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**Daughters of Depression: A critical-hermeneutic phenomenological examination of adult
Black women's experiences with Strong Black Woman's role when mothered by women
with perceived depression**

A DISSERTATION

Submitted to the Faculty of
Montclair State University in partial fulfillment
of the requirements
for the degree of Doctor of Philosophy

by

Christin D. Haynes, MSW

Montclair State University

Montclair, NJ

August 2022

Dissertation Chair: Dr. Pearl Stewart

MONTCLAIR STATE UNIVERSITY
THE GRADUATE SCHOOL
DISSERTATION APPROVAL

We hereby approve the Dissertation

Daughters of Depression: A critical-hermeneutic phenomenological examination of adult Black women’s experiences with Strong Black Woman’s role when mothered by women with perceived depression

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Abstract

Black American women are experiencing chronic depression at alarming rates. Major racial/sex disparities in disease prevalence indicates Black American women are at increased risk for depression onset due to exposure to poverty and traumatic life events. With the rise of single, female-headed households, children are at increased risk for exposure to maternal mental illness which is defined as an adverse childhood experience impacting their development through adulthood. Black American mothers have the additional burden of racially socializing all children to learn how to manage systematic racist structures embedded in American society, yet daughters require the additional socialization for gender biases. This study sought to examine how living with a mother perceived as depressed impacted the transmission of culturally-specific coping strategies to daughters concerning the challenges with being Black and female. Using critical Hermeneutic phenomenology, qualitative data included in-depth interviews to assess the lived childhood experiences of adult Black American women mothered by women with perceived depression and their adult Strong Black Woman beliefs and behaviors. Identified themes included: The making of strong Black girls, Mothers' strength lessons and alternative versions with Othermothers, Identifying and challenging learned coping strategies, Defining and redefining their mothers' version of Strong Black Woman's role in adulthood, and Mother as a woman. Implications from this study provide context to the intergenerational transmission of psychopathology, gendered strength socialization processes, and the importance of familial and community support for Black American mother/daughter dyads.

Keywords: Strong Black Woman, Maternal Depression, Mother/Daughter Dyads, Maternal Mental Health, Black Mothers, Black Daughters, Black Families, Strength Socialization, Gender Socialization

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First, I acknowledge my ancestors for their foresight and ability to persevere for the next generation. This dissertation is the manifestation of their desire to educate themselves long ago. To the mothers before me, thank you for the breadcrumbs of wisdom on the path to my highest self. I pay homage to every Black educator who cultivated a positive self-image in me and continually raising the bar of excellence in your expectations. Special thank you to my Othermothers in the form of educators: Mama Olabisi, Dr. Kenika Holloway, Dr. Nzinga Metzger, and Dr. Jenny Jones. Without your unyielding belief in my ability to be greater than what I could see, this dissertation would have remained a good idea and not my current reality. I pay homage to every Historically Black College and University changing the lives of Black families through education. Thank you, Florida A&M University, for giving me a solid foundation to build my academic scholarship and community engagement.

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Dedication

I dedicate this dissertation to my mother, Cheryl D. Herbert- Haynes. Thank you for teaching me there is strength in asking for help and power in putting yourself first. I also dedicate this dissertation to my maternal grandmother, Ms. Louversa T. Herbert, a world-class educator who cultivated my curiosity and imagination. I dedicate this dissertation to my father, Dr. Thomas J. Haynes, Jr., the very first person to receive a PhD in our entire lineage. I stand on the shoulders of a great giant! Thank you for cultivating my ability to see different perspectives, use critical inquiry, and be unafraid to defend or challenge.

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Definition of Terms

Superwoman Schema- the original name for a set of beliefs and behaviors connected to Black women's adoption of strength when managing stress and health. Later termed Strong Black Woman beliefs (Woods-Giscombé, 2010)

Strong Black Woman role (SBW)- the evolved name from the original Superwoman Schema to address the same beliefs and behaviors connected to Black women's adoption of strength. This name will be utilized to describe Superwoman Schema throughout the current study. The use of this term is not used in a diagnosable manner rather it is used to highlight the beliefs and behaviors identified in the original Superwoman Schema. The acronym **SBW** will be used in the sections when discussing Strong Black Woman roles (including both beliefs and behaviors).

Sisterella Complex- unique depression symptomology linked to Black women's cultural beliefs and social position in society. Symptoms include a high functioning depression that manifests into overeating, financial mismanagement, martyrdom, and somatic pain symptoms (Jones & Shorter-Gooden, 2009).

Perceived depression- refers to mothers who were never formally diagnosed owing to black women's underdiagnosis of depressive disorder.

Othermothers- relatives or non-related Black women who provided some aspect of childrearing responsibilities for daughters.

Chapter One: Introduction

An Insider's Perspective

As the youngest daughter, I witnessed in a ringside seat the highs and lows of my mother's mental health battle. In the Black community, speaking of mental illness is taboo, and even more concealed is sharing the intimate family life experiences with those outside of your household. I remember countless times getting in trouble for "spreading my mama's business with strangers". Truly, I was curious to understand the invisible opponent my mother fought so frequently and fiercely. Many of my closest family members would advise that God would take care of my mother's "sadness". In the middle of the night, I would hear my mother desperately praying for God to fix her mind; I would silently wipe my tears while asking God to fix my mama too.

I witnessed her depression happen in cycles, yet she would always fight her way back to herself. By far, my mama is the most resilient woman I know. After months of isolation, she would come back being the supportive woman I loved, adored, and needed. However, when she was low, I thought she didn't love or like me at times because of depression's isolation and irritability. As an overly expressive and sometimes know-it-all child, I'm sure I didn't make managing her illness any easier. It wasn't until I turned 16 years old, I experienced my first depressive episode. I understood the heaviness of the burden she carried. I stayed isolated for weeks and was losing weight rapidly. Unbeknownst to me, my mama had called our family physician who was also like a godfather. He asked me to come visit him at home which wasn't unusual to cause alarm. During this visit, he gently explained to me what depression was and how my mother had some of the same experiences. We came up with an intervention where I

began therapy and started taking medication. The medication's side effects, like extreme fatigue and emotional sensitivity, were very hard to manage but eventually I began to get my life back. For whatever reason, my mama did not know how to talk to me about something so personal. I believe it was the shame of being perceived as incapable in managing mother- and womanhood that kept her silent. Despite her personal convictions, she made sure I got the professional help I needed. Yet as a family, we never openly discussed my mental health challenges. We just moved forward.

