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# Strong Black Women: Linking Stereotypes, Stress, and Overeating Among a Sample of Black Female College Students

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#### **Abstract**

This qualitative study examines how the "Strong Black Woman" (SBW) label can have potentially negative health effects for African American/Black women that contribute to eating disorders. This study addresses the gap in literature on racial disparities that are present in understanding eating disorders that contribute to obesity and obesityrelated issues. Through semi-structured individual interviews conducted with (N=11) Black female higher education students, participants were able to discuss how disorganized overeating patterns were associated with the emotional stress of being labeled a Strong Black Woman. Findings provide implications to clinicians, educators, and researchers by identifying stress inducing factors heightened by racist and sexist microaggressions that contribute to the mental and physical health of Black women. This study also adds to the limited literature on the intersection of racism and sexism that contribute to poor health outcomes in Black women.

# Keywords

Black women; black feminism; overeating; stress; obesity

Due to the higher prevalence of eating disorders among women than men, feminist scholars have maintained that the human body is a reflection of society and that eating disorders are a manifestation of inequality and gendered norms (Flowers et al., 2012). Eating disorders often begin as an attempt to solve underlying problems. For example, binge eating in particular has been found to be a coping mechanism to the effects of trauma (Lewis et al., 2013; Sutherland, 2013). Binge eating disorders (also referenced as disorganized eating) are defined as recurring episodes of disorganized eating patterns resulting in eating significantly more food in a short period of time (American Psychiatric Association, 2013). Although many women cope with stress through eating, types of eating disorders vary by race, with White women more likely to engage in anorexia and bulimia and African American women more likely to engage in binge eating (Lydecker & Grilo, 2016; Taylor et al., 2007).

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Researchers have hypothesized that African American women might use binge eating as a maladaptive coping strategy to manage stress related to experiences of racism, sexism, stereotypical expectations of Black women, and/or other traumatic experiences (Talleyrand et al., 2017; Thompson, 1994). Thus, African American women who utilize binge-eating as a coping mechanism to stress, may unknowingly be placing themselves at higher risk of obesity and other negative health-related outcomes.

Research on eating disorders among African American women is limited, yet African American women are disproportionately affected by the negative health outcomes aligned with eating disorders such as being overweight or obese (Wang et al., 2008). National Health and Nutrition Examination Survey (NHANES; CDC, 2016) reported that among African American women over the age of 20 that were surveyed, 56% of women were considered overweight or obese, compared to just 37% of Black men and 35% of White women (U.S. Department of Health and Human Services, Office of Minority Health, 2018). Being overweight or obese is considered a risk factors to multiple chronic conditions including hypertension (Wyatt et al., 2008), heart disease (Townsend & Belgrave, 2009), and poor mental health outcomes, such as depression (Abdus & Zuvekas, 2015).

There is limited documented evidence that explores binge eating in African American women as a response to stress, racism, and sexism (Crago & Shisslak, 2003; Sbrocco et al., 2012). However, there is a need to address specific types of stereotypes that may be race and gender related and understand its unique effect on the experiences of Black women whom are overweight. This qualitative study seeks to delve into the experiences of African American women whom are considered overweight and their response to a common stereotype placed on African American women, the strong Black woman label.

# Strong Black Woman Stereotype

A common stereotype placed on Black women in society is the *strong Black woman* (SBW) label. During slavery, various stereotypes arose through the mistreatment of Black women that portrayed the image of being overly sexual, overbearing, and loud (Collins, 2004; Opara, 2018). As a result of these stereotypes, Black women were exploited. For example, during slavery, Black women were subjected to sexual assault and compulsory reproductive exploitation for economic gain (Collins, 2004). For example, during slavery, Black women were subjected to sexual assault and compulsory reproductive exploitation for economic gain (Collins, 2004). To justify their use of enslaved Black women as slave labor, owners emphasized the supposed baseness of Black women and the ideal femininity of White women (Abrams et al., 2014; Wyatt, 2008).

The SBW label can have positive and negative connotations. The use of the label implies that Black women have no choice but to be fearless, ambitious, and hardworking, thereby resulting in celebrating strength, self-sufficiency, and resilience. The SBW label is offered as a compliment but enacted so as to mask the unfair burden placed on Black women (Hooks, 1993). In this way, the label obscures the reality of the structural forces that keep Black women down—forces that could otherwise be addressed by structural and policy change—and directs attention instead to Black women themselves. Being a SBW

