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# PRO-ANOREXIA/BULIMIA INTERACTIONS ONLINE: PROBLEMATIZING COMPLEX CULTURAL PHENOMENA

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**PRO-ANOREXIA/BULIMIA INTERACTIONS ONLINE:  
PROBLEMATIZING COMPLEX CULTURAL PHENOMENA**

by

Nicole Danielle Schott

Master of Arts, Wilfrid Laurier University, 2014

THESIS

Submitted to the Department/Faculty of Criminology

in partial fulfilment of the requirements for

Master of Arts

Wilfrid Laurier University

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## Abstract

In the West, and increasingly globally, individuals, particularly women, are fixated on weight loss, driven by the goal of achieving a culturally-desired, and aggressively marketed, "skinny" female physique. There are online forums where individuals refer to themselves or their eating disorders as "pro-ana" and "pro-mia". Individuals who post on these sites both align with, and challenge, what medical and mental health professionals define as serious mental health problems that result in severe, sometimes fatal, medical complications. This thesis specifically focuses on interactions with, and within, the pro-ana/mia culture on the social media websites Tumblr and YouTube. Over sixteen months, and guided by a feminist postmodern perspective, I immersed myself within a "grounded virtual liquid ethnography" that draws on contemporary methodologies that are suitable for the transitory and destabilized characteristics of blurred online and offline interactions. Through embracing ethnographic sensibilities and being open to marginalized perspectives, I present analyses that are attentive to nuanced meanings produced by others. These critical, sociological analyses alternatively theorize the motivations behind responses to pro-ana/mia communities. Through challenging the dominant responses of the medical model and similar societal discourses that pathologize pro-ana/mia supporters, I uncover serious implications for the socio-cultural, economic, physical and mental health of women and their communities. My analyses *do not* place blame on pro-ana/mia individual women. Instead of supporting the eradication of pro-ana/mia from online spaces, my findings support the importance of learning about how online environments develop and extend critical consciousness about eating-disordered ideologies, practices and solutions to these.

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## Chapter 1: Introduction

In the West, and increasingly globally, individuals, particularly women, are fixated on weight loss, driven by the goal of achieving a culturally-desired, and aggressively marketed, "skinny" female physique. As a woman living in Western society, I have experienced the effects of these cultural messages, and wished that I could be thinner, often with "unsuccessful" results. It was not until I started my thesis research that I became sensitized to the ways in which my friends, family, the media and professionals discuss body weight, especially *female* body weight. I realized that my day-to-day conversations with others about body image almost always involved dissatisfaction, and self-hatred. At times there are congratulatory remarks for the people who have been successful in losing weight, or there are comments that reflect the glorification and envy of women who have "*the perfect body*". I have become painfully aware that there have been, and will be, very few days where I will not be exposed to weight loss advertisements and models who have been airbrushed to "desirable," yet unachievable, body sizes and proportions. These participant observations have shaped how I see body control and weight-loss practices: they are relatable, understandable, interesting and troubling.

This thesis focuses on online forums where individuals discuss themselves and/or others in relation to ideologies and practices involving eating disorders. These phenomena are broadly referred to as "pro-ana" and "pro-mia" and represent a culture that discusses eating disorders in ways that both align with, and challenge, what medical and mental health professionals define as severe, sometimes fatal, medical conditions. This study addresses a gap in literature by presenting findings that detail the complex nature of online interactions around pro-ana and pro-mia and how these align with

various approaches to "dealing" with these communities. Through a triangulation of methodologies attuned to conducting online ethnographic research, I contribute to the academic literature: I provide the first study on pro-ana and pro-mia interactions on YouTube and of responses to Tumblr's policy that censors these interactions and mediates pro-ana and pro-mia with public service announcements. I provide critical, sociological analyses that alternatively theorize about the motivations behind responses to pro-ana and pro-mia communities. Through challenging the dominant responses of the medical model and similar societal discourses that pathologize pro-ana and pro-mia supporters, I uncover serious implications for the socio-cultural, economic, physical and mental health of women and their communities. My analyses *do not* place blame on pro-ana or pro-mia individuals. Instead of supporting the eradication of pro-ana and pro-mia from online spaces, my findings support the importance of learning about how online environments develop and extend critical consciousness about eating-disordered ideologies, practices and solutions to these. Further, I provide recommendations of what can be done to stop the *need for* pro-ana and pro-mia. My analyses place the responsibility for women's experiences of body-image crises on those who, in patriarchal society, profit from their suffering. This thesis aims to provide an awareness of the connections between pro-ana, pro-mia and broader issues around the control of women's bodies and voices. Finally, my aim is to ignite activism toward social change that will eradicate this form of women's oppression.

## **Chapter 2: Review of the Literature**

### **The Medical Approach to Eating Disorders**

The medical authorities in Canada have established what are, today, arguably the most widely-accepted understandings of eating disorders, and a review of their approach provides a foundation for understanding the focus of my research: pro-ana/mia online interactions. Canada's largest mental health and addiction teaching hospital, the Centre for Addiction and Mental Health (CAMH), is one of the world's leading research centres in the area of addiction and mental health. Eating disorders such as anorexia nervosa and bulimia nervosa are included in CAMH's research foci, and CAMH provides specialized treatment programs for eating disorders through their addictions centre. An educational resource provided on the CAMH (2014) website defines eating disorders as:

a range of conditions involving an obsession with food, weight and appearance that negatively affect a person's health, relationships and daily life. Stressful life situations, poor coping skills, socio-cultural factors regarding weight and appearance, genetics, trauma, and family dynamics are thought to play a role in the development of eating disorders.

A similar understanding of the two most common eating disorders is perpetuated by The Canadian Mental Health Association (CMHA) in Ontario (2013), outlines the two most common eating disorders:

Anorexia nervosa and bulimia nervosa are characterized by a disturbance in perception of one's own body shape and weight. People with anorexia nervosa refuse to maintain a minimally normal body weight, which can lead to emaciation, failing physical health, and even death. People with bulimia nervosa, the most



common eating disorder, engage in secretive binge eating followed by self-induced vomiting, the misuse of laxatives, fasting or excessive exercise. While people of all ages and both sexes can experience eating disorders, they commonly affect young women.

According to CMHA, anorexia nervosa is characterized by calorie restriction that does not allow for a "normal" body weight, a distorted body image, an intense and irrational fear of becoming or being fat and a strong determination to lose weight. CMHA defines bulimia as cycles of bingeing and purging food as a way to cope with anxiety about weight gain and body image.

Another example of a medical approach to eating disorders, like those described above, is reflected by The National Eating Disorder Information Centre (NEDIC), located in Toronto, Canada. It provides "facts", statistics, definitions, and information about treatment, care, support and recovery for anorexia nervosa, as well as how to give and get help on their website. Like other medical authorities, NEDIC defines "anorexia nervosa", "bulimia nervosa", "binge eating disorder" and "eating disorders otherwise not specified" as "clinical" eating disorders.

NEDIC's website describes people who have clinical eating disorders as being obsessed with controlling their eating to the point of starvation as a way to achieve a sense of control over their lives. The symptoms of anorexia nervosa are listed on NEDIC's information page, and include: maintaining and desiring a weight below "normal" for age and height, a fear of becoming fat and an inability to perceive the reality of their body weight. The NEDIC website explains that bulimia nervosa, like anorexia nervosa, is driven by a desire to control one's feelings and concerns about body size, but

is uniquely characterized by cycles of bingeing and purging. NEDIC describes bingeing as "helplessly" gorging large amounts of food in short periods of time causing physical discomfort and anxiety accompanied by anger, sadness or numb uncomfortable feelings. These feelings bring on the purging part of the cycle that triggers an individual's attempt to rid the food they consumed through vomiting, using laxatives, enemas or diuretics, by exercising excessively, by skipping meals or by dieting. NEDIC argues that this is both an ineffective and harmful way to prevent weight gain, noting that people with bulimia can have a "normal" body weight. NEDIC also explains that individuals with bulimia nervosa often measure their own self-worth based on their body weight and shape. Hereafter, we will refer to anorexia nervosa as "anorexia" and bulimia nervosa as "bulimia."

Numerous authoritative sources describe anorexia and bulimia as medical problems that affect a significant segment of the population. NEDIC outlines findings from "Project Eat", a population-based study of approximately 5,000 teens, "that found more than half of girls and one third of boys engage in unhealthy weight control behaviours (e.g., fasting, vomiting, laxatives, skipping meals, or smoking to control appetite)." Sick Kids Hospital (2012) in Toronto reports that "eating disorders, such as anorexia nervosa and bulimia nervosa, are the third most common chronic illness among adolescents." Statistics Canada (2012) reports that up to 1% of the Canadian population suffers from anorexia and up to 3% from bulimia. Today, a diagnosis of a clinical eating disorder is a recognized medical condition that typically is understood and responded to as a "mental illness". The Canadian Mental Health Association (CMHA) (2012) stresses the severity of the problem and highlights that the mortality rate of those identified with

an eating disorder is 10-20%; higher than any other mental illness .

### **The Evolution of Understandings of Eating Disorders**

Well-known historian Joan Jacobs Brumberg's (2000) most recent edition of *Fasting Girls: The History of Anorexia Nervosa* draws attention to the ways in which understandings of eating disorders are historically specific. She (2000) traces the history of anorexia, "from sainthood to patienthood," arguing that "certain social and cultural systems, at different points in time, encourage or promote control of appetite in women, but for different reasons and purposes" (46-47). Brumberg's (2000) historical analysis suggests that:

to attempt to explain anorexia nervosa with a single psychodynamic formulation was ultimately doomed by the complexity of the disorder and the fact that it is not a static condition. For some, anorexia was chronic, for others, merely episodic (227).

Anorexic fasting, even to the point of death, for medieval women reflected female holiness whereas the nineteenth century Victorian anorexia was seen as a manifestation of female hysteria, individual pathology, attention-seeking, and moral and family failings (Brumberg 2000). While "anorexia nervosa continued to be conceptualized by most doctors as a variant of hysterical behaviour" (Brumberg 2000, 147) in the nineteenth century, some began to blame women's new involvement in higher education: "amenorrhea in anorexia nervosa was exactly the kind of morbid physical consequence that doctors such as Clarke and Playfair linked to intellectual activity" (149).

Treatments included medical supervision and authority, excessive feeding, and isolation from friends and family (Brumberg 2000). Weight gain was considered the

major medical success and recovery resulting from therapeutic intervention. Force feeding was common: "the medical entrepreneurs who ran the private asylums turned to [force feeding] when they faced an intractable patient whose patients were paying handsomely to see her weight increase" (Brumberg 2000, 153). Very little time was spent asking about the motivation or etiology of why people with anorexia did not eat (Brumberg 2000). An early, radical critique of this situation came from Dr. Berdt Hovell, who argued that expert doctors, through treatment methods that generated a great deal of money, were "throwing blame on the patient." Although he maintained that: it was "absolutely critical that girls with anorexia nervosa not be treated with "censure and neglect" (Brumberg 2000, 153), his theorizing did not catch much supportive wind or embracement by others.

The death of the popular singer Karen Carpenter in 1983 from anorexia raised public awareness of the disorder, and brought anorexia into the vocabulary of American's common use to comment on each others' bodies, such as the now common phrase: "You look so anorexic" (Brumberg 2000, 198). In the twentieth century, modern dieting was linked to eating disorders: "the popularization of adolescent female weight control in the post-war era is a prime component of the modern dieting story and a critical factor in explaining anorexia nervosa as we know it today" (Brumberg 2000, 250). Twentieth century anorexia can now be understood as a "condition involv[ing the] control of appetite rather than loss of it" (Brumberg, 228). Brumberg (2000) reports that the "psychological studies confirm that weight is women's "normative obsession" and American society is obesophobic" (200), because what doctors

failed to realize was that for many women appetite control was now a way of

life...[and] early-twentieth-century science only legitimated their concern...: the traditional association of fatness with prosperity and good health all but disappeared...[as] the medical establishment and the insurance industry began to promote an ideal body type that was decidedly thinner than fifty years before (231).

Brumberg (2000) used a recent Tommy Hilfiger advertisement to illustrate "the current body ideal: lean and perfectly toned with a taut pelvis and sinewy thighs, [arguing that] as more and more flesh is made public, the pressure intensifies for perfecting every part of the body" (204). Excess fat on a woman was seen as "a character flaw and a social impediment", a lack of self-control, and as the failure of mothers to provide healthy nutrition for themselves and their families when they entered the workforce (Brumberg 2000, 236). During the new culture of slenderized fashion and calorie-counting "many internalized the notion that the size and shape of the body was a measure of self-worth" (Brumberg 2000, 245). For example, *Seventeen* magazine in 1946 advertised diet-foods, telling their readership that "Nobody Loves a Fat Girl" (Brumberg 2000, 249). As the medical concern for obesity grew, the cultural intolerance for body fat followed suit: "the American people spent \$5 billion [in 1985] on the effort to lose weight" (Brumberg 2000, 250). As "the body becomes an instrument of competition, a way to demonstrate one's mettle" (Brumberg 2000, 252), "the history of the diet industry in America (as yet unwritten) probably represents one of the most astounding triumphs of the twentieth-century capitalist enterprise" (Brumberg 2000, 250). Brumberg's (2000) analysis of the contemporary understanding of anorexia is that "given our longstanding and extravagant collective worship at the shrine of slimness, it is no wonder that so many contemporary

young women make dieting an article of faith and that anorexia nervosa has become the characteristic psychopathology of the female adolescent of our day" (254).

Since the publication of Brumberg's analysis 14 years ago, there has been a continued lack of eating-disorder scholarship and treatment that is attentive to the role of contemporary culture and cultural images (Bordo 2003), and a "comprehensive theoretical framework to guide successful treatment has yet to be identified" (Van Harte 2009, 1). Rance et al. (2014) report the "poor recovery rates and high levels of drop out in eating disorder treatment" (111). Furthermore, The Report of the National Institutes of Health Workshop on Overcoming Barriers to Treatment Research in Anorexia Nervosa (Agras et al. 2003, 519) reports that there is very little research on anorexia nervosa (AN) treatment that is positive, arguing that "treatment approaches have paid insufficient attention to some of the distinctive features of AN." Bodell and Keel's (2010) review of randomized control trials (RCTs) in anorexia synthesized the existing data, and also concluded that "evidence for treatment in AN remains limited despite decades of [randomized controlled trials] and there are no definitive treatments that work best for the majority of patients" (106). The consequences of failed attempts to treat eating disorders are startling - in a study conducted by Suakas et al. (2014) "the risk of death [for individuals with eating disorders] from any cause was [found to be] 12.8%, suicide being the main cause in 45% of the deaths" (355). For adolescents, the most promising treatment efficacy has been family-based treatment (Bodell and Keel 2010; Starr et al. 2014), yet there is still a strong call for new treatment initiatives by all those who report on the limitations of current treatment approaches. Many researchers, experts and laypeople name eating disorders as a form of self-harm (See: Tumblr Self-harm Policy).

With an open mind to alternative approaches to self-harm treatment, Michael and Jane (2000) argue for an approach "that is based on harm minimization rather than abstinence. In practice this translates into a tolerance of self-harm, within limits, while enabling patients to find alternative, healthier means to communicate and cope" (48).

### **Analyses of Pro-Ana/Mia Websites**

In tandem with technological developments, there has been growing evidence of online communities that provide spaces for the discussion and support of eating disordered practices. It is estimated that websites that cater to discussions about pro-ana/mia number anywhere from 200 to 400 (Brotsky and Giles 2007) to over 500 (Chelsey et al. 2003). NEDIC is one example of the opposition to these websites. It has a "fact" page that expresses strong concern about the growth of pro-ana/mia websites, stressing that eating disorders *are not* a choice, and that the websites are dangerous, delusional, exemplary of denial and full of distortions (see <http://www.nedic.ca/knowthefacts/proanorexiasites.shtml>). The web page provides strongly-worded descriptions and warnings about pro-ana/mia websites stating that the websites promote "starving bodies" as beautiful, glamorous and desirable. NEDIC warns people about the dangerous ways in which these websites target and deceive young girls and women. Pro-ana/mia, like anorexia and bulimia, are frequently portrayed as mental illnesses that require individual intervention and treatment from medical and psychological professionals according to the medical model (See <http://www.nedic.ca/knowthefacts/proanorexiasites.shtml>). Eating disorder organizations agree that pro-ana/mia content and the related interactions online should be eliminated (Shade 2003).

The media promotes medical-model messages that highlight the problem of pro-

ana/mia in a sensationalized fashion, arguably to sell news. Jacqueline Head from BBC News (2007) reports that "joining one 'pro-ana' group can lead you to five more, and so on, opening up a world that, while posing as a means of support, more often tends to glamorise and advocate illnesses that can cause infertility, heart disease and death" ([http://news.bbc.co.uk/2/mobile/uk\\_news/magazine/6935768.stm](http://news.bbc.co.uk/2/mobile/uk_news/magazine/6935768.stm)). The Daily Telegraph online newspaper (2009) reported the results of a study that revealed that one in five 11 year old girls search "pro-ana" websites for weight loss tips. On his television show, Dr. Oz features pro-ana/mia websites as a "dangerous online movement" that requires expert treatment intervention (The Dr. Oz Show 2012). In keeping with the medical model, the media typically supports or directly calls for the censorship of pro-ana/mia, however there are some journalists who have referenced the academic literature that question censorship, and report the benefits of pro-ana/mia websites. These journalists have questioned the motives behind censorship: "critics have suggested [censorship] measures are more concerned with minimizing litigation than harm" (McColl 2013, 13). Much of the scholarly literature on pro-ana/mia is characterized by analyses that similarly denounce pro-ana/mia websites, with many who speak to the benefits of the websites and few that critique censorship.

Like the medical and media analyses, most social science research studies are rooted in the assumption that pro-eating disorder websites are a problem that requires a solution (Bardone-Cone and Cass 2007; Fox, Ward and O'Rourke 2005; Strife and Rickard 2011; Sharpe et al. 2011; Rodgers, Skowron and Chabrol 2012; Grunwald, Wesemann and Rall 2008; Harshbarger et al. 2009). These studies report the negative impacts that visiting pro-ana/mia websites can have on girls, including a higher drive for



thinness, worsened perceptions of appearance, more perfectionism (Custers and Van Den Bulck 2009), weight dissatisfaction (Bardone-Cone and Cass 2007), lower calorie intake (Jett, LaPorte and Wanchisn 2010), and exposure to new skills for weight loss techniques (Wilson et al. 2006). Pollack (2003) also warns readers that pro-ana/mia websites may act as a "trigger", inducing or worsening eating disordered behaviours in vulnerable women. Most of the social science literature maintains that pro-ana/mia websites actively support and promote "non-recovery" from anorexia and bulimia (Shade 2003; Csipke and Horne 2007; Fox, Ward and O'Rourke 2005; Haas et al. 2011), while fewer studies make the case that pro-ana/mia websites encourage women to recover (Casilli, Tubaro and Araya 2011).

Some of the social science literature has focused on *describing* the content of pro-ana/mia websites, noting that individuals who identify as pro-ana/mia engage in discussions online in many different forms. These include: bulletin boards, static websites, blog web pages, groups on social network sites, email groups and instant messaging communities (Boero and Pascoe 2012). Sharpe et al. (2011) provide a succinct summary of the types of content found on pro-eating disorder websites, a description that resonates with those of the medical professionals:

Tips on weight loss and how to keep it secret; tips on how to deceive others about eating habits; tips on purging (food that can be vomited easily, keeping it secret); images and texts promoting extreme thinness or weight loss ("thinspiration"); a personification of eating disorders as supportive friend; creative writing glorifying eating disorders; and list of commandments for the ana/mia "religion" (33).

These researchers mention that many of the "thinspiration" (sometimes referred to as

"thinspo") are of popular ultra-thin and often airbrush-altered celebrities. Overall, social scientists paint pro-ana/mia websites as graphic, dangerous and "disgusting" online environments (Ferreday 2003). For example, Hammersley and Theseder (2007) convey this negative appraisal (2007) by quoting a pro-ana/mia website creator who writes (191-192):

- My lifetime goal is to die from starvation.
- The more weight I lose, the better I feel.
- There's no such thing as too thin.
- Eating is a sign of weakness.
- Perfection is achieved through restricting.
- Anorexia will make you *beautiful*.
- No one can do what I (we) do.
- Protruding bones make you look *awesome*.
- Anorexia shows **you are superior**.
- Critics of anorexia are jealous or fat.
- No matter where you go, *you're still thin*.
- No matter what you do, *you're still thin*.
- I am in control, ALWAYS.
- No one can take ana from me, **no one!**
- Extreme emaciation is a good start. (bold and italics in the original)

Other social science literature has focused on *explaining* pro-ana/mia websites. Often these articles highlight the positive functions of pro-ana/mia websites and make the case that these websites serve as communities for those who feel isolated and are looking

for social and emotional support from like-minded individuals (Boero and Pascoe 2012; Brotsky and Giles 2007; Riley, Rodham and Gavin 2009; Ferreday 2003; Canto-Mila and Seebach 2011). For example, Brotsky and Giles (2007) found that "a general sense of support is the central function of pro-ana sites, whether that support is directed at maintaining the eating disorder or choosing to seek treatment" (101). Sharpe et al. (2011) report that "many studies also find that members receive emotional support from the group (Mulveen and Hepworth 2006)" (see Boero and Pascoe 2012; Brotsky and Giles 2007; Gavin, Rodham and Poyer 2008; Csipke and Horne 2007). Juarascio, Shoaib and Timko (2010) report that women with eating disorders who access these websites lack strong social support systems offline (Tiller, Schmidt, and Troop 1995) and often suffer from depression and social anxiety. Some have argued that using the websites is a coping strategy for individuals (Lyons, Mehl and Pennebaker 2004) and being part of this online community has been shown to improve self-esteem (Csipke and Horne 2007). Others have argued that engaging in these websites helps negotiate, manage, and develop a sense of identity (Haas et al. 2011; Giles 2006; Gavin Rodham and Poyer 2008; Rodgers, Skowron, and Chabrol 2012) because of the support and approval of the online community. The purported identities of pro-ana/mia authors online have, at times, been contested and individuals who have been suspected to not be authentically pro-eating disordered have been labeled "wannarexics" (Riley, Rodham and Gavin 2009; Boero and Pascoe 2012; Ferreday 2003). The pro-ana/mia communities use "pro-ana" and "pro-mia" as a way to distinguish themselves from "anorexics", "bulimics" and "wannarexics" (Riley, Rodham and Gavin 2009; Boero and Pascoe 2012; Ferreday 2003) and the negative associations that accompany these. Some scholars have argued that efforts to

protect the identity of pro-ana/mia can result in aggressive behaviour that mocks or tries to "out" unauthentic infiltrators, such that pro-ana/mia becomes an elitist group that only the strongest of people can authentically join (Riley, Rodham and Gavin 2009; Boero and Pascoe 2012; Ferreday 2003).

Gailey (2009) is the only researcher who has used the concept of edgework, an explanation for voluntary risk-taking, to analyze the pro-ana subculture. She found that women use "pro-ana skills" in order to resume control over feelings of loss of control. Gailey (2009) suggests that women in the pro-ana community think they "possess superior control and skills" (100), use vocabularies of motives and discuss how they experience forms of "euphoria, happiness and altered states of reality" (104) when fasting and losing weight (also see Riley, Rodham and Gavin 2009; Pascoe and Boero 2012). Gailey (2009) argues that pro-ana subcultures engage in edgework activities as a form of achieving self-actualization, but the response to those efforts are gender-specific:

A woman who is rushed to the hospital because her major organs are shutting down from starvation is no different than a man who is near death from a motorcycle accident where he was "screaming through an S-curve at 120 miles per hour" (Lyng 1998, p. 221).

What does ultimately differ is the reaction by society, assuming they both live. The man will be treated and released; the woman will be sent to the psychiatric ward or the hospital until she gains "enough" weight and has shown that she is "recovered" (105). The more critical analyses of pro ana/mia websites, like Gailey's work, depart from the medical explanations and offer sociological analyses of pro-ana/mia online communities. These articles attend to the broader contexts in which pro-ana/mia online interactions are

taking place. For example, Nichter (2001) found that “talking about weight loss and diets is almost ubiquitous among young girls” (as referenced by Boero and Pascoe 2012, 30) in offline interactions. Further, Boero and Pascoe (2012) argued that “focusing on these sites is also a way to deflect attention from larger cultural messages around eating and body size found in mainstream media outlets which are not so different from the ones promulgated on these sites” (36).