Throughout the years and into my adulthood, I have experienced many depressive episodes. My mama has always had the right words of wisdom concerning life and Black womanhood which helped me cope in a healthier way. She has encouraged me to have faith in God and myself, discouraging taking on too much of other people's responsibilities, and to prioritize finding my peace and happiness. Watching her battle and overcome depression in a time where Black women with mental health disorders were labeled "crazy" by the community taught me more than words could ever in my childhood. Despite the prevalence of cultural stigma, my mother modeled to me her version of strong Black womanhood which included resilience and the courage to get professional help. It has taken much maturity, patience, and understanding to ask for forgiveness where I didn't give my mama the grace she deserved when experiencing a depressive episode. My womanhood has been shaped by my personal and vicarious experiences with depression. My mother, whether she wanted to be or not, was the best teacher for my success.

As I sat in a support group for Black women with depression, I reflected on my journey and how experiencing my mother's depression in childhood shaped my beliefs concerning Black womanhood and strength. Surprisingly, my experiences with maternal depression were very

different than those echoed in other women's stories. Many women shared how cultural and spiritual beliefs concerning strength contributed to their mother's illness. Others mentioned the veil of silence utilized by their mothers or other family members that left them confused, angry, and frustrated in childhood which influenced their lives today. Also, many women expressed their mothers' inability to seek professional help and how mental health translated into other behaviors and beliefs concerning Black womanhood. This critical moment shaped my curiosity and desire to examine how maternal depression influences the socialization of daughters and their beliefs concerning what it means to be Strong Black Women.

Background and Significance

Black women hold a double minority status, which consists of being "female" and "Black", making this group of women more susceptible to experiencing racism and sexism simultaneously (Catherine, 2010; Crenshaw, 1990; Jones & Shorter-Gooden, 2009; Patricia Hill, 1989). Previous research findings suggest Black parents' socialization practices with their children act as a protective factor for interfacing with racism and discrimination (Caughy et al., 2011; Caughy et al., 2006; Hughes & Chen, 1997; McHale et al., 2006; Thomas et al., 2011). Other studies have highlighted the salience of Black mother/daughter relationships in which daughters learn strength by observation of their mothers or other female caregivers (Joyce E Everet et al., 2016; Frabutt et al., 2002; Nelson et al., 2016; Thomas & King, 2007). Depressive disorder heavily influences a mother's ability to socially interact with her children (Atkins, 2016; Ceballos et al., 2017; Sherryl H Goodman & Ian H Gotlib, 1999; Hentges et al., 2021; Hooper et al., 2018; Källquist & Salzman-Erikson, 2019) and may greatly influence the strength socialization process between the dyad. Further information is needed to understand

how Major Depressive Disorder (MDD) influences strength socialization messages between Black mothers and daughters and how these messages are translated into adulthood.

Research has identified unique depression symptomology expressed by Black women which leads to an underdiagnosis of Black women and depression (Atkins, 2016; Jones & Shorter-Gooden, 2009). This symptomology results in Black women expressing behaviors like overachievement and the use binge eating and shopping as culturally-supported coping mechanisms (Atkins, 2016; Beauboeuf-Lafontant, 2003). With the overwhelming number of Black children being raised in single, female-headed households, coupled with the rising number of Black women experiencing depression symptomology, Black daughters are at a higher risk for witnessing maternal mental illness and depression onset.

Overview of the Maternal Depression, Mother/Daughter Relationship, and SBW

Having a greater understanding of the childhood experiences of Black women raised by depressed mothers is fundamental in comprehending the influence mental health has had on the mother/daughter relationship and the ways in which daughters learn about being strong women. The mother/daughter relationship has a pivotal role in the passing of intergenerational knowledge of gender roles, family practices, and women's social status to the next generation (Collins, 1991; Collins, 2002; Denise Davis-Maye & Tonya E Perry, 2007; Denby, 2018; Joyce E. Everet et al., 2016). More specifically, the Black mother/daughter relationship plays a critical role in the maintenance of Black family values and beliefs (Collins, 1991; Collins, 2002; Leath & Mims, 2021). The frequency of socialization messages is associated with more positive outcomes with Black daughters (McLoyd et al., 2019; Shambley-Ebron et al., 2016; Thomas & King, 2007; Winchester et al., 2021). More information is needed to understand how growing up in a household where mothers are constrained by an illness limiting their positive coping strategies

and how this experience influenced the way daughters conceptualize, identify, and perceived the meaning of experiences with the Strong Black Woman (SBW) beliefs and behaviors.

Maternal Mental Illness. Maternal mental illness presented multiple challenges to the mother/child relationship and the Black family. In 2019, 64% of Black children were raised in single, female-headed households (Annie Casey Foundation, 2021). Children of depressed mothers had a higher risk for abnormal development and depression onset than children without depressed mothers (Alessandra Turini & Sonia Regina, 2020). Goodman and Godlib (1999) proposed mothers' experiencing depression "expose their children to negative and maladaptive cognitions, behaviors, and affect, which places the children at elevated risk for developing depression (p.466)". Hwa-Froelich et al (2008) examined the maternal sensitivity and communication styles of low- income depressed mothers and found decreased responsiveness and sensitivity when compared to non-depressed mothers. In reference to maternal communication challenges with depression, Marchand et al. (2002) ascertained depressed mothers exhibited difficulty providing nonverbal behaviors "(e.g., eye gaze, touch, physical closeness, social and communicative responsiveness, vigor, auditory or verbal stimulation) (p.349)" to children and exhibited more verbal behaviors due their inability to distinguish facial interpretations. Undoubtedly, children of depressed mothers exhibited both internalized and externalized problems (Alessandra Turini & Sonia Regina, 2020; Rhonda C Boyd et al., 2011; Hentges et al., 2021; Reynolds & Johnston, 2013).

Children of depressed mothers experienced internalized problems, particularly negative thoughts that posed barriers to self-regulation practices required in healthy coping (Faleschini et al., 2019). As a result, many children experienced mental strain across their lifespan (Behrendt et

al., 2019; Reising et al., 2018; Wu et al., 2020; Zou et al., 2019). Marchand et al. (2002) linked maternal depressive symptoms and hostile-controlling behaviors to early childhood. Researchers predicted an association between mothers' symptoms and internalized behaviors at age 4 and externalizing behaviors at age 6. Children with both internal- and externalized behaviors coupled with maternal depression acted as a deterrent for creating secure relationship bonds (Alessandra Turini & Sonia Regina, 2020).

