

7-21-2014

Uncovering ED: A Qualitative Analysis of Personal Blogs Managed by Individuals with Eating Disorders

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Recommended APA Citation

Gies, J., & Martino, S. (2014). Uncovering ED: A Qualitative Analysis of Personal Blogs Managed by Individuals with Eating Disorders. *The Qualitative Report*, 19(29), 1-15. <https://doi.org/10.46743/2160-3715/2014.1104>

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Abstract

Previous studies have investigated the potential harmful effects of pro-eating disorder (ED) websites. Websites, such as personal blogs, may contain eating disorder content that may hold important information as well and must be considered. Fifteen blogs hosted by the site “Tumblr” were qualitatively analyzed. Each blog owner was anonymous and all were female. Ten main themes were extracted using grounded theory: interaction, negative self-worth, mind and body disturbances, pictures, eating disorders, suicide, diet, exercise, stats, and recovery. Additional themes also appeared in the study. Results indicate that although each individual blog is unique to its owner, common concepts existed among the majority. The implications for the information in the ED blogs and directions for future research are discussed.

Keywords

Eating Disorders, Blogs, Online Support, Treatment

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Uncovering ED: A Qualitative Analysis of Personal Blogs Managed by Individuals with Eating Disorders

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Previous studies have investigated the potential harmful effects of pro-eating disorder (ED) websites. Websites, such as personal blogs, may contain eating disorder content that may hold important information as well and must be considered. Fifteen blogs hosted by the site “Tumblr” were qualitatively analyzed. Each blog owner was anonymous and all were female. Ten main themes were extracted using grounded theory: interaction, negative self-worth, mind and body disturbances, pictures, eating disorders, suicide, diet, exercise, stats, and recovery. Additional themes also appeared in the study. Results indicate that although each individual blog is unique to its owner, common concepts existed among the majority. The implications for the information in the ED blogs and directions for future research are discussed. Keywords: Eating Disorders, Blogs, Online Support, Treatment

Introduction

Eating disorders remain a widespread silent battle that calls for awareness and understanding. The National Eating Disorder Association (NEDA) provides an estimate based off epidemiology information provided by Wade, Keski-Rahkonen, and Hudson (2011) that about twenty million women and ten million men in the United States suffer from anorexia nervosa, bulimia nervosa, binge-eating disorder, or an eating disorder not otherwise specified (National Eating Disorder Association, 2013, Wade, Keski-Rahkonen, & Hudson, 2011). The National Institute of Mental Health provides detailed information on the characteristics of anorexia, bulimia, and binge-eating disorder. Anorexia nervosa is characterized by emaciation, an unwillingness to maintain a normal or healthy weight, intense fear of gaining weight, distorted body image, a self-esteem that is heavily influenced by perceptions of body weight and shape, denial of the seriousness of the low body weight, lack of menstruation among females, and extremely restrictive eating. Symptoms of bulimia nervosa include recurrent and frequent episodes of eating unusually large amounts of food and feeling a lack of control over these episodes. Diagnostic criteria for bulimia include bingeing episodes at least twice per week including compensatory behaviors (APA, 2013). Compensatory behavior following the binge-eating consists of forced vomiting, excessive use of laxatives or diuretics, fasting, excessive exercise, or a combination. Binge-eating disorder is very similar to bulimia nervosa but without the compensation for the binge episodes (National Institute of Mental Health, 2011).

Thirteen million Americans binge-eat, ten million women battle anorexia or bulimia, and one million men battle anorexia or bulimia. Also, the number of eating disorder-related hospitalizations in the USA has increased between 1999 and 2006. From 1999 to 2006 there was an 18 percent overall increase, a 37 percent increase among men, and a staggering 119 percent increase among children under twelve years old. CNN also reports that 80 percent of all ten year olds are afraid of being fat and 42 percent of all first through third grade girls want to be thinner (CNN Health, 2012).

Development of ED

Eating disorders may develop for a variety of reasons. Six notable factors according to research include culture, personal characteristics, emotional disorders, stress events or life changes, biology, and family (Womenshealth, 2010). Tozzi, Sullivan, Fear, McKenzie, and Bulik (2003) interviewed 70 women who were referred for inpatient treatment of anorexia nervosa. They found that more than one-third (34.78%) of the patients they interviewed highlight dysfunctional family as contribution to the onset of their disease. Following this cause were weight loss and dieting (21.74%) and stress and frustration (20.29%) (2003). Individuals diagnosed with anorexia nervosa and bulimia nervosa are likely to have a history of behavioral abnormalities and internalization problems such as social withdraw and depressive symptoms with complaints of nervousness, loneliness, inferiority, and guilt. With regard to bulimic behaviors specifically, externalizing abnormalities were also reported with more quarrels, emotional instability, jealousy, and attention seeking (Adam began, Wagner, Nader, Fernandez-Aranda, Treasure, & Karwautz, 2012). As a conclusion of their study, anorexia nervosa and bulimia nervosa pathology were found to be relevant to high negative affectivity, emotional instability, anxiety, depression, guilt, low self-esteem, and an internalization of these factors.

