Pro-Anorexia Communities within Social Media Platforms: The Consequences for Vulnerable Young People

Introduction:

Eating disorders alone encompass a range of diagnoses that contain ever-expanding cognitions and behaviours attributed to eating disorder symptomatology. Statistically, there is an increasing trend in the number of young people suffering from clinical eating disorders with 50% of people engaged in treatment achieving recovery (Treasure et al, 2002). Young people are particularly vulnerable to displaying disordered eating behaviours as the disease is predominantly established during adolescence and early adulthood, and uncommonly during adulthood (Thornton et al, 2017). Eating disorders are concerned with obsessions around an individual’s appearance, weight and how their body looks, that leads on to inaccurate thoughts about their body image (Schaefer and Thompson, 2018) which is why eating disorders are one of the most morbid psychiatric disorders that have a wide-reaching and long-lasting effect on all areas of human development (Dane and Bhatia, 2023). Eating disorders are found to suffer in mostly in females, although they are becoming increasingly common among males (Star, Hay, Quirk and Mond, 2015). Studies have highlighted the link between adolescent development and risks to brain development that eating disorders have, from inadequate nutrition and increased psychological distress (King et al, 2018) contrasted by a lack of people being able to access treatment for their eating disorder, often leading to more severe presentations (Allen et al, 2023).

As a key influence on young people, society has the potential to have positive effects, however Ayton (2020) suggests that society is at fault in promoting eating disorders through the sense of ‘diet culture’ that is sustained by a fear of gaining weight because of the stigma. As a consequence of social stigma, losing weight becomes key and can be a risk factor for developing an eating disorder. Being considerate of young people and their emotional vulnerability, social messages that display weight loss alongside the stigma of being ‘unhealthy’ and health campaigns regarding weight loss, increase the risk of young people developing disordered eating. Thus, creating obsessive thoughts and behaviours that are indicative of disordered eating behaviours. Contradictory to this perspective, eating disorders are known to be a result of a range of cognitive and emotional changes, both biological and environmental, as well as social factors and behaviours (Dane and Bhatia, 2023), which displays the complexity of eating disorders. Owing to eating disorders as complex illnesses is the importance of effective treatment, specifically early intervention treatment models (Austin et al, 2021). Recent research suggests that early intervention eating disorder services can improve patient outcomes in sustained eating disorder recovery (National Institute for Clinical Excellence, 2017) which in young people can mean a decreased amount of time with an active eating disorder, providing the psychosocial element of treatment (Austin et al, 2021).

The rise of the internet era has brought new possibilities and new challenges to society, and one prominent factor in influencing society is social media. Social media disseminates social messages quicker which increases the audience that are receiving these, which include body image ideals, weight loss and the idea of being healthy (Voelker, Reel and Greenleaf, 2015). Young people are increasing gaining access to social media which expands their exposure to harmful messages, then coupled with external social pressures, pushes young people to obtain the idea of perfection. These messages that are spread through social media, as well as the ability to determine online appearance and use filters for pictures, provides the vulnerability for disordered eating behaviours and mental health concerns (Dane and Bhatia, 2023). Underpinning the idea of altering online appearances is the desire to change oneself in order to meet the perceived societal standards which are known to be a precursor to displaying disordered eating behaviours. BEAT (n.d) proposes that social media regulations and guidelines designed to protect young people's vulnerabilities often fail them, due to not being applied to situations that are harmful as well as social media providing the view that dieting, weight loss and behaviours designed to alter appearances and weight are normal, when in actual fact these are extremely dangerous.

My lived experiences of having an eating disorder have fuelled this review into eating disorders and social media. My interest in this area comes from experiencing an eating disorder as a young person while having access to the internet and social media. This access exposed me to a wide range of negative content that sustained my eating disorder and continued to appeal to eating disorder cognitions, mostly from a lack of treatment. These messages backed the longevity of my eating disorder and continue to impact the lives of other young people, providing my passion for examining the chain reaction between social media and eating disorders in young people. ￼

Reference to young people counts for people aged between 13 and 17 years-old, and in the context of young people with eating disorders, this means that they self-identify as having an eating disorder or who have been clinically diagnosed by a qualified professional (BEAT, 2020). Recovery refers to a specific amount of time that an individual has not engaged in any behaviours that are indicative of an eating disorder (Treasure, Duarte and Schmidt, 2020). In this paper, the term ‘diet culture’ will be used in a broad way to refer to instances in society that promote weight loss, the use of extreme diets and particular body images (Jovanovski and Jaeger, 2021). The use of social media includes all applications used as a way to connect with others, such as Instagram and TikTok (Gregersen, 2024). Pro-anorexia communities refer to online groups of people who promote eating disorders as a lifestyle that incorporates the promotion of behaviours and actions that are aimed at controlling weight (BEAT, 2020).

This paper explores the concept of ‘pro-ana’ communities on social media will be examined alongside the effects this has on young people with access to the internet and social media applications. Then the influence society has on promoting eating disorders will be examined, specifically how society normalises disordered eating behaviours and the effect of ‘diet culture’ on young people. Finally, at a government level, it will consider the methods adopted to combat the rise in prevalent eating disorders and the efficacy of such initiatives. Furthermore, this essay will attempt to disprove the notion that pro-ana communities are positive for young people, that society does not promote eating disorders and that government initiatives are achieving a reduction in eating disorders.

In the wake of the Covid-19 pandemic, the use of the internet and social media continues to rise leading to the potential for social media to have a negative impact on young people. The use of social media is an escalating public health concern that has the potential to increase the promotion of disordered eating behaviour through content around dieting habits and body idealisation (Robertson et al, 2021). Increases in access to social media harms could translate into an increase in demand for eating disorder services in the UK (Robertson et al, 2021). This begs the question of why is there a lack of young people engaged in treatment for eating disorders? And given the knowledge of social media harms, why is eating disorder promotion still a major issue on the internet and in society?