Black Mother/Daughter Relationships. In preparation for the complexities involved with existing in discriminatory spaces, Black mothers share a unique relationship with their daughters. Black parents are responsible for preparing Black children for the harsh realities of racism. In particular, Black mothers occupied a critical role in daughters' preparation for experiencing both racism and sexism simultaneously (Collins, 2002). Thomas and King (2007) found Black mothers provided gendered socialization messages of self-determination, self-pride, being respectful, spirituality, racial pride, and knowledge concerning male-female relationships. The authors found mothers who provided frequent racial socialization messages contributed to increased racial/cultural pride in their daughters, allowing daughters to buffer toxic messaging associated with racial and gender biases (Thomas & King, 2007). Turnage (2004) supported the importance of having a strong bond between Black mothers and daughters. The author (Turnage, 2004) proposed daughters had a meaningful relationship with mothers who overcame challenges in adolescence with ethnic and gender oppression and that these mothers better prepared them for positive coping while maintaining a strong sense of self. Black mothers and daughters open communication patterns (Thomas & King, 2007) are beneficial to both mothers and daughters as it acted as a buffer for mental illness (Erika M Manczak et al., 2018). This relationship has also allowed for the passing of survival messaging from one generation to the next (Joyce E Everet alt

et al., 2016). Maternal mental illness presented challenges to communication and trust between Black mothers and daughters which increased the risk of daughters experiencing mental strain and emotional distress.

While maternal mental illness impacted both male and female children, daughters have been shown to have psychological, biological, and social vulnerabilities. One study (Landerman-Peters et. al, 2007) found girls are at an increased risk for developing anxiety but not depression when having a depressed parent. While another study (LeMoult et al., 2015) found biological links between depressed mothers and never depressed daughters. Findings concur depressed mothers and daughters expressed “consistent and robust concordance between mothers’ and daughters’ diurnal cortisol production at a given time”. These findings gave evidence to how maternal dysregulation is linked to their daughters, even if the daughters never experienced a depressive episode. Goodman and Godlib (1999) provided risks for psychopathology for children of depressed mothers. Researchers identified “exposure to mother’s negative cognitions and a stressful environment” increased the risk of transmission for depression. The exposure of mothers’ negative cognitions is influential in shaping the beliefs concerning strength in daughters.

Strong Black Woman Syndrome. Black daughters learned to model what it means to be Strong Black Women from mothers and other female caregivers (Joyce E Everet alt et al., 2016). These relationships provided messaging associated with strength and perseverance and became the standard in which Black daughters model their behaviors. Associated with SBW beliefs is what one author described as “The Centrality of Struggle” (Beauboeuf-Lafontant, 2007). The struggle described cultural, and gender roles assigned to Black women that included, “one’s persistence through demonstrable struggle and the presentation of self as unaffected by human experiences

of fear, need, or fatigue”. Green (2019) identified SBW having protective factors while there is other evidence on the detrimental impact on Black women’s mental health when ascribing to beliefs that ignored personal needs when challenged with stressful life situations. Women who ascribed to SBW beliefs had low help-seeking behaviors and preferred spiritual assistance over professional care (Jasmine A Abrams et al., 2019). These behaviors are supported in Black family’s cultural values that dictate cultural norms (Hudson-Weems, 2019). As a result, Black women experienced chronic depressive episodes at a higher rate than any other sex-race group (NIH, 2014) and are witnessed by daughters in the household.

Significance of Research and Research Questions

With the overwhelming number of Black children raised in single, female-headed households, coupled with the rising number of Black women who presented unique depression symptomology which is often overlooked in clinical diagnosing, Black daughters are at an increased risk of being exposed to untreated maternal psychopathology that may influence the cultural- and gender-specific socialization practices concerning strength that transpires in the mother/daughter relationship. Researchers identified Black mothers as tasked with providing messages and modeling Strong Black Woman beliefs and behaviors to prepare daughters for the gendered racism experiences in American society. SBW beliefs and behaviors are endorsed in the larger Black American cultural context and are a by-product of the groups’ historical experiences including subjugation and marginalization in American society. In the literature, SBW beliefs are presented as protective factors and causing barriers in the lives of Black women. Previous studies examining maternal mental illness and parenting presented challenges in communication, warmth, and attachment. Daughters may experience these socialization practices

differently due to their mother's perceived depression and in turn influence their adult experiences.

The current critical-hermeneutic study utilizes in-depth interviewing to examine how the lived childhood experiences of daughters of depressed Black mothers influence their adult experiences with Strong Black Woman beliefs and behaviors. Because in-depth interviewing supports Black women's cultural use of dialogue for meaning making, this phenomenological inquiry is most appropriate to understand adult daughters lived experiences. Having greater insights into these experiences can provide the family science discipline additional understanding into the salience of maternal mental illness and the intergeneration passing of Black family cultural beliefs and behaviors. By highlighting maternal illness as dynamic in the lives of adult daughters, this phenomenological study fills gaps in the current literature by providing evidence to the value of cultural beliefs and behavior experiences in the lives of women raised by perceivably mentally ill mothers.

Purpose Statement

The purpose of this critical-hermeneutic phenomenological study is to highlight the lived experiences of adult daughters raised by perceivably depressed Black mothers and the daughters' experiences with SBW role in adulthood. By interviewing Black women, this study will describe the phenomenon of perceivably depressed mothers influence on their adult daughters' experiences involving SBW beliefs and behaviors. As a result, this study will advance family scientists exploration of Black women experiencing maternal depression in childhood shape adult experiences involving culturally supported beliefs and behaviors, potentially illuminating new insights to future family risk and resilience research.

Research Questions

The following questions and sub questions are the focus of the research study:

1. How does living with a perceivably depressed Black mother influence their adult daughters' experiences with SBW beliefs in adulthood?
 - 1a. How does a mother's perceived depression influence strength socialization messages received in childhood?
 - 1b. Do childhood socialization messages translate into the lives of adult daughters
2. How does living with a perceivably depressed Black mother influence their adult daughters' experiences with SBW behaviors in adulthood?
 - 2a. How does perceived depression influence the mother/daughter relationship bond?

Goal Statement

Much of the literature on Black mother/daughter socialization focuses on resiliency, strength, perseverance, importance of faith, hope, self-esteem, racial heritage, and determination (Hall, 2015; Everet, Marks, & Clark-Mitchell, 2016; Thomas & King, 2007; Davis-Maye & Perry, 2007; Turnage, 2004). The goal of this study is to contribute to the literature on Black mother/daughter strength socialization messaging and how these messages are translated in adulthood. Studies currently demonstrate the essential role Black mothers and other female caregivers play in the intergenerational transmission of beliefs concerning strength and resiliency to the next generation of women (Thomas & King, 2007; Turnage, 2004, Green, 2019). However, the literature does not address how children of these women perceived the cost of Strong Black Woman role and how they adopt such beliefs and behaviors in their adult life.