Physical and mental health can be severely impacted by the onset and continuation of eating disorders. There are several existing methods of eating disorder treatment that can prove useful when weighing their effectiveness. Cognitive-behavioral therapy stands as the treatment of choice for bulimia nervosa and binge-eating disorder, and family therapy is supported as the leading approach for adolescents with anorexia (Wilson, Grilo, & Vitousek, 2007). Mindful eating may also prove to be beneficial among victims of bulimia nervosa, binge-eating disorder, and anorexia nervosa. A case study was conducted on a 19 year old college female referred to counseling in the community with a BMI (body mass index) of 17.9 and a daily restriction of 900-1,000 calories. The individual also engaged in one hour of exercise per day. 15 weeks of therapy included mindful eating, which consists of in the moment visualizations while eating food to focus on the eating and not on the negative self-talk that accompanies the eating. After therapy was completed, her restriction declined and her BMI and daily caloric intake increased (Albers, 2011). Intensive residential treatment also exemplifies a successful treatment route for patients with anorexia nervosa and bulimia nervosa in the United States (Brewerton & Costin, 2011a, 2011b). Brewerton and Costin found that the majority of the 116 patients in the intensive residential care program showed significant improvement at long-term follow up. Good outcome was defined as a return to normal weight and resumption of menstruation. Intermediate outcome was defined as return to normal weight or resumption of menstruation. 89 percent of those with anorexia had a good or intermediate outcome about five years after discharge and 75 percent of bulimic patients had a good or intermediate outcome about four years after discharge. Other research indicates that there are more methods of support for ED, such as online support.

Online Support

Online support exists for victims of eating disorders in a variety of venues. A recent statistic model indicates that as of June 30, 2012 51.8 percent of the North American population, 273.8 million people, use the Internet (Internet World Stats, 2012). With little to no social interaction, such as face to face encounters, it is not unlikely that an eating disorder sufferer will turn to an interactive anonymous social support system. Positive affect was a frequent theme found among a content analysis of five Yahoo! eating disorder-based

discussion boards (Eichhorn, 2008). In this study, 20 percent of the messages reported positive affect where users were encouraging others' success.

Seeking online support for eating disorders such as through online chat rooms has its consequences as well. The National Eating Disorder Association informs that many cases of eating disorders are not reported for various reasons. The desire to keep the eating disorder a secret may be one reason as to why many incidents and cases are not brought to the attention of professionals. The National Institute of Mental Health states, in their study of 2,980 people reporting eating disorder symptoms, that more than 50 percent of individuals with eating disorders receive treatment for their emotional problems but less than 47 percent seek treatment specific to their eating disorder (National Institute of Mental Health, 2007). According to Rouleau and von Ranson's 2011 study on the potential risk of pro-eating disorder websites, individuals are not seeking other support and treatment because they share tips on how to conceal their eating disorder symptoms. If the victim is able to hide his or her signs of the disorder, that individual will likely avoid treatment and therapy as treatments for eating disorders are often initiated by friends and family members. The Internet serves as an outlet for the victim's innermost thoughts while also concealing their identity. .

As Internet usage continues to grow so must the awareness of its activity. Eating disorder activity is no exception. Much attention has been brought to the issue of cyber-bullying and its devastating effects. Sugarman and Willoughby (2013) explain that advances in technology are extensions of human behavior and culture. Violent behavior has been altered due to this advancement in the increase of disinhibition. The anonymity that the Internet provides removes some of the inhibition humans have in doing and saying things. Although cyber-bullying and eating disorders have respectively different concepts, the important similarity is that their role on the Internet can be just as harmful as their role offline. Sugarman and Willoughby continue with this subject stating that social networking websites permit considerable self-expression but also serve as an arena to harass, humiliate, or threaten.