is a necessary response to a racist society in which survival requires strength (Collins, 2004). The SBW label provides African American women with a "blueprint" on how to appropriately perform their intersected race-gender identity (Watson-Singleton, 2017). However, research is beginning to uncover the unfair burden that the label may place on Black women and its effects on stress and their overall health (Abrams et al., 2014; Donovan et al., 2015). The strength that characterizes the SBW label refers to the physical and emotional labor Black women are expected to perform as victims of oppression and discrimination. Black women face an "obligation to manifest strength," and are expected to act in a manner that exemplifies their resiliency and ability to perform under extreme pressure (Woods-Giscombe, 2010). Abrams et al. (2014) found in their qualitative study with Black women that a majority of the participants believed that being a SBW is to deny their own needs in order to provide for the needs of others. The belief embodied by Black women has the potential to lead to negative physical and mental health outcomes. The application of the SBW stereotype tends to ignore humanistic characteristics, leaving African American women to be viewed as super beings rather than human and is correlated with emotional and psychological distress (Collins, 2004, Grollman, 2012; Steele, 2003; Steele & Aronson, 1995). Despite previous efforts to explore and articulate the role of strength in Black women's lives (e.g., Beauboeuf-Lafontant, 2007), very little research has focused on the perception of strength on the coping and eating behaviors of African American women in the United States.

# Strong Black Women and Physical Health

Applying the SBW label has the potential to be harmful because the stereotype implies it is appropriate for Black women to sacrifice their own needs for others—such as the popular fictitious character "mammy," which represents a larger, unattractive Black woman who places her own needs last to please others (Collins, 2004). Because African American women belong to two historically marginalized groups (e.g., African American and female), they are subjected to racism and sexism, which may manifest as racially gendered microaggressions (Bell & Nkomo 2003; Collins, 2004). Stereotypes and microaggressions are problematic because racism and sexism act as stressors that negatively impact women's mental and physical health (Geronimus et al., 2010; Green & Darity, 2010; Landrine & Klonoff, 1996; Lewis et al., 2013; Shorter-Gooden, 2004). Repeated exposure to stressors results in wear and tear on the body, which disrupts physiological systems and increases morbidity. Groups that have been negatively stereotyped, such as women and minority ethnic groups, often experience poorer health issues due to the psychological stress imposed by stereotypes and inequalities (Aronson et al., 2013).

Stereotypes and microaggressions are problematic because previous researchers have demonstrated that racism and sexism act as stressors, which have negative effects on mental and physical health (Geronimus et al., 2010; Green & Darity, 2010; Landrine & Klonoff 1996; Lewis et al., 2013; Shorter-Gooden, 2004). The effort associated with coping with acute and chronic stressors has a significant effect on health because coping behaviors are the primary pathways to increased health and mortality risks. Experiences of perceived racism can result in numerous psychological stress responses, including anger, paranoia, anxiety, helplessness, frustration, and fear (Sutherland, 2013). Researchers have also found

that experiencing microaggressions can result in self-doubt, frustration, and isolation (Steele, 2003; Williams et al., 2018).

Researchers identify stress exposure stemming from racism and subsequent coping mechanisms, as a primary pathway for increased morbidity and mortality risks (Geronimous, 1996; Williams, 1999). Williams (1999) demonstrated the effect of encounters with racism on physiological and psychological wellbeing and showed that typical coping mechanisms led to negative health outcomes. Similarly coping mechanisms following perceptions of racism can act as an explanatory variable when examining black-white health differentials (Giscombé & Lobel 2005; Williams, 2004). Coping behaviors often include increased religiosity (which can be protective) and self-soothing mechanisms like substance abuse and overeating (which can be harmful). Previous research demonstrates that positive coping strategies can act as a protective measure against the effects of racism (Lowe et al., 2012). Unreasonable expectations of African American women's ability to navigate through multiple systems of oppression may result in limited coping skills.

# Overeating as a Coping Strategy

Research on obesity and binge eating has consistently demonstrated that food has been used as an unhealthy coping strategy for individuals, regardless of race. Few studies have explored binge eating among African American women and its relation to combating the effects of societal inequality, which results in experiences of racism and sexism (Beauboeuf-Lafontant, 2003; Hesse-Biber, 1997; Mowatt et al., 2013; Woods-Giscombe, 2010). Eating problems such as anorexia, bulimia, compulsive overeating, or dieting are common for diverse women, given their origin as sensible "survival strategies" that use food to cope with experiences of oppression, trauma, and poverty (Thompson, 1992, 1994). Black women who feel an obligation to manifest strength are also more likely to use food to cope with stress and are more likely to be obese than Black women who do not identify with the SBW label (Woods-Giscombe, 2010). Stereotypes cause Black women to experience emotional and psychological distress (Grollman 2012; Steele, 2003; Steele & Aronson, 1995). Part of the "superwoman schema" and SBW label is the delaying of self-care, which often translates into poor sleeping habits and disordered eating patterns to cope (Woods-Giscombe, 2010).