The second goal of this study is to examine the Black mother/daughter relationship and Major Depressive Disorder. Studies have shown daughters of Black mothers witnessed mothers express resiliency, strength, and self-sacrificing behaviors in the face of life stressors (Carter & Rossi, 2019). Families have a critical relationship in the development of emotional regulation in children that persists across the lifespan (Morris et al., 2007). Daughters of depressed mothers are at increased risk for developing depression and other mental health problems (Sherryl H Goodman & Ian H Gotlib, 1999). The identified themes supporting the lived experiences involving Black mothers' expression of depressive symptomology and perceptions concerning strength in adult daughters may provide implications for early intervention support programs for the dyad.

Theoretical and Conceptual Framework

Black Feminist Thought

Black women utilized strength to withstand deleterious historical treatment involving racism, discrimination, and sexism. These experiences have marginalized women and families over time (Catherine, 2010; Collins, 2002; Donovan, Galban, et al., 2013; Jackson et al., 2001). The current research study utilized *Black feminist thought* (BFT) as its theoretical and conceptual framework. As a theoretical framework, Hill-Collins (2002) established BFT as a critical social theory that centered and legitimized the knowledge gained from Black women's lived experiences as an alternative to the racist epistemological stances created by White men in academic institutions. In their positivistic stance, knowledge claims are deemed credible if the researcher has taken an objective position for the discovery of knowledge (Collins, 2002). This form of research is void of emotion and it is only through critical debate amongst White men that

Black women's knowledge claims are validated (Collins, 2002). As critical inquiry is heavily influenced by a researcher's social position and privilege, issues with outsiders validating the experiences of Black women have proven problematic yet are hegemonic in a positivistic stance (Patricia Hill, 1989). As a Black female intellectual, the adoption of positivistic beliefs asked women to "objectify themselves, devalue emotional life, and displace their motivations for furthering knowledge about Black women, and confront, in an adversarial relationship, those who have more social, economic, and professional power than they (Patricia Hill, 1989)".

As an alternative, BFT proposed Black women's experiences of subjugation and lowered social position allowed for legitimate ways of understanding the world around them (Collins, 2002). Collins (2002) proposes four dimensions of Black Feminist epistemology to include: (1) lived experience as a criterion for meaning; (2) the use of dialogue; (3) the ethic of personal accountability; (4) the ethic of caring. Under lived experiences, Black female intellectuals are encouraged to select research topics in which they have personal experiences.

Collins states,

Black feminist intellectuals must be personal advocates for their work, have lived or experienced their material in some fashion, be accountable for the consequences of their work, and be willing to engage in dialogues about their findings with ordinary, everyday people.

In the current research study, my personal experiences with depression are accepted as a valid criterion as a way of knowing under Black Feminist epistemology. From these experiences, a level of empathy and understanding was invoked throughout the data collection and analysis process. BFT paired well with the phenomenological data analysis process as it sought to understand the lived experiences of research subjects from their perspective. The act of centering

of my personal and the research subject's experiences in the interview process encapsulates Collins' (2002) claim that Black women used dialogue to evaluate knowledge and is connected to a gender specific way of gaining understanding.

Conceptual Framework. *Black feminist thought* acknowledged women's historical involvement in slavery as influencing hegemonic beliefs concerning value, functioning, and social position in American society. As a result, Black women hold specific coping strategies to manage the chronic stress involved with gender-based racism and marginalization. Black women acknowledged strength was needed to persevere in such a system, yet their relationship to strength maintains positive and negative connotations. The current study utilized Woods-Giscombe' (2010) Superwoman Schema (later termed Strong Black Woman role) and Jones and Shorter- Gooden's *Sisterella Complex* (2009) for its conceptual framework. Superwoman Schema (Woods-Giscombé, 2010) identifies beliefs and behaviors Black women ascribe to as strength and stressful life situations. *Sisterella Complex* (2009) provides unique depression symptomology expressed by Black women due to their historical and present social positioning and the adoption of culturally sanctioned ways of coping. As a result, Black women experienced a high functioning form of depression that presented differently than acceptable clinical diagnoses. BFT allowed for the current study to challenge diagnostic criteria legitimized by scholars who value Western ways of knowing that de-centered and discredited the validity of life experiences and social positioning in their analyses of acceptable criterion for disease onset. As a result, Black women may be underdiagnosed and without clinical treatment to address their mental health needs. It is important to note both concepts fit well in Black feminist thought as an epistemology because they center and view Black women's life experiences as the nucleus to which beliefs and behaviors are conceptualized.

Black womanhood is not a monolithic experience. Black women's diversity heavily influenced their gendered identity's value, whether positive or negative, in the larger societal context. The current study provides an acknowledgement of the intersectional nature of women's lives by using the concept of Crenshaw's (1990) Intersectionality theory in the conceptual framework. Intersectionality acknowledged how Black women's various social positions like race, sexual orientation, and socioeconomic status influenced the way women are perceived, valued and the experiences they hold, in relation to, the dominant group including heterosexual White males.

Chapter Organization

Chapter 2 will provide an overview of the following areas: 1) Giscombe' (2010) Superwoman Schema (later to be termed Strong Black Woman Role), 2) the myth of the Strong Black Woman and controlling images, 3) Superstrong Black mother as a counterstereotype to controlling images, 4) and Black mothers' mental illness and the impact to daughters. The literature will explore what Black women believe about strength and how it functions in their lives. Chapter 2 further explores the social position of Black women in American society and how their subjugation beginning with slavery has influenced the proliferation of negative controlling images witnessed in media and other popular culture. The literature will explore how Black women ascribing to the SBW role are attributed to the Black family's survival. The exploration of racialized gender socialization and how these practices are embedded in Black cultural beliefs are discussed and the myth of the Strong Black Woman and how this influences the controlling image of the super strong Black mother. Additionally, the exploration of the challenges of parenting with maternal mental illness and how this influences the lives of

daughters and the unique responsibility Black mothers hold to prepare daughters to withstand gendered racism with strength and resiliency messaging will be discussed.