Online communication is also affecting the course of eating disordered behavior. Some internet sites have been labeled "pro-ana" and "pro-mia" sites; indicating that the sites will provide tips and tools for maintaining the disorder rather than provide support for treating the disorder (Tierney, 2006). In a previous study on the dangers of online communication regarding pro-anorexia websites and their implications for users, practitioners, and researchers, Tierney explored individuals' involvement in web-based support groups. She notes that online interaction enables Internet users from all across the globe to communicate about any given topic but some formats reinforce dysfunctional practices and isolate individuals from society. Eating disorder interaction sites are a protected resort where sufferers openly discuss what is happening to them, what is going on in their lives to trigger their actions, and what dark thoughts lurk in the shadows of their minds. The Internet for some may be an unofficial alternative to therapy.

Wilson, Peebles, Hardy, and Litt (2006) reported in their pilot study of pro-eating disorder website usage in adolescents with eating disorders that the pro-ED sites serve a number of functions. The possible functions include an eating disorder clique that has a negative impact on body image and eating behaviors, a therapeutic environment where anonymous expression of self is available, and a support system which overpowers face-to-face interaction (2006). In conclusion to their study, the researchers found that the use of pro-ED websites may have a negative impact on quality of life and could increase disordered eating behaviors. Visitors of pro-ED sites also have exposure to new weight-loss and purging techniques. Interpretation of website information can range depending on the viewer. The writer's intentions fluctuate from desperately needing an outlet and a feeling of belonging to a community to the desire to compete with other eating disordered people. Brotsky and Giles

(2007) concluded to their study based on a covert online observation into a pro-ED website that individuals participate based off of a desire to simply belong to a safe community with members facing similar experiences. In a separate study conducted by Jett, LaPorte, and Wanchisn (2010) on the impact of exposure to pro-ED websites on eating behavior in college women, pro-ED websites may encourage or reinforce disordered eating behaviors.

Internet communication is important to look at in eating disordered behavior. Human behavior is not easily predictable and no two people are exactly the same. This research engages in a process of searching for common concepts portrayed by several individuals on personal blog pages. The goal is to determine the content of these blogs and see what tips or supports are being offered in the areas of prevention, treatment, education, and recovery of eating disorders. Although each victim is different in their own respect, common concepts will emerge throughout the content analysis linking the individual characteristics to common themes in online eating disorder sites.

The goal of this study is to examine blogs and their content using a qualitative approach. Grounded theory will be utilized in order to pull consistent themes from the blogs. As explained by Chen and Boore (2009) in their description of this approach for their exploration of using a synthesized technique for grounded theory in nursing research, the aim of this particular approach is to discover patterns and understand how people define their reality via social interactions.

Relatively little research is available on the existence of personal eating disorder blogs as opposed to pro-ED websites. The present study offers awareness and a fresh theoretical interpretation of the concepts collected from the data. This particular research addresses the crucial need for investigation and inquiry into media pertaining to eating disorders, and more specifically, to online blogging. Blogs can act as an interactive and anonymous online diary. About one third of eating disorder sufferers ruminate about their stressful experiences. This may suggest incomplete emotional processing (Schmidt, Bone, Hems, Lessem, & Treasure, 2002). The writer is given freedom by anonymous blogging to express ruminating feelings, thoughts, and emotions about triggers, therapy, medications, doctor visits, and any other haunting experience they could be subjected to. Lapinski (2006) notes in her content analysis study of pro-ED blogs that the Web may be used as a tool for exchange of inaccurate information and promotion of unhealthy or destructive behaviors.

Method

The study used grounded theory to produce a qualitative analysis of data content. Specifically, the method of grounded theory has been employed in this study. Grounded theory allows the researchers to look at a large amount of information, the personal blogs, and compile the data into discrete categories based on themes that are found within the data. This is a document analysis wherein each blog page acts as an anonymous diary. Although each victim is different in their own respect, common concepts appeared throughout the content analysis. Common concepts were coded line by line and put into piles based on category construction (Corbin & Strauss, 1990). Satiation point was reached once no new concepts emerged that led to additional categories of behavior. Concepts were selected for inclusive line by line, as each blog entry contains information specific to eating disorder behavior only.

Participants

Fifteen blogs were randomly selected for this study through the Tumblr site. Every other blog site was identified and coded using Grounded Theory. No identifying information

was exposed on the blog site, and the data used in the study was coded and used anonymously. Two Additional blogs following the same procedure were analyzed to ensure the reoccurrence of the common themes. All blog owners self-identified as female. No other identifying information is available on the blog site as this is an anonymous forum for individuals with eating disorders.

Procedure

IRB approval was obtained through a local college to seek out websites that contain personal blogs about eating disorders. Blogs were selected through the Tumblr search engine using the keyword “eating disorder.” Blogs were randomly selected from the results of the keyword search conducted at a local college computer lab with no filters in place. Grounded theory was implemented to produce a qualitative analysis of data content. Patterns were discovered by use of grounded theory to relate similar content of each blog to common discrete categories established throughout the study.