SBW related stress and the coping mechanism of overeating as a response may partially help explain the existence of health disparities between African American and White women. Current scholarship maintains that the disproportionate adverse health outcomes for African American women are the embodiment of oppression in society with links made between discrimination and health outcomes (Grollman, 2012; Sheffield-Abdullah & Woods-Giscombe, 2021). SBW implies that Black women should not be affected by psychological stress, as they are expected to be emotionally immune to such experiences. Such implications normalize a lack of attention to mental health, contributing to Black women engaging in unhealthy coping mechanisms such as binge eating. Coping mechanisms following perceptions of racism can act as an explanatory variable when examining Black—White health differentials (Belgrave & Abrams, 2016). Congruently, there is a link between psychological distress and obesity, which are serious problems for African American women (Burdette & Hill, 2008). It is important to consider the link between coping mechanisms

like overeating and obesity because African American women continue to have the poorest health among women in the U.S. and the highest rates of obesity (Saguy, 2012).

# **Theoretical Framework**

To understand the behaviors and outcomes of African American women in the United States, it is important to understand the historical and sociocultural contexts that have shaped the views, behaviors, and outcomes of this group (Opara, 2018). Black feminist theory exerts that stereotypes placed on African American women in the present day derived from more than 400 years of enslavement of African American women by White slave masters (Collins, 2004). Black feminist theory allows for a comprehensive examination of the sociocultural historical experiences of African American women in the United States that have contributed to present day ideologies and behaviors. There are five primary assumptions of Black feminist thought. One, understanding that race, gender, and class are intersecting and multiplicative identities have a unique impact on the identity of Black women. The second is acknowledging the historical physical exploitation of Black women, stemming from slavery, contributes to present-day stereotypes of Black women. The third is acknowledging that it is impossible for Black women to focus exclusively on their oppression as a woman or their oppression as being Black, due their multiplicative identities. The fourth is being aware that the status of Black women provides distinctive experiences that offer a different view of reality than that available to other groups. The fifth is acknowledging that Black women can only be free when all systems of oppression have been removed (Gentry et al., 2005; Opara, 2018). While Black Feminist Thought is not a testable theory, it does provide a valuable framework for interpreting the lived experiences of Black women (Few et al., 2003; Gentry et al., 2005; Opara, 2018).

# Purpose of Study

This qualitative study aims to provide insight into how a racial and gender-based stereotype such as SBW can contribute to stress and disorganized eating patterns in African American women. In the current study we examined this phenomenon through a Black feminist lens, acknowledging the SBW label as a multidimensional construct that encompasses both interpersonal and cognitive characteristics, stress-coping behaviors, self-reliance, and caregiving (Watson-Singleton, 2017; Woods-Giscombe, 2010). This study adds to the extant research, on the potential impact of the SBW label in addition to other stress inducing incidents that Black female higher education students experience.

# Method

#### **Participants**

To be eligible to take part in this study, all participants had to identify as African American or Black only, be over 18 years of age, identify as a woman, and self-identify as being overweight or obese and having the tendency to overeat. Eleven women were interviewed for this study.

All participants self-identified as African American/Black with the exception of one, who described herself as a second-generation Jamaican American female (see Table 1). The women ranged in age from 19 to 35 ( $M_{\rm age} = 24.4$ , SD = 5.5). None of the women reported having children, and none were married, but three reported being in long-term heterosexual romantic relationships. All participants attended the local university as full-time undergraduate or graduate students (see Table 1). The participating university is considered a predominantly White institution (PWI) located in a southeastern city in the United States. At the time of the study, the interviewer attended the same university but did not have any contact with participants prior to the study.

### **Procedures**

This study was approved by the university's Institutional Review Board Human Subjects Committee. The women in the sample were selected through the use of the snowball sampling method where participants of the study introduced other women interested in the study (Green & Thorogood, 2009; Noy, 2008). Initially, recruitment began in a weekly Weight Watchers meeting where only two women were recruited but all additional recruitment efforts expanded to include a solicitation to an African American student organization at a local university and an advertisement posted at a local gym.

The data in this study was accrued from semi structured interviews. A total of 11 participants who identified as African American/Black women and were enrolled as students at the participating university. Each participant voluntarily agreed to be part of the study and signed a statement of consent. We offered no incentives for participation. Each interview lasted for approximately an hour, with the shortest 45 minutes and the longest 90 minutes. Interviews took place at the location the respondent preferred, including the researcher's office, respondents' homes, and coffee shops. Interviews were tape recorded, augmented with notes about displays of emotion and gestures. We analyzed data using NVivo (NVivo, 2011) qualitative software.

# **Researcher Positionality**

The interviewer (first author of the study) identified with respondents by race, gender, and within the same age group of most of the participants at the time of recruitment, which resulted in the ability to gain trust and familiarity with respondents in the interviews. The first author identifies as overweight and has participated in the Weight Watchers weight-loss program in the past. However, the first author had no previous contact with the participants as she participated in Weight Watchers exactly one year before the study was conducted. By using a Black-feminist-thought-analysis approach, it was important to reject the formal separation between researcher and participant typical of positivist research, which led to more comprehensive results (Collins, 2004; Few-Demo, 2014; Oakley, 1981). As the interview process developed, the interviewer tailored the questions to delve further into the experiences of negotiating society as a Black woman in the United States. To compensate for any bias in the results, careful consideration was given to the interviewer's position when analyzing the findings. The remaining two authors of the study also identify as being Black and being women but were not a part of data collection or recruitment. In addition, although all of the authors and research staff identified with participants by race and gender, the

authors acknowledge that we are not experts in participants' daily lived experiences as Black women.