Chapter Two: Review of the Literature

This chapter provides a review of the literature on the Strong Black Woman role, functioning, and perceptions of strength. A presentation of the historical context which has produced gendered racial stereotyping and colors the historical and present experiences of Black women in American society will be discussed. Furthermore, an introduction of controlling images associated with gendered racial stereotyping and the various purveyors involved in its continuation across generations of Black women will be presented. This review will provide the link between controlling images and the adaption of SBW beliefs in women. A presentation of information linking Black women's adoption of SBW role and its impact on the survival of the Black family is identified. Using an intersectional lens to highlight the multiple oppressions experienced by Black women, the chapter will focus on contextual factors, including the intergenerational socialization practices and history of mistreatment, and its association with Black women adopting the SBW schema as a survival mechanism. The review will include information about the perceived benefits and liabilities associated with its adoption and the salience of spiritual values in women adopting SBW beliefs. The chapter critiques the myths related to SBW by presenting an in-depth definition, how these myths are present in popular culture as controlling images, and how they have perpetuated class stratification and the degradation of Black women in society. The origins of the counter-stereotype created by Black men, the Super Strong Black Mother and the perception women hold in the Black family and community will be presented. There will be a presentation of information on how mental health problems impact the lives of Black mothers and their children. Specifically, information concerning the prevalence of depression, risk factors, and help-seeking behaviors increase the

risk of depression in children, especially daughters. The chapter will conclude by examining the Black mother/daughter relationship and the socialization practices utilized to foster strength and resiliency associated with the SBW schema (Beauboeuf-Lafontant, 2009; Woods-Giscombé, 2010). The literature provides empirical and qualitative examples of the influence of mental health on parenting communication (Sherryl H. Goodman & Ian H. Gotlib, 1999; Susan et al., 2001; Velma et al., 2008), yet information is sparse concerning how maternal depression influences the socialization practices with Black daughters and SBW beliefs and behaviors. Lastly, the chapter identifies the gaps in the current literature involving adult perceptions concerning childhood socialization messages from depressed Black mothers.

America's Creation of Strong Black Women

Historical Context

Black women's unique socio-historical experiences contributes to the ways in which strength manifests in their daily lives (Davis et al., 2011; Davis & Jones, 2021). The legacy of enslavement shapes every facet of Black women's experiences across generations. In the chattel slavery system, these women experienced legalized physical and sexual objectification at the hands of capitalistic slave owners (Davis, 1981). Black women experienced sexual torture under this wretched system, while the normalization to be overworked to death and selling of family members for profit was their fate (Simms, 2001; Smithers, 2012).

The enactment of biased laws, policies, and procedures threatened the formation and maintenance of Black families. During enslavement, the passage of laws like *Partus Sequitur Ventrem* enacted in Virginia in 1662 established the classification of children born either free or enslaved by the mother's status (Morgan, 2018). Virginia courts assigned court fees as punishment to White slave owners guilty of miscegenation, sexual relations with a slave that

produced biracial children. Nevertheless, children from these acts of sexual violence did not receive the social benefits of the fathers' freedom by the law. Instead, these children were regarded as property, nothing more (Morgan, 2018; Smithers, 2012). As property, White slaveowners/fathers found legal support in selling their biological children for profit. Black women proved powerless in protecting themselves and their children under what society would classify today as legally sanctioned rape and human trafficking.

Under enslavement, Black women's social status as enslaved property was not designed to fit in the classification of *true womanhood* (Welter, 2012). True womanhood beliefs hold virtues of piety, purity, submissiveness, and domesticity which benefited the lives of middle- to upper-class White women (Welter, 2012). This version of womanhood was constructed from Victorian age beliefs by the dominant group, White males, and afforded women special social prominence and material security for their adherence (Welter, 2012). Juxtaposed to this version of White women's identity was the creation of controlling images designed to legitimize the lived experiences of White women under this system and justify the exploitation of Black women (Collins, 2002). When closely examined, Black women's lives were more likened to animals, including experiences of forced physical and reproductive labor, separation from offspring for profit, and being overworked until death.

Black women's gender identity during slavery was systematically constructed to induce and perpetuate beliefs regarding the legitimacy of Black women's servitude in slave-holding states (Simms, 2001). White slave owners used various communication mediums, like newspapers, popular literature, and religious doctrine, to push controlling images into society's psyche (Collins, 2002; Simms, 2001). Slave owners' efforts to reduce the humanity of Black women for exploitation were supported by the works of proslavery intellectuals' construction of

three controlling images, Mammy, Jezebel, and Mule. Doctrines in natural science, religion, popular literature, social science, politics and law, and philosophy were used in the maintenance of Black women's enslavement (Simms, 2001). Accounting for each discipline examined, with exceptions in politics and law, all domains upheld Black women as mummies and mules and is significant to the current research study's focus on strength beliefs. Simms (2001) described Mammy as,

Black women are obedient to whites in general. She is always on call, dull-headed, faithful to master and his family in particular, and happy in her subordination. She is asexual and will unselfishly willingly care for the white children ahead of her own and poses neither threat to the mistress or temptation to the master. Because Mammy is so skillful in the ways of white culture, her owners believe-paternalistically- that she is civilized through her interaction with them. Because of her interaction with whites, they believe her to be more socially acceptable than field hands with relatively little contact with Whites.

In addition,

the Mule image substantiated African female exploitation by slave masters, overseers, speculators, auctioneers, breeders, and all such men who profited from the enslavement of Black women. Whites characterized these women as insensible and subhuman beasts only valued for labor. This stereotyped justified White male superiority and validated African women's inferiority and exploitation as labor units.

In Hill-Collins' (2002) seminal work, *Black feminist thought*, the author asserted images like Mammy and Jezebel were in service for Whites to exploit Blacks and functioned to oppress

women's racial, gender, and sexual identities (2002). Addressed in these stereotypes are the ranges of favorable and unfavorable behavioral practices in Black women. With its inception in the slave era, Mammy and Matriarch controlling images structured Black motherhood beliefs and behaviors to both Black women and society at large (Collins, 2002). Mammy, with her ingrained maternal capabilities, gave unselfishly to meet the needs of her master and those in power. Fiercely loyal to her owners, she has neglected herself and her own family (Collins, 2002). This famous image of a robust, asexual, dark-skinned woman with large breasts depicted America's coveted version of Black womanhood. While Mammy posed no threat to White male domination as she happily accepted her subservient seat in American society (Patricia Hill, 1989). Her perceived asexual nature posed no threat to White women as she defied stereotypical beliefs concerning Black women's inherent unsatisfiable sexual appetite which resulted in the birth of illegitimate slave children (Brown Givens & Monahan, 2005). Furthermore, those in power linked Mammy's image to an acceptable expression of Black woman- and -motherhood, allowing this image to be the nexus from which all other controlling images are constructed.

Modern Context

Black women occupy a unique social position in American society (Crenshaw, 1990). Their double minority status includes being female and Black American increased their likelihood of experiencing racism and sexism simultaneously and is associated with women's psychological distress (Banks & Kohn-Wood, 2002; Crenshaw, 1990; Stevens-Watkins et al., 2014). Stressful life events involving instances of racism and sexism are linked to Black women reports of chronic stress and depression (Donovan, Huynh, et al., 2013). Societal marginalization, including oppression and privileges, significantly impacts the mental health of Black American women (Donovan, Galban, et al., 2013). Chronic stressors associated with

social structures and cultural beliefs concerning strength influenced Black women's denial or self-silencing of depressive symptoms (Donovan, Galban, et al., 2013; Donovan & West, 2015). Perceived lower social positioning was also identified as a barrier for Black women to receive mental health services from anyone outside their social network for depression (Donovan, Galban, et al., 2013).

