"Do You Ladies Relate?": Experiences of Gender Diverse People in Online Eating Disorder Communities

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The study of eating disorders online has a long tradition within CSCW and HCI scholarship. Research within this body of work highlights the types of content people with eating disorders post as well as the ways in which individuals use online spaces for acceptance, connection, and support. However, despite nearly a decade of research, online eating disorder scholarship in CSCW and HCI rarely accounts for the ways gender shapes online engagement. In this paper, we present empirical results from interviews with 14 trans people with eating disorders. Our findings illustrate how working with gender as an analytic lens allowed us to produce new knowledge about the embodiment of participation in online eating disorder spaces. We show how trans people with eating disorders use online eating disorder content to inform and set goals for their bodies and how, as gender minorities within online eating disorder spaces, trans people occupy marginal positions that make them more susceptible to harms, such as threats to eating disorder validity and gender authenticity. In our discussion, we consider life transitions in the context of gender and eating disorders and address how online eating disorder spaces operate as social transition machinery. We also call attention to the labor associated with online participation as a gender minority within online eating disorder spaces, outlining several design recommendations for supporting the ways trans people with eating disorders use online spaces. CONTENT WARNING: This paper is about the online experiences of trans people with eating disorders. We discuss eating disorders, related content (e.g., thinspiration) and practices (e.g., binge eating, restriction), and gender dysphoria. Please read with caution.

CCS Concepts: • **Human-centered computing → Empirical studies in collaborative and social computing**.

Additional Key Words and Phrases: eating disorders, gender minorities, nonbinary, online communities, social media, thinspiration, transfeminine, transgender, transmasculine

1 INTRODUCTION

Computer-Supported Cooperative Work (CSCW) and Human-Computer Interaction (HCI) scholars have a long tradition of studying how people with eating disorders engage online. Research in this domain spans many topics, including the types of content people with eating disorders post on social media platforms [25, 26, 29, 99]; the questions that people with eating disorders ask on question-and-answer websites [17, 18, 95]; and the ways that social media platforms cause inadvertent harm through the banning and dissolution of eating disorder accounts, content, and communities [61]. Despite this large body of work, most CSCW and HCI research depicts people with eating disorders who participate online as a homogenous population. The complexity of online eating disorder experiences — *and* the individuals who experience them — is unintentionally concealed. In this paper, we extend nascent work within CSCW and HCI that addresses how eating disorders and gender combine to influence the ways people engage online. Through interviews with 14 trans people with eating disorders, we closely attend to gender diversity within online eating disorder communities and networks. We highlight how gendered interactions with online eating disorder content shape the ways people learn and set goals for their bodies, as well as the ways individuals navigate online eating disorder spaces as gender minorities.

Researchers often note that eating disorders can impact anyone, regardless of age, class, gender, and race [65, 70, 81, 83, 85, 107]. However, it is uncommon for CSCW and HCI eating disorder research to address how multi-faceted aspects of identity combine with eating disorders to shape the experiences people have online. An exception from Pater et al. disrupts the homogenous presentation of gender within online eating disorder scholarship [101]. In this work, the authors examine masculine characterizations of eating disorder content, illustrating similarities and differences with feminine content characterized in prior work. While this research makes strides toward gender diversity and inclusivity within online eating disorder scholarship within CSCW and HCI, it does not explore the ways that people's genders influence how they experience eating disorder content. Here, we extend online eating disorder scholarship by attending to the ways eating disorders and gender combine to shape the ways people experience being online. The inclusion of gender in our methodological approach, including analysis, allows us to closely examine the embodied and gendered nature of online interaction within eating disorder communities and networks, producing new knowledge related to the online experiences of people with eating disorders.

We present empirical work from interviews with 14 trans people with eating disorders. Eating disorders are experienced in relation to the bodies people have and the ways that bodies can be gendered. For trans people, gendered embodiment is a personal experience and a site for politics[1] [15, 33, 35, 75, 93]. The experiences that trans people have with their genders — including the ways some individuals may transform their bodies throughout gender transition — expose the entanglement of eating disorders and gender, and how this entanglement unfolds in online spaces. We focus on the ways gender influences online engagement within eating disorder spaces, reflexively informed by the experiences members of our research team have within these communities. Our

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[1]Bodies are, and have always been, political. As the editors of the Oxford Handbook of Gender and Politics write, "…bodies are at the core of the political order as markers of status and power" [123]. Our bodies shape how we are able to move through the world and how others see us, determining the access we have to certain resources and the ways we are privileged and/or oppressed through interpersonal relationships and societal structures.

research illustrates how trans people with eating disorders adopt strategies for navigating online spaces in which they hold marginal positions and use online eating disorder spaces as social transition machinery.

We make three primary contributions. First, our interviews reflect a gender-diverse group of people with eating disorders who engage online. To date, online eating disorder research within CSCW and HCI represents a largely similar group of individuals. In the context of gender, feminine content and cis female participants have been the standard. Our work shifts from this default by including nonbinary, transfeminine, and transmasculine participants. Though, at times, we describe our cohort collectively as "trans people with eating disorders," our findings call attention to important distinctions between the experiences of nonbinary, transfeminine, and transmasculine individuals with eating disorders. Our attention to these differences joins other research highlighting the diversity of individuals within the same population [111, 122]. In this paper, by focusing on the gender diversity of our participants, we illustrate how gender shapes the relationships people have with online eating disorder content and spaces.

Second, the empirical work we present extends online eating disorder scholarship within CSCW and HCI by attending to the ways that eating disorders and gender combine in the context of online participation. Through our use of gender as an analytic lens, we were able to produce new knowledge about the ways people with eating disorders experience being online. Our findings describe how trans people use eating disorder content to learn and set goals for their bodies; often, though not necessarily, in concert with gender transition. We also consider the ways our participants hold gender minority status within online eating disorder spaces, spaces in which cis femininity is commonly centered. Through our findings, we detail how cis feminine gender norms in eating disorder spaces relegate trans people to the margins. We approach marginalization as a sociopolitical force in which individuals and groups are pushed to societal peripheries — and, therefore, socially excluded — due to their derivation from a dominant, central group [79]. We demonstrate the consequences of marginality within online eating disorder spaces, including how marginalization reinforces gender dysphoria and threatens certain facets of identity, and detail strategies our participants discussed for navigating their marginality within online eating disorder spaces.

Finally, in our discussion, we put our research in conversation with prior scholarship on trans issues in CSCW and HCI. We turn to research that examines life transitions, including Haimson's work on social transition machinery, calling attention to the ways online eating disorder spaces facilitate life transitions [73]. In doing so, we work with the concept of liminality, which details how individuals occupy ambiguous, threshold positions that cannot be finitely defined within a cultural space during life transitions [120]. We also discuss the labor of online participation for trans people with eating disorders and develop design recommendations that aim to mitigate this labor and support life transitions in the context of eating disorders and gender. We end by addressing the limitations of our study and articulating directions for future research and design.

2   RELATED WORK

Our related work joins together separate threads of CSCW and HCI scholarship addressing eating disorders online and online trans communities and networks. Given the absence of CSCW and HCI scholarship that addresses the ways trans people with eating disorders participate online — or use technology, generally — we bring in literature from public health and psychology to illustrate what other fields have written about the experiences of this population.

2.1 Eating Disorders Online in CSCW and HCI Research

CSCW And HCI research shows how online spaces can connect individuals with others who share and understand their experiences, which can help alleviate feelings of loneliness and isolation, such as those derived from shame, stigma, and invalidation [4, 6, 30, 54, 84]. People with eating disorders engage online for many reasons, including acceptance, information-seeking, social connection, and support [16, 18, 53, 59, 60, 97, 98] — though social media platforms, through content moderation practices, can act as barriers to the benefits individuals receive through online engagement [61]. A substantial portion of eating disorder research in CSCW and HCI exists in relation to a larger body of scholarship that aims to categorize and predict mental illness online [24, 25, 27–29, 40–44, 89, 100, 119]. Within this expansive body of work, online eating disorder scholarship addresses the characteristics of content within online pro-anorexia and pro-recovery communities and networks, and also works to detect these types of content [24, 25, 28, 29, 40, 99–101].

Despite the breadth of the scholarship presented here, when scholars study eating disorders online, they often do so without attending to the ways other facets of identity intersect to shape online experience. As such, with few exceptions [101], online eating disorder scholarship within CSCW and HCI tends to unintentionally present people with eating disorders as young, white, cis, and female — even though research illustrates how individuals of any age, race, and gender are susceptible to the development of eating disorders [63, 94, 101, 102]. The limited representation of people with eating disorders that we see in CSCW and HCI scholarship is not intentionally exclusionary. Rather, the types of people presented are a byproduct of data collection techniques, including interview recruitment and web scraping. Attending to the limited gender representation within online eating disorder scholarship, Pater et al. conducted a study centering masculine eating disorder content on social media [101]. This paper contributes new ways of understanding the ways in which online eating disorder content is gendered. However, as the focus of Pater et al.'s research was content characterization [101], it does not address the relationships that people, through the ways they can embody gender, have with online eating disorder content and spaces. Here, we extend this research through analysis of firsthand accounts of trans people with eating disorders, examining how eating disorders and gender combine to shape the ways people experience and navigate online eating disorder spaces.

2.2 CSCW and HCI Online Research in Trans Communities

Online communities have been a source of both support and strife for transgender and nonbinary individuals [75]. Some individuals view coming out online as a rite of passage [73], while others have found online queer communities to be a safe environment to process and overcome their trauma with the support of others [52, 76]. CSCW and HCI trans scholarship also illustrates how online trans communities and other spaces where trans people gather can act as avenues for important information sharing, such as related to gender transition and health, and as major locations for developing rich personal connections with other trans people [8, 49, 74]. Online spaces offset several significant challenges to offline trans community development, including large distances, financial constraints, and personal inhibitions.