# **Interview Protocol**

Because of the first author's insider status, specific questions were developed about the intersection of weight, race, and gender (see Table 2). During the interview process, questions that delved further into the experiences of negotiating society as an African American/Black woman, being a strong Black woman, and being overweight or obese were created. An example was the decision to ask probing questions when participants said statements such as "I know what they think of me." The interviewer asked probing questions such as "Can you clarify who or what you mean by 'they' or 'what'?" The participant further clarified that "they" meant White people and "what" was a negative generalization about their race. This probing was performed strategically to ensure the interviewer did not make an incorrect assumption of participants' statements, based on her own experiences and positionality. The first author was able to develop a good rapport with each participant during the interviews and tap into the emotions involved in occupying a devalued social position. By rejecting the formal separation between researcher and participant typical of positivist research in favor of a contemporary Black-feminist-analysis approach (Collins 2004; Oakley 1981), more comprehensive data emerged. To compensate for any bias in the results, the research team gave careful consideration to the first author's positionality when analyzing the data.

# **Data Analysis**

The interviews were recorded using an audio pen to document verbal exchanges and the interviewer made notes of nonverbal exchanges including displays of emotion and nervous gestures. Each interview followed a general script in which the interviewer asked questions such as, "What does the expression SBW mean to you?" "Do you aspire to be a strong Black woman?" and "Do you know any strong Black women?" The women were encouraged to discuss their feelings regarding controlling images, and to share stories of their encounters with the stereotype. Probing occurred during the interview process to provide a narrower understanding of participants' responses, and clarity for participants (Agee, 2009).

The process of data analysis was based on Charmaz's (2006) conceptualization of the grounded-theory method, constructing theory based on various stages of the analysis process. The analysis was constructed by using grounded theory, which is reflexive and requires that the researcher pay special attention to recurring themes during the coding process to restructure subsequent interviews for more concise analyses. To increase interrater reliability, two coders coded the data independently. The research team consisted of the interviewer (first author of the study) and a master's level research assistant who were not involved in data collection. The team focused on themes that repeatedly surfaced during the interview process. In a confirmability audit, the interviewer and research assistant coded all transcripts in isolation.

During weekly research meetings, the research team reviewed and discussed the initial codes. Using two coders (including the first author), provided insight into finding

consistency and minimizing researcher bias (Lincoln & Guba, 1985). The two coders reached consensus, and each identified nearly identical codes. To increase the rigor of the study, both coders debriefed during weekly meetings to discuss their personal lenses during the analysis process to focus solely on participants' responses and the research questions. The team identified direct quotations to reflect on the interpretations of the data and reach unbiased consensus.

Coding the data was an iterative process. The team employed line-by-line coding, grouping common themes using a coding map created from NVivo (NVivo, 2011) version 11 software. Next, axial coding was used to put the data back together in light of a coding map. Axial coding involves reflecting on the interpretation and meaning behind the identified open codes. Upon completion of axial coding, four main categories emerged: (a) What is an Strong Black Woman (SBW)?; (b) Problems with the SBW label; (c) Emotional responses to the SBW label; and (d) Coping behaviors to combat the stress of being an SBW. The inductive analysis resulted in concepts described by participants as they defined their experiences and sensitizing concepts that we developed to represent patterns in the data (Patton, 2002). Once the common themes were identified in the results, Black Feminist Thought (Collins, 2002) was used to interpret the findings. Black Feminist Thought to be not a testable theory, but it provides the correct lens for interpretation as it places value on the lived experiences of Black women, encourages the use of hearing from the voices of Black women and the collection of data led by Black women (Collins, 2002; Few et al., 2003).

# Results

During the data analysis, it became evident that each participant was familiar with stereotypes about Black women. All women in the study (N= 11) believed that the SBW stereotype shaped their lives including their eating habits. The interviewer encouraged participants to discuss their definitions of SBW. The following themes emerged from those conversations: (a) Problems with the label of being an SBW, (b) Emotional and psychological distress of being an SBW, and (c) How the label of SBW links to stress and subsequent coping mechanisms like disordered eating patterns. We use pseudonyms to preserve confidentiality and privacy (Table 3).

# Who Are Strong Black Women?

The interviewer asked the women to describe in their own words what they believe constitutes an SBW. All respondents mentioned self-sufficiency and independence as key concepts that define the term. Additionally, women in the study acknowledged that the SBW stereotype can be attributed to positive qualities and resilience in women. They described self-sufficiency as being capable of providing for oneself without assistance. When defining SBW, Bella, a 20-year old woman said, "Being a SBW is just holding everything down. Being able to multi-task at home with children, finances, household, cleaning, workplace, relationships personal. Strong and looking good. Everything." In the same vein, another participant, Alexis described the SBW as an all-encompassing superwoman: "I think a strong Black woman is someone who does what they need to do. She provides, she's

successful and does what she needs to do. . . . It's about doing what you need to do and getting things done."