Methods:

A range of methods were employed when searching journal databases for peer-reviewed articles pertaining to ‘pro-ana’ on social media and the relevance to adolescents, society and the government as a systematic approach using the three-level model to analyse the impact of ‘pro-ana’ at individual, social and institutional levels. Using a multi-level model to understand the scope of ‘pro-ana’ communities allow a wider inclusion of the effects on varied groups that can be categorised into topics that precisely catalogues the main ideas. Focusing on the impact of ‘pro-ana’ online communities narrow down the target audience of this literature review to three distinct groups to explore the influence of eating disorder promotion, which excludes the focus specifically on the content of ‘pro-ana’ communities. The benefit of this approach is that the research is more specific and useful in applying a review of literature to future research areas as well as disseminating the relevant information into groups that can be easily translated. However, the method that focuses on the specific content of ‘pro-ana’ communities is not appropriate as this would restrict the scope that could not be applied to sweeping social and political recommendations as well as limiting the available research that is not beneficial in a literature review using a comprehensive subject.

The main studies utilise quantitative methods which provide numerical data that translates into key ideologies on the scope of eating disorder behaviours online that can be applied to the targeted population. Quantitative approaches allow for deeper insights into ‘pro-ana’ communities, benefiting the existing literature and knowledge through detailed analysis to ensure that conclusions are reliable and relevant to the topic. This form of research requires researcher education to effectively carry the research out, meaning that this adds to the difficulty of completing this type of research. The main types of methodological research comprised of literature reviews, scoping reviews and surveys which broadened the available knowledge.

There was limited availability of research that utilises qualitative approaches which reduced the potential for narratives to be used to support quantitative findings. Qualitative research is often more useful in exploring the lived experiences of the sample which increases flexibility in gaining wider knowledge that may not be available when using numerical approaches. However, the subjective nature of qualitative methods reduces the replicability of the results and is open to researcher bias that impacts research application and the ability to generalise based on this research. Narratives reviews and phenomenological analysis enabled accurate application of the research to the target population that expanded initial thinking.

The databases used were specifically focused on psychological and psychiatric research both in the context of children and adolescents and adults. By using PubMed, JSTOR, ScienceDirect, PsychINFO and EBSCO there was improved accuracy of literature relevant to the research question. This ensured the focus of literature searches was within the professional discipline of psychology and psychiatry as well as using advanced searches to further narrow down the available articles to ensure applicability. The hits that existed in these searches averaged 2,000 which is a fairly small set of searches in the context of research articles available, which was categorised into groups that directly included all terms and benefited the research aim and the research that included some terms and a limited relevance. The group with limited relevance was not retained and the relevant literature was sorted into three groups using the multi-level scope and filtered through to ensure accurate literature was used. This left the final range of literature analysed at 65 articles.

Several terms were used in the literature search that derived from the research question and the objectives that ensured relevance and an expansive literature pool that benefited the topic. These terms provided accurate and wide research and existing literature that prioritised the research aims and questions to ensure effective information and subsequent analysis. The terms used were as follows: ‘pro-ana’, ‘pro-anorexia’ ‘communities’ ‘UK’ ‘social media’ ‘disordered eating behaviours’ ‘body image’ ‘psychological impact’ ‘adolescence and young people’ ‘lived experience and narratives’ ‘society’ ‘diet culture’ ‘mixed methods research’ ‘psychosocial effects’ ‘eating disorders ‘anorexia nervosa’ ‘eating disorder services’ ‘mental health issues’ ‘previous/no contact with eating disorder services’ ‘advertising and media’ ‘normalisation’ ‘bullying’ ‘government’ and prevalence’.

The inclusion criteria which dictated the use of each journal article focused on ‘pro-ana’ ‘anorexia nervosa’ and ‘eating disorders’ as eating disorder promotion predominantly focuses on anorexia rather than other eating disorders, however, ‘pro-ana’ communities include behaviours that are indicative of other eating disorders. A target population of adults were excluded from being included as the aim of the literature was on adolescents and young people. By focusing on articles that were either based in or included the UK as improves the accuracy of knowledge pertained and application to the topic. A focus on the psychosocial effects of eating disorder promotion excluded the biological effects as the focus is on the psychological and social effects rather than the pathophysiology of eating disorders. Both qualitative and quantitative research was sampled and sorted against the published year to be post-2019 to include multiple perspectives. While emphasising society, social media accounts, diet culture and lived experiences, research based on those in contact with eating disorder services and with diagnoses of co-morbid mental health disorders was rejected based on unstable psychological difficulties and ethical concerns regarding the ability to consent to the original research.

The impact of ‘pro-anorexia’ communities in adolescence and society on mainstream social media

The damage of eating disorders and disordered eating behaviour is well documented in both historical and recent literature, often accounting for the underlying compulsion of control and unequal power imbalances (Sharman, Rolfe and Morrey, 2024). Control manifests itself in food intake restriction, compensatory behaviours designed to curb weight gain that includes over-exercise and the use of diuretics. This control tends to overtake all aspects of the individuals and becomes the sole priority (Sharman, Rolfe and Morrey, 2024). From the perspectives of ‘pro-ana’ communities, this need for control is supported by the creation of safe environments, and the sharing of ‘tricks and pictures that glamorise eating disorders (Ging, 2020). Within the literature, the most common themes of the interaction between ‘pro-ana’ communities and adolescents are insecure body image, segregation from society, competitiveness, the adoption of an anorexic identity, bullying and peer influences.