However, online trans communities increase the visibility of trans people online, which is not wholly beneficial. The resources made available to trans people through online entanglement can simultaneously make individuals susceptible to harm [105]. The harms that digital spaces can cause to transgender individuals take a wide variety of forms, from passive-but-systemic invalidation by a system to heated personal attacks from transphobes and other bigots [111]. Additionally, as online communities can be mediated by algorithms rather than humans, some online trans communities are at the mercy of algorithmic ways of constructing identities and networks [115].

Online tensions may also rise from intracommunity conflicts and the ways that these conflicts can further marginalize individuals with intersecting identities [122].

Ultimately, online spaces are simultaneously beneficial and harmful to the trans people who use them. In considering how to design technologies, such as online communities and social media platforms, for trans people and trans liberation, Haimson et al. introduced the concept "trans technologies" [77, 78]. Trans technologies describe technologies where trans individuals can show the long-term process of transitioning and embody their trans identities in a safe way [77, 78]. In our discussion, we revisit Haimson et al.'s trans technologies [77, 78], critiquing the ways in which eating disorder spaces, as of yet, fall short.

2.3 Addressing the Experiences of Trans People with Eating Disorders

Up to this point, we have separately addressed the online experiences of people with eating disorders and trans people. As far as we are aware, within CSCW and HCI scholarship, research focusing on the intersection — the ways trans people with eating disorders participate online — does not exist. In our review of other domains, this combination was also uncommon. However, several important works address how trans people with eating disorders participate online, detailing the ways individuals create vlogs (video blogs) and use social media [67, 129]. These works highlight the ways trans people with eating disorders post about their experiences, including those with body dysmorphia and gender dysphoria, using disordered eating to alleviate body dissatisfaction (and other anxieties related to being trans in a cisnormative, discriminatory, and violent society [82]), and working to obtain access to gender-affirming care [67, 129]. These works also describe the impact of certain societal pressures, including those related to passing and weight standards as well as the presumed cis normativity of eating disorders [67, 129].

Beyond the research addressed above, scholarship examining the experiences of trans people with eating disorders often does so absent the online component. We found many different works within the domains of public health and psychology articulating health-related concerns in the context of the experiences of trans people with eating disorders [46, 51, 72, 83, 91]. Research across these fields highlights the experiences trans people have with body dissatisfaction as well as eating disorder treatment options [50, 83, 91]. Additionally, scholarship addresses the prevalence of eating disorders amongst transgender youth [9], and how individuals assigned female at birth (AFAB) individuals have the highest rates of eating disorders [47]. These works also illustrate how trans people with eating disorders can experience cascading negative effects, such as self-harm and suicidal ideation.

Though not strictly eating disorder related, prior work also addresses pressure related to body size (e.g., weight) and gender-affirming surgery [121, 124]. These works highlight how fatphobia intersects with transphobia, demonstrating how thinness is entangled with who is — and is not — deserving of transition and gender affirming care. The work we present here is not grounded in healthcare; however, we recognize that there is a clear need to work with trans people with eating disorders to understand their experiences, including those related to online participation. In our discussion, we address the ways in which follow-up work should endeavor to engage with healthcare professionals to investigate ways of supporting trans people with eating disorders.

3 METHOD

For this study, we were interested in the ways eating disorders and gender combine to shape how people experience being online. We interviewed 14 trans people with eating disorders about their online experiences. We received approval for this study from our institution's IRB.

Motivation for our work is mutually drawn from the first and second authors' scholarship. Beginning in November 2017, the first author has conducted online ethnographic work on online

Table 1. Participant Pseudonyms, Gender, and Pronouns

Participant Pseudonym	Gender	Pronouns
Florence*	Trans woman	She/her
Eli*	Transmasculine nonbinary	He/they
Taylor	Nonbinary	Ze/hir or they/them
Amari	Transmasculine nonbinary	They/them
Skeletor*	Nonbinary	He/they
Charles*	Trans woman/nonbinary	They/them or she/her
Draken	Trans man	He/him
Jacob*	Trans man	He/him
Rose	Trans woman	She/her
Ryo	Trans man	He/him
Mako	Transfeminine nonbinary	She/they
Lorin*	Trans man	He/him
River	Nonbinary	They/them
Batman*	Trans man	He/him

Pseudonyms marked with an asterisk (*) were selected for use by the participant.

eating disorder and other mental health spaces, on platforms such as Instagram, Reddit, and Tumblr. During this multi-year participatory research, the first author noticed posts by trans individuals that called attention to their experiences with mental illness as well as meta-commentary related to gender and the online spaces in which they gathered. These posts are not included in the analysis of the current study. They did, however, along with the second author's expertise, inform the development of this study and associated research protocol. For the past several years, the second author has engaged with queer people and communities to understand intracommunity dynamics and tensions as well as the ways individuals configure and navigate their online ecosystems. Both authors identify as member-researchers of the groups they study [1], experiences which sensitized them to the different types of identity concerns we address in this paper as well as the ways we collect data in our method.

3.1 Participants

We conducted semi-structured interviews with 14 trans people with eating disorders who participated online in ways that were relevant for their experience with an eating disorder (see Table 1 for participant pseudonyms, genders, and pronouns). For this study, we asked our participants to select their own pseudonyms (e.g., Batman, Skeletor), if they so desired. Participant-selected pseudonyms are indicated by asterisks (*) in Table 1. We use these pseudonyms, as well as ones that we created, throughout the paper.

As one of our study's aims entails examining a diversity of experiences within a population (i.e., trans people with eating disorders), we did not develop inclusion criteria related to eating disorder experience, gender, nationality, or race. We did require that our participants be 18 years of age or older. Everyone we spoke with was trans, including our female, male, and nonbinary participants. Our participants included two women, one woman/nonbinary individual, six nonbinary individuals, and five men. Of our nonbinary participants, three people were nonbinary, two people were transmasculine nonbinary, and one person was transfeminine nonbinary.

We did not include gender transition as an inclusion criterion for this study. However, all the individuals we were able to recruit had transitioned or were in the process of doing so. That all

participants had experiences with transition — and a desire to transition — is one clear limitation of our work. For the individuals we interviewed, transition included social as well as medical elements, including coming out, changing aspects of identity (e.g., name) and appearance, starting (and continuing) hormone replacement therapy, and scheduling (and receiving) gender-affirming surgeries.

Our participants included individuals ranging in age from 20 to 37 years old (M = 24.07). Most were in their early 20s. Our participants were predominantly white (n=11 non-Hispanic; n=1 Hispanic), though also included one biracial (Black and white) individual and one Asian person. With one exception, an individual who was from New Zealand, all our participants were American. One participant held both American and Russian citizenship. Again, as our study aims to examine diversity within the online population of trans people with eating disorders, we only required that our participants have experiences with eating disorders, and not any particular type of eating disorder. As such, while some of our participants had received a clinical diagnosis, many had not. Individuals described a spectrum of experiences with eating disorders as well as disordered eating practices, including anorexia, binge eating, recovery, relapse, and restriction.

Our participants described encountering eating disorder and other mental health content across many different online spaces, including social media platforms, such as Discord, Instagram, Reddit, TikTok, Tumblr, and Twitter, as well as smaller online community forums. In the context of their eating disorders, our participants engaged within online eating disorder communities and networks, such as those related to eating disorder promotion, support, and recovery detailed in prior work [25, 29, 61, 99, 101], and online queer and trans communities and networks. Though not as prevalent, several participants detailed online participation in the context of their eating disorder outside of eating disorder and queer spaces. Rose, for example, talked about mental health with her followers on Twitch and Mako described providing tips for harm reduction within online sex work communities and networks. All participants described their online activity as occurring within many different online spaces, which we consider a complex ecosystem [21, 22, 45, 61]. Our participants engaged with eating disorder content and spaces to connect with anecdotal and relatable experiences, provide comfort and emotional support, search for information (e.g., related to health and recovery as well as maintaining an eating disorder), and vent about their frustrations.

3.2 Recruitment

We shared our recruitment materials on social media platforms, including Discord, TikTok, and Reddit, and on the National Eating Disorder Association website. The spaces we recruited included eating disorder and trans communities and networks, such as the online eating disorder communities where the first author conducted her ethnographic work and the second author's personal, trans-specific TikTok account. Prior to sharing our recruitment flyer in online communities, we reached out to community moderators for permission — though, this was not required by all communities. When granted, we posted the information for our study, which included the title of our research and a brief explanation of the work as well as participation inclusion criteria, the study's Institutional Review Board (IRB) number, and a link to a Google Form.

The Google Form acted as a screener. We used responses to verify that individuals fit the inclusion criteria of our study. For this study, we required that individuals were 18 years of age or older to participate. We also required that our participants were trans. Given our approach to diversity, we did not include any additional gender constraints. That is, individuals met our study criteria as long as they considered themselves nonbinary, transfeminine, and/or transmasculine. We did not include any requirements around transition.

Additionally, we required that our participants have experience with an eating disorder, though not necessarily one that had been clinically diagnosed. Many people who participate in online eating

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disorder spaces identify as having an eating disorder, but do not have a medical diagnosis [13, 42, 59, 61]. Medical diagnoses may not be sought for many reasons, including access to healthcare, feeling invalid or not "sick enough," and whether an individual feels prepared to heal or recover. Through our participants, we also learned that an eating disorder diagnosis can impact gender-affirming surgeries — providing additional motivation for some trans people to not actively seek diagnosis or associated treatment.