Superwoman Schema (Strong Black Woman Syndrome)

To be Black and female in American society includes a historical lineage of sexual objectification, marginalization, discrimination, mistreatment, and fractured familial bonds. Subsequently, strong women are socialized from a young age with strategies to ensure personal, family, and community survival (Collins, 2002; Davis, 1981; Neblett et al., 2013; Patricia Hill, 1989; Woods-Giscombé, 2010). Black women have identified the concept of strength as a consistent factor necessary to traverse life's trials (Beauboeuf-Lafontant, 2009; Green, 2019; Rosalyn Denise, 2017). When faced with insurmountable stressors, Black women of diverse backgrounds continued to present as fundamental for their children, parents, and community.

Superwoman Schema (later to be termed Strong Black Woman Syndrome) is a conceptual framework created by Woods-Giscombe' (2010) for a greater understanding of the Superwoman/Strong Black Woman role in the lives of Black women. While battling internal struggles of inadequacy and worthlessness, many Black women refused assistance to ease burdens (Beauboeuf-Lafontant, 2016; Woods-Giscombé, 2010). This framework centered around Black women's beliefs, benefits, and liabilities associated with women adopting such roles. As a result, the author identified characteristics of a Superwoman/ SBW, contributing factors associated with the role's creation, and the perceived benefits and liabilities.

Woods-Giscombe'(2010) identified characteristics of a Superwoman/ SBW as follows: Black women felt (a) compelled to present strength, while (b) sequestering emotions out of the fear of being misunderstood and mislabeled. Black women avoided (c) presenting or being perceived as weak out of a fear of being taken advantage of in a state of vulnerability. Additionally, women (d) felt the constant internal and external pressure to neglect their own needs while providing for others, (e) despite having limited resources and assistance. Additionally, Woods-Giscombé (2010) identified (a) the historical legacy of slavery and gender-based racism, (b) gendered socialization practices from mothers and other female caregivers, (c) past experiences of ill-treatment, (4) and holding solid spiritual values as contributing factors to the Superwoman schema. The findings from this study supported Black women endorsement of Superwoman schema positively assisted their personal, family, and communities' survival as they played a pivotal role in maintaining their needs. The internalization of the Superwoman schema allows these women to prevail despite external stressors. However, Black women are not oblivious to the liabilities associated with the role. Women identified the toll it takes on their relationships, their health, and postponement of self-care (Beauboeuf-Lafontant, 2003; Black & Woods-Giscombé, 2012; Harrington et al., 2010; Sheffield-Abdullah & Woods-Giscombe, 2021) and the immense mental stress involved (Williams, 2008; Woods-Giscombé, 2010).

Sisterella Complex

Black women's unique relationship with strength is identified with unique depression symptomology identified as the Sisterella Complex by researchers Jones and Shorter-Gooden (2009). In their examination, Black women experienced emotional suppression by turning their aggression and frustrations inward. Women adopting the Sisterella complex (Jones & Shorter-Gooden, 2009), like Superwoman Schema (Woods-Giscombé, 2010), supported presenting

strength and placing others' needs before their own. Notably, women neglected mental health needs until a breakdown and exhibited low help-seeking behaviors. While Superwoman schema focused on the cognitive framework relating strength in the lives of Black women, Sisterella complex provided evidence of the mental health breakdown and its subsequent behaviors when adopting some SBW constructs. Examples of similar constructs between the two concepts included self-sacrificing behaviors and assuming family and community responsibilities. In both studies, Black women did not believe they had a right to complain about the heaviness of their duties, as it was their burden alone to carry (Jones & Shorter-Gooden, 2009; Woods-Giscombé, 2010). Many scholars noted that Black women identified strength as holding multiple functions to assist in navigating the perils associated with Black womanhood (Beauboeuf-Lafontant, 2016; Green, 2019; Ward et al., 2014; Watson-Singleton, 2017; Woods-Giscombe et al., 2016).

SBW beliefs as a protective factor

The literature provided extensive evidence for how holding SBW beliefs presented negatively in the Black women's lives (Beauboeuf-Lafontant, 2007, 2009; Campbell, 2017; Nelson et al., 2016). However, there is growing evidence asserting SBW beliefs may have protective factors associated with the well-being of Black women. By utilizing resiliency and determination factors associated with SBW, some black women have found SBW beliefs synonymous with success in womanhood (Jones et al., 2021). Other women identified strength in spiritual practices to overcome gender-based racism and other forms of discrimination (Beagan et al., 2012). The internalization of SBW beliefs enhanced the aging process as older, Black women found strength in their multiple roles and as the Matriarchs in their families (Baker et al., 2015). Specifically, these women found dignity in using their knowledge and life skills to guide

their families and community and presented how SBW beliefs are perceived differently across multiple generations and passed down intergenerationally.

A notable aspect of SBW beliefs regarded Black women's strength in spirituality as a protective factor (Beagan et al., 2012; Cheadle et al., 2015). To be a Strong Black Woman required anchoring to something higher than herself. This divine relationship is aimed to guide and sustain her through the turbulence she experienced in everyday life as a Black woman. Beagan et al (2012) discovered strength in spiritual practices allowed women to overcome gender-based racism and other forms of discrimination. Black women's double oppression as female and Black in American society contributed to their victimization involving heinous crimes and second-class treatment. Many point their survival to a solid spiritual faith, as racially biased legal systems failed to provide justice or acknowledge their mistreatment (Lee et al., 2002).

Multiple Functions

SBW beliefs have duplicitous functions in the lives of Black women. As a cultural symbol, Strong Black women are celebrated and exalted in the Black family and community as barrier breakers and trailblazers (Giddings, 2006). The lives of women like Fannie Lou Hamer (Civil rights activist) and Nina Simone (pianist and Civil Rights musician) are dignified for their ability to withstand turbulent obstructions and make new opportunities for the greater Black community. Strong Black women are sanctified in Black culture (Hudson-Weems, 2019) and used as an example for the next generation of women to emulate (Denise Davis-Maye & Tonya E. Perry, 2007). SBW beliefs provided women with the mental blueprint guiding their behaviors (Beauboeuf-Lafontant, 2007). Strong Black women's stoic emotional displays and commitment to others can be likened to those of a military soldier, as they continued to fight for existence in a

country that has benefited from their physical and reproductive labor without compensatory reciprocity (Davis & Jones, 2021). Those in power continued to increase myths associated with Black women's strength for their benefit. As a controlling image, Black women are viewed as superhuman (Owens, 2017; Roberts, 1999; Wallace, 1999) which supported their disenfranchisement in various aspects of their lives. As an example, the proliferation of stereotypical images marginalized women in the workplace and posed barriers for career advancement (Reynolds-Dobbs et al., 2008) and mentorship opportunities (Hall et al., 2012). Black women in the workplace were able to identify the expectation of employers for them to assume additional role responsibilities without requesting proper compensation (Ivy, 1999). As a result, women adhered to these requests due to the greater consequence of unemployment and the inability to provide for her family.