The second element in the definition centered on what an SBW being a negative attribute and a rejection of how society incorrectly uses the SBW label. The women made a clear distinction between being strong and being angry and described how society tends to conflate strength with anger. Alexis for example said, "It's not always about having an "attitude" and being that "loud Black girl."

Although Lisa acknowledged that SBW can represents strength and courage in women, she admitted to rejecting the SBW label because of the perception of anger: "I don't like to be thought of as a SBW because there's a fine line as far as the public definition, a very fine line between strong and angry." Vivian described how people label her as strong but do so by conflating competency and anger. She believed she was called an SBW because people viewed her as bossy:

People assume that being strong is being overbearing or trying to control the situation. [But really] I'm just concerned or [else] I know what I'm doing. I'm not angry. I'm just handling the situation. [But] any competency is seen as controlling, or overbearing, or trying to be dominant.

Mia noted a shift in the meaning of SBW and revealed that the stereotype can be good and bad:

I think it's bad when you're a SBW. I think [that] before, SBW was a good thing, like Elaine Brown and Assata Shakur and Angela Davis. And it was celebrated because we were strong and confident! But now it seems like you're penalized.

Mia drew on examples of revolutionary Black women who forged new paths following the Civil Rights era as leaders who were revolutionary in thinking and action when describing what an SBW used to mean. When asked to describe a modern-day example of an SBW, Mia pointed without hesitation to Michelle Obama:

That's a strong Black woman personified, someone who has confidence, is assertive and comfortable with Blackness. I think Black society thinks of Michelle Obama as a strong Black woman, but Whites view her as militant, like the New Yorker cover where she's with an afro and toting a machine gun. . . . That's how they see her. Us—how they see *us*.

In sum, when defining the term SBW, participants identified what being an SBW is and what it is not. The women described how self-sufficiency and independence are pillars of the term, and most participants were critical of the term. Three participants linked perceptions of anger to the label and believed that non-Blacks viewed SBW as angry Black women. They noted that the characteristics that make Black women strong are a result of inequality. Many women noted that effectiveness and capability constitute being an SBW, but they also acknowledged that the SBW label was forged because of a lack of resources, masking the burden Black women must face. It should be noted that the participants judgment of negativity of the SBW label appears to be based on the misguide interpretation of society and not on their own personal beliefs.

#### **Problems With the Label Strong Black Woman**

When asked if the SBW label was positive or negative, Mia responded by explaining that one is considered an SBW when one defies society's expectations for failure:

When you're not the norm of dysfunction, they're like, 'Oh, wow! I can't believe you made it' Is it so surprising that I haven't gotten knocked up or committed a crime? The expectations are negative for us so when we meet a positive expectation they're overwhelmed.

Some made direct comparisons with alternative stereotypes. When asked if there was an alternative to SBW, Mia responded: "No, you are a stereotype." She went on to explain the alternative:

The welfare mom or the crack whore. I don't think there's a weak Black woman. . . . I think the middle ground for Black women is those who are aspiring to be strong. Like you're on the road to being strong and then there's everything else, which is bad.

In sum, participants were aware of the effects of the SBW label on their lives and their personal development, both negative and positive. However, participants showed that the label provided a way for others to denigrate their existence as Black women. McCabe (2009) pointed out that microaggressions depend on coded language to stigmatize. When people say "strong Black woman" they mean "not like other Black women" who represent deviant forms of womanhood. This language implies that the norm for Black women is failure and although the label appears positive, the majority of participants believed society viewed SBW negatively, just as society views Black womanhood negatively in general.

Mia described how keeping up the routine of having to keep everything aligned to not appear a failure is tiring. The mental strain of knowing that others expect less from her because of her race and sex causes her to worry:

The struggle to be seen as what I think I'm worth is something I worry about a lot. I went to an all-White law school and I was like here we go again, the inferiority assumption. Like . . . now that I'm in this doctoral program, when my cohort hears that I went to law school there's always these big eyes. I don't know if it's because they don't expect people to get two advanced degrees or because I'm Black. But two of the White girls, and I'm the only Black girl, they said they only made it through one semester and they left because it wasn't what they wanted to do. They made it sound like law school wasn't a big deal and that they could have finished. They were throwing shade.

# **Emotional Response to SBW**

The results below begin to outline the emotional and psychological distress participants experienced when participants began to explain what SBW label means to them. Lane had the strongest reaction when discussing the SBW label. When asked, she tilted her head sideways, gave the researcher a pointed stare, and said,

I don't want to be a SBW! I just want to be a Black woman, because Black women are so unique and so different and we're so much more than people look at us like . . . I had someone tell me I have two strikes against me: I'm Black and I'm a woman. And I was just blown away. I feel like I have to represent for Black women. I'm a representation of a stereotype who is beating the stereotype.