Phrases, images, blog entries, and statistics and descriptions of the blog owner were analyzed through line by line analysis and placed into discrete categories according to grounded theory techniques (Corbin & Strauss, 1990) Concepts were placed in related piles line by line until saturation point was reach and no new categories emerged. Ten main themes emerged and were reviewed by both authors of the study: interaction, negative self-worth, mind and body disturbances, pictures, eating disorder, suicide, diet, exercise, stats, and recovery. Other themes also appeared with less frequency, including trigger warnings, positivity, sexuality, family, drugs, relationships, and art.

Results

In the sections to follow a brief overview is presented regarding the most common themes found amongst fifteen qualitatively analyzed Tumblr blogs use a line by line sorting process. The most frequently occurring (in more than half of the blogs) concepts placed into categories included Interaction, Negative Self-Worth, Mind and Body Disturbances, Pictures, and Eating Disorder. Other less repetitive themes mentioned six to eight times were Suicide, Diet, Exercise, Stats, and Recovery. Additional themes mentioned less than six times were Trigger Warnings, Positivity, Sexuality, Family, Drugs, Relationships, and Art.

Interaction

All fifteen analyzed blogs discussed interaction with other blog users. The owner receives messages from other users and publicly answers each question or comment on their own blog. Questions and comments received by the owner toggle between negative and positive. For example, owners are criticized for their blog content such as self-photographs personal statistics, or their documented eating disordered behaviors. One commenter messaged the owner telling her she was fat, and the owner did not fight back but accepted and acknowledged the criticism, “Anonymous asked: You’re ffffaaaatttt” [sic]“I kknnoowww” (Owner’s Response).

Owners also receive support and compassion from users who appear to metaphorically reach out a helping hand. In regards to the above comment, another Tumblr user messaged the owner to defend her from such harsh name-calling, “[run-like-the-wolf](#) asked: First of all that anon can go boil their head in oil. Secondly you are not an idiot, you CAN recover, right now you are having a set back and that is ok, it is, as long as you get back up and keep fighting which I KNOW you can. Never listen to the words of someone

who is too cowardly to even show their face. Stay strong beautiful girl <3” “Thank you so SO much sweetie xxxx” (Owner’s response).

The responses to the questions and comments vary among individual blog owners. Owners may answer negatively or positively. Negative answers can either be directed towards the commentator or towards the owner who received the comments or question. In self-response, the owner emphasized self-criticism and negative self-worth.

Other examples of interaction included inquiries about the owner’s statistics, the owner writing about interaction outside of Tumblr site, for example with friends, and the owner blatantly stating that she does not support or encourage eating disorders or other forms of harmful behavior, “I DO NOT ENCOURAGE OR PROMOTE SELF HARM IN ANY WAY SHAPE OR FORM. THAT IS JUST HOW I DEAL WITH THINGS. I WILL BE THERE TO HELP ANYONE WHO NEEDS IT.” Some owners also post hotlines for harmful behavior.

Negative Self-Worth

Fifteen out of the fifteen blogs displayed content regarding negative self-worth. Blog owners often referred to themselves as a disappointment as well as fat, disgusting, stupid, ugly, pathetic, worthless, weak, hideous, a failure, damaged, ruined, fragile, helpless, flawed, etc. One blog posted a quote which read, “You don’t deserve to eat. You really don’t. Look at you. You’re fat. Your bones are being crushed under all of this fat. You did this to yourself. Now you have to pay for it. STARVE.” Self-hatred was apparent and self-harm was overwhelming documented on thirteen of the fifteen blogs. Derogatory words and phrases were also used in self-description. These phrases supported the concept of negative self-worth. Some example phrases including “fucked up,” “imperfect,” and “shitty person” appeared on the blogs. These statements were self-directed statements but still have an impact on readers of the blog page.

Mind and Body Disturbances

Mind and body disturbances are negative physical or mental side-effects self-reported to be related to disordered eating behaviors. For example, shaking and dizziness are physical consequences of the blog owner bingeing and purging. Issues such as anxiety, depression, insomnia, borderline personality disorder, body dysmorphic disorder, hallucinations, and stress were consistently reported among the blogs, “I suffer from depression & self harm. I have anorexic tendencies, but I can’t necessarily say I have anorexia due to the fact that I have not been diagnosed. I have anxiety disorder & panic attacks & I’m prone to migraines.”

Nine out of fifteen bloggers wrote about their perceived reflection in the mirror. They suggested negative and distorted perceptions of their mirror reflection. Unhappiness, numbness, loneliness, anger, mood fluctuation, distress, and panic are other examples of concepts that appeared under this category.