SBW and the Black Family

Black women are the cornerstone of the Black family and community and hold the primary financial responsibility of most households. According to the Annie E. Casey Foundation's National KIDS COUNT Data Center, 64% of Black children lived in single-mother-headed families (2020a). Black men continue to be recipients of disparities in our criminal justice system, leaving many Black women with sole responsibilities of providing. Understanding the power of strength, she has taken on multiple roles and responsibilities for the collective forward progression of her people, including kin and fictive kin (Baker et al., 2015). The Black family has survived despite historic maltreatment and marginalization (Davis, 1981).

SBW beliefs operated in multiple roles in the lives of Black mothers. One example, Black women adopted SBW schema when seeking and sustaining employment. Black women required strength to withstand the economic disenfranchisement and racism they experienced in the

workplace (Greene, 2011; Hall et al., 2012; Ivy, 1999; Neblett et al., 2016). White employers stereotyped single, Black mothers' poor lifestyle choices as the source of poverty and used this information to provide minimal financial compensation in a working-class environment (Ivy, 1999). Black women acknowledged being recipients of racism and discrimination in the workforce while also being isolated, which required external and internal displays of strength as a coping mechanism (Hall et al., 2012; Jones & Shorter-Gooden, 2009). As a result of displaying strength and fortitude, one perceived reward is a great sense of pride in providing for their loved ones' needs, and the reverence women received in their families and communities for their valiant efforts (Woods-Giscombé, 2010). On the contrary, Black women acknowledged displays of strength as a liability to their mental health; the psychological toil of suppressing emotions when challenged with racism and discrimination led to emotional breakdowns (Donovan, Galban, et al., 2013; Hall et al., 2012; Hudson Banks et al., 2006). The challenges faced have their roots in a unique, socio-cultural legacy with Black women as involuntary participants in a society entwined with systematic barriers for minorities, especially Black women and men.

Absence of Black men

Several factors contributed to the lack of Black men in the lives of Black women. Black men hold the highest mortality rate than any other sex group in the United States ("Mortality in the United States, 2017," 2018). Some contributing factors entailed in this alarming statistic included access to quality healthcare, living conditions, lifestyle choices, and gun violence. For example, Black men's contraction of HIV significantly contributed to low life expectancy among the group (Bond & Herman, 2016). Without access to quality healthcare for preventative treatments, Black men are falling victim to manageable lifestyle diseases. In addition, more destitute Black men who resided in high crime areas are at increased risk of death by gun

violence (Hennekens et al., 2013), resulting in Black women requiring unfathomable strength to bury the men in their lives from preventable and often senseless deaths. Systematic structures in American society also contributed to Black men's absence in sweeping droves.

The U.S. criminal justice system disproportionately detains Black men in custody and under supervision. Many men, often young Black men, are victims of preventative police measures utilizing racial profiling (Miller & Brunson, 2006). A result of these interactions increases the likelihood of men's interactions with law enforcement and arrest. A recent study found that Black men are more likely to be placed in a for-profit prison (Montes et al., 2020). The problem with for-profit prison-industrial systems is that they are driven by profits and shareholders, like any other business in a capitalistic market regardless of its expressed intent. Examining the prevalence of unfair sentencing experienced by Black men leads to speculation about whether Black men's arrests are only beneficial for shareholders' profits and not society. Meanwhile, Black women witnessed the systemic hijacking of sons, fathers, husbands, uncles, and community men. Black women are left providing for themselves, their families, and their communities while mourning the loss of their men. By linking strength as an ingrained personality trait, outsiders continued to justify Black women's identity as a means for less empathy as they manage the complex marginalization of their families.

Marginalized Black families and government legislation

Unconscious racism is embedded in our civic institutions, and the foster care system is vulnerable as one such institution controlled and influenced by those in power. Those in power, in turn, may unwittingly discriminate against people of color, which history demonstrates.

-Tanya A. Cooper (2013)

Laws like *Partus Sequitur Ventrem* laid the foundation for the creation of Black family legislation undergirded by White supremacist beliefs. Some 300 years after its enactment, Black families found their unification challenged by another federal legislation designed to assist vulnerable families in crises. America's foster system has a checkered past with Black families.

Child Welfare Policies Historical Impact on Black Families

Racial disproportionality and racial exclusion are historical and endemic in the United States. Starting with a history of exclusion of Black children, the child welfare system was developed at the end of the 19th century solely to serve poor, White, immigrant families (Hill, 2004). While poor White children may have benefitted from a nascent child welfare system, Black youth were excluded and continued to endure blatant racism (Ward, 2012). This history of anti-Black racism in the United States serves as the backdrop of persistent discrimination present across human services systems and is particularly salient in child welfare.

The quality of life for Black families diminished below what they were currently living with the implementation of each level of policy enactment. The retaliatory policies and procedures experienced were obstructive in the reunification process with children (Schiele, 1998). Many low-income Black parents' parental rights were terminated due to the inability to provide basic needs for children such as stable housing or food (Carten, Siskind, & Greene, 2016, pp. 143). Instead of legislation addressing the social ills responsible for income disparities, including the availability of jobs offering living wages, Black family units were broken.

Black mothers experienced retaliatory policies and procedures and later proven to be obstructive in the reunification process with children (Schiele, 1998). As participants in the foster care system, many vulnerable Black mothers and families are penalized for an entire

system's inefficiency. Black mothers found themselves under surveillance in a fractured system, and many experienced the psychological backlash of shattered maternal bonds.

SBW and the Black Family's Survival

More than half of Black American children are raised in households without biological fathers (COUNT, 2020b). As a result, these mothers shoulder multiple roles while providing for the family unit. The weight of these responsibilities required mothers to use strength and internal fortitude to succeed, both identified components of SBW beliefs. While Black mother's resiliency is connected to strong spiritual bonds and extended family support (Mendenhall et al., 2013), it is the adaption of SBW beliefs and behaviors guiding mothers in their parenting practices.

