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Doctor Who, Ma'am: YouTube Reactions to the 2017 Reveal of the New Doctor

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Abstract

In 2017, BBC released a video revealing that Jodie Whittaker would be the actor to play the thirteenth Doctor in the 2018 season of *Doctor Who* (1963–), the popular BBC television series. The “reveal” that a woman had been cast in the role of the Doctor prompted an overwhelming backlash and fierce online discussion. The same period saw a number of popular films and series cast women as leads. The intense discussion that the reveal generated indicates that televisual representations of gender continue to matter greatly to viewers. The question is how? Fan comments posted below the reveal video on YouTube suggest that viewing publics are less engaged in a controversy over feminism than bewildered by gender categories becoming unstable. Notably, once the series aired, discussion about the Doctor’s gender died down. Seeing the Doctor addressed as “Ma’am,” it turned out, was not what upset viewers.

Keywords

Doctor Who, reveal, YouTube comments, audience analysis, gender, Social Justice Warriors, transphobia, cultural citizenship

On July 16, 2017, BBC revealed the next actor who would play the eponymous protagonist in its long-running science fiction television series *Doctor Who*. The character of the Doctor is a humanoid alien who travels through time and space. In its initial run (1963–1989), the show featured eight male Doctors; in its second run (2005–), four more men were cast. Then, in 2017, for the first time in the history of this landmark series, it was announced that the Doctor was to be played by a woman. This soon became the focus of considerable debate. Since 2005, the revelation of each “new

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Doctor” had been a “paratextual marketing event,” involving widespread speculation in popular culture (Hills 2015, 319) and tantalizing reveal videos, released to attract attention and stoke anticipation among the sizeable *Doctor Who* fan base. Yet, when the BBC revealed the thirteenth Doctor’s gender in a YouTube video, the reaction was overwhelmingly negative. Apparently, a majority of *Doctor Who* fans and viewers (though not all) felt strongly about the stability of gender categories, anchored in traditional fictional characters such as the Doctor. The reveal clearly came as a shock to many viewers. Interestingly, however, reactions soon mellowed with the airing of the first episode to feature the new Doctor in 2018. In exploring these shifting responses, this article considers how the casting of the Doctor as a woman accentuated and brought underlying attitudes toward gender to the fore. How, we ask, was the reveal video interpreted and made meaningful in the comments posted on YouTube by a variety of fans and viewers?

In the first part of this article, we introduce the series and survey accounts of its gender economy in television scholarship. In the second part, we explain the qualitative methodology that we used to map and interpret the massive online response to the 2017 reveal. Then, using a thematic discursive analysis of selected comments, we show how the conservatism of viewers and fans, as expressed in reactions to the reveal video, is not necessarily about upholding patriarchal masculinity. Instead, it indicates how publics value gender distinctions in their own right.

Gender and *Doctor Who*

The longevity and centrality of *Doctor Who* in U.K. broadcasting mark the series as a televisual classic. It not only helped establish television as a cultural presence and narrative form (Newcomb 1974), but constitutes a prime instance of how some series can enjoy cult status and mainstream success simultaneously. Indeed, the series is the focus of both a subcultural, “geeky,” and a much broader mainstream audience (Hills 2010a). For the most part, different audiences coexist happily alongside one another. *Doctor Who* is not the preserve of any one defined group. All of the viewers who reacted to the 2017 reveal video were invested in the adventures of the Doctor.

The series is concerned with a rebellious Time Lord who has fled Gallifrey, their¹ species’ home planet, in the TARDIS, a space and time machine. A curious being, the Doctor finds themselves in the midst of adventure after adventure. These usually begin with the Doctor investigating some intriguing event or phenomenon, before ending up having to protect innocent beings from evil forces. The Doctor represents a “different” kind of hero in that they strive to resolve conflict, not through fighting, but through ingenuity and wit. Their only weapon is a “sonic screwdriver”: a handy versatile tool that does not kill, but keeps opponents at bay and opens locked doors. The Doctor rarely travels alone, bringing one or more companion(s)—usually human and often female—on their adventures.

The show first aired in 1963 and ran until 1989. When the show was revived in 2005, it was often referred to as “new Who” or “nuWho.” This second run has continued up to the present. As the longest running science fiction show ever, and a flagship

BBC production, it is a televisual phenomenon. Since the 2005 reboot, it has sparked wide scholarly interest (Booth 2014; D. Butler 2007; Chapman 2013; Hills 2010b; Nicol 2018; Orthia 2010), not least in its representation of gender. Lorna Jowett (2018) and Piers D. Britton (2011), for example, point out that although for the most part the Doctor adheres to conventional patriarchal behavior, they occasionally queer expectations of masculinity. The Doctor is portrayed as a wise, all-knowing, authoritative figure. An age-old alien (although this is not especially visible on the outside) who regularly saves the universe, the Doctor is positioned as “naturally superior” (Britton 2011, chapter IV). The Doctor also clearly enjoys class privilege (Jowett 2017). Indeed, John Cordone and Michelle Cordone (2010, 8) liken him to an aristocratic lord, whose concern is to “maintain order and uphold the law.” This privilege is accompanied by a sense of entitlement: “in his character,” Cordone and Cordone (2010, 11) espy “a belief that he is the best.”

