Beauty Through Control: Forming Pro-Anorexic Identities in Digital Spaces

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BEAUTY THROUGH CONTROL: FORMING PRO-ANOREXIC IDENTITIES
IN DIGITAL SPACES

A Thesis Presented
by
KAY A.S. MCCURLEY

Submitted to the Graduate School of the
University of Massachusetts Amherst in partial fulfillment
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DEDICATION

For my partner and soon-to-be-wife Rachele, who has infinite patience and is blessed with incredible kindness. Thank you for understanding graduate school without ever having been there yourself. Your belief in me made this project possible.
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Many thanks to my respondents, who were truly the backbone of this project. May you find all the peace, acceptance, and self-love you desire.

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Those whose names don’t appear here due to space constraints, whether friend or family, please know that your love is part of what carried me through these years spent in graduate school. I will always be grateful to you for seeing me through it. Blessed Be.
Pro-anorexia is a complex, multi-layered phenomenon that exists only online. The women who participate in these websites are learning to negotiate how to manage an identity that is normalized within the group but stigmatized within larger society. Using an open-ended survey, distributed online directly to pro-ana website users, I aim to illustrate pro-anorexic experience. After a brief demographic sketch of typical pro-anorexic spaces, I examine pro-anorexia in depth by asking three primary research questions: 1) how do pro-anorexics craft their online identities within the community; 2) how do individuals interact with one another in a highly contested and heavily policed online social world; and 3) how does a counterculture negotiate its relationship with larger society? In asking these three questions, I am extending current academic understandings of pro-anorexia by spotlighting what pro-ana is in the words of the women who use these websites and engage in disordered eating behaviors.

Keywords: pro-anorexia, anorexia nervosa, eating disorders, Internet, online, identity
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CHAPTER 1

INTRODUCTION

Seeking a Deeper Understanding

Pro-anorexia is a twenty-first century exclusively online phenomenon. It came to public attention in 2001, with an episode of Oprah. Well-known mainstream media sources began examining the movement shortly thereafter. Mass media, academics, and the medical community accuse pro-anorexics of recruitment, promoting eating disorders as a lifestyle choice, rather than a disease. For example, on Salon.com, a popular online news magazine, Janelle Brown (2001) wrote that “a lot of chronic anorexics\textsuperscript{1} [sic] actually attempt to recruit others to their ‘lifestyle’ to feel better about themselves”. A journalist for The New York Times asserted that “adherents [to pro-anorexia] might be vile and worthless, but they are the elite” (Udovitch 2002). This ambivalent sentiment is sometimes echoed in contemporary pro-anorexic discourse.

Currently, doctors and psychiatrists view eating disorders primarily as diseases with a distinct biological basis\textsuperscript{2}, though they sometimes incorporate sociocultural explanations as well. Recovery from the disease is of primary importance for the biomedical community. Clinicians are instructed by their peers to be familiar with pro-

\textsuperscript{1} While “anorexic” is used as both a noun and an adjective in colloquial language, “anorectic” is the proper noun, while “anorexic” is the adjective.

\textsuperscript{2} It is important to remember that eating disorders are a socially constructed list of behaviors that have been fluid over time.
ana websites, based on the belief that pro-anorexics “maintain anorexic behaviors, and [the information on the sites] is often inaccurate and dangerous” (Harshbarger et al 2009:367). Two psychologists, Rouleau and von Ranson (2011), claim that pro-anorexic discourse explicitly endorses “eating disorders as lifestyle choices that one should strive to attain” (525). If true, it is understandable why pro-anorexics might be a danger to others.

Academic examinations of pro-anorexia in social science and psychology also primarily approach the topic from a recovery-centric biomedical model. To varying degrees, recovery-centric biomedical discourse vilifies individual pro-anorexics. Karen Dias (2003), who treats eating disorders in a clinical setting, notes that “the primary purpose of these sites...[is] to promote and support anorexia, including detailed ‘how to’ sections” (35). In other words, academia has generally portrayed pro-anorexia as a method of teaching eating disorders to previously un-afflicted populations. Pro-anorexic discourse is almost exclusively viewed as dangerous in both the biomedical and academic communities, to say nothing of the vilification that takes place in mainstream media forums. In this case, biomedical models of eating disorders are used to create deviance, which reinforces the power of professionals. It is for this reason that a deeper examination of pro-anorexics and their discourse is warranted.

Using data from a mixed-method online survey, as well as informal observations I have conducted over the last decade, I address three major research questions: 1) how do pro-anorexics craft their online identities within the community? 2) how do individuals interact within a highly contested and heavily policed online social world? and 3) how
does a counterculture, “one that is deliberately opposed to certain aspects of the larger culture” (Zellner 1995), negotiate its relationship with larger society? This paper is divided into three sections, each of which address one of the research questions. These questions will allow me to elaborate upon pro-anorexic websites and the women who use them. By examining how pro-anorexics craft their online identities, I will tease out what pro-anorexia means to users. This meaning will be gleaned both from how they express themselves on the websites, as well as in their survey responses. In asking about individual interactions within a highly contested online environment, I will also further discuss some of the contradictions within pro-ana discourse³. Lastly, by addressing how a counterculture interacts with larger society, I will depict a number of varying personal experiences with pro-anorexia which has been uncommon in characterizations of pro-anorexics in various publications, both academic and otherwise.

I use several different theoretical frameworks to guide this paper. First, I use Michele A. Willson’s (2006) conception of community to understand communities in online environments. This provides a way of talking about whether pro-anorexics can be considered a coherent group and, if so, how that group is created among its members. As pro-anorexia is a phenomenon that happens exclusively online, a solid framework for understanding online communities is particularly salient. In focusing on individual identity construction more closely, I will use a combination of Helen Malson’s (1999)³

³ Some of these contradictions include the weight professional medical diagnosis carries within the communities; the ways biomedical discourse can permeate the websites even as pro-anorexics seek to distance themselves from traditional views of eating disorders; etc.
feminist post-structuralist analysis of eating disorders and Loïc Wacquant’s (2004) theory of body capital. In bridging these literatures, I hope to draw a more complete picture of pro-anorexic discourse and the women who engage in it.

Why Study Stigmatized Groups Online?

Online communities are a growing global social phenomenon. We are becoming a networked society via the internet, where permeable group boundaries and interactions between diverse groups are common (Wellman and Hampton 1999). Today, the internet’s influence has expanded exponentially. The internet offers possibilities for connection that would not, and do not, exist offline, including anonymity, a lessening of bodily constraints, and new ways of constructing identity and the self. When researching virtual groups, familiar ‘offline’ issues of accountability, communication, and presentation of self correspond with newer concerns about anonymity and control over one’s identity. My initial interest in this topic stemmed from a desire to examine how these online spaces serve as a venue for discussion and display of a taboo bodily experience.

People still engage in impression management online, though it is carried out in slightly different ways than it is offline. Online environments allow for a more tightly controlled presentation of self; the individual chooses what to post, where to post it, and how precisely to present themselves. When we develop new communication

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4 See Jurgenson (2012) for further discussion about anonymity online, how social networks affect identity formation, and related topics.

5 See Rosenberg and Egbert 2011 for further discussion.
technologies, we are also simultaneously (re)inventing the self. Technology both shapes the self and is a part of it, a particularly relevant concept when examining online embodiment. These technologies also allow for identity-play, as well as space to try on identities that are strictly taboo in meatspace. It is notable that the internet does not remove or transmute the taboo, but it may shape the presentation of self. In the case of pro-anorexic identity, online environments are the only forum for self-presentation.

Although there are some significant differences, internet communities have some key similarities with their offline siblings. In general, the idea of a community is “both a principle of actual social organization and an idea that people use to make sense of and shape their everyday lived realities” (Hill Collins 2010). Put another way, people within a community may agree that a central idea is of primary importance, but they may also disagree on the meaning of said idea. This accounts for the range of opinions present within what can still arguably be called a pro-anorexic community. These websites function as a way for people who engage in taboo practices to find connection with like-minded others. These connections were nearly impossible before the advent of the internet, due to the marginalization of eating disordered experience.