There has been very little in-depth research that focuses specifically on the origins or implications of the decision to censor pro-ana/mia websites, although there are many examples of countries banning these. For example, France has banned the encouragement and glorification of extreme thinness on websites, advertisements, and magazines in response to the public concern about pro-eating disorder websites (Rodger, Skowron and Chabrol 2012). In 2001, after receiving complaints, Yahoo began deleting pro-eating disorder websites (Ferreday 2003), framing them as “self-harm,” and arguing that they are contrary to the terms of their service agreement. Social media websites such as Facebook have employees that monitor and delete pro-ana/mia groups on a regular basis (Peng 2008). Some of these websites have produced guidelines and policies, such as “Instagram’s New Guidelines Against Self-Harm Images & Accounts” after a similar social media website, Pinterest, did so in March 2012 (Olsen 2012). Tumblr, was the first social media website to instigate a similar policy in February 2012 after consulting with the National Eating Disorder Association (NEDA) located in the United States.

Ferreday (2003) is one of the few social scientists who has done research on the origins of these decisions to censor. He argues that "the dominant emotion [of society] is not sympathy or concern for the young women involved, but disgust" (288), as evidenced

by newspaper articles and comments on the internet which allege that the anorexic body, "evokes an instant reaction of disgust" (290), causing individuals to become "sick to the stomach" (291), "gag" (290) and filled with "a desire to vomit" (292) (See also Hammersley and Theseder 2007; Lougheed 2006). Ferreday argues that the disgust response combines with the sensationalism of harm to fuel the desire to censor pro-ana/mia.

Others have *theorized* the implications of the online censorship of pro-ana/mia, concluding that it is a futile goal (Brotsky and Giles 2009; Csipke and Horne 2007; Custers and Vanden den Bulk 2009; Gailey 2009; Shade 2003). A recent study by Casilli, Pailler and Tubaro (2013) mapped networks of French pro-ana/mia websites over two years and found that censorship initiatives have caused pro-ana/mia networks to become more entrenched, isolated, exclusive, and harder to be reached by physicians, families and charities (Casilli, Pailler and Tubaro 2013). Cassilli, Pailler and Tubaro (2013) deduce from their findings that "censorship means bad news for health care providers and policy makers alike" (95) because health information and awareness campaigns are increasingly having a harder time finding pro-ana/mia communities. In a similar vein, others have argued that censorship has removed an important means of social support for pro-ana/mia individuals that helped them cope with "a life of isolation, fear and self-hatred" (Gailey 2009, 107). Csipke and Horne (2007) also suggest that it would be better for "clinicians to acknowledge the needs these sites fulfill and to address them in conventional treatments for eating disorders" (27). Shade (2003) posits that regardless of whether the websites are pro-ana/mia- or anti-ana/mia, they are "exemplary of young women creating their own discursive online community...to debate this issue in their own

space and on their own terms" (2). Only a few analyses argue that censorship serves to deflect attention away from the larger and more germane issue of the mainstream cultural messages that valorize thinness (e.g., see Gailey 2009, 107; Boero and Pascoe 2012, 36).

While PSAs are a response to pro-ana/mia, there has been no research that provides evidence of the effectiveness of PSAs in reducing pro-ana/mia "self-harm." In this regard, Corrigan (2012) reports that there are very few studies that evaluate the effectiveness of PSAs for eliminating the stigma around mental illness. In addition, Corrigan (2012) argues that those who are running PSA campaigns should be responsible for determining the efficacy of their initiatives. Lienemann, Siegel and Crano (2013) make the case that while the spirit behind PSAs to help individuals with depression may be benevolent, there may be untoward effects of such PSAs. The findings of their study suggested that individuals identified as having depression react differently to PSAs than non-depressed individuals, so that PSAs for depression "cannot be based on face value, good intentions and hope" because the high mortality rate associated with depression is a serious risk (2013, 725). To use PSAs uncritically is, they argue, "a behaviour akin to reckless endangerment" (Lienemann, Siegel and Crano 2013, 726). In fact, one study that did examine the effectiveness of PSAs for suicide prevention found that they had negative consequences such as making targeted individuals less likely to seek help (Klimes-Dougan, Klingbeil and Meller 2013). Furthermore, the fact that PSAs recommend treatment services for pro-ana/mia is also problematic, because as was discussed previously, evidence-based research on the effectiveness of anorexia nervosa treatment is lacking (e.g., see Rance et al. 2014, 111; Agras et al. 2003, 519).

In the next chapter I will describe the methodology that guided my research, followed by chapter 4 that outlines the theoretical frameworks that structured my analyses.



### Chapter 3: Methodology

This study utilizes two types of triangulation that Norman Denzin (2011) identifies: data triangulation (the use of multiple data sources) and theoretical triangulation (the use of various theories and perspectives to analyze the phenomenon of study). First, I will outline the research questions that guided the grounded theory study. Next, I will describe my ethnographic immersion that endured throughout the research process, blurring my engagement in the field online with my engagement offline, and demanding profound emotional work. After, I will outline the three major types of ethnographies that informed my work. Finally, I will describe the types of data triangulated, the analytic memoing process, and the ethical considerations of the study.

#### Research Questions

The research questions that guided the grounded theory study were as follows:

1. Given the predominance of the medical model and similar societal discourses that pathologize pro-ana/mia **supporters**:
  - a) What is the nature of the online interactions around pro-ana/mia communities and how do these align with various approaches to this phenomenon?
  - b) how might pro-ana/mia be alternatively theorized, drawing on critical theorizing from sociology, history, criminology, and political science?
  - c) what is the significance of the online interactions, and the alternative theorizing of them, for our understandings of, and approaches to, pro-ana/mia and related phenomena?

The development of these questions was in keeping with a grounded theory approach (Charmaz 2006), and forthcoming during the initial months of ethnographic immersion

into the online world of pro-ana/mia, which spanned a total of sixteen months (October 2012-January 2013).

### **Blurred Online and Offline Engagement**

After I became immersed into the online field of pro-ana/mia, as both a researcher and a woman impacted by body image crises, I found that I could never truly "log-off" - I was continually engaged, mentally and emotionally, in a culture that is obsessed with thinness. The pro-ana/mia people and those who respond to them, like myself, exist online and offline. Therefore, my observations and engagement yielded data from "offline" involvement that was fueled and directed by my online immersion. My absorption into the world of pro-ana/mia led me to reflect on mundane everyday interactions with people and media representations. The approach of being open to the fluidity between the World Wide Web and the physical world is in keeping with my conceptualization of the interconnectivity and mobility of culture (see also Hallett and Barber 2014).

In my field notes, I recorded many examples of the interconnectivity and mobility of culture. For example, early on in my research, I went the dentist and he asked me about my research. His response was, in his words, "simple": a software should be made that deletes all pro-ana/mia related material off the Internet in order to eliminate "the problem" and then I would not have to conduct my research. My dentist's reaction, and the similar reactions of others' in casual conversation, mirrored the denouncing interactions that I observed online and these further devalued the worth of pro-ana/mia as a culture to study. Most hauntingly, the thinspiration images and desperate weight loss mantras that are characteristic of supportive pro-ana/mia interactions are being

disseminated *everywhere* I look in our broader culture. When I turn on the television, commercials tell me that I will look and feel better if I am thinner and that I can achieve this goal if I am strong enough. Casual conversations affirm that the popular messages around thin-body elitism and self-determination have been embedded into the everyday ways in which women talk about and understand their bodies and the bodies of others'. Throughout my research I became overwhelmed with thin-ideal related articles that my friends sent me thinking they would be useful for my research, such as an article on maternity t-shirts being sold with the slogans: "wake me up when I am skinny" and "I miss my waist" (<http://www.today.com/parents/wake-me-when-im-skinny-maternity-t-shirts-spark-backlash-2D79769058>). Most painfully, offline I found that I continued my focus on pro-ana/mia-related phenomena, and I was continually drawn to advertisements of women who had been modified to unachievable body proportions. These offline experiences became interwoven with my unfolding analysis of how women's bodies are represented, discussed and critiqued, on- and off-line. The thin-ideal advertisements and messages reflect the arguments being made by interactions that analyze pro-ana/mia online. I continually observe and reflect on the broader culture that is being experienced by the girls online who are discussing it, and these reflections blur the boundaries between researcher and research subjects. My experience reflects Ferrell's point; "...this ethnographic sensibility orients the criminologist to the ongoing, symbolic construction of meaning, and to the shared emotional environments in which such meaning is made" (Ferrell 2009, 16). Without my critical involvement offline, I would not have been able to properly situate pro-ana/mia within a broader culture that valorizes thinness while simultaneously pathologizing pro-ana/mia.

## **Emotionality and Research**

There is an increasing recognition that qualitative research can be experienced as emotional work by researchers (Dickson-Swift et al. 2009; Rager 2005). Kiesinger (1998) explains the struggles involved in emotional work by demonstrating the emotional reflexivity she exerts in her projects. She uses the narratives of her research subject to "deepen her understanding of her own life [and] calls on her own experience to heighten her comprehension" of her subject's narratives (Kiesinger 1998, 71). My thesis research has deeply affected me emotionally, and informed how I understand my own experiences of body crisis and disordered eating ideologies and behaviours. In turn, my own experiences have also heightened and influenced my interpretations of pro-ana/mia and my choices for alternative theoretical directions. The emotionality that I experienced during the research took various forms, and continues into my present work in this area. I find that it is a lot easier to be immersed into the pro-ana/mia culture when I am on good terms with my own body weight. There were times I had to step away from watching pro-ana/mia YouTube videos, especially to escape the assault of weight loss advertisements I was being targeted with, until I felt that I was at a satisfactory weight and until I felt generally happy. Immersion into the pro-ana/mia culture gave me complex and confusing emotional reactions: I felt disgusted by the images; I wished I could have their will-power; I wanted to be as skinny as some of them; I cried from seeing their pain; I felt angry about how eating disorders are being misrepresented; and I grew overwhelmingly furious at the fact that the cult of thinness and unachievable body proportions that are portrayed in music videos, on television, and in advertisements were inescapable. I grew emotionally tired of writing down my observations because they were everywhere. I felt

overloaded and exhausted from the realization of how much "thin" I consume on a daily basis, and these concerns continue. It makes me sick and want to cry, yet I still want to be skinny like them and I hate that I want to. It was increasingly emotional because I grew to deeply care about the well-being of the pro-ana/mia girls who were sitting on the other side of the computer screen. By the writing stage of this project, I had grown invested in alternatively theorizing about pro-ana/mia in a way that would highlight the social change required to reduce the harm. My insights, observations of others and introspection was painfully represented in the pro-ana/mia culture's struggles. The alternative insights I have made me feel angry, but more so, lead me to believe that there are ways to reduce the suffering women are experiencing, leaving me hopeful for meaningful change. I adopted a social activist voice because of my struggles and the struggles of my ethnographic subjects.

### **Types of Ethnography**

I conducted an unobtrusive "*grounded virtual liquid ethnography*" that draws on the works of grounded theorist and ethnographer Kathy Charmaz (2006), virtual ethnographer Christine Hine (2003; 2008; 2011) and the conceptualizers of liquid ethnography Ferrell, Hayward and Young (2008). Analytic memos were recorded, according to the directions of Charmaz (2006), throughout the research process. My ethnographic approach does not seek the approval of orthodox criminology's measuring rods for validity and traditionally understood procedures of ethnography, despite the risks of being dismissed for a lack of "methodological rigor" (Ferrell 2009, 6). Instead of understanding ethnography as a deployable method, I approach ethnography as a sensibility about the pro-ana/mia culture and a sensitivity to the broader culture that it is

part of (Ferrell, Hayward and Young 2008), allowing me to embrace postmodern notions of ambiguity and fluidity (Ferrell 2009). Avoiding "the intellectual prison" (Ferrell 2009, 18) of orthodox methodologies removes spatial and temporal restraints has helped me to deeply consider broader power and knowledge dynamics and has allowed ethnographic techniques to be "invented and reinvented on the spot" (Ferrell 2009, 12).

***Grounded ethnography.*** Kathy Charmaz (2006, 21) defines ethnography as "recording the life of a particular group that entails sustained participation and observation in their milieu, community and social world." Ethnographers become immersed in the data, and use these to lead and shape the research process. Charmaz (2006) notes that the movement from passive observation to full participation varies in ethnographic research and depends on contextual factors. Grounded theory "ethnographers have the opportunity to work from the ground up and to pursue whatever they find to be of the greatest interest" (Charmaz 2006, 21), "mov[ing] across settings to gain more knowledge of the studied process" (Charmaz 2006, 22). I used the methodological processes of a grounded ethnography, especially the movement across settings. However, I found the conventional ways of defining and understanding ethnography, especially locating "a particular group" and defining "participation" problematic because of the distinct features of the internet as a context for "groups" and "participation." In grappling with this challenge, I decided to combine the methods of virtual and liquid ethnography to compliment my grounded approach and the unique characteristics of doing an ethnography in an online environment.

***Virtual ethnography.*** Christine Hine (2003) states that the Internet (World Wide Web) is both a cultural context and a cultural artifact: a field site in which ethnographic

inquiry can be carried out. Hine (2005, 8) argues: “we have no essential criteria to judge whether an ethnography in an online context is indeed an ethnography.” Hine (2003) critiques “the tendency to treat the field site as a place which one goes to and dwells within [because it] reinforces an idea of culture as something which exists in and is bounded by physical space” (58), and instead highlights the mobility and interconnectivity of cultures on and offline “despatializing notions of community” (60). Hine (2003) argues that “what goes on within the Internet is social interaction” (50), and she rejects the idea that textual interactions should take a secondary role to oral interactions in cultural practices. Hine (2003, 64) claims that “cyberspace is not to be thought of as a space detached from any connections to ‘real life’ and face-to-face interaction” since “much social experience is still tied to place, but the space of flows provides an alternative way of conducting social relations that is increasingly the site of the exercise of power by the elite” (Hine 2003, 84-85)<sup>i</sup>.

Hine (2003) opts instead for “concentrating on flow and connectivity rather than location and boundary as the organizing principle” (60); “ethnography in this strategy becomes as much a process of following connections as it is a period of inhabitation” (64). Hine (2003, 60) explains that “ethnographers might start from a particular place, but would be encouraged to follow connections which were made meaningful from that setting”; “by analogy, the field site of ethnography could become a field flow, which is organized around tracing connections rather than about location in a singular bounded site” (Hine 2003, 62). Hine (2003, 62) explains that web surfing and following hypertextual links are part of a virtual ethnography strategy, “but connectivity is also performed in the borrowing of material and images from other sites and other media, by

the authorship and readership of sites, by the portrayals of the Internet in other media, and in myriad other ways" and requires "an active engagement through exploration and interaction rather than a disengaged textual analysis."

In keeping with Hine's advice, I adopted a mobile and fluid way of ethnographically exploring pro-ana/mia online (2011, 271). This approach allowed me to see how "different locations construct and connect with one another" (2011, 271), and exposed me to the data sources that I ultimately chose to focus on for the study.

*Liquid ethnography.* Ferrell, Hayward and Young (2008) explain the sensitivity required when using liquid ethnography as a sensibility, such as maintaining "an openness to the orientations of others - even if those others are textual in nature" (2008, 189). Ferrell (2009, 15) discusses how "liquid ethnography flows with the shifting interplay of images in media-saturated environments, and with the interplay of ethnographer, ethnographic subjects, and social activism that animates the best of field research." ). Thus, the data collection occurred throughout an ongoing immersion in the World Wide Web's interplay of images and texts while attuned to the destabilized and transitory nature of online communities. Going with the flow as a researcher is well suited for the transitory and destabilized nature of interactions with the pro-ana/mia culture and the broader culture that these interactions take place within. My research is not simply focused on pro-ana/mia interactions, but "the 'liquidity' of social arrangements" (Ferrell and Whiteacre 2011, 5) that mask the larger culture that mediates the messages, skills and motivations of pro-ana/mia. I needed to understand the broader social contexts within which pro-ana/mia interactions are situated to aid in understanding the phenomenon.



In sum, by drawing on three contemporary approaches to ethnography, I employed methodological sensibilities that were well-suited to the study of online interactions around pro-ana/mia.

### **Data Triangulation**

Eysenbach and Till (2001, 1103) state that "the internet is the most comprehensive electronic archive of written material representing our world and people's opinions, concerns, and desires...mak[ing] people's interactions uniquely accessible for researchers and erasing boundaries of time and distance. Indeed, the data possibilities for this project were endless. Charmaz (2006) cautions grounded ethnographers about this situation:

a potential problem with ethnographic studies is seeing data everywhere and nowhere, gathering everything and nothing. The studied world seems so interesting (and probably is) that the ethnographer tries to master knowing it all...paradoxically concentrating on a basic social process can help you to gain a more complete picture of the *whole* setting than the former approach common in earlier ethnographic work (italics in original text, 23).

Like Charmaz, Hine (2003) believes that "virtual ethnography is necessarily partial. A holistic description of any informant, location or culture is impossible to achieve...our accounts can be based on ideas of strategic relevance rather than faithful representation of objective realities" (65). Using liquid ethnography, I moved across the flow of online spaces through multiple searches, following links online and exploring numerous websites. I finally honed in on the following data sources that reflect online responses to pro-ana/mia: YouTube videos bounded to the YouTube website ([www.youtube.com](http://www.youtube.com));

written comments on YouTube videos that occur underneath the videos bounded to the YouTube website; and written comments on Tumblr's censorship and PSA policy collected from various unbounded online websites. Data collection stopped for each type of data when category saturation had been met; "categories are 'saturated' when gathering fresh data no longer sparks new theoretical insights, nor reveals new properties of these core theoretical categories" (Charmaz 2006, 113).

### **Data Gathering**

*1) YouTube videos.* The website [www.youtube.ca](http://www.youtube.ca) founded in February 2005, "allows billions of people to discover, watch and share originally-created videos." YouTube provides a forum for people to connect, inform, and inspire others across the globe and acts as a distribution platform for original content creators and advertisers large and small (<http://www.youtube.com/yt/about/>); "more than 1 billion unique users visit YouTube each month" (<http://www.youtube.com/yt/jobs/>). Pro-ana/mia YouTube videos are made up of text, images, music and people talking, as well as, short films with people acting, interviews, and blogs that feature women delivering monologues. Some videos are made in response to previously-posted YouTube videos and/or comments. The majority of the bloggers and video creators end their videos by welcoming and encouraging questions and comments from their YouTube community, demonstrating the desire for interaction as an outcome of the monologues and artistic videos.

"Haphazard" sampling (Blankertz 1998; Neuman 2007, 142) was used to choose YouTube videos and comments from a larger sample of videos viewed (N= 200+). Since collecting YouTube videos on pro-ana/mia in July 2013 there have been upwards of 300,000 hits when you type in the search terms "pro-ana" and "pro-mia" into YouTube's

search engine. There were distinct types of pro-ana/mia related videos that I categorized. After viewing hundreds of videos, and exploring various search terms, I took a sample of 50 pro-ana/mia videos (n= 50) while being diligent to include videos from every category. I also included more of certain types of videos than others in the data sample according to the prevalence that I had observed in the broader ethnographic exploration. For example, "thinspiration" videos intended to "thinspire" (inspire the pursuit of thinness) are the most common type of pro-ana/mia video; I typed in the keywords "thinspo or thinspiration" into the YouTube search engine, resulting in 50,900 hits, therefore I included more of these types of videos in the sample. I made sure I included videos posted by users who are frequent bloggers with a large viewer and commenter base as I considered them to be "key informants".

After carefully selecting the 50 videos, on July 24th, 2013 I used an online software called Clip Converter (<http://www.clipconverter.cc/>) to convert the media URL links of each of the YouTube videos into savable MP4 files, in case any of the videos were removed from YouTube during the research. After re-watching the videos up to a dozen times the videos were transcribed and coded for open and axial nodes (Neuman 2007) before refining them into more distinct thematic findings. During the coding and thematic-refining processes I revisited YouTube to look at more videos, finding multiple videos that supported each of the same thematic findings that I had identified, increasing my confidence that the major themes of pro-ana/mia YouTube videos had been captured.

**2) *Written comments on YouTube videos.*** Underneath YouTube videos there is a forum in which you can post a comment in response to the video or to another comment that has been written. The ability to post written comments directly underneath pro-

ana/mia YouTube videos allows for interactions and discussions about and with pro-ana/mia individuals and communities. YouTube video creators or posters are able to turn off the comment option disallowing people to comment on their videos. Almost all of the videos examined had allowed for comments to be left.

On July 29th, 2013 all of the comments underneath each of the 50 YouTube videos selected were saved into separate documents. After reading through hundreds of pages of comments, the first ten pages of comments for each video were coded for open and axial nodes (Neuman 2007) before refining them into more distinct thematic findings. From reading many pages of comments it became evident that ten pages of comments per video was sufficient to reach category saturation. Also, very few videos had fewer than ten pages of comments, whereas many videos had approximately ten pages, and others had hundreds of pages. The choice to code the first ten pages of comments ensured well-rounded collection of comments from the different types of videos.

*3) Written comments on Tumblr's censorship and PSA policies.* "Tumblr" is a social media website that has 188.1 million blogs, 83.1 billion posts and 266 employees and "lets you effortlessly share anything." On this site, pro-ana/mia users, among others, share text, photos, links, music and videos in a creative blogging format (<http://www.tumblr.com/about>). In February 2012, Tumblr announced a new policy that bans the posting of content that encourages its users to embrace anorexia, bulimia, or other eating disorders. Tumblr's revised policy states:

Promotion and Glorification of Self-Harm. Don't post content that actively promotes or glorifies self-harm. This includes content that urges or encourages

readers to cut or injure themselves; embrace anorexia, bulimia, or other eating disorders; or commit suicide rather than, e.g., seeking counseling or treatment, or joining together in supportive conversation with those suffering or recovering from depression or other conditions. Dialogue about these behaviors is incredibly important and online communities can be extraordinarily helpful to people struggling with these difficult conditions. We aim to sustain Tumblr as a place that facilitates awareness, support and recovery, and to remove only those blogs that cross the line into active promotion or glorification of self-harm.

In addition, Tumblr staff state that alongside searches for tags, such as “pro-ana,” “pro-mia,” “thinspiration,” and “thinspo,” there will appear a “public service announcement:”

*Eating disorders are not lifestyle choices, they are mental disorders that when left untreated, can cause serious health problems, and at their most severe can even be life-threatening. For treatment referrals, information and support, please contact the National Eating Disorders Association’s Helpline at 1-800-931-2237 1-800-931-2237 FREE end\_ [www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org) (italics in original).*

Tumblr staff reported that their policy post “provoked more than 25,000 likes, reblogs, and replies; and more than 2,500 ... [Tumblr users] sent in comments by email” (February, 2012). In order to enforce the policy, Tumblr's employees are monitoring users’ blogs and deleting content that is considered to be against the policy. The policy also dictates that Tumblr staff will attach a “public service announcement” (PSA) to any user that searches for terms such as “pro-ana” or “thinspiration.” These PSAs contain cautionary messages about the harms of pro-ana/mia practices, and they refer individuals to treatment services. The goal of Tumblr’s policy to censor is purportedly to protect

users from content that actively promotes or glorifies "self-harm". Tumblr's rationale to tag pro-ana/mia content with a PSA is not explicitly stated, but PSAs are generally used to model desirable behaviours with the goal of changing (Alcalay 1983), or stopping (Jung and Villegas 2011), pro-ana/mia behaviours, and the ideologies that encourage them. Tumblr's decision to censor these sites and promote PSAs is in keeping with the predominant medical and social science discourses on eating disorders that cast pro-ana/mia individuals as mentally ill and in need of medical or psychological treatment.

It was during the grounded virtual liquid ethnography of pro-ana/pro-mia discourses online, that I came across Tumblr's policy on self-harm. Through following links, I noticed that almost all of the responses to Tumblr's posting of the policy focused on pro-ana/pro-mia content. I decided to collect the responses as data with the inclination that they would be fruitful for analysis. I put the search term: "A New Policy Against Self-Harm Blogs – Tumblr", into the Google search bar on Internet Explorer and collected 52 responses, until categorical saturation was met.

