

**Citation for published version:**

Kate Davenport, Wendy Solomons, Sylvia Puchalska, and Joanne McDowell, 'Size acceptance: A discursive analysis of online blogs', *Fat Studies*, (2018).

**DOI:**

<https://doi.org/10.1080/21604851.2018.1473704>

**Document Version:**

This is the Accepted Manuscript version.

The version in the University of Hertfordshire Research Archive may differ from the final published version.

**Copyright and Reuse:**

Content in the UH Research Archive is made available for personal research, educational, and non-commercial purposes only. Unless otherwise stated, all content is protected by copyright, and in the absence of an open license, permissions for further re-use should be sought from the publisher, the author, or other copyright holder.

**Enquiries**

If you believe this document infringes copyright, please contact Research & Scholarly Communications at [rsc@herts.ac.uk](mailto:rsc@herts.ac.uk)

## **Size Acceptance: A Discursive Analysis of Online Blogs**

.Kate Davenport, Wendy Solomons, Sylvia Puchalska, and Joanne McDowell

### **Author details:**

Dr Kate Davenport (corresponding author): Clinical Psychologist, School of Life & Medical Sciences, University of Hertfordshire, Hatfield AL10 9AB, 01707 286322, kate.davenport3@nhs.net

Dr Wendy Solomons: Clinical Psychologist, School of Life & Medical Sciences, University of Hertfordshire, Hatfield AL10 9AB, 01707 286322, w.solomons@herts.ac.uk

Sylvia Puchalska: Clinical Psychologist, Clinical Health Psychology Service, NELFT, Broad Street Health Centre, Morland Road, RM10 9HU, 01708435360, Sylvia.puchalska@nelft.nhs.uk

Dr Joanne McDowell: Principal Lecturer in English Language and Communication School of Humanities, English Language & Communication, University of Hertfordshire, Hatfield, AL10 9AB, 01707 285551, j.mcdowell@herts.ac.uk

**Abstract:**

Dominant discourses of “fatness” and “fat people” have implications for physical and mental health. Although alternative discourses such as “size acceptance” exist, there has been little consideration of the ways in which these alternative arguments (and speakers) may be positioned in order to be heard. Using a discursive thematic analysis, the current research demonstrates that size acceptance online bloggers have created a community online that enables them to persuasively provide alternative claims to “expertise,” which positions their views as credible and legitimate alternatives to those of more established authority-figures - such as health professionals. This has implications not only for the lived experience of fat people, but also for researchers by emphasizing the importance of exploring not just *what* is said, but *how*, if we are to understand how different articulated positions are to be persuasive.

**Key words:**

Fat, Fat Discourse, Size Acceptance, Fatosphere, Discursive Analysis

## **Introduction:**

Size acceptance is an umbrella term that includes fat acceptance - a political movement that encompasses fat liberation, fat pride, and fat acceptance messages and rejects the devaluation of fat people by campaigning for acceptance regardless of body size (Cooper, 2008; Kwan, 2009; Saguy & Riley, 2005). The Health at Every Size (HAES) movement promotes focusing on health rather than on weight, while remaining somewhat within a biomedical frame (Bacon, 2010; Burgard, 2009; O'Hara & Gregg, 2010).

Size acceptance movements were first established in the U.S. in the 1960s and later adopted by Europe in the 1990s, as an act to resist the more culturally available, and therefore more powerful, perspectives within Western society (Lupton, 2013). Size acceptance today is prominently advocated via the medium of the Internet/social media (more specifically known as the "fatosphere") (Harding & Kirby, 2009). The Internet is often used for gathering information and finding social support, particularly in relation to a specific illness or health issue (Gallagher & Doherty, 2009; McClimens & Gordon, 2009). There is a recurring theme of online resistance and countering of mainstream perspectives (Gard & Wright, 2005; Koerber, 2001; Lewis et al., 2011). Still (2008) asserts that the Internet offers a unique platform which allows marginalized people to take back control of their identities and bodies.

The fatosphere has been shown to impact individual understanding of the causes and consequences of the fat body and its acceptability to positive psychological effect (Betton et al., 2015; Dickins, Browning, Feldman, & Thomas, 2016; Dickins, Thomas, King, Lewis, & Holland, 2011; Harding & Kirby, 2009; Lillis, Hayes, Bunting, & Masuda, 2009). Therefore, this online discourse could hold positive implications for the future lived experience of fat people, but can only impact those outside of the fatosphere if these messages can be presented more widely. However, the fatosphere has been criticised for promoting "obesity," and is often publicly condemned in order to de-legitimize its claims (Dickins et al., 2011; Lewis et al., 2011).