Body image

The idea of body image disturbances consists of weight and visual perceptions that are disseminated within society, the developmental vulnerability of adolescents and media representations (Son and Kwon, 2024) supported by stigma due to obesity fears as well as socialisation on acceptable body types. Both traditional media outlets and the online world have been the catalysts of widespread body perceptions promoting physical thinness, however prominence in achieving this goal has been the internet and social media (Ferguson, Munoz, Garza and Galindo, 2014). Adolescence comes with increases in social and emotional turbulence, and in the age of the internet, young people turn to online communities as a source of likeminded individuals and relationship formation, coincidentally, the space where weight loss is pushed (Sukunesan, Huynh and Sharp, 2021). Vulnerability combined with the need for social interaction, exploits this to close the gap on furthering the anorexia agenda in society. Studies by Prichard, McLachlan, Lavis and Tiggemann (2017) echo this point, that a lack of contentment with personal body image escalates negative cognitions, creating a back-and forth argument that ultimately prioritises messages shared in ‘pro-ana’ communities. Previous research carried out by the UK government proposed that 95% of participating adolescents would change some aspect of their appearance given the chance (Health and Social Care Committee, 2022). This clarifies the desire of young people to change themselves and society supporting this via the media, which more than bolsters this vulnerability, but is more than institutionally unregulated (Dane and Bhatia, 2023).

Secure environment

‘Pro-ana’ communities have the rare opportunity to provide a space where individuals come together to discuss themselves and disordered eating behaviours, often excluded within mainstream social interactions due to the disregard for spreading pro-eating disorder messages (Sukunesan, Huynh and Sharp, 2021). In order to create a cohesive online community, interchangeable hashtags are used to demonstrate a user that posts content in favour of eating disorder promotion (Cobb, 2016), respectively signifying the weight loss, intake restriction rhetoric. This likeness experienced in the peer interactions via pro-eating disorder social media communities serves a purpose in the sense of both self and others’ validation, that is, the idea of being accepted as ‘anorexic’, thus signifying acceptance in a social community (Sharman, Rolfe and Morrey, 2024; Rich, 2006). The desire to gain validation, to be accepted, more complex than simply a need to be socially accepted in their peer group due to the disregard society often holds (Brelet et al, 2021). This is where ‘pro-ana’ communities bridge this gap to provide the social sanctuary, we, as humans, desperately desire. This is one of the underpinnings of ‘pro-ana’ groups that maintain their constant discourse. This space provides both social interaction and emotional agreement (Yeshua-Katz, 2015) making others feel a part of something less lonely, whilst the competitiveness thrives to compare thoughts and behaviours which push individuals away from mainstream society and into a world that promotes eating disorders.

Competitiveness

Underpinned by the strive for gaining control is an exacerbated desire for competition between those displaying eating disorder behaviours, feeding into the idea of becoming the ‘best anorexic’ (Osborn, 2023) that demonstrates the unsettled power dynamics between individuals with eating disorders, themselves and society with disordered eating behaviours dictating self-perception and self-esteem (Chang, 2020). Competitive behaviour on social media has been a widely accepted phenomenon with recent research suggesting that the degree of competition between users has increased during the transition from blog posts to mainstream social media, particularly evident in Instagram and TikTok (Ging and Garvey, 2018; Logrieco et al, 2021). Given the high degree of societal competition and social media competition, there is little attention given to the two, which indicates a link between them, however, arguments question this interlink, being the competition which engendered the eating disorder rhetoric, and the competition which upholds and protects such internalised cognitions. Assorted studies have commented on the link between eating disorder diagnoses and competitive cognitions (Datta, 2021; Lowe et al, 2001; Mendes and Ferreira, 2020) however a common thread within the literature is the lack of specific examination of topics relating to eating disorders.

Anorexic identity

Anorexic identity is developed from the need to fit in with others and lacking the opportunity to do so (Sharman, Rolfe and Morrey. 2024) where ‘pro-ana’ online communities bridge this gap to provide a space that both motivates and accepts those with disordered eating behaviours, glamorising, what is widely known as behaviours that have negative consequences on physical health and wellbeing (Sharman, Rolfe and Morrey, 2024). O’Connor et al, (2021) infers that because of the social stigma towards those with eating disorders, they find solace online in a community with those who they can relate to without suppressing the ‘anorexia’ part of themselves. The social stigma that can become ingrained within individuals and form internalised stigma, provides the wherewithal for seeking out similar individuals (Rich, 2006) and is sustained through peer interaction, completely based on competitive cognitions that thrive within individuals with low self-worth and self-esteem. The cyclical relationship that endures individualised anorexic identity begins from a sense of segregation from the social world, pushing onto engagement with ‘pro-ana’ communities online that increases the competitive obsessions within eating disorder psychopathology, becoming visible traits that further isolated individuals from society (Rich, 2006).

Bullying and peer relationships

Adolescent experiences of bullying and the notion of bullying itself has long been discussed in relation to eating disorders, particularly focused on weight and physical appearance (Day, Bussey, Trompeter and Mitchison, 2022). The significance of this is, as previously stated, adolescence can be emotionally challenging and with bullying behaviour most common among children and young people, the potential of disordered eating behaviours that have clinical importance, is dumbfounded. Like in-person or mainstream online victimisation is the type of bullying seen within pro-eating disorder channels, that is, interactions which promote eating disorder behaviours (Day, Bussey, Trompeter and Mitchison, 2020), such as competition on lowest weight or smallest daily intake under the idea of ‘bullyspo’. The idea behind seeking acceptance rather than rejection online backfires, albeit in a lesser severe way than stereotypical bullying experiences, which could explain the continued interaction within such online communities, as ‘the less of two evils. Explorations into this sub-topic (Copeland et al, 2015, Cooke-Cottone et al 2016, Forney et al, 2019) positively associated experiences of bullying with the onset of either clinical or sub-clinical eating disorder diagnoses.

Sociocultural influence on eating disorders during adolescence:

Both social and cultural influences on eating disorders are known to have an unprecedented impact on sufferers and wider society. From the social perspective, dieting and the weight-loss industry often promote a particular body image that can be damaging to individuals vulnerable to eating disorder development and those with established eating disorders. Culturally, the life-long socialisation starting in the home and progressing to wider society through employment and use of the internet, eating disorder behaviours and related messages are disseminated at an alarming rate. Overall, incorporating the sociocultural aspect of eating disorder prevalence can offer insight into the proportionately negative effect this has on adolescents and the development of eating disorders.