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6 Meatspace is colloquially known as “reality”. However, such phrasing is highly problematic as it results in the disenfranchisement of online experience. As such, I prefer the term meatspace, which was added to the Oxford English Dictionary in 2000.
CHAPTER 2

METHODS AND POPULATION

Researching an Elusive Group

Past researchers have used a variety of methods to study pro-anorexics, including content analysis, interviews, online ethnography, virtual participant observation, discourse analysis, questionnaires, and focus groups. With methods such as content analysis, it is easy to take things participants say out of context. It is also easy to misinterpret meaning when paraphrasing. Too little research about pro-anorexia has included the women who are involved. Therefore, I made every effort to include the opinions of women who participate in pro-anorexic communities directly. By distributing a survey, rather than conducting interviews, my goal was to allow my respondents a degree of anonymity while still obtaining information from them.

I chose to use a mixed methods survey that was distributed via the internet, because a) this group almost exclusively exists online; and b) it is a highly sensitive population that would be nearly impossible to reach via more traditional methods. As a result, I used a corresponding methodology that is attuned to that online presence. The survey was distributed directly, via email, to the creators of a total of thirty-one pro-anorexic websites (see Appendix A). The creators then distributed the survey link to members of their respective sites. The survey consisted of twenty-seven questions, including four open-ended demographic questions. Nine of the remaining twenty-three
questions were open-ended. This meant that the survey delivered both quantifiable data, as well as more in-depth data that resembled semi-structured interview responses. The distribution method is most closely related to snowball sampling, a sampling technique that often results in flawed samples of a population. However, given the sensitive nature of the population and their subsequent lack of public or offline visibility, this sampling method was necessitated.

My target population was people who visit pro-ana websites. Most pro-anorexic websites have some common elements among them. A prominently displayed disclaimer, which warns visitors they should already have an eating disorder before viewing content, is typical. The websites often include thinspirational photographs, art, quotes, and song lyrics. There is also usually a discussion of fasting techniques, as well as how eating disorders can affect daily life and interpersonal interactions. Occasionally there is conversation regarding purging techniques, usually through use of laxatives or inducing vomiting. While pro-ana websites may have social aspects, the vast majority have not fully made the transition to inhabiting space in Web 2.0 (i.e. social networks).

The population of interest is not necessarily people who identify themselves, publicly or privately, as pro-anorexic; given the controversy around such an identity,

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7 Of this group, I removed participants who exhibited inappropriate behaviors or otherwise behaved in a manner consistent with common definitions of internet trolls. Trolls are people who log onto message boards, blogs, and other internet forums with the intent of posting inflammatory or offensive messages in order to disrupt the normal flow of interaction (see Shin 2008 for further discussion).

8 Thinspiration is any media that represents slender women in some way. It can range from mainstream popular culture media (e.g. Victoria’s Secret catalogues or other photos of models) to user-generated media.
quite a few people may shy away from it. I wanted to seek responses from people who feel some sort of emotional attachment to pro-ana groups or discourse. The sites are curated, primarily by the maintainers but also by other users, so that registered users are only those who have reactions to pro-ana that tend towards the more positive side. In other words, the population of interest is people who have reactions that tend towards positive in regards to pro-anorexic discourse.

I was well aware that pro-anorexics would be wary of researchers in general. It is for this reason that I chose to distribute a survey rather than attempt focus groups or interviews; I wanted respondents to be as comfortable as possible providing me with information about their often-stigmatized activities. Self-administered surveys tend to be strongly preferred for sensitive topics (see Czaja and Blair 2005 for further discussion). I also supplement this survey with over a decade’s worth of personal observations of pro-anorexic websites, which Burawoy (2009) points out helps to strengthen surveys by providing contextual understanding.

I used a variety of methods to locate the websites, including Google, lists of recommended pro-ana blogs, links from other pro-ana websites or blogrings, and sources provided by the participants themselves. The criteria for the individual websites were simply that the author did not explicitly state that the website was not pro-anorexic and that the website had been updated within the last calendar year. Several respondents also

9 These women are already reflexive about their lives in ways that might differ from what I would have found had I approached this project as an ethnographer. However, a notable difficulty of survey research is that while I am coming into their environment, I cannot unpack their actions alongside their words.
expressed concern about providing a list of pro-anorexic websites, worrying that providing me with such a list would cause them to be shut down. Others were deliberately vague in the sources they provided, many naming Tumblr (a microblogging service that has seen an upswing in pro-anorexic content in the last several years) and Blogger (Google’s blogging platform, which hosts a wide variety of blog content).

When contacting the individual websites, I explained my position as an academic and openly acknowledged that I felt that the bulk of prior research on pro-anorexia had been problematic. I also included a brief explanation of my own positionality, both when I contacted the websites as well as on the survey itself so participants had an opportunity to learn more about me. I thought it was of particular importance to disclose my own substantive history of eating disorders, as well as my former involvement in pro-anorexic websites. This was done in part to build trust, so respondents would be less likely to see me as a mere voyeur.

I collected only basic demographic information from my respondents: age, race or ethnic identity, country of origin, and gender. All were open-ended responses, which allowed for a greater degree of specificity should respondents choose to do so.

Participants were not asked for their names, though there was a space for them to provide

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10 Their fears are not unfounded: beginning in the summer of 2001, many ISPs began systematically deleting pro-anorexic content. ISPs typically identify it as either hate speech or promotion of self-harm, both of which violate Terms of Service agreements. Additionally, there have been government initiatives in France and the United Kingdom to punitively deal with pro-anorexics, though none of the bills have passed.

11 See writing on feminist research for further explanation as to why it is important to take one’s positionality as a researcher into account.
an email address should they wish to remain in contact. All questions were optional, which was made explicitly clear to all participants. This paper includes analysis of responses from a total of seventy-five participants. Participants who were under the age of 18 at the time they took the survey do not constitute part of the final sample.

The Demographics of Pro-Anorexic Space

Pro-anorexics are a diverse group of people. Just as in offline communities, there are subgroups within pro-ana with distinct identities and reasons for participation. Though pro-anorexia is a community that has no offline equivalent, there are still different communities that fit under the umbrella of pro-anorexia. In addition to pro-bulimia (colloquially referred to as pro-mia), my respondents seem able to identify different types of pro-anorexic communities. Commenting on the types of people who frequent pro-ana communities, Julia says that participants “either want to learn or they want to teach”. She goes on: “It’s the teachers that are dangerous.” Others echo this sentiment. For example, Michelle vehemently states “I have no respect, love, or tolerance

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12 This was ultimately done as I did not have IRB approval to include underage respondents. There were eighteen additional respondents, whose ages ranged from 12 to 17. Several of them apologized for their age and begged me to include their responses, stating that the study was extremely important to them. However, due to IRB protocol, I was regretfully unable to do so.

13 Pro-mia communities are seen as fundamentally distinct from pro-anorexic communities, though there are women who identified themselves as bulimic within my sample. Thus, while there is crossover among individual women, I suspect that it is primarily the content of the websites that differs in addressing the two distinct disorders, rather than the membership.
for those who encourage others to starve themselves.” Negative comments directed at those who visit pro-ana websites to learn or pick up tips on how to be eating disordered were common among respondents.

These women can have a variety of justifications for participating in and engaging with pro-anorexic rhetoric. Some of the common ones gleaned from survey responses included a desire to feel less alone, competition, encouragement, and acceptance. Robin acknowledges that people may have different reasons for participating, but asserts that the overall reason is to have “a safe place to communicate about things most people would not be accepting of”. Regardless of the type of community or individual explanations of participation, Veronica sums up by saying “It’s the only place we feel at home”. This feeling of home that constitutes the mutuality and community is discussed in detail later in the paper. For now, I will discuss in more detail several of the functions and uses of pro-anorexic websites.

All of my respondents self-identify as women. The median age was 21, with ages ranging from 18 to 46 (see Figure 1). Over half were between 18 and 21, and since I dropped an additional nineteen respondents who were under the age of 18 from the analysis, it is safe to conclude that this is quite a young population. The majority of respondents identified as white/caucasian and lived in North America, primarily in the United States (see Figure 2).

Seven women identified as other or mixed race, which included ethnicities such as Australian and Pakeha (a Maori word that describes non-indigenous New Zealanders and is a cultural identifier rather a strictly racial one). Eleven women are from Europe
and six are from Australia or New Zealand (see Figure 3). The remaining three were either in South America (Chile and Argentina) or Asia (Thailand). Overall, the population is primarily young, white, and from English-speaking western countries.

