Through interviews with participants of pro-anorexia websites, alongside those with young people in treatment for eating disorders, this paper reflects on ‘pro-anorexia.’ It asks what a desire to maintain one’s existing anorexia is, how it is enacted, and what might underpin it.

Eating disorders among young people in Britain are a society-wide concern. In 2011, it was found that, although the incidence of eating disorders appeared stable overall, these illnesses were increasing in younger age groups (Nicholls and Viner 2011). It was then reported in 2015 that UK hospital admissions for teenagers with eating disorders had nearly doubled in the previous three years. At that time, the Royal College of Psychiatrists suggested that ‘much of the increase is down to social pressure made worse by online images’ (quoted in Whitworth, 2015). This statement contributed to a debate that has ebbed and flowed since the advent of pro-anorexia websites in the late 1990s. These sites have long been seen as a causal factor in eating disorders, and framed as ‘educating girls into anorexia’ (Levenkron in Dolan, 2003).

Against this background, this paper will not suggest that the coming together of pro-anorexia and social media is not potentially harmful. Rather, it will trace how the parameters of that harm differ from a designation of social media as causal. Key to this is a contextualisation of online pro-anorexia within an exploration of anorexia itself. This recognises the distress and life events that may underlie both the illness and the desire to maintain it through self-starvation that is aided by social media engagements.

To explore online pro-anorexia and its intersections with young people’s lived experiences of anorexia, the paper draws on data from two qualitative studies: the first involved interviews with service users in an English NHS inpatient eating disorders unit (2007–2008) alongside online interviews with pro-anorexia website participants (2005–2013). The second study comprised interviews with young people in English NHS eating disorders outpatient, daypatient, and inpatient services (2013–2015).

What is Pro-Anorexia?

Although pro-anorexia websites have, to a certain extent, been surpassed by other forms of social media subsequently tagged as #proana, this discussion begins by offering an historical context to these later forms by engaging with the websites themselves. These are spaces established and participated in by individuals living with eating disorders. The first were created in the late 1990s, as Aurelie states:

Pro-Anorexia (pro-ana) started in 1998. The very first one was started by a person whose screen name was Empressanorexia_nyc. She started the group on Yahoo called Anorexia with Pride (AWP). It is unknown how, at that time period, many other folks came across it and decided to start their own. It expanded to other various hosts (i.e. MSN, Excite, E-groups) until attention was
Having been brought to it from other eating disorder recovery sites. Soon, the webhosts of those sites started banning and deleting any clubs and groups.

Aurelie, pro-anorexia website creator

As Aurelie suggests, in 2001 when they first garnered attention, large global servers began to shut down websites making any references to pro-anorexia (see also Reaves, 2001). Tumblr, Instagram and Pinterest deleted content labelled as pro-anorexic in 2012 (Barnett, 2012) and in 2015, France brought in a law that banned the sites as part of a wider crackdown on ‘inciting thinness’ (Allen and Sparks, 2015).

Likewise, media coverage of pro-anorexia has largely been negative, featuring words such as ‘sordid’ (Wostear, 2007) and ‘sick’ (Gotthelf, 2001). It has shared with public imaginings and some academic analyses a view of the sites as focused on a relentless quest for thinness, seeing them as spaces that ‘encourage knowledge, attitudes, and behaviours to achieve terribly low body weights’ (Borzekowski et al., 2010: 1526).

Although pro-anorexia websites have long been varied in terms of their content, this media and policy attention has most focused on two particular shared tropes. These are tips and tricks and thinspiration. Both have more recently expanded into social media spaces beyond the sites with hashtags such as #anatips and #thinspo. Whilst the former comprise advice on how to avoid food and hide one’s starvation, thinspiration has been described as ‘pictures of “waif-like” models, super-skinny celebrities and pictures of emaciated anorexics with the premise to inspire the anorexics to carry on their anorexic behaviours’ (Williams and Reid, 2007: 142). As this paper will later show, however, thinspiration is not as simple as it might appear, and tips and tricks also need contextualising in lived experiences of anorexia.