The women in the study also demonstrated how the SBW label constrains their choices and increases their sense of marginalization and stress. For example, Lisa noted that being an SBW is frustrating:

I think that strong Black woman is getting worn out trying to be all things for all people, trying to nurture her family, and keep a job and take care of everybody. And I don't want to be worn out.

This section demonstrated participants' personal responses to being called an SBW and showed how the label induces emotional and psychological distress. Many spoke of how the stereotype strips them of their individuality. They described feeling angry, depressed, and frustrated in response to hearing the label applied to themselves. It is clear that they felt a link between this racially gendered stereotype and distress.

# Coping Behaviors to Combat the Stress of SBW

More than 50% of participants (n = 6) acknowledged disordered eating patterns like binge eating as a coping mechanism to address the daily rigors of life. One participant, Tashia, described a positive coping behavior such as "going to the gym with a friend to relieve stress" but she went on to describe the difficulty in deciding on whether she wants to work out or whether she should eat "a tray of cupcakes." Tashia described the difficulty in distinguishing between healthy coping mechanisms. Other women in the study were aware of their responses to daily stress by overeating, such as Mia:

I overeat because of stress but I don't know if I consider it binge eating. I don't eat a half a gallon of ice cream. Instead I eat more than I know that it takes to be full. Instead of eating 2 or 3 slices of pizza, I might eat 4 or 5. Recently I have eaten until I was sick afterwards. Like when I was rejected from one PhD program because I think they hit their minority quota, and I'm not for sure that's why but that's what I think. I was perfect for the program! I don't know if it's because I'm a Black woman that I didn't get in, but it didn't make sense that I didn't get in. Anyhow, I ate a lot after that.

Vivian, another participant also acknowledged the role of stress, strength, and overeating in her life:

No one knows it. I'm the strength for everyone. People come to talk to me, but when I need someone there for me? There's no one. The hardest thing is that people don't try to understand me. I am stressed, being Black, being a woman, being a woman but a Black woman. People put us at the bottom of the social hierarchy but being Black [breaks into tears].

Vivian had an emotional reaction to her acknowledgement of being strong yet navigating the identity of being a Black woman who is stressed. The interviewer paused the interview

to allow Vivian a moment to regain her composure. Upon resuming the interview, the researcher probed Vivian to understand what stress means to her and how she described the stress she encounters:

A lot of things stress me out. At school, nobody sits next to me in class, even if I move my seat to the other side of the room. Unless they see me with my designer handbags, then the White girls will come over and ask me how much I paid for my bag. Like I didn't pay for it, "Oh I love your bag. Oh, how much did you pay?" . . . Yes, I am stressed.

Vivian linked overeating to stress: "Instead of substance abuse or drugs I turned to eating. I turned to my favorite snacks, Snickers. I would stuff my face with candy and soda to the point where I felt like I was going to throw up." In this instance, Vivian discussed her self-view in relation to others around her. By being a student in a PWI, Vivian acknowledged the stress of having to maintain a certain image that she feels is acceptable to others in a superior position.

Lisa also described disordered eating patterns in an attempt to manage stress. She and a group of female friends would engage in overeating as a group. She described her group of friends as successful African American women who used food to destress:

I eat to manage emotions and to cope, definitely. It calms me, you know? Have a hard day at work? Grab a bag of chips or ice cream. . . . My friends and I would totally pig out and just eat like crazy foods and then get a dessert or whatever and then we would be like "oh well." We referred to our sessions as "confessions of fat women." We would go eat after work and like one person would get to the restaurant first and hold a table. And we would just order like one or two of everything on the menu.

Congruently, Bianca described what an episode of overeating looked like before she began her dieting program:

[I] would eat everything, bad things, I was eating way more than I should have. I would just have way too much food. Like candy bars and I would go to McDonalds and get a large everything and dessert and sometimes a side of like chicken nuggets, this was like a lot, like at school, I would just go get food whenever I wanted, it was really bad but at like 2 o'clock in the morning I would go get a meal to just eat.

When asked by the researcher to name specific triggers to her binge-eating episodes, Bianca revealed that her response to emotional stress typically led her to overeat:

It's difficult being a Black woman, especially on this campus. I remember before one episode, I got so upset when one of my White classmates gave me a look of disgust and rolled her eyes at me. I didn't want to say something because then people would think I am just that big Black girl. So, I went to my room, cried, and ate pizza."

Charlotte, who is a member of Weight Watchers, described her self-esteem, stress, and overall mental health as affected because she felt she was losing control. However, she

attributed her recent membership in the Weight Watchers program as giving her a measure of control over her life:

There are so many things in my life I can't control but what I put in my mouth is the ONE thing I can control. And I think a lot of the stress. . . . Through grad school I didn't have that mentality but it's starting to resurface, I don't feel like working. I don't feel like it. But when it comes to [overeating], putting food in my mouth and what I don't, like I have control over that, I have total control over it.

