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## Content and perception of weight-related maternal messages communicated to adult daughters

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### Abstract

**Purpose**—This study examined communication between mothers and overweight daughters on weight or weight-related behaviors through the perspective of adult daughters.

**Methods**—Qualitative thematic analysis was used to analyze in-depth individual interviews conducted with 15 adult daughters.

**Results**—Mothers who actively engaged in weight management behaviors, such as dieting and exercising regularly, transmitted these behaviors through modeling and served as continuous sources of verbal guidance on the topic. Weight management was discussed frequently and explicitly. Daughters relied on mothers for motivation in the form of supportive statements consisting of specific recommendations on weight management practices, encouragement to attempt or continue weight management practices, empathy with the struggle of managing weight, and affirmation of practices conducive to weight management. Mothers who did not engage in weight management behaviors were not viewed as credible sources for advice on diet and exercise. Daughters did most of the advice giving and modeling on weight management behaviors. Weight management was discussed infrequently and cautiously. Daughters perceived weight-related messages from mothers as unsolicited and critical.

**Conclusion**—The results suggest that shared lifestyle goals among family members are important for facilitating supportive communication and engagement in health-promoting behaviors and have implications for family-based weight management interventions.

### Keywords

Family communication; Behavioral concordance; Homophily; Weight management

### Introduction

The prevalence of obesity in the United States continues to be high, especially among women [1]. Efforts to reduce obesity among women need to be intensified considering the reported relationship between maternal and offspring obesity. Notably, children with obese

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parents are more likely to be obese throughout childhood and adult life, with the strongest relationship existing between mothers and daughters [2, 3].

Although biology may influence maternal–daughter obesity, there is substantial evidence to suggest that factors contributing to the maternal–daughter obesity relationship involve a shared family environment or parental modeling of eating and exercise behaviors [4, 5]. Accordingly, mothers with higher body mass index (BMI) values report higher fat intake and less physical activity [4]. The daughters of these mothers likewise have higher BMIs and fat intake. Other weight-related behaviors such as fruit and vegetable consumption and television watching are also similar among mothers and daughters [6]. Hence, mothers play a role in establishing their daughters' eating and exercise behaviors in childhood, which have lasting effects into adulthood [7, 8].

Mothers can influence the weight management behaviors of daughters by disseminating information, establishing social norms, and providing social support. Thus, understanding how these elements are communicated by mothers and perceived by daughters could help identify barriers and facilitators to healthy weight control.

Mothers' weight-related comments can contribute to their daughters' healthy or unhealthy weight management practices. In fact, parents' verbal messages may have more influence than modeling on their children's body image and eating behaviors [9]. Maternal comments on weight are associated with daughters' unhealthy weight control behaviors [10]. Among young adult women, maternal messages about weight and shape perceived as negative by daughters contribute to maladaptive eating attitudes, behaviors, and body image [11, 12]. The perception of negative communication by daughters appears to be more impactful than whether such communication actually took place [13]. For example, positive comments intended to be encouraging by parents have also been associated with eating disturbance [14]. Therefore, even when mothers intend to be supportive of their daughters, how messages on weight-related behaviors are conveyed can influence whether the daughter perceives those comments as negative or positive.

To date, the majority of research on weight-related behaviors and communication between parent and child has focused on adolescent daughters. Given that evidence indicates that mothers maintain frequent contact with adult daughters [15] and the risk of obesity increases in adulthood for females [16, 17], this study examined communication between mothers and overweight adult daughters on weight or weight-related behaviors such as eating or exercising through the perspective of the daughters.

### **Theoretical considerations**

The study drew on concepts of family systems theory and interdependence theory. Family systems theory asserts that family members influence one another and individuals cannot be understood in isolation [18]. Lifestyle changes in one family member have consequences for others within the family unit. For example, families tend to have similar (homophilous) dietary habits, and dietary changes are transmitted from member to member [19–21]. Interdependence theory offers a framework for understanding how dyads help shape behaviors [22]. Interactions between family members involving collaboration and

communication can reveal contributions to behaviors. For example, mutual influence exists between parent and child such that reciprocal encouragement is positively associated with coparticipation in physical activity [23].

## Methods

To understand the content of conversations between mothers and overweight daughters on the topic of weight, interview methodology was employed for data collection. The guided interview technique is appropriate for early phases of qualitative data, particularly when there is little knowledge on the topic of interest [24]. Up till now, there is limited data published on the topic with mother–daughter adult dyads. We focused on the perspective of the adult daughter as a starting point to better understanding how mothers and daughters communicate in ways that may or may not be supportive in controlling their weight. The in-depth individual interviews sought to address the following research questions: What messages are communicated by mothers on weight or weight-related behaviors to daughters? How are messages from mothers on weight or weight-related behaviors perceived by daughters?