Although the size acceptance movement does provide alternative discourses around the fat body, it is unclear how this may become powerful enough to resonate beyond

the confines of a supportive audience, such as within the online fatosphere. These discourses must be able to stand alongside those more dominant within society if they are to have an impact on wider communities. Some discursive strategies used within the size acceptance community have been identified in existing research; however, there has been little consideration for the ways in which authors position themselves and their arguments. This present research therefore explores this by examining what and how “fat” discourses are drawn on, developed, and/or resisted by size acceptance bloggers within online spaces, and how these bloggers persuasively legitimize themselves and their arguments in order to be heard.

### **Method:**

A basic assumption underlying any discourse analysis is that texts construct a specific version of an object or event to which they refer. Accordingly, analyses examine the various ways in which objects and events are *constructed* through language, and how these constructions are located within culturally available systems of meaning. This is the first step towards linking interaction with ideology.

Discursive “devices” (Wiggins, 2017) are features of discourse that can influence the nature of an interaction or construction, and perform social actions (or *functions*), such as to educate, engage, or persuade. By identifying discursive devices within text or talk, one can identify ways in which people *position* not only their arguments, but also themselves and others in talk or text; for example, making claims to the “rights” of a specific position (Davies & Harré, 1990; Strauss & Feiz, 2013). In doing so, they can work to position arguments as factual rather than biased, and the speaker as well-informed and believable, for example (Potter & Wetherell, 1987). Discursive analyses can therefore explore how language is used in such subject positioning and thus assist in uncovering what it is possible to say about a subject - and by whom.

An overall critical perspective was adopted for this research. For the analysis, a combination of both thematic analysis - to identify patterns or themes of context within talk - and discursive psychology/analysis - to examine discursive devices to identify functions within talk - were applied (Braun & Clarke, 2006; Wiggins, 2017). Our overall methodological approach is a discursive thematic analysis.

The data analysis began with an initial broad thematic analysis (Braun & Clarke, 2006) to identify the presence of fat discourses and context, followed by an in-depth analysis of these thematic excerpts to identify specific discursive devices and strategies (Wiggins, 2017). Conducting the discursive analysis on identified excerpts ensured content was relevant to “fatness” and allowed for a thorough analysis of the linguistic strategies employed across the different online sources.

### **Data Collection**

This project examines the discursive practices used by bloggers on group size acceptance sites, including *Tumblr*, *Wordpress* and *Blogspot*, in which multiple authors can share posts within a collaborative arena. Three blogs were selected using a purposive sampling approach across multiple platforms. In order to elicit a sufficiently rich and representative, but also manageable, quantity of data, three corpuses were selected - the first 15 days, the peak (highest word count per month) 15 days, and the final 15 days were chosen for the analysis.

The final dataset is formed of up to 38 contributors; however, as few as 7 bloggers were repetitive posters and thus deemed more “active” members of the size acceptance online community. Although all blogs contained pictures/images, only text was analyzed. The dataset size was sufficient in reaching what might be akin to theoretical saturation if using a grounded theory methodology.

The use of naturally occurring data online allows access to discourse without the direct influence of the researcher on the data. This is particularly important within the domain of size acceptance because of the members’ mistrust with institutions, such as academia, which may influence any new data collected. Legal and British Psychological Society guidelines state that Internet content can be used for research if the website is in the public domain and consent is not necessary (2007; BPS, 2013; Eysenbach & Till, 2001). If any blogs required membership, passwords or could not be accessed directly by any member of the public from a search engine, they were not used in order to respect privacy (BPS, 2007, 2013).

Only blogs (rather than individuals) that explicitly stated their collective position as “fat/size acceptance” were considered for this study. Any identifying information has been removed and pseudonyms used (the names of stars) in order to best attempt

anonymity. However, it is acknowledged that the dataset remains available online within the public domain and thus authors have the potential to identify themselves.

Steps were taken to consider factors that might influence the interpretation of the data, so as to ensure credibility of the findings. This included the use of double coding, keeping a reflexive journal, and enlisting a supervisory team of qualified researchers and two fatosphere bloggers as reviewers (whose data is not included within the dataset).

A critique of qualitative work is that interpretations are always partly influenced by the researchers' interpretation. It feels important therefore to state that in this case I, as primary author, am not engaged within the fatosphere and would not consider myself aligned to a particular group (such as size acceptance, for example). This research did however come from a place of awareness and concern for how fat people are often treated within modern Western society<sup>1</sup>.

Through the use of the aforementioned strategies of reflexivity, it was possible to reflect on times when I felt pulled toward advocacy and empathy for the marginalized voice and thus keep on an objective track. Feeling pulled toward being aligned to one position over another throughout the process of analysis was part of noticing when persuasion was taking place – this was an integral part of the analysis and only possible through the implementation of reflexive practice.