Media and Advertisements

Acknowledging the substantial effect that the media can have on the development of eating disorder behaviours, the UK government in conjunction with independent regulators have commissioned further research into the influence of the media specifically on the domains of body image and perception (BEAT, 2020) in the interest of reducing social pressure of conforming to stereotypical body concepts informed by gender roles. Notably, the media which is often associated with dispersing messages on a socially mass scale, depicts women’s bodies in ways that make them more appealing to society, particularly in the sense of beauty and fashion industries, ultimately reinforcing unhealthy relationships with food and dieting (Jovanovski and Jaeger, 2021) that can be seen to underpin the adolescent development of eating disorder behaviours. Both society and the media industry often narrowly focus on appearance which can create a hyperfocus on the physical representations of female bodies (Jovanovski and Jaeger, 2021) that underpins the stigmatisation of female bodies which resist the ‘thin-ideal’ proposed (O’Hara et al, 2021). In combination with the Covid-19 lockdown and the potentially harmful eating practices that have the potential to cause people with eating disorders considerable harms (Robertson, Duffy, Newman, Ates and Sharpe, 2021). The media dissipates images which are indicative of the thin-ideal and is increasingly pervasive within Western media with the weight-loss industry actively promoting this (Swartz, 1985).

Socialisation

Traditionally, socialisation refers to learning socially acceptable norms and values which are distributed through home and familial environments as well as social institutions such as religion, education and employment. Of particular concern to adolescent development is socialisation through social media and the impression this can have on disordered eating behaviours, gaining traction over the 21st century (Frieiro et al, 2021). Social connection to others via the internet is often complicated by the sharing of images which depict glamorised disordered eating behaviours (Frieiro et al, 2021), including intermittent fasting and diets revolving around less than 500 kcals a day, combining to increase the pressure on adolescents to fit into this body bracket based on the perceptions of others (Levesque, 2011). Consistently within eating disorder research focusing on the sociocultural context of eating disorders, the role of the internet has been positioned as one of the most influential risk factors in eating disorder development, however this is one causal factor that is not shared by the general public (Blodgett Salafia, Jones, Haugen and Schaefer, 2015), with blame placed on the individual rather than a group of connected risk factors. Although, more recent research (Button and Warren, 2009) has suggested that the wider public are more aware of the media’s impact on the development of eating disorders rather than those suffering from an eating disorder, which potentially accounts for the lack of insight in those who suffer from such disorders. A paradox worth noting is that the public generated a prominent level of stigma towards people suffering from eating disorders, potentially impacting the way they view themselves and their degree of insight into their eating disorder (Becker, Arrindell, Perloe, Fey and Striegel-Moore, 2010).

Diet culture

Diet culture originates in the anti-dieting movement which resists the idea that society endorses dieting as a socially defined status to which an individual meets the idealised depiction of various female and male gender roles (Jovanovski and Jaeger, 2021). Naturally, feminist-backed theoretical knowledge positions the achievement of ‘thinness’ as a patriarchal notion which comments on the relationship between female sexual objectification and women being seen as ‘housewifes’ (Bartky, 1990). Furthermore, dieting and food restriction can potentially be linked to wider gender-based inequalities that include education, employment, social power dynamics (Orbach, 1986) and socialisation as a representation of the internalised patriarchy women have often been subjected to (Wolfe, 1990). The diet-culture influenced body image ideal is often seen as unattainable by academics and those with lived experience, nevertheless, people suffering from eating disorders still attempt to attain this type of body which is often taken to an extreme in which they surpass the ‘ideal’ body image which contradicts their original aim of ‘fitting in’, having a body which is ostracised within mainstream society (Blodgett Salafia, Jones, Haugen and Schaefer, 2015). Alongside the ‘thin-deal’ promotion, diet culture has uprooted the idea of internet-based support and promoted applications and wearable fitness accessories which further track diet, exercise and health, and more increasingly being used by those with eating disorders as a form of promoting eating disorder behaviours (Eikey et al, 2017). With diet culture inexplicably focusing on weight and food consumption, focusing on eating and ‘working off’ these calories could contribute to the increase in eating disorders (Ayton and Ibrahim, 2020), specifically among adolescents in a society that values weight over general health and wellbeing.

Public health and government influences on eating disorder prevalence:

A key understanding of the individualised and social risk factors for both formal diagnosis of eating disorders and eating disordered behaviours has the potential to inform both government service provision and future research to provide innovative and evidence-base treatment options that are effective at reducing the symptomology and the severity of eating disorder presentation (Barakat et al, 2023). This is of scientifically and theoretically based importance as research should continually translate into service delivery and provision, however contemporary research (Penessi and Wade, 2016) suggests that there are limited opportunities for factual research to influence this development.

Anti-obesity campaigns

The consumption of food has long been a common influence on the development of eating disorders, particularly through the lenses of what is considered ‘good’ and ‘bad’ foods, which echoed by lived experience testimonies to determine the degree of body positivity, self-image and guilt (Jovanovski and Jaeger, 2021) displaying the complexity of how bodies are socially perceived and thus internally perceived. Particularly within Western culture, food invasively positions body looks over health, with a wide range of diets that are each considered to be superior to the other and focusing on external social perceptions rather than contentedness with the self (Jovanovski and Jaeger, 2021).

As a charity that advocates for eating disorder treatment and prevention, BEAT campaigns to the government and public health departments for anti-obesity campaigns that are inclusive of body positivity and promote health overweight loss in a society that has the possibility to overvalue thinness. Furthermore, BEAT brings attention to some campaigns that tackle childhood and adulthood obesity on a national scale, namely ‘Couch to 5K’ and ‘100 calorie health snacks’ (Public Health England 2021) which all have the potential to increase adolescent vulnerability to disordered eating behaviours. the attention to the potential negativity that such campaigns foster, provides an evidence-base for the government to amend campaigns to create a more body positive initiative.