Forty-eight of my respondents (62%) self-identify as pro-anorexic. It is notable that the survey was distributed via pro-anorexic websites, so regardless of whether they self-identify as such, they were all perusing pro-anorexic content. While this is a majority of respondents, it is still interesting to note that thirty-seven percent do not identify as pro-anorexic. This may be because the term is a loaded one and some women do not want to have to defend it. I also suspect that the vast majority of them would not publicly identify as pro-anorexic, given its controversial character and past responses to the movement. I would like to point out that the responses to this question do not

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14 The survey may have been further linked on other websites or sent to individuals. However, due to privacy concerns, I did not track how my respondents arrived at the survey.
represent any substantive distinctions within the community. Still, I believe it was an important safe-space question.

Figure 2: Respondents by Race (N=75)
Figure 3: Respondents by Continent of Origin (N=75)

- North America: 73%
- South America: 8%
- Asia: 15%
- Africa: 1%
- Europe: 3%
- Australia: 8%
CHAPTER 3

EXAMINING PRO-ANOREXIA IN THREE PARTS

Research Questions

An academic definition of community has not been critically applied to pro-anorexic groups in past research. I combine definitions of community drawn from Willson (2006) and Hill Collins (2010) to render once-exotic online experiences more familiar. In looking at pro-anorexia as a community, I will address my three research questions—how pro-anorexics craft identities within the community; how individuals interact in heavily policed social worlds; and how a counterculture negotiates its relationship with larger society—in part by taking definitions of community into account so that I can better define the boundaries of the pro-anorexic social world.

What follows is three sections, with relevant subsections in each. The first, called Identities and Ideals, addresses the first research question: how do pro-anorexics craft their online identities within the community? The second section, called Missions and Meanings, will discuss how individuals interact with one another in a highly contested and heavily policed online world. The third and final section, entitled Borders and Barriers, will answer the third research question (i.e. how does a counterculture negotiate its relationship with larger society?). In the conclusion of this paper, I will synthesize my findings into more condensed answers to each of these main questions.
CHAPTER 4

IDENTITIES AND IDEALS

Ideal Types of Pro-Anorexia

Historically, eating disorders have always been tied to, and displayed within, a social context. I will look at the social world created by the intersection of online communities and the biological features of eating disorders. What at first appears to be wholly biological or psychological has additional roots in social context. It is notable that eating disorders, particularly anorexia nervosa, are often considered highly valuable by those who have been diagnosed with them (Serpell et al. 2004); it is this sense of value that forms the basis of pro-anorexic identity.

Within pro-anorexic discourse, which builds a basis for pro-anorexic identity, there are “ideal types”. These exemplary ways of being eating disordered coalesce into a social type that I call the “Ana Ideal”. This social type is associated with a particular type of currency that comes in the form of bodily capital (Wacquant 2004). The community determines the structure of the ideal type and then individuals act out this role. This, in turn, leads back to the community adjusting the ideals to reflect individual interpretations. In other words, discourse and identity are heavily dependent on one another.

As I mentioned earlier, a little over half of my respondents self-identify as pro-anorexic. However, when asked to pick five characteristics that best describe them, only 22 (31%) of the 75 women chose “pro-anorexic” as a major part of their identity.
Meanwhile, 46 women (64%) felt that “eating disordered” was a major part of their identity. Put another way, self-identifying as pro-anorexic did not automatically mean it would be one of the five characteristics the women felt best described them. This contrast in which more women say that “eating disordered” best describes them (in comparison to pro-anorexic) may be part of the underground nature of the identity. Being a highly taboo identity, “pro-anorexia” is not typically the first choice for describing oneself.

Race, age, and country of origin do not appear to affect whether or not an individual identifies as pro-anorexic. A majority of whites identify as pro-ana (68%). However, when all non-white respondents were combined, the difference was not marked (i.e. seven non-whites identified as pro-anorexic while ten did not). Recall that forty-four respondents (61%) self-identify as pro-anorexic. Given the stereotype, which several respondents mentioned, that the communities are full of young women, I was curious how age would affect it. When looking at women over the age of 25, there was a slight majority (58%) who identified as pro-anorexic. Clearly, these communities do not solely consist of young (i.e. under 25 years old) women, though my sample primarily (75%) consisted of women under the age of 25.

**The Ana Ideal: Processes of Becoming**

As with any group, becoming a member is a process. There is identity work to be carried out and new types of social capital with which to familiarize oneself. Sometimes, there is also stigma to be managed, as in the case of pro-ana. I argue that the Ana Ideal is a social type to which pro-anorexics aspire. A social type, according to Samuel Strong
(1943), is a member-defined ideal to which the majority of members adhere. This is a useful way of understanding why pro-anorexics behave in the ways that they do, particularly within the confines of the community, as well as providing a bigger and more detailed picture of individuals. While there are multiple communities within pro-anorexia, I have observed that there is one Ana Ideal, which manifests in similar versions across groups, but is a constant standard to which community members hold themselves.

Nearly all respondents had an opinion on how a “good” pro-anorexic ought to act (i.e. one that conforms to the Ana Ideal). Sarah equates pro-ana with “living (and eating) how you want and not accepting [non-pro-anorexics] telling you you’re doing it wrong”. There are variations in how extreme they want their weight loss and ideal appearance to be: some, like Charlotte who states that her goal is to become “just skin and bones”, are extreme. Others, like Robin, just want to achieve a “reasonable” dress size. Danielle also points out that, regardless of target body shape, being pro-anorexic has competitive aspects. Julia talks about the primary purpose of pro-ana as “acknowledging your ED, and embracing it”. Jessica asserts that to be pro-ana is to be empowered.

Empowerment seems to be the most desirable end-stage for those chasing the Ana Ideal. However, the path is fraught with ambivalence and adversity. Additionally, it is a less well-defined concept among respondents than, for example, themes about choice and agency. When these women talk about choice and agency, they offer specific examples of what it means for them to be empowered. An example is when Katrina talks about her eating disorder as a choice; she sees it as a tool she can use to achieve her desired aesthetic. As is evidenced by this range of responses, the becoming (and maintaining)
process of a pro-anorexic identity is a complicated and ongoing one that requires constant maintenance.

To summarize the comments above, I posit that in order to be a good member of the community—and, by extension, a good anorectic—one must: be accepting of anorexia and other eating disorders; offer non-judgmental emotional support to people with “real” eating disorders; be in competition with others; engage in regular self-sacrifice; and feel welcome as a part of a tightly knit and insular community that is highly suspicious of outsiders. This is not prescriptive, in that in order to be pro-anorexic you must meet all of these attributes. Rather, it is a guideline that stems from particular discursive choices commonly made during the process of identity formation.

Skinny is another buzzword that describes the Ana Ideal. Julia says she wants “to be encouraged by skinny girls” and Danielle writes that “to be skinny” is their common goal as pro-anorexics. Trish bluntly sums it up, stating “We participate to get skinny.” They also participate, as discussed earlier, for many other reasons as well. But Trish’s straightforward comment may be one of the most truthful, in that many eating disorders are about some measure of pleasure taken in becoming skinny. That does not mean that being skinny is the primary purpose of eating disorders, but it definitely can be a welcome side effect. Hillary asserts that pro-ana is “more than just being pro-skinny” though. She continues on to say that “it’s about a lifestyle change and a terror of food.” Hillary is one of more than a few respondents to acknowledge that their lifestyle changed when they began viewing pro-ana content.

15 See elaboration on this subject in a subsequent section.
Often the question is whether pro-ana websites are responsible for the development of a pro-anorexic mindset. Bridget insists that pro-ana websites are not responsible for her own eating disorder, but other respondents are more ambivalent: nineteen women said that pro-anorexic websites changed their perception of their bodies a lot (see Figure 4). On the other hand, thirty-two percent (twenty-three respondents) said that the websites had not changed their perceptions at all.

Katrina admits that she peruses and posts content “to self-trigger, to stay in the disordered mindset”, though she goes on to point out that she would engage in similar activities regardless of her involvement in pro-anorexic communities. It is more complicated than a simple cause-effect relationship when it comes to looking at whether pro-ana websites are responsible for the development of an eating disordered identity. I did not ask participants to elaborate on
whether the websites changed their perception of their bodies for the better, or how the change occurred. This is something I plan to address in future research.

The community as a whole creates the Ana Ideal, a social type that assists in the maintenance of an eating disordered existence and that individual women attempt to live up to. These same individuals can modify the social type slightly, and then the Ana Ideal transforms within the larger group based on individual input. From the community to maintaining boundaries to the Ana Ideal, these women are taking agentic control of their lives even as they are medicalized throughout much of the world. Part of this is the (re)presentation of their bodies on these websites.