### **Findings and Discussion:**

This analysis draws on the notions of discourse, action orientation, and positioning, which are often performed in conjunction with one another and make links with the wider social and discursive context. The analysis found that size acceptance bloggers draw on a range of discursive devices in order to position themselves as entitled to talk on the subject of their own bodies, and fatness more generally, given their delegitimized position within society because of their bodies. This analysis also found that size acceptance bloggers act in ways that both equalize and privilege/surpass their position within society, and create both closeness and distance (with the opposition for example), negotiating power imbalances as they do so.

---

<sup>1</sup> Particularly within the UK, the society in which this paper is based

### **Category Entitlement**

Potter (1996) proposes that in order to establish the factuality of an account (or version of events), speakers must demonstrate themselves to be a reliable and independent source of information. Presenting oneself as a reliable source can be achieved by establishing, for example, that one is of sound mind, is an expert in the field, and has nothing to gain from lying. Discursive devices can be employed by speakers (regardless of conscious intent) in an attempt to persuasively establish their version of an issue or event as “factual” (Potter & Edwards, 1990; Wooffitt, 1992).

Speakers can specifically draw on the discursive device of *category entitlement* to position themselves as credible, and thus able to give a reliable account of the “truth” (Gee & Hanford, 2013). Category entitlement refers to the kind of knowledge, experience, or responsibility that a category of person is entitled to own (i.e. they have more reliable knowledge about a certain issue than most people) (Wiggins, 2017). This is of particular importance for “discredited” fat individuals - regardless of whether this is in person or the imagined image (i.e. when speaking online) - in permitting them to speak against (or alongside) voices in society that are more easily accepted or taken-for-granted as “truth” (e.g. medical discourses).

### ***Member of the “knowing” community***

When referring to factors that may impact their health and weight outside of the dominant messages of “individual responsibility” and “energy balance,” for example, (Brownell et al., 2010; Hill, Wyatt & Peters, 2012) participants in size acceptance blogs first assert an *entitlement* to make alternative claims about the topic of fatness through the use of statements such as “I understand” and by referencing size acceptance as a turning point/ Statements such as these position the size acceptance blogger explicitly as someone who “knows”:

#### **Alnitak:**

*I totally understand the significance of Social Determinants of Health (SDH) [...] I am also aware of the limited impact of personal behavior in the face of the effects of SDH [...]*

#### **Altair:**

*What I have learned most over the past five years of studying HAES is that the relationship between weight and health is incredibly complicated and individualized.*

**Vega:**

*Before I discovered FA, I had no clue that losing weight and keeping it off was as ridiculously improbable as it is.*

Size Acceptance bloggers also appear to present a metaphorical journey toward this position of knowing, consistent with cultural discourses of knowledge as a product of education over time. By making explicit their knowing, size acceptance blogs speak to an *entitlement* to speak as members of the “knowing” community/category of people, and thus provide a foundation for the factuality of claims that follow, which acts to persuade the audience of such claims.

Size acceptance bloggers provide a coherent and logical narrative for the credentials necessary to be viewed as credible, as a reliable source with “expertise,” and therefore not only *entitled* to speak but “worth listening to” (Labov, 1997). Sacks (1992) refers to this as a most reportable event. This is important for size acceptance bloggers in particular because of their delegitimized and discredited position in wider society as fat people (Rogge, Greenwald, & Golden, 2004).

By making one’s “knowing known” in these ways, size acceptance blogs can potentially counter negative assumptions and thus make it possible for their alternative claims to be plausible in the first place. Blogging in itself works toward being part of the conversation, regarding the fat body, but steps of persuasion must still be taken for their talk within the conversation to be considered. Making a claim without first positioning oneself in this way risks being overlooked as a contributor and is thus essential if such online discourse are to have any impact both within and outside the fatosphere for the future lived experience of fat people.

