration and self-modelling. They seem to personalize the “can do” girl (Harris, 2004). The object they are creating here is their own body. The orientation, however, is not towards individuality or happiness, and neither are these the measure of value; instead, the focus is on the neoliberal values of market success. Young women become “entrepreneurs of the self” (McRobbie, 2009), perpetually focused on the underweight body and its presentation, as well as on conforming to the values of others and a authority of fashion and beauty (McRobbie, 2008) and the interests of a broadcaster and its front woman Heidi Klum. The analysis of the qualitative data reveal a typical path of appropriations of the *Next Topmodel* format that accompanies the way into the eating disorder.

GNTM sets unrealistic standards

The program places appearances at the core of success and recognition. This means the program exclusively presents young women who are physical exceptions: they are at least 1.76m (5 ft 9) tall and, at most, a size 8. The show presents “masses of pretty, perfect girls all in one go, all of them willing to do anything to be beautiful” (Jessica, 17 years, anorexia). This distorts the view of reality and the variety of shapes and sizes

the human body can take in reality. This gives rise to “the feeling that there are so many great, thin, disciplined girls who achieve something by this and, above all, look great!” (Jessica, 17 years, anorexia). Appearance – in terms of absolute exceptions – is equated with success and happiness, thereby becoming the norm. A logic develops whereby “anyone who does not look at least as good as this is ugly, inadequate and fat! This leads to severe inferiority complexes” (Cassandra, 18 years, anorexia).

The desire to look like that, too

A particular feature in the descriptions of the significance of *GNTM* in the context of their own eating disorder is the desire “to look like that, too” (Anna, 17 years, on her own anorexic phase). “Then you want to look just like these girls, and at the same time you are also somehow annoyed with yourself for not having this will power” (Anna2, 17 years, bulimia). The unquestioned norms and the many physical exceptions give our informants the impression that it is their fault if they do not achieve what is apparently normal: “You really want to look like that, like the models, so you lose weight and end up ill” (Yvonne, 16 years, anorexia).

Comparing and conforming

Viewers begin to compare themselves to the candidates, particularly when the contestants are wearing revealing clothing. The “more revealing the clothes are, and, if the pictures are sexy, the more the proportions are emphasized” (Diana, 16 years, anorexia), the more many of our informants feel compelled to compare themselves to the candidates. This comparison is, then, to a certain extent, clearly focused on individual body parts such as a “flat tummy. When the program contestants stand in front of the mirror and say that here and there they are too fat, the young women in front of the television look more closely at their own bodies and find even more inadequacies. Because the women are all extremely skinny, I often compare myself to them. That’s also how my illness began.” (Juliane, 14 years, anorexia) This leads to a logic in particular among high-achieving girls who are willing to conform and can muster up a lot of energy for optimizing themselves to the point of perfectionism – i.e., typical characteristics of people at risk of eating disorders. A typical description of this process written by Lia:

“Many of the girls who take part in *Germany’s Next Topmodel* are just so thin (actually, not all of them, but certainly some), without doing a lot of sport or being overly concerned with their diet. That’s when I started asking, ‘why am I not like that?’ I soon realized that this question would not get me any further, so I started (not only for that reason!) to lose weight and to do a lot of sport. I had/have a deep-seated idea that everything will be easier if I am thin. Every aspect of my life. Which is true, to a certain

extent. I must say, I didn't become anorexic because of *GNTM*, but it did play a role, nonetheless. And nowadays I deliberately DON'T watch it anymore! Because it would really provoke the anorexia again" (Lia, 18 years, anorexia)

Where *GNTM* often strengthens the pathogenic logic of eating disorders

The program enacts its particular power on girls and women predisposed to eating disorders at a deeper level. To summarize the typical meaning of the German version of the *Next Topmodel* format it is important to be aware: A TV show cannot be the main reason for a pathological eating disorder, this will always be multifactorial with complex backgrounds and is mainly based in deeper identity crises (Costin, 2007). Even the ideal of beauty aspired to is rarely at the heart of the eating disorder. Instead, it is about profound crises and uncertainties, experiences or circumstances, which the individual seems to be unable to overcome. Often the eating disorder is a way to maintain the sense of agency despite the person's powerlessness over external events, by shifting one's own perception from the inner worlds to the external spheres of body and food. Manipulating their weight helps them to feel less worthless and, to a certain extent, restores their sense of agency and control; if not with regard to the outside world, then at least with regard to themselves.