In line with the Doctor’s seeming nobility, Britton argues that the character fits another “conventional model of masculinity in screen fiction”: that of the lone “narcissistic hero,” unable to engage in deep emotional relationships (Britton 2011, chapter IV). Although the series began with the Doctor traveling with their granddaughter, its premise also emphasizes how they have turned their back on their own species. Moreover, once the Doctor parts ways with their granddaughter, almost no links with their family remain. The show continually reinforces the Doctor’s “loner” persona by “stressing his difference, his alienness, his remoteness even from the ‘normal’ members of his own super-race, the Gallifreyan Time Lords” (Britton 2011, chapter IV). Indeed, the Doctor may always travel with companions, but whenever a companionship ends, the emphasis is on the Doctor’s role as an outcast hero, abandoned to themselves once again (Britton 2011, chapter IV). Despite the emphasis on the Doctor’s aversion to fighting, they are hardly a pacifist. The Doctor does not carry a weapon, true, but from time to time they do engage in eminently masculine types of violence, such as fisticuffs (Britton 2011, chapter XX). As Jowett (2017) observes, the Doctor prefers to let others fight on their behalf and largely avoids participating in violence themselves, which only underscores their class position.

In *Doctor Who*, conventional masculinity is destabilized by the character’s “spectacular potential” (Britton 2011, chapter IV). From the first series onward, and especially with the transition to color television in the late 1960s, the Doctor’s dress “was a far cry from the neutrality and conformity which characterized sartorial stereotypes of the ‘real man’ during the same period, both in the world of fashion and in screen fiction set in the contemporary world” (Britton 2011, chapter IV). The various Doctors’ elaborate costumes, which have included waistcoats and colorful knee-length overcoats, clearly deviate from the narcissistic hero, who would normally be associated with minimalistic (un)dress (Britton 2011, chapter IV). As Britton notes, it is precisely because of this tension between masculinity and campiness, combined with the Doctor’s often agile gait, that the Doctor has become a nationally iconic (male) figure (Britton 2011, chapter IV).

In the first season of the rebooted series in 2005, the Doctor wears a V-neck shirt and leather jacket. Played by Christopher Eccleston, this first “new” Doctor is briefly

a more conventional “butch” man (Britton 2011, chapter IV). Although the fitted suit worn by David Tennant, Eccleston’s successor in the role, does not return fully to the quirky theatricality of earlier costumes, its smartness links reassuringly with the Doctors that built the tradition (Britton 2011, chapter IV). For Britton, the casting of conventionally handsome young men represented a move away from the Doctor’s feminine and queer potential toward the more traditional spectacle of the romantic hero (Britton 2011, chapter IV). This (hetero-)sexualized character did not feature in the classic series. In the new series, however, the Doctor has still not become the prototypical male of global media entertainment. Significantly, their sense of humor undercuts established masculinity and lordly authority in the manner typical of upper-class British men’s self-deprecation (Jowett 2017, chapter 1).

While “(n)on-conformity, personal liberty and individualism . . . are valorised in the Doctor,” writes Jowett (2014, 79), “. . . the companions tend to get more ‘normative’ treatment.” By and large, the companions have been played by women. They serve the narrative function of prompting the Doctor to explain what is going on, while visually offering “eye candy”—“something for the dads” in James Chapman’s (2013, 192) estimation. That leaves limited scope for character development (Wallace 2010, 104). Indeed, Danny Nicol (2018, 65) notes that “in the classic series, only very rarely was a companion allowed to play the decisive role in resolving an adventure by using her intelligence and resourcefulness.” Noah McLaughlin (2010, 128), however, argues that the reboot occasioned more positive female roles. He links this to a shift in focus toward emotional character development. Now that they are more fully articulated as characters, he argues, the new companions exceed the restrictive functions of a mere plot device (McLaughlin 2010, 122). As such, they can be seen as “tough women,” who curb the Doctor’s “self-destructive tendencies” (Nicol 2018, 123).

Where McLaughlin sees progress in the evolution of the companion, others have not been so optimistic. For Britton (2011, chapter V), the increased focus on characters’ emotional lives actually means that gender asymmetries became *more* prominent. The new Who companions, Jowett suggests, are defined by romantic and sexual tension, often in relationships situated outside of the TARDIS: “While the Doctor is lonely or at least solitary, the female companions are defined by relationships” (Jowett 2014, 81). These relationships “situate the female companions within traditionally feminine networks of family, the domestic and relationship building” (Jowett 2014, 81). It is a pity that the companions remain defined by restricted gender patterns, for the role of the companion “forms the exclusive space that recurring female characters are expected to occupy,” whereas recurring male characters take up more varied roles (Aronoff 2017, 20). A couple of seasons into the new series, however, stronger recurring female characters began to appear. These characters, among them Clara Oswald, who set off on her own adventures, often shaped the narrative decisively, moving beyond the traditional companion role (Aronoff 2017, 20). All in all, despite some progressive elements and developments, the broad scholarly consensus is that *Doctor Who* represents gender in fairly conservative ways.