***Lived experience as a legitimate route to knowledge***

Size acceptance blogs also draw on the commonly-understood notion of “lived experience” to bolster the narrative of their “knowing.” This can further strengthen the rationale for their *category entitlement*, with the implication that as “experts by experience” they provide a privileged source of insight not available to professionals (Allen & Cloyes, 2005). Drawing on personal experience can position an account as “evidence,” arguably working in a persuasive capacity to render it the only valid

perspective for readers to take (as 'fact') - thus potentially surpassing the power held by some more dominant discourses within Western society and challenging conventional understandings of what it is to be an "expert." For example, the lived experience of "fat" is drawn on in providing a claim to the identity of "fat person":

**Antares:**

*I spent 27 years being fat and living as a fat person in the United States. That'll leave some scars on you (as well you know).*

**Sirius:**

*You see, I was a big baby. I was a chubby toddler. I was a chunky kid. I was a fat teenager. I was (according to the "perfessionalz" [sic] who measure these things) a "morbidly obese" young adult.*

**Altair:**

*For me, the personal lifestyle emphasis of HAES led to behavioral changes that yielded demonstrable metabolic benefits [...].*

Speaking from lived experience is a particularly interesting *category of entitlement*, because any account that follows is not easily contested - the argument being that only those who "live it" are *entitled* to occupy and speak (Kogan & Gale, 1997). Size acceptance blogs arguably act to take back power over the fat body as a means for *entitlement* to speak on the topic of fatness.

Speaking from experience is often a practice used to promote social justice by countering authoritarian and expert-based knowledge claims; for example, as seen in the work of feminists promoting social justice for women (Chow, Fleck, Fan, Joseph, & Lyter, 2003). This form of category entitlement is important because it allows fat individuals to occupy a space in which no other voice is permitted. This allows experience to be framed as an alternative to taken-for-granted "expert"-based knowledge and to challenge such conventional understandings.

As a strategy of persuasion, it is not possible to know whether this is effective as part of this particular study. It is possible that this "expert by experience" strategy might come across to the reader as biased, self-serving, or even delusional. When speaking to others within the fatosphere (therefore to those with similar interests) there may be an effect of being "within a bubble"; however the impact of this beyond

the bubble is not measured here. The next steps following this research would be to look at the effectiveness of what is being said.

Interestingly, these accounts at times also draw on the societally accepted (but oppositional) medical frame in their use of language to support their own position of *entitlement*. Terminology such as “metabolic benefits” is used as a persuasive strategy to help the account become more acceptable, and more difficult to refute, by drawing on already established language within “healthcare” (a category already *entitled* to speak about topics such as “health” and weight). Drawing on an established (and thus *entitled*) discourse community, such as medicine and/or healthcare professionals, can inform the reader that the speaker (i.e. the size acceptance blogger) is aware (i.e. knows) of prevailing discourses (or counter arguments to size acceptance), and that the speaker is adding something new and relevant (Burke, 1974). This might be particularly important for this group of individuals because medical discourse is so dominant and such an act moves away from a typical oppositional and/or confrontational position by using a shared language (Jutel, 2008; Kasardo & McHugh, 2015). However there is the risk of perpetuating the medical frame as dominant and thus further undermining size acceptance bloggers in the process.

### **Categorization**

Categories can also be used to justify *entitlement* and thus credibility for making a claim. Categories are frequently created as a consequence of describing oneself or others in particular ways. This carries with it social and moral implications, such as who belongs to what social group, and the responsibilities, rights and expectations that this membership involves (Edwards, 1995). Through the use of inclusive pronouns such as “us” and “we,” groups can be created that imply a sense of commonality with an audience, thus creating an “affiliative atmosphere” (Greatbatch & Clark, 2005, p. 35).

Categories make way for corroboration and collaboration - persuasive strategies that help indicate that an account is not simply a lie, opinion, or a figment of the speaker’s imagination. Categorization is particularly important for the individual fat person and/or size acceptance blogger who live in a system within society that constitutes them as somehow “wrong,” with the potential to be not only an individual “expert” but

to move toward a collective united expertis'. However, through the creating of an in-group community, categorization also consequently creates an out-group, which has implications for maintaining the existing oppositional positioning between mainstream and alternative discourses.

### ***In-group collaboration***

When speaking of society's treatment toward fatness (i.e. as inequitable and fat hating), size acceptance blogs create an in-group community through the use of terms such as "us," "our" and "community". This establishes the character of the narrator as someone with similar values to those of the assumed reader. This is a powerful act and one that those in power are unable to adopt, as their voices are so different from those of fat people.

#### **Alnitak:**

*People's stories matter [...] and **our** experience as social beings in an inequitable world needs to be part of healing **for ALL of us**.*

#### **Denebola:**

*The important part is becoming part of **this community** [Size Acceptance] [...]*

#### **Denebola:**

*many thanks to the many bloggers who are **contributing to this project** [Size Acceptance], adding their blogs to the feed, and supporting **our efforts** to broaden the discourse on what it means to be fat in this fat-hating world of ours.*

As in-group members, speaker can position themselves as skilled and knowledgeable interpreters who understand the values of the reader. This can form a persuasive basis not only for their right to be heard, but also to be taken seriously.