Finally, we required that individuals participate online in ways that were relevant for their eating disorder (e.g., posting, interacting with content, and/or reading content). To this effect, we asked:

- Do you currently use any social media sites or online communities where you: 1) post or read about eating disorder and/or eating disorder recovery content or 2) connect with other people who have eating disorders and/or who are in recovery from eating disorders?
- If you do not participate within eating disorder communities, does any of your online participation impact your experience with an eating disorder? Please briefly explain.

Asking these two questions allowed us to screen for online participation related to an individual's experience with an eating disorder. Like other elements of our study, including eating disorder experience and gender, our approach to online participation was quite broad. Given the breadth of our inclusion criteria, a useful follow-up to our work would involve more specific demographic requirements as well as a narrower range of online spaces (e.g., eating disorder spaces, diet and fitness spaces, queer and trans spaces).

3.3 Interviews

We scheduled all interviews for 90 minutes and, when possible, conducted them using audio and video via the Zoom platform. In one instance, the participant's Internet connection did not support Internet-based video calling, so we spoke with them over the phone. Following consent procedures, we recorded all interviews, which were then transcribed for analysis by several of the authors. During the interviews, we asked, if possible, for our participants to have access to their social media and online community accounts. Having the option to access these accounts supported our participants' memories and tellings of their experiences. We compensated our participants with a $40 USD gift card for a vendor of their choice.

We organized our semi-structured interviews into four segments. During the first segment, we asked our participants for demographic information, including age, gender, and pronouns. At this time, we also asked our participants if they had any interest in selecting a pseudonym for use in the paper. Second, we asked our participants to describe their gendered experience with an eating disorder. Participant responses helped us contextualize the remainder of the interview, setting the stage for question-asking and meaning-making related to online experience. Following, we then explicitly began asking questions about online experiences. To guide this portion of our interview protocol, we asked participants about experiences that stood out in the context of their eating disorder and gender. We asked for positive and negative experiences, as well as other significant experiences (e.g., simultaneously positive and negative, neither positive nor negative).

While significant experiences stand out and are important for getting a sense of the ways people build narratives around eating disorders, gender, and online participation, they are not necessarily indicative of everyday, mundane encounters and experiences [10, 60, 68]. To get a better sense of our participants' routines, we asked them to describe their everyday online engagement with respect to their eating disorder and gender. Finally, the fourth segment of our interview protocol involved a collaborative activity using Google Jamboard (for an example, see Figure 1). Together with a participant, the interviewer created virtual sticky notes indicative of the online spaces the participant had mentioned throughout the interview. Once all the sticky notes were compiled, we

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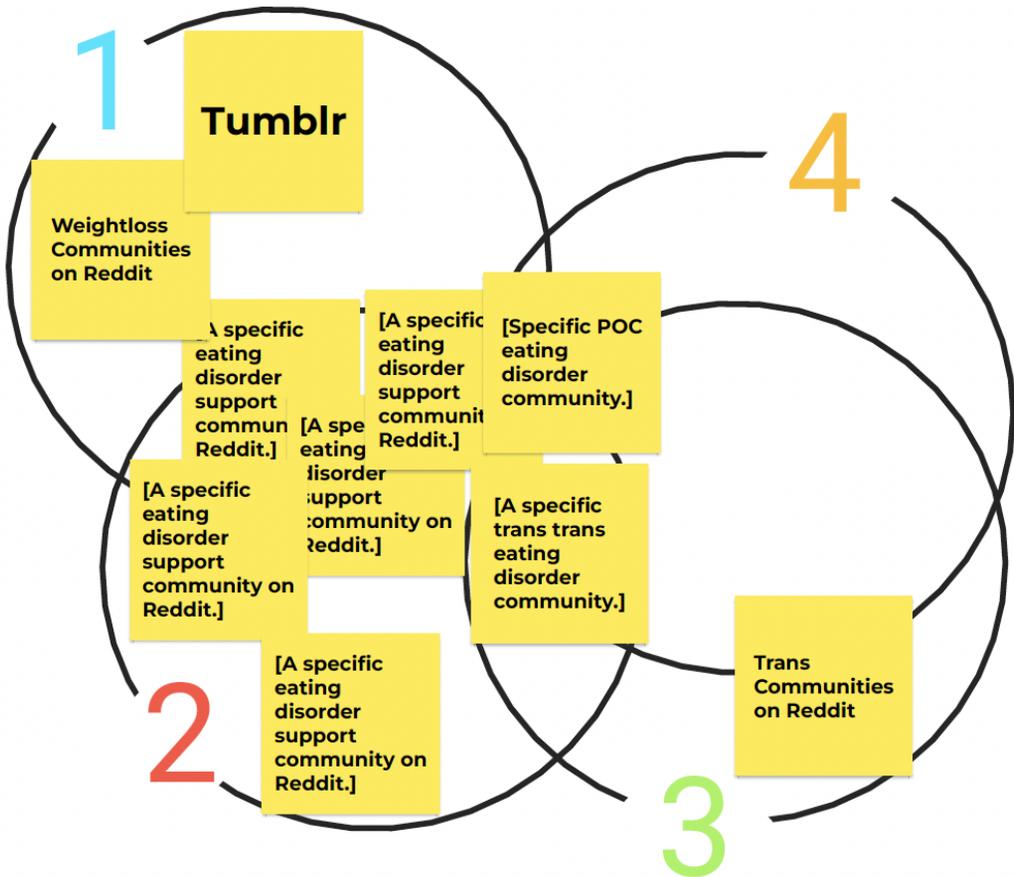
Fig. 1. Charles created this map during their interview to represent their online ecosystem in the context of online spaces relevant for their eating disorder. All community names, with the exception of general-purpose social media platforms, have been changed. The numbers in the circles were added following the interview, to help keep track of the distinct circles Charles produced. The first circle (1) represents pro-eating disorder communities; the second circle (2) represents eating disorder support communities; the third (3) circle represents trans communities; and the fourth circle (4) represents the spaces online where Charles feels they most belong. Notice the overlap in the circles, such that some pro-eating disorder communities overlap with some eating disorder support communities, and so on.

asked participants to organize these notes in relation to one another. Thus, helping us understand the ways people articulated, mapped out, and navigated between different spaces within their online ecosystems [45].

Given the potentially sensitive and emotionally demanding context of our research, we included safety precautions as part of our research practice. These precautions are contextualized within our research expertise in working with and being members of trans and mental health community spaces. Participants were informed at the start of the interview that they were in control of how they shared their experiences. Participants could elect to not answer questions, pivot from a certain

line of inquiry, and stop the interview entirely. Additionally, the first author, who conducted the interviews, has taken QPR Online Gatekeeper Training[2] and LivingWorks Start[3] online training courses for suicide prevention. These courses are important for recognizing suicidality, responding with attentiveness and care, and connecting individuals with resources and support (e.g., calling a helpline together, reaching out to a close friend or family member with the individual).

3.4 Data Analysis

We followed an inductive qualitative approach to data analysis, drawing from a constructivist grounded theory approach [31] as well as thematic analysis [19]. Though our analysis is not intersectional [36, 57, 112], we did attend to the specific combination of eating disorders and gender in concert with understanding our participants' online experiences. Examining the ways these aspects of identity are intertwined helped us to produce new types of knowledge about the ways that trans people with eating disorders participate online, extending what we know about online engagement within CSCW and HCI eating disorder scholarship [90].

Analysis began with interviewing and shaped the ways additional interviews proceeded. During our preliminary analysis, we individually read, highlighted, and memoed on transcripts and the artifacts created during interviews, using tools such as Google Docs and Microsoft Word. We looked to make sense of what was happening within specific interviews, as well as across several. Throughout this early phase of analysis, the first, second, fifth, sixth, and seventh authors met every other week to discuss participant data. In our meetings, we called attention to events, sentences, and trends related to our research inquiry. Initially, we focused on the online experiences our participants discussed in the context of their eating disorders and gender transition. We also attended to the ways our participants described gender norms within online eating disorder spaces, and their relationships to these norms. We allowed these research interests to guide our method, including further analysis, participant recruitment, and the questions included in our interview protocol.

Following the conclusion of interviews, the first, second, third, and fourth authors iteratively visited and revisited the interview transcripts and artifacts. At this time, we began systematically open coding the documents to develop and, eventually, refine codes, categories, and themes. Throughout this phase of analysis, we continued to individually read, highlight, and memo on data, codes, categories, and themes, which we came together to discuss. We also developed a collaborative document of concepts that we populated with participant quotes and questions or interpretations of these quotes. We resolved disagreements in interpretation through extensive discussion, interrogating the ways that our positions sensitized us to different elements and interpretations of the data. Early analytical concepts of interest involved community belonging, gender transition, gender norms within online eating disorder communities, and identity affirmation. Through conversations and writing, we used these and other concepts to develop the themes we present in the following section of this paper.

In addition to the safety precautions for interviews mentioned above, we also had practices in place for analysis [92, 127]. The first author, after conducting an interview, added content warnings to the interview data (e.g., eating disorders, gender dysphoria, self-harm) and provided members of the research team the option of reading transcripts with passages related to content warnings redacted (e.g., by using the highlighter tool set to black to obscure the text). We also provided multiple ways to participate in analysis. For example, if an author found the interview content distressing, they had the option to participate in analysis without engaging directly with the

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[2]https://qprinstitute.com/individual-training
[3]https://www.livingworks.net/start

data, instead providing higher level feedback on the interpretation of the other authors. Finally, the first author created (and made available) a Taking Care in Emotionally Demanding Research document, based on T-Maps[4], that included questions related to wellbeing and self-care strategies for conducting emotionally demanding research.