The series’ gender dynamics are also a prominent topic among fans: consider the moment, for instance, that the Master (the Doctor’s Time Lord adversary) regenerates

as a woman, Missy in season 8 (2014). Fans were not amused. Indeed, as Jowett (2017) has shown, “Missygate” provoked fan discussion about the possibility of the Doctor regenerating as a woman. According to most of the fan blogs examined in Jowett’s study, this was not deemed a good idea. Views ranged “from the ‘old-school fanboy’ type,” who wanted “to keep the toys strictly for the boys” to “slightly more insightful” perspectives. Jowett (2017, chapter 6) concludes, however, that by and large, even comments presenting themselves as “open-minded” show a naïveté toward underlying issues of unequal gender representation.

Leora Hadas (2013) analyzed online discussion on the LiveJournal community *doctorwho*, a community divided as to what constitutes a “true” fan. Some fans are negatively evaluated as “shippers” (only interested in romance), others are seen as “anoraks” (romance haters; Hadas 2013, 341). This configuration is also highly gendered: “the undesired position,” writes Hadas (2013, 336–37), “is that of the ‘rabid’ shipper . . . the (female) fan whose interest in the show is dependent on and limited to a single romantic pairing portrayed therein.” Others too have noted the inferior position accorded to feminine fandom, which only confirms our sense that *Doctor Who* is an unlikely space for feminist innovation (Cherry 2013; Williams 2011). Although science fiction has long featured progressive representations of gender and even transsexuality (Melzer 2010), *Doctor Who* does not belong to this tradition. Given the scholarly critiques of gender representation in the series, masculinist storylines of earlier seasons, and gendered fan responses, the introduction of a female Doctor might indeed feel like a shift of epic proportions. The following analysis explores how viewers responded to Jodie Whittaker’s casting in the role of the Doctor in 2017.

Reactions to the Reveal

As BBC posted the “reveal” video on YouTube and Facebook, these platforms were our first port of call to gauge reactions. According to the figures visible on the sites themselves, at the time of data collection in Spring 2018 the BBC reveal video on YouTube had been viewed 3,214,641 times and prompted 31,691 written comments, whereas the video posted on Facebook had 11,000,000 views and prompted 44,900 written comments. In addition to commenting on the BBC video, fans posted videos on YouTube in which they commented on the casting decision. A YouTube search conducted in Spring 2018 netted over fifty thousand videos tagged “Thirteenth Doctor” and over four million comments tagged “Female Doctor Who.”

We chose to focus on YouTube comments as YouTube offered a larger volume of spontaneously offered material than Facebook which was also easier to retrieve as it was not dispersed over unrelated posts, groups, and pages. The downside in using YouTube is that commenters remain anonymous as screen names are used. YouTube’s user comments, in addition, have a bad reputation (Schultes et al. 2013, 660). Indeed, *The New York Times* typifies them as “juvenile,” “aggressive,” “misspelled,” and “sexist” (Schultes et al. 2013, 660). Possibly, responses to the thirteenth Doctor’s gender on YouTube are more sexist and negative than those among fans more generally. A random check of open-group Facebook comments, however, suggests that the themes

that come up in YouTube comments and their tone correspond to those on Facebook (see <https://www.facebook.com/DoctorWho/>). Generally, both on YouTube and Facebook, the overwhelming majority of the comments posted beneath the reveal video and in spontaneous comments and videos were negative in tone.

The core material for this study was found by searching YouTube for videos by typing “female Doctor Who.” We selected the three first videos with lengthy comment sections to appear that respectively put forward a critical, positive, and (relatively) neutral undecided perspective on the Doctor’s casting as a woman.² These three fan videos each have high viewing rates (more than thirty thousand views), generating around a thousand or more reactions per video. Most of the commenters are engaged in focused discussions about the casting decision. The videos are titled: “The Female Doctor: Why People are ACTUALLY Pissed,” posted by Internalized Misogyny (critical); “THE 13TH DOCTOR REACTION!! A Female Doctor Who” by Tessa Netting (positive); and “A female Doctor Who . . . a pandering risk or righteous move?” by Mundanematt (undecided).³ In this article, we will not focus on the reaction videos themselves, but on the comments posed below them to chart how the BBC’s surprise move was broadly received.