In sum, the link between the SBW label, stress, and overeating is important to understand, as the exposure to stress and subsequent coping mechanisms appeared to be a primary pathway to increased health risk. Grounded theory allowed us to interpret our results using a Black Feminist Thought framework. Given that each participant answered the questions with an emphasis on their race and gender, Black Feminist Thought was a natural lens through which to interpret our results. Our study demonstrates that Black women often experience and cope with day to day stressors linked to sexism and racism in a manner that is harmful to their well-being. Current researchers need to further examine why such vast differentials exist in Black—White health outcomes, including the effect that stress has on coping mechanisms and why a significant proportion of Black women are overweight.

# **Discussion**

This study investigated the SBW label applied to African American/Black women in the United States. Through the use of narratives, participants revealed their feelings surrounding the label, how it affects their lives and their overall mental health. In addition, a majority of participants revealed how repeated exposure to a racialized and gendered stereotype of being strong led to their disorganized eating patterns. Participants in the study acknowledged positive and negative attributes of the SBW stereotype; however, women in the study appeared divided on whether they wanted to be associated with the label. About over 60% (n=7) of the sample identified as being a strong Black woman, while the remaining women (n=4) did not want to be associated with the label. Findings from the study revealed that all participants experienced stress associated with being both Black and a woman in a PWI, consistent with research pertaining Black female college students and stress (Donovan et al., 2015). Although participants responded to stress resulting from gendered racism in various ways, the majority of the women acknowledged that their eating behaviors were as a result of their response to everyday stressors. Stress can lead to obesity as the reward system and feedback, associating feeling stressed and feeling better after indulging in foods high in sugar and fat (Adam & Epel, 2007; Blue & Berkel, 2010; Diggins et al., 2015).

Participants recognized the SBW label as having positive characteristics, the positive nature of the label relies on Black women who can successfully balance their lives and achieve success in the face of societal burdens, discrimination, and inequities, at great expense and personal sacrifice. Participants noted a fine line exists between being seen as embodying strength rather than anger. Some participants felt the need to reject the SBW label for themselves due to its association with hardship and its conflation with anger. As participants noted when describing themselves, Black women are often expected to navigate life without complaints or fears and may be shunned if vocal about their true feelings. Furthermore,

Black women are often unaware of how to express their feelings regarding emotions and mental health and are commonly afraid to share with others for fear of being misunderstood (Woods-Giscombe, 2010). Participants in the study also noted their unwillingness to put their own needs above those of others, as they felt the need to be present for everyone else in their lives. This view is consistent with research that showed many Black women feel their emotional needs have lower priority than those of others and they should be dedicated to others, which can exacerbate stress-associated symptoms (Beauboeuf-Lafontant, 2005; Collins, 2004).

Emotional stress, mentioned by participants, led to overeating patterns that participants acknowledged, due to their inability to successfully distinguish between healthy and unhealthy coping mechanisms. As participants did not directly discuss whether their weight, the label of being obese, or their body image in relation to the SBW stereotype, participants understood that their eating habits were shaped by their response to being seen as strong and the stress associated with perception. All participants described disorganized binge eating habits. Findings showed that the label of SBW may feel like a burden to Black women who are unable to differentiate between the negative and positive attributes of the label. Stereotypes and microaggressions are problematic because racism and sexism act as stressors, negatively affecting mental and physical health (Geronimus et al., 2010; Green & Darity, 2010; Landrine & Klonoff, 1996; Lewis et al., 2013; Shorter-Gooden, 2004). Repeated exposure to stressors results in wear and tear on the body, which disrupts physiological systems and increases morbidity (Geronimus et al., 2010). Emotional strength displayed by Black women may not represent a display of power but rather a reaction to holding an oppressed social position that negates feelings and emotions associated with that of a human being.

Intergenerational narratives, passed from mothers to daughters, may serve as a prototype of successful navigation in a society that devalues the existence of Black women (Beauboeuf-Lafontant, 2003). Black women often learn from their mothers how to be SBW to navigate a stratified society (Nelson et al., 2016). Black women in the United States face an "obligation to manifest strength," and are expected to act in a manner that exemplifies their resiliency and ability to perform under extreme pressure (Woods-Giscombe, 2010). The historical context in which Black women were dehumanized is used to claim that, because present conditions are better, Black women should be able to handle them (Beauboeuf-Lafontant, 2005). This aversion to vulnerability and reliance on others encourages the formation of an independent identity, which requires exercising will and agency. In addition, generational differences in regard to body imagery, due to shifts in societal norms in the present day, may impact how Black college-aged women view themselves compared to older Black women. Further research should explore this phenomenon.