I organized all 52 responses into one Word document that contained identifying bloggers' user names and website links. I then took the responses and stripped them of their identifying information, and organized them into 52 separate documents to maintain the confidentiality of the bloggers. I input the 52 documents into NVIVO, a qualitative analysis software, where I open-coded them for major themes in order to organize and categorize the data (Neuman 2007). After axial coding, I began to selectively code, a process of drawing analytical connections between themes and applying them to theory (Neuman 2007).

Although the censorship of pro-ana/mia websites is not new (Ferreday 2003), there has been little research on how users of social media respond online to this censorship or to PSAs. My analysis focuses on the online responses, or interactions, among individuals about Tumblr's censorship and PSAs in terms of what they can tell us about pro-ana/mia phenomena and people's thoughts, desires and needs in this regard.

### **Gendered Data**

It is important to note that the predominance of the medical model, and similar societal discourses, pathologize *female* pro-ana/mia supporters and *females* appear to be the only type of pro-ana/mia individual who gets prominent attention in academic and popular discourses. To make sense of possible reasons why, Boero and Pascoe (2012) explain that young women are the most vulnerable for developing an eating disorder, reporting pro-ana/mia as a very gendered phenomenon: 90–95% of those with anorexia and bulimia are women (Koski, 2008 as referenced by Boero and Pascoe 2012). The academic literature on pro-ana/mia almost solely concentrates on girls and women. Haas and colleagues (2010) explain that it is women who are talked about in relation to eating disorders within a medicalized discourse and Allen and Toni (2007), like most social scientists in the field, focus on pro-ana/mia as a women's problem and it becomes a taken for granted notion that pro-ana/mia online is "technology used by women" (Synder and Cherry 2005, abstract). Throughout my immersion in the field of pro-ana/mia, I came across very few direct discussions about males and little concern about boys/men being targeted by or being vulnerable to joining the online pro-ana/mia community. Overall, there was only a very small percentage of men interacting with discussions of pro-ana/mia online. The predominance of "thinspiring" pictures of emaciated models and anorexic pictures on

pro-ana/mia websites are of women (Hammersley and Theseder 2007), further supporting pro-ana/mia as a predominantly female phenomenon. This observation became a place of departure for theorizing from a feminist perspective.

### **Analytic Memoing**

I drew on ethnographic sensibilities as discussed previously in order to produce analytic memos - a process of writing down emerging codes and analyses that have been derived from the data throughout the research process (Charmaz 2006). Charmaz (2006) explains that "memos provide a record of your research and of your analytic process" (94). The memos provided a thought-process road map that allowed me to describe how I drew connections and deciphered the theorizing paths I took as I captured new ideas and insights. I made field notes on observations, and self-reflective field notes on those observations, generating ideas about pro-ana/mia and related eating/body phenomena. My observations and reflections and the analytic memoing that these produced not only involved data that were online; they included data that were "off-line" also because my memoing was influenced by my everyday interactions with people and media representations. The observing/reflecting/analytic memoing process was ongoing, and central to the conceptualization and articulation of the emergent analyses.

### **Ethical Considerations**

Prior to the commencement of this research, I read Laurier University's current guidelines for the ethical conduct of research and I complied strictly with them. I completed the certificate of Ethical Conduct through the Tri-Council Policy Statement of Ethical Conduct and I completed both the undergraduate and the graduate research method courses. I was not required to seek university ethics approval because the types of data



that were collected and analyzed are representative of what Charmaz (2006) calls extant texts - varied documents that have not been shaped in any way by the researcher. After reflecting on the casual nature of online interactions, I decided to not alter the direct quotes or put in "[sic]" to indicate grammatical errors.

All of these texts are publicly available and easily accessible online, still I always used pseudonyms when referring to individuals online in order to maintain confidentiality. I randomly selected female pseudonyms, unless the source is identifiably male, to use when making direct quotes to indicate the different data sources. The literature states 90–95% of those with anorexia and bulimia are women (Koski, 2008 as referenced by Boero and Pascoe, 2012) and the majority of individuals having pro-ana/mia discussions present as female in videos and use feminine user-names. If the source was not coming from a single person, such as a short film, I identified the source as "short film" instead of an individual person's name.

#### Endnote

<sup>1</sup> As will become apparent in the discussion, Hine's acknowledgement of the internet as a space for "the exercise of power" is an important insight for understanding the implications of censoring online discussions within, and among, marginalized groups.

## Chapter 4: Theoretical Frameworks

This research provides a critical, sociological analysis of the responses to pro-ana/mia affiliations and practices by attending to the larger cultural contexts in which these are embedded. Using a qualitative grounded theory approach (Charmaz 2006) and theoretical triangulation (Denzin 1989), multiple theoretical perspectives were drawn on during the data collection and analysis phases of the research (Charmaz 2006). I entered the field without having a specific "theory" to test, rather, I researched for understanding, not for "evidence," moving back and forth between the literature, methods, data, theories, and analysis. In keeping with Charmaz's advice (2006), this approach allowed the data to shape the theoretical direction(s) of the project. For example, the review of the literature has informed and shaped the data collection and analyses; the data collection and the analyses also informed and shaped my decisions around which literature to review, and the final iteration of the "literature review." As such a fluid back-and-forth process characterized all stages of research.

I entered the research process with critical sensitizing concepts (Blumer 1969) that recognize social issues as subjective, putative (Spector and Kitsus 1987), and located within a broader social landscape that is characterized by social inequality. Charmaz (2006) stresses that "sensitizing concepts and disciplinary perspectives provide a place to *start, not end*" (17); "like a camera with many lenses, first you view a broad sweep of the landscape...[and then] you change your [theoretical] lens several times to bring scenes closer and closer into view" (14). Unlike more formulaic, deductive approaches to research, Charmaz (2006) notes that:

theoretical playfulness enters in. Whimsy and wonder can lead you to see the novel in the mundane, openness to the unexpected expands your view of studied

life and subsequently of theoretical possibilities. Your hard work reins in those ideas that best fit the data and brings them to fruition (135-136).

Throughout the research process Foucault's understandings of power and knowledge developed my critical approaches to this study and therefore lent sensitizing concepts and perspectives. In particular, Foucault's (1984) discussions around how the power of rhetoric places science, medicine and psychiatry as superior, objective, that is politically induced and maintained led me to question dominant representations of pro-ana/mia. Medical knowledge is a discontinuous and decentralized "regime' in discourse" (54) and this medical knowledge is power today. Foucault differentiates between viewing the power of knowledge/discourse from a centralized state apparatus, and what he poses as the idea of a "web of power" (58). Power relations are intertwined into all social structures and control all social life. These embedded power relations are intertwined in a way that makes "the body" medicalizable aiding in the social control of bodies and enabling the production of "docile bodies". Medicine's machinery of power produces experts, doctors, who become the representatives of power. My exposure to Foucault's work led to my adoption of a postmodern perspective, but my ethnographic immersion led me to focus more on feminist postmodernists whose work incorporates analyses of gender in addition to theoretical concepts that are in keeping with "webs of power".

I drew upon other familiar theoretical frameworks that became pertinent as I gathered data, coded them and wrote analytic memos, and in this way I discovered that more than one analytic direction was needed (Charmaz 2006, 10). For example, the original theoretical position of this study started off as solely social constructionist; it was only after a draft of the review of the literature was completed that I saw cultural

criminology, feminist post-modernism and crimes of globalization theories as relevant for the analysis. At this point, I sought out theoretical perspectives that were new to me to make sense of data that I struggled to explain. In this way, after an initial draft of the findings was completed, I discovered, and added, critical colonization theory to my kit of analytic tools. Critiques of neoliberal hegemony, and structural and cultural violence were also not discovered until a rough draft of the thesis was almost completed, and these perspectives I incorporated to strengthen the crimes of globalization analyses. Charmaz (2006) appreciates qualitative research's ability to let the emerging data guide the research process: "build[ing] levels of abstraction directly from the data" (3). As explained, emerging data influenced my decisions around taking on or getting rid of methods of inquiry, changing theoretical positioning and revisiting old data "*while [I] gather[ed] data*" (Charmaz 2006, 14, italics in original).

In summary, my triangulated theorizing draws on theories from sociology, criminology, history and political science, and includes: feminist post-modernism (see: Bordo 2004; Hesse-Biber et al. 2006; Malson and Burns 2009; Wood 2008); cultural criminology (see: Ferrell et al., 2004; Ferrell 1999; Ferrell, Hayward and Young, 2008; Hayward 2004; Wender 2008); social constructionism (see: Loseke 2003); critical colonization (see: Barker 2009; Ching 2000; Hodkinson 2013; Killoran 2012; Mohanty 1988; ); and critiques of neoliberal hegemony, gendered violence and crimes of globalization (See: Davidson and Langan 2006; Ezeono and Koku 2008; Farmer 2001; Friedrichs and Friedrichs 2002; Galtung 1990; Galtung and Hoivik 1971; Goldsteign 2005; Howard-Hassman 2010; Martin and Manalansan 2005; Nayak and Suchland 2006; Nemani 2011; Shannon et al. 2008). To achieve the theoretical agendas of feminist post-

modernism and cultural criminology scholarship, I use powerful explanatory tools to provide analytic insights and discussions that are attuned to critical feminist theoretical perspectives. I draw upon: cultural criminology's explanation of late-modern *identity*; social constructionism's concept of the social problems game (Loseke 2003); critical colonization theory's concepts of discursive colonization (Mohanty 1988) and neoliberal critics' concept of "crimes of globalization" (Friedrichs and Friedrichs 2002). In addition, I use the concept of "structural and cultural violence" (Galtung 1990) to construct the new theoretical concept of *body crisis exploitation*.

***Feminist Postmodernism.*** From a postmodern perspective, notions of an objective truth are rejected. Instead, "Truth" is understood to be privileged "discursive distinctions" that have been deemed superior to *others'* through the exclusionary power of an elite "who claim to have special knowledge earn[ing] the right to decide the fate of those who do not share this knowledge" (Henry and Milovanovic 1999, 5). These distinctions "are conceptual and...made through communication, particularly, but not exclusively, written or spoken language, referred to by postmodernists as '*discourse*' (Manning 1998)" (italicized in original), and they can have harmful effects (Henry and Milovanovic (1999, 5). Our principle tool of analysis is to use "*deconstruction*" (Derrida 1970; 1981 as referenced by Henry and Milovanovic 1999, 5 italicized in original) "to expose the socially constructed nature of privileged knowledge through what is called '*critique*'...: a continuous process of challenge to those who claim to know or hold the truth" (Henry and Milovanovic 1999, 5 italicized in original).

Combined with this post-modern perspective is an emphasis on the *gendered* nature of discourses around "Truth", and the power of such discourses to privilege some

and exclude others. Critical feminist analyses attend to the cultural contexts in which behaviour takes place, shifting from a micro to a macro level of analysis. As such, eating disorders are understood to be culturally-induced, and supported “by economic and social institutions that profit from the “cult of thinness” promoted by the mass media” (Hesse-Biber et al. 2006, 208). As Bordo (2003) argues, “most women in our culture... [are] 'disordered' when it comes to issues of self-worth, self-entitlement, self-nourishment, and comfort with their own bodies; eating disorders, far from being 'bizarre' and anomalous, are utterly continuous with a dominant element of the experience of being female in this culture” (57). This perspective emphasizes the ways in which male-dominated power structures contribute to women’s oppression through the devaluing of their experiences, perspectives and knowledge and the exercise of social control over their bodies and voices (Wood 2008, 328). In this vein, Malson and Burns (2009) argue that disordered eating “can only be adequately understood within the context of the oppressive gender ideologies and inequalities in gender power-relations operating in (western/ised) patriarchal cultures” (1). The focus in this study is on critically theorizing the pathologizing of pro-ana/mia within the socio-cultural context of the alleged obesity epidemic, creating general moral panics about big bodies and omnipresent healthism discourses (Malson and Burns 2009).

A critical feminist lens bring into focus the importance of appreciating the oppression of women and the power structures in place that contribute to the maintenance of the oppression of women. The analyses embrace the reality that “the greater power generally held by men is a primary reason that women’s experiences, perspectives, and knowledge have been devalued, and that women’s voices been suppressed” (Wood 2008,

328). Through the triangulation of critical feminist theorizing with cultural criminology, the interpretations and analyses of the findings of this study recognize how unequal gender relations interact within the confines of our patriarchal Western society, revealing gender power dynamics in the practices of deviantizing behaviours (Cunneen and Stubbs as referenced by Ferrell et al. 2004). As such, the analyses in this study are in keeping with a "post-modern recognition of [the importance of] interpretive multiplicity, [and] of the indeterminacy and heterogeneity of cultural meaning and meaning-production (Bordo 2003, 217).

Another central aim of this study has been to "name" (Wood 2008) the taken-for-granted and accepted *responses* to pro-ana/mia that are often perceived as normal, "okay," and necessary within our capitalist andocentric society. Wood (2008) discusses the importance of "the crucial act of naming, which provides vocabulary that is essential for recognizing, valuing, and in some cases challenging taken-for-granted aspects of interpersonal relationships" (324) in critical feminist theorizing. The theoretical perspectives of the study perceive the act of naming as a rudimentary, but essential, step in cultural activism that seeks to address the unspoken violence that women experience. The analyses of the findings highlight the need to value the experiences, perspectives, knowledge and voices of women; the research agenda is to leverage the "critical energy of feminism as a movement of cultural resistance and transformation" (Bordo 2003, 218).

***Cultural Criminology.*** The postmodern contention that truth is socially constructed is in keeping with cultural criminology's understanding of the spiraling and looping nature of meanings in late-modernity that are selectively applied to social phenomena by those who have the power to label and influence the dominant masses

(Ferrell, Hayward and Young 2008). Wender (2008) discusses "the problematisation of human beings" (50) through positioning them as "abstract problems". In order to free myself from "the gaze of problematisation" (51) of pro-ana/pro-mia orientated human beings, early on in my project I borrowed Wender's question-asking structure, asking: "how is the utterly astonishing act of humans engaging in pro-ana/pro-mia interactions online made a significant 'matter of fact' problem by intersecting forms of bureaucratic and social scientific interpretive praxis?" (51). Ferrell, Hayward and Young (2008), argue that deviance and transgression "can only be created through social relations made within a dominant culture and determined by a dominant morality" (44). They make the case that late modernity is characterized by "a world always in flux, awash in marginality and exclusion, but also ambiguous potential for creativity, transcendence, transgression, and recuperation" (Ferrell, Hayward and Young 2008, 6). Another defining characteristic of late modernity is the emphasis on personal development and the individualizing, pathologizing and homogenizing of people. These aspects of cultural criminology are relevant for an analysis of pro-ana/mia because of the ways in which this community has been pathologized. Cultural criminology allows me to "study and understand how power constructs and legitimises forms of social harm" (Cunneen and Stubbs, p. 97 as referenced by Ferrell et al, 2004).

Hayward (2004) explains that desires are purposefully manufactured by marketers in such a way that people can never achieve satiation. If, on a mass scale, people became satiated, Hayward argues that "the current order would cease to function altogether" (2004, 458) because people would stop consuming. As a result of insatiable desires becoming a defining feature of life, the late modern world is marked with uncertainty and



instability. Marketing strategies that leave desires constantly unmet have implications for how people perceive their self-identity. Hayward (2004) theorizes that “within most industrialized consumer-oriented countries, the distinction between ‘having’ and ‘being’ has become somewhat confused as individuals increasingly construct identity through the commodities they consume and display” (444). Possessions and consumer goods become symbolic and instrumental forms of pluralized culture that shape identity and therefore, shape crime and deviance. It is not the actual physical consumer products that we feel deprived of, but the sense of self-identity that is either being achieved through purchasing or prevented because of a lack of means to purchase. This results in a deprivation and longing for identity.

This contextualization of late modern culture is the basis for Hayward’s argument that criminologists need to consider “emotions, sensations and consumer-orientated cognitions” (447) in order to understand criminal and deviant behaviours: “[I]n a powerless world, crime [or deviance] creates power for the individual to express their individuality...This is the art in crime [deviance] rather than the art of crime [deviance] and in turn creates crime’s [and deviance's] seductive nature” (Presdee 2000,158 as referenced by Hayward 2004, 439). Deviance and transgression can be understood as a form of cultural resistance that attempts to satisfy desires through seeking sensations of self-actualization; a transgressive means to achieve the sense of identity that the capitalistic consumerist society impedes.

Cultural criminology’s call for a cultural activist lens (Ferrell, Hayward and Young 2008), a central goal of critical feminist research, has also been influential in this research, as discussed in the Conclusion. To expand on the notion of taking a cultural

activist lens, Ferrell (1999) reports that:

Barak (1988, 1994a) argues for an activist 'news-making criminology' in which criminologists integrate themselves into the ongoing mediated construction of crime, develop as part of their role in this process alternative images and understandings of crime issues, and in so doing produce what constitutive criminologists (Henry and Milovanovic 1991, Barak 1995) call a 'replacement discourse' regarding crime [deviance] and crime [deviance] control (410).

The crucial act of naming that was previously outlined in the section on feminist post-modern theorizing is an essential part of the production of "replacement discourses" that cultural criminology calls for. "Replacement discourses" (Henry and Milovanovic 1990; Barak 1995 as referenced by Ferrell 1999) tell an alternative story, and provide the language to tell that story, in place of dominant discourses that suppress difference in their version of "truth".

***The Social Problems Game.*** The "social problems game" (Loseke 2003) is a line of theorizing that follows from and is in line with social constructionism. The social constructionist concept of the social problems game (Loseke 2003) provides a framework for theorizing about the vested interests involved in "owning the social problem" of pro-ana/mia. According to Loseke's (2003) social problems game, claims-makers, those privileged to have a voice, and often political persuasion, instill popular worry by highlighting the consequences of a social problem, and by producing villains who are blamed and held responsible. These claims are strategically typified to be inclusive of a wide scope of innocent victims who are "suffering" and they often produce an "it-could-be-you!" fear amongst their audience (Loseke, 2003). Loseke (2003) states that when

constructing a solution one needs to take a prognostic frame that answers what needs to be done in order to solve a social problem and the solution must appear achievable to its audience. This analysis is particularly pertinent to my interpretation and analyses of the censorship and PSA parts of the findings. The process of winning the social problems game also speaks to morality; claims-makers with authority tell us what is right and what is wrong (Loseke, 2003). The concept of morality involved in the social problems game is another key theoretical consideration that is addressed in the discussion of the findings.

*Discursive colonization.* The central focus of colonization as a theoretical framework is on the complex power relationships made up of vested interests, domination and resistance, hegemony and social control. The term "colonization" has been used to explain more than military colonialism and the taking over of physical land, as it also about controlling ideologies through winning over the beliefs of people (Barker 2009). Mohanty (1988, 61) explains that colonization is used as an explanatory construct, which "almost invariably implies a relation of structural domination, and a discursive or political suppression of the heterogeneity of the subject(s) in question." For example, Mohanty (1988), a critical feminist researcher, provides an analysis that adapts the concept of colonization to the study of how the voices of certain groups are muted or silenced altogether. She suggests that feminist scholarship has *discursively colonized* "the material and historical heterogeneities of the lives of women in the third world, thereby producing/representing a composite, singular 'third-world woman'" (68). The result is that dominant understandings of third-world women are homogenous, inattentive to the complexities of their histories, identities, and daily lived-experiences.

Few academic analyses have utilized discursive colonization as an explanatory

construct for online research and online cultures/communities. Killoran (2002, 33) argues that the Web is "not just a technology but a social environment" and that Web Spaces are being discursively colonized by the discourses of privileged institutions, dominated by corporate logos and brand names that lower class individuals cannot compete with. Discursive colonization on computer networks and in hypermedia promotes ideological reorganization through "crowd[ing] out alternative discourses and thus alternative perspectives and practices and thereby naturalizes the colonizer's perspectives and practices" (Killoran 2002, 22). The discursive colonization on the Web is being done by institutional discourses and practices, which may prevent alternative voices from finding habitable online spaces. The Web can be argued to be a place for disseminating the values and interests of the West to the rest of the global community, so " that differences based on socio-economic status, color, and power are maintained, exacerbated, and reproduced, rather than eliminated" (Hawisher and Selfe 2000, 13). For example, Hodkinson (2013) argues that "missionary teachers" (461) "colonized the electronic landscape" (461) of a school's intranet site, by representing disability on the site as homogenous and inaccurate, in an effort to civilize through "the sanitization of the image of the Other (Pels, 1997)" (465). The missionary teachers discursively colonized the student's understandings of disability by being the only ones with the "power to narrate, or block narratives" (Said 1993, p. xii) and by "managing heterogeneity (Comaroff) and of dealing with difference by, "imposition, restriction, regulation and repression (see Quayson, 2000, p. 112)" (as referenced by Hodkinson 2013).

*Critiques of neoliberalism and crimes of globalization.* Ezeono and Koku (2008) state that critics of neoliberalism, champions of naming structural violence and

criminologists of globalization share a mutual concern for *social harm* as the central focus of their analytic arguments. Neoliberalism, the global economic dominant ideology of the 21st century (Goldstein 2005, 405), is used to achieve the objectives of globalization, driven by capitalism, that aims to break down political, economic, culture and social boundaries (Howard-Hassman 2010). It has been argued that criminologists need to broaden their conceptualization of crime beyond legalist conventional understandings because: criminal codes are constructed as "instruments of repression, exclusion and domination" for those in power; and to capture the global dimensions of crime (Ezeono and Koku 2008, 116). Friedrich and Friedrich (2002) explain that *crimes of globalization* involve the avoidable harming of individuals, cultures or identifiable populations through violating widely recognized human rights and international covenants by international financial institutions, transnational corporations, and state or political entities. Goldstein (2005, 405) explains that neoliberalism "has at its base a claim to promote individual freedom, a promise to liberate the individual from the inherently oppressive power of government (Anderson, 1992)", but argues that neoliberal democracy has led to oppression and *insecurity* for individuals. For example, the neoliberal promises made to the citizens of Bolivia have not been met. Goldstein argues that "their poverty has its roots in transnational capitalism, and ...the forces of privatization and the open market have had negative impacts on their employment opportunities, standard of living, and access to basic services" (405-406). Ezeono and Koku (2008) highlight Tombs and Hillyard's (2004) observation "that the neoliberal market dynamics produce perhaps the most extensive and far-reaching harms" (116) and argue that it "has become acceptable among a growing number of criminologists that

neoliberalism could have criminogenic (social harm) effects" (117). Friedrichs and Friedrichs (2002, 13) state that "some critics of globalization contend that globalization is a criminal enterprise that ought to be challenged on every level." Therefore, neoliberalism and globalization, and their mutually reinforcing effects, are argued to be criminal in nature.

***Gendered, structural violence.*** Goldstein (2005, 406) maintains that "neoliberal violence is also structural violence, an inherent component of the neoliberal project and its associated cultural values, which underlie the general condition of insecurity that is both cause and result of popular violence." Farmer (2001), who argues against individual victim-blaming analyses of human suffering, defines *structural violence*, a term coined by Johan Galtung in the 1960s, as

violence exerted systematically—that is, indirectly—by everyone who belongs to a certain social order: hence the discomfort these ideas provoke in a moral economy still geared to pinning praise or blame on individual actors. In short, the concept of structural violence is intended to inform the study of the social machinery of oppression (307).

Galtung and Hoivik (1971), like Farmer (2001) explain that structural violence is indirect, insidious, anonymous and kills you slowly, as opposed to physical violence, which is direct, dramatic, has an author and kills quickly. Twenty years later, in 1990, Galtung (291) developed the concept of structural violence further by coining the concept *cultural violence*:

those aspects of culture, the symbolic sphere of our existence - exemplified by religion and ideology, language and art, empirical science and formal science

(logic, mathematics) - that can be used to justify or legitimize direct or structural violence...[,arguing that] cultural violence makes direct and structural violence look, even feel, right - or at least not wrong.