## Participants

A total of 15 overweight women (daughters) were interviewed for this study. Eligibility criteria for participation included being female, being 18 years or older, self-identifying as being overweight, and willing to share their experiences on the study topic. Participants were recruited through snowball sampling.

## Interviewing

In-depth individual interviews were conducted with 15 daughters to gain their perspective on conversations with their mothers on weight-related issues. Although additional questions were incorporated during the study, a core interview guide consisting of open-ended questions was used for all 15 interviews focusing on messages on weight or weight-related behaviors communicated by mothers to daughters. Interviews took place at various locations including participants' universities, work-sites, or homes. All interviews were conducted in person (face-to-face), audio recorded, transcribed, and analyzed.

## Data analysis and representation

Interview transcripts were reviewed for thematic categories. This consisted of an iterative process involving continuous review and coding as data were collected. Interview data were read and interpreted. Specifically, concepts were identified by reading over pages of typed and doubled-spaced transcripts while noting the words or phrases that interviewees used to describe the content and their perceptions of messages from their mothers on weight-related issues. In subsequent interviews with different participants, interviewees were asked questions based on initial concepts to help determine whether or not there was support for thematic connections. After finding patterns in accounts across interviews, data were coded into one major category and four subcategories that supported an overarching theme.

## Results

The sample consisted of non-Hispanic White, Latino, and Asian-American women (Table 1). Participants ranged in age from 23 to 45 years. The majority of participants were college educated (60 %), employed (60 %), or not married (87 %).

In analyzing data from interviews with a diverse group of women for the purpose of addressing the research questions, ‘What messages are communicated by mothers on weight or weight-related behaviors to daughters?’ and ‘How are messages from mothers on weight or weight-related behaviors perceived by daughters?’, an overarching theme was identified which revealed that concordance of weight management behaviors in mother–daughter dyads influenced whether messages on weight or weight-related activities communicated by mothers were perceived as supportive or non-supportive by daughters. The major category identified was behavioral concordance, which refers to whether or not both mothers and daughters similarly engaged in weight management behaviors such as dieting and exercising. The four subcategories identified included: advice seeking status, advice giving or following status, direct or indirect communication style, and perceived support status of messages. Advice seeking status refers to whether or not daughters used their mothers as resources for information or guidance on weight management strategies. Advice giving or following status refers to whether daughters primarily provided advice to or received advice from their mothers on weight or weight management strategies. Direct or indirect communication style refers to whether verbal messages on weight or weight-related behaviors between daughters and mothers were expressed explicitly or implicitly. Perceived support status of messages refers to whether daughters viewed verbal messages from their mothers on weight or weight-related behaviors as supportive or non-supportive. The discovered category and subcategories supporting the central theme are described and interview passages that illustrate the thematic categories are presented.

### Behavioral concordance

Daughters’ stories indicated that conversations with their mothers’ on weight or weight-related issues were more frequent and abundant when both daughter and mother actively worked to manage their weight. Of the 15 daughters interviewed, all had experience attempting to lose weight. Four women had mothers who had a history of being overweight and engaged in dieting and/or exercise. Consequently, body weight, eating, and exercise were typically discussed. Eleven daughters, however, had mothers that were overweight but did not engage in weight management activities. Among these women, the topic of weight was occasionally talked about but conversations on eating and/or exercise habits were not common. Thus, the message content and whether daughters sought such information from mothers differed according to behavioral concordance.

### Advice seeking

Mothers who actively managed their weight were viewed by daughters as resources of information and guidance on diet and exercise. Four daughters explained that they sought and were receptive to their mothers’ advice because mothers were experienced and thus credible.

[Mom] does a lot of exercise. So she tells me that I should exercise more or go running at least three times a week.... It's mostly I take advice from her cuz she loses weight and she has gained weight (Participant 8).

On the other hand, 11 daughters with mothers who did not engage in weight management behaviors did not turn to their mothers for information on weight control strategies.

[Mom] does not exercise at all and that's never been her thing so I would never ask her, "What are you doing now?" since I know she doesn't. The most extent of any activity she gets is from watching my sister's kids and so she runs around after them but that's about it.... My mom doesn't do anything so she's not a source I would go to (Participant 12).