YouTube comments are important because the BBC moderates comments on its official *Doctor Who* YouTube page. While this does not seem to have affected the overly negative tone in the comment section below BBC’s initial video, we share the concerns about censorship put forward by a number of commenters. (YouTube user The Rodian, for example, responded to BBC moderation policy by writing “You mean you censored dissenting opinions.”) Our grounded theory analysis therefore comprises the 4,230 responses to the three fan-made YouTube videos as well as the 31,691 responses to the official BBC reveal video (Corbin and Strauss 1990; Glaser and Strauss 1967).⁴

Following Juliet M. Corbin and Anselm Strauss (1990), the material was coded in three rounds, in which we undertook open, axial, and selective coding respectively. The open codes consist of the sentiments and literal expressions presented in the comments. This concurs with the coding process proposed by Margaret Wetherell and Jonathan Potter (1988) for interpretative repertoire analysis. In the phase of axial coding, we grouped these sentiments and expressions into thematic clusters. We named these central themes: praise, patience, love, conspiracy, hostility, treason, and trauma. Then, in undertaking selective coding, we theorized these clusters as a particular affective practice (Wetherell 2012, 22–24) that assigns gender to binary categories. Our key words for this affective practice are *patience*, *emancipation*, and *gender anxiety*.

Before we go on, it is worth setting out our first impression of the positions taken in the comments. A clear majority of commenters who disapproved of the casting perceived it as a means of aggressively pushing a progressive political agenda. “This feminist takeover is a joke, everything they touch, they kill” (Mark Evans). It was understood as a means of achieving diversity quotas—with which these commentators disagreed (all misspellings in original texts⁵):

The change wasnt made for diversity sake, it was mad to replace yet another “white male character” with a “minority” (which to feminism, women are classified as minorities . . .

somehow). This whole thing is to take men and specifically white men, and replace them as much as they can. Which is the main reason I hate the decision. (Shirow)

Yup. The first commandment of Feminism is “Vagina gud, penis bahahahaad.” If wonder woman ever did anything that made men not look like inferior subhumans, Feminists would go amok. (My Ingroup Idol Did Nothing Wrong)

By no means were all the negative comments directly linked to the BBC’s supposed feminist “agenda,” the use of terms like “feminazi” and “SJW” (Social Justice Warrior) suggested that the casting was seen as posing an extremist threat: “Those followers of feminism that act to suppress and silence those of the male gender, classic fascist tactics, are perfectly reasonably compared to Nazis, hence the portmanteau feminazi” (Ryan Gunn). The logic here is twofold. First, it is imagined that BBC has been taken over by a left-wing elite minority, which makes this an anti-elitist, populist argument. Second, it is simultaneously suggested that this minority, despite its progressives posturing, is of an extreme, right-wing variety.

Many commenters used populist logic, directly attacking the BBC as “the enemy of the British people” (Mike Boosh).

They’re injecting their ideology into a show just because they feel it will make them more morally better for it, not for the sake of entertainment, but for the sake of promotion of their ideology. This is what is called propaganda. (RedMatter)

Another line of thought, which runs throughout the comment sections, attributed extreme left-wing motivations to writers of the previous seasons, and especially to former showrunner Steven Moffat (2010–2017; “Moffat killed the show,” wrote Thewolv0667). The last couple of seasons were “proof” of bad writing, driven by “SJW motives.” The casting of a female Doctor, though by a new showrunner, was a final blow to the show’s perceived entertainment value. The casting of Jodie Whittaker came to stand for feminism as such and the perceived ways in which it disturbs what Sara Ahmed calls “the promise of happiness, or the social pressure to maintain signs of getting along” (Ahmed 2010, 584). In this context, women generally—and feminists specifically—are typecast as “killjoys.”

A small number of commenters (most of them responding to Tessa Netting’s positive discussion video) were optimistic about the gender change. Their posts characterized the move as bringing something “fresh” to the series. A female Doctor, some suggested, signaled possibilities for new storylines in an exceptionally long-running series: “Honestly I am so excited to see all the areas of the show it can open up. It gives them so much they can explore” (Heavenly Imaginings).

Whereas those opposed to the casting felt that it spoiled their enjoyment of the series, its proponents (who often identified as women) were deeply moved by the prospect of female representation:

Well, to me the gender does matter. I didn’t think it would, I was prepared to accept the doctor no matter male or female, but then Jodie Whittaker took her hood off and I realized

that tears were running down my face. Boys had 54 years of the doctor (not to mention the majority of other main characters/heroes). It's time the other half of the population gets their share. (Dreamfaller63)

Most positive reactions were not so excited or explicit as Dreamfaller's response here. Nevertheless, another user wrote that they were "so excited that The Doctor is a female I can't wait to see what adventures she will go on" (Turquoise 92). Still others noted that Whittaker was well-chosen for the role.

We visualize our coding in Figure 1. Overall, the divisions among fan reactions was clear, with far more negative than positive reactions. Reactions differed along the lines we have sketched out, indicating both a backlash against presumed political correctness and feminist relief at the representation of authoritative female characters. Open coding grasps the intricate structures of meaning-making at work among fans with regard to the Doctor. Eight axial codes stand out: love, praise, patience, grief, conspiracy, hostility, treason, and trauma.

The eight themes roughly corresponded to three positions: positive, negative, and "withholding judgment." The theme of love, which transcended all other themes, could be found across declarations of dedication to the series, comments in favor of the new Doctor, and posts criticizing the casting. Expressions of love positioned commenters within a common fandom, despite their very different assessments of what a female Doctor might mean for the series. Personal dedication to this fandom added to discussions' emotional and affective tone. In what follows, we discuss the three selective codes through which we organized the eight themes discernible in the flood of comments: patience, feminist commitment to women's emancipation, and gender anxiety. In exploring these topics, we mean to show how gender matters in televisual representation.