From their earliest incarnation, pro-anorexia websites have had a supportive function. On them, intimate narratives of pain and suffering weave through chat about everyday lives shaped by, and in spite of, anorexia. In her interview, Leanne said, “It’s not like some evil cult trying to brainwash people into starving themselves it’s about giving people support in some of their toughest times of their lives.” This sense of support has been highlighted in academic analyses, which have suggested that the websites are ‘intended as a sanctuary for those already suffering the illness, a place where they can share their thoughts on anorexia away from the pressure of family or friends who may encourage or enforce recovery’ (Burke, 2009: 63 – 64. See also Dias, 2003).

Support, in all its ambiguity, therefore does need situated and critical recognition. These sites intersect with a wider landscape of online support communities for mental health issues that have emerged over the past fifteen years (see Naslund et al., 2014; Tanis, 2008). Sites such as ‘PatientsLikeMe’ and ‘Elefriends’ are part of a ‘medicalization of cyberspace’ (Miah and Rich, 2008) that has seen diagnostic and medication information exchanged and challenged (Giles and Newbold, 2013) against a background of support and mutual understanding.

Yet, whilst mirroring this existing template, online pro-anorexia discussions also have a very real potential to normalise the illness and lead participants to not seek other forms of help. This is recognised in academic analyses (Mulveen and Hepworth, 2006; Wilson et al., 2006), as well as by participants themselves. In her interview, Noura, a frequent visitor and contributor to pro-anorexia websites said, “If I wanted help I wouldn’t be looking up pro ana websites... so people who are on those sites want to be supported to continue with the illness... pro ana is an enabling group.”

This emerging ambiguity offers a fitting moment at which to pause and widen our perspective. Rather than continuing to retrace valuable, but familiar, arguments regarding whether online pro-anorexia is harmful or helpful, the paper will now ask: what is it that participants like Noura are ‘supported’ to maintain by engaging with social media? This necessitates reflecting on what anorexia is to young people themselves.

**What is Anorexia?**

Anorexia’s like a ball of pure evil inside that completely takes over somebody and completely destroys their identity, everything that makes them them.

Leila, inpatient

As Leila suggests, anorexia is a dangerous and distressing illness. Yet, like other research participants, both online and offline, Leila also described a desire to maintain her illness (see Lavis, 2016).

Participants’ accounts frequently contain descriptions of the illness are “mine,” “a part of me” and a “friend.” In her interview, Nita said,
“it becomes so much a part of you;” she asked, without it, “what would I be?” Tara, who has been affected by the illness since it was diagnosed twenty years ago in her teens, said: “it’s been a friend to me for a long time.” Echoing Tara’s words, in many interview narratives the illness is framed as an ‘other’ with whom participants have a valued, albeit painful, relationship. This relationship is founded on a sense of being “looked after” by anorexia, as Leila put it, which relates to its control and numbing of emotional distress.

Before his inpatient admission Laurie’s mother had been diagnosed with terminal cancer. Describing anorexia as “a friend” who “helped [him]” during this difficult time, Laurie said of the illness, “it’s a way that I cope.” Likewise, Josie described the illness as “a distraction and an escape from the real world, the pressures, the worries, the stress, things that I couldn’t control, things that I didn’t know how to handle.” In her interview Elle said of anorexia, “it sort of helps to relieve feelings and stuff. It does its stuff so I don’t have to feel them.”

From these accounts, anorexia emerges as a numb way of being in the world; it may be flat and constrained but is also regarded as “helpful” in the face of overwhelmingly distressing life events, such as bullying, bereavement and parental divorce. The illness is therefore a coping strategy that young people may find extremely painful, that they also know is dangerous, but that they may wish to maintain, at least “for the moment,” as Laurie put it.

Maintaining anorexia then can be an ambivalent and precarious way of protecting oneself and ‘getting through’ a specific distressing life event. As Nita put it in her interview, anorexia has been:

...a safety net for so long, removing it is the scariest thing in the world. [...] I think that’s what has stopped me getting completely and being fully recovered, is that it’s a safety net that I don’t want to remove. [...] It becomes so much a part of you. What would I be without it?