An in-group is set out in size acceptance blogs that facilitates the possibility for *corroboration*, which can create "agreement" and in doing so build up the factuality of an account, as well as *collaboration* – that is, the group must work together as one, united against outsiders. This in turn can strengthen the sense of community (Wooffitt, 1992).

The probability of a corroborated account being untrue is far less likely than for an uncorroborated account. This makes size acceptance blogging a vital source for

producing alternative perspectives that are corroborated and thus able to withstand a battle against dominant negative discourses that size acceptance bloggers (and fat people alike) arguably face in their venture into online spaces. Bloggers can thus become more than single “experts,” but a community of corroborated experts.

### ***Out-group delegitimization***

In creating an in-group, an out-group is inevitably created, and then often discredited. For example, when speaking of HAES (Health at Every Size) and when discussing different options that might facilitate weight loss, “others” are often positioned as providing oversimplified ideas, for example:

#### **Altair:**

*The worst thing we can do as HAES advocates is to issue blanket statements that oversimplify the issues.*

#### **Altair:**

*The practitioner I had been assigned was a male Physician’s Assistant who seemed to be very unenthusiastic about being there. [...] I got the usual “**stop drinking soda and you’ll lose weight!**” sort of crap.*

#### **Deneb:**

*At the time the media was full of stories of this ‘**magic bullet**’ and several of her family members had undergone the [weight loss] surgery with dramatic initial results.*

Size acceptance bloggers here are differentiated from others that “simplify” issues around fatness and weight, in doing so demonstrating gaps in logic or assumptions and positioning themselves as a group who do *not* do this (as demonstrated by Hill et al., 2012; Kim & Willis, 2007; Saguy & Almeling, 2008). This creates a difference between them (i.e. professionals, media, government) and us (i.e. size acceptance advocates), which is paradoxically a technique often used in media reporting (Coleman & Ross, 2010).

This arguably acts in a persuasive capacity to discredit the claims of others and position one’s own claims such that they cannot be questioned on their credibility, particularly if one’s own alternative claim is not explicitly named. This can equally be said to facilitate a safe position from which speakers can stand if they were to be

proved wrong later (Markkanen & Schröder, 1997), thus providing a position from which to cautiously negotiate their own falsehood within a society that is already quick to judge them as wrong. However, when the main form of evidence for a claim drawn on by size acceptance bloggers is personal experience, this can leave them in a vulnerable position, open to reproach.

Nevertheless, talk in size acceptance blogs draws on personal accounts of times when professionals were “wrong” in order to present the blogger as both “different” but also as “right” (i.e. different from those who typically discriminate against fat people and perpetuate negative messages, which is positioned as wrong) (Carr & Friedman, 2005; LeBel, 2008; Rogge et al., 2004). The negative effects of fat discourses in society are also drawn on, such as those presented by the media and healthcare:

**Altair:**

*The practitioner [...]. He asked zero questions [...] Five years later, I've finally [it] pinned down [...]*

**Altair:**

*I wrote a nasty letter to the clinic about [sic] how unimpressed I was with the new doctor [...]. He replied to the other doctor but accidentally hit 'Reply All' and I saw him **blatantly lying** about what occurred during the appointment.*

**Pollux:**

*Usually this is the kind of crap I just chalk up to fashion industry crazy but lately I've seen my daughter checking herself out in the mirror clearly sizing herself up in comparison to something and I certainly don't want this misleading ad to play a part in that.*

**Altair:**

*I hate that **healthcare is an industry**, and I think that's one of the biggest problems we face. [...] from health insurers to pharmaceutical manufacturers to doctors who pick specialties based on potential annual income. **It's completely messed up, when you step back and think about it.***

This arguably acts to undermine the traditional authority of professionals and thus potentially their credibility to speak on size acceptance too. It was a common

practice for bloggers to be positioned as fundamentally different from others in positions of power (e.g. doctors and the media).

Strategies implemented to achieve this are typically found in talk by politicians and newspapers, which arguably act to delegitimize the “other” in order to legitimize themselves (Machin & Mayr, 2012). Once more this also acts to provide an *entitlement* to speak about fatness (and size acceptance), an entitlement that is simultaneously removed from those who typically hold this position outside of size acceptance. This could also be described as an attempt to convince readers of the reality of the problem, while refuting any possible accusations of blame, given that many fat individuals may feel that they are held responsible for their bodies (Mold & Forbes, 2013).

In addition, size acceptance blog talk is filled with negative lexical connotations (Wiggins, 2017) (e.g. “*blatantly* lying” and “zero questions”) that support this. An explicit stance made through the use of such negative wording can be used to explicitly differentiate the “good/correct” in-group and “bad/wrong” out-group. This has particular importance when fatness is seen as a moral failing, thus challenging this stigmatized view.