Patience!

What we are calling "withholding judgment" comments called on viewers who resist the rush to criticize the casting, for respect for the Doctor Who fan community. These comments solicited patience by appealing to others' loyalty to, and trust in, the series' legacy.

So, there's some reasons, but time will tell. With reservations, will give it a chance, hoping it will prove us wrong. I've contemplated, same as you, but I think we owe that to The Doctor ;). (CS)

Why wouldn't you [watch the new season]? Because it's a woman? You have no idea how she's going to be as the Doctor and the fact that you don't even want to give her a chance because of her gender means you're not a real fan of the series anyways. (LonerStoner)

The argument put forward here is that ideologically gender should not be the issue: "It shouldn't matter whether the Doctor is a man, women, black, white, ginger, or blonde"

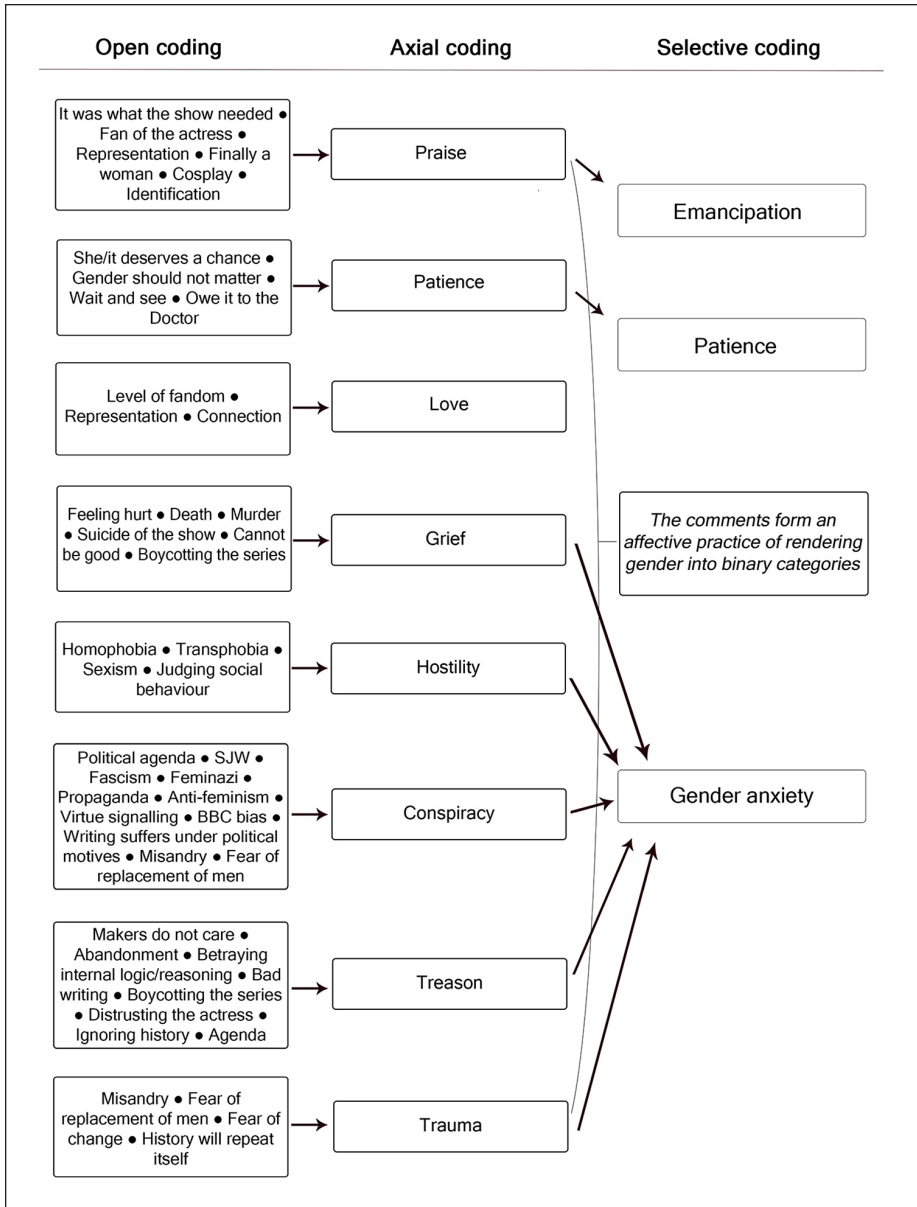


Figure 1. Coding scheme.

(Ashnuim Games). As one commenter observed, however, this debate may not consist solely in rational argument: “If gender doesn’t matter to people then why are they making such a fuss over it? Give her a chance she may be fantastic!” (Paul Richards).