Nita, outpatient

This illustrates how recovery from anorexia may be profoundly frightening. In her interview, Abigail likened being in treatment to, “having an anaesthetized limb cut off.” She said, “it’s better to keep it anaesthetized so it doesn’t hurt. That’s why people continue to be anorexic, so they can remain anaesthetized.”

Thus, it is in relation to the desire to hold onto anorexia as a coping mechanism that we need to reflect on self-starvation. That anorexia dampens emotional distress has been widely documented (Williams and Reid, 2009; Zanker, 2009), and ensues from the effect of nutritional deprivation on the brain. Yet, whilst many participants recognise the physiological underpinning of this numbnness, they also describe actively working to (re-)produce and maintain it by continually trying harder to not eat. As Laurie put it, eating might “take it away,” and that felt unbearable to him.

As such, it is clear how a social media space which offers understanding and self-starvation tips may become attractive. Participants describe the online tips and tricks mentioned earlier as aiding them to maintain their existing illness; these are not about learning anorexia, but about keeping it.

Yet, while assisting their resistance to recovery, young people’s engagements with tips and tricks also do not necessarily signify a denial of illness. In her interview, Kyra wrote:

I have lost quite a few friends to eating disorders and I live with the physical consequences of anorexia and personally believe that pro ana sites should be made illegal because then at least fewer people would be motivated even more to continue an eating disordered pattern.

Kyra, pro-anorexia website participant

At the time of this interview, however, Kyra was a frequent visitor to the sites, and she stated that she would be “lost” and “alone” without them, and without her illness. As such, it cannot be assumed from their ‘anti-recovery stance’ (Fox et al., 2005) that pro-anorexia website participants ‘celebrate eating disorders,’ as has previously been claimed (Ferreday, 2003: 277). A desire to maintain one’s illness ‘does not mean anorexia is regarded as problem-free’ (Williams and Reid, 2007: 150).

Recognising that anorexia can be valued, and that young people turn to social media to maintain it, does not ignore their suffering or ambivalence. It suggests the need for discussions of pro-anorexia that pay attention to that suffering, rather than viewing both the illness and its meeting points with social media as only about weight loss.

Bodies and Screens: Anorexia, Thigh Gaps and Social Media

That anorexic self-starvation is fuelled by a desire for weight loss is a core theme of cross-
disciplinary analyses of anorexia. Diagnosis remains characterised by the presence of body image concerns and excessive dieting (APA, 2013), and sociological discussions have often seen anorexia as the extreme of a ‘continuum that begins with normal dieting’ (Garrett, 1998: 23. See also Bordo, 1993). This stance has also underpinned much media coverage of pro-anorexia; the website participants were described in 2007, for example, as ‘rely[ing] on sordid internet information to help them lose weight’ (Wostear, 2007).

However, accounts of valuing anorexia for how it ‘looks after you’ problematise this conceptual centralisation of weight loss, offering alternative understandings of thinness. In her interview, Indira said:

You get caught up in shape and weight, but for a whole load of other reasons. So I’m caught up on my shape and weight, but it’s not because I’m really vain, I don’t care about that, it’s just because I’ve got like low self-esteem and so I cling to that.

Indira, outpatient

When asked about her anorexia, Indira said, “I think it’s serving a function because it helps me. It makes me think that I’ve got an aim still. It does still numb me from other things.” Indira then explained the relationship between her anorexia and emaciation with the words, “so if I can get my fingers around the top of my arm then I feel safe.” This sense of ‘safety’ shows how, although not a primary or initial goal of self-starvation, bodily thinness comes to be important later on in the illness. This is because it demonstrates that anorexia is still present; thinness reassures Indira that eating has not “taken away,” to borrow Laurie’s statement from earlier, her ‘friend’ or the numbness it offers.