## **Conclusions**

There is an ever-growing presence online of resistance and countering of mainstream perspectives across a variety of issues, including size acceptance. The impact of this is demonstrably positive for both mental and physical “health.”

Previous research has demonstrated how discursive strategies are used online by size acceptance bloggers in their articulation of alternative discourses, but also in the exclusion and diminished status and credibility of size acceptance bloggers by powerful institutions such as industry, medicine and media. The present research adds to this by demonstrating that discursive strategies are also used by size acceptance bloggers to persuasively provide narrative resistance and legitimacy, and in doing so challenging conventional understandings of what it is to be a fat person and contributing to the conversation about fatness that fat people are often themselves left out of.

This present research highlights how members of the size acceptance movement persuasively position themselves and other members as experts, of – and through -

their own experiences of fatness, and thus claim an entitlement to speak and be heard. This is particularly important for marginalized individuals such as fat people, who are often immediately discredited based on the appearance of their bodies (Dickins, 2013). Establishing one's credentials speaks not only to an imagined audience but to anticipating a critical response, suggesting the impact of such discrediting is deep-seated. As "experts by experience," size acceptance bloggers make clear their entitlement to be part of the conversation and for their contributions to be deemed relevant. size acceptance blogging thus provides a platform different from their lived experience.

Drawing on personal experience further implies that as "experts by experience," size acceptance bloggers provide a *privileged* source of insight (as those who live "fat" lives), not available to professionals. This can be seen as an act toward taking back power. Making visible the lived experience is often a practice used to fight social justice as a way to counter authoritarian and expert-based knowledge (Chow et al., 2003). However, the effectiveness of this strategy is yet to be studied. Depending on social context, it risks being counter-argued as "biased" and unreliable.

Drawing alongside this on the same ('medical') language repertoires as expert-based knowledge can then be seen as a move to encompass a shared language. While this may be seen as a way to legitimate arguments and credibility, it could also allow conversations between those with hitherto oppositional and confrontational positions (e.g. with medical professionals). However, this equally risks perpetuating the power of these more dominant frames, weakening non-medical positions in the longer-term.

The formation of a size acceptance community works to give a voice back to those with similar "fat" values (i.e. the readers of size acceptance sites) and establishes a united front that acts to corroborate their version of accounts and themselves, not just as individual voices, but a "community of experts" (Elliott, Slatick, & Urman, 2001). Additionally, others (e.g. the medical profession) are positioned in such a way as to undermine and create distance between "them" and "us" (size acceptance bloggers and fat people who advocate for size acceptance) – that is, delegitimizing one party to legitimize themselves (Machin & Mayr, 2012). Discrediting in this way allows size acceptance to be held in a "moral" position, which differs from how fat people (regardless of size acceptance) are typically seen in modern Western society.

### ***Strengths and Limitations***

The Internet presents itself as a platform where self-representation and the challenging of more culturally available perspectives become possible, thus making this platform an important one for research. This too makes research into online discourse where collection is not directly influenced by the researcher (e.g. interviews) particularly important.

However, methodologically it is acknowledged that only three blog sites were chosen for this particular research into size acceptance online spaces, accumulating 45 days worth of data analyzed. Although the number and style of contributors to each blog site varied across the site platforms and was deemed a fair representation of the vast difference within the size acceptance online community, the data selected can only be a representation and cannot account for the vast amount of talk that is not captured as part of this specific dataset.

An effort was made to ensure that the excerpts within the analysis were representative of the overall dataset and steps have also been taken to consider factors that might influence the interpretations made as part of this research. Nevertheless it is acknowledged that the findings are still based on one interpretation of what has been said in online spaces, and with that only one selection of what is being said within online spaces.

Pseudonyms were used to ensure anonymity; however as discussed earlier, because the dataset is available online, the direct quotes are inevitably traceable and the use of excerpts unavoidably loses context.

### ***Implications for practice and future research***

This research presents a powerful analysis that provides an alternative perspective on how medical and social discourse needs to change. If size acceptance activists think that it is important to change dominant discourses then thinking not only about the content of their messages, but the ways in which these messages can be persuasive is imperative, and this research can help with this.

Future research might be interested in investigating the extent to which the devices identified in this research were successful in working to their desired effect. Future research might also be interested in the non-language based devices implemented

in size acceptance blogspaces, such as images, memes, and photographs, which this research did not have the scope to address.

It was not possible for this particular research to address gender with the emphasis it requires and deserves. This is an area recommended for future research, particularly in light of the more recent #metoo on social media in which women are making discursive attempts to have a voice.

