“Not all black girls know how to eat” is the title of a memoir I read last summer. It is Stephanie Covington Armstrong’s personal narrative of her years long battle with, then recovery, from bulimia as a black woman. For three days and three nights, I read whenever I got out of lab early and late into the night. For three days and three nights, I opened and then shut the book to close my eyes and breathe deeply. For three days and three nights, I cried.

It was difficult to pinpoint exactly why I could not stop crying. I figured that despite being a year and a half into my own recovery from bulimia, I just wasn’t “ready” to read such a vivid account. Maybe this was just another one of those things I had to tiptoe around for my own good, one of those rules like avoid scales, don’t count calories, and don’t use words like “good,” “bad,” or “junk” to describe food.

But the tears weren’t simply the result of re-experiencing a dark time in my life. They were also tears of relief from finally feeling truly and deeply understood. Armstrong’s memoir represented for me the first portrayal of an eating disorder that even came close to my own
experience as a woman of color. Her story, and mine, is one that is too rarely told.

The dominant image of eating disorders in popular culture is of a relatively affluent, white, young woman, dangerously thin, frail and consumed by body image. This despite research showing that women of color experience eating disorders at rates higher than white women, that many of those with eating disorders are not underweight, and that persons of all socioeconomic backgrounds and genders develop eating disorders. The dominant image has real and dangerous consequences: women of color are less likely to recognize disordered behaviors and seek help; when they do seek help, they are less likely to even be diagnosed by a clinician.

My identity as a black, first-generation American woman made it especially difficult for me to accept that I was bulimic. The hardest moment was when I tried to explain to my parents that I suffered from the disorder. My parents had grown up in Madagascar, where eating disorders are largely unrecognized. My father paid his own way through college by commuting between two cities to teach high school and take
college courses. My mother, when my grandfather lost his job, often did not have enough to eat. Like many other Americans, they left their home country in search of a better life, but had to overcome language barriers, cultural differences, and discrimination to do so.

I’ve deeply admired my parents’ strength and have always wanted to honor the sacrifices they’ve made for me and my sister. So how could I, as their daughter, the product and beneficiary of their hard work and sacrifices, explain to them that I ate food just to throw it up? How could I even begin to explain “why”?

During a phone call my sophomore fall, the words I used to tell my parents I had an eating disorder were “I am worthless. There is nothing about me I like and I hate myself.” My parents were confused, then sad, and I felt terrible. I felt like I had failed to uphold the legacy of resilience I should have inherited from my parents and our history as people of color, immigrants, and colonized people. By agreeing with my parents that I should take the rest of the term off, I felt weak, that I had given up because I could not pull out some inner strength to overcome and finish the term on my own.
When I was on that phone call, I didn’t think I should be vulnerable; I didn’t think I was allowed to be vulnerable because that is not what “strong black women” do. “Strong black women” grin and bear their pain. “Strong black women” solve their own problems. The archetypal idea of a “strong black women” and the absence of stories like my own made it hard for me to recognize and accept my own disorder. It made me believe that not only did I not need help, but that I did not deserve help. But the way I’ve come to understood eating disorders during my recovery is that they are what happen when the body becomes a battleground for an internal struggle. And this is why identity matters when we talk about eating disorders. This is why representation matters.