Pictures

Each analyzed blog displayed several pictures ranging in content. Photo content included knee-high socks, cats, tea, books, and scenery. More importantly however, were the photos portraying women’s bodies. Visibility of bones was emphasized among the majority of the blogs. Hip bones, rib bones, and back bones were continuously highlighted as well as extremely thin arms and legs paying particular attention to a “thigh-gap.” Five of the fifteen blogs displayed photos of women crying or reflecting a saddened facial expression.

Owners reblogged photos of thin females but occasionally posted pictures of their own face and body. Fit and in-shape females bodies were also represented on three of the chosen blog sites, accentuating toned arms and legs and abdominal muscles.

Self-harm was also a concept of the pictures. Nine blog owners had sites containing pictures of cut body parts such as the arms, legs, and shoulders. Women engaging in the act of purging were also included within this theme. Four blogs depicted purging women at the time of the study. It is worth mentioning that two blogs had pictures of Barbie included in their content.

Eating Disorders

All fifteen blog owners referenced or described their eating disorder in some context. Owners often documented their form of disordered eating, for example anorexia or bulimia, "I've been diagnosed with depression and bulimia." Owners wrote about the behaviors that consequently came with the disorder. Five blog owners described the control of the eating disorder over the owners' life:

I am convinced I am no longer my own person. I am an amalgamation of many different beings, my actions are not my own, my thoughts, even less so, it seems. There is this miserable creature that eats at my insides, and brings with it a suffocating black that extinguishes any good thing. And this anxious creature that claws at my skull, that creates such unbearable agitation and incapacitates me, renders me speechless, unable to concentrate, wipes my mind of all thoughts but that which causes me distress. And this hateful creature that hisses at me to eat less, be less, do more, work harder, push harder, lose weight, punish myself. And this overwhelming feeling of hopelessness and despair that has scratched it's way under my skin and poisoned my blood. I feel as though I am constantly having to placate one creature or another, or all at once, and it is frightening, and exhausting. I've honestly really just had enough.

Five owners claimed that they were not skinny enough or they were too fat to have an eating disorder and five owners openly compared their bodies to other females' bodies. Owners also mentioned their fears as well as their desires, or lack of desires. For instance, one blog stated that the owner has no desire to eat at all. This same owner also had the desire for perfection. The desire to be skinny, to be underweight, and to look sick was apparent throughout the blogs. A fear of food was also obvious through the owners' self-written comments. Bloggers write about eating being weakness and control being powerful. One owner wrote that she felt pleasure from having an empty stomach. Pride coincides with minimal to no consumption. There is also a fear of numeric calories and a fear of becoming fat. Regret immediately follows consumption. Owners also document their binge and purge episodes as well as restricting and fasting patterns for public viewing.

Owners openly discuss their thoughts and behaviors relative to the eating disorder they suffer from. They wrote about their triggers, morbid thoughts, the amount of time they have been suffering from the disorder, side effects such as cold sweats and nightmares, the "high" that follows a purge episode, and the guilt associated with eating. Other examples of thoughts and behaviors documented on the blogs include a fascination with weight and visibility of bones, the exhaustion the eating disorder brings to the victim, the desire to purge feelings away, fainting spells, mood fluctuation, chewing gum to avoid eating, and the amount of weight that the owner wants to lose.

Suicide

Suicide was referenced on thirteen blogs. Users want to give up their efforts and admitted to wanting to kill themselves, “My note. Sometimes I want to die. Okay, it’s more often than sometimes. I really want to die almost all the time. I say I won’t kill myself because I know how much it will hurt my family...but isn’t that what I’m doing? I’m starving myself and torturing my body. It’s a slow, unnoticeable suicide. One day, this can kill me. I am suicidal in more than just my thoughts and dreams, I’m living my life slowly killing myself. I’ve tricked myself into thinking that living with this eating is a lesser form of suicide than simply slitting my wrists. I justify it to myself and make it okay. My family will still hurt, my boyfriend (if he sticks around) will still hurt, my best friend will still hurt. I will still be dead, it just won’t be as soon as I wish. I will still cause the same pain to them, maybe even more. This way, they’ll ask “why didn’t I see her losing so much weight? Why didn’t I notice? Why didn’t I do something?” If I slit my wrists, they’ll wish they had been there for me, but if I die to this eating disorder, they’ll wonder how it progressed so far without their realization of how sick I was. This is not okay. I will still break their hearts. I still consider this suicide, but for some reason, I’m okay with it. For some reason, I accept it. This is my suicide note. This is me giving up. I won’t be dead by tonight, not even by tomorrow, but one day I will be. I’m not currently asking for help. I’m not reaching out, crying for attention, or looking for support. I’m admitting to everyone, including myself, that I am far more suicidal than I realized. If I don’t recover, I will die to this. At this moment, I’m okay with that.”