Finally, this research has methodological implications in encouraging qualitative researchers to look not just at what is being said when analysing language, but how it is being said.

## **References**

- Allen, D., & Cloyes, K. (2005). The language of 'experience' in nursing research. *Nursing Inquiry*, 12(2), 98-105.
- Bacon, L. (2010). *Health at every size: The surprising truth about your weight*. Dallas: BenBella Books.
- Betton, V., Borschmann, R., Docherty, M., Coleman, S., Brown, M., & Henderson, C. (2015). The role of social media in reducing stigma and discrimination. *The British Journal of Psychiatry*, 206(6), 443-444.
- BPS, B. P. S. (2007). *Report of the Working Party on Conducting Research on the Internet: Guidelines for ethical practice in psychological research online*. Leicester: BPS.
- BPS, B. P. S. (2013). *Ethics Guidelines for Internet-mediated Research*. Leicester: BPS.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101.
- Brownell, K., Kersh, R., Ludwig, D., Post, R., Puhl, R., Schwartz, M., & al., e. (2010). Personal responsibility and obesity: a constructive approach to a controversial issue. *Health Affairs*, 29(3), 379-387.
- Burgard, D. (2009). What is "health at every size". In E. Rothblum & S. Solovay (Eds.), *The fat studies reader* (pp. 41-53). New York: New York University Press.
- Burke, K. (1974). *The philosophy of literary form: Studies in symbolic action*. London: University of California Press.
- Carr, D., & Friedman, M. A. (2005). Is obesity stigmatizing? Body weight, perceived discrimination, and psychological well-being in the United States. *Journal of health and social behavior*, 46(3), 244-259.
- Chow, E. N.-L., Fleck, C., Fan, G.-H., Joseph, J., & Lyter, D. M. (2003). Exploring critical feminist pedagogy: Infusing dialogue, participation, and experience in teaching and learning. *Teaching Sociology*, 31(3), 259-275.
- Coleman, S., & Ross, K. (2010). *The media and the public: "them" and "us" in media discourse* (Vol. 9). Chichester: John Wiley & Sons.
- Cooper, C. (2008). *What's Fat Activism?* Limerick Ireland: University of Limerick.
- Cooper, C. (2010). Fat studies: Mapping the field. *Sociology Compass*, 4(12), 1020-1034.
- Davies, B., & Harré, R. (1990). Positioning: The discursive production of selves. *Journal for the theory of social behaviour*, 20(1), 43-63.
- Dickins, M. (2013). *Weight-related stigma in online spaces: challenges, responses and opportunities for change*. Monash University, Australia.
- Dickins, M., Browning, C., Feldman, S., & Thomas, S. (2016). Social inclusion and the Fatosphere: the role of an online weblogging community in fostering social inclusion. *Sociology of health and illness*, 38(5), 797-811.
- Dickins, M., Thomas, S., King, B., Lewis, S., & Holland, K. (2011). The role of the fatosphere in fat adults' responses to obesity stigma: A model of empowerment without a focus on weight loss. *Qualitative Health Research*, 21, 1679-1691.
- Edwards, D. (1995). Sacks and psychology. *Theory & Psychology*, 5(4), 579-596.
- Edwards, D., & Potter, J. (1992). *Discursive psychology* (Vol. 8). London: Sage.
- Elliott, R., Slatick, E., & Urman, M. (2001). Qualitative change process research on psychotherapy: Alternative strategies. *Psychological Test and Assessment Modeling*, 43(3), 69.