Comments advocating patience conveyed both hope and worry. The new female Doctor need not necessarily fail. Success, however, would require a production team able to handle a female lead character. On this, users were unsure: “As for the Doctor being female, I’m OK with the idea. However, it will depend on the way the story is told” (Stewart Nicolson). In contrast to supportive comments, those counseling patience were based on a “wait-and-see” strategy of not excluding in advance the possibility that the character of the new Doctor would turn out to be “good” and well-rounded. This approach framed the female lead as a more difficult or risky choice than the “usual” male casting, which was deemed more natural.

Emancipation

Positive comments saw the casting of a woman as the Doctor as part of a wider move toward inclusive media representation: “it’s a small step that feels more like a giant leap for equality and inclusion on television” (Doc Trower). The idea of being able to identify with a television character on the basis of gender level was linked to social progress:

I feel like it’s really important to introduce, like a different gender. I think that BBC introduced a female doctor to make a change. An actual change. (Retroforbes)

Changing the Doctor’s gender, here, is presented as emotionally important in that it challenges the restricted ways in which women’s capabilities have been imagined. Above, we quoted a commenter (Dreamfaller63) who was moved to tears and felt that now she or he was allowed to assume “her place. I don’t have to be the companion anymore, the sidekick. I can be the smart sexy space lady. All I’ve ever wanted. Thank you Doctor Who for taking this long overdue step” (Dreamfaller63). Others also noted that some viewers can identify with a female Doctor, who provides proof that women amount to something:

I love that the doctor is a female because now I feel like I can actually be the doctor not just pretend to be her.  (Eleanor Richardson)

I’m anxious for her season to begin! Yay!! Finally a woman! (Marta Peterson Womack)

I cant wait for the female doctor!!!! How can we effect change in the world when only half of it is invited or feel welcome to participate in the conversation.—Emma Watson (EmmaTEr 123)

The Doctor is a woman. The Doctor is still one of my heros. I’m happy myself, my little sister, and my little brothers, are finally going to see a woman in a role where she isn’t a damsel in distress. I was raised by women. My Mom and Grandmas worked hard to raise me. It’s about time television starts showing that women are more than just sidekicks, love interests, or victims. They are intelligent, strong, and determined. They are creators, defenders, and all around kick ass. Much love, Mama Starfish (Draven Long)

I am happy they have a female doctor! #girlpowah (HGwitch)

SOOOO happy the new doctor is Female! Have been waiting for a role model like that in this show for ever, and I expect great things from her :D (Piano Kallan)

In this strand of comments, too, discussions of the reveal became a political platform, a space in which users performed cultural citizenship in ways that link affect, emotion, and discursive practice (Hermes 2005). Although grasping this entanglement of affect and discourse poses a significant methodological challenge (Hill 2019, 61), doing so is crucial to understanding meaning-making in the comments. According to Wetherell (2013, 353), affect is how the world first “hits” the body somatically, pre-consciously, and pre-discursively. Cultural contexts and histories shape the encounters between bodies and events that comprise what Ahmed (2004) calls “affective economies.” Such economies are energized by emotion—in this context, that might be Dreamfaller’s tears or the anger of Shirow, Red Matter or Mike Boosh.

[E]motions do things, and they align individuals with communities—or bodily space with social space—through the very intensity of their attachments. Rather than seeing emotions as psychological dispositions, we need to consider how they work, in concrete and particular ways, to mediate the relationship between the psychic and the social, and between the individual and the collective. (Ahmed 2004, 119)

The wave of public feeling under study here, then, is made up of “affective practice” (Wetherell 2012, 4). A woman the Doctor becomes is what Ahmed (2010, 584) calls a “blockage point” in that she “disturb(s) the promise of happiness, which I would re-describe as the social pressure to maintain signs of getting along.” She opens a fissure into an ongoing social fantasy, for which all is well and differences in status, wealth, and opportunity are beneficial to all. No wonder that, among some, anxiety sets in—an affect that needs dealing with and grieving over. For others, clearly, the opposite occurs: they have no trouble transposing the Doctor’s authority and quirky sexiness onto a female body. Indeed, some even feel invited to share in the exceptional agency that the Doctor exercises in time and space.

How politically radical is it to praise the casting of a woman in the role of the Doctor? As compared with #metoo activism and the increasing awareness of male domination in media industries, it represents but a very small step toward feminist revolution. Nonetheless, we would suggest that this is a distinct moment in the formation of emancipation and equality. As Dreamfaller63 puts it: “Boys had 54 years of the doctor. . . . It’s time the other half of the population gets their share.” Such political reasoning can be traced back through both socialist and liberal feminism to first wave Suffragette activism (Van Zoonen 1994). However important, emancipatory politics such as this can easily fall prey to either essentialism, which equates bodies with an innate gender (J. Butler 2011), or a reasoning that discounts intersectional logic in the functioning of social power relations at the expense of people of color (Wekker 2016).