If the girls and young women experiencing this kind of crisis encounter the program *GNTM*, they not only accept its values and unachievable standards but also feel inferior and develop a strong desire to conform to this apparent norm. That includes the central subtext of the *GNTM*: "the fight to fit in" (Banet-Weiser, 2004). Success and recognition in the *Next Topmodel* format are connected with unconditional conformity. Every demand, every casting, every challenge, every requirement to "allow their body to be designed by others" must be taken up with enthusiasm, and they must give their all "for the client", i.e. presenter Heidi Klum. To be a part of the system awareness of one's own sensations, such as tiredness, hunger or feeling cold is not allowed, emotions such as shame, disgust, anger or fear have to be suppressed and disconnected from one's own behavior. Disrupting the system, or even criticizing it, leads to inevitable elimination from the show – unless it happens to add to the program's appeal.

The program and psychosomatic eating disorders therefore have a very similar basic logic, and not just at a superficial level of beauty idols. The objective is to subordinate one's actual perceptions, feelings and needs in order to perfectly conform to the demands and norms of others. If this implicit paradigm of the program becomes a guiding principle, it can result in illness in those experiencing an identity crisis, and in those with corresponding psychological dispositions such as the will to achieve and conform or a tendency towards perfectionism. It is therefore not surprising that among the 95 informants of this study age 18 years and younger 32 patients in this study acknowledge

that the program *Germany’s Next Topmodel* has had a “very strong influence” on their illness, and a further 28 said it has had “some influence”.⁸ Using the symbolic material (text) of the media it has offered them guiding principles for their identity work. Particularly if the young women have certain personality profiles and find the concept of being “entrepreneurs of the self” (McRobbie, 2009) appealing, self-optimization of their own body and behavior can lead to a serious psychosomatic disorder.

GNTM, too, should have a minimum BMI, more variety and greater sensitivity

We gave our informants the opportunity to set out the ramifications for the media industry themselves. Overall, they demand a broader spectrum of physicality and natural-looking people in the media whose images are not photo-shopped. There were also repeated calls for “more health education about eating disorders; no demonization of people who have one” (Regine, 16 years, anorexia). In addition to documentary forms, fictional narrative forms would certainly have something to offer here. The particular challenge here will always lie in striking the balance between providing insight without giving people ideas on how to deal with their own problems in a pathological way.

The suggestions regarding the program *GNTM* range from shutting down, “Stop producing the show top models, and start to live in a normal way and to eat more than just a chewing gum” (Sarina, 17 years, bulimia), to the request for the contestants to be treated more humanely and not criticized for every little error. From the perspective of reception research, the main issue is the need for more sensitivity when criticizing the contestants’ bodies. More appreciation of individuality and defiance (including towards Heidi Klum) would be a sign of quality. Moreover, specific contextualization for the viewers would be helpful, for this would convey the fact that the contestants are physical exceptions, and that the required mechanisms of conformity and repression are show-specific and business-specific, not necessarily good for their health. It would, in addition, be thematically appropriate to incorporate education about the issue of anorexia; this would show that the producers were acting responsibly, precisely because the program is being watched by many girls who are at a sensitive age.

One of our informants calls for a targeted promotion of media literacy, an approach which, from a media pedagogy perspective, should be supported. It would be an opportunity to use programs such as *GNTM* for media literacy units in which learners grapple with body images in the media or acquire an understanding of the stage-managed nature of talent shows through critical media analyses.