In showing that anorexia is enacted with the body but is never simply about the body (see also Lavis, 2013), such accounts challenge discussions of online images as a causal factor in anorexia. In her interview, Miriam said:

There’s lots of people who think it’s just a vanity thing like, you know, anorexia is just the thinness and wanting to look thin but it’s not a vanity thing, it’s not at all. People go ‘oh everyone’s trying to copy this size zero trend’ and it’s not, it’s not! You don’t open a picture…look at a picture, and say ‘oh I must look like that girl, therefore I must lose weight, therefore I’m an anorexic!’ It’s absolutely nothing to do with that.

Miriam, inpatient

Yet, both pro-anorexia websites and the vast and jagged landscape of social media that has followed these contain myriad #thinspo images. Although, at first glance, the thinspiration pages on pro-anorexia websites from 1998 onwards may have appeared to comprise photographs of, simply put, ‘thin people,’ there is a more complex story here; one that resonates with the specific positioning of thinness in participants’ accounts as important within existing illness.

In her interview, Kyra said, “I looked for not just slim models, but bony ones, ones that look ill!” Kyra’s words highlight how bodily thinness, even in others, is desirable specifically as a signifier of illness; she said, “pro-anorexia is the desire to remain eating disorder thin.” Participants describe viewing such imagery to compare the anorexia of others with their own. It is used as motivation in the midst of their existing relationship with their illness rather than having generic ‘weight loss’ as a goal; as Noura put it in her interview, “if I know that the person that I’m looking at is anorexic then it appeals to my competitive side and encourages me to starve myself.”

However, early media and public understandings of pro-anorexia largely missed the specific desirability of ‘anorexic emaciation,’ which was key to pro-anorexia websites. Blurring a distinction between anorexia and dieting, by around 2006 thinspiration was widely being represented in the media as ‘photographs of slim (or, indeed, skinny) celebrities and models’ (Closer, unattributed 2009. See Howard, 2007). This interpretation has arguably dominated coverage of pro-anorexia since and has also changed the landscape of pro-anorexia on social media.

Media framings of pro-anorexia websites as ‘weight loss’ tools served to make the sites known; it implicitly advertised them. In her interview, Laura said, “I have always known that pro ana sites existed because I had seen them mentioned in the media.” Over the past ten years this ‘advertising’ has attracted an influx of visitors to the sites seeking to ‘become anorexic’ as a way to lose weight (see Lavis, 2014; Boero and Pascale, 2012).

These visitors posted new kinds of thinspiration, not of ‘anorexic bodies’ but of increasingly thin celebrities and selfies. In so doing, they also replaced the more complex and multi-layered conversations with a focus on weight loss. This new #thinspo has also been
joined across diverse social media spaces by the proana hashtag. The now widespread use of this to label selfies on Twitter, for example, has transformed pro-anorexia into what the media always said it was: a decontextualized weight-loss tool.

As such, the support function of the original pro-anorexia websites has been overshadowed by an incessant quest for size zero, thigh gaps and discussions about rib removal. This has left those who sought, albeit ambivalent, understanding of, and help with, their anorexia without key support mechanisms. It has also highlighted the pervasive hyper-valuing of, predominantly female, bodily thinness on social media and in British culture more widely.

**Conclusion**

Images of emaciated, mostly female, bodies across social media tagged as #thinspo and #proana are deeply concerning. They give young women the message that to be of value they should be thin above all else. The distress that such a message may itself engender is elucidated through pain on the other. Conflating the cultural valuing of thinness with anorexia and cultural conditions that render thinness so highly prized amongst young people on the one hand, and make anorexia a way of getting through pain on the other. Conflating the cultural hyper-valuing of thinness with anorexia obscures lived experiences of the illness and the distressing life events that may lie “underneath it”, as Lacey put it in her interview.

As such, body image concerns and anorexia both have an impact on young people, but they are separate issues, playing out differently in individuals’ lives and bodies. Both urgently need tackling in and out of the classroom, but not in ways that bind them together and potentially do justice to neither.

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**References**


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