Structural and cultural violence control the boundaries of race, class and sexuality by blocking or destroying spaces for marginalized identities (Martin and Manalansan 2005). For example, Shannon et al. (2008) found that sex workers' HIV prevention practices were influenced by structural inequalities and gendered power dynamics between female sex workers' and their male clients who pressured them to have unprotected sex. In light of structural violence that impact sex workers' agency, such as histories of displacement, sexual abuse, drug use, violence, lack of access to resources and not being able to service clients in private spaces, "women's micro-level decision-making practices [in survival sex work and drug use] are rational economic and coping strategies adopted in the face of social and structural level violence" (Shannon 2008, 914). Shannon's et al. (2008, 914) analysis is "well situated within post-structural critiques of public health and drug policy that consider the ways in which individuals are governed through messages of self-regulation and risk-avoidance as a form of neoliberal governmentality (Moore, 2004; Peterson & Lupton, 1996)", reflecting on how HIV prevention strategies among these marginalized populations have almost exclusively been directed at the individual-level of those who "choose" to engage in risky behaviours. (e.g., see also Davidson and Langan [2006] on breastfeeding and structural violence; and Martin and Manalansan's [2005] on homonormativity and structural violence).

Hegemonic projects require the mutual success of gendered, structural violence, as they produce complementary ways of constructing the rights ways of "knowing, being

and acting" that privileges men with power while silencing the "truths" of the powerless - women. (Nayak and Suchland 2006, 469). Neoliberalism, capitalism and globalization are male-oriented ideologies and practices that to succeed require the oppression of women, as powerless and quiet, in order to maintain men's position as the superior gender (see Nayak and Suchland 2006, 273).

In the following four chapters I present the major descriptive findings of the study. After the findings are presented, I provide four theorizing chapters that deconstruct the descriptive findings from the analytic perspectives outlined in this chapter.



## Chapter 5: Interactions that Denounce Pro-Ana/Mia

Chapters 5-8 present the descriptive findings of this study and are organized into the four major types of interactions that I discovered: interactions that denounce pro-ana/mia; interactions that support pro-ana/mia; interactions that analyze pro-ana/mia; and interactions that advertise to pro-ana/mia. This chapter will describe interactions that denounce pro-ana/mia.

### YouTube Video Interactions

Four themes that denounce, or condemn, pro-ana/mia are identified in the responses that are communicated in the YouTube videos: dangerous and disgusting, educating, solicitude, and "pissed-off" rants.

*Dangerous and Disgusting* Almost all of the denouncing videos express how dangerous and disgusting pro-ana/mia is. Bloggers refer to pro-ana/mia as wrong, immoral, dangerous, destructive, triggering, disgusting and express a lack of understanding of how pro-ana/mia can be justified as beneficial. Triggering is understood as any type of stimulus that results in eating disordered thoughts and behaviours, such as looking at thinspiration pictures acting as a trigger that helps individuals reduce calorie intake. Video clips of mainstream news reports on pro-ana/mia use the following descriptive words: "dangerous", "dark", "disgusting", "addictive" and "secretive". Puns are used in news report videos such as: "girls are dying to be thin" and "we don't need anything else to come in that's going to feed the mindset of anorexia, bulimia and other problems". Pro-ana/mia websites are portrayed as a growing and wide-spread *social problem*, affecting girls from "Kansas to England" (YouTube News Report) and little attention is given to other eating disorder issues besides skimming over possible

contributing factors such as: feeling pressure to be thin for ballet. Brandi, a blogger describes how pro-ana/mia is taken-up in YouTube videos: “[they are] basically websites where girls that are either already ill or girls on diets, most of them are very young and impressionable, these girls are welcomed to the site and they basically encourage each other, *they encourage each other* [emphasis in video]" to engage in eating disorder behaviours. The overall argument is that pro-ana/mia websites "make sick people sicker" (YouTube News Report) through sharing tips and tricks on how to hide restricting food from others, glorifying extreme diets and negatively enabling "ana/mia buddies". The most emaciated thinspiration pictures are found to be shown in these types of videos. The encouragement and "recruitment" of girls into the "pro-ana/mia lifestyle" is emphasized in the news coverage and other videos available on YouTube. Eating disorder experts are often used to support the arguments made by denouncing videos. For example, a documentary on YouTube by a British television presenter, radio DJ and role model for young girls, Fearne Cotton, interviews one of the leading mental health experts in Britain who states that pro-ana/mia websites are: "largely run by people who are still very, very ill with anorexia and they want other people to join them, they want to have recruits, they want other people to be their friends and support them". Many express the sentiment that “ultimately it’s murder” (Veronica) or "internet assisted suicide" (Cherish) to be pro-ana/mia. Metaphors are also used when pro-ana/mia is likened to "handing a suicidal person a loaded gun" (Navine). The overall position of those who denounce pro-ana/mia is that it should be condemned and censored.

***Educating.*** Many of the YouTube video bloggers talk about how pro-ana/mia girls must be "uneducated" about anorexia and other eating disorders. For example,

Julianna explains that setting "goal weights" does not actually work for someone with an eating disorder; "you're not going to be satisfied you stupid, ignorant fuck, do you know anything about eating disorders?". Bloggers in this type of video position eating disorders, and in turn, pro-ana/mia, as a genetic disorder that requires a trigger, and they make the case that they "are not arguing that pro-ana is a diet gone wrong or that pro-ana can cause anorexia" (Brooke). Rather, they distinguish between wanting to be thin and wanting to have a disorder. For example, Evelyn posits that:

in my opinion, these people who are chasing anorexia as a lifestyle choice they're suffering from a different mental illness than an eating disorder because in a sense they are looking for a mental illness. Surely, they're should be some other condition known as wanting of mental illness because it is a mental illness it's not a lifestyle choice. It's not glamorous, pretty, a way to be thin.

All of the bloggers and news reports in this vein are adamant that pro-ana is a mental illness or psychiatric disorder, and they state that it is ignorant to think of eating disorders as a lifestyle choice. The videos actively try to uncover the "lies" pro-ana is telling you:

There are people who will go around saying that they throw up, and that they are going to be beautiful and that starving is going to make them beautiful and it's not and there's all these pro-ana blogs with all these really skinny girls who look really happy and everybody thinks it's so great to be skinny and you feel so much better about yourself, and life is perfect, and that's not true (Julianna).

The last excerpt is qualified by saying that if you are overweight and do need to lose weight that individuals should eat healthy and exercise instead of starving, purging and abusing laxatives.

*Solicitude.* There are many videos identified that are solicitous, in that they display concern for the well-being of pro-ana/mia individuals that is demonstrated by either: warning them about how dangerous pro-ana/mia is; or demonstrating that they care and are willing to provide support.

The solicitous YouTube videos that warn individuals about the dangers and negative consequences of pro-ana/mia and eating disorders are identified. For example, there is a text-based video that explains how "Ana" took the life of her sister, urging the YouTube community to not "let ana take your life". Many videos express the fatality of eating disorders and use statistics to back up their argument: "let's not forget that the mortality rate of anorexia is twelve times higher than all other causes of death in women aged 15-24 years old" (Katie). A lot of the videos discuss the extreme physical consequences of eating disorders and pro-ana/mia:

let's list off some gifts that your buddy ana wants to give to you: anemia, osteoporosis, abnormal hormonal levels so you'll lose your period and possibly your ability to have children forever, heart disease that can lead to sudden heart attacks, low blood sugar, poor circulation, I hope you will enjoy fainting when you walk up a flight of stairs, seizures, constipation and bloating – we're talking about two week so not going to the bathroom guys, and my personal favourite, while you're losing all the hair on your head you'll get hairs everywhere else as a last ditch effort for your body to keep warm. Trust me it's so glamorous (Katie). Katie also talk about how eating disorders destroy relationships and give warnings and suggestions such as:

If you want boys to like you, anorexia is not for you, if you want to feel good

about yourself, anorexia is not for you, if you want friends anorexia is not for you. If you still think anorexia would be a good way for you to get skinny for the summer, here's some pro-ana types: number one: take your thinspo, rip it up and throw it in the garbage, number two: speak with your doctor to make a plan that will meet your nutritional and exercise needs.

The solicitous YouTube videos that express an understanding of, and care and concern for, the well-being of pro-ana/mia individuals recognize that pro-ana/mia can be very "tempting." These bloggers appreciate the role that online support communities can serve such as having your voice heard, community, friendships, and fighting loneliness, and isolation, but at the same time these forms of support are discredited for many of the above denunciation reasons and for being comprised of : "an eating disorder having a conversation with another eating disorder" (Brandi). With good intentions these videos promote pro-recovery websites. For example, YouTube blogger Kati Morton, an eating disorder specialist, created a pro-ana/mia video blog providing a summary of her blog that is exemplary of the types of solicitous videos that are about "caring":

I know that people are struggling and that you deal with your eating disorder all day every day, but to create a whole website just promoting sickness is not something that I support. What [she has] hoped to create with [her] website is a healthy, supportive environment where people can feel free to share their struggles and their triumphs. I do not want people on here to be sharing their tips on how to maintain their sickness. I know when you are really struggling it is hard to get out of it and I am hoping that my site, my YouTube channel and all that I promote can be focused on helping one another better ourselves. Just to clarify

this does not mean that you cannot talk about what struggles you have, I just mean that the tips given on my sites should be to help, not harm. By doing this I wish to continue creating a community working towards a Healthy Body, Healthy Mind.

Morton, like many bloggers, warn the YouTube community that pro-ana/mia can be "horribly triggering." Many of the videos tell pro-ana/mia individuals that being skinny will not make them happy and that they are beautiful the way they are. For example, Julianna tells the YouTube community: "this may sound cheesy, but you really are beautiful the way you are... it doesn't matter if you're skinny or curvy or whatever".

Solicitous videos advise contacting eating disorder organizations for help as a solution to pro-ana/mia are identified. Many of the bloggers and other videos provide help-lines or finish by saying that those struggling can contact them directly for support. Fault is mainly attributed to the websites, but the responsibility of parents is also stressed, both with regard to the need to monitor internet use and the need to be positive about body image and eating practices. A call for censorship of pro-ana/mia is the major identified solutions to pro-ana/mia.

**"Pissed-Off" Ranters.** There are many videos identified that are monologues of women angrily responding to, or venting about pro-ana/mia by delivering "pissed-off" rants that are: aggressive; or reactions to feeling trivialized; or emphasizing severity.

"Pissed-off" rants are directed at pro-ana/mia YouTube videos, pro-ana/mia's strong presence on Tumblr, and/or specific pro-ana/mia individuals. "Pissed-off" Ranters are extremely opposed to pro-ana/mia and want to share their heated opinions, seemingly as a way of "letting off steam". Often the young women in this type of video are found to identify as still struggling from an eating disorder or they are recovered, or recovering,

from an eating disorder. The videos often start off with self-deprecating comments about their physical appearance in their video. These girls often express their need to “rant” and directly say how “angry” or “pissed-off” they are about pro-ana: “I’m so fucking mad right now – I just wanted to fucking rip her [pro-ana girl’s] head off, seriously” (Kelly). The latter part of the excerpt identifies the aggressive nature of the “pissed-off” rants.

These bloggers often use condescending language and tones in their videos, referring to pro-ana/mia individuals as “honey” or “self-proclaimed pro-ana butterflies”. Most of the videos have a lot of swearing, name calling and aggressive, and sometimes threatening, language. For example, Cadence tells the YouTube community: “if you are one of those bitches who goes around and brags about having an eating disorder and telling people that that’s okay, if I fucking see you and you try to put that shit on me, and try to tell me that it’s okay to starve myself and puke and that it will make me beautiful, I will fucking punch you in the mouth, so don’t even go there, so fuck you”, followed by putting her middle finger up. Quite a few of the bloggers stick their middle fingers up at the end of the video, and indicate that this gesture is directed at people who are pro-ana/mia.

Many “Pissed-off” Ranters indicate that their anger is a result of feeling trivialized, as exemplified by this excerpt from Candence's blog:

Like, seriously, the girls like go drown your head in a toilet, I hope you drown in your own vomit sometimes, I’m just furious because like you’re basically mocking something that’s slowly killing me inside, like both physically, and mentally and emotionally.

As this statement suggests, some “Pissed-off” Ranters are very upset because people are

trivializing eating disorders by saying they want an "illness" that they cannot get rid of and desperately do not want to have. Many of the bloggers say that if you are pro-ana/mia you must be pro other serious mental illnesses such as pro-bipolar or pro-depression, or you must be pro-cancer.

In addition, the girls in these videos often go on about how nobody should "want" and actively seek out an eating disorder because people who *really* have an eating disorder do not want to have it: "who would want an illness that's taken so many years from my life?" (Mavis). Some of these bloggers express that what "pisses them off the most" is when pro-ana/mia is argues that eating disorders are a lifestyle choice when these bloggers feel that they did not, and *would not*, choose to have/have had their eating disorder. These girls mock the idea that eating disorders or pro-ana/mia can be "glamorous", stating that:

this kills people, this is something that's not lightly taken upon, this is something that ruins your life, it's not glamorous, it's not sexy, it's not funny, it's not something you should be going around promoting because this is something you are going to die from if you do not get better, if you do not control yourself (Jasmine).

The warnings, including fatality statistics, that are reported in the solicitous type of video blog are used as a way for "Pissed-off" Ranters to underscore the severity of eating disorders.

### **Comments About YouTube Videos**

In keeping with the video bloggers, four types of denouncing comments are identified in the comments that are posted in response to the YouTube videos: disgusted comments;



solution- providing comments; solicitous comments; and angry venting comments.

***Disgusted comments.*** Comments that consist of "knee-jerk" value judgements and moral disapproval portrayed a reaction to pro-ana/mia that communicated disgust, referring to pro-ana/mia is "gross" and "sick". For example, Trish's comment: "Couldn't agree more Pro-Anorexia is absolutely disgusting and shouldn't be endorsed by anyone, one of the things that really gets me angry. ./ x" has been reposted by at least four other YouTube users on one video's comment section.

***Solution-providing comments.*** Comments that state "facts" about eating disorders inform pro-ana/mia YouTubers about what they should "know" and what they should do to solve their problem. For example, Abigail wrote: "You should go to See a doctor! Your sick!". These types of comments state that eating disorders are a mental illnesses that cannot be a lifestyle choice and they insist that pro-ana/mia individuals recover by seeking help from higher authorities.

***Solicitous comments.*** There are two sub-types of comments that are solicitous towards pro-ana/mia: 1) warning comments and 2) caring comments.

Some of these comments straightforwardly warn the YouTube community that "Ana is a train wreck. Don't try to have it, it is disturbingly terrifying" (Samantha). At times, these comments caution the YouTube community about specific videos: "please dont watch this. Its triggering. I see that so many of you got triggered from this. I didnt. I relapsed from stress and anxiety. I hate this video. Ana isnt worth it. Lets all work together to let her go. Stay strong ~" (Tori). Comments like Cheryl's alert others about the dangers and harms of pro-ana/mia, thinspiration and eating disorders:

OMG... being a recovered anorexic I know that there's little I can say that you'll

actually listen but... the thinner I got, the more miserable I was during those days. And nowadays I suffer from so many health problems due to the fact that I starved myself so much... Gosh, if I knew then what I know now... Don't fool yourselves... PLEASE.

These comments advise not to be pro-ana/mia or seek an eating disorder because of the dangers associated with them.

Other YouTube members whose comments are grounded in the assumption that pro-ana/mia is wrong and dangerous, appear to be written more in the spirit of good intentions, and try to help and protect others with gentle encouragement:

Everyone who watches this for "thinspiration", you are all put on this earth the way you are, how you look and how you act for a reason. All of you are beautiful, and no, I don't know what you look like, but God knows and beauty is in the eye of the beholder. Stop this madness unless you want to die (Trudy).

Often these comments tell others that they are beautiful or that they hope that they recover from pro-ana/mia or their eating disorder. These types of comments are often full of mercy: "I need to hug those children and tell them there aren't fat cause their not :( (Evie). These comments express the desire for people to overcome pro-ana/mia and convey a sense of pity that is felt for the hardships faced by pro-ana/mia supporters.

***Venting comments.*** There are two sub-types of comments that involve angry venting about pro-ana/mia: hurtful comments; and expressing feeling trivialized comments.

***Hurtful comments.*** Commenters that aim to be hurtful, mean and provoking are identified, such as Mia's comment "die slow yousick f\*ck" that was directed towards

someone who produced a pro-ana/mia video. These types of comments often involve name calling and insults, such as:

Wooooooow. All you people.... are idiots. Skeleton skinny is so not sexy at all. I understand some people are naturally like that but starving yourself is one of the dumbest things ever. Once you start eating again, you'll gain weight super fast because you messed up your metabolism. Have fun with that (Charlotte).

*"Feeling trivialized" comments.* These type of commenters often state they have, or have had, an eating disorder and that they feel trivialized by pro-ana/mia. EDNOS stands for eating disorder not otherwise specified and ED stands for eating disorder. For example, Daisey comments:

I know what EDNOS is, it's already a full blown ED for most. It just pisses me off they WANT to be diagnosed with it. They look up the criteria and try to match it. They think they are special when they aren't. It's bullshit. Then they finally get that diagnosis and are offered help that I got on my hands and knees and literally BEGGED my mother for and I never got it. Yet these silly girls go in and out of treatment like it's f'ing summer camp. They are why I am never taken seriously.

and Ursala comments:

SO FUCKING STUPID ALL OF YOU. DON'T TRY TO GET ANOREXIA.  
PRO ANA IS NOT FUCKING REAL. JESUS CHRIST. YOU DON'T CHOOSE  
TO HAVE ANOREXIA AND IT'S A MOCKERY OF PEOPLE WITH REAL  
EATING DISORDERS WHEN YOU TRY NOT TO EAT (Capitals in original).

These types of comments demonstrate that there are individuals on YouTube who feel that pro-ana/mia mocks and trivializes eating disorders.

## **Responses to Tumblr's Policies**

The responses that support Tumblr's policies to censor pro-ana/mia and use PSAs are straightforward; they deounce pro-ana/mia and are happy about Tumblr's new policies. The most common reason given for supporting censorship and PSAs is that pro-ana/mia content and interactions are harmful to Tumblr's users (Andrea; Chloe; Isabelle; Jennifer; Kate; Liza; Patricia; Robyne; Ruth; Sabrina): "the whole 'reblog' feature of tumblr makes self-harm/pro-ana/etc blogs particularly insidious, because it provides that community/social encouragement towards harming yourself" (Jennifer). These commenters provide personal stories that exemplify the harm that they believed is caused by the Tumblr blogs. Chloe says:

There's way too much celebration and acceptance of disordered eating here. Personally, I went through a period in college when I threw up all my food. So, when I see blogs with bulimia tips and tricks, I know how much they would have messed me up if they were [available](#) back then. Sure, they'll be available elsewhere, but it's nice to see Tumblr confront the fact that they have been inadvertently fostering a community of sickness.

Ruth uses an experience with her roommate to exemplify the harm that eating disorders cause and the influence it has had on her own life:

The fact that anyone can post something promoting or glorifying eating disorders or self-injury is absolutely detestable; the three months or so I spent living with a girl who weighed under ninety pounds, who exercised compulsively, who had panic attacks over eating small amounts of food or missing going to the gym, and who regularly (and unintentionally) helped aggravate my own self-image issues

were seriously the worst three months ever...Sure, a policy against self-harm blogs won't stop them everywhere. But it's the right kind of message that the internet needs. Encouraging self-harm - be it by glorifying it or goading someone into it through bullying or coercive means - is unacceptable and it will not be tolerated.

Individuals who support censorship also explain that there is a need to protect vulnerable individuals from content that could "trigger" or induce others to engage in eating disorders (Alyssa; Andrea; Ann; Debra; Melissa; Ruth; Sandra). Ruth expresses that when individuals engage in the activities that the policy is targeting you are doing exactly what her "roommate did to [her] to every person who is out there looking for a trigger: You are harming them. Except you're doing it intentionally which is infinitely worse." In these types of comments, triggering is viewed as a harm that needs to be mediated and censored. Heather says she is glad "someone has the brains to differentiate between self-expression and triggering."

## Chapter 6: Interactions that Support Pro-Ana/Mia

### YouTube Video Interactions

Five types of supportive video bloggers are identified: sharing, advising, seeking, justifying, and cathartic.

**Inspiring.** There is an abundance of pro-ana/mia YouTube videos that fall under the category of "thinspiration", also known as "thinspo." These videos are intended to "thinspire," meaning that they are to inspire the pursuit of thinness, and they are the most common type of pro-ana/mia video. Thinspiration videos are created and shared to support the pro-ana/mia YouTube community. They typically involve a compilation of images of celebrities, models and what are referred to as 'real girls', and quotes that are played like a slide show to a popular song. Some examples of thinspiration quotes are presented in image 1:

Image 1: Compilation of Thinspirational Quote Slides taken from YouTube Videos



The thinspiration messages provide a plethora of reasons why girls should pursue being skinny, such as to compete with other females and to attract males (see Image 2).

Image 2: Compilation of Thinspiration Reasons to Lose Weight



The songs are often about strength and perseverance, like the song Titanium by David Guetta: "you shoot me down but I won't fall. I am titanium". Some thinspiration videos contain 'before' and 'after' weight loss photos and sometimes there are images of obese women eating fast food contrasted with a skinny woman eating a vegetable. The pictures of the girls and women highlight flat stomachs, thigh gaps, and bones: ribs, shoulders, hips and collar bones. Most of the women and girls are the same size as the typical, thin female celebrity or model who is dominantly perceived as beautiful in the media. A much smaller portion of the thinspiration videos contain images of emaciated women. Most of the photos of women used for thinspiration appear to be displayed positively, but there are some images that portray the women as distressed and tortured. For example, there is an image of an unhappy looking girl with something tied around her mouth that says 'control.' There are also images of women with their arms wrapped around toilets that seem to represent purging.

**Advising.** Workout suggestions and diets geared toward pro-ana/mia are another type of video readily available on YouTube. These videos sometimes include thinspiration content throughout, or at the end, as a way to provide encouragement to

pursue and achieve the dietary goals provided. The videos often ask the YouTube community for diet and exercise recommendations. Some of the pro-ana/mia diets are extreme; the "pro-ana rainbow diet", posted by Belinda outlines a daily calorie intake of 59-283 calories with one day of fasting per week.

**Seeking.** There are videos where individuals of a wide range of body sizes share pro-ana/mia weight loss plans and diets. Girls, by speaking into their webcams, sometimes not showing their faces, report on their pro-ana/mia progress through blogging and calling for support and motivation from other pro-ana/mia YouTube users. Often these videos are full of self-deprecating comments about appearance and self-worth. The girls call themselves "disgusting" and express their desperation to become thin. These videos are made for the purpose of finding a pro-ana/mia "buddy" that will support them online as well as offline. The plans, progress blogs and "call-for-buddies" videos identified seek out more interaction from other YouTube users and often directly ask users to respond by commenting on their video. Often, this type of video specifically requests only pro-ana/mia feedback, like the blogger Frankie who says: "don't leave comments if you're just going to try and talk me out of it. Others of you that are pro-ana and it would really help to know there's others out there with me."

**Justifying.** Many YouTube videos justify pro-ana/mia by challenging negative perceptions showing the benefits of pro-ana/mia. For example, an active pro-ana/mia YouTube blogger, Reanne, provides a historical development that explains that pro-ana/mia websites formed as a way to "find an alternate path or approach to living with their eating disorder" because "recovery sites [do] not help everyone". Some individuals find the restrictive nature of recovery websites silencing, stifling, and alienating because



"censorship is extreme, you have to watch what you say so much because you can't mention numbers, or you can't discuss behaviours, or you can't share negative thoughts" (Reanne). Many pro-ana/mia supporters argue that censorship or criminalization efforts do not work, Reanne reporting: that "in April 2008, France formally criminalized pro-ana sites. They made it a crime to own a pro-ana site and this crime was punishable by an exorbitant fine and also potential imprisonment. Did it work? No. Pro-ana/mia groups migrate elsewhere because regardless of persecution, there is obviously a very potent need for an alternative approach that people need and people are willing to fight for, and pay for."

Further, it is argued that the mass media condemnation and public exposure of pro-ana/mia, initiated by Oprah Winfrey's show on pro-ana/mia in 2001, has led to the re-isolation of pro-ana/mia and created new kinds of pro-ana/mia individuals known as 'wannarexics', who Reanne describes as:

individuals who are not ill, but are drawn to those who are allegedly [ill] with the intent to learn behaviours that will help them lose weight and then the second population are those who for some reason have a positive affinity towards pathology and want to covet an eating disorder themselves.