Suicide warning signs and information about suicide such as hotlines and what it may be (such as distinguishing cutting behaviors from a suicide attempt of taking pills) were noted. Two owners wrote that they have actually made unsuccessful suicide attempts. One owner made a promise to her Tumblr followers that she would not attempt suicide even though she has a desire to kill herself. Another owner wrote that she would commit suicide by starvation. Another owner wrote that it is not suicide if she is already dying.

Diet

Eleven blogs reported the owners’ diet choices. The “zero-calorie” diet and the “ABC” diet were mentioned. One owner wrote that her choice to be vegan was just an excuse to starve. There were logs of the owners’ daily intake. Skipping meals, inadequate calorie consumption, gum chewing as a replacement for food, calorie counting, diet coke, and green tea as a replacement for food were popular among the logs, “for breakfast I had: Whole Grain sesame seed bagel – 250 with butter (1 tsp) – 30 and laughing cow (2 triangles) – 50 passion orange guava BoastHouse drink (about half a serving) – 85 and a fruit salad with berries (1 cup) – 70 black coffee on the side with 1 tsp of sugar – 35 for a total of 501 holy crap but it was all really good and I’m super full and that’s good.” Denial of food and hunger also occurred. One owner wrote that she had dieted since a very young age.

Exercise

Exercise was mentioned in each blog site, mainly describing it as as a purging tool in a bingeing-purging cycle. Owners exercise until exhaustion, in the middle of the night to work off consumed calories, and to lose weight, “624 calories of food, but managed to burn off 406 riding my bike downtown.” Forms of exercise were also documented including the “Victoria Secret” workout, dancing, running, swimming, biking, walking, and various workout videos pulled from the Internet. These behaviors were described in detail, which

may have a negative impact on the reader of the blog, again demonstrating some “tips” of eating disorder behavior.

Statistics

Statistics, in particular body statistics, were logged on nine out of fifteen blogs. Personal records of the owner include height, BMI, body fat percentage, current weight, highest weight, lowest weight, goal weight, and ultimate goal weight. Previous weights and measurements of other body parts were also documented. An example of documented statistics appeared as such, “Stats: Height: 5’4,” Body Fat Percentage: 14.5%, BMI: 18.5, Current Weight: 107.2lbs, Highest Weight: 127lbs, Lowest Weight: 88lbs, Goal Weight: 100lbs, UW: 96lbs. -Measurements- Bust: 32.5in, Waist (at narrowest point): 24in, Hips (at widest point): 31in, Thigh (at widest point): 19in, Calf (at widest point): 13in, Bicep: 10in, Forearm: 8in, Wrist: 6in.” Others important stats kept on some of the blogs were the date of the last cutting incident and updates on eating disorder recovery and relapse. Continuous weight tracking was also a concept of the statistics theme.

Recovery

There was mention of recovery on eight of the fifteen blogs. Seven of the blog owners expressed that recovery was not for them, it was too late to recovery, it was a joke, and the possibility of recovery was weak and unattainable, “This is impossible; I’m really not sure that I am capable of recovery; I certainly don’t *deserve* it.” One owner did mention that she was working towards recovery but there was no evidence of progress. Two owners related recovery to being fit, strong, and working out on a regular basis.

Other Themes

Themes concerning trigger warnings, positivity, sexuality, family, drugs, relationships, and art appeared six times or less among the blogs, but are noteworthy nonetheless. Trigger warnings, positivity, and family were concepts found on six of the analyzed blogs. Trigger warnings were used as a notification to other Tumblr users that the owner’s blog displays images and written posts that relate to harmful behavior which could trigger harmful or disturbing behaviors and thoughts within the viewer, “This is a hell that I would not wish on my worst enemy. With that being said, some posts may be triggering. Sorry, I’m sick. You have been warned.” Trigger warnings were in effect for eating disorders, self-harm, suicide, and depression.

There were some positive concepts expressed on various blogs. Positive concepts regarded activities that the blog owner enjoys such as web-design, cats, reading, yoga, meditation, and writing. There was also a reflection of support and compassion on the blogs. Support was stretched to those who self-harm or are suicidal. There was recognition for the support that was shown from the Tumblr community towards the blog owner and well as recognition of the fact that people are allowed to make mistakes. Some blog owners also showed themselves self-support by posting images, quotes, or entries regarding self-beauty, the effort to “Just Keep Trying” and to keep holding on, and how to correctly measure self-worth.

