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Family Influences: Mothers' and Daughters' Use of Multivitamin Mineral Supplements

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Abstract

Girls' multivitamin mineral (MVM) use was evaluated among a white middle-class sample ($n = 192$ mother-daughter pairs). Daughters' MVM use was predicted by mothers' use, and by mothers' beliefs, attitudes, and practices regarding her own eating and child feeding practices. Mothers who gave daughters supplements reported greater monitoring of daughters' intake and were more likely to pressure daughters to eat, MVM user diets did not differ from nonusers, with the exception that nonusers consumed more fats and sweets. Patterns of intake revealed food group servings below recommended levels for both groups, whereas vitamin and mineral intakes exceeded the RDA. This pattern reflects girls' high levels of consumption of fortified foods.

Objective

To examine diet quality of girls who do or do not take MVM supplements and evaluate predictors of girls' MVM use, including maternal eating behaviors, maternal MVM use, and beliefs, attitudes, and perceptions about child feeding, eating, and health.

Design

Subjects were 192 mothers and daughters. Daughters were categorized as MVM supplement users or nonusers based on whether girls were consistently given MVM supplements at 5 and 7 years. Girls' and mothers' nutrient and food group intakes, maternal child-feeding practices, and maternal eating behaviors were compared between the groups.

Results

Mothers who used MVM supplements themselves were more likely to give MVM supplements to daughters. Excluding nutrients obtained from MVM supplements, a comparison of the MVM users and nonusers revealed that girls' and mothers' vitamin and mineral intakes did not differ and that patterns of food group intake were similar. Mothers of MVM users reported higher levels of pressuring their daughters to eat healthier diets and more monitoring of daughters' food intake. Mothers who gave daughters MVM supplements reported more successful dieting for weight control, were more positive in evaluating their success in eating healthy diets, and had lower BMIs than mothers who did not give MVMs to daughters.

Conclusions

Daughters' MVM supplement use was predicted by mothers' beliefs, attitudes, perceptions, and practices regarding mothers' own eating and child feeding practices, rather than by real shortcomings in daughters' diet quality. For both MVM users and nonusers, daughters' US Department of Agriculture food group servings were below recommendations, except for dairy, fats, and sweets, whereas vitamin and mineral intakes exceeded the RDAs. Taken together, this pattern indicates girls' relatively high intakes of fortified foods. Mothers should be

encouraged to foster healthier patterns of food intake in daughters rather than providing MVM supplements.

SUGGESTED READINGS

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