On the other side, public health campaigned aimed at reducing the health and social impact of obesity, national initiatives can work to improve health habits among the general population while limiting portion sizes and calorie intake (Austin et al 2021). This demonstrates the positive side of anti-obesity campaigns, suggesting that adopting campaigns that align with society and public perceptions can promote a more inclusive and effective initiative. Accounting for the obesity epidemic within Western Society, the socially constructed notion of reducing weight and changing physical appearance often take superiority (Ayton and Ibrahim, 2020).

Adolescent eating disorder services

Through providing research-informed eating disorder services, prevention is moreover promoted when compared with reactive services attempting to treat fully established eating disorders as this heightens the risk for complex psychological disorders and widened impact of eating disorder symptomology (Becker and Stice, 2017). Within the same vein Bryant et al, (2022) suggested that health and social care practitioners frequently fail to attentively assess the potential for developing eating disorders which are known to alter attitudes towards help-seeking, receiving treatment and recovery rates.

The majority of papers regarding eating disorders and prevention programmes advocate for inclusion of body image issues and body positivity as a focus in preventing eating disorders and their impact as a rejection of the thin ideal from socially influenced domains (Bardone-Cone, Thompson and Miller, 2018) to mitigate the isolation and wide-spread negative body images inherent within disordered eating behaviours and thoughts. Preventative eating disorder services is known to be increasingly important, however more recent research suggests that this is not applied within NHS eating disorder services (Allen et al, 2023), demonstrating a gap in service provision.

The literature on child and adolescent eating disorder services supposes that current programmes are ineffective, with recovery rates being half (Treasure et al, 2022). This is supported by Allen et al (2023) with research demonstrating that most individuals who suspect they are experiencing an eating disorder fail to gain access to treatment in time to deal with the issues before they increase in severity and are comparative to a formalised diagnosis. In the context of the pandemic, wait times and a backlog of patients has increased waiting for assessment and treatment (Allen et al, 2023) which conflicts with the NHS England supposition that all people who require help and support should receive this as early intervention (NHS England, 2019). rather than reactive, critical health-based services that often operate on a day patient or inpatient basis.

Health and Social care guidance on the diagnosis and management of eating disorders during adolescence

In the context of adolescent eating disorder services there are a range of well-known and preferred types of interventions aimed at treating eating disorders. Following assessment and diagnosis of Bulimia Nervosa, Cognitive Behavioural Therapy adapted specifically to eating disorders (CBT-E) adopts a thoughts and behaviour modification model by analysing negativity and changing this into positive behaviour modification and improvement of self-belief that includes perception and shame (Fairburn, Cooper and Shafrtan, 2008). The evidence-base for using CBT-E as an effective intervention is profound, acknowledging the positive impacts this has on eating disorder presentation and severity (Bardone-Cone, Thompson, and Miller, 2018).

Within treatment for Anorexia Nervosa (AN) in child and adolescent mental health services, family-based therapy is a first-line approach offered as an integrated approach to a diagnosis of AN, through supporting the family as a unit to treat the eating disorder (Bardone-Cone, Thompson, and Miller, 2018). A family-based technique has been proven to tackle the main issue of AN, this being the restoration of healthy weight and BMI (Byrne et al, 2015).

More recently South London and Mausdley NHS Foundation Trust have pioneered the First Episode Rapid Early Intervention for Eating Disorders (FREED), a programme that is solely focused on early intervention strategies with a particular emphasis on internet-based appearance positivity, provided in the formation of connections with other NHS mental health trusts to create a national network of prevention programmes to tackle eating disorders in their early development (BEAT, n.d), as a way to reduce the pressure on formalised eating disorder services for children and adolescents.

Discussion:

Eating disorder behaviours and disordered eating behaviours are interchangeable terms that include behaviours such as calorie counting and food intake restriction, which are included in diagnostic criteria as behaviours of an eating disorder. Outlined through this review is how the promotion of eating disorders online impacts the holistic development of young people, how society reinforces this promotion of eating disorders and finally, how professionals and the government work to combat the rise of eating disorders among young people, that accounts for the ranging impact of eating disorders and the pressure on social institutions to reduce this.

This is demonstrated in a large body of research that focuses on broad aims and the use of different methods to undertake such research. The limited specificity available provides the basis for future research implications that narrowly research eating disorder psychopathology, which can benefit the existing knowledge rather than add broad generalisations and improve research reliability. Much of this knowledge is of high-quality, scientifically reliable, and generalisable, in addition to being replicated, thus reinforcing the relationship between bullying, and eating disorders. In contrast, is a lack of attention paid to bullying experienced by adults and the link to eating disorders, potentially because of the social imperative to protect the vulnerability of children or down to the institutional backing given to securing positive outcomes for children and young people.

Most worrying is the type of content on social media, that gives reference to several ‘fad diets’ often leading to poor health and unhealthy ways to lose weight rapidly, is known to cause harm in encouraging disordered eating behaviours. Therefore, the systems designed to protect young people online fail them and widen the influence of disordered eating on young people, increasing their likelihood of developing an eating disorder, which is significant in the context of rising mental ill health among young people. The resistance of socially accepted body image is the battle between perfection and being ‘too thin,’ too much and too little either way suggests social exclusion, meaning the negative content has this ability to continue as damaging (Dane and Bhatia, 2023). However, the main premise of diet culture focuses on losing weight in a society which values weight over general wellbeing and health, with disordered eating increasing in a society that sees obesity as a health epidemic, in which the interlink between society and dieting heightens the risk of eating disorders and restrictive food intake (Ayton and Ibrahim, 2020).