**Digitizing Bodies**

The Ana Ideal is made up of particular discursive moves that are deployed strategically by individuals alongside digital representations of their body. The combination of these discursive moves, as well as the digital representations of one’s body makes up an individual’s online embodiment. The pro-anorexic’s body, like the bodies of the boxers about whom Wacquant (2004) wrote, is a tool of work where one’s physical resources serve as capital. Skinny is the primary indicator of worth, though the individual’s subsequent worth can be determined in several ways: one is to look for particular indicators, such as visible ribs or hipbones, while another is to examine the overall effect of the body in question on the viewer.

In addition to the body being a form of capital in pro-anorexic communities, the bodily moves that pro-anorexics make can “be fully apprehended only in action [which]
place [these activities] at the very edge of that which can be intellectually grasped and communicated” (Wacquant 2004:59). To rephrase, you have to participate to fully understand the pro-anorexic experience. I can describe measures that pro-anorexics take to shape and maintain their bodies to fit the aesthetic qualities of the Ana Ideal, but these measures can only fully be understood when one engages in them. Many of the respondents talk about the understanding inherent in other women with eating disorders as a large part of the attraction of pro-ana. As Liz says, “[Pro-anorexics]...can completely understand what it is that I’m going through. Nobody else can.” Starvation is in itself a bodily experience, not merely an intellectual one.

The measures taken to sculpt one’s body vary individually and in combination; what works for one may not be what works for another. Like the boxers whom Wacquant (2004) describes so vividly, pro-anorexics quickly learn their own weaknesses and strengths, and play to them accordingly by displaying digital representations of their body in specific and strategic ways. They also share techniques within the communities about how to acquire a body that falls in line with the Ana Ideal. These techniques are the ubiquitous tips and tricks sections that the mass media draws attention to. In reality, these tips are about harm reduction as often as they are about how to lose weight. Gabriela points out that she “posts tips that are more healthy [than harmful]”, a sentiment echoed by other women. Despite starvation being a bodily experience, pro-anorexics bring their

\footnote{I am not recommending that anyone engage in pro-anorexic bodily practices or discourse in the name of better research. It is merely of importance to note that, as a bodily experience, one cannot have a complete understanding of what it is like without direct participation.}
bodies with them when they visit these websites, (re)constructing their bodies using text and—more rarely—images.

Eating disorders can and are understood in meatspace, even if they are understood differently than they are in pro-anorexic netspace. In comparison, pro-anorexia has no offline equivalent. The experience of being pro-anorexic can only be understood within digital spaces, even though the experience of being eating disordered is a highly visceral one. For most of the participants, pro-anorexia is not a major part of their offline identity. When asked to choose five words to describe themselves, only twenty-nine percent of respondents chose the word “pro-anorexic”. In contrast, sixty-four percent of respondents would use “eating disordered” as a primary descriptor of themselves. Put another way, being eating disordered is often the identity category that more of the women would choose to describe themselves, in comparison to pro-anorexia. Despite this, pro-anorexic discourse informs their actions.

There are two major status markers for those aspiring to the Ana Ideal then: one is the coveted title of professional diagnosis, and the other is the bodily capital to which each individual can lay claim, the latter of which is my primary interest. These status markers can fuel the level of competition for high status within the community, though they are by no means the sole driving force behind the competitive spirit amongst pro-anorexics. If your bones are visible, you are deemed as an authentic pro-anorexic who is successfully embodying the Ana Ideal. Both Dawn and Lily talk about the visibility of bones as a status marker. Natasha is even more explicit about it, stating that when she sees “really skinny girls with ribs and hipbones...that is what I consider to be desirable”. 

23
As the oft-used thinspirational quote goes, the thinner is the winner. It is notable that they offer virtual bodies, not physical ones as proof; this is due to taboos surrounding pro-anorexic identities that prevent these women from meeting offline.

It is for this reason that many of the women choose not to offer their bodies for consumption as thinspiration. This is one of the curiosities of anorexic experience: you never feel thin enough, even while often being thin enough to merit medical concern. Just under a quarter of the women in this study indicated that they post photographs of their bodies to see how they “measure up”, whereas only 8% post their bodies for thinspirational purposes (see Table 1). Though eating disorders are a bodily experience,

Table 1: Activities on Pro-Ana Websites (N=75)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Numeric Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Photographs of self (&quot;measure up&quot;)</td>
<td>10</td>
</tr>
<tr>
<td>Photographs of self (thinspiration)</td>
<td>20</td>
</tr>
<tr>
<td>Photographs of self (other reasons)</td>
<td>30</td>
</tr>
<tr>
<td>Numeric Statistics</td>
<td>40</td>
</tr>
<tr>
<td>Thinspiration (not self)</td>
<td>50</td>
</tr>
<tr>
<td>Post messages</td>
<td>60</td>
</tr>
<tr>
<td>Reply to others messages</td>
<td></td>
</tr>
<tr>
<td>Don't post</td>
<td></td>
</tr>
</tbody>
</table>

many women are hesitant to display their own bodies, which explains why pro-ana websites have gained popularity at such a dramatic rate: they allow women to discuss their eating disorder and even to display their bodies, an internal source of ambivalence.
with pride and shame to various degrees, to others who also have an eating disorder. However, unlike interactions in meatspace, the individual decides how much of their body they offer up for consumption by interested others. The individual is in charge of the construction of their body, picking what to display and what to keep hidden. By contrast, in treatment centers and other situations in meatspace, one’s entire body is always on display to others. The internet offers a modicum of control over how one’s body is consumed by others.

While women are hesitant to post photographs of themselves, the majority (64%) do post numeric statistics about their body. Along with replying to others’ messages and posting messages, sharing numeric statistics such as high weight, low weight, goal weight, current weight, BMI, etc is the most popular activity for those visiting pro-anorexic websites. After being asked about their activities on the websites, I also asked about the ways they chose to describe themselves that did not involve numbers. I was interested to see whether any patterns would emerge. Besides comparisons to animals and expected descriptive words like “fat”, “blubbery”, and others, no patterns were evident.

A handful of different responses to this question of whether they use non-numeric descriptors of their bodies did appear. Sarah, for example, noted that she would provide a count of ribs or descriptions of how many bones are showing. She is one of just six women who post their bodies for thinspirational purposes. Of the other women who post their bodies for thinspirational purposes - which includes Charlotte, Ashley, Lily, Danielle, Veronica, and Emily - all of them are also posting their bodies to see how they “measure up” to others on the communities. This suggests that while they are confident
enough to post themselves as thinspiration alongside models and actresses, they are still
seeking a measure of validation within the community. It also makes these women
contributors to the “real girl” style of thinspiration.17

This style of bodily description (i.e. specifics instead of more general expected
adjectives) is rarer, though still echoed by several women including Lily, who says that
she talks about “thigh gaps” (i.e. the gap between one’s thighs, generally measured when
standing). It is notable that Lily is one of the few women who posts photos of herself for
thinspirational purposes. A few of the other respondents also mention measuring their
“thigh gap”, though it is a popular term in the communities more generally. Kim
mentions that she posts what are colloquially referred to as “progress pics” - a series of
comparison photos that allow for differences to be seen between weights. Absences (e.g.
thigh gap and the differences between progress pics), as well as visible bones (with a
particular focus on collarbones, shoulder blades, ribs, and vertebrae) seem to be two of
the more popular non-numeric ways in which these women describe their bodies.