Gender Anxiety as *Ontological Insecurity*

While crucial to understanding how reactions to the reveal are structured, the themes of patience and emancipation account for only a tiny portion of the comments as compared with those that fall under the negative themes of grief, trauma, conspiracy, hostility, and treason. If we understand the comments on the reveal as performances of cultural citizenship, in which pressing social and political issues are discussed by way of (popular) culture, it emerges that the gender of the Doctor matters because it (de)stabilizes identity and community. Until now, the recurrent character of the Doctor has offered structure and the promise of continuity—what Roger Silverstone (1994, 5–8), quoting Giddens, terms “ontological security.” Changing the Doctor’s gender exposed the fragility of social order. Once the new season started in the Fall of 2018, discussion over the Doctor’s gender died down and became irrelevant almost immediately. In the comments, it was clearly not the specific actor playing the Doctor that mattered so much as the opportunity to discuss changing gender roles and the unrest that it produces.

The quotations below show how comments on reveal read as an eruption of gender anxiety, which was voiced as antifeminism. The theme of grief is found in discursive declarations of death, combined with feelings of loss:

There is no bright side to this situation for many of the Doctor’s longtime classic and nuwho fans. We see this as a time of mourning, as indeed, #TheDoctorIsDead. (Krychick SPP)

Rip . . . and i thought that he would just regenerate. (RedCowCat)

Commenters grieving the loss of their beloved Doctor were not unaware of emancipatory arguments:

The doctor was a non-stereotypical role model for boys. Not a fighter, but an intellectual. Yet someone who could still be “cool.” Taking this away we’re left with a load of GI Joe’s unless the trend keeps shifting and we get male heroes who aren’t sleeping with every second girl and picking up mass murder with weapons within 5 minutes. (James Grieves)

Here, grief is “an expression of love” that “announces itself most passionately when faced with the loss of (its) object” (Ahmed 2003, 18). Love’s intimate relation with grief is revealed where losses are recognized as losses: there is, according to Ahmed, “an intimate relation between lives that are imagined as ‘grievable,’ in Judith Butler’s (2002) terms, and those that are imagined as loveable and liveable in the first place” (Ahmed 2003, 18). The question is *how* the Doctor’s gender matters: is it the character’s *becoming* a woman or *being* a woman that is so problematic?

Trauma is a second negative theme, which is often related to the show’s cancellation in 1989. Many commentators predicted a similar demise:

[B]e prepared for a 10 year cancellation folks, with a bit of luck in 2027 we’ll have the same effect the 2005 reboot had, great stories, great actors and actresses but above all the Doctor being who he always was and always should be, a Man. (Sewell 27)

In the most negative comments, gender was endowed with a mythic status and masculinity served as a guarantee against everything falling apart.

This was my problem with Ghostbusters [another recent popular film to cast women in men's roles] but people need to understand that you can just take a character and change its sex and say it works but they do not realize that men and women have very different characteristics and writers dont realize this that women dont like seeing their female characters act like men. The only people that are happy are a small group that is really loud or bata males for a lack of a better word. Women want men to be manly and women to be feminine. The average woman hates SFC and love their men like men. (FallenSnowWolf)

The idea that the Doctor's regeneration as a woman was a conspiracy (our third negative theme) perpetrated by feminists and/or "SJWs" provided users with an outlet for their grief and trauma. Comments adhering to this view described feminism as a radical antimale movement. In television and film, the theory goes (White), males are targeted for elimination. Feminism is a fight not for "actual" diversity, but rather for female domination. The type of lashing out exemplified here was common across the comment sections of the studied videos:

This was blatant misandry and pandering to feminists in the name of "diversity." The more male characters they can remove from lead roles, the happier they seem to get. (Axess2084)

From this standpoint, having the Doctor become a woman is an act of sabotage. Feminists and SJWs are Ahmed's (2014, 6) "kill joy feminist," whose "'failure' to be made happy by the right things is read as sabotaging the happiness of others."

Commenters found it astounding that the BBC would seemingly adhere to new diversity norms: "It is certainly concerning, BBC is drinking the Social Justice kool aid" (Scott Schinke). Again, this comment evokes a world that is off-kilter, in which balance and reason have been lost. Casting decisions are understood as crucial and should be made with respect to a show's established "dynamic":

The doctor we know was always a man, he always had female companions, and its a theme that the show is known for, it is the dynamic of the show, a man taking a woman around the universe and back again. For me this is breaking the concept of the show, it is now not a lonely man showing ladies round the universe, but a Feminist . . . (Gary Moore)

Comments tried to navigate counterclaims of sexism and transphobia in interesting ways. They often opened with a disclaimer: "I'm not some sexist, I just think . . ." (Jimmy Bob Stewart). It was specifically the timing of the Doctor's sex change that was presented as politically problematic, indeed quite possibly the result of a conspiracy: "The timing is suspect" (The Turn Based Gamer).