Some bloggers argue that the mass media condemnation and public exposure of pro-ana/mia has had positive outcomes because these served to "weed out" the wannarexics, causing many people to stress the importance of the distinction between pro-ana/mia individuals and wannarexics.

*Cathartic.* Some YouTube short film creators' presentations are seemingly cathartic, and for this reason supportive, because they provide an outlet for expressing

emotions and providing insight into what it is like to be consumed by pro-ana/mia. For example, in one artistic video the thoughts of someone who is pro-ana/mia are said:

I'm so ugly, I'm so ugly, I'm so fat, I hate my body, no one will love me if I'm fat, I hate myself, I want to be perfect, I want my bones to show, I'm so fat, I want to be perfect, five more pounds, five more pounds, I hate my body, I hate myself, I'm so ugly, I'm so fat, I want to be thin, I want to be thin, I want to be thin, I want to be thin, I want to be thinner, I want to be thinner, I want to be thinner, I want to die.

This excerpt suggests that the YouTube short film is illustrating that pro-ana/mia girls are obsessed with being perfect, in control, and thin. Short film creators demonstrate that pro-ana/mia girls' perception of self always has a "reference point" to compare themselves to, and compete with: "There are so many thin girls and I'm not one of them and I can't take it anymore." These expressive videos personify pro-ana/mia as being friends with "Ana"; the friendship is a turbulent relationship where Ana continually moves from friend to enemy. Therefore, Ana is portrayed as something exterior to the person, with whom the blogger has a very complex relationship; the blogger loves, hates, needs and desperately wants to get rid of pro-ana/mia. As an individual's eating disorders get worse, the voice of Ana and the thoughts of the individual blur, making it hard to distinguish between the two. More specifically, the voice of "Ana" is identified as a metaphor for the voice of an eating disorder, which is hateful, self-deprecating, and abusive, and made up of scales, numbers, distress, body weight obsession, depression, anxiety, controlling binges and purges, will-power and panic. For example, short film creator talks about Ana as saying "you're not perfect because you don't try hard enough", that the pain of purging and starvation is deserved, that you are an ugly loser and that nobody cares about you.

There are artistic expressions of the onset and progression of an eating disorder as seen in pro-ana/mia short films that portray the voice of Ana:

From this moment on I will start embedding myself into you, like a virus, I will fill each and every fat cell in your body with the poison of self-doubt and disgust. I will be the bile in your gigantic stomach, churning enough to make you puke at how wretched you look... I am a house of mirrors, I distort your image every time you look at yourself. I will show you obesity and hideousness. I will blind you from seeing that you're a starving child.

The narrator of the short film explains that the voice of Ana distorts reality. In addition to guiding the actions of the eating-disordered individual, the data reveal that the voice of Ana orders individuals to lie to their friends and family about what Ana tells them to do, such as skipping meals and hiding food. For example, in one short film the personification of Ana takes away a girl's bread from her plate, hiding it, causing the girl to say: "What the hell are you doing?" to which Ana responds: "You a favour, I wouldn't eat that if I were you."

The artistic expressions in the short films accentuate the severity of eating disorders and sometimes emphasize death as the result. For example, one video ends with "not every suicide note looks like a suicide note" as a girl crosses off her next goal weight on a marked-up paper. In another video, there is a girl named Sophie who meets her friend 'Ana' at a summer camp where she needs to dig a hole for exercise - a metaphor for her own grave - demonstrating the internal contradiction that is evident in how the girl sees Ana as a friend, but at the same time, as an enemy that is leading her toward death.

## Comments About YouTube Videos

Four types of supportive comments are identified in the comments that people make in response to the supportive YouTube videos: empathetic, encouraging, chastising, and cathartic.

*Empathetic comments.* Comments on pro-ana/mia YouTube videos that are empathetic, expressing personal experiences, opinions, and goals to others with whom they wish to relate. For example, Pricillia responds to a YouTube member by saying:

I feel the same way you do. I don't think I'll ever go to bones, but I don't think the average weight for a woman my height looks good on me, I think I look 'right' much smaller. There is a gracefulness and daintiness about a thin woman that larger women do not have. I'm not saying they don't look good, many do, but 'fat' means something different to us and as long as we realize the risks of taking it too far, we should be allowed to see and sculpt our selves however we see fit.

Pro-ana/mia individuals also read the YouTube comments to seek out pro-ana/mia buddies so that they can build mutual relationships of support outside of the YouTube community. The comments often provide demographic and contact details, such as the following: "Hey i'm looking for a buddy. hopefully someone close to 18or old. I have kik [messaging app] and you can txt me. \*\*\*\*\* (phone number excluded)" (Meaghan).

*Encouraging comments.* Comments like the following that express thanks for the YouTube videos are common:

Thank you so much for this video, it seems like you really understand what people with an eating disorder are going through. I struggle with both anorexia and bulimia for 3 years now, but it's just now that i'm making some steps towards

recovery....i just want to say thank you! (Grace).

Comments often provide positive feedback to those who post videos about pro-ana/mia, such as: "I've struggled with ED as well on both ends of the spectrum and watching this made me bawl. You did a very good job of telling what she was thinking and I have a lot of respect for you posting this video" (Natasha). Comments in this category also cheer on the YouTube bloggers: "im pro ana as well, im actually doin' the ABC 2, keep it up hunny bunny, a great site is prettythin -com. hit me up tell me what u think....I have a pretty good ana-prep speech if u want 2 read it, idk about typing it on here though... (Yvonne)" Comments are left that specifically provide weight loss advice and workout techniques as a way to help and encourage others: "If you want to lose belly, do crunches instead of situps. Situps expands the muscle, making the stomach look bigger, while crunches tones your abs" (Jess). Encouraging comments also involve small talk or "chitchat" by directly or indirectly complimenting the YouTube bloggers on things like the music used in their videos or their appearance (e.g., "luv ur eyes!" Marlana).

*Chastising comments.* Another type of comment chastises other YouTube users for not knowing the "facts" about pro-ana/mia and correct their "ignorance" by providing the "right" information. For example, one comment states that the girl in the YouTube video could not have an eating disorder because she is too fat. In response to that comment, another person argues that:

Eating disorders come in all shapes and sizes. You don't have to be bone thin to have an eating disorder. You don't have to do certain behaviors. It doesn't look the same for anyone and in fact, treatment wise, there are many different theories and ways to look at eating disorders. Recovery looks different for everyone. Instead of

demeaning other people and their struggles, and trying to set yourself apart and appear special, focus on your own recovery and let others be (Avory).

Many people respond to the following comment: "She deserved to die for being an attention whore. Message to all anorexic girls: Stop being pathetic, and eat your food. There we go. i just cured anorexia" (Sandy). One YouTube user replies by saying: "do you really think telling a sick person to eat their food makes anything better? (Carmela)" and another replies "what the fuck is wrong with you anorexia is a mental disorder that is in your genes your BORN with it you ignorant bastard" (Giovanna). These types of comments chastise YouTube Users for denouncing pro-ana/mia or for posting incorrect information about pro-ana/mia and eating disorders.

*Cathartic comments.* Some people write angry and defensive comments that are responses to feeling attacked by anti-ana/mia comments and videos. Often the comments provide explanations:

I don't understand her. "These websites shouldn't even be allowed. It's disgusting." HOW is this so "disgusting"? That people sometimes have these problems? Well, shut up honey. Congrats, you're a TV star with a body type people would kill for, a body type that the media insists we MUST have, and you ridicule US! You ridicule us even though your line of work is the one encouraging the problem (Lillian).

The comments also defend the right for catharsis: "fuck off ignorant cunt i accept my disorder and use the websites to vent my feelings so fuck off" (Kimberly). There are many comments in response to YouTube videos that defend the right for pro-ana/mia to exist and be used as a form of expressing one's emotions.

## Responses to Tumblr's Policies

The responses that contest the policies, are more numerous, complex, and lengthy than those that support the policies, and commenters are passionate about the need for open online discussion. One argument is that Tumblr's policies unequally target pro-ana/mia voices while other online communities are allowed to retain their freedom of speech (Aisha; Candace; Carla; Heather; Joanna; Merideth; Miranda; Patricia; Rebecca; Sabrina; Victoria). For example, Terrilyn argues that "a blanket policy like this is going to **do harm**" because it prevents the freedom of speech of "blogs recommending safer techniques for self-harm and starvation [that] serve an important function" such as saving lives. Commenters argued that Tumblr "is shutting down a community where people can talk openly without addressing the (actually evil) blogs that may have caused them to be where they are at" (Carla). For example, Carla states:

It's still okay to have a blog where you take pictures of people eating and call them fat. In essence, it's okay to have the kind of blog that causes someone to degenerate into the mental state where they might get an eating disorder, but once they get one we'll sweep them under the rug unless they only talk about their disease in a manner a bunch of bros unfamiliar with eating disorders find acceptable.

In a similar vein, Rebecca asks Tumblr staff: "do you plan to ban pro-fat accounts, too? What about pro-medical marijuana, or pro-gay rights? The Christian Right would LOVE to see you banning everything they see as unsavory or inappropriate."

Commenters also argued that the policies discriminate against women. For example, Miranda writes that "it is strange how shit that female people are more likely to

do needs this sort of action, but racism, sexism, homophobia, or pornbots' do not." Carla alleges that Tumblr is knowingly silencing women: "it's not a secret that this new rule will target primarily women. Sick women that have finally found a community where they don't feel alone." The anger about perceived unequal treatment was palpable in this comment:

we **know** about your fucking hotlines and your non-profit organizations or whatever the **fuck** else. We know because their analysis and their philosophy and their very presence are culturally privileged. We know because they continually position themselves as authorities on us, and using their immense social capital they get to define our identities and experiences before we ever get the chance. Their shit is all over our tags **already**, and given the violence inherent in such approaches, this re-enforces the messages that we're all worthless failures, especially for those of us who are otherwise marginalized. Many of us have been forcibly hospitalized and have **heard it all before** (bolded in original text).

Censorship is also seen as being harmful because it increases a commitment to the pro-ana/mia ideology and results in isolation from alternative ideologies. Those who make this type of comment argue that individuals who are being targeted through censorship already feel like the "entire world is against" them and people already tell them all the time that what they are doing is wrong. For example, Emma tells Tumblr that: "every time I've been part of a website that was deleted for its 'pro-ana' content, the members have always reacted with outrage: it strengthens their belief that the entire world is against them and just doesn't understand." Another argument made is that bloggers who are censored will be less likely to seek or accept help because they will become more



isolated and their pro-eating disordered ideologies will be strengthened, "driving [people] to more unsavory places" and making it harder for family and friends to discover that their teenager is suffering (Rebecca). Patricia stated that "talking...[or writing] about these issues can be cathartic..." since many bloggers do not have support systems offline.

Responses that contest censorship also explain the positive functions that are served by pro-ana/mia on Tumblr – they note that individuals ‘depend’ on Tumblr’s non-judgmental and non-censoring community to foster their well-being. Arej explains that "Tumblr provides these people with support and a sense of community through this open and honest communication." Dariya pleads, "PLEASE PLEASE PLEEEEEEEEEEEEEEEASE! Don’t delete/ban/trash/block any self-harm, ana-mia, suicide, or other similar blogs. Please." She notes all of the help she has received from relating to people on Tumblr (Carla; Emma; Kendra; Patricia; Sabrina). Many of the commenters express that they use the support as a coping mechanism to deal with their personal struggles. Sabrina explains how important the Tumblr community's support has been for her:

[M]y best friend is a girl i met on my thinspo blog two years ago. she struggled with bulimia, and we spoke all the time. i supported her through her recovery and just recently i’ve been thinking very seriously about recovery. she is helping me, she supports me when i eat toast in the morning, she supports me when i eat snow peas in the afternoon, she supports me when i go for a weigh in at the doctor’s office. she helps me through everything and our friendship couldn’t have been possible without tumblr. i recovered and it helped me so much. my first suicide attempt only failed since i told my friend on tumblr goodbye. she called the police

though she was four states away and told them what was about to happen. she saved me and i thank her everyday. If i didn't have my tumblr, i would be dead.

There are many YouTube video comments that defend the right for pro-ana/mia to exist and be used as a forum for expressing one's emotions. The girls and women argue that the policy is harmful because it: prevents freedom of speech, increases entrenchment and isolation, discriminates against women, and destroys communities.

## Chapter 7: Interactions that Analyze Pro-Ana/Mia

### YouTube Video Responses and Comments to These

Some of the video creators are distinct from the denouncers and supporters of pro-ana/mia in that they provide analytic insights by contextualizing the causes of pro-ana/mia as a broader social issue. They question the individualization of blame in discussions of pro-ana/mia, and instead focus on how media images of thin women, societal pressures of perfectionism and isolation that results from the use of technology in our society, are contributing to the existence of, and need for, pro-ana/mia. From this perspective, pro-ana/mia is not seen as the cause of eating disorders, rather the view is that it is the result of other socio-cultural factors. For example, creative video artist, Ellen, tells the YouTube community that “as long as we are being told and shown that size matters, that we are judged on the amount fat we have on our bodies, there will always be disordered minds and bodies.” Lauren, another creative video artist argues that “society allows our minds...to perceive a false reality...that perfection is achievable...and the means to a happy life” (YouTube Artistic Video). Malory, a YouTube blogger responding to another blogger's video argues that the mass media makes us think that being "skinny" is a reflection of having control over your life, such as your career, friends and romantic relationships. Many of the comments that are written in response to the YouTube videos contribute to the analytic conversation and theorize about how to prevent pro-ana/mia from existing in the first place: "people think pro-ana is death threatening but modern day models and magazines are basically what pro-ana sites are!" (Stacey). Another commenter, McKenzie, says: "conclusion, anorexia is mainly here because of the media. Well, I think so. But if we all fight together we could change the world and get rid of the superficial shit that leads to all of this...!" Through

redirecting blame away from pro-ana/mia, these types of comments directly challenge the validity of the attempts to eradicate pro-ana/mia:

Oh, I love these "anorexia fighters". So, tell us, where have you been all the time since size-(double)zero models started to fill up the magazines? Pro-ana movement is just a consequence, a reflection of the trends in the society. As long as you don't protest against the whole fashion and movie industry you have, in my eyes, no right to say anything about pro-ana/mia (Sonya).

Chris, a male blogger thinks that pro-ana and thinspiration websites are disgusting, but based on the academic research he has read, he is convinced that pro-ana/mia should not be banned based on "practical and moral grounds" because they have a "right to exist." He reports that "the Australian government is trying to legislate a plan to apply a filter to the internet here in Australia, censoring illegal, concerning or offensive content". Further, he argues that censorship is:

essentially ignoring the reasons why [pro-ana/mia] exists in the first place and failing to address the root causes of eating disorders. Surely we should be asking why they exist in the first place, whose interests they serve and what they may be able to tell us about anorexia that we may not already know.

Other bloggers acknowledge the impossibility of policing the internet and point out that other similar mass media produced images and discourses will not be policed, suggesting the inequality involved in targeting pro-ana/mia with censorship.

Video creators' analyses of pro-ana/mia challenge the notion that pro-ana/mia is a homogenous group, stressing the plurality of the meanings and membership attached to the community, as evidenced by the diverse ways in which people respond online. These

bloggers argue that pro-ana/mia is not just about promoting eating disorders, but as also used as a "therapeutic way of working through these problems and [some] find it quite cathartic, they can be forthcoming and honest without the threat of those intent on intervening" (Chris). YouTube blogger, Tabitha states:

It's a complicated issue because there are so many blurred boundaries. There are some pro-anas and pro-mias that actually have an eating disorder. So it's trying to draw the line between what's an eating disorder mentality and what is actually a choice. There's so many cross overs. It's difficult to pin point.

Tabitha distinguishes between "people deciding to live like an anorexic, but not actually having anorexia" and those who have anorexia nervosa. Chris states that "critiques of these websites have said that women can be triggered by the content on these websites, which is just absurd, anorexia is an extremely complex condition, and to say that it can be simply caught off the internet is to misrepresent and trivialize the condition." In sum, there are many YouTube videos, and responding comments to these, that speak to the complexities around pro-ana/mia.

### **Responses to Tumblr's Policies**

The responses that analyze the policies, are less numerous, but pointed, and commenters are critical of the policy's validity and efficacy. Tumblr policy commenters who offer analytic comments also contextualize pro-ana/mia by situating it as a symptom of broader social problems that require attention. For example, Arej argued that "the 'tips' and 'diet advice' offered by pro-ana are really not any different in their actual \*content\* to what you see in 100% legal girls' and women's magazines." Nabila posits that it is "the racism. The homophobia. The ableism. The sexism. And all the other

ridiculous shit that goes on in the world. Not a blog telling me that eating disorders are cool that causes someone to self-harm." Zahra wishes that Tumblr was able to do something that would stop girls from wanting to make the blogs in the first place and argues that the problem will still exist even if the policy "works" at censoring dialogues. These types of comments suggest that censorship is a superficial response that will not have real benefits:

It's fighting the symptom instead of the cause. I find it irritating. This is a problem that is much bigger than explicitly proana/promia/proselfharm blogs and if anyone thinks this is going to make those blogs go away or magically fix everything or "cure" everyone, they have a seriously skewed idea of what the problem is in the first place.

Commenters who offer analytic comments about Tumblr's PSA policy are opposed to the marketed messages because they think that the referrals will not help. Nabila states: "[She] does not need a glib little message of "Go here for help!" because that won't do shit", provoking 25,482 likes and re-blogs as of April, 8th, 2014. Rebecca also challenges the treatment solution that is being advertised through Tumblr's PSAs, arguing that "abstinence-only addiction rehabilitation does *not* work for everyone."

## Chapter 8: Interactions that Advertise

### YouTube Video Responses and Comments to These

The built-in video advertisements that precede pro-ana/mia YouTube videos, especially thinspiration videos, are tailored to the users' search terms and viewing activities. For example, when I began my research on pro-ana/mia I realized that a lot of the advertisements on the side-banners of websites and pop-ups on my computer screen were weight loss and body image product advertisements (See: Image 1). Also, built-in pre-video advertisements with very thin women who are marketing body-image-related products are also plentiful, as seen for example, in commercials for Victoria Secret's Dream Angels Collection and Maybelline nail polish. Also common are advertisements that market pro-ana/mia guide books that can be purchased online.

Image 1: Example of Pop-up Advertisement Experienced During Data Collection



I am being targeted because of the pro-ana/mia and thinspiration search terms I type into YouTube's, and other web sites', search engines. I work often on my thesis supervisor's office computer and she notices the same targeting of advertisements that started to occur after I started working on her computer. These advertisements continue to plague my use of YouTube, and my general internet use, even when I am not searching for information that is pro-ana/mia or weight-loss related. My thesis supervisor and I both feel assaulted by the bombardment of advertisements and cultural messages that contribute to, and

reinforce, our potentiality for body-crisis experiences.

Advertisers also use the comment section of pro-ana/mia YouTube videos to market weight loss and fitness products. The following three excerpts are exemplary:

1) "Hey, have you tried Bellyfattack yet? Just have a look on Google. There you will discover a valuable free video presentation by a longtime licensed nutritionist revealing how you can lose unwanted fat. This helped Sheila to lose her belly fat. Perhaps it will help you also" (Advertiser 1).

2) "If you have been trying to burn fat quickly, you should google "Supreme Fat loss". They can help you get the body you deserve" (Advertiser 2).

3)"Hey, have you heard of "Belly Fat Quencher" yet? Simply take a look at this website address at [B e l l y F a t Q u e n c h e r . c o m](http://BellyFatQuencher.com) There you can get a practical free video by a recognised doctor talking about how to lose body fat. This made it easier for Toni to reduce his stomach fat. It may help you out also" (Advertiser 3).

Comments like these on pro-ana/mia YouTube video sites try to fool people into thinking the comments are from a 'real person' when in fact the links are provided by marketers to link readers to spam websites in order to sell products. An example of this type of comment is as follows: "Hey! I'm Jacob. I did -30 lbs in two months. Open [iwondiet.com](http://iwondiet.com)" (Advertiser 4). The YouTube community responds to these types of comments sometimes by posting videos such as the video posted by John with the following description:

If you found this video looking for a review of IWONDIET.COM then do NOT buy anything from them. It's a scam and they are trying to make money from



people by spamming. Please avoid at all costs. Proof of this in the video - Please watch" (caps in original). (see: <http://www.youtube.com/watch?v=MSXRCBriGUI> for a warning against "iwondiet.com").

### **Tumblr's Response**

Tumblr, in collaboration with NEDA (National Eating Disorder Association), is putting up PSAs in response to individuals who are typing in search terms that are related to pro-ana/mia. Tumblr broadcasted to their users their

plan to start posting “public service announcement”-style language whenever users search for tags that typically go along with pro-self-harm blogs. For example, when a user searches for tags like “anorexia”, “anorexic”, “bulimia”, “bulimic”, “thinspiration”, “thinspo”, “proana”, “purge”, “purging”, etc"

(<http://tal9000.tumblr.com/post/18141738960/a-new-policy-against-self-harm-blogs>)

These PSAs advertise NEDA's services by promoting their ideology and providing their contact information:

Eating disorders are not lifestyle choices, they are mental disorders that when left untreated, can cause serious health problems, and at their most severe can even be life-threatening. For treatment referrals, information and support, please contact the National Eating Disorders Association's Helpline at 1-800-931-2237 or **www.nationaleatingdisorders.org**. (Bolding in Original <http://staff.tumblr.com/post/18563255291/follow-up-tumblrs-new-policy-against-pro-self-harm>)

## **Chapter 9: Complexities of Pro-Ana/Mia Interactions**

My analysis of the findings begins by addressing the first research question: What is the nature of the online interactions with pro-ana/mia communities and how do these align with various approaches to this phenomenon? Immersion in the data reveals the complex nature of pro-ana/mia interactions that take place online among people *within* the pro-ana/mia culture and *outside* the culture. The complexities involved in internet-users' understandings of pro-ana/mia are reflected in the nuanced interactions that took place among those who denounce, support, analyze, and advertise to pro-ana mia forums.

### **Interactions that Denounce Pro-Ana/Mia**

Those invested in the medical model are the dominant voices who frame pro-ana/mia as wrong, if not dangerous and disgusting. This framing supports censorship, PSAs and medical treatment as the main approaches to dealing with the "problem" of pro-ana/mia. The "Pissed-off Ranters" that I described in Chapter identify as having an eating disorder in the medical model sense, ferociously detesting and hatefully attacking pro-ana/mia in a way that suggests an inability to relate to, or understand, pro-ana/mia. Their investment in the medical model is demonstrated in chapter 5 through their "institutionalized talk" that definitively states that eating disorders are mental illnesses coupled with their common references to statistic evidence to support the seriousness of mental illness. Women who are invested in the medical model see eating disorders as uncontrollable mental illnesses that are not culturally induced and often have nothing to do with cultural ideals of thinness and beauty. Not only are they not aspiring to look like Kate Moss or Mary Kate Olsen, who are seen frequently in thinspiration, they state that they do not *need* thinspiration for their eating disorder. The "Pissed-off" Ranters are so

"Pissed-off" because they experience pro-ana/mia's existence as a mockery, and they feel belittled because they feel that their pain, struggles and accomplishments, are being trivialized by pro-ana/mia.

Like Bordo (2003), throughout the project my investments in critical analyses continually challenge the dominant medical model's position on eating disorders, favouring an analysis that appreciates the role of cultural influences in eating disorders. This general orientation is in line with Bordo's (2003) emphasis on the importance of cultural images. Still, listening to the "Pissed-off" Ranters' video blogs allows me to appreciate the Pissed-off Ranters' accusation that a concentration on cultural images contributes to the minimization of the seriousness of eating disorders. The "Pissed-off" Ranters express that concentrating on cultural images through supporting pro-ana/mia results in trivializing the 1-3% (Statistics Canada) of women with diagnosed eating disorders. The 'Pissed-off Ranters also suggest that their experiences are different from those of pro-ana/mia individuals, and that they benefit from medical model understandings and approaches. Through my immersion in the "Pissed-off Ranters" data, my investments in critical analyses of eating disorders shifted to include an appreciation for how the medical model was relevant also.