Identity and body are inextricably bound to one another in the pro-anorexic
community. Whether the women display their bodies via visual means (i.e. photographs)
or through numeric statistics (e.g. goal weight, current weight, etc), they are crafting a
digital representation of themselves, particularly of one aspect of their identities (in this
case, pro-anorexic). The communities provide a measure of autonomy in terms of self-

17 At this point, you may be wondering why I do not provide visual evidence of these
different categories. I believe providing such material would enhance the voyeuristic
quality of research that I have tried to minimize. Pro-anorexics often feel as though they
are constantly on display for public consumption, and I do not wish to exacerbate this
feeling.
representation: the women strategically include what aspects of their identity they wish to reveal. It is through these carefully cultivated identities and sculpted bodies that are presented strategically that the pro-anorexic makes meaning. The next section focuses on examining how individual users interact within the taboo social world of pro-anorexia.
CHAPTER 5

MISSIONS AND MEANINGS

**Functions and Uses of Pro-Anorexic Spaces**

This section focuses on common functions of pro-anorexic discourse, and how boundaries are drawn and maintained within the community. So what are people looking for when they seek out a pro-anorexic space? Over eighty percent of my respondents visit pro-ana websites because they want to feel a connection to others, and because they wish to be among like-minded people. An additional 72% of them feel like they get something out of pro-ana websites. Sixty percent like the feeling of exchange they get by interacting with like-minded others. Nineteen respondents (44%) feel that pro-anorexia is part of their identity. Four women also mentioned motivation or encouragement as a reason for visiting pro-ana websites. Bear in mind that these reasons emerged from a sample where 37% of the women do not describe themselves as pro-anorexic. In other words, just because someone does not identify as pro-anorexic does not mean that they do not identify pro-anorexics as “like-minded people”. Next, we move to discussing how pro-anorexic spaces are used by participants and some of the functions these spaces serve.

There is no universal pro-anorexic community, but rather multiple ways of creating community that pro-anorexics can engage in. Still, there is a certain amount of conformity that occurs among pro-anorexics, particularly in the form of shared beliefs and customs. Chelsea says that pro-anorexic communities are made up of “people who
struggle with, are curious about, dabble in, are recovering from, or are in any way associated with disordered eating or [negative] body image.” This was one of the most comprehensive definitions of precisely what sorts of people participate in pro-ana discourse.

A sense of community is highly relevant to many of the women who visit these websites. Additional answers included Dominique’s search for a way to understand herself in the context of others who have had similar life experiences, Violet’s description of pro-ana websites as motivational, and Quinn’s references to harm reduction. Dominique talks about her interest in “how [other anorectics’] minds work so I can understand my own mind and how it works”. While traditional therapy provides a space for self-exploration and understanding, Dominique has chosen to seek these things via pro-anorexic websites.

When Violet espouses her belief that other people visit the websites for “motivation”, it is reminiscent of the descriptions of pro-ana as a space to encourage eating disorders. However, I would argue that it is not equivalent. Violet identifies herself as pro-anorexic, and notes that while she has been in recovery before, she is currently not. She says “When I want recovery I know where I can go for that...Pro-ana for me means the people there won't judge me for being sick.” Violet, like many of the women, are seeking a space in which recovery is not the first and only priority. Pro-anorexic websites provide precisely this type of space.

On the one hand, in addition to being a space where eating disorders can be thought of outside the dominant medical models, pro-ana websites can also be a space to
promote safer behaviors. Quinn brings up the idea of harm reduction when she writes “pro-ana websites help keep me from bingeing”. Most people who are not pro-anorexic and hear about the phenomenon are profoundly uncomfortable. In spite of this, these websites keep at least some women from engaging in more immediately harmful practices.

On the other hand, while there is potential for pro-ana sites to be a safe space that promotes harm reduction, there is also a roaring trade in “tips and tricks” [for weight loss]. While academics and the mass media have represented these tips as encouragement and techniques to starve oneself more effectively, I argue that they are more than that. A discussion about harm-reduction techniques frequently takes place, indeed possibly more often than simple “tricks” about how to starve. One example is the often-reposted trick of swallowing a small object tied to a piece of string, so that the individual might later pull the string and induce vomiting as the object comes back up. More than a few of the websites advised not to use dental floss as the string, because it has a tendency to shred the esophagus.

Many of the respondents talked about tips and tricks, though they rarely used those particular words. Liz points out that, for her, it is a community “who will encourage me not to be destructive...it does not mean telling each other to eat less or purge more or take [laxatives] or diet pills”. She says that the main point of pro-ana is to encourage each other to be healthy, or at least to be as healthy as possible while still engaging in potentially dangerous behaviors. Quinn points out that people who ask for tips are often banned from the communities. So while tips and tricks may be present on the websites,
they are often more focused on a harm-reduction approach to an already existing condition that participants themselves acknowledge is risky.

These websites can also be a place where people who have had similar life experiences can commiserate. Alex states that “as girls with anorexia, bulimia, or other eating disorders, we are lonely”. She, along with many of the other women, says that there is no one in her offline life that she can talk to about her eating disorder. When asked if they have face-to-face contact with anyone that they feel comfortable talking to pro-anorexia about, 73% said that they absolutely did not have any such opportunity. The general sentiment seemed to be “this is something I keep private and to myself...I would never admit [it] to anyone in person”, as Natasha so eloquently put it. Twelve women (16%) said that they did have someone they could talk to about it, but of those only two said it was another person with an eating disorder. Hannah sums it up by saying “No one who hasn’t lived through an eating disorder will ever understand the effects and comforts of pro-ana websites.” The majority of respondents believe that only other people who also have eating disorders can understand and give appropriate support for what they’re going through.

It seems then that pro-anorexic communities have several functions. They can act as a safe space; several participants pointed out that pro-anorexic websites are the only space they feel they can be fully honest about themselves. Since eating disorders are medicalized, in many ways they are also stigmatized. Certainly they are seen as far less acceptable outside of pro-ana spaces as a mode of living. Yet within pro-anorexic spaces, as Natasha puts it, “I believe we should have the right to live our lives the way we want
to, not the way society tells us to.” Pro-anorexic websites provide that type of space for these women.

As with any community, it is not always the case that all spaces are supportive, nurturing environments. There is the occasional website that is self-identified as pro-anorexic that serves as a meeting point where women explicitly encourage each other to starve. This is how the mass media and many academics portray pro-anorexia in its entirety. Many of my respondents did admit that this type of community exists, but rushed to say that it is not the type of place they frequent. My survey was distributed to a wide range of pro-ana sites, including one where participants explicitly encouraged eating disorders in each other.

Veronica, who has been visiting pro-ana websites for over a year, writes “we do not encourage people to become like us, we provide comfort to those already suffering”. Several other women echoed that sentiment. Presenting all pro-anorexic spaces as a network for women to starve in solidarity with one another is grossly inaccurate; as is demonstrated by my participants’ wide range of responses, there are clearly a great deal of other more prominent purposes for the websites as well.

**Making Meaning Online**

When I asked my respondents what pro-anorexia means to them, several major themes emerged. The largest is the idea of support, closely followed by a discussion of personal choice and agency. Additional themes include lifestyle, promotion and encouragement, and community. There was no universal agreement among respondents
about what pro-ana is or is not. Instead, like most communities, individual members have a diverse definition and often strict boundaries of what the community they belong to does or does not include. The major themes will be discussed below, along with a handful of more individualized themes. It is these themes that guide the interactions between community members.

Support was the most common theme respondents mentioned. There was a definitive split here: some respondents said that they supported other people with eating disorders, while others said they supported anorexia nervosa. Chelsea and Liz, both white women in their early twenties, fell into the camp of supporting people with eating disorders. Chelsea specified that “being pro-ana does not mean that one encourages eating disordered behavior; it simply means that one wishes to have access to disordered eating content...and/or offer non-judgmental support to those who have similar life experiences”. Liz also emphasizes that “we do not get together and encourage each other to starve!” Other women expressed that there was a distinct difference between supporting the behavior and supporting the individual who engages in the behavior. The latter was the more desirable of the two in terms of how most participants define what pro-ana means.

Many of the women also emphasized non-judgemental support, such as Madison who focused on the people who have an eating disorder but are not ready to recover as being the sort who want to “lend emotional support to other sufferers”. Robin says that pro-ana websites are places where women can “support each other in their efforts”, which is presumably in reference to their eating disordered behaviors. Gabriela wrote that
“being pro-ana means support[ing] willpower”. I found it interesting that Robin and Gabriela placed such emphasis on supporting people in their efforts [to starve], rather than in supporting individuals who struggle with an eating disorder. The former way of thinking puts a more positive spin on the eating disordered behaviors themselves, glorifying starvation in a way. This was a rare sentiment among respondents, most of whom expressed that they believed in supporting individuals who happened to have an eating disorder, rather than supporting the eating disorder and associated behaviors.

A second major theme was choice and agency, which is particularly pertinent in light of much of the other research on this topic. The idea of pro-anorexics as agentic is something that much other research on pro-ana has skirted or ignored entirely. However, many of my respondents highlighted choice and agency as key to pro-anorexic discourse. Natasha says that pro-anorexia means that she has an eating disorder and chooses not to seek help for it, as she “likes the way [she] lives and has no desire to change it”. This is a fairly typical justification for pro-anorexia: that the individual is content with the way they live.