When negotiating parenting practices, Black mothers from various backgrounds used SBW beliefs and behaviors to determine what it means to be a good mother. Elliott et al. (2015) found low-income, single Black women equated good mother practices with sacrificing for their children and modeling independence. While this study focused on intensive mothering ideology (Hays, 1996), good mothering centered on self-sacrificing and devoting all physical, material, and emotional resources to child-rearing practices. SBW beliefs held the same ideas of self-sacrifice and independence. It should also be noted that intense mothering ideology has been observed among more affluent White women with resources accommodating such extreme parenting practices and is associated with negative mental health implications (Rizzo et al., 2013). Despite the outcome, low-income single mothers without these resources have done the same. The belief that a mother made sacrifices involving all of her time, money, and emotional support placed these women in jeopardy of experiencing mental and physical health challenges (Rizzo et al., 2013). These same behaviors are observed in the Mammy stereotype and SBW

beliefs and behaviors involving placing others' needs before self and the natural maternal characteristics of Black women. These factors contributed to a greater understanding of how and why low-income single mothers without the resources believe straining themselves equates to being a good mother.

Middle-class Black mothers also negotiated SBW beliefs and raising families. Dow (2015) found that these mothers either resist, reject, or invested in SBW beliefs when navigating work and motherhood. Various mothers identified SBW as their cause of feeling under-qualified, overwhelmed, and requiring assistance with parenting. Other mothers in the study identified SBW beliefs as protective factors for navigating White spaces that left them and their children feeling alienated. Lastly, one participant, a stay-at-home mother, invested in SBW by adhering to the belief that it was the mother's responsibility and sacrificed to take on most household and child-rearing needs. This study provided evidence that SBW beliefs are prevalent in the lives of Black women and families across socioeconomic backgrounds. Both studies provided proof of the dichotomy. Black mothers experienced SBW as a stressor and protective factor to ensure the survival of self and their family.

The Myth of the Strong Black Woman

The historical legacy of controlling images has current implications in the lives of Black women today and the more aware of the stigma, the less likely an individual would avoid opportunities to refute negative stereotypes (Pinel, 1999). This is one example of how historical images of Black women continue to be preserved in society today. College students who consumed music videos and movies with themes of controlling images aligned more with traditional gender stereotypes concerning Black women (Jerald et al., 2017). When presented videos using Jezebel and Mammy connotations, the results indicated that Black women

responded with stereotypical descriptions like "sexual" and "maternal" (Brown Givens & Monahan, 2005). Findings from the above-mentioned studies contextualized the internalization process involved with mediated portrayals of stereotypes and how this is passed intergenerationally amongst black women.

Strength as a Virtue

The once negative imagery of strength used to foster control and exploitation is now internalized by some Black women as a personal virtue of strength. Examining the critical characteristics of the Mammy and Mule stereotype, behaviors exhibited in the SBW role are likened to both controlling images. The Mammy and Mule stereotypes are essential to the current research study as they focus on the overworking and lack of self-care attributes of the SBW. Mammy's image of community mothering, while acquiescing to the needs of those in power, is voiced in the literature as a source of psychological strain associated with the adoption of SBW beliefs (Brown Givens & Monahan, 2005; West, 1995). The Mule's image invokes the overworking of Black women past the point of mental and physical deterioration. Excessive work continues to be a stressor for Black women in the workplace and home (Jones & Shorter-Gooden, 2009).

The Super Strong Black Mother

The creation of the Superstrong Black Mother image acted as a counter stereotype for the Matriarch controlling image. Mentioned in the above section, matriarchal Black women inhabited harsher and less feminine characteristics drive the husbands and fathers of their children out of their lives (Collins, 2002). As a result, hard-working mothers, void of help from fathers, cannot correctly supervise, which results in children's delinquency in society. Matriarchy challenged American society's patriarchal family structure and was viewed as deviant by the

dominant group. Moynihan's (1965) report *The Negro Family- The Case for National Action* identified the matriarchal family structure as a "tangle of pathology," resulting in the poverty and destruction of the Black family, especially children. In his report, Moynihan acknowledges other systematic structures like racism/discrimination and historical unemployment of Black men as factors contributing to female-headed households. Ultimately, Black mothers were found responsible for the failure of their children. He quotes, "Negro children without fathers flounder and fail" (Moynihan, 1965). Over the years, Moynihan's report would be used to blame Black mothers improperly for attempting to provide stability for families in an impossible situation riddled with systematic barriers out of her control.

As a result, Black men exchanged White males' negative Mammy image with the seemingly positive Superstrong Black Mother image. The purpose was to foster respect for the women who were "richly endowed with devotion, self-sacrifice, and unconditional love" (Collins, 2002). In the Black community, mothers are deified for withstanding challenges while providing for their children. However, the cost to retain this sacred space required unending personal sacrifice, especially to their sons. An adage said among Black women states, "Black mothers love their sons and raise their daughters." This quote speaks to the difference in socialization practices and viewpoints sons and daughters hold for their mothers.

This literature provided evidence of gender-specific socialization messages between mothers and daughters concerning the challenges associated with Black womanhood. In her chapter, *The Meaning of Motherhood in Black Culture and Black Mother-Daughter Relationship*, Hill-Collins (1991) provided context to the messages daughters received.

Collins states,

Black daughters are raised to expect to work, to strive for an education so they can support themselves, and to anticipate carrying heavy responsibilities in their families and communities because these skills are essential for their own survival as well as the survival of those whom they will eventually be responsible. And yet mothers know if daughters fit too well into the limited opportunities offered Black women, they will become willing participants in their subordination. (p.53)

Black daughters closely witnessed their mothers' ability to provide for the family and community and the psychological breakdown associated with carrying such a heavy load from an early age.

Black Mothers and Mental Health

Americans are experiencing depressive symptoms at alarming rates. Over 17 million Americans experienced at least one depressive episode annually, with females having more occurrences than men (National Institute of Mental Health, 2019). Identified health disparities for minority populations demonstrated that Black Americans are 20% more likely to experience psychological distress than any other ethnic group (Office of Minority Health, 2018). Compared to different ethnic groups, Black American's historical and present experiences with racism sets them apart. The current literature suggested Black women are at an increased risk of developing depressive symptoms based on gendered racism, poverty, and cultural-specific coping strategies.

Racism and gendered racism experiences

Interactions with racism in various forms significantly impacted the lives of those experiencing it. Multiple expressions of racism had diverse influences on women's mental wellness. Donovan et al. (2013) examined the impact of perceived macro- and micro-aggressions

on depressive and anxiety symptoms in Black women. Macro-aggression was described as overt and purposeful acts, while micro-aggressions were subtle, unconscious acts of discrimination. While both forms of aggression (macro and micro) contributed to depressive and anxiety symptoms and correctly predicted outcomes, there was a more substantial relationship identified with perceived macro-aggressions and depressive symptoms. Societal beliefs and behaviors influenced macro-aggressions. These experiences incited feelings of powerlessness and lack of control, both of which are associated with a clinical depression diagnosis. While there are