The most important thing for our informants with an eating disorder is, however: “Stop propagating the idea that it is ‘normal’ to look like models and anyone who weighs more than this does not conform to the social norms; it should be the other way round.” (Eva, 18 years, anorexia). This gives rise to the concrete demand for a minimum BMI

(for models and actresses) and for “size zero to be taken off the market!” (Katrin, 17 years, anorexia), for idealizing obvious underweight bodies means glorifying illness.

Notes

1. 2003/2004 interview study with 45 women with eating disorders.
2. Interview study with 14 women with anorexia.
3. The study took place between November 2014 and February 2015.
4. For example: “In your opinion, what shapes this concept of beauty of the media?” and “What does beauty mean to you?”
5. For example: “Please describe (if you wish in detail) which show in particular has influenced you in which way?”
6. For example: “If you could communicate something to the media industry and if you could even formulate wishes to it, what would that be?”
7. 39per cent in the whole sample
8. Among the whole sample of n=241 70 patients said “very strong influence” and 72 said “some influence”.

References

- Banet-Weiser, S. (2004). Girls rule! Gender, feminism and Nickelodeon. *Critical Studies in Media Communication*, 21, 119-131.
- Baumann, Eva (2009). *Die Symptomatik des Medienhandelns. Zur Rolle der Medien im Kontext der Entstehung, des Verlaufs und der Bewältigung eines gestörten Essverhaltens*. Cologne, Germany: Herbert von Halem. (The symptoms of media work. The role of the media in the context of the development, the course of and the coping with disturbed eating behavior.)
- Bell, B. T. & Dittmar, H. (2011). Does media type matter? The role of identification in adolescent girls' media consumption and the impact of different thin-ideal media on body image. *Sex roles*, 65(7-8), 478-490.
- Costin, C. (2007). *The Eating Disorders Sourcebook. A Comprehensive Guide to the Causes, Treatments, and Prevention of Eating Disorders*. Madison, WI: McGraw Hill Professional.
- Götz, M. (2014). *TV-Hero(in)es of Boys and Girls. Reception Studies of Favorite Characters*. Frankfurt, Germany: Peter Lang.
- Götz, M. & Mendel, C. (2015). The feeling of being “to fat” and Germany's Next Topmodel. A representative study among 6- to 19-year-olds. *TelevIZion*, 28(1), 54-57.
- Harris, A. (2004). *Future Girl. Young Women in the Twenty-first century*. London, UK: Routledge.
- Harrison, K. (2013). Media, body image, and eating disorders. In D. Lemish (ed.), *The Routledge International Handbook of Children, Adolescents and Media* (p. 224-231). London & New York: Routledge.
- Internationales Zentralinstitut für das Jugend- und Bildungfernsehen (IZI) & ANAD e. V. Versorgungszentrum Essstörungen (2016). *Warum seh' ich nicht so aus? Fernsehen im Kontext von Essstörungen*. Munich, Germany: IZI. (Why do I not look like that? Television in the context of eating disorders)
- Lemish, D. (2015). *Children and media. A global perspective*. Malden, MA: Wiley-Blackwell.
- Märschel, S. (2007). What sort of hunger do the media satify? The role of the media in the lives of women with eating disorders. In S. Pfaff-Ruediger & M. Meyen (eds.), *Everyday life, living environment and the media. Qualitative studies on the subjective meaning of media offers* (p. 125-150). Münster, Germany: LIT.
- McRobbie, A. (2008). Top Girls? Young women and the post-feminist sexual contract. *Cultural studies*, 21, 718-737.
- McRobbie, A. (2009). *The aftermath of feminism: gender, culture and social change*. Los Angeles, CA: Sage.
- Swanson, S. A., Crow, S. J., Le Grange, D., Swendsen, J. & Merikangas, K. R. (2011). Prevalence and correlates of eating disorders in adolescents: Results from the national comorbidity survey replication adolescent supplement. *Archives of General Psychiatry*, 68(7), 714-723.
- The McKnight Investigators (2003). Risk factors for the onset of eating disorders in adolescent girls: results of the McKnight longitudinal risk factor study. *American Journal of Psychiatry*, 160, 248-253.