Katrina takes Natasha’s typical explanation one step further, saying that, for her, pro-ana represented the choice to welcome an eating disorder into her life. In these cases, the rationalization of an eating disorder as an individual’s choice makes it comparable to other lifestyle choices (similar to self-identifying as a punk or other subculture). This illustrates the complexities of the choice discourse that many women encounter, pro-anorexic or not.
The women who write about pro-anorexia as a lifestyle choice—as opposed to the disease model—are split: four of the women talk about anorexia as a lifestyle from a promotion/encouragement perspective, and seven talk about it from a choice/agency perspective. There are also a number of ambivalent others, including Emily who says pro-ana is about “personal acceptance but not promotion” and Nicole, who identifies anorexia as a mental illness and thus does not think that people should be framing anorexia as a lifestyle choice. The choice vs. disease debate is one in which ambivalence takes center stage.

Within the feeling of community, support and truth are pivotal important concepts, as is a sense of belonging. Ashley says that “most of the other pro-ana community members I have encountered are individuals who feel like they don’t belong...and just need someone to tell them they will be ok.” She continues, “they need to feel like they belong somewhere.” Sophia agrees that a sense of mutual identity is what drives people to participate in pro-anorexic communities. Trish also notes that because pro-ana sites are a support community, it’s very important that members are truthful. Kim confirms that “a lot of the community is based on trust...[because] my lie would reflect the possibility that others are lying”. In general, participants scoff at the idea of lying to other pro-anorexics; they believe they owe it to the rest of the community to preserve the sense of trust that has been built over time.

Some other notable definitions of pro-ana emerged when respondents were asked what pro-anorexia means to them. Sarah states that “pro-ana to me means beauty through control”. Megan also touches on the theme of control, saying that pro-ana is “the
equivalent of a mental gastric-bypass”. Traditional biomedical and psychological wisdom about eating disorders indicates that they are often about control. Beth agrees, stating that pro-ana gives her the ability to control some of the few things she is able to control. For these women, that sense of control is accompanied by comfort and an often-empowering feeling of agency that they are unable to find in other areas of life.

Some of these women also come to pro-ana websites in search of empowerment. Jessica, who identifies as pro-anorexic, says that to her, pro-ana means “empowerment. For so long the world has held me to its terms and methods for weight [loss]. Now, I am standing firm on my own terms.” By contrast, Anne and Rachel think of pro-ana as less a means of seeking empowerment and more of a practical way of reaching their goals. Anne says that “I tend to view [pro-ana] as a tool that I use”, while Rachel identifies pro-ana websites as a “tool to talk to others who share the same issue [in this case, an eating disorder]”. Rachel calls pro-ana websites a “social outlet”. Despite viewing pro-ana as a tool that they use to achieve their goals, neither Rachel nor Anne identify themselves as pro-anorexic.

The empowerment and other agentic discourses come primarily from women who self-identify as pro-anorexic. It is possible, then, that in addition to offering a safe space for support and connection with other people who also have eating disorders, pro-ana websites may allow for a sense of empowerment and agency among an otherwise marginalized group. When individuals are subject to biomedical models of eating disorders, this level of agency is rarely attributed to them. Instead, doctors frame them as sick, weak, and unable to make decisions for themselves. The high level of personal
agency and choice to be visibly anorexic is an undeniable draw to the pro-anorexic community.

**Telling Secrets to Strangers: Building Trust**

Despite the competitiveness and seemingly cutthroat nature of the contest to achieve the thinnest body, this community is built on a great deal of trust. Indeed, trust is a requirement; how else could members share these intensely private experiences with women with whom they will most likely never have a conversation face to face? In addition to telling secrets to people they have not met in meatspace, these women are also learning how to manage their stigmatized identities in meatspace via interactions with the larger group in the safe haven of pro-anorexic netspace.

Some of my respondents question whether others represent themselves truthfully on pro-ana websites. Erin believes that wannarexics are a specific group within pro-ana communities who are “pretending to be sick or asking for advice to get attention”. She differentiates wannarexics from “people who are obviously eating disordered”. But how is one “obviously” eating disordered when online? Veronica is confident in saying “you can tell when people are lying”. Several others echo Veronica’s sentiment, stating that it’s the only place they have to really be themselves; that is, to be open about their eating habits. Forty respondents believe that in general, people represent themselves truthfully on pro-anorexic websites. Seven do not believe others represent themselves truthfully, and thirteen believe that people represent themselves truthfully some of the time.
Wannarexic is a label most strive to avoid due to its loaded nature, which will be discussed in more detail in the next section. Madison disparagingly comments “a sick section of the population are looking to GET an eating disorder!”, echoing the general sentiment about wannarexics. However, some of my respondents admit that they frequent pro-ana websites in order to pick up tips on how to get and maintain an eating disorder. This is where the line between diet and eating disorders is particularly blurry. Claire doesn’t believe she is eating disordered but says she would like to be, while Jessica says that one of the reasons she visits pro-ana websites is to “learn new diets”. Gabriela rationalizes the tips she posts online by saying that they are healthier than ones that other members post. Her goal is “in a very secretive and ‘supportive’ way, I try to make the other girls stop doing things that are very damaging”.

Gabriela, Anne, and others advocate a harm reduction approach and attempt to encourage others to do so as well. Perhaps the feeling of trust is reinforced by the harm-reduction approach: individuals who accept a person living with an eating disorder and suggest behaviors that increase their level of safety indicates that they care about other community members’ wellbeing. This display of concern can in turn give rise to a more trusting relationship. This underscores the feeling that many of the women have about the community being a caring, supportive, non-judgmental environment.

Part of building trust is this shared stigmatized identity. Erving Goffman (1963) talks about how “those with a particular stigma sponsor a publication of some kind which gives voice to shared feelings, consolidating and stabilizing for the reader his [sic] sense of the realness of ‘his’ group and his attachment to it” (25). Pro-anorexic websites are a
prime example of Goffman’s idea of a publication of shared feelings and emotions. As Chelsea says “I post to express how I feel about myself [to other people who understand] from first-hand experience what I am going through.” Veronica supplements this by saying “It’s easier than keeping it [all] inside.” This sense of commonality in emotion is, to a large degree, what keeps the community together. That does not mean that the boundaries of said community are never disputed or questioned.
CHAPTER 6

BORDERS AND BARRIERS

On Border Maintenance

Boundaries are what determine who is and is not considered a part of the community. In keeping with my question - how does a subculture negotiate its relationship with larger society - I will discuss how community boundaries are maintained by pro-anorexics themselves. This section deals with what effects boundary policing can have on individuals within the community, as well as how this policing serves to uphold the Ana Ideal via enforcement of norms. Lastly, I will discuss some specific ways in which this boundary maintenance is carried out.

There are two primary methods of boundary maintenance that take place within the pro-anorexic community. The first is external policing, whereby individuals police each other to enforce community norms and rules. The second is internal policing, which refers to the myriad ways in which the women regulate their own behavior. There are a few different ways in which these methods of boundary maintenance are carried out. One is through differences in the definition of an eating disorder: some view it as an illness, while other view them as something that is more akin to a lifestyle choice. Another way boundary maintenance is performed is the type of thinspiration that is available within the community and which types are preferred by the group as a whole.
Wannarexic is somewhat of a fluid term in the community (Boero and Pascoe 2012). It can, as Quinn says, refer to people who “try to pretend that they have real eating disorders so they will be allowed onto pro-ana sites.” She continues on to say that “they get found out and banned sooner or later”. While this sounds harsh, it also makes sense when the general sentiment of pro-ana spaces as being for those who already have an eating disorder is taken into account. Madison defines wannarexia a little more simply: they are people “who WANT [sic] an eating disorder”. Based on respondents’ answers, a wannarexic is someone who wants to have an eating disorder, or someone who “fakes it till she makes it”, or some other combination thereof. Wannarexics are typically met with strong dislike, sanctions, and are often banned from the community entirely. I discuss some specific examples of this later in the section.

However, the term wannarexic can also be applied to people who do not meet the Ana Ideal. It is then that wannarexic is deployed as a boundary-defining epithet, rather than one that purely serves as a label for outsiders. In other words, when people who do not meet the Ana Ideal are accused of being wannarexics, it is a way in which community members can effectively and efficiently reinforce the boundaries of the community. There is little recourse for those who wish to dispute the epithet after it has been applied to them.