3.5 Researcher Disclosure and Ethics

Our positions inescapably shape the ways we conduct research, sensitizing us to some experiences and interpretations over others. To help readers make sense of our work, we disclose certain aspects of our positions [11, 56]. We are a team of CSCW and HCI scholars. Our group of authors includes cis and trans researchers as well as individuals with experiences with eating disorders. As part of our reflexive practice [110], we considered how our identities and experiences promoted certain ways of knowing over others. We attended to our biases and the ways our lived histories influence how we can make sense of the experiences our participants shared. Though we disclose our positions here, we note that other scholars should not feel pressured to do the same, and that a reflexive research practice is still possible without public or publishable disclosure.

We also hold ourselves responsible to the people and communities who have made this research possible. Accordingly, we use pseudonyms for our participants and for the online spaces they discussed during their interviews [61]. While protecting participant identity is an integral and agreed upon component of scholarship, within the CSCW and HCI fields affording the same protections to online spaces is less common and, arguably, more contentious (e.g., for the ways it impacts reproducibility). However, naming communities can have lasting and serious impacts. For example, communities may encounter an influx of researchers within what may be a sensitive space as well as heightened public scrutiny, potentially contributing to community dissolution by a platform. Given these and other consequences — and that we were not given consent by communities to include their names — we use pseudonyms for online communities and networks. When necessary, we also disguise the social media platform on which these spaces exist (i.e., when there is a risk of identification through a pseudonym due to the space's specificity).

4 FINDINGS

When individuals view content online, they do so from a specific, embodied position. As such, engagement with online eating disorder content and within online eating disorder spaces is always gendered. Highlighting the important entanglements of eating disorders, gender, and online participation, our findings contribute to a growing body of research that illustrates how people with intersecting identities experience being online [5, 20, 32]. By focusing our analysis on the intersection of eating disorders and gender, we call attention to the ways embodiment influences online participation, complicating and extending prior eating disorder research within CSCW and HCI. In the following sections, we demonstrate how our participants used online eating disorder content to set goals related to their genders, particularly in the context of body transformation and gender transition. We also illustrate how trans people who participate within online eating disorder spaces are gender minorities, occupying marginal positions within these communities and networks. Marginality causes material consequences, including gender dysphoria and threats to identity. We end our findings by describing how participants adopted strategies for navigating marginality in the context of online eating disorder spaces and for centering their own multi-faceted and malleable experiences.

Before diving into the main body of our findings, we briefly highlight the importance of online participation in the context of our participants' identities — with respect to eating disorders and

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[4]https://tmapscommunity.net/make-your-own-t-map-2/

gender. There is an abundance of online spaces for people with eating disorders as well as for people who are trans [24, 61, 75, 111]. However, this bounty does not include the entanglement of being a trans person with an eating disorder. Several of our participants, including Florence and Charles, described online spaces as addressing only 'half' of their experiences at a time — those related to eating disorders, such as anorexia, or those related to being trans, such as gender dysphoria. However, content and spaces that address the combination of these identities, and the experiences that people have, can make individuals feel seen. Draken, for example, described feeling relieved that he wasn't "*the only person who had this identity and had an eating disorder.*" Similarly, Jacob mentioned how seeing other trans masculine individuals with eating disorders meant he wasn't "*alone and [he's] not weird.*" These examples illustrate how the intersection between eating disorders and gender is vital, and not sufficiently addressed within spaces that attend to each facet separately.

4.1 Online Eating Disorder Spaces Shape how Trans People Understand and Set Goals Related to their Genders

Prior work describes how certain eating disorder content can be gendered [99, 101]. However, prior work does little to illustrate the interplay between gender and eating disorders, including how this interplay shapes the experiences people have online. Many of our participants used content from online eating disorder spaces to guide, set, and achieve goals for their own bodies. When we examine these practices as they entangle with gender, we see how gender can be an additional, complicating layer for trans people with eating disorders. For our participants, eating disorder content and spaces influenced body transformation not solely through norms associated with body composition and weight, but through the ways eating disorder content can be used to understand and set goals related to gender. In this section, we highlight thinspiration as a concrete example, detailing how thinspiration is simultaneously gendered and interpreted through the gendered ways in which people are embodied.

   We use thinspiration to ground our argument in this section due to its prevalence within prior academic research as well as within our interviews. As defined by prior CSCW and HCI scholarship, thinspiration "involves the sharing of photos, videos, and prose that are intended to inspire eating disorders" [96]. This definition focuses on the ways thinspiration relates to eating disorders online, inadvertently concealing the multiplicity of ways in which thinspiration operates. In the context of our study, we call attention to how thinspiration enacts and reinforces gender representations within online eating disorder spaces. We therefore represent thinspiration beyond its relationship with the promotion of eating disorders, describing how thinspiration mutually entangles with the promotion of romanticized gender ideals. Though thinspiration takes many forms, here we focus on the visual, which was exclusively addressed by our participants. Thinspiration images, depicting primarily white and always slender individuals, reflect an acutely narrow range of body and gender diversity. Though our focus is on the ways these visuals act as an integral source of identity information, we are not suggesting that thinspiration is beneficial. Engaging with thinspiration, for the ways it invites body comparison and promotes restrictive eating practices, is a risky and consequential health behavior [37, 108, 113, 118].

   For our participants, thinspiration often served as a reference for how to look, and toward which physical goals to strive. Like other eating disorder related practices and content, thinspiration was deeply intertwined with the ways our participants aimed to best embody their gender. Florence described how thinspiration "*[reminded her] that [she has] room to 'improve.'*" She explained:

   > A lot of [my eating disorder] is fueled by gender dysphoria and being unhappy with my body and my appearance and — I guess I've tied the idea of being skinny to what being a beautiful woman is.

Thinspiration, as a readily available reference point for feminine beauty, operates to inform the ways Florence simultaneously understands her gender and sets goals for her body during transition. Florence highlights how her womanhood alone is insufficient — she wants to be a beautiful woman. The goals that Florence has set for her body, therefore, do not only or even primarily reflect 'thinness,' but, rather, her understanding of and drive toward feminine beauty (of which thinness is part). In the context of thinspiration, feminine beauty operates within a narrow ideal, where aesthetic and body weight entangle in very specific ways. The aesthetic element of thinspiration, persistent even in early online spaces [23, 80, 103], is integral to the way it combines with gender ideals. Though the aesthetics of thinspiration have diversified over the past few decades, the connection between thinspiration and aesthetic still runs strong. Florence's eating disorder — in particular, her practices of restriction — can be understood as a pursuit of a very specific type of aestheticized and romanticized femininity, rather than solely a pursuit of thinness or promotion of disordered eating. For Florence, thinspiration does not only or even necessarily work to promote eating disorders, but, rather, the idealized way for how to look like a woman.

Through Florence, we begin to see how thinspiration provides a way of seeing gender, guiding how people set goals for their bodies (particularly while occupying in-between or threshold positions during gender transition). Jacob described how thinspiration was particularly influential during the early phases of his transition, when he was a "young baby trans" on Tumblr. He said:

> You don't really know how to act or to look or to dress. You see the bodies of men that people like, and respect, and talk about. And they don't look like your body either because your proportions are different and because you're AFAB [assigned female at birth]. My proportions are different because I'm short and I'm never gonna look like them, and obviously thinspo [thinspiration] is edited, but I'm never gonna look like thinspo.

In the above quote, Jacob calls attention to the ways his understanding of masculinity — acting, looking, and dressing like a man — is guided, in part, by how masculinity is constructed and represented through thinspiration on Tumblr. Jacob's example highlights how thinspiration serves as a reference point for his gender, one that was particularly influential while he was a "young baby trans" person who was learning to navigate the ways he understood, presented, and embodied his gender. Taken in concert with Florence, we see how each used thinspiration to guide and set gendered goals for their bodies during gender transition. The use of thinspiration by these participants calls attention to the ways in which thinspiration promotes and reinforces certain ideals — of beauty and thinness —- across genders. These are not the same gendered ideals, but, rather, specific references for femininity, masculinity, and, as we address in the following example, androgyny.

Skeletor described how thinspiration provided a reference for how to look androgynous. He talked about "*binge[ing] on trans / FTM [female to male] / man thinspo in the beginning*." These various types of thinspiration served as reference points for how Skeletor understood and set goals for his own nonbinary gender. Though we focus here on thinspiration, we note that connections between androgyny and thinness circulate beyond eating disorder spaces. Within trans communities, androgyny is becoming synonymous with thinness [38, 66]. For Skeletor, thinspiration simultaneously served as a reference and as a technique for achieving androgyny. Skeletor talked about how thinspiration fueled his restrictive eating behaviors, saying:

> ...I realized that I could just join [eating disorder community] and be extremely restrictive. [...] I started eating less and less. And then the weight actually came off because I restricted the amount of eating to ridiculously small portions. And then I started doing

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> things like going on to [eating disorder community]. Looking at thinspo and then I
> was like, "I could look like that if I tried hard enough."

Thinspiration, beyond its availability as a reference, is entangled with Skeletor's use of disordered eating (i.e., restriction) to manage his body. Thinspiration, therefore, is not just representative of idealized gendered body depictions, but also a technique for achieving those standards. Restrictive eating practices are inscribed within thinspiration and have been used by all participants introduced in this section. Skeletor explained thinking that, if "*[his] weight would go down... [he] would be less feminine*," and, above, details using thinspiration as a reference point to "*try hard enough.*" Florence, additionally, talked about controlling her weight to appear smaller and, therefore, more feminine. These examples call attention to the ways our participants restrict their eating to decrease (Skeletor) and increase (Florence) femininity. For our participants, restriction can sometimes revolve around femininity, including in its mitigation.