Although the results are modest, this study was able to link the racially gendered stereotype of SBW with disorganized eating patterns and being overweight or obese by demonstrating how overeating can result from the stress the label places on Black women. Women in the study felt that due to the devalued status of their race and gender, this led to them subsequently engaged in overeating as a coping mechanism. It is important to note the stigma associated with being overweight in certain settings and how this can intertwine with

racism and classism among overweight or obese Black women. Discrimination related to overweight or obesity may be unavoidable for overweight or obese women, as they are more likely to experience bias than men (Palmeira et al., 2016; Puhl et al., 2008).

#### Limitations

This study contributes significantly to the limited literature in uncovering the SBW label and its effect on Black women's health and coping mechanisms. However, despite its strengths, this study faces limitations. Due to the qualitative nature of the study and the small sample size, generalizability is not possible. However, the purpose of qualitative research is not to generalize but to generate empirical evidence of the lived experiences of vulnerable and marginalized groups whose voices are often ignored. To obtain such valuable narratives, it was important to use a qualitative approach. The sample size is small and was also restricted to young women and to those who are middleclass college students, all residing and attending a southeastern university, further limiting generalizability geographically. However, the small size was necessary in order to gain the unique experiences of Black women who identify as overweight or obese. Further research should explore SBW stereotype on Black women in other regions in the United States.

We did not collect data on the participants income, employment status, or neighborhood compositions. Perceptions and effects of the SBW label are likely to differ for different groups of Black women, such as older women or those in lower social-class positions. Therefore, we encourage future research to explore socioeconomic status as well as generational differences in Black women, overeating, and stress. In addition, our participants lived in a predominantly White community and attended a predominantly White institution (PWI). We anticipate that results would have been different if participants were recruited from schools with a high population of Black individuals such as Historically Black College & University (HBCU). We encourage researchers to explore differences in both groups to understand the role of the Strong Black Woman stereotype on Black women in a predominantly Black institution. Despite the limitations, this study contributes to the limited literature on the experiences of Black women, binge eating, and obesity.

# **Implications**

This study contributes to the limited literature that demonstrates how Black women understand the SBW label, the problems associated with the label (including emotional and psychological distress), and the possible link between the label and stress and disordered eating patterns among this group. This study provides strong implications for mental health clinicians, health educators, and researchers who must become aware of structural and social stressors that are invisible yet contribute greatly to health disparities in African American/Black women.

Future researchers should pursue the possibility of a pathway between the SBW label and health outcomes, which might add to knowledge about some of the racial disparities in women's obesity rates. Future research should also include women of normal BMI standing so that a comparison can be done between women who are obese and those who are not. Additionally, future research should expand recruiting efforts to include women who

participate in formal weight loss programs other than Weight Watchers and potentially those who attend universities that are not predominately white institutions. Such research offers the possibility of findings that might lead to improvement in the quality of life for Black women. Further, researchers should investigate the inclusion of teaching Black women how to address race- and gendered-based forms of discrimination and their impact on coping behaviors including eating behaviors.

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Table 1.

Participant Demographics (N=11).

Name	Gender	Age	Race	College level
Bella	Female	20	African American/Black	Sophomore
Alexis	Female	23	African American/Black	Senior
Mia	Female	35	African American/Black	PhD student
Lane	Female	22	Other: (Jamaican-American)	Senior
Vivian	Female	21	African American/Black	Senior
Lisa	Female	22	African American/Black	Senior
Charlotte	Female	20	African American/Black	Sophomore
Bianca	Female	23	African American/Black	Masters student
Tashia	Female	19	African American/Black	Sophomore
Keisha	Female	30	African American/Black	Junior
Toya	Female	34	African American/Black	Masters student

#### Table 2.

#### Interview Guide.

1. Have you ever considered yourself to be overweight? Can you explain to me what makes you consider yourself overweight?

- 2. Do you base being overweight on BMI or weight (pounds)? Do you base being overweight on pants size? What is/was your highest/lowest pants size? Where does your size now fall on that spectrum?
- 3. Can you tell me a story about when you attempted to lose weight? What did you do to lose weight? Did you go to the gym? Did you join a formal weight loss program?
- 4. Are you happy with your current weight? Can you share a story when you were most/least bothered by your weight? How do you feel about your current body weight? How do you feel about your weight now? How do you feel about your body right now?
- 5. What does the expression "strong black woman" mean to you? Is the term "Strong Black Woman" linked to the body or the mind?
- 6. Do you aspire to be a Strong Black Woman? Do you know any Strong Black Woman?
- 7. Have you ever been called a Strong Black Woman? Can you tell me a story of when someone called you a Strong Black Woman?

Table 3.

# Thematic Analysis.

Themes	Number of participants that adhered to themes
What is a strong Black woman?	11
SBW are independent, resilient, and self-reliant	
Problems with the SBW label	3
Rejecting themselves as SBW (due to stereotypes and negative perception)	
Emotional and psychological distress of being an SBW	11
Increased stress, anxiety, and low self-esteem	
Coping behaviors to combat the stress of being an SBW	6
Eating disorders	