Mothers' comments tended to focus more on their daughters' overweight status instead of suggestions on how to go about eating healthier or exercising more to manage weight. Consequently, daughters remarked that their mothers mostly advised them to lose weight with no guidance on how to go about it. One participant recalled, "[Mom] just kind of raises a concern, like how mothers are, and she's like, "You should really start to lose weight" (Participant 5).

Moreover, five daughters with mothers who did not engage in weight management behaviors explained that their mothers treated their overweight status as if it did not exist and no comments were ever made about their body size. These daughters explained that they believed the lack of acknowledgement of their overweight status and advice on weight management stemmed from the fact that their mothers were overweight and very sensitive about the topic. As a result, mothers may have refrained from discussing the topic because they themselves dealt with the struggle of excess weight or simply did not believe they were an appropriate source for weight management advice.

[Mom] would never tell me I should start exercising.... She would never tell me to go on a diet or start doing a diet plan or anything like that.... I think she is afraid that it would make me think that she does think I am fat.... Maybe people have said things like that to her and so she does not want to say them to me (Participant 10).

Interestingly, three daughters revealed that whereas their mothers did not bring up the topic of weight or weight management activities often, their fathers were more likely to do so.

My dad is someone that I remember more conversations when I was growing up. But not so much my mom.... She would never say anything like that to me, my dad has but she would never.... I guess from my experience, things my dad said had more of an effect on me (Participant 10).

Daughters mentioned that their fathers influenced their mothers' decisions to not discuss the topic of weight or weight management activities with their daughters. One participant explained, "My dad has been very mean to [mom] about her weight and constantly berates her about it so she doesn't want to say anything to anyone else" (Participant 11). Daughters also felt that having other family members who struggled with weight management also played into their mothers' lack of communication on the topic.

So when I was at home my dad was overweight, so [mom] would never say anything because of him. Even now she doesn't say anything really negative because [dad] does sometimes to me so she won't. And because my sister did all those crazy-fad-crash diets and really unhealthy things my mom doesn't purposely say anything to me (Participant 12).

Hence, mothers' empathy for their daughters' weight struggles appeared to contribute to how the topic of weight was approached. Mothers chose to approach the topic with caution. Since daughters understood this, they in turn did not view their mothers as appropriate sources of information. This, however, did not stop daughters from attempting to engage their mothers in weight management activities.

### Advice giving or following

All daughters with mothers who actively managed their weight viewed their conversations as motivating towards engaging in weight management activities. As a result, the advice that mothers gave their daughters was often put into practice. One participant explained, "Like, [mother] "Oh yeah, yoga class on Tuesdays, I feel really good afterwards." So in a way, that does motivate me to try new things because I normally don't do yoga. I recently started" (Participant 6). Another participant similarly described her mother's advice on weight management as motivating, "The last time I saw her I guess I was gaining weight so she told me, "You should start doing this." It kind of did get me motivated because I don't see her that much, so she can tell a big difference. She motivates me I guess" (Participant 8).

Conversely, seven daughters with mothers who did not engage in weight management behaviors believed they provided their mothers with most of the advice on weight management strategies. Daughters also tried to model for their mothers healthy lifestyles as a way of educating them about eating and activity conducive to weight management. As a result, daughters felt they took a parenting role, which often led to frustration when mothers appeared to dismiss or ignore their daughters' advice on healthy habits.

[Mom] doesn't [exercise or diet] and I'm always encouraging her to exercise and to eat better but she doesn't really listen to me.... She would probably go more to me for advice because I exercise pretty regularly and I mean she's actually a bad influence on my diet because when I'm around her she always has sweets and junk food.... I guess it kind of irritates me a little bit because I'm trying. She is pretty healthy, otherwise. I'm trying to get her to remain so by taking care of herself better but she just doesn't seem interested and listens to me somewhat but then never follows through (Participant 11).

The thing that bothers me about my mother is she is very stubborn. So I've been drinking nonfat milk forever and she likes the whole milk or she likes the 2 % and it's so upsetting because I try to get her down to at least 1 % or nonfat and if I purchase that she will not drink it. She says that, "It tastes like water" and to me that's sort of insulting and that is not being supportive and she will go buy the whole milk or the 2 % even though there is plenty of nonfat or 1 %. I can't get her to go down below 2 %. She refuses to drink that milk. And the other thing that I

find very irritating, I kind of think that for her to be supportive she should make these changes herself and make it for the entire family (Participant 3).

Daughters believed themselves at odds with their mothers' lack of adherence to what they viewed as a healthy lifestyle and thought their mothers to be resistant or in opposition to their weight management advice or attempts.