Though we have worked with thinspiration as our example throughout this section, our intention is not to suggest that thinspiration alone influences the ways people guide and set goals for their bodies. Several participants addressed how other eating disorder content as well as content within diet and fitness communities and queer and trans communities served to shape the ways they viewed their genders and set associated goals for their bodies. Batman, for example, talked about how "*the transmasculine Instagram community is very much focused on thinness and fitness,*" describing how the "*narrow perspective*" on bodies within this community "*fueled his eating disorder thinking*" and what it meant for him to be "*trans enough.*" Though brief, Batman's example illustrates how non-eating disorder content within other spaces, such as transmasculine Instagram, can shape the ways people experience the combining elements of their eating disorder and gender — and the ways these experiences are entangled with goals for body and gender transformation.

Our examples in this section demonstrate how thinspiration is gendered, interpreted through gender, and used as a reference and technique for (gendered) body transformation. Rather than solely promote eating disorders, we have shown how thinspiration promotes romanticized and narrow gender ideals, operating as an integral source of identity information for our participants, especially as they navigated the liminality associated with their gender transitions. In these examples, thinspiration acts as a technology of the self — a technique for transforming the self and for achieving self-actualization [62] — both for how it provides a gendered aesthetic reference, as well as how it operates as a technique for which to achieve that aesthetic. In our discussion, we return to our consideration of thinspiration as a technique, thinking-with Haimson's social transition machinery [73].

4.2 Gender Minorities in Eating Disorder Spaces Occupy Marginal Positions

Our participants called attention to the ways online eating disorder spaces often center cis women — and, therefore, promote cis feminine experiences with eating disorders. In this section, we consider the ways our participants are gender minorities within online eating disorder spaces. We illustrate how, as gender minorities, our participants occupy marginal positions within eating disorder communities and networks. We start by detailing how the cis feminine gender norms of eating disorder spaces impacted all our participants in various ways, building to highlight how these gender norms differently affected our participants. In particular, the nonbinary and transmasc individuals we spoke with experience additional distance between their genders and the cis feminine gender norms of online eating disorder spaces. As such, they experienced marginality differently from our transfemme participants who, while not cis, found affirmation and connection through their femininity. In tandem with discussing the marginal positions occupied by our participants,

we detail the ways in which marginality presents certain harms, such as gender dysphoria and threats to identity, including to eating disorder validity and gender authenticity.

Several participants described how gender norms within online eating disorder spaces privileged cis femininity as the default. Eli talked about cis feminine gender norms as the "*heavy female and feminine presence,*" while Skeletor described eating disorder content and spaces as "*very heavily influenced by the patriarchy, and having to find a man, and having to do the straight girl thing.*" The cis feminine undercurrent within online eating disorder spaces suggests that the experiences of cis women — particularly those who are young, wealthy, and white — are the most authentic and legitimate. Within these online spaces, then, the ways that cis women experience eating disorders are centered, considered the most 'normal,' and, as Jacob described, "*obviously… the gold standard.*"

Our participants, as individuals who do not conform to cis feminine normativity, occupy marginal positions within online eating disorder spaces. Florence, though she described feeling like "*one of the girls,*" simultaneously discussed the absence of *trans*femme experiences in online eating disorder spaces. She said:

> I don't see that experience represented that much, where it's a tall broad-shouldered trans woman who wants to — I don't know, who wants to pass. Just, like, how that has affected my relationship with my body and, my desire, my need to make myself smaller. I haven't seen other trans people really talk about that, and I don't know if that is the experience for other trans girls who are anorexic.

Florence's uncertainty about the experiences of other trans girls reflects differences between her anorexia and the ways anorexia is represented within predominantly cis spaces. Ultimately, cis femininity within online eating disorder spaces does not inherently make space for transfememe experiences — or, as Mako discussed, transfemme bodies. Rose highlighted her frustrations around seeing "*one body type,*" a particular type of cis woman, within online eating disorder spaces online. She said:

> I think that I get really frustrated when like 90% of the content I see is one body type when like I'm actively trying to be in recovery, and I can see that, like, it gets frustrating when the only thing that I see is someone that doesn't look like me.

Rose's quote serves as an illustration of the ways gender ideals within eating disorder spaces do not only intertwine with content promoting disordered eating — they exist alongside recovery and the ways people move between experiences (e.g., with disordered eating, with recovery), as well. Here, Rose shapes and set goals for her body based on the types of bodies available to her within eating disorder recovery content and spaces. She tells us that the bodies centered within this domain are limited. When we asked her to elaborate on the body type she saw, she said:

> Nowadays, it's a lot more of like the constant bombardment of one type of body. And I think that really affects, you know, someone who's trans, who has a — not out of reach body shape for a woman. I would say my shoulders are wide, ribs are bigger. This and that. And, so, that constant bombardment definitely reinforces a lot of gender dysphoria which, in turn, reinforces a lot of the disordered eating.

Rose feels disconnected from the overwhelming bombardment of content related to *cis* women and *cis* bodies. The types of bodies she sees online — or, more accurately, the one body type — does not reflect her own. The absence of body diversity not only excludes and others Rose, but also damages her relationship with recovery. As she tells us above, the 'constant bombardment' of limited cis feminine body ideals "*reinforces a lot of the gender dysphoria,*" which, in turn, directly exacerbates her use of disordered eating as a technique for body management.

While our transfeminine participants experience marginality due to distance from the default identity of *cis* woman, our nonbinary and transmasculine participants experience marginality due to distance from both cisgender-ness and womanhood. Taylor, a nonbinary individual, explained how ze[5] felt "*some kind of distance between what people typically talk about when they talk about people with eating disorders and what I am*" in online eating disorder spaces. For Taylor, distance from the status quo (i.e., cis women) is constructed simultaneously through hir transgender-ness and hir experiences as a nonbinary — and, therefore, non-feminine — person.

The 'distance' Taylor addresses, encapsulating multiple aspects of gender, resonates through the interviews of other nonbinary and transmasculine participants, including Eli, Skeletor, Draken, Jacob, and River. The metaphorical distance from centered gender norms places our participants along the fringes of online eating disorder spaces — on the margins, in marginal positions. Marginality also made our nonbinary and transmasculine participants susceptible to specific identity threats. Eli described how feminine assumptions within online eating disorder spaces produced tensions between his gender and his experience with an eating disorder. He said:

> You see different posts that people make, and they say, "Do you *ladies relate*," or just things like that. And it can just feel very like, 'Oh, okay. If I have an eating disorder, I must be a woman.' Which I know not to be true.

The gendered way of addressing community members (i.e., ladies) that Eli describes illustrates one way in which gender is practiced and reinforced within online eating disorder spaces. The practice highlighted here operates as a boundary within the community, implicitly suggesting that certain individuals (i.e., ladies) belong and that others do not. Further, for Eli, the gendered assumption introduces dysphoric tensions to his experience with an eating disorder. Through cis feminine normativity, 'do you ladies relate' constructs eating disorders as the dominion of women. The dysphoric tensions begin to emerge in the quote above and are expanded in the following, where Eli explains:

> I definitely think it ["hey ladies"] causes like a sense of dysphoria that like cis men wouldn't and I'm sure it's invalidating cis men in its own way. But, being trans, it's a little bit more dysphoria inducing, I feel. It can feel — here's another thing you have in common with women, you know?

Individuals, such as Eli, who have been assigned female at birth have been pressured and raised as women. The equating of eating disorders with womenhood reinforces the notion that having an eating disorder means being womanly. The suggestion of womanhood threatens Eli's gender, resulting in a sense of dysphoria. Importantly, Eli notes that cis men may also experience invalidation within online eating disorder spaces due to their statuses as gender minorities. However, cisgender masculinity does not encounter threats to gender authenticity — by the very nature of its cisgenderness. Cis men are the gender they were assigned at birth. They have never been pressured, raised, or socialized as anything else. This important distinction highlights potential differences between the experiences of nonbinary and transmasculine individuals and cis men in online eating disorder spaces.

Threats to gender authenticity were not the only ones our participants encountered. Draken talked about how cis feminine normativity within online eating disorder spaces called into question the legitimacy of his eating disorder. He said: "*I would always think that I shouldn't have an eating disorder because I'm a man. You know men don't have eating disorders and stuff like that.*" Elaborating, Draken explained:

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[5]Ze/hir, pronounced "zee" and "here," are neopronouns that individuals may use in the stead of traditional pronouns, such as he/him, she/her, and they/them.

> If I have bulimia, then I obviously can't be a man. Or like a real man wouldn't have this type of eating disorder. So, maybe my eating disorder isn't real or that I'm just like — I don't know.

Cisgender normativity threatens the experiences of men with eating disorders through the ways it simultaneously suggests that having an eating disorder is womanly *and* that men with eating disorders only have certain types — of which bulimia is not included. The exclusion of bulimia from the norms surrounding masculine ways of having an eating disorder implicitly suggests that Draken's eating disorder is not real. Prior research illustrates how threats to the validity of an eating disorder influence how people understand their eating disorder and make decisions about care and treatment [55, 104].

Our examples across this section highlight how trans people do not conform to cis feminine normativity and, as such, are relegated to marginal positions within online eating disorder spaces. Though all our participants occupy the edges of these spaces due to their statuses as gender minorities, we found distinctions between the ways people experienced marginality. For example, while gender dysphoria was a common thread amongst participants of different genders, we found that threats to eating disorder and gender authenticity were highlighted by our nonbinary and transmasculine participants. As we address in the next section, we found that occupying marginal positions necessitated that our participants adopt strategies for online navigation.