### **Interactions that Support Pro-Ana/Mia**

When I first started researching the phenomena, I would confidently, yet incorrectly, define pro-ana as an individual or community that glorifies and supports anorexia and pro-mia as an individual or community that glorifies and supports bulimia. The supportive interactions demonstrate that it is not accurate to understand pro-ana/mia as necessarily supportive of anorexia/bulimia, as much of the pro-ana/mia culture is

centered on being supportive of *people* who have anorexia/bulimia, whether or not the supporters are eating disordered. There is disagreement among pro-ana/mia supporters, some arguing that pro-ana/mia is a lifestyle choice while others explain that pro-ana/mia is a coping strategy for living with "their disorder". If girls are using pro-ana/mia as a coping strategy then their intention is not to glamorize eating disorders. Some use pro-ana/mia as an expressive tool that provides an outlet for catharsis, in that their discussions of pro-ana/mia are poetic and cannot be interpreted as prose, such as the personification of Ana as friend and foe.

Not all pro-ana/mia individuals want anorexia or bulimia, a view that is often aligned with a medical model understanding, many are choosing to use pro-ana/mia as a weight loss method. Instead, the pro-ana/mia culture consists of various degrees of disordered eating ideologies and behaviours. The sheer numbers engaged in pro-ana/mia discussions suggests that many members likely do not belong to the 1-3% (Statistics Canada) with diagnosable eating disorders. Rather, there are pro-ana/mia girls who appear to be making desperate, but rational choices to strive for what they believe society has defines as female perfection: a thin sculpted body that is rewarded, and *glorified*. It is, I argue, irresponsible to explain the scope of pro-ana/mia as a result of "wannarexics" who use pro-ana/mia as a dieting method, because the wannarexic label downplays and dismisses the normalizing of dieting in our thin-obsessed culture. Instead, my analysis is that the disordered eating that the pro-ana/mia community experiences is different from those who are best represented by medical model characterizations, and therefore, the pro-ana/mia community may benefit from alternative understandings and approaches.

### **Interactions that Analyze Pro-Ana/Mia**

The interactions that analyze pro-ana/mia contextualize it as a broader social problem that is caused by media images of thin women, societal pressures for women to have the 'perfect' body and socio-cultural judgments of 'excess' fat on women. These interactions cause me to reflect on one of the medical characterizations of eating disorders: distorted body image, which is an inability to perceive the reality of one's body weight. In addition to individual characterizations of eating disorders, what I have come to think of as "culturally-induced body image distortion" caused by cultural ideologies, such as fat phobia and thin idealization, needs be problematized. By this I mean that, it is not only an individual's view of their own fat that is distorted, but the culture's view of fat is also distorted and contributes to disordered eating ideologies and behaviours. These analytic interactions challenge the validity and efficacy of targeting pro-ana/mia with censorship and PSAs when broader problems such as culturally-induced body image distortion are underscored.

The late-modern neoliberal emphasis on personal development that is connected with the individualizing, dichotomizing, and homogenizing of peoples and cultures are definitive traits of present-day society. These defining features neglect an appreciation, or even recognition, of the pluralism of pro-ana/mia that is reported in Chapter 7:

Interactions that Analyze. The bifurcated categorization of "eating-disordered" vs. "not-eating-disordered" misrepresents the complex nature of contemporary disordered eating because "there are so many blurred boundaries" (YouTube Analyzer). Pro-ana/mia is not made up only of individuals who align with severe medical model characterizations of eating disorders – rather, pro-ana/mia represents women who are wrestling with varying degrees of body crisis within the context of a culture that is plagued with thin obsession.

Further, the emphasis on personal development that connects to the individualizing of "people as problems", as is often the case with respect to pro-ana/mia, leads to individualized solutions. If the problem of pro-ana/mia were to become de-individualized, as the interactions that analyze contend it should, then the solutions would be aimed at cultural, not individual, change.

Disordered relationships with food and bodies occur on a matrix of continuums that include both ideological investments and behaviours and that range between varying degrees of order and disorder. For example, a woman can have an extremely disordered relationship with food that is *ideological* in nature, but that does not manifest in disordered *behaviours*. She may experience extreme levels of lack of control over her thoughts without any immediate threat to her physical health. Her thoughts could be caused by either biological or cultural stimuli, or both. Another woman may have both disordered ideologies and behaviours, but may feel in control of them and be choosing them for the desire to achieve extreme thinness. Arguably, a woman's positioning on these continuums is rarely stable because women's relationships with food and their bodies can change within moments. For example, women can fleetingly move from hating all the extra fat they can pinch on their bodies, to accepting the same fat as representative of "beautiful soft spots." These fluctuating definitions characterize "the struggle" that women experience due to the contextualizing factors of late-modern society that are addressed by interactions that analyze. Understanding pro-ana/mia as representative of a fluid continuum of disordered eating allows for an understanding of the complexity and instability of how women experience body crisis in late modern society - crucial information for building informed approaches to pro-ana/mia.

## Interactions that Advertise

Body-product advertisers do not respond to the pro-ana/mia culture as a phenomena that needs to be banned or treated, but as representative of an ideal customer base that can be directly targeted in order to sell body-image products. Due to the dynamic nature of the marketing strategies aimed at individuals who search online for pro-ana/mia-related content, and the dynamic nature of the internet in general, I have learned that pro-ana/mia is *never* experienced apart from advertising. Also, the dynamic nature of internet produces startling juxtapositions between the *condemnation* of pro-ana/mia videos that I watch, and the *acceptance* of fat-phobic and thin-ideal images and messages that I experience during each time that I am immersed in the data online. For example, before I watch a pro-ana/mia video, I watch a music video with women as thin as in thinspiration (because it was showcased on the same screen), and then when I go to watch the pro-ana/mia video, I am forced to watch a built-in pre-video advertisement that tries to sell me a gym membership. Then, as I watch the pro-ana/mia video, there will be a side-banner or pop-up advertisement that demonizes fat in order to sell weight loss pills. After I finish watching a pro-ana/mia video, I have gone onto the social media website Facebook, where I see friends congratulating others for losing weight, remarking on how strong and beautiful they are for their achievements.

The data from responses to the Tumblr policy uncover another layer of complexity in the interactions that advertise to pro-ana/mia, that involves the treatment advertisers. Tumblr, in collaboration with NEDA, is responding to individuals who are typing in search terms that are related to pro-ana/mia by putting up PSAs. The policy dictates that these PSAs are to be shown on all material *associated* with self-harm,

including broad categories such as pro-ana, pro-mia and thinspiration. These PSAs advertise NEDA's services by promoting their ideology and providing their contact information. Neglected in this approach is the possibility that pro-ana/mia search terms could be indicative of attempts to cope, not to self-harm. Therefore, advertisers who are promoting treatment services understand pro-ana/mia as individuals whose ideologies require conversion to the medical model's understanding of eating disorders, and they approach pro-ana/mia by marketing their treatment "fixes".



## Chapter 10: Theorizing Interactions that Denounce Pro-Ana/Mia

The analysis in this chapter addresses the second research question: How might pro-ana/mia be alternatively theorized, drawing on critical theorizing from sociology, history, criminology, and political science? I specifically focus on interactions that denounce pro-ana/mia and support censorship and PSAs by drawing on feminist postmodernism, the social problems game, and discursive colonization theory.

Those who denounce pro-ana/mia are claims-makers within the social problems game. In order to win the game they make verbal, visual and behaviour *claims* that aim to persuade an *audience* that pro-ana/mia is "troublesome and widespread, that it can be changed, and that it should be changed" (Loseke 2003, 25-26). The visual images of the most emaciated thinspiration pictures are an example of a powerful visual claim that pro-ana/mia is a dangerous condition that should be understood as a social problem that needs to be fixed. Further, claims-makers frame censorship as a solution that is achievable and medical treatment as a solution that is effective. When the denouncers describe the harmful effects of pro-ana/mia and the severity of the issue they are acting as claims-makers who are constructing "*grounds*" (Loseke 2003, 55). Denouncers dramatize "*popular worry*" (Loseke 2003, 67) by sharing the most extreme verbal claims about pro-ana/mia as "*typifying stories*" (Loseke 2003, 56) in order to produce emotionally persuasive grounds that tug on "*cultural feeling rules*" (30).

Denouncers draw on the social resource of "*popular wisdom*": "our taken-for-granted ideas about how the world should work" (Loseke 2003, 30). The "*diagnostic frame*" (59), the construction of responsibility and blame, stems from the popular wisdom expressed by the denouncers who claim that pro-ana/mia girls are wrong and should seek professional help according to the medical model. Loseke (2003) explains that when it

comes to *claims-makers* "science is at the top of the hierarchy of credibility" (39) and further discusses how the Diagnostic and Statistical Manual (DSM) "is symbolically powerful because specific behaviours and characteristics in this book have the *official* stamp of 'disorder'" (40). The general public accepts the DSM's characterizations of eating disorders as "scientific truth" without taking into consideration the social and political aspects involved (Loseke 2003), which makes the claims made against pro-ana/mia both credible and common-sensical. Loseke (2003) explains the process of owning a social problem that I saw when analyzing the denouncing claims:

Social problems ownership happens when one particular social problem diagnostic frame becomes the taken-for-granted frame for that problem. Claims-makers constructing the taken-for-granted frame become the accepted authority on that problem, they are high on the hierarchy of credibility. They *own* the problem so to speak, so their claims are given more attention than are claims constructed by alternative frames" (italics in original, 69).

The interactions that denounce pro-ana/mia illustrate the medical models' social problem ownership and how the alternative voices of those who support pro-ana/mia are delegitimized. Below I will deconstruct the social problems game that I uncovered, complimented by an application of the concept of discursive colonization in order to challenge the current ownership.

Denouncing claims-makers who adopt the medical discourse define pro-ana/mia as harmful, and acts of censoring and PSAs build on that idea by saying that pro-ana/mia *discussions* are also harmful. Therefore, censorship and PSAs take the medical discourse one step further, but with little, if any, academic support. Some of the social science

literature argues that pro-ana/mia discussions are harmful, but there appears to be no scholarly evidence to back up these claims – they are seemingly based on common-sense notions of what is harmful. Furthermore, there is no "proof" that censorship and PSAs prevent any of the suggested harms that are alleged to come from pro-ana/mia discussions. The destruction of online spaces through censorship does not eliminate the problem because "the problem", I contend, is not pro-ana/mia discussions, but why girls are choosing to discuss pro-ana/mia. If censorship is successful, at best, it will remove pro-ana/mia content from certain websites, however the nagging and hurtful voice of "Ana" will not just disappear. The rationale for Tumblr's policies is conflated with the idea that medical help is needed, and beneficial, and this conflation is rarely interrogated, even though there is no empirical evidence that demonstrates that traditional eating disorder treatments are successful (Bodell and Keel 2010; Rance et al. 2014; Starr et al 2014; Suakas et al. 2014).

The question that has become the driving force for my alternative theorizing is: Whose interests are being served by censorship and PSAs? While addressing this question I have taken into deep consideration the various motivations, such as "*objective interests*" (Loseke 2003, 34), including financial interests, in controlling the production of meaning-making within the "*social problems industry*" (Loseke 2003, 33). By addressing this question, I provide a "replacement discourse" (Henry and Milovanovic 1999) of "cultural resistance and transformation" (Bordo 2003, 218) that situates pro-ana/mia *not* as a stand-alone problem for individual women (which is the dominant discourse), but rather as a logical response in a society that valorizes thinness and oppresses women. The replacement discourse alternatively theorizes about the

interactions that denounce pro-ana/mia by arguing that the medical model serves to discursively colonize pro-ana/mia through censorship and PSAs that are driven by the power that comes from pecuniary benefits to corporate entities. This analytic point is in keeping with Loseke's social problems game analysis. It is very important to note that this discursive colonization predominately affects women, and as such is a powerful tool for the oppression of women.

Drawing on Henry and Milovanovic's discussion of postmodern theory (1999, 5), organizations like NEDA have "special knowledge [that] earn[s] [them] the right to decide the fate of those who do not share this knowledge." Pro-ana/mia supporters are discursively suppressed by the restriction, regulation and repression that results from censorship policies such as Tumblr's. Pro-ana/mia community members are told that they are wrong, disgusting and mentally sick, not only for how they feel and what they do, but also *for communicating how they feel and what they do*. The colonizers of pro-ana/mia deal with difference by destroying the legitimacy and abolishing the existence of alternative ways of living, managing and coping with eating disorders or moments of body crisis. They actively seek to convert the ideologies of pro-ana/mia individuals into medical model ideologies in an attempt to transform them into consumers of treatment by indicating that professional support is the only effective and legitimate support.

Censorship and PSAs are justified because colonizers, such as NEDA, are winning the social problems game of controlling definitions of, and responses to, eating disorders and pro-ana/mia. The processes involved in winning the social problems game explained by Loseke (2003) are exemplified in the medical model's victory that places pro-ana/mia as a problem that requires a solution. . It is clear that the dominant message

from the "experts" about this social problem is that pro-ana/mia is wrong, anti-ana/mia is right - there is no space for debate. The responses supporting Tumblr's policy make claims about the potential harm that pro-ana/mia content poses because it is alleged that such content can trigger a wider population of innocent victims to become eating-disordered. The implicit "it could be you, your sister, your best friend" warning bolsters the rationale for censorship and PSAs. The discourses that argue Tumblr's policy is fighting mental illness and protecting the vulnerable from harm are fortified with exclusionary power and socially-constructed superiority. It is through positioning pro-ana/mia members as simultaneously both the victims of eating disorders and the villains who are subjecting others to life-threatening behaviours that censorship is justified (Ferreday 2003), and why PSAs and other forms of solicitude go unquestioned.

Medical authorities such as NEDA, refer to pro-ana/mia individuals as "mentally ill", delegitimizing any narratives that suggest their culture represents "lifestyle choices" or "coping strategies." Simultaneously, efforts to discursively colonize masquerade as benevolent acts that help "fix" problems through treatment. Pro-ana/mia members are also referred to as murderous cult leaders who cause: anemia, osteoporosis, abnormal hormonal levels, hair loss, heart disease and death. Alternative discourses that seek to preserve pro-ana/mia online spaces get shut down because they become perceived as immoral acts that support girls harming themselves and dying. The moralizing rhetoric deflects attention away from the taken-for-granted positioning of pro-ana/mia as the *cause* of eating disorders, instead of pro-ana/mia being a *consequence*.

NEDA's (and others') perspectives and practices with respect to eating disorders are normalized because of widely-shared ideologies about the ideal body and treatment

for those who do not seek to attain it due to the credibility of the medical model. As such, these authorities maintain their monopoly on the right ways of knowing, being and acting (Nayak and Suchland 2006) that are reflected in the medical model's prevention and treatment strategies, and aimed almost exclusively at the individual (Shannon 2008). Solicitude is purportedly for the purpose of warning and caring for women, which, in a common-sensical way appears to be a benevolent response to "dangerous and disgusting" ideologies and behaviours. Fortifying this common-sense perspective is statistical evidence that points to the fatality of eating disorders. Thus, solutions provided by "experts" and those invested in the medical model are naturalized through the medicalized rhetoric of both "scientific truth" and *saving lives*. Censorship, PSA mediation, and even the criminalization of pro-ana/mia website owners ([see http://arrestingana.com/](http://arrestingana.com/)) is naturalized as good practice when pro-ana/mia is portrayed through characterizations that demonize the women who are involved online.

Medicalizing and problematizing pro-ana/mia women serves the interests of those in power in a consumer culture where money is to be made on a wide variety of "fixes" that are for sale from producing social meaning, namely solutions, within the "social problems industry". The medical discourses that are "part and parcel" of the PSAs endorse services that are being marketed for money-making purposes by colonizers such as NEDA. Colonizers involved in pro-ana/mia censorship and related PSAs have pecuniary vested interests in perpetuating and monopolizing the social problem of eating disorders – by casting individuals as sick and in need of services to treat their illness, corporate entities stand to profit financially. As such, Tumblr's position on censorship with the accompanying PSAs provides an ideal opportunity to market their services. The

characterization of eating disorders as needing medical services has economic implications that are enormous. Countries spend up to a \$100 million annually on medical services for eating disorders (British Columbian Ministry of Health Services 2009-2010; Simon, Schmidt and Pilling 2005), hence there is a lot of money at stake in owning the solutions for this "problem". The PSA advertisements for recovery organizations economically benefit Tumblr, the agencies who produce the PSAs, and the companies featured in the PSAs whose services are being sold through this advertising. For example, Tumblr staff work in collaboration with the National Eating Disorder Association, who gets free or paid advertising for their organization's services anytime a person uses a keyword such as "pro-ana", "anorexia" or "thinspiration" (see <http://www.nationaleatingdisorders.org/press-room/press-releases/2012-press-releases/national-eating-disorders-association-partners-tumblr>). Tumblr claims they are censoring and putting up PSAs to protect their users, but the closeness of the ties between Tumblr and the National Eating Disorder Association raise questions about the ways in which each are profiting from the policy. Because the organizations featured in the PSAs are provided direct advertising by monitoring their potential customers, the revenues that come from the advertising help pay for their employees and legitimize the need for outside funding and donations. Just because an organization is not-for-profit does not mean that their services are automatically humanitarian and benevolent.

Given the authority of the medical model's explanation of pro-ana/mia-related phenomena, and the vested interests of those who benefit from the services that the medical discourse promotes, the censorship of online forums that might potentially challenge the medical model is understandable. Pro-ana/mia is denounced because it

threatens the medical model's domination of disordered eating ideologies, practices and "solutions".

Critical feminist theorizing deconstructs the many socio-cultural ways in which women's bodies are controlled in patriarchal society. Bordo underscores the centrality of eating disorders in our society: "[M]ost women in our culture... [are]'disordered' when it comes to issues of self-worth, self-entitlement, self-nourishment, and comfort with their own bodies; eating disorders, far from being 'bizarre' and anomalous, are utterly continuous with a dominant element of the experience of being female in this culture" (Bordo 2003, 57). Those who support pro-ana/mia discussions online, and contest the policy (and censorship and solicitude more generally), also support their position by focusing on harm reduction, but their argument is that it is the *prevention* of open discussions engenders harm. These individuals make persuasive points about the impacts of censorship: the prevention of freedom of speech; the entrenchment and isolation of women with eating disorders; and the destruction of supportive communities. It is possible that the support that the pro-ana/mia community provides is, in and of itself, helpful to *solve* or *mediate* its members' eating disorders in ways that reduce harm and save lives. However, online social support, while it deviates from "professional" help, threatens the control and the monopoly that medical authorities have over pro-ana/mia individuals, and eating disorders more generally. Furthermore, censorship and PSAs reflect how male authority maintains and contributes to gendered power relations that result in the control of women's bodies and voices: "the greater power generally held by men is a primary reason that women's experiences, perspectives, and knowledge have been devalued, and that women's voices been suppressed" (Wood 2008, 328). Through



online dialogue there is the potential for critical consciousness that would acknowledge the ways in which women's bodies and voices are controlled, and work toward changing cultural ideologies and practices. Such change would have huge implications for gendered power dynamics and the currently accepted views around the commoditization of the ultra-thin female physique.

The characterization of pro-ana/mia websites as a social problem, and the censorship and PSA responses, have been artfully produced through multiple male-dominated experts and social mediums, interwoven with nimble patriarchal fingers into the invisible cloak of day-to-day gendered discourses. Censoring pro-ana/mia is about keeping a particular social group silent – women. It is also about keeping the powerful elite of consumer society powerful – men. This analysis goes beyond concept of "ownership over the problem" (Loseke 2003) to a feminist analysis that casts censorship and PSAs as central to "ownership of the problem *of women*". To give legitimacy to those who argue that pro ana/mia discussions serve a positive function by providing a sense of community, catharsis and life-support, would be to invest pro-ana/mia supporters, primarily women, with power - which would detract from the power of men.

## **Chapter 11: Theorizing Interactions that Support Pro-Ana/Mia**

Like Chapter 10, the analysis in this chapter responds to the second research question: How might pro-ana/mia be alternatively theorized, drawing on critical theorizing from sociology, history, criminology, and political science? In this chapter, I specifically focus on interactions that support pro-ana/mia by drawing on feminist postmodernism, cultural criminology's explanation of late-modern *identity*, and critiques of neoliberalism and globalization.

Women have become increasingly susceptible to eating disorders, on a global scale (Anderson-Fye 2004; Brewis et al. 2003; Makino, Tsuboi and Dennerstein 2004; Gahman 2008; Latzer, Merrick and Stein 2010). Countries that are consumerist, market-based nations are known to have a higher prevalence of eating disorders. Similarly, countries that are developing into consumerist, market based nations are seeing an emergence of an increase in eating disorders (Gahman 2008; also see Becker 2003; Bhavsar and Bhugra 2008 for examples). Perceptions of the ideal body type have historically been culturally specific; differing definitions of what constitutes beauty, appreciation, and worth have been found across the world (Brewis et al. 1998). As a result of aggressive marketing techniques, positive characteristics attributed to body size are now seen in terms of the ultra-thin female form, a form that was once culturally-specific to Western idealizations of beauty and social prowess. Even developing nations nowadays attribute negative social and moral failings to the "fat body" "such as a lack of self-control, social irresponsibility, ineptitude, and laziness" (Becker 1995; Cordell and Ronai 1999; de Garine and Pollock 1995; Deljong 1993; de Vries, 2007; Grogan and Richards 2002; Martin 2001; Stunkard and Sobal 1995; Turner 1984)" (as referenced by Brewis et al. 2011, 269).

Transnational corporations' (TNCs) "commercial interests propel the globalization of the religion of thinness" (Lelwica, Hoglund and McNallie (2009, 30) that is reflected in pro-ana/mia. TNCs have the power to shape the way women perceive their bodies, successfully marketing products as well as ideologies and representations of bodies globally (Reddock 2013). The values that are attributed to the "ultra-thin" female ideal are transmitted in a normal process of socialization (Ferrell, Hayward and Young 2008) and the indoctrination starts in childhood through marketing. For example, Nemani (2011) discusses the globalization of the inordinately profitable and famous doll:

Barbie leads in the world of young females, with her vast wardrobe, her extensive life experiences, and her many diverse friends. In a drive to capitalize on the growing phenomenon of globalization, Mattel [creator of the toy/'cultural icon'] repackages Barbie in a variety of ethnicities. Making superficial ethnic and racial modifications to the doll, such as adorning her unrealistic, sexualized physique in cultural fashions, has been a largely successful marketing strategy for Mattel in many international markets, winning the allegiances of little girls throughout the world (97).

Barbie's "hyper-slim" and big-breasted physique exemplifies the "perceived ideal of the female form... [that] taunts ordinary women throughout the world with her unrealistic physical proportions, her limitless success, and her expansive collection of material goods" (Nemani 2011, 106). Barbie exemplifies the merger of a particular body size with consumer products that, together, symbolize social status. Many within the pro-ana/mia culture have taken on Barbie's challenge and are attempting to achieve all the material and social success that has been conflated with "winning" the "hyper-thin" ideal female

body challenge - a fictitious and unachievable goal.

Fuelling this quest for thinness is neoliberal marketing that exploits women's relationships with food and their bodies. The purpose is to encourage the consumption of services and products that are aimed at body modifications, through dieting, exercising, and various forms of "treatments." Not only is the skinny female ideal promoted through niche marketing techniques; thin bodies are conflated with positive personality traits and late-modern definitions of what it means to be a successful woman. Often in pro-ana/mia interactions, *skinny* is articulated, especially through thinspiration quotes and slogans, as "perfection" and "beauty", which requires "choice", "control", "strength" and "hard work". Skinny is expressed as an elitist membership that one should strive to be part of within pro-ana/mia culture and by default, broader culture. Pop culture is rife with examples of this cultural ideation, as seen in the song "Work Bitch" (2013) by Britney Spears, an international pop culture icon who has sold more than 100 million albums worldwide (Moodie 2011 <http://www.azlyrics.com/lyrics/britneyspears/workbitch.html>):

You wanna hot body

You wanna Bugatti

You wanna Maserati

You better work bitch

You wanna Lamborghini

Sip Martinis

Look hot in a bikini

You better work bitch

You wanna live fancy

Live in a big mansion

Party in France

You better work bitch [4x]

Now get to work bitch

(ahhhh)

Now get to work bitch

(ahhhh)

Britney Spears' popularized messages marry body image with material success *and* with an ardent work ethic. Her message is that if *you* work hard enough you *can* achieve a "hot" body that looks good in a bikini. What is unsaid is that if you do not have a hot body that looks good in a bikini you are not working hard enough. This theme around "hard work" is evident in pro-ana/mia in quotes like the following "if it was easy every1 would be perfect" (Thinspiration quote). Many forms of media repeatedly disseminate very powerful messages in this regard; we are indoctrinated with wanting Barbie- and Britney-like body ideals from childhood (Nemani 2011), bodies that we should work hard to achieve.