Quinn includes “fauxlimics” in her definition as well, which refers to people who aspire to be bulimic. While she uses this term as a synonym for wannarexic, it is not always used this way as most people assume that fauxlimics tend to be found in the promia communities rather than the pro-ana ones. In this way, the communities are quite segregated.
Hannah is a good example of the ambivalence in pro-ana communities, both in terms of how she deploys the term wannarexic as well as how she participates in boundary maintenance activities. She is a twenty year old African American woman who does not identify as pro-anorexic, but says “As much as I bash pro-ana websites, I love them for the way they make me not think twice about how messed up my thought processes are.” She has a deep appreciation of pro-anorexic websites for their normalizing qualities. Hannah finds other members of the community highly suspect when they don’t post “realistic” pictures of themselves. She considers herself one of the gatekeepers of the community, even though she reports that she does not interact with other members on a regular basis. It is somewhat of a paradox that even while she does not identify as pro-anorexic, she still considers herself to be an important figure within the community.

Wannarexia implies that the individual in question does not have a “real” eating disorder, victimizing or otherwise. Hannah scornfully defines pro-ana as “forcing yourself to fit the description of an anorexic [sic] while gaining support and tips from others with the same goal”. She continues, pointing out that “a real person struggling with anorexia does not need outside influences to control the way she feels about her body and food”. “True” anorexia, according to Hannah then, is a self-sustaining and self-sustained condition. If you are “good enough”, you won’t need outside help - pro-anorexic communities in this case - in order to continue engaging in anorexic behaviors. The idea of a “real” eating disorder, especially when viewed in conjunction with the tendency to stress professional diagnosis, is another interesting way in which biomedical discourse
permeates pro-anorexic communities, even as many members seek to dissociate themselves from it.

The ways in which respondents noted that they were professionally diagnosed were sociologically interesting, especially in light of Hannah’s comments. When asked if they were eating disordered, of the seventy-two respondents who answered the question, seventeen confirmed that they were eating disordered and that they had been professionally diagnosed. An additional eighteen respondents mentioned the importance of professional diagnosis in their answers, of which thirteen of them went on to say that they were still fairly certain that they had an eating disorder even though they lacked professional confirmation. This means that nearly half of the sample who responded to the original question (“are you eating disordered? please explain below”) mentioned professional diagnosis in their answer. The status of being professionally diagnosed is a coveted one and respondents who have not yet “earned” their diagnostic status are eager to mention that the lack of diagnosis doesn’t mean they aren’t eating disordered.

With other illnesses, having a professional diagnosis would give the individual access to resources and unlock institutional support. However, for pro-anorexics, neither of these are particularly attractive as they approach their eating disorders from a standpoint where traditional courses of treatment are not a desirable option. Instead, the professional medical diagnosis is a legitimating factor, whereby it is possible to demarcate who has a “real” eating disorder and who is a wannarexic. Additionally, having a professional diagnosis can legitimate internal concerns or suspicions the individual has about themselves. In the case of pro-anorexia, a professional diagnosis is a
discursive legitimating tactic that is often deployed in acts of boundary maintenance. Regardless of reason, the coveted status of profession diagnosis is another instance in which the primacy of traditional biomedical views infiltrates even discourse that is primarily concerned with being its opposite.

This tactic of strategic deployment of professional diagnosis is a legitimation tactic that is ultimately devoid of the burden of proof. In meatspace, one can often see the presence of a diagnosis, perhaps because the patient is in a treatment program. However, when online, individuals can represent themselves as desired. It is for this reason that trust within the community is so important. Professional diagnosis is one of the markers that a “real” pro-anorexic (i.e. not a wannarexic) is expected to have, as it indicates their adherence to the Ana Ideal.

**Border Creation via Internal Policing**

In addition to external policing, in which community members work together to uphold socially created boundaries, there is internal policing as well. Women frequently regulate themselves in three distinctive ways: self-criticism of their bodies, accountability, and pride in their accomplishments. Self-criticism is somewhat expected, given the fact that many of them visit the communities as a way to find motivation to change the bodies they are unhappy with. Accountability refers to the ways in which individuals strategically deploy numeric statistics about their bodies and expect the community to compare them with a set standard, part of the Ana Ideal. Lastly, pride in accomplishments refers to a common thinspirational quote that is attributed to Kate
Moss19: “the thinner is the winner”. Pro-anorexics often take immense pride in their accomplishments because they are always in competition with one another to be the thinnest, the “best” anorectic. The best anorectics are living up to the full potential of the Ana Ideal.

A good example of the self-criticism form of internal policing is when Samantha confides “I don’t feel comfortable posting pictures of myself because I don’t feel as fit as other girls”. This is further evidenced by the fact that only eight women (10% of the total sample) post photographs of themselves specifically for thinspirational purposes. As several respondents noted, a fear of cameras is common among anorectics. Of these eight women, all but Danielle identify as pro-anorexic. The question of what these women have in common is a difficult one to answer. There is no visible pattern in their diagnoses, age, race, what type of thinspiration they prefer, number of years of membership, how often they visit sites with pro-ana content, or what other activities they engage in on pro-ana sites. Indeed, the only discernible similarity amongst them is their pursuit of the Ana Ideal, to varying degrees of success.

Accountability is another common theme that the majority of respondents mention at least once, and is a form of internal policing. Forty-seven (64%) of the women post numerical statistics about their bodies, including things like high weight (HW), low weight (LW), goal weight (GW), current weight (CW), body mass index (BMI), etc.

19 She is the model who is most commonly identified as having started the “heroin chic” trend of extremely thin models in the fashion industry during the mid-1990s. Moss’ photos also frequently show up in the thinspiration sections of these communities, though both she and her agents have denounced pro-anorexia.
Several also mention the idea of posting numeric stats as a way to monitor their progress [to becoming thin] while also allowing others to track their progress as well. Anne believes that other people participate because when people are actively engaged in the communities “there can be a sense of accountability to others that motivates fasting”. She says this is particularly true when the communities hold challenges (essentially contests where the winner is whoever loses the most weight or similar competitions). Individuals expect the community to hold them accountable for maintaining their disordered eating practices as members of a community in search of the Ana Ideal. The threat of wannarexia is constantly waiting in the wings. Most of the women in this study expressed strong desires to uphold the Ana Ideal, primarily through sustaining their current eating habits.

Lastly, it is notable that competition in the pro-anorexic communities is fierce. Women are constantly checking themselves against others, seeing how they measure up. Nineteen women mentioned that one of the reasons they engage with pro-anorexic content is for motivation. The goal of motivation is very closely tied to the feeling of community: many responses had some variation on “staying motivated together” as being one of the major purposes of the community. Others, like Samantha and Mei, post thinspiration primarily in order to motivate themselves. Mei talks about competition, saying that she posts content “to compete with others” in terms of who has the highest motivation in reaching their weight loss goals. Seventeen respondents (23%) say that they
post photos of themselves in order to see how they measure up to others in the competition to get skinny\textsuperscript{20}.

Boundary maintenance is of primary importance in pro-anorexic spaces. Part of the reason is that they are a highly stigmatized group, but also that they are a strongly opinionated one. Wannarexics being unwelcome is the main battle when it comes to maintaining boundaries. The community as a whole is held accountable for maintaining boundaries, though while individuals are keeping an eye on others, they are also keeping a close watch on themselves to make sure that they are upholding the Ana Ideal and thus representing the community appropriately.

\textsuperscript{20} There are instances of competitions to lose weight outside of pro-anorexia. Television shows like The Biggest Loser, websites like http://www.skinnyo.com, and many others are all centered around competitive weight loss. However, it is only pro-ana websites that are castigated by mainstream society for these types of pursuits.
CHAPTER 7

CONCLUSIONS

Contested Identities, Divided Communities

People with eating disorders can sometimes feel that they live in a society that is unfriendly to them. This is particularly true if they are pro-anorexic or not actively pursuing the socially accepted path (recovery). It is for this reason that pro-anorexic communities are so attractive to these women. Charlotte eloquently states “We lose friends and choose Ana.” Being eating disordered and/or identifying as pro-anorexic can indeed be a comfort to these women, particularly when their offline friends do not understand. Pro-anorexic websites offer a narrative that is both constructed using biomedical discourse and in direct opposition to it.