Four blogs openly expressed support and awareness for the gay and lesbian community. One blog’s sexuality content regarded a harmful sexual history involving molestation, sexual assault, and rape. Family concepts were negative in context. Of the six blog owners who wrote about their families, all six owners had a negative outlook towards

their families. These negative outlooks were described as coming from their families' misinterpretations of psychiatric opinion, one or both parents forcing the victim to eat, and watching the victim causing her to feel uncomfortable and pressured. Parents were also ignorant to disorder and there was anger directed towards the parents. One owner wrote that she resents her mother because her mother made her diet at a very young age. She also hates her father because he is a drug addict and an alcoholic and was very abusive towards the blog owner.

The use of drugs was documented on three blogs. The drugs involved were ecstasy, weed, coke, and abuse of sleeping pills. Sleeping pills were used to avoid bingeing and purging. Some users admitted to love the feeling of getting high, and one user related the rush from bingeing and purging to the feeling of being high. Relationship content appeared on three blogs. One blog owner had a desire to be loved by someone who would be accepting of the person she is. The other two owners had relationship issues. One female used her relationship to further her disorder by spending time with her boyfriend to distract herself from eating. The other girl lost her relationship with her boyfriend because he did not want to take care of her anymore.

Finally, an art theme arose throughout the study. Five blog owners used art to portray their thoughts and feelings. The art form that appeared during the study was either poetry or paintings and drawings. Poetry referred to the owner's lost mind and obsession as well as the eating disorder. There was one poem about beauty. Paintings and drawings depicted a expressively sad girl over a toilet, a painting of a skeleton, a drawing of the ideal perfect body, and a drawing of cut arms.

Discussion

In an age where the Internet is common ground for world-wide human interaction it is necessary to monitor the activity that is taking place. In the realm of eating disorders, victims are anonymously sharing their personalized tips, tricks, rituals, thoughts, experiences, and desires (e.g., Tierney, 2006). Tumblr is an interesting social network because it grants its users anonymity and personalization to each individual blog page. The users mix interaction with other Tumblr bloggers and personal posts and pictures of interest on their pages. Although no two blog users are the same, common themes appeared connecting the individuals in relation to eating disorders.

Analyzing the blogs using a qualitative approach proved to be advantageous. Previous research investigating causal factors of eating disorders was found to be related to concepts in the blogs, such as anxiety, depression, stress, unhappiness, loneliness, and other emotional turmoil. These concepts are significantly linked to onset and maintenance of the disorders (Adambegan et al., 2012). Adambegan et al. also mentioned social withdraw as a behavioral abnormality that plays a role in the disorder spectrum. The externalization of these disturbances to an online community supports this idea.

The negative self-worth theme was apparent on every blog. Vehement language was used by the bloggers as a description of self, expressing words such as pathetic, fat, useless, ugly, hideous, damaged, and disgusting. These were repeatedly employed. Violent behavior over the Internet exists in an extreme form. In this particular case, violent behavior directed towards the self is alarming. In some circumstances the Internet is not solely an arena to harass and humiliate others as Sugarman and Willoughby (2013) pointed out, but a place where people self-humiliate and self-harass as well.

An interesting theme that emerged was the pictures selected to be displayed on the blog owners' pages. Women were shown to have bones protruding through their skin, specifically in the hip, rib, back and collar bone regions. Thin arms, thin legs, and the "thigh-

gap,” or having space between the legs right where they meet in the pelvic region, were highlighted. Women were also crying or saddened. Cuts on different body parts and women purging existed as well. Wilson et al. concluded that exposure to eating disorder material on the Internet may negatively impact life and could increase disordered eating behaviors (2006). The visual display of internalized emotions and desires could increase motivation to maintain the disorder in order to achieve what is represented in the pictures. This is dangerous on a large scale because the pictures are passed around from blog to blog. If one user finds interest on a picture displayed on another user’s blog, they can easily “reblog” the picture to their own where their followers can see. Tierney warns about such activity stating that some online interaction may reinforce dysfunctional practices (2006).

Previous studies reinforce the fact that eating disorder content can encourage disordered behaviors with individuals involved in the online community (Borzekowski et al., 2010, Jett et al., 2010, Lapinski, 2006, Rouleau & von Ranson, 2011, Tierney, 2006, Wilson et al., 2006). Similar to Borzekowski et al., this study stresses that researchers, professionals, and family or friends of an eating disorder victim monitor interactive online communication to gain a new perspective and insight on information that may not be readily available via face-to-face interaction.