The media also present female *models* as the mark of ideal feminine beauty, and unlike Barbie their body proportions are achievable by some, however they often have body weights that are 15% lower than the criteria for anorexia nervosa (Spitzer, Henderson and Zivian 1999). High school "girls are pressured to make themselves 'attractive', to get a boyfriend, to define themselves and other girls in terms of their positions in the heterosexual market" (Thorne 1993, 170 as referenced by Kelly, Pomerantz and Currie 2005, 130) that defines models as 'attractive' to men. The pro-

ana/mia culture represents a manifestation of the pressures girls feel to be not only thin, but thinner than *her*, in order to get *him* (see image 2: Tumblr pro-ana/mia thinspiration). This quest to become thinner sets in motion an unachievable ideal, because there is no definitive “thin” state – a girl can always seek to become *thinner* than she was before, or *thinner* than a ‘frame of reference’ that she selects to compare herself to. The *purpose* of the quest, as depicted in Image 2, is equally troublesome; the girl is doing this to “feel small *for him*” (italics added). Such thinking perpetuates inequality in gender relations – not only is she catering to what she thinks *he* needs, but she is also engaged in body modifications that will ensure that she is, in a sense, inferior, by taking up less physical, and social, space than he does.

Image 4: Example of Tumblr Pro-Ana/Mia Thinspiration



Just as diamonds and gold are marketed for their rarity, the skinny-identity is marketed in such a way that it intentionally will *not fit all*. For example, Abercrombie & Fitch CEO Mike Jeffries was quoted recently as saying the reason he did not offer women’s clothing in sizes past large, despite offering extra large and extra extra large in his men’s clothing, is because “candidly, we go after the cool kids. We go after the

attractive all-American kid with a great attitude and a lot of friends. A lot of people don't belong [in our clothes], and they can't belong. Are we exclusionary? Absolutely" (CBC News, 2013, May). The broadcasted message from Jeffries is clear: if you cannot fit Abercrombie & Fitch clothes you are over-weight, unattractive, "uncool" and unpopular. This common conflation of body size with other status symbols makes the skinny identity valuable and worth investing in though purchasing body-image products and/or joining the pro-ana/mia culture.

The amount of self-worth attributed to body size within the pro-ana/mia culture demonstrates the success of marketing techniques that cause "the distinction between 'having' and 'being' [to] become confused as individuals increasingly construct *identity* through the [body image] commodities they consume and [the thin-ideal they] display" (Hayward 2004, 444). Consequently, women are constantly in an "endless pursuit of want" (Hayward 2004, 458). Hayward (2004) argues that it is not the actual physical consumer products that women feel deprived of. Rather, they are deprived of a sense of self-identity that is either not attainable through purchasing, or prevented because of a lack of means to purchase. Either situation results in a deprivation of, and longing for, identity. Financial restraints prevent the ability to purchase , but also not having the "right size" prevents the ability to purchase clothing and other products commensurate with a thin-identity. Women feel distress when they do not *fit* the right size to purchase the thin-identity required to display the positive characteristics that have been conflated with the thin-ideal.

The pro-ana/mia culture is but one example of how body-size hegemony is destroying the majority of women's ability to "love their bodies" – most women in the

world are not a size zero. As identified, the YouTube videos are full of video makers expressing self-deprecating comments about their own appearance and self-worth. Their testimonials reveal not only their desperation to achieve the thin-ideal so they can fit into body image commodities such as name-brand Abercrombie & Fitch "skinny jeans". They also reveal their feelings of *failure* that reflect to them, and broader society, their inability to *work hard*, their lack of *will-power*, and their *self-determined imperfections*. One speaker, for example, refers to the voice of "Ana" who tells girls that "you're not perfect because you don't try hard enough" (YouTube video). Girls and women are taught to feel humiliated for any "excess fat" on their "imperfect female bodies" and that they are "in control of" and "responsible for", embracing the neoliberal ideology that is endemic to pro-ana/mia culture.

Even though disordered eating is such a broad problem, neoliberal discourses, accentuate and promote self-determination, and attribute blame to individual failings, making women feel that *eating disorders are about them as individuals...* Individuals feel responsible for governing themselves through their "free choice" to self-regulate and avoid risk according to neoliberal ideology (Shannon 2008). If women do not "choose" to self-regulate and avoid risk they are understood as either mentally ill, caused by internal deficiencies, or "wannarexic", caused by attention seeking and other individual-level problems. Neoliberal self-determination rhetoric places the blame on those who experience social harm, making them simultaneously the victim and the villain, such as pro-ana/mia members getting framed as murderous cult leaders. As a result, it is hard to see the marketing dynamics that are oppressing women.

Reflecting on cultural criminology's understandings of late-modern self-identity



has allowed me to locate pro-ana/mia within the broader social contexts of neoliberal marketing, consumer society and the social control of women. The interplay of pro-ana/mia, TNCs, the media, and profit demonstrates how eating disorders are "now packaged and promoted as fashionable cultural symbols..." hence they come to be seen as a "desirable consumer decision" (Ferrell, Hayward and Young, 2008, 140). I now perceive the emotional distress expressed by pro-ana/mia community members as a result of not being able to achieve the status imbued in thinness, and therefore, of feeling deprived of a positive self-identity. This new insight facilitates how I have come to understand pro-ana/mia as reflecting more than individual women's problematic relationships with food and their bodies. These understandings led me to alternatively theorize that *the problem is not about the amount of fat that women have on their bodies, but how male-dominated culture makes the amount of fat on women's bodies definitive of their personality, moral failings and understandings of self-identity*. It is these connections that lead to phenomena such as pro-ana/mia. Recognizing pro-ana/mia as the pursuit of a positive self-identity, fosters an appreciation for the *need* for, and willingness to *defend*, the pro-ana/mia culture from censorship and PSA mediation. Pro-ana/mia arguably has a right to exist in order for women to support each other in a broader culture that is oppressing women through marketing strategies that ultimately disparage their identities.

## **Chapter 12: Theorizing Interactions that Analyze and Advertise Pro-Ana/Mia**

Like Chapters 10 and 11, the analysis in this chapter responds to the second research question: How might pro-ana/mia be alternatively theorized, drawing on critical theorizing from sociology, history, criminology, and political science? In this chapter, I specifically focus on interactions that analyze and interactions that advertise, and how they have lead me to further theorizing about the analyses presented in chapters 10 and 11. I draw here on feminist postmodernism, and critiques of neoliberalism and globalization, through an application of the concepts "crimes of globalization" and "gendered structural violence".

Interactions that analyze question the blame that the pro-ana/mia community receives and argue that blame should be redirected. They highlight the fact that those who market and sell body image products "allow... our minds...to perceive a false reality...that perfection is achievable...and the means to a happy life" (YouTube artistic video) while remaining free of social and moral responsibility. Theorizing about the interactions that analyze pro-ana/mia led me to theorize further about how chapter 11's analysis exemplifies what I will explain to be "body crisis exploitation".

Male-dominated hegemonic projects such as the medical model and neoliberal marketing strategies cause harm to women by capitalizing on, and contributing to, body crisis and eating disorders that are proliferating and globalizing. The Los Angeles Times reports that eating disorders have gone global, stating that "along with Western influences and rising affluence anorexia and bulimia have swept into Asia's developed countries and even poorer nations where hunger is still prevalent" (Efron 1997, column one). Efron (1997) states that anorexia nervosa was almost unheard of in Korea until the 1990s and now is taking the lives of adolescent Koreans. I have come to think of the

avoidable harm perpetrated by people and ideologies that exploit women's potentiality for eating disorders as a "crime of globalization" which I have come to think of as "body crisis exploitation." Body crisis exploitation occurs within a global class hierarchy that has developing nations "on the bottom," developed nations "at the top" and Western developed nations "at the peak." Within classed and raced divisions women, more than men, occupy positions at the bottom of a nation's hierarchy. Women who are at the bottom of the raced and classed global hierarchy will experience the most harm from body crisis exploitations. For example, the westernization of China that preceded the rise of eating disorders coincides with 20-30 different types of diet pills, including pills that have been found to cause heart damage in the United States, to be commonly purchased in Hong Kong (Efron 1997). We are not accustomed to thinking of body crisis exploitation as a crime of globalization, nor of pro-ana/mia individuals as victims of crimes occurring on a global scale – these have never been framed this way in the current literature. Body crisis exploitation is characterized by body-image related repression, exclusion and domination for the profit of the oppressor. Diet pill industries are but one example of who profits, and those affiliated with the pro-an/mia community are but one example of those who pay a price.

In chapter 11, I added to the insights provided by the interactions that analyze pro-ana/mia by explaining why women have become increasingly susceptible to eating disorders, and pro-ana/mia. My analysis demonstrates that the globalizing harms caused by marketing a neoliberal consumer identity that destroys appreciation for *realistic* female body sizes, and conflates positive identity characteristics with an unachievable body size (Brewis et al. 2011; Nemani 2011; Reddock, 2013) is avoidable. These

marketing tactics are subtle, strategic, and detrimental aspects of body crisis exploitation and represent the broader gendered "web of power" (Foucault 1984, 58) embedded in our social institutions that facilitates the hypocrisy of valorizing thinness while pathologizing pro-ana/mia. There are consequences from marketing the loathing of fat and the thin ideal that supports the \$300 million in annual Canadian diet centre sales and the \$32 billion diet industry sales worldwide (NEDIC 2013). Shockingly, the National Eating Disorder Information Center (NEDIC 2013) of Canada reports research that many young girls are more afraid of being fat than they are of cancer, nuclear wars or even losing their parents (Berzins 1997). Neoliberalism fuels the oppression and insecurity of women (Goldstein 2005) by promoting, for corporate elites' financial gains, "weight stigma." Such stigma negatively impacts women's employment potential, educational outcomes, romantic relationships, and physical and mental health (Fikkan and Rothblum 2011) and as I have argued, women's need for the pro-ana/mia culture. Although the pro-ana/mia culture may not be "global" it exists within the World-Wide Web, and as I argue is seen by many as "needed" because of the global marketing of the singular thin-ideal. As countries become increasingly westernized, and technology use becomes more accessible, pro-ana/mia culture may become a globalizing response, in keeping with the aforementioned literature that makes the case that Western standards of beauty, such as the thin-ideal, are now a global phenomenon (Brewis et al. 2011; Nemani 2011; Reddock, 2013). My study is limited because it only focuses on English texts and videos, however I found a strong presence of YouTube videos in Spanish. Further, there are many of what is referred to as "black girl thinspo" videos available on YouTube and other websites. These examples suggest that it is not just Caucasian, English-speaking western women who are involved

in pro-ana/mia culture.

The interactions that advertise represent another type of body crisis exploitation that is specific to pro-ana/mia individuals. Pro-ana/mia individuals are targeted by advertisers through built-in pre-videos on YouTube, pop-up advertisements of products, and side-banner advertisements; it is because of their identified body crisis that advertisers exploit these women in order to sell body-image products. There are no censorship or PSA-like efforts directed at the advertisers from those in positions of authority within the medical establishments or the eating disorder organizations. Theorizing about the interactions that advertise, through drawing connections between body-product advertisers and treatment advertisers, informed my further theorizing about how Chapter 10's analysis exemplifies body crisis exploitation.

As I explained in chapter 10 pro-ana/mia censorship extends the patriarchal control of women, *and* PSAs further the vested interests of corporate entities that profit from the marketing of services at the expense of women. Both are examples of body crisis exploitation. Body crisis exploitation causes avoidable harm to pro-ana/mia communities by preventing their freedom of speech; entrenching and isolating them further; and blocking their access to supportive communities through destroying alternative spaces for discussion. These measures protect the money-making monopoly that is connected to pro-ana/mia individuals, and eating disorders, by assimilating pro-ana/mia individuals into consumers of treatment while oppressing women through blocking their alternative narratives. The financial gains and the oppression of women mutually contribute to the greater power held by criminal, socially harming, ideologies shaped predominately by men such as the medical model that NEDA dictates.

Controlling how women are allowed to talk about their bodies stifles analyses that recognize, or potentially might recognize, the breadth of "the problem." It also inhibits the potential for social and political action that could lead to social change with respect to how women feel about, and treat, their bodies. In keeping with that direction of thought, there is a striking internal contradiction between the condemnation of pro-ana/mia YouTube videos and many of the built-in advertisements that precede the videos. For example, lingerie advertisements market their products using size double zero models that have been altered to unachievable proportions that pro-ana/mia individuals desperately want to achieve. Many of the lingerie models in these advertisements are the same size as the women in the thinspiration videos that follow. There is an appalling hypocrisy involved in targeting pro-ana/mia for censorship and PSAs while at the same time allowing advertisers to showcase, and market, the thin ideal.

My emergent analyses have informed my position that there is violence in the silence. Body crisis exploitation is also an example of gendered, structural violence in that it is indirect, insidious, anonymous (Farmer 2001) and "exerted systemically...inform[ing] the study of the social machinery of oppression" (Galtung 1960). Body crisis exploitation, through aspects of culture, such as "empirical science and formal science (logic, mathematics...[make] structural violence look, even feel, right - or at least not wrong" (Galtung 1990, 291). For example, the medical model's guise of objective and scientific neutrality *not only* masks the ulterior motives of those who use the ideology to commit body crisis exploitation crimes, but it also renders invisible the structural violence inherent in male-dominated ideologies. As stated previously, there is little evidence-based research to support the claim that medical science provides effective

solutions to eating-disordered individuals. Still the authority of the medical model, because of its foundations in empirical science, seamlessly justifies structural violence. With the power of empirical science and logic as the only "true" knowledge, supported by a medical discourse that dominates Western perspectives, the decision to censor pro-ana/mia and promote medical and psychological treatment goes unquestioned. Indeed, such decisions are typically viewed as logical and moral. Those deemed to be eating disorder professionals are accorded undue power considering the lack of treatment efficacy admitted by those very professionals who conform to, and preach, the ideology of scientific "truth" that requires statistical proof.

Ultimately, the gendered structural violence that is systemic in body crisis exploitation practices privileges men from Western countries with power - the power to determine quality of life, and in its most extreme form, the power over life or death - while silencing the "truths" of the powerless who are experiencing harm and death - women, especially those whose class and race place them at the bottom of the global class hierarchy (Nayak and Suchland 2006, 469). In light of my analyses, I have come to understand pro-ana/mia women's micro-level decision making practices as a coping strategy adopted in the face of gendered, structural violence. Consequentially, I believe that the controlling and silencing of pro-ana/mia is a way to ensure the maintenance of the patriarchal power over women that is achieved through gendered, structural violence.

## **Chapter 13: Conclusion**

This final chapter responds to the third research question: What is the significance of the online interactions, and the alternative theorizing of them, for our understandings of, and approaches to, pro-ana/mia and related phenomena? After, I will: provide my recommendations on how to respond to pro-ana/mia and related phenomena; address the contributions of this study; and suggest directions for future research.

### **Significance**

I have demonstrated the complex ways in which pro-ana/mia is understood and responded to by focusing on three online forums. It is very important that approaches to "dealing" with pro-ana/mia be attentive to the complex ways in which individuals identify with, communicate about, and respond to this phenomenon. Decisions to censor pro-ana/mia and mediate with PSAs are but one response that masks not only the complex positions of those involved, but also degree to which body-related issues exist within Western culture, and indeed, across the globe. Furthermore, censorship is a form of discursive colonization in that women's bodies and voices are controlled and women are isolated from community members, alternative ways of knowing, and life-saving coping mechanisms. This discursive colonization is motivated by their pecuniary interests in perpetuating and monopolizing the social problems game of defining appropriate responses to eating disorders, and promoting PSA marketing and pop-up advertising.

My analysis suggests that there need to be more nuanced understandings of, and approaches to, pro-ana/mia and related phenomena. It also signals the importance of supporting open, online discussions around pro-ana/mia and related topics that involve women's self perceptions and practices. The medical model need not be the "only game in town," nor should it be, given its questionable efficacy. Discussions online create the



potential for "cultural resistance and transformation" (Bordo 2003, 218) by allowing alternative discourses and interactions that provide opportunities for women to re-frame analyses of, and responses to, eating "disorders." Pro-ana/mia is *not* a stand-alone problem for individual women - many, if not most women experience "issues" with respect to their bodies even if they do not identify with pro-ana/mia. It is a logical response in a society that valorizes thinness.

Understanding pro ana/mia as a transgressive means to achieve a positive self-identity allows us to move away from problematizing pro-ana/mia to problematizing the construction and promotion of the thin ideal. If reconceptualized in this way, there could be very significant, pro-social changes as a result, both in regards to the socio-cultural, physical, mental and economic health of women and the financial costs associated with eating disorders across the world. "Fat stigma" is now a global phenomenon that causes prejudice and inflicts severe emotional suffering in countries that once embraced more full-body figures, such as Mexico, Paraguay and American Samoa (Bates 2011; also see Brewis et al. 2011). As noted previously, globalization has meant the proliferation of the "ultra-thin" Westernized body type and an increase in eating disorders among young women in developing nations (Latzer, Merrick and Stein 2010; Gahman 2008; Anderson-Fye 2004; Brewis et al. 2003). Borland (2013, December) reports record numbers of people in England with anorexia, figures that have doubled in the last ten years. Although 350 hospital beds in England are occupied every night by individuals with an eating disorder, Bordland (2013) reports that many individuals are turned away from health care because their body mass index is not deemed low enough and private clinics have lengthy wait lines. In 1998, the health care costs have been estimated to be €65 million for

anorexia and €10 million for bulimia annually in Germany (Simon, Schmidt and Pilling, 2005). For the years 1993-1994, an Australian study reported that health care that serviced eating disorders totaled AUD\$22 million (Simon, Schmidt and Pilling 2005). These statistics might seem startling, yet Simon, Schmidt and Pilling (2005) note that the economic burden and health care service use of eating disorder statistics represent an extremely conservative and likely steep underestimation of the true costs. They argue that not only do eating disorders generally go under-detected and under-treated, non-health care costs such as privately paid expenses; loss of productivity; inability to work; premature death; and negative impacts on social functioning and education, have not been included in the estimated economic burdens reported above (Simon, Schmidt and Pilling 2005). The British Columbia Ministry of Health Services (2009-2010, 20-21) estimates that the total annual cost of long-term disability payments to individuals with anorexia is upwards of \$100 million annually. To date there has been little said about how developing nations are going to handle the growing economic and health care burden of the most common eating disorders.

Disseminating a replacement discourse that names global neoliberal marketing strategies as a crime directs attention to the perpetrators and systemic inequalities. It also provides the language required in order to make steps towards holding transnational corporations responsible for marketing consumer identities that are damaging and deadly *and* towards incriminating advertisers who target women in body crisis. Understanding pro-ana/mia as a coping strategy in face of gendered structural violence instigates the potential for critical consciousness that acknowledges the ways in which women's bodies and voices are controlled, and works towards changing cultural ideologies and practices.

Such change would have huge implications for gendered power dynamics and the currently-accepted views around the commoditization of the ultra-thin female physique.

### **Recommendations**

I have identified curriculum development and teacher training as sites where change can be made. Within the critical research, there is general agreement that the physical education curriculum in elementary and secondary schools is focused on how food and physical activity are related to weight, and by extension, body image, and that these are the primary, if not the only, indicators of a healthy body. For example, Evans, Rich and Holroyd (2004) interviewed young women aged 14-18 from the UK with, or recovering from, anorexia. These students felt that their teachers reinforced and endorsed a perception of health that was dependent on eating the "'right foods', 'exercising' and achieving the 'right size'" (133), and they related it to similar media-induced body perfection pressures and messages (also see: Humberstone and Stan 2011). O'Dea and Abraham (2001) surveyed 216 trainee home economic and physical education teachers and found that most teachers advised overweight students to diet to lose weight, advice that was informed by fad diets and a lack of nutrition education. Many teachers held misconceptions about eating disorders, and some of the women self-reported that they currently had eating disorders, and/or used potentially dangerous methods of weight loss, including laxatives and induced vomiting. Obesity discourses and "fat-phobic" discourses (Sykes and Mcphail 2008) have been found to dominate physical and health education resulting in the construction of "anxieties about the body" (Gard and Wright 2001,535), the development of "perfection codes" (Evans, Rich and Holroyd 2004, 123), and the promotion of the 'cult of slenderness' (Evans et. al 2008, 101). These discourses can

unintentionally "glamorise or normalise dieting and disordered eating" (O'Dea 2004, 11), and "bleed...into accounts of eating disorders" (Cliff and Wright 2010, 244). Canadian scholars Larkin and Rice outline five limitations of the Ontario health curriculum that are in keeping with the above literature (2005). The negative consequences of dominant health pedagogy tend to be ignored and critical research such as Kirk's (2006) stresses the need for *critical* analyses and pedagogies that challenge obesity discourses in physical and health education.

Therefore, curriculum development and teacher training are very important sites in which to provide critical analyses, like the ones offered in this thesis, about the dangers of conflating body size with health, personality traits and identity. Included in teacher training should be non-sensationalized and non-judgmental education about online communities such as pro-ana/mia and advertisers. Media awareness in curriculums should provide students with knowledge about free software such as Adblocker ([https://adblockplus.org /en/chrome](https://adblockplus.org/en/chrome)) and other software that provides access to resources that block banners, pop-ups and video ads, on websites such as YouTube. Successful changes to curriculum and teacher development will consequently begin to remove the need for pro-ana/mia online in a way that is not oppressing women.

Public policy initiatives should collaborate with, and support, social activism and corporate campaigns that seek to protect the ability for women to "love their bodies", form positive self-identities and feel self-worth in more than one body size. For example, globaldemocracy.com (2012) posted a video of a digital makeover of a model that alters her body size, enlarges her eyes and stretches her arms, neck and legs until she becomes an unattainable version of female beauty as support for their petition for magazines to be

responsible for putting disclaimers on airbrushed ads (see <http://www.youtube.com/watch?v=17j5QzF3kqE>). ABCnews.com (2013) covered a story where a mother used the video, which now has over 4 million views, to teach her daughter how unrealistic and inaccurate media images of women are. *CNN's* Grey Botelho (2012, July) reported on a story of a fourteen year old girl who organized a petition that asked *Seventeen Magazine* for “one unaltered – real – photo spread a month” arguing that the dissemination of altered images is dangerous because it contributes to the lowering of self-esteem, eating disorders, extreme dieting and depression. *Seventeen Magazine* responded by saying “we vow to...never change girls’ body or face shapes” as part of their ‘Body Peace Treaty’ that they launched in response to the petition (Botelho, 2012 July). *The Dove Campaign for Real Beauty* that was launched in 2004 is exemplary of a TNC taking actions to fight the damages caused by body crisis exploitations. *Dove's* website reports:

The campaign started a global conversation about the need for a wider definition of beauty after the study proved the hypothesis that the definition of beauty had become limiting and unattainable. Among the study’s findings was the statistic that only 2% of women around the world would describe themselves as beautiful. Since 2004, Dove<sup>®</sup> has employed various communications vehicles to challenge beauty stereotypes and invite women to join a discussion about beauty (<http://www.dove.us/social-mission/campaign-for-real-beauty.aspx>).

Metapicture.com (2013, January) reported on how the lingerie brand Aerie that targets young girls told their customers (See Appendix 13):

*DEAR AERIE GIRLS,*

*We think it's time for a change. We think it's time to GET REAL and THINK REAL. We want every girl to feel good about who they are and what they look like, inside and out. This means NO MORE RETOUCHING OUR GIRLS AND NO MORE SUPERMODELS.*

*Why? Because there is no reason to retouch beauty. We think THE REAL YOU IS SEXY.*

*xoxo, aerie* (Capitalizing and italics in original text).