The UK targets for healthcare on treating eating disorders aims to provide appropriate treatment as quickly as possible (NHS England, 2019) which comes from a preventative approach that limits health and wellbeing risks (Allen et al, 2023). However early intervention is currently a theoretical concept and has not been integrated into eating disorder services (Allen et al, 2023). Awareness of limited treatment access and engagement, there has historically been a renewed interest in improving child and adolescent eating disorder services through new ways to access services that include self-referral (Allen et al, 2023) which has been stopped due to the current pandemic. Similarly in the same study, Allen et al (2023) found that applications have been used since the end of the pandemic as a way of appealing to young people and improve engagement in eating disorder recovery.

The obsessive nature of eating disorders warrants further investigation as the literature suggests the need for competition derives from society, thus, further complicating the ‘pro-ana’ landscape and the far-reaching consequences of engagement with such content. Yet the existing knowledge base around eating disorders offers few objective accounts, with the increase in subjective research dampening the validity and generalisability of major works.

In the context of changing social fabrics, eating disorder promotion and the impact this has on various social institutions is unparallelled, eating disorders are known to impact the lives of 13.9 million people globally (Global Burden of Disease Study, 2019) a number that could be higher, given the limited number of sufferers accessing health and social care services for issues related to eating disorder behaviours.

Conclusion:

The obsessive nature of eating disorders warrants further investigation as the literature suggests the need for competition derives from society, thus, further complicating the ‘pro-ana’ landscape and the far-reaching consequences of engagement with such content. Yet the existing knowledge base around eating disorders offers few objective accounts, with the increase in subjective research dampening the validity and generalisability of major works. Thus, concluding that the complex implications of eating disorder promotion on adolescents encourages further research into this domain.

References:

Allen, K. L., Mountford, V. A., Elwyn, R., Flynn, M., Fursland, A., Obeid, N., Partida, G., Richards, K., Schmidt, U,. Serpell, L., Silverstein, S,. (“023) A framework for conceptualising early intervention for eating disorders. European eating disorders view. 31(2). (pp. 320-334). Available at: https://doi.org/10.1002/erv.2959

Austin, A,. Flynn, M,. Richards, -.K,. Hodsoll, J,. Duarte, T. A,. Robinson, P,. Kelly, J,. Schmidt, U,. (2021) Duration of untreated eating disorder and relationship to outcomes: A systematic review of the literature. European eating disorders review,. 29(3). (pp.329-345). Available at: https://doi.org/10.1002/erosv.2745.

Ayton A, Ibrahim A. The Western diet: a blind spot of eating disorder research?-a narrative review and recommendations for treatment and research. Nutr Rev. 2020 Jul 1;78(7):579-596. doi: 10.1093/nutrit/nuz089. PMID: 31846028; PMCID: PMC7682725.

Barakat, S., McLean, S.A., Bryant, E. et al. Risk factors for eating disorders: findings from a rapid review. J Eat Disord 11, 8 (2023). https://doi.org/10.1186/s40337-022-00717-4

Bardone-Cone, A.M., Thompson, K.A. and Miller, A.J. (2018). The self and eating disorders. Journal of Personality, 88(1), pp.59–75. doi:https://doi.org/10.1111/jopy.12448.

Bartky, S.L. (1990). Femininity and Domination: Studies in the Phenomenology of Oppression (1st ed.). Routledge. https://doi.org/10.4324/9780203825259

Beat. (n.d.). Online Safety and Eating Disorders. [online] Available at: https://www.beateatingdisorders.org.uk/get-information-and-support/about-eating-disorders/research/online-safety-and-eating-disorders/.

Beat. (2021). Online advertising and eating disorders. [online] Available at: https://www.beateatingdisorders.org.uk/get-information-and-support/about-eating-disorders/research/online-advertising-and-eating-disorders/.

Beat. (n.d.). Changes Needed to Government Anti-obesity Strategies. [online] Available at: https://www.beateatingdisorders.org.uk/about-beat/policy-work/changes-needed-to-government-anti-obesity-strategies/.

Beat. (n.d.). Prevalence in the UK. [online] Available at: https://www.beateatingdisorders.org.uk/about-beat/policy-work/policy-and-best-practice-reports/prevalence-in-the-uk/.

Beat (2020) Written evidence submitted by Beat (MISS0020) All-Party Parliamentary Group. Available at: https://committees.parliament.uk/writtenevidence/7710/pdf/

Becker, A.E., Hadley Arrindell, A., Perloe, A., Fay, K., & Striegel-Moore, R.H. (2010). A qualitative study of perceived social barriers to care for eating disorders: Perspectives from ethnically diverse health care consumers. International Journal of Eating Disorders, 43, 633–647.

Becker, C.B. and Stice, E., 2017. From efficacy to effectiveness to broad implementation: Evolution of the Body Project. Journal of consulting and clinical psychology, 85(8), p.767.

Blodgett Salafia, E.H., Jones, M.E., Haugen, E.C. et al. Perceptions of the causes of eating disorders: a comparison of individuals with and without eating disorders. J Eat Disord 3, 32 (2015). https://doi.org/10.1186/s40337-015-0069-8

Brelet L, Flaudias V, Désert M, Guillaume S, Llorca PM, Boirie Y. Stigmatization toward People with Anorexia Nervosa, Bulimia Nervosa, and Binge Eating Disorder: A Scoping Review. Nutrients. 2021 Aug 18;13(8):2834. doi: 10.3390/nu13082834. PMID: 34444994; PMCID: PMC8400545.

Button, Eric & Warren, Rachel. (2001). Living with anorexia nervosa: The experience of a cohort of sufferers from anorexia nervosa 7.5 years after initial presentation to a specialized eating disorders service. European Eating Disorders Review. 9. 74 - 96. 10.1002/erv.400.

Byrne, M.E., Eichen, D.M., Fitzsimmons-Craft, E.E., Taylor, C.B. and Wilfley, D.E., 2016. Perfectionism, emotion dysregulation, and affective disturbance in relation to clinical impairment in college-age women at considerable risk for or with eating disorders. Eating behaviors, 23, pp.131-136.