4.3 Trans People Develop Strategies to Navigate Marginalization in Eating Disorder Spaces

Given that cis femininity is centered within online eating disorder spaces, trans people who participate occupy marginal positions produced through the 'distance' between gender norms and their own (gender minority) identities. To navigate cis feminine normativity, we found that our participants adopted online navigation strategies that worked to affirm their experiences as trans people with eating disorders. We highlight three strategies that our participants used to navigate marginality within their online ecosystems: using multifaceted identity spaces, curating online networks, and faceting their identities. These techniques supported our participants in constructing and moving through their online ecosystems in ways that centered their experiences as trans people with eating disorders, even while occupying marginal positions in online eating disorder communities and networks.

4.3.1 Using Multifaceted Identity Spaces. Prior scholarship within CSCW and HCI highlights the benefits of identity and experience-based online communities. In the context of marginalized identities, research illustrates how accepting and supportive online communities and networks can have positive health impacts and reduce harms associated with minority stress and socially stigmatized experiences [6, 60]. Though none of our participants described creating an online space for trans people with eating disorders, several recounted their experiences gathering and participating in a trans eating disorder community on a popular social media platform. Though this online community intended to address multifaceted aspects of identity (i.e., the combined eating disorder and gender experiences of *all* trans people with eating disorders), our participants detailed how it ultimately failed. Even when multifaceted identity-based communities exist, they do not necessarily successfully support members of their intended population — and, as such, do not necessarily provide a solution to navigating marginality in other online spaces.

Just as eating disorder spaces produce and reinforce gender norms, so do trans eating disorder spaces. Rather than the construction of cis femininity as a gender norm, the trans eating disorder

community our participants discussed centered the experiences of individuals from the female-to-male (FTM) trans community. For Charles, a trans woman/nonbinary individual, the centering of FTM experiences hindered their relationship with the community. They explained:

> Honestly, I feel like I don't belong. The [trans eating disorder community] is just literally female to male, where I actually feel less belonging than just regular [eating disorder community].

Charles occupies the marginal position of a gender minority within the trans eating disorder community. For them, this position creates an insurmountable disconnect with the community — so much so that they feel like an outsider, like they do not belong. The disconnect Charles describes in the context of their relationship with this trans eating disorder community is absent from their relationships with other eating disorder spaces online, where their relationship with femininity makes them feel included.

Not all participants who discussed the trans eating disorder community felt like outsiders, however. For Taylor, a member of the FTM community, the trans eating disorder space simply lacked utility. Taylor described how the posts and responses within the community lacked the nuance ze would have found useful. For Taylor, the nuance ze was looking for included detailed posts by individuals with similar experiences or who could provide information about the ways medical transition impacted their relationship with their bodies. As such, the trans eating disorder community Taylor hoped would be a "safe haven" is a community ze no longer even bothers to check. Placing Taylor and Charles in conversation with one another, we see how this online trans community, intending to serve all trans people, ultimately did not serve either of our participants. The same spaces may not be able to serve nonbinary, transfemme, and transmasc individuals. If a multifaceted identity space does not meet an individual's needs, they may participate in other online eating disorder spaces, even if that means risking the consequences associated with occupying the periphery.

4.3.2 Curating Online Networks. Rather than participate in online trans eating disorder communities, such as the one discussed above, most of our participants curated elements of their online networks to follow accounts managed by trans people with eating disorders. To curate their networks, our participants leveraged existing online community and social media platform features, such as algorithmic suggestions and search functionality.

While online community and social media platforms features can help individuals locate accounts and content, our participants detailed explicit strategies for putting together their online networks. Amari, Jacob, and River all described how they were on the lookout for gender inclusivity. Jacob, for example, scanned accounts (within a certain eating disorder network on Twitter) for their profile information and posts. He said: "*When I see Twitter accounts that have their fucking pronouns in their bio, or like discuss being trans, I'm going to be more likely to follow them.*" Though occupying a marginal position within many eating disorder spaces, Jacob constructs a region of his online ecosystem — his Twitter feed — in ways that promote trans people, especially trans men, with eating disorders. Essentially, by using account cues (e.g., pronouns, posts about being trans), Jacob has configured his eating disorder network on Twitter to highlight experiences similar to his own.

While Jacob's online curation was successful, many of our participants encountered challenges to curating trans eating disorder networks. Take, for example, River's experience searching for the accounts of other nonbinary people in anorexia recovery on Instagram. River described using hashtags during their search efforts. However, platform limitations restrict to only one hashtag at a time (e.g., #nonbinary, #anorexiarecovery). They said:

> When I'd search for accounts to follow in the anorexia recovery tag or like the eating
> disorder recovery tag. It's usually all cis gendered women, to admit not even the
> representation of men. But, then, the nonbinary tag — you have to search through
> a bunch of just posts about being nonbinary, that's not necessarily eating disorder
> related.

On Twitter, Jacob was able to curate his own trans eating disorder space, drawing nebulous boundaries within a larger eating disorder network. River, on Instagram, met with no such success. Though content from the accounts that River follows come together within their Instagram feed, the nonbinary accounts that River follows and the anorexia recovery accounts that River follows are separate — they do not overlap. As such, beyond River's personalized Instagram feed, these accounts occupy different spaces and are, therefore, part of different communities and conversations. Though River and Jacob had similar platform tools available — for following accounts and searching for content — this example illustrates what may be fundamental differences between the types of people who use certain social media platforms (or the ways in which people make themselves visible in some online spaces, but not others).

4.3.3 Faceting Identity. The above sections depict the challenges our participants encountered with respect to finding and curating trans-specific eating disorder content online. Even when our participants developed strategies to connect with others like them, our findings show how navigating marginality has varying degrees of success. Accordingly, individuals work to participate and carve out space within the online eating disorder spaces that can cause distress and harm — and, if not, like Skeletor and Rose, they leave.

A technique that River uses to navigate online eating disorder spaces — specifically, anorexia recovery spaces on Instagram — involves relating to content and accounts along the dimension of their recovery from anorexia, rather their nonbinary gender. For River, foregrounding their relationship with anorexia recovery provides a way for them to feel accepted and included. Florence, similarly, described feeling like "*one of the girls*" in eating disorder spaces, where she has foregrounded her womanhood. She also tells us that, within these online eating disorder spaces, she is able to leave "*trans-ness behind.*" Between River and Florence, we see how strategies for navigating marginality also involve intentionality, where people select to relate to content through certain aspects of their identity, but not others.

We consider practices of intentionality in tandem with faceting. As described in earlier CSCW and HCI research, faceting entails the ways people perform certain aspects of their identity depending on context [58, 117, 128]. Rather than highlight the performative nature of faceting, here we attend to faceting as a relational practice. As a relational practice, faceting involves the ways people manipulate their identities in order to find acceptance and belonging, and to protect themselves during online encounters. Taylor, for example, described carving hirself out of content:

> There's a space already existing and I've had to sort of carve a little thing — a little way
> into it, where I have to cultivate a certain relationship with things that I see. Where it's
> like this is talking about female bodies, but also women, so I have to, I see the female
> body part and have to purposefully kind of carve myself out of the woman part of that.

Taylor's quote illustrates how ze carves hirself out of content, essentially manipulating hir interaction with content to mitigate the harm of being associated with femininity. While the examples with Florence and River highlight how people foreground facets of their identities (i.e., anorexia recovery, womanhood), Taylor's example demonstrates how faceting can also involve carving out or pulling away aspects of identity in order to relate online. The way we discuss faceting also resonates with DeVito et al.'s finding of *identity flattening* amongst their bi+ participants

in queer communities [122]. However, in our examples, individuals are not necessarily making decisions about how to present themselves online, but, rather, are strategizing the ways they relate to content. While our participants' identities as they relate to eating disorder and gender are, by necessity, teased apart (e.g., in order to foreground relationships with one rather than the other), unlike identity flattening, our participants' identities have not been compressed into something less complex. Even when foregrounding one aspect of identity or carving out another, the full ways people are embodied still influences their relationships with online content and spaces.

Importantly, the three strategies we describe in this section are illustrative of the participants we spoke with, but are not intended to be representative of how all trans people with eating disorders participate within online eating disorder spaces. Nevertheless, across this section, we have detailed several ways our participants navigated marginality, such as through the use of trans eating disorder spaces, curation of their online networks, and faceting of their identity. We revisit these strategies in our discussion, where we highlight the labor associated with such strategies and describe our recommendations for online community and social media platform design.

5   DISCUSSION

To better understand the experiences of people with eating disorders, we must account for gender. In this section, we build from our findings to consider how online eating disorder spaces act as social transition machinery and how gender minorities in online eating disorder spaces perform additional labor to participate. The design recommendations we present at the end of this section aim to support people who occupy marginal positions and move through life transitions online.

5.1   Online Eating Disorder Spaces as Social Transition Machinery

Our findings complicate prior online eating disorder research by attending to gender. Our framing of eating disorders online, examining the combination of eating disorders and gender, invites parallels to Haimson et al.'s research on trans technology [78]. In one study conducted by Haimson et al., participants engaged in speculative design, where some participants imagined augmented mirrors that would "allow a person to view themselves as they envisioned their gender" [78]. Thinspiration and other eating disorder imagery, including recovery-related content, operate similarly to this speculative design by providing avenues for individuals to set goals for their bodies. However, while the mirror and other technologies detailed by Haimson et al. promote affirmation and positivity, eating disorder content can involve and even promote serious risks. Recall, for example, how thinspiration entangled with Florence's restrictive eating practices and how eating disorder recovery felt impossible for Rose due to the limited body diversity depicted in recovery imagery.