On September 23rd, 2013, Multi-Grain Cheerios in partnership with Big Brothers and Big Sisters of Canada launched a national television campaign that is about "joining the movement of healthy bodies, healthy minds; Where today's young women stop dieting and see the value in balance before deprivation and worth before weight" (<http://www.bigbrothersbigsisters.ca/en/home/newsevents/cheeriossupportsgogirls.aspx>).

It is initiatives like these that will hopefully contribute to changing consciousness around women's bodies, and the need for online spaces like pro-ana/mia.

I intend to continue to engage in ongoing activism by presenting my thesis analyses in public and academic spaces. My doctoral research will look at how educational curriculum and teacher training in Canada can be developed in order to reduce the harms that women experience as a result of the conflation of body size with health and self-worth.

### **Contributions and Future Research**

Substantively, this study contributes to a gap in the scholarly literature by providing a sociological analysis of pro-ana/mia interactions that take place online. There is a need for further research to examine whether, and in what ways, online environments develop

and extend critical consciousness about eating-disorders and solutions to these. Research that exposes, and critically analyzes, additional efforts to silence women is also necessary. This study also makes theoretical contributions by drawing on a variety of critical theories that move beyond dominant medicalized understandings of pro-ana/mia, and that frame responses to pro-ana/mia as the much larger social problem of gendered, structural violence. More politically-engaged research is required to strengthen the alternative theorizing that I have presented in this thesis, and to support social activism that will combat ideologies and practices that oppress women.

## References

- Agras, W. S., Brandt, H. A., Bulik, C. M., Dolan-Sewell, R., Fairburn, C. G., Halmi, K.A., Herzog, D. B., Jimerson, D. C., Kaplan, A. S., Kaye, W. H., Grange, D. L., Lock, J., Mitchell, J. E., Rudorfer, M.V., Street, L. L., Striegel-Moore, R., Vitousek, K. M., Walsh, T., and Wilfley, D. E. (2004). Report of the National Institutes of Health Workshop on Overcoming Barriers to Treatment Research in Anorexia Nervosa, *International Journal of Eating Disorders*, 35(4): 509-521.
- Alcalay, R. (1983). The impact of mass communication campaigns in the health field. *Social Science & Medicine*, 17(2): 87-94.
- Allen, J. T. (2006). 'Pro-ana' as negotiating (dis)order in cyberspace: How women reproduce, restructure, and challenge 'psy' discourse. *Masters Abstracts International*, 1298. Retrieved from <http://search.proquest.com/docview/60354083?accountid=15090>. (prod.academic\_MSTAR\_60354083; 201009191).
- Anderson-Fye, E. P. (2003). Never leave yourself: Ethnopsychology as mediatory of psychological globalization among Belizean schoolgirls. *American Anthropological Association*, 31(1), 59-94.
- Bardone-Cone A., and Cass K. (2007). What does viewing a pro-anorexic website do? An experimental examination of website exposure and moderating effects', *International Journal of Eating Disorders*, 40(6): 537-48.



- Barker, A. J. (2009). The contemporary reality of Canadian imperialism: Settler colonialism and the hybrid colonial state. *The American Indian Quarterly*, 33(2): 325-351.
- Becker, A. E. (2004). Television, disordered eating, and young women in Fiji: Negotiating body image and identity during rapid social change. *Culture, Medicine and Psychiatry*, 28: 533-559, DOI: 10.1007/s11013-004-1067-5
- Bhavsar, V. and Bhugra, D. (2008). Globalization: Mental health and social economic factors. *Global Social Policy*, 8(3): 378-396. DOI : 10.1177/1468018108095634
- Blankertz, L. (1998). The value and practicality of deliberate sampling for heterogeneity: A critical multiplist perspective. *American Journal of Evaluation*, 19(3): 307-324.
- Blumer, H.G. (1969). *Symbolic Interactionism: Perspective and Method*, New Jersey, Prentice-Hall.
- Bodell, L. P., and Keel, P. K. (2010). Current treatment for anorexia nervosa: Efficacy, safety, and adherence. *Psychology Research and Behaviour Management*, 3: 91-108.
- Boero, N., and Pascoe, C. (2012). Pro-anorexia communities and online interaction: Bringing the pro-ana body online. *Body & Society*, 18(2): 27-57.
- Bordo, S. (2003). *Unbearable weight: Feminism, western culture, and the body*. California: University of California Press.

- British Columbia Ministry of Health Services. (2009-2010). Action plan for provincial services for people with eating disorders. Available at <http://www.health.gov.bc.ca/mhd/pdf/ed-services-action-plan-master.pdf>
- Brewis, A. A., Wutich, A., Falletta-Cowden, A. and Rodriguez-Soto, I. (2011). Body norms and fat stigma in global perspective. DOI: 10.1086/659309
- Brotsky, S. and Giles, D. (2007). Inside the "pro-ana" community: A covert online participant observation. *Eating Disorders*, 15(2): 93-109.
- Brumberg, J. J. (2000). *Fasting girls: The history of anorexia nervosa*. United States: Vintage Books.
- Canadian Mental Health Association. (2012). Facts about eating disorders. Available at: [http://www.cmha.ca/mental\\_health/facts-about-eating-disorders/#.U5kdufldX2g](http://www.cmha.ca/mental_health/facts-about-eating-disorders/#.U5kdufldX2g)
- Canto-Mila, N. and Seebach, S. (2011). Ana's friends. friendship in online pro-ana communities. *Sociological Research Online*, 16(1).
- Casilli, A. Pailler, F. and Tubaro, P. (2013). Online networks of eating-disorder websites: Why censoring pro-ana might be a bad idea. *Perspectives in Public Health*, 133(2): 94-95.
- Casilli, A. Tubaro, P. and Araya, P. (2012). Ten years of ana: Lessons from a transdisciplinary body of literature on online pro-eating disorder websites. *Social Science Information*, 51(1): 120-139.
- CBC News. (2013, May 8). Abercrombie & Fitch slammed for 'not-so-cool' remarks, *CBC News, Business*. Retrieved from

<http://www.cbc.ca/news/business/abercrombie-fitch-slammed-for-not-so-cool-remarks-1.1362693>

Center for Addiction and Mental Health. (2014). Eating disorders and addictions clinic.

Available at:

[http://www.camh.ca/en/hospital/care\\_program\\_and\\_services/addiction\\_programs/Pages/guide\\_eatdis\\_addiction\\_clinic.aspx](http://www.camh.ca/en/hospital/care_program_and_services/addiction_programs/Pages/guide_eatdis_addiction_clinic.aspx)

Center for Addiction and Mental Health. (2014). Eating disorders. Available at:

[http://www.camh.ca/en/hospital/health\\_information/a\\_z\\_mental\\_health\\_and\\_addiction\\_information/eating\\_disorders/Pages/eating\\_disorders.aspx](http://www.camh.ca/en/hospital/health_information/a_z_mental_health_and_addiction_information/eating_disorders/Pages/eating_disorders.aspx)

Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. Thousand Oaks, California: Sage Publications.

Chelsey, E. B. Alberts, J. D. Klein, J. D. and Kreipe, R. E. (2003). Pro or con? anorexia nervosa and the internet. *Journal of Adolescent Health, 32*(2): 123-124.

Ching, L. (2000). Save construction and civility making: The Musha incident and aboriginal representations in colonial Taiwan. *Positions, 8*(3): 795-818.

Corrigan, P. (2012). Where is the evidence supporting public service announcements to eliminate mental illness stigma? *Psychiatric Services, 63*(1): 79-82.

Csipke, E. and Horne, O. (2007). Pro-eating disorder websites: users' opinions. *European Eating Disorders Review, 15*: 196-207.

Custers, K. and Van den Bulk, J. (2009). Viewership of pro-anorexia websites in seventh, ninth and eleventh graders. *European Eating Disorders Review, 17*(3): 214-219.

- Davidson, D., and Langan, D. (2006). The breastfeeding incident: Teaching and learning through transgression. *Studies in Higher Education*. 31(4): 439-452.
- Denzin, N. K. (1989). *The research act: A theoretical introduction to sociological methods*. Chicago: Aldine Publishing Company
- Dickson-Swift, V. James, E. Kippen, S. and Liamputtong, P. (2009). Researching sensitive topics: qualitative research as emotion work. *Qualitative Research*, 9 (1): 61-79. doi: 10.1177/146879410809803.
- Efron, S. (October, 1997). Eating disorders go global. *Los Angeles Times, Column One*. Retrieved from: <http://articles.latimes.com/1997/oct/18/news/mn-44049>
- Eysenbach, G. and Till, J. E. (2001). Ethical issues in qualitative research on internet communities. *Information in Practice*, 323: 1103-1105.
- Ezeonu, I. and Koku, E. (2008). Crimes of globalization: The feminization of HIV pandemic in Sub-Saharan Africa. *The Global South*, 2(2): 112-129.
- Farmer, P. (2004). An anthropology of structural violence. *Current Anthropology*, 45(3): 305-325.
- Ferreday, D. (2003). Unspeakable bodies: Erasure, embodiment and the pro-ana community. *International Journal of Cultural Studies*, 6(3): 277-295.
- Ferrell, J. (2009). Kill method: A provocation. *Journal of Theoretical and Philosophical Criminology*, 1(1): 1-22.
- Ferrell, J. (1999). Cultural Criminology. *Annual Review of Sociology*, 25: 395-418.

- Ferrell, J. Hayward, K. and Young, J. (2008). *Cultural Criminology: An Invitation*. London: Sage.
- Ferrell, J. Hayward, K. Morrison, W. and Presdee, M. (2004). *Cultural Criminology Unleashed*. London: Glasshouse Press.
- Ferrell, J. and Whiteacre, K (2011). Interview with Jeff Ferrell. *MetalTheft.Net Interview Series*, 1(3). Retrieved from: <http://www.metaltheft.net/jeff-ferrell-interview.html>
- Fox, N. Ward, K. and O'Rourke, A. (2005). Pro-anorexia, weight-loss drugs and the internet: An 'anti-recovery' explanatory model of anorexia. *Sociology of Health and Illness*, 27(7): 944-971.
- Friedrichs, D. O. and Friedrichs, J. (2002). The World Bank and crimes of globalization: A case study. *Social Justice*, 29(1-2): 13-36. URL: <http://www.jstor.org/stable/29768116>.
- Gahman, L. J. (2008). Identity, body-image, and the global epidemiology of eating disorders. *Thesis*: 1-82.
- Gailey, J. (2009). "Starving Is the Most Fun a Girl Can Have": The Pro-Ana Subculture as Edgework. *Critical Criminology*, 17(2): 93-108.
- Galtung, J. (1990). Cultural Violence. *Journal of Peace Research*, 27(3): 291-305.
- Galtung, J. and Hoivik, T. (1971). Structural and direct violence. *Journal of Peace Research*, 8(1): 73-76.
- Gavin, J. Rodham, K. and Poyer, H. (2008). The presentation of "pro-anorexia" in online group interactions. *Qualitative Health Research*, 18(3): 325-333.

- Goldstein, D. M. (2005). Flexible justice: Neoliberal violence and 'self-help' security in Bolivia. *Critique of Anthropology*, 25(4): 389-111.
- Grunwald, M. Wesemann, D. and Rall, L. (2008). Pro-anorexia websites: An underestimated and uncharted danger! *Child and Adolescent Mental Health*, 13( 2): 96–98.
- Haas, S. Irr, M. Jennings, N. and Wagner, L. (2011). Communicating thin: A grounded model of online negative enabling support groups in the pro-anorexia movement. *New Media & Society*, 13(1): 40-57.
- Hammersley, M. and Treseder, P. (2007). Identity as an analytic problem: who's who in 'pro-ana' websites? *Qualitative Research*, 2: 283-300.
- Harshbarger, J. Ahlers-Schmidt, C. Mayans, L. Mayans, D. and Hawkins, J. (2009). Pro-anorexia websites: What clinicians should know. *International Journal of Eating Disorders*, 42(4): 367–370.
- Hawisher, G. E. and Selfe, C. L. (2000). *Global literacies and the World-Wide Web*. London and New York: Routledge
- Hayward, K. (2004). *City limits: Crime, consumer culture and the urban experience*. London: The GlassHouse Press.
- Head, J. (August, 2007). BBC News .Seeking 'thinspiration'. Retrieved from: [http://news.bbc.co.uk/2/hi/uk\\_news/magazine/6935768.stm](http://news.bbc.co.uk/2/hi/uk_news/magazine/6935768.stm)
- Hesse-Biber, S. Leavy, P. Quinn, C. E. and Zoino, J. (2006). The mass marketing of disordered eating and eating disorders: The social psychology of women, thinness

and culture. *Women's Studies International Forum*, 29, 208-224.

Doi:10.1016/j.wsif.2006.03.007

Hines, C. (2005). *Virtual Methods: Issues in Social Research on the Internet*. New York, New York: Oxford International Publishers Ltd.

Hine, C. (2011). Towards ethnography of television on the internet: A mobile strategy for exploring mundane interpretive activities. *Media, Culture & Society* 33(4): 567-582.

Henry, S. and Milovanovic, D. (1999). *Constitutive criminology at work: Applications to crime and justice*. Albany: State University of New York Press.

Hodkinson, A. (2013). Colonization, disability, and the intranet: The ethnic cleansing of Space *Qualitative Inquiry*, 19(6): 461-469.

Howard-Hassman, R. E. (2010). *Can globalization promote human rights?* Pennsylvania: Pennsylvania University State Press.

Instagram. (2012). Instagram's New Guidelines Against Self-Harm Images & Accounts.

Available at: <http://blog.instagram.com/post/21454597658/instagrams-new-guidelines-against-self-harm-images>

Jett, S. LaPorte, D. J. and Wanchisn, J. (2010). Impact of exposure to pro-eating disorder websites on eating behavior in college women. *European Eating Disorders*, 18(5): 410-416.

- Jung, W. and Villegas, J. (2011). The effects of message framing, involvement, and nicotine dependence on anti-smoking public service announcements. *Health Marketing Quarterly*, 28(3): 219-231.
- Juarascio, A. Shoaib, A. and Timko, A. (2010). Pro-eating disorder communities on social networking sites: A content analysis. *Eating Disorders: The Journal of Treatment & Prevention*, 18(5): 393-407.
- Kelly, M. D. Pomerantz, S. Currie, D. (2005). Skater girlhood and emphasized femininity: 'You can't land an Ollie properly in heels'. *Gender and Education*, 17(3), 129-148. DOI: 10.1080/09540250500145163
- Kiesinger, C. (1998). From interview to story: Writing Abbie's life. *Qualitative Inquiry*, 4(1), 71-95. doi: 10.1177/107780049800400105
- Killoran, K. B. (2012). Under constriction: Colonization and synthetic institutionalization of Web space. *Computers and Composition*, 19: 19-37.
- Kindynis, T. (2014). Ripping up the map. *British Journal of Criminology*, 54: 222-243.
- Klimes-Dougan, B. Klingbeil, D. and Meller, S. (2013). The impact of universal suicide-prevention programs on the help-seeking attitudes and behaviours of youths. *The Journal of Crisis Intervention and Suicide Prevention*, 34(2): 82-97.
- Latzer, Y. Merrick, J. and Stein, D. (2010). Understanding eating disorders: Integrating culture, psychology and biology. Nova Science Publishers, Inc: New York.
- Lelwica, M. Hoglund, E. and McNallie, J. (2009). Spreading the religion of thinness from California to Calcutta: A critical feminist postcolonial analysis. *The Journal of*



*Feminist Studies in Religion*, 25(1), 19-41. URL:

<http://www.jstor.org/stable/10.2979/FSR.2009.25.1.19>

Lienemann, B. Siegel J. and Crano, W. (2013). Persuading people with depression to seek help: Respect the boomerang. *Health Communications* 28: 718-728.

Loseke, D. (2003). *Thinking about social problems 2nd edition*. Hawthorne, New York: Aldine De Gruyter.

Lougheed, D. R. (2006). No Skinny Chicks: On the deliberative capability of pro-anorexics. *Thesis: The University of British Columbia: 1-51*.

Lyons, E. Mehl, M. and Pennebaker, J. (2006). Pro-anorexics and recovering anorexics differ in their linguistic internet self-presentation. *Journal of Psychosomatic Research*, 60(3): 253–6.

Makino, M. Tsuboi, K. and Dennerstein, L. (2004). Prevalence of eating disorders: A comparison of Western and non-Western countries. *Medscape General Medicine*, 6(3). Retrieved from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1435625/>

Malson, H. and Burns, M. (2009). *Critical feminist approaches to eating disorders*. East Sussex: Routledge.

Martin, F. and Manalansan, IV. (2005). Race, violence, and neoliberal spatial politics in the global city. *Social Text*, 23(3-4): 141-155.

McColl, G. (2013, February). Anorexia underworld. Available at:

<http://www.theage.com.au/national/anorexia-underworld-20130222-2ex3k.html>

Mohanty, C. (1988). Under Western eyes: Feminist scholarship and colonial discourses. *Feminist Review*, 30: 61-88.

Moodie, C. (2011, November 3). "Britney Spears pictured backstage at Rock Of Ages with Shane Ward". *Daily Mirror* (UK). Retrieved from <http://www.mirror.co.uk/3am/celebrity-news/britney-spears-pictured-backstage-at-rock-89309>

National Eating Disorder Information Center. (NEDIC). Eating disorders & disordered eating Retrieved from: <http://www.nedic.ca/knowthefacts/statisticsArchive.shtml>

National Eating Disorder Information Center. (2013). Understanding statistics on eating disorders. Available at: <http://nedic.ca/know-facts/pro-eating-disorder-websites>

Nayak, M. and Suchland, J. (2006). Gender violence and hegemonic projects. *International Feminist Journal of Politics*, 8(4): 467-485.

Nemani, P. (2011). Globalization versus policy: A case study on the failure of the Barbie doll in the Indian Market. *Asian-Pacific Law & Policy Journal*, 13(1): 96-128.

Neuman, L. (2007). *Basics of Social Research: Qualitative and Quantitative Approaches*. Boston: Pearson Education, Inc.

Olsen, H. (2012). Pinterest bans thinspiration and pro-ana content...But that doesn't mean that it's going away. Available at: <http://www.blisstree.com/2012/03/27/beauty-shopping/pinterest-terms-of-service-bans-thinspiration-787/>

Peng, T. (2008) Out of the Shadows, Newsweek, Available at: <http://www.newsweek.com/pro-anorexia-groups-spread-facebook-85129>

Pollack, D. (2003). Pro-eating disorder websites: What should be the feminist response? *Feminism and Psychology*, 13: 246–251.

Rance, N. M. Clarke, V. and Moller, N.P. (2014). "If I see somebody...I'll immediately scope them out": Anorexia nervosa clients' perceptions of their therapists body. *Eating Disorders*, 22: 111-120.

Rager, K. B. (2005). Self-Care and the qualitative researcher: When collecting data can break your heart. *Educational Researcher*, 34(4): 23-27. URL: <http://www.jstor.org/stable/3699943>.

Reddock, R. (2013). Bling, brands and hypersexuality: Globalization and cultural constructions of Caribbean masculinities and femininities. In P. Sing & R. Izarali (1<sup>st</sup>). *The contemporary Caribbean issues and challenges* (180-204). India: Shipra Publications.

Riley, S. Rodham, K. and Gavin, J. (2009). Doing weight: Pro-ana and recovery identities in cyberspace. *Journal of Community & Applied Social Psychology*, 19(5): 348-359.

Rodgers, R. Skowron, S. and Chabrol H. (2012). Disordered eating and group membership among members of a pro-anorexic online community. *European Eating Disorders Review*, 20(1): 9-12.

Sick Kids Hospital. ( 2014). Eating disorders program. Available at: <http://www.sickkids.ca/Psychiatry/What-we-do/Clinical-care/Eating-disorders-program/>

- Simon, J. Schmidt, U. and Pilling, S. (2005). The health service use and cost of eating disorders. *Psychological Medicine*, 35(11): 1543-1551.
- Shannon, K. (2008). The social, structural, and environmental production of HIV transmission risk among women in survival sex work: evidence from the Maka project partnership. *Thesis*, 1-127.
- Sharpe, H. Musiat, P. Knapton, O. and Schmidt, U. (2011). Pro-eating disorder websites: Facts, fictions and fixes. *Journal of Public Mental Health*, 10(1): 34-44.
- Shade, L. (2003). Weborexics: The ethical issues surrounding pro-ana websites. *ACM SIGCAS Computers and Society*, 33(4).
- Short, D. (2010). Cultural genocide and indigenous peoples: A sociological approach. *The International Journal of Human Rights*, 14(6): 831-846.
- Skinny celebrities drive one in five 11-year-olds to diet. (2009). *Daily Telegraph*. Retrieved from: [http://www.telegraph.co.uk/health/children\\_shealth/5193807/Skinny-celebrities-drive-one-in-five-11-year-olds-to-diet.html](http://www.telegraph.co.uk/health/children_shealth/5193807/Skinny-celebrities-drive-one-in-five-11-year-olds-to-diet.html). Retrieved 2009-04-29
- Snyder, A. and Cherry, L. (2005). Pro-ana websites: Self-identification and self-destruction in a community, *Southern Sociology Society*, Retrieved from <http://search.proquest.com/docview/61783877?accountid=1509>
- Spitzer, B. A. Henderson, K. A. and Zivian, M. T. (1999). Gender differences in population versus media body sizes: A comparison over four decades. *Sex Roles*, 40, 545–565.

- Starr, T. B. and Kreipe, R. E. (2014). Anorexia nervosa and bulimia nervosa: Brains, bones and breeding. *Current Psychiatry Reports*, 16(5): 441.
- Statistics Canada (2012). Health Analysis Division. Health state descriptions for Canadians: Mental Illnesses. Retrieved from: <http://www.statcan.gc.ca/pub/82-619-m/82-619-m2012004-eng.pdf>
- Spector and Kitsuse (1987). *Constructing Social Problems*. Hawthorne, New York: Aldine De Gruyter.
- Strife, S. and Rickard, K. (2011). The Conceptualization of Anorexia: The Pro-Ana Perspective. *Affilia: Journal Of Women & Social Work*, 26(2): 213-217.
- Stubbs, J. and Cunnen, C. Cultural Criminology and Engagement with Race, Gender and Post-colonial Identities. Ferrell, Jeff, Keith Hayward & Jock Young (2008). *Cultural Criminology: An Invitation* (97-118) London: Sage.
- Suokas, J. T. Suvisaari, J. M. Grainger M. Raevuori, A. Gissler, M. and Haukka, J. (2014). *General Hospital Psychiatry*, 36(3): 355-357.
- The Dr. Oz Show. (2012). Women of the pro-ana movement. Available at: <http://www.doctoroz.com/videos/women-pro-ana-movement-pt-1>
- Tiller, J. M. Gaynor, S. Schmidt, U. Troop, N. Power, M. and Treasure, J. L. (1997). Social support in patients with anorexia nervosa and bulimia nervosa. *International Journal of Eating Disorders*, 21(1): 31-38.

Tumblr. (2012). Follow-up: Tumblr's New Policy Against Pro-Self-Harm Blogs

Available at: <http://staff.tumblr.com/post/18563255291/follow-up-tumblrs-new-policy-against-pro-self-harm>

Van Harte, E. (2009). Voices of anorexia uncovered: The healing journey unveiled.

*Thesis*: 1-128

Wender, J. Phenomenology, Cultural Criminology and the Return to Astonishment.

Ferrell, Jeff, Keith Hayward & Jock Young (2008). Cultural Criminology: An Invitation (47-63)

London: Sage.

Wilson, J. Peebles, R. Hardy, K. and Litt, I. (2006). 'Surfing for thinness: a pilot study of pro-eating disorder web site usage in adolescents with eating disorders',

*Pediatrics*, 118(6): 1635-43.

Wood, J. (2008). Critical feminist theories giving voice and visibility to women's

experiences in interpersonal communication. In *Engaging Theories in*

*Interpersonal Communication Multiple Perspectives*, edited by Baxter Leslie, and

Braithwaite Dawn. California: Sage Publications, Inc.