### **Direct or indirect communication style**

All daughters with mothers who actively managed their weight described the discussions with their mothers on weight or weight management activities as open and honest. Conversations on the topic involved sharing of ideas and experiences. This communicative approach meant that messages were viewed as frequent and straightforward.

Me and my mom, we have an honest relationship and if I'm gaining weight to the point that I look bad, she will put it out there and however you take it, you take it.... Like a couple of months ago I had a rapid weight gain and she just looked at me and she was like, "Oh my God, you have gained a lot of weight, you need to do something about it." And I was like, "Yeah I know I gained a lot of weight. I'm trying my best," and she's like, "Well, go to the doctor or something, you know you need to do something about it." I'm like, "Okay".... And I went to a doctor because there was actually a medical thing.... Just that we are really honest with each other and, if it's good comments or bad comments just being honest and having her be there and help me out even when I'm struggling, that's really motivational for me (Participant 9).

Another participant similarly described her mother's communicative style as direct, "She's very straightforward. She's like, "[Honey], you need to stop eating out and start exercising more often." She always says, "I wish I was there to cook for you" (Participant 8). Her account also revealed what other daughters alluded to which was that frank comments from mothers were often tempered by a follow-up statement of support, which led daughters to construe the message as encouraging.

Eight daughters with mothers who did not engage in weight management behaviors described conversations with their mothers on weight or weight management activities as infrequent or limited in substance. One participant explained, "Topics of weight just never really came up, you know. Topics of our weight, but never to say you need to eat better or do whatever" (Participant 14). It was a challenge for daughters to recollect a time when a weight-related topic was discussed with their mothers. After a long pause, another participant asserted, "Nothing, really she doesn't talk about it" (Participant 13). Eventually, however, all daughters were able to describe specific comments made on the topic by their mothers but the content generally focused on daughters' appearance (i.e., body size).

### **Perceived support status of messages**

When daughters were asked to describe conversations with their mothers on weight-related issues that they believed to be supportive and non-supportive, responses depended on dyad concordance in weight management behaviors.

Daughters with mothers who actively managed their weight were better able to identify supportive or positive messages from their mothers.

I have two brothers and both of them are younger than I am. One is 30 and the other one is 37 and both have been diagnosed with high blood pressure and diabetes and they both have really bad health. And we were discussing that, thank God, I'm pretty healthy. I don't have high blood pressure, I don't have diabetes. [Mom] was telling me, and that's when I felt the support, when she said, "You've been very smart. You've always exercised. You have always eaten healthy and it is obvious that it has paid off because you have none of these conditions and here your two brothers, that are younger than you, they're falling apart." So that's when she validated what I've been doing (Participant 2).

Daughters with mothers who did not engage in weight management activities struggled to provide examples of supportive comments but were better able to describe messages characterized as unsupportive or negative from their mothers.

[Mom] is being positive or supportive, the only time would be when I'm at a good place and I have lost weight and my mother will say, "You look good" or "You aren't fat anymore"... I think just by her reminding me that I eat out in the [street] or I eat out too much that doesn't help me. It's like she always likes to mention that I have bad eating habits so it makes me feel like it's my fault [laugh].... I have a feeling she is trying to be helpful and she thinks that by reminding me that I eat out too much and oh, she tells me that I eat a lot of junk food too. She is trying to be helpful by telling me that I do this she's hoping that I won't do it anymore so that's her way of her trying to be helpful. But she never is really supportive and says, "Oh, it's so good that you're going to the gym." She doesn't work like that. Instead she will tell me, "Well, you used to be fat," or you know, "You eat out too much," but not really positive frame (Participant 3).

Messages from mothers on weight-related issues that were identified as supportive by daughters were generally characterized as informative (providing specific or helpful information), motivating (involving praise or eliciting enthusiasm and encouragement), understanding (mothers relate or empathize), and/or affirming (mothers acknowledge, recognize, accept, or validate).

Recently, I told [mom] that I was taking a hot yoga class, Bikram yoga, and how my heart rate was racing and she was telling me, "Oh, [how cool]. That's really good because that's how I lost weight after my pregnancy. If you combine it with cardio it's really good for you." "[You are going to see how strong you are going to look]," like, "You can actually tone your muscles," so I thought that was good feedback, positive because it motivates you (Participant 6).