I wanted to know how pro-anorexics crafted their identities online, specifically within the confines of pro-anorexic communities. In addition to interacting with others who hold shared beliefs, which I focus on in the following paragraph, these women constructed their identities through a process of digitizing their bodies. This process included strategic deployment of both numerical and more qualitative descriptors to (re)construct their bodies in online spaces, as well as constructing themselves in the image of the Ana Ideal. Paradoxically, in this online world, appearance is of primary importance. This social type guided the identity work that many, if not all, of the women engaged in.
I was curious how individuals interact with one another within a highly contested and heavily policed online social world. While some reasons for participation are shared - for example, common goals, safe space, and harm reduction combined with tips - there is a great deal of ambivalence within the communities. Other common ways in which most respondents agreed they make meaning are the themes of support, choice and agency, and the idea of community. The contrast between the sharing of harm reduction techniques and the tip and tricks that fall in line with mainstream media accusations makes for a great deal of disagreement about who “real” pro-anorexics are and what they do. These women have built a great deal of trust among each other, something that is necessary for community engagement, particularly in such a highly contested environment.

Despite some ambivalence about what activities are appropriate (e.g. harm reduction vs. sharing tips and tricks), there is almost none when it comes to boundary policing. It is these borders that lead to my third question, that of how a counterculture negotiates its relationship with larger society. In upholding the Ana Ideal, boundaries are policed. This policing is especially necessary, given the hotly contested nature of pro-ana within wider (read: mainstream) society. There are two ways of policing: external and internal. The goal of both is to eradicate the threat of the wannarexic, a second ideal type, though this one is far less desirable than the Ana Ideal. By constantly searching for the wannarexic, these women are interrogating the authenticity of other members. The wannarexic is deployed as a threat to cultural solidarity; it is the spectre of the outsider, which the Ana Ideal demands you reject in order to become “truly” pro-anorexic.
There are particular identity markers that pro-anorexics use to determine authenticity and dispel wannarexic accusations. One of these is examining the type of thinspiration that the member in question prefers. Authentic “Anas” prefer not the bones thinspiration the mass media would expect, but generally consume pictures of celebrities and/or “real girl” material. Another is to examine how they define an eating disorder, whether they believe it is an illness or a lifestyle choice. This again hearkens back to ideas surrounding choice and agency that are major themes in the communities. Real Anas are expected to walk an ambiguous line between illness and lifestyle. A third is to look to professional diagnosis, which functions as a status marker. The use of traditional biomedical definitions in a community dedicated to disrupting therapy models is another indicator of the level of ambivalence that can occur in pro-ana spaces.21

Ambivalence is present in the pro-anorexic communities in several different circumstances. Some have already been discussed, such as the ambivalence surrounding appropriate activities for community members to engage in. Another instance of ambivalence is through the choice versus disease argument: while these women obviously want to reclaim some measure of agentic control over their lives, they are simultaneously held hostage by the biomedical disease model, which states that they cannot have agency because they are sick. Many of the women struggle to dissociate themselves from the biomedical model even as they reify it when they use professional diagnosis as a status marker amongst members.

21 A potential comparison is Native Americans who embrace the ideas behind blood quantum laws, but also still fight against cultural assimilation.
In looking at the academic literature, it is profoundly interesting that studies of other subcultures that can result in the bodily harm of their participants (e.g. kink/BDSM, body modification, etc) do not carry the same judgmental tone that is found in much of the current research on pro-anorexic communities. I plan to continue with this research, and hope to conduct interviews to supplement this survey. Pro-anorexics walk the line between viewing eating disorders as a legitimate lifestyle choice and as a debilitating mental illness from which they see no escape. In future research, I hope to further discuss the ambivalence in the communities, as well as more on how they construct such contested identities for themselves within a heavily policed and further contested counterculture in a society that is ultimately hostile to women, people with mental illness, and those with eating disorders in particular.
APPENDIX

SURVEY TEXT

Please note that if you feel uncomfortable with any of the questions for any reason, you may omit your answer without penalty. You may also stop the survey at any time, or retract your answers post-submission. Contact me (kmccurle@soc.umass.edu) if you have any questions or concerns, or would like to request a copy of the paper once it is complete.

1) Would you describe yourself as pro-anorexic?
   a) yes
   b) no

2) What does pro-ana mean to you?
   [open-ended answer]

3) How long have you been a member of any pro-ana community?
   a) less than a week
   b) more than a week but less than a month
   c) more than a month but less than a year
   d) one to five years
   e) six to ten years
   f) ten or more years
   g) I am not a member of any pro-ana community.

4) In a typical week, how often do you go online (including using mobile devices)?
   a) once a week or less
   b) several times a week
   c) once or twice a day
   d) three or more times per day

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22 This survey was distributed via website. Participants were first taken to the informed consent agreement, which had to be filled out before they could access the survey. All questions were optional.
5) In a typical week, how often do you interact with other people online? (Interactions can be activities such as responding to blog posts, commenting on discussion boards, real-time chat, Skyping, etc.)
   a) once a week or less
   b) several times a week
   c) once or twice a day
   d) three or more times per day

6) How often do you visit websites with pro-ana content?
   a) never [skip to question after next]
   b) once a year
   c) once a month
   d) once a week
   e) one to two times per day
   f) three or more times per day

7) How many pro-ana websites do you visit on a regular basis? Websites can include discussion boards, blogs, video-logs, etc.
   a) none
   b) one to two
   c) three to five
   d) six to ten
   e) more than ten

8) Please list some of the typical websites you visit that contain pro-ana content. [open-ended]

9) How many people do you regularly interact with on pro-ana websites?
   a) none
   b) one to five people
   c) six to ten people
   d) eleven to twenty people
   e) more than twenty people
   f) I’m not sure how many people I interact with on a regular basis due to anonymity
10) Please select as many of the following activities that you engage in on pro-ana websites. [respondent will be able to select multiple choices]
   a) I post photographs of my body to see how I “measure up” to others.
   b) I post photographs of my body for thinspiration purposes.
   c) I post photographs of my body for a reason not listed above.
   d) I post numeric statistics about my body (for example, goal weight; highest weight; lowest weight; current weight; etc).
   e) I post thinspiration of people other than myself.
   f) I post messages.
   g) I reply to or comment on others’ messages.
   h) I don’t post.
   i) Other: [fill in the blank]

11) If you selected “I post numeric statistics about my body” in the previous question, are there additional ways (other than numeric statistics) that you describe your body? Please explain below.
   [open-ended answer]

12) Please explain why you choose to post the content that you do.
   [open-ended]

13) Are you eating disordered? Please explain below.
   [open-ended answer]

14) What are some of the reasons you visit pro-ana communities? Please select all that apply. [respondent will be able to select multiple responses]
   a) I want to feel a connection to others.
   b) I want to be among like-minded people.
   c) I feel like I get something out of pro-ana websites.
   d) I like the feeling of exchange I get by interacting with like-minded others.
   e) I feel that pro-ana is a part of my identity.
   f) Other: ______________

15) What type of thinspiration, if any, do you prefer? For example, do you prefer to see other people who identify as pro-ana post photographs of themselves, do you prefer photographs of celebrities, etc.
   [open-ended]
16) I generally feel __________ after visiting these websites. Please select all that apply. [respondent will be able to select multiple responses]
   a) satisfied
   b) happy
   c) disgusted
   d) fearful
   e) angry
   f) annoyed
   g) disappointed
   h) sad
   i) other: ______________

17) Why do you believe other people participate in pro-ana communities? [open-ended answer]

18) Do you believe that other people represent themselves truthfully on pro-ana websites? Why or why not? [open-ended answer]

19) How much have pro-ana websites changed your perception of your body?
   a) not at all
   b) a little
   c) some
   d) a lot

20) Pick the five characteristics that best describe you. [respondent will be able to select only five options]
   a) artistic
   b) smart
   c) funny
   d) pro-anorexic
   e) outgoing
   f) eating disordered
   g) confident
   h) happy
   i) other: __________

21) Do you have face-to-face contact with anyone that you feel comfortable talking about pro-anorexia with? [open-ended]

22) How old are you? [open-ended]
23) What is your racial or ethnic identity?
   [open-ended]

24) What is your gender?
   [open-ended]

25) What country do you live in?
   [open-ended]

26) Do you have any additional thoughts, questions, or concerns?
   [open-ended]

If I may contact you for any follow-up questions, please include your email address below.
   [open-ended]
BIBLIOGRAPHY