- Eysenbach, G., & Till, J. E. (2001). Ethical issues in qualitative research on internet communities. *Bmj*, 323(7321), 1103-1105.
- Gallagher, S., & Doherty, D. T. (2009). Searching for health information online: characteristics of online health seekers. *Journal of EvidenceBased Medicine*, 2(2), 99-106.
- Gard, M., & Wright, J. (2005). *The Obesity Epidemic: Science, Morality and Ideology*. New York: Routledge.
- Gee, J., & Hanford, M. (2013). *Handbook of Discourse Analysis*. New York: Routledge.
- Gramsci, A. (1971). *Selections from the Prison Notebooks of Antonio Gramsci*. New York: International Publishers.
- Greatbatch, D., & Clark, T. (2005). *Management speak: Why we listen to what management gurus tell us*. Oxon: Routledge.
- Harding, K., & Kirby, M. (2009). Lessons from the Fat-O-Sphere: Quit Dieting and Declare a Truce with Your Body. USA, Perigee Book.
- Hill, J., Wyatt, H., & Peters, J. (2012). Energy Balance and Obesity. *Circulation*, 126(1), 126-132.
- Jutel, A. (2008). Doctor's Orders: and the Exploitation of the Fat Body. In J. Wright & V. Harwood (Eds.), *Biopolitics and the Obesity Epidemic* (pp. 60-77). New York: Routledge.
- Kasardo, A. E., & McHugh, M. C. (2015). From fat shaming to size acceptance: Challenging the medical management of fat women. In M. C. McHugh & J. C. Chrisler (Eds.), *The wrong prescription for women: How medicine and media create a "need" for treatments, drugs, and surgery* (pp. 179-201). California: ABC-CLIO.
- Kim, S., & Willis, L. A. (2007). Talking about obesity: News framing of who is responsible for causing and fixing the problem. *Journal of Health Communication*, 12(4), 359-376.
- Koerber, A. (2001). Postmodernism, resistance, and cyberspace: Making rhetorical spaces for feminist mothers on the web. *Women's Studies in communication*, 24(2), 218-240.
- Kogan, S. M., & Gale, J. E. (1997). Decentering therapy: Textual analysis of a narrative therapy session. *Family process*, 36(2), 101-126.
- Kwan, S. (2009). Framing the Fat Body: Contested Meanings between Government, Activists, and Industry. *Sociological Inquiry*, 79(1), 25-50.
- Labov, W. (1997). Some further steps in narrative analysis.
- LeBel, T. P. (2008). Perceptions of and responses to stigma. *Sociology Compass*, 2(2), 409-432.
- Lewis, S., Thomas, S. L., Blood, R. W., Castle, D. J., Hyde, J., & Komesaroff, P. A. (2011). How do obese individuals perceive and respond to the different types of obesity stigma that they encounter in their daily lives? A qualitative study. *Social science medicine*, 73(9), 1349-1356.
- Lillis, J., Hayes, S., Bunting, K., & Masuda, A. (2009). Teaching acceptance and mindfulness to improve the lives of the obese: a preliminary test of a theoretical model. *Annals of Behavioral Medicine*, 37(1), 58-69.
- Lupton, D. (2013). *Fat politics: Collected writings*. New York: Routledge.
- Machin, D., & Mayr, A. (2012). *How to do critical discourse analysis*. London: SAGE publications.
- Markkanen, R., & Schröder, H. (1997). *Hedging and discourse: Approaches to the analysis of a pragmatic phenomenon in academic texts*. New York: Walter de Gruyter.

- McClimens, A., & Gordon, F. (2009). People with intellectual disabilities as bloggers What's social capital got to do with it anyway? *Journal of intellectual disabilities*, 13(1), 19-30.
- Mold, F., & Forbes, A. (2013). Patients' and professionals' experiences and perspectives of obesity in health - care settings: a synthesis of current research. *Health Expectations*, 16(2), 119-142.
- O'Hara, L., & Gregg, J. (2010). Don't Diet: Adverse Effects of the Weight Centered Health Paradigm. In F. De Meester, S. Zibadi, & R. Watson (Eds.), *Modern Dietary Fat Intakes in Disease Promotion* (pp. 431-441).
- Potter, J. (1996). *Representing reality: Discourse, rhetoric and social construction*. London: Sage.
- Potter, J., & Edwards, D. (1990). Nigel Lawson's tent: Discourse analysis, attribution theory and the social psychology of fact. *European Journal of Social Psychology*, 20(5), 405-424.
- Potter, J., & Wetherell, M. (1987). *Discourse and social psychology: Beyond attitudes and behaviour*. London: Sage.
- Rogge, M. M., Greenwald, M., & Golden, A. (2004). Obesity, stigma, and civilized oppression. *Advances in Nursing Science*, 27(4), 301.
- Sacks, H. (1992). *Lectures on conversation* (Vol. I and II). Cambridge: Blackwell
- Saguy, A. C., & Almeling, R. (2008). Fat in the Fire Science the News Media and the Obesity Epidemic. *Sociological Forum*, 23(1), 53-83.
- Saguy, A. C., & Riley, K. (2005). Weighing Both Sides Morality Mortality and Framing Contests Over Obesity. *Journal of Health Politics Policy and Law*, 30(5), 869-921.
- Still, B. (2008). *Online Intersex Communities: Virtual Neighborhoods of Support and Activism*. New York: Cambria Press.
- Strauss, S., & Feiz, P. (2013). *Discourse analysis: Putting our worlds into words*. Oxon: Routledge.
- Wiggins, S. (2017). *Discursive Psychology: Theory, Method and Application*. London: SAGE.
- Wooffitt, R. (1992). *Telling tales of the unexpected: The organization of factual discourse*. Hemel Hempstead: Rowman & Littlefield.