Conversely, messages from mothers on weight-related issues that were identified as non-supportive by daughters were typically described as unnecessary (unsolicited or nagging), critical (judgmental or accusatory), non-informative (non-specific or not helpful), hurtful (commenting on weight status), avoidant (not addressed or cautious language), and/or well-intended (good intentions or meant well).

It just seemed like it was critical, you know. [Mom] was just stating the obvious. I know that if I'm gaining weight it's probably because I'm not exercising enough or eating too much. It's not necessary for her to say, "Well, if you ate less" (Participant 7).

Regardless of the level of behavioral concordance between mothers and daughters on weight management behaviors, comments on appearance related to weight changes produced similar reactions from daughters. Daughters believed their mothers' comments on their weight loss to be supportive or positive and indicated that messages acknowledging the drop in weight were welcomed and motivating. However, daughters perceived their mothers' comments related to their weight gain as non-supportive or negative and believed they were unnecessary. Even when mothers' used terms or phrases such as "overweight," "gained weight," "heavy," or "round" when referring to their daughters' weight gain, daughters interpreted these messages to say, "You are fat."

I think [mom] is kind of accusatory about my weight and it's kind of a sensitive topic being a female anyways and so the way that she brought it up kind of put me on edge about my weight. It's like, I'm aware of my weight and what I need to do and stuff but it's the way it's pointed out can be hurtful.... She said "I am worried you've gotten heavy." I've heard that a lot from her. Not exactly the term fat but dance around the word fat (Participant 15).

The mere mention or acknowledgement of their weight gain was hurtful. Although, daughters admitted to believing that their mothers spoke truthfully and with the best intentions.

When I used to think that I was really overweight and this was recent like maybe a few months ago, I would tell her, "I think I'm gaining weight. My jeans are actually tight. And it was one time [mom] said, "[Yeah. Now, start exercising]" or she would agree with me like, "[Yes, gosh, you are gaining weight]". In my head I'm like, "Okay, you're not supposed to agree with me. You're supposed to encourage me." But I didn't take it personal or anything. She is telling me the truth. I am gaining weight.... Maybe her way of thinking is, "Okay, if I tell her the truth then maybe she'll do something." Because if you just sugar coat everything some people don't react to that so when I would see myself in pictures or like if I show her, "Oh my gosh, look at this picture I look so fat" and she be like, "Yeah." She would agree with me so it does make me feel bad but at the same time it kind of motivates me to eat healthier and exercise (Participant 6).

Although mothers' comments on their daughter's weight gain may be intended as a form of intervention, they generally were distressing. This was a pattern evident among daughters irrespective of degree of behavioral concordance.

## Discussion

Given that obesity clusters in families, particularly among mothers and daughters, learning how families talk about weight-related issues is important for promotion of communication that supports attitudes and behaviors that lead to healthy weight management. The accounts

from 15 adult daughters, who were overweight, revealed that concordance of weight management behaviors in mother–daughter dyads influenced whether messages on weight or weight-related activities communicated by mothers were perceived as supportive or non-supportive by daughters.

Mothers who actively engage in weight management behaviors, such as dieting and exercising regularly, may not only transmit these behaviors through modeling but are likely to serve as a continuous source of verbal guidance on the topic. When mothers similarly worked to manage their weight, daughters sought and followed their mothers' advice. Since mothers had a history of being overweight and attempting to lose weight, daughters related with their mothers' efforts to diet and/or exercise. Commonalities in lifestyle behaviors appeared to be more salient for daughters than their mothers' current weight status. An important element of the mother–daughter relationship was open communication, where the topic of weight management was discussed frequently and explicitly. This allowed daughters to rely on their mothers for motivation which came in the form of supportive statements consisting of specific recommendations on weight management practices, encouragement to attempt or continue weight management practices, empathy with the struggle of managing weight, and affirmation of practices conducive to weight management.

Mothers who did not engage in weight management behaviors were not viewed as credible sources for advice on diet and exercise. Daughters assumed a parenting role as they believed they did most of the advice giving and modeling on weight management behaviors. Weight management was discussed infrequently and cautiously. Daughters perceived weight-related messages from mothers as unsolicited and critical.

Irrespective of behavioral concordance, mothers' comments on their daughters' weight gain are intended as a form of intervention but they generally lack tactfulness and elicit distress. Although daughters recognized their mothers' comments on their weight gain to be well-intended, they perceived such comments as hurtful. Even when mothers used euphemisms to refer to their daughters' weight gain, daughters interpreted the message to mean "You are fat." Daughters were already aware and stressed about their weight gain and the mere mention of their appearance added further pressure on them to take action. Moreover, mothers in the haste to convey their concern for their daughters' health lacked positive framing of their messages. Hence, mothers' messages emphasized their daughters' body size and not much else.