Though used by trans people, eating disorder content and spaces are, by and large, not yet trans technologies. Most of the content and spaces described by our participants were not designed by or for trans people[6] and are not attuned to the needs and cultural realities of trans people. Additionally, when housed on social media platforms, eating disorder content and spaces comprise a capitalist framework that is inherently incompatible with trans liberation [12].

As eating disorder spaces are not yet trans technologies, we discuss their utility as social transition machinery [73]. Social transition machinery describes the ways people construct online ecosystems to facilitate life transitions [73]. In the context of our work, we attend to life transitions related to the ways people come to interpret and enact their genders (e.g., transition work). However, considering

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[6]Though trans technologies do not need to be designed by trans people, recent CSCW and HCI scholarship, including research with trans participants, highlights the importance of designing with people and communities, such as by including them in research and design processes [2, 48].

how eating disorder spaces function as social transition machinery has relevance beyond gender, particularly for eating disorder scholars. Eating disorders reflect life transitions (e.g., onset, healing, recovery, relapse), which, though liminal, are not neutral [73]. Liminal states associated with eating disorders, as well as with gender transitions, can be ambiguous and unclassifiable as well as dynamic, emotional, political, and, at times, tumultuous.

One element of social transition machinery highlighted in prior work is the importance of separation between networks. Across our cohort of participants, we observed separation with respect to the creation and maintenance of eating disorder accounts, which participants kept distinct from other personal accounts where they might connect with friends and family. Our findings resonate with other eating disorder scholarship that highlights how individuals, including children and teenagers, create secretive eating disorder accounts during the onset of their experience [7, 125]. Separation, though perhaps positive in the context of gender transition, can support potentially risky health behaviors and outcomes when eating disorders are involved. When we consider the adoption of social transition machinery within eating disorder scholarship, we see a vital need to examine the ways that certain elements of social transition machinery, while beneficial for some transitions, may have consequences for others.

Pivoting from eating disorders, for the remainder of the section we highlight the ways trans people use online eating disorder spaces in the context of gendered body transformation, frequently in concert with gender transition. Though we focus on gender transition, we acknowledge that body transformation and disordered eating can occur prior to transition, transition can be a non-linear and continuous process, and not all trans people transition. Understanding eating disorder spaces as social transition machinery helps us attend to the ways our participants experience liminality during gender transition online, such as by using online spaces to "improve" their bodies. For Florence and Jacob, thinspiration guided their aesthetics, their genders, and, subsequently, their idealized weights. In our findings, we saw how thinspiration acted as a reference for gendered forms of embodiment and as a technique for obtaining those gendered forms. Across our participants, who included nonbinary, transfeminine, and transmasculine individuals, thinspiration guided the goals our participants set for their genders, informing how individuals transitioned toward androgyny, femininity, and masculinity.

The narrow ideals and representations of bodies within eating disorder spaces can be detrimental for anyone. However, when trans people use these online spaces to facilitate their transition, they do so in conversation with very limited aesthetics, ideas, and language, many of which center a very specific type of cis femininity. In various situations, including recovery, eating disorder content can represent a fixed, final embodied state toward which individuals should strive. Practices that center cis femininity create a distance for nonbinary and transmasculine individuals, which can lead to dysphoria and feelings of invalidation. Additionally, the cis feminine default represents yet another way in which trans women encounter heightened societal pressures that push and pull them toward cis femininity for any kind of acceptance [14, 116]. People may be more susceptible to these harms at certain times surrounding transition as well as during life transitions when their status within eating disorder spaces has the potential to shift, impacting their closeness to a space's center or default.

5.2 The Labor of Gender Minorities in Online Eating Disorder Spaces

As addressed, our participants' genders distance them from the cis feminine default within many online eating disorder spaces. Rather than exist solely within online eating disorder spaces, cis feminine gender norms are deeply entrenched with the ways Western society thinks about eating disorders, which can be viewed as the dominion of young, upper middle-class white girls [71, 86]. A false stereotype, to be certain [65, 81, 94, 102]. Nevertheless, the ways societal stereotypes congeal

as norms and cascade into online eating disorder spaces relegates other genders to the periphery. Occupying marginal positions within online eating disorder spaces can exacerbate disordered eating and dysphoria and threaten the validity of eating disorder and gender identities.

To successfully occupy marginal positions within online eating disorder spaces, our participants were required to perform additional work to affirm and center their experiences as trans people with eating disorders. Prior work describes this additional work as aesthetic labor, highlighting how work associated with customizing and navigating online spaces is entangled with the labor of transforming toward cisgender and even transnormative beauty standards [130]. This earlier research illustrates how the labor that trans people perform online permeates and persists across online spaces, far beyond our focus on eating disorder content, communities, and networks.

Before we detail specific labors associated with navigating marginality online, we (very briefly) contextualize our discussion in the historical and contemporary labors that trans people and individuals with eating disorders perform. Cis and abled bodymind[7] normativity blankets our society, shaping assumptions, practices, and structures. Trans people and people with eating disorders (as individuals with psychosocial disabilities) encounter marginalization unfolding from how their identities do not conform to societal norms related to appearance and behavior [39, 64, 82, 87, 106, 109]. Visible and invisible identities influence the ways that people are perceived, treated, and, thus, able to navigate their environments [3, 82, 126]. Though our work does not make comparisons between the ways individuals and groups are differently oppressed, we do note that gender is often more visible than psychosocial disability. To navigate oppressive interpersonal interactions and societal structures, individuals with marginalized identities adopt strategies for passing, wherein they conceal aspects of themselves to survive societal norms. Passing — and other practices associated with negotiating an oppressive society — involve labor. Understanding the burden of this labor serves as the backdrop for how we approach understanding the strategies our participants discussed for navigating online eating disorder spaces as gender minorities.

When we discuss the labor associated with the strategies our participants adopted for navigating online, we aim to highlight several costs associated with additional work. For our participants, these costs included time, energy, and emotion. Adopting or developing and then deploying practices to navigate online content, for example, necessitates additional time searching for and through hashtags as well as skimming profiles and accounts for pronouns and trans-related content. The time associated with these activities is not an isolated cost; it involves the energy that people use to conduct searches or read profiles. Several participants, additionally, described the emotional burden of their online participation and associated strategies. The poignancy of Taylor's carving out of content speaks to the heightened emotional nature of online participation in the context of eating disorders and gender. Unfortunately, conducting additional work is not a guarantee for beneficial, meaningful, or supportive interactions. Recall that many of our participants were not successful in curating their ideal online ecosystems or navigating online in ways that mitigated their exposure to harmful (e.g., dysphoric, invalidating) content.

The labor involved with navigating the periphery in online eating disorder spaces — including work associated with curating online spaces and faceting identity — bears a complicated relationship with the norms of online communities and the technical affordances of social media platforms. Sometimes labor is supported, such as through account holders providing their pronouns in their profiles, but often it is not (e.g., the inability to search two hashtags simultaneously, community members addressing others as "ladies"). These examples highlight how the labor involved in navigating marginality falls within a sociotechnical domain. Labor is not solely created or mitigated

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[7]Our use of the term 'bodymind' is adopted from disability studies, where Clare uses the term to illustrate the interconnectedness of the body and the mind, pushing back against mind-body dualism [34].

through the technical features a platform includes, but also through the ways individuals use these features in concert with one another. The design recommendations we detail in the following section address technical features that could be developed by social media platforms to support trans people with eating disorders and, importantly, other individuals who experience marginality, intersecting identities, and life transitions online.

5.3 Implications for Design: Supporting Marginalized Individuals and Life Transitions

While prior research addresses the creation of new online spaces (e.g., communities, platforms) for individuals within marginalized or minoritized groups, our findings challenge this point of view, illustrating how creating and holding online space can fail. Our design recommendations, instead, attend to supporting the ways trans people currently navigate marginality and life transitions in the context of online eating disorder communities and networks. We outline three overarching strategies for technical feature development on social media platforms. Though grounded in the locality of our research, the significance of our recommendations extends to similar experiences [88]. Our suggestions may have utility for gender minorities in other online spaces as well as individuals with intersecting identities (particularly identities that relegate them to the periphery of online spaces).

5.3.1 Designing for Search. Several of our participants discussed challenges associated with finding trans-specific online eating disorder accounts, communities, and networks. In this section, we use Instagram, where searching for multiple hashtags simultaneously is not possible, as an example. Recall how River's search for nonbinary anorexia recovery accounts became, separately, searching for #nonbinary and searching for #anorexiarecovery. Separate searches do not account for the ways identity combines. As River mentioned, many accounts using #nonbinary did not include content related to anorexia recovery. Similarly, the accounts posting most frequently in #anorexiarecovery were those managed by cis women. While River could have searched for or even created a combined hashtag (e.g., #nonbinaryanorexiarecovery), here we recommend an alternative: platforms should leverage the AND operator for search functionality. Though third-party developers have made it possible to search for multiple hashtags in combination, these applications are not accessible to the broader public, who may not be aware of their existence or how to use them.

Single hashtag searches promote engagement and reach; however, they are less successful in information retrieval, which can be consequential for individuals with intersecting (and marginalized) identities. Enabling searches for multiple hashtags could reduce the labor associated with separate searches and highlight accounts and posts where these hashtags collide; thus, supporting individuals with intersecting identities in finding one another and potentially building community ties through how accounts connect when following and interacting with one another. Importantly, our suggestion here is not a cure-all for network curation. Though River encountered challenges to trans eating disorder network curation on Instagram, Jacob successfully integrated into a network of trans people with eating disorders on Twitter. The differences in the experiences of these participants may speak to the different online locations where trans people with eating disorders participate. Searching for multiple hashtags simultaneously, though potentially beneficial, cannot summon accounts or content that do not exist.