Hostility—our fourth theme—arose in response to the idea that Doctor Who has fallen prey to a conspiracy. Sentiments of blatant misogyny, transphobia, and homophobia were aired, sometimes through jokes: "Nurse who?" (Mank Deme). At other times, they took the form of disgust:

Basically, in brief terms—Now that Dr Who is morphed into TRANNY gay married Charles Manson SUPERGAY child Abductor & possible molester, the morons at BBC cant understand why this kids show is failing . . . The show is dead. (Friedrich Schultz)

Is he now trans? Conveniently right at the height of all this far left, ultra feminist transgender crap ? It was a calculated decision, and Chriss Chibnall [the new showrunner in 2017] knew exactly what he was doing. (Jay Pond)

As compared with more nuanced comments, statements as overtly hostile as these were limited in number. They represent the most outspoken criticisms of the new Doctor and can be understood as expressions of “geek fragility” (Blodgett and Salter 2018, 194). Geek fragility is reminiscent of “white fragility,” that is, the hostility expressed by white subjects in the face of racial stress:

[A] state in which even a minimum amount of racial stress becomes intolerable, triggering a range of defensive moves. These moves include the outward display of emotions such as anger, fear, and guilt, and behaviors such as argumentation, silence, and leaving the stress-inducing situation. These behaviors, in turn, function to reinstate white racial equilibrium. (DiAngelo 2011, 57)

Likewise, geek fragility “is a constructed fantasy, a world in which young white men outside the traditional definitions of masculinity are victims turned heroes, entitled to their rewards” (Blodgett and Salter 2018, 195). Cult texts are particularly proprietary for Geek subcultures, for whom a television series can become something of a Bible (Hadas 2013, 330). The highly negative comments on the reveal video, despite being in the minority, show how the “geek” culture of Doctor Who fandom can deploy rhetorics of betrayal in the face of their key text being mainstreamed. This is treason—our final theme—linking gender conservatism and fear of change to a populist distrust of elite institutions, in this case the BBC.

Conclusion

Although the negative comments may have emphasized grief and treason, they also invoked cultural citizenship. The comments bespeak a community that uses the series to reflect upon social and political conundrums while revering the Doctor. In all but the most extreme comments, it does not appear that the outpouring of distress was especially meant to relegate women to defined spaces or roles. Rather, it expressed deep unease with the destabilization of gender categories. The problem was the act of *changing* the Doctor’s given gender, not her femininity in itself. The comments urging patience expressed the hope that the discussion could rise above gender politics altogether. The most positive comments presented a mild emancipatory political statement: Give women a chance! Last, a significant portion of the flood of negative comments took the television series as an occasion to express transphobia rather than misogyny.

It is clear, then, that gender matters to *Doctor Who* viewers and fans in different ways. Interestingly, we cannot say whether negative responses to the reveal were caused by the radical casting choice, which upset fans' sense of common ownership over the series (the series as instigator of debate), the reveal simply served as an opportunity for venting existing gender anxiety, or indeed both. There can be little doubt that the reveal functioned as the kind of "incitement to discourse" through which gender and race continually emerge as contested social categories (Foucault 1976, 17–18). In such debates, expectations of peace and happiness become tied to the privilege accorded to some and the oppression suffered by others. Given that transgenderism and gender-neutral toilets in workplaces and public buildings are also engendering enormous discussion, it seems that the reveal is made meaningful, at least in part, as a symbol of the loss of a well-ordered, recognizable world in which men are men and women do not attain the status of the Doctor. For the vocal majority of the fan base, we claim, the instability of gender was supremely upsetting. Nevertheless, we want to reserve judgment rather than simply condemn this as misogyny. Indeed, the online discussion about the female Doctor also addressed feelings of injustice, powerlessness, and dependence in the face of unaccountable institutions. This conclusion is troubling, for it implies that popular culture's ability to generate valuable public discussion may be drowned out by the sensationalist and radicalizing rhetoric reinforced by social media algorithms in their effort to keep users glued to their screens (Tokmetzis et al. 2019).

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Notes

1. As the argument of this article develops, it will become clear that pronouns matter. Please bear with us in moving away from heteronormative and cis-gender conventions in the use of pronouns.
2. The YouTube material we used are comments on the Reveal and response video's by Internalized Misogyny, Mundanemat and Tessa Netting, as well as the comments on these videos. At the moment of publishing the original links to Internalized Misogyny and Tessa

- Netting's video and comments no longer work. Webarchive provides the first day of comments on these video's; all material is also available from us: sophie.eeken@gmail.com or joke.hermes@inholland.com.
3. Since making this video Mundanematt has changed his screen name to Matt Jarbo.
 4. Our focus on YouTube entails that we have no "feedback from those who did not post comments" (Chung 2015 in Thelwall 2018, 313) or who do not use social media. Nor could we check commenters' gender as unlike Facebook YouTube uses screen names. In defense of our choice, we want to point out that comments are the main way in which videos are discussed and an essential part of YouTube as a cultural form (Schultes et al. 2013, 660; Snickars and Vondereau 2009).
 5. All quotes are verbatim. We have neither corrected language nor added anything to the cited quotes. We have used (long) excerpts. Where sentences have been left out of a running quote, it is indicated by an ellipsis (. . .). We choose not to mark passages with *sic*, for misspelling is the norm rather than the exception in the YouTube comments we studied.

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