Although personal blogs and pro-ED websites have different aspects, the current research supports previous studies wherein online exposure and interaction regarding eating disorders can be harmful. The study also revealed that there was little treatment discussed in the blogs; possibly also supporting the notion that these sites are used for maintaining and not supporting treatment of the disorder. However, this study dissected personal blogs to discover the themes and concepts behind the reason of why such material can be harmful and what information can be useful in aiding prevention, treatment, and education. The purpose of this study was to comprehend what is going on “behind the scenes.” By acknowledging the negative material presented in this study, society can build upon the effort to decrease the prevalence of eating disorders and efficiently approach the issues that currently exist.

One limitation of this study to address is that the blogs are continuously being updated on a day to day basis. This means that the appearance of themes found in this study using the selected blogs may change minimally or drastically if a similar study was completed using fifteen different blogs. More research in this area may lead to new concepts and categories emerging, so continuing this grounded theory process is recommended. Another limitation to this study is the number of blogs that underwent analysis. Tumblr reports that there are 103.2 million blogs hosted by Tumblr, 44.6 billion posts, and 75.3 million daily posts. This research is the first known to implement grounded theory to pull themes from the Tumblr blogging network. As such, other themes and concepts may be in existence that were not identified in this study. Every other site was chosen for selection in this study up to 15 blogs, however, that is still a small number of blogs reviewed. Additionally, they were found using a keyword search and different terms may have allowed other blogs to emerge on that given day and time.

To assure the resulting content of this study, future studies may analyze a greater number of blogs to defend the themes and continue the study over a longer period of time to account for the ongoing blog entries. This will also give the researcher an opportunity to discover, if any, new themes. Another recommendation for further research is to contact the blog owners and administer questionnaires to further support the findings. Finally, future research may include quantitative techniques to determine how individuals with ED view personal blogs and if those results coincide with the themes that have emerged here. Overall, this research contributes to the field of eating disorders in that it uncovers another mechanism being used by females with eating disorders to possibly support their continued identity of disordered eating, similar to findings of “pro-ana” and “pro-mia” websites (Tierney, 2006).

This will help to raise awareness of the possible pitfalls of online communication as a treatment tool. Here are some resources on APA style that you can use to quickly address the earmarked errors in citation and style. I included some samples of the text that are specific to your study.

<http://www.library.cornell.edu/resrch/citmanage/apa>
<http://www.apastyle.org/>

Undated Web site content, blogs, and data

For content that does not easily fit into categories such as journal papers, books, and reports, keep in mind the goal of a citation is to give the reader a clear path to the source material. For electronic and online materials, include stable URL or database name. Include the author, title, and date published when available. For undated materials, include the date the resource was accessed.

Blog entry

Arrington, M. (2008, August 5). The viral video guy gets \$1 million in funding. Message posted to <http://www.techcrunch.com>

Audio-visual media

References to audio-visual media must include the following elements: name and function of the primary contributors (e.g., producer, director), date, title, the medium in brackets, location or place of production, and name of the distributor. If the medium is indicated as part of the retrieval ID, brackets are not needed.

Short quotations

If you are directly quoting from a work, you will need to include the author, year of publication, and the page number for the reference (preceded by "p."). Introduce the quotation with a signal phrase that includes the author's last name followed by the date of publication in parentheses.

According to Jones (1998), "Students often had difficulty using APA style, especially when it was their first time" (p. 199).

Jones (1998) found "students often had difficulty using APA style" (p. 199); what implications does this have for teachers?

If the author is not named in a signal phrase, place the author's last name, the year of publication, and the page number in parentheses after the quotation.

She stated, "Students often had difficulty using APA style" (Jones, 1998, p. 199), but she did not offer an explanation as to why.

Long quotations

Place direct quotations that are 40 words, or longer, in a free-standing block of

typewritten lines, and omit quotation marks. Start the quotation on a new line, indented 1/2 inch from the left margin, i.e., in the same place you would begin a new paragraph. Type the entire quotation on the new margin, and indent the first line of any subsequent paragraph within the quotation 1/2 inch from the new margin. Maintain double-spacing throughout. The parenthetical citation should come after the closing punctuation mark.

Jones's (1998) study found the following: Students often had difficulty using APA style, especially when it was their first time citing sources. This difficulty could be attributed to the fact that many students failed to purchase a style manual or to ask their teacher for help. (p. 199)

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Article Citation

Gies, J., & Martino, S. (2014). Uncovering ED: A qualitative analysis of personal blogs managed by individuals with eating disorders. *The Qualitative Report*, 19(57), 1-15. Retrieved from <http://www.nova.edu/ssss/QR/QR19/gies57.pdf>