5.3.2 Designing for Online Curation. Our participants used identity faceting to navigate online spaces where their experiences were marginalized. Here, we use eating disorder communities on Reddit to imagine how platforms could develop technical features to support the work associated with identity faceting, which involves intentional decisions around how to relate to, including how to carve out from, content. Platforms like Reddit include account-based content feeds (i.e., Home) as well as clearly articulated community spaces (i.e., subreddits). On Reddit, posts (on Home

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and within subreddits) can be organized by Hot, New, Top, and Rising. An account's Home feed also provides the option to organize posts by Best. These organizational elements — Best, Hot, New — work by operationalizing specific aspects of posts, including timestamps, the number of upvotes, the number of downvotes, and the number of comments. While organization reliant on these metrics provides a universal way of consuming content, it does not take into consideration how account holders explicitly feel about or react to content.

Though simplistic, upvoting functionality (on Reddit) provides one way to account for how people feel about or react to content. Leveraging the ways people upvote content — or 'like' it, such as on Instagram — could result in technical features that support organizing content based on what an account holder might like. For example, imagine a feature that organizes posts within a community by similarity to other content (e.g., posts, comments) upvoted by an account. In a very specific instance, we envision an individual upvoting comments and posts when trans experiences or points of view are mentioned or discussed within an eating disorder subreddit. Sorting by upvoted content similarity within that eating disorder subreddit, then, would ideally organize similar, trans-related posts at the top of the community's page (not to mention the other types of eating disorder content that an individual may upvote) for that specific account holder. This logic extends to how posts similar to those upvoted by an account may be organized at the top of an account holder's Home feed, as well.

In addition to sorting content, platforms could bring content from different spaces (e.g., subreddits, networks of accounts, hashtags) together within a larger space. For example, rather than Reddit's Home or Popular feeds, imagine a space for a combination of related or account holder-selected subreddits. Bringing different spaces together may provide ways for those who are marginalized to connect with content, communities, and people while avoiding the problems associated with reaching a critical mass that trans-specific eating disorder communities (within our study) experienced. While connecting disparate spaces, such as those on Facebook and Tumblr, may not be possible, creating connections and intersections between spaces housed on the same platform is a definite possibility. Here, we imagine a situation where multiple eating disorder subreddits, including trans eating disorder subreddits, are linked to each other on Reddit. Each subreddit would still have its own boundaries, content, and organization. However, the combination of these subreddits into a network or feed would create a new space, where individuals could sort content, such as through New, Hot, and similarity with an account holder's upvotes.

As much as identity faceting involves finding affirmation and validation in relatable types of content, it also involves carving away parts of content that produce harm. To contrast our example with upvotes, we also imagine leveraging downvote functionality (on Reddit and other platforms that operate similarly) as well as blocking and reporting features. Specifically, posts similar to those an individual has downvoted, blocked, or reported could be automatically hidden from an account holder's view of content — on their Home page as well as on specific subreddits. We are not imagining a situation where posts are entirely erased, but, rather, where they are partially concealed (e.g., "We've hidden the body of this post"). Hiding posts that share similarities with content that has been 'negatively' interacted with (e.g., downvoted, blocked, reported) could provide proactive support for individuals who engage with 'carving out' aspects of identity faceting.

We recognize the limited capacity of the above recommendations. For example, an upvote or downvote does little to indicate how a person feels about content [114]. However, the suggestions we outline here make use of existing social media platform features and interactions (e.g., upvoting, downvoting) and, as such, would not require additional types of data collection (though they may necessitate additional computational expense). Additionally, interactions such as upvoting and blocking are ones that many individuals already do. These interactions may also reflect the way experiences, including likes and dislikes, change over time and across life transitions. By

utilizing existing features, social media platforms can reduce the time, energy, and emotional burden associated with using identity faceting to strategically navigate content online.

5.3.3 Designing for Life Transitions in Online Eating Disorder Spaces. Our findings illustrate how many of our participants, regardless of gender, used online eating disorder content — primarily thinspiration — to inform and guide their gender presentation and transition. Thinspiration, and the disordered eating it can promote, has health consequences. Though leaving online eating disorder communities and networks is always an option, as Gerrard highlights, algorithmic feeds and recommendation systems can trap people into engagement with self-injury related content (e.g., by continuously recommending self-injury content that individuals previously 'liked' or engaged with) [69]. Though platforms provide features to help individuals navigate away from certain types of self-injury content (and to potentially transition toward healing and recovery), such as the provision of helpline resources, these features are not always successful. Feuston et al. show how resources shared by platforms, while important, can carry consequences that prohibit their ability to meet the needs of individuals who cross them [61]. Below, we present two suggestions for how platforms can design for life transitions related to eating disorders and gender within online eating disorder spaces.

First, trans people deserve access to resources that understand and validate their experiences, including those with body dysmorphia, disordered eating, and gender dysphoria. In addition to providing a general eating disorder helpline or resources, platforms could work to meet the specific identity-based needs of people with eating disorders. To support trans people with eating disorders, this could look like including information and resources related to trans experiences, such as gender dysphoria and gender transition. For example, Fighting Eating Disorders in Underrepresented Populations (FEDUP)[8] explicitly aims to meet and serve the needs of trans+ and intersex individuals with eating disorders and, accordingly, provides resources that center the experiences of trans+ and intersex people.

Second, we build on prior work that suggests automatically presenting people with recovery content when they search for self-injury hashtags on social media [69]. In the context of our population, suggested content should not just be related to eating disorders and associated transitions (e.g., such as toward reducing harm and/or recovering), but should also relate to life transitions associated with gender. For example, as our findings illustrate, trans people may search for and use thinspiration to set gender goals for their bodies. Alone, eating disorder recovery content may not adequately address the gendered ways in which thinspiration is used. Additionally, as described in our findings, eating disorder recovery content is not without the potential for harm. We recommend providing access to content, communities, and resources that could illustrate alternatives for setting gender-related body goals (e.g., trans communities, body positivity content, body neutral content). Importantly, platforms should provide individuals with the option of viewing, or not, the suggested content. Here, our aim is to keep various avenues of content open without forcing people to engage with content that may be inadvertently harmful for them.

5.4 Limitations and Future Directions

One goal of our study was to start to describe the diversity of trans people with eating disorders who participate online. To that effect, we spoke with nonbinary, transfeminine, and transmasculine individuals, and our participants had different experiences with eating disorders and transition. Nevertheless, our participant cohort primarily included individuals with restrictive eating disorders. Though a few participants discussed experiences with binge eating and bulimia, our sample does not represent many of the experiences people have with eating disorders. Additionally, all the

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[8]https://fedupcollective.org

individuals we spoke with transitioned and/or were continuing to do so. While transition can be an important experience for some trans people, it is not a requisite or the only way to be trans. As such, our study does not include trans people who have not transitioned or who have no desire to transition. Finally, most of our participants were white. Follow-up work should center the experiences of people of color with eating disorders who participate online.

Looking forward, we outline four suggestions for future work in this domain. First, prior research describes how trans people encounter significant impacts with respect to eating disorders and other mental illnesses [51, 72]. As we saw with our participants, disordered eating could be a technique to reduce gender dysphoria — alongside and in the place of gender-affirming healthcare. In the context of providing support, we see opportunities for working with healthcare practitioners. Health-related interventions could attend to various aspects of gender and presentation, such as dysphoria, transition, and passing. Healthcare-related research should address the impact of fatphobia on trans-related healthcare.

Second, while our participants used online eating disorder spaces to set goals for their bodies, this practice might be more prominent at some points during gender transition than others. Though not necessarily, early transition can be a time when individuals embark on their gender transition and begin charting a path, developing and setting goals for their gender and their body. The decisions that people make during early transition can have large impacts. Considering the ways individuals use online eating disorder spaces as social transition machinery points to a need to understand how these online spaces are used by trans people at various points surrounding transition. Third, while our research details how our participants engaged with online eating disorder content, communities, and networks, our participants described other online spaces in which their eating disorders were relevant (e.g., fitness communities, trans communities, specific podcast communities). Researchers studying how people with eating disorders participate online should consider studying and recruiting from online spaces that are not eating disorder specific, but still may include relevant people, content, and experiences.

Finally, the intent of our design recommendations is to support individuals, particularly trans people with eating disorders, who occupy marginal positions in certain online spaces. Though we develop several suggestions for social media platforms, we do so absent the explicit feedback and perspectives of trans people with eating disorders. By not including trans people with eating disorders in the creation of our recommendations, we risk not understanding how these recommendations could impact trans people with eating disorders (e.g., such as potentially creating additional labor for this group of people). Researchers have the opportunity to work with trans people with eating disorders to robustly explore the design space and develop recommendations that aim to support the ways members of marginalized groups and individuals experiencing life transitions participate online.

6 CONCLUSION

When individuals participate online they do so from the bodies they have, including the ways these bodies can be gendered. Throughout this paper, we argue that accounting for gender in the study of how people with eating disorders participate online — particularly people who are part of a gender minority — enriches what we know in this domain. Through our use of gender as an analytic lens, we have illustrated how the entanglement of eating disorders and gender unfolds in online spaces, shaping the ways people experience and interact with online eating disorder spaces. We have shown how our participants use online eating disorder spaces as gender-related social transition machinery, despite health consequences and risks associated with the use of certain eating disorder content, such as thinspiration. Additionally, we have addressed the ways trans people occupy marginal positions within online eating disorders spaces. In response to their marginal positions,

trans people with eating disorders may adopt strategies for online participation that center their experiences and multi-faceted identities. These strategies, however, involve labor — labor that compounds with other types of labors that trans people encounter in their everyday lives. Social media platforms have an opportunity to mitigate this and other problems by designing features that support the ways people navigate marginality and life transitions online.

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