### **Theoretical implications**

Findings from this study are consistent with the conceptualization of homophily and communication effectiveness relevant to diffusion of innovation [25]. Homophily refers to similarities in certain attributes such as attitudes and behaviors among interacting individuals. Homophily and communication effectiveness are positively related such that the transfer of information from a homophilous source to a receiver results in a change in the receiver.

The ability of a source to persuade a receiver depends on how similar the receiver perceives the source. Individuals who are similar interact often which provides more opportunities

for exchange of messages. Homophilous sources can be perceived as credible as well as realistic and attainable models which translate into the adoption of advice by a receiver. Homophily among individuals also lends itself to shared experiences which can result in greater expressed empathy and support [26].

Because the effects of a message on a receiver's behavior depend on the perception of similarities, interaction with individuals viewed as different (heterophilic) may impair communication effectiveness [25]. For example, heterophilic interactions can create message distortion. Receivers may perceive messages as critical and subsequently limit or avoid future communication.

### **Practical implications**

The results of this study revealed that concordance of diet and exercise behaviors played an important role in the content and perception of weight-related messages communicated by mothers to daughters. This suggests that shared lifestyle goals among family members facilitate supportive communication and engagement in health-promoting behaviors. Hence, targeting mother–daughter dyads for nutrition and physical activity interventions would be beneficial. The addition of communication skills training could further help dyads serve as sources of support to reinforce behaviors conducive to weight management. By building upon the pre-existing interpersonal environment, weight management could potentially be sustained long after the intervention ceases.

Up to now, family-based weight management for adults is scarce. Studies have typically focused on lifestyle programs for couples. A meta-analysis on couple-orientated interventions found small effects, and researcher suggested implementing interventions that emphasized improved communication to enhance behavioral outcomes [27]. Treatment approaches for mother–daughter dyads hold promise especially when considering that weight and weight-related behaviors are commonly discussed the context of chronic disease prevention or management [28]. Recently, two small studies targeted mothers with a chronic condition and their adult daughters for weight loss. In the Unidas por la Vida program, mothers with type 2 diabetes and their daughters achieved weight loss and lower saturated fat intake after 16 weeks [29]. In the DAMES study, breast cancer survivors and their biological daughters experienced reduction in waist circumference and increases in physical activity after 12 months [30].

### **Limitations**

Despite the strong practical implication of the study's findings, a limitation is that interview data was collected from daughters only and their mothers' stories were not accounted for in this study. Daughters' perceptions of maternal messages can be subject to distortions like over- or underestimation and may not reflect actual communication content. Future research would benefit from interviewing dyads to get a more comprehensive understanding of the communicative relationship between mothers and daughters. Additionally, the narratives of women indicate that the role of fathers in influencing eating and exercise behaviors of daughters also merits further study.

## Strengths

This study has several strengths worth mentioning. Given the scarcity of research in communication on weight or weight-related behaviors between mothers and adult daughters, our study contributes to the literature in this area. To date, the majority of research has been conducted on non-Hispanic White adolescent daughters. Daughters interviewed in the present study were from diverse ethnic backgrounds. This is particularly important when considering that obesity disproportionately affects minority women. Moreover, our findings offer insight into factors associated with content and perception of weight-related messages communicated by mothers to daughters which has implications for family-based nutrition and physical activity interventions for adults.

## Conclusion

The current study highlights the importance of shared lifestyle goals among family members in facilitating supportive communication and engagement in health-promoting behaviors. Given that obesity treatment for adults has traditionally focused on the individual and does not adequately account for interpersonal influences on adherence to weight management behaviors, there is a need to further examine the role of personal networks in the eating and exercise behaviors of women. How families talk about health such as weight-related issues can impact behaviors important to health outcomes. Therefore, understanding how to encourage communication that supports behaviors conducive to healthy weight management among family members, such as mothers and adult daughters, could potentially help improve intervention outcomes.

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**Table 1**

## Participant characteristics

	<i>N</i> = 15
Age (years)	32.4 ± 7.9
Race/ethnicity	
Non-Hispanic White	40.0
Latino	53.3
Asian-American	6.7
Education	
Did not graduate high school	6.7
High school graduate	33.3
College graduate	60.0
Employment	
Unemployed	26.7
Student	13.3
Employed	60.0
Marital status	
Not married	86.7
Married	13.3

Data are mean ± standard deviation or %

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