Bryant E, Spielman K, Le A, Marks P; National Eating Disorder Research Consortium; Touyz S, Maguire S. Screening, assessment and diagnosis in the eating disorders: findings from a rapid review. J Eat Disord. 2022 Jun 7;10(1):78. doi: 10.1186/s40337-022-00597-8. PMID: 35672777; PMCID: PMC9175461.

Chang, O. D. (2020). The stakes of self‐worth: Examining contin-gencies of self‐worth to clarify the association between globalself‐esteem and eating disturbances in college women. Journalof Clinical Psychology, 76(12), 2283–2295. https://doi.org/10.1002/jclp.23006

Copeland, W.E., Bulik, C.M., Zucker, N., Wolke, D., Lereya, S.T. and Costello, E.J. (2015). Does childhood bullying predict eating disorder symptoms? A prospective, longitudinal analysis. International Journal of Eating Disorders, 48(8), pp.1141–1149. doi:https://doi.org/10.1002/eat.22459.

Cook-Cottone, C. (2015). Embodied self-regulation and mindful self-care in the prevention of eating disorders. Eating Disorders, 24(1), pp.98–105. doi:https://doi.org/10.1080/10640266.2015.1118954.

Cobb G. “This is pro-ana”: Denial and disguise in pro-anorexia online spaces. Fat Studies. 2016 Dec 02;6(2):189–205. doi: 10.1080/21604851.2017.1244801.

Dane A, Bhatia K. The social media diet: A scoping review to investigate the association between social media, body image and eating disorders amongst young people. PLOS Glob Public Health. 2023 Mar 22;3(3):e0001091. doi: 10.1371/journal.pgph.0001091. PMID: 36962983; PMCID: PMC10032524.

Datta, N., Foukal, M., Erwin, S., Hopkins, H., Tchanturia, K., &Zucker, N. (2021). A mixed‐methods approach to conceptual-izing friendships in anorexia nervosa. PLoS One, 16(9),e0254110. https://doi.org/10.1371/journal.pone.0254110

Day S, Bussey K, Trompeter N, Mitchison D. The Impact of Teasing and Bullying Victimization on Disordered Eating and Body Image Disturbance Among Adolescents: A Systematic Review. Trauma Violence Abuse. 2022 Jul;23(3):985-1006. doi: 10.1177/1524838020985534. Epub 2021 Jan 19. PMID: 33461439.

Eikey EV, Reddy MC, Booth KM, Kvasny L, Blair JL, Li V, Poole ES. Desire to Be Underweight: Exploratory Study on a Weight Loss App Community and User Perceptions of the Impact on Disordered Eating Behaviors. JMIR Mhealth Uhealth. 2017 Oct 12;5(10):e150. doi: 10.2196/mhealth.6683. PMID: 29025694; PMCID: PMC5658641.

freedfromed.co.uk. (n.d.). South London and Maudsley NHS Foundation Trust (SLaM) and King’s College London (KCL) secure funding from The Health Foundation for an initial evaluation of FREED | FREED. [online] Available at: https://freedfromed.co.uk/news-and-stories/10/south-london-and-maudsley-nhs-foundation-trust-slam-and-king-s-college-london-kcl-secure-funding-from-the-health-foundation-for-an-initial-evaluation-of-freed [Accessed 23 May 2024].

Ging, D., & Garvey, S. (2018). ‘Written in these scars are the storiesI can’t explain’: A content analysis of pro‐ana and thinspira-tion image sharing on Instagram. New Media & Society, 20(3),1181–1200. https://doi.org/10.1177/1461444816687288

Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2019 (GBD 2019) Disease and Injury Burden 1990-2019. Seattle, United States of America: Institute for Health Metrics and Evaluation (IHME), 2020.

Gregersen, E. (2024). Social Media. In: Encyclopædia Britannica. [online] Available at: https://www.britannica.com/topic/social-media.

Mabe AG, Forney KJ, Keel PK. Do you “like” my photo? Facebook use maintains eating disorder risk. Int J Eat Disord. 2014;47(5):516–23.

Frieiro, P., González‐Rodríguez, R. and Domínguez‐Alonso, J. (2022). Self‐esteem and socialisation in social networks as determinants in adolescents’ eating disorders. Health & Social Care in the Community, [online] 30(6). doi:https://doi.org/10.1111/hsc.13843.

Ferguson CJ, Muñoz ME, Garza A, Galindo M. Concurrent and prospective analyses of peer, television and social media influences on body dissatisfaction, eating disorder symptoms and life satisfaction in adolescent girls. J Youth Adolesc. 2014 Jan;43(1):1–14. doi: 10.1007/s10964-012-9898-9.

Jovanovski, Natalie & Jaeger, Tess. (2022). Demystifying ‘diet culture’: Exploring the meaning of diet culture in online ‘anti-diet’ feminist, fat activist, and health professional communities. Women's Studies International Forum. 90. 102558. 10.1016/j.wsif.2021.102558.

KingSJ,Turner SD.Caring for adolescent females with anorexia nervosa: registered nurses’ perspectives. J Adv Nurs 2000; 32: 139–47.

Levesque, R.J. ed., 2011. Encyclopedia of adolescence. Springer Science & Business Media.

Logrieco G, Marchili MR, Roversi M, Villani A. The Paradox of Tik Tok Anti-Pro-Anorexia Videos: How Social Media Can Promote Non-Suicidal Self-Injury and Anorexia. Int J Environ Res Public Health. 2021 Jan 25;18(3):1041. doi: 10.3390/ijerph18031041. PMID: 33503927; PMCID: PMC7908222.

Löwe, B., Zipfel, S., Buchholz, C., Dupont, Y., Reas, D. L., & Herzog,W. (2001). Long‐term outcome of anorexia nervosa in a pro-spective 21‐year follow‐up study. Psychological Medicine, 31(5),881–890. https://doi.org/10.1017/S003329170100407X

Mendes, C. B., & Ferreira, C. (2020). A social rank approach todisordered eating: Exploring relationships between shame,fears of compassion, striving, and body shame. Psychology andPsychotherapy: Theory, Research and Practice, 93(3), 490–502.https://doi.org/10.1111/papt.12241

NICE (2017). Overview | Eating disorders: Recognition and Treatment | Guidance | NICE. [online] Nice.org.uk. Available at: https://www.nice.org.uk/guidance/ng69.

O’Connor, C., McNamara, N., O’Hara, L., McNicholas, M. and McNicholas, F. (2019). How do people with eating disorders experience the stigma associated with their condition? A mixed-methods systematic review. Journal of Mental Health, 30(4), pp.1–16. doi:https://doi.org/10.1080/09638237.2019.1685081.

Osborn, K. D. (2023) Competing for perfection: a scoping review evaluating relationships between competitiveness and eating disorders or disordered eating behaviour. European Eating Disorders Review, 31(5), 549-576. Available at: https://doi.org/10.1002/erv.2978.

Orbach, S. (1986). HUNGER STRIKE : the anorectic’s struggle as a metaphor for our age. S.L.: Routledge.

Jamie-Lee Pennesi, Tracey D. Wade. (2016) A systematic review of the existing models of disordered eating: Do they inform the development of effective interventions?, Clinical Psychology Review, Volume 43, Pages 175-192, ISSN 0272-7358, https://doi.org/10.1016/j.cpr.2015.12.004. (https://www.sciencedirect.com/science/article/pii/S0272735815300386)

Prichard, I., McLachlan, A.C., Lavis, T. and Tiggemann, M., 2018. The impact of different forms of# fitspiration imagery on body image, mood, and self-objectification among young women. Sex Roles, 78, pp.789-798.

Public Health England (2021). Couch to 5K App Hits 5 Million Downloads. [online] GOV.UK. Available at: https://www.gov.uk/government/news/couch-to-5k-app-hits-5-million-downloads.

Robertson,, M. Duffy., F. Newman, E,. Bravo, C.P.,. Ates, H.H. Sharpe, H,. (2021) Exploring changes with body image, eating and exercise during the Covid-19 lockdown; A UK survey. Appetite, 159. (p. 105062). Available at: https://doi.org/10.1016/j.appet.2020.105062.

Rich, E., 2006. Anorexic dis (connection): managing anorexia as an illness and an identity. Sociology of health & illness, 28(3), pp.284-305.

Schaefer, L.M. and Thompson, J.K., 2018. Self‐objectification and disordered eating: A meta‐analysis. International Journal of Eating Disorders, 51(6), pp.483-502.

Sharman, J. Rolfe, A. Morrey, T. (2024). Exploring experiences of online ‘pro-ana’ networks: An interpretative phenomenological analysis approach. Counselling and Psychotherapy Research. Available at: https://doi.org/10.1002/capr.12744

Son, E. Kwon, K. H. (2024) The impact of excessive dieting on eating disorders in adolescent women: a literature review. Nutrition and Food Science. Volume 5d, Number. 20, 2024 (pp-366-376) Available at: 10.1108/NFS-06-2023-0127.

Star A, Hay P, Quirk F, Mond J. Perceived discrimination and favourable regard toward underweight, normal weight and obese eating disorder sufferers: implications for obesity and eating disorder population health campaigns. BMC Obes. 2015;2:4. Epub 2015/07/29. doi: 10.1186/s40608-014-0032-2 ; PubMed Central PMCID: PMC4511013.

Sukunesan S, Huynh M, Sharp G. Examining the Pro-Eating Disorders Community on Twitter Via the Hashtag #proana: Statistical Modeling Approach. JMIR Ment Health. 2021 Jul 9;8(7):e24340. doi: 10.2196/24340. PMID: 34255707; PMCID: PMC8304129.

Swartz L. Anorexia nervosa as a culture-bound syndrome. Soc Sci Med. 1985;20(7):725-30. doi: 10.1016/0277-9536(85)90062-0. PMID: 4012359.

Thornton LM, Trace SE, Brownley KA, Ålgars M, Mazzeo SE, Bergin JE, Maxwell M, Lichtenstein P, Pedersen NL, Bulik CM. A Comparison of Personality, Life Events, Comorbidity, and Health in Monozygotic Twins Discordant for Anorexia Nervosa. Twin Res Hum Genet. 2017 Aug;20(4):310-318. doi: 10.1017/thg.2017.27. Epub 2017 May 24. PMID: 28535840; PMCID: PMC8023042.

Treasure J, Leslie M, Chami R, Fernández-Aranda F. Are trans diagnostic models of eating disorders fit for purpose? A consideration of the evidence for food addiction. Eur Eat Disord Rev. 2018 Mar;26(2):83-91. doi: 10.1002/erv.2578. Epub 2018 Jan 17. PMID: 29341400.

Treasure J, Duarte TA, Schmidt U. Eating disorders. Lancet. 2020 Mar 14;395(10227):899-911. doi: 10.1016/S0140-6736(20)30059-3. PMID: 32171414.

Voelker DK, Reel JJ, Greenleaf C. Weight status and body image perceptions in adolescents: current perspectives. Adolesc Health Med Ther. 2015;6:149–58. Epub 2015/09/09. doi: 10.2147/AHMT.S68344 ; PubMed Central PMCID: PMC4554432.

Wade, T.D., Shafran, R. and Cooper, Z., 2023. Developing a protocol to address co‐occurring mental health conditions in the treatment of eating disorders. International Journal of Eating Disorders.

Wolf, N. (1991). The Beauty Myth: How Images of Beauty Are Used against Women. London: Vintage Classic.jov

Yeshua-Katz, D., 2015. Online stigma resistance in the pro-ana community. Qualitative health research, 25(10), pp.1347-1358.

https://publications.parliament.uk/pa/cm5803/cmselect/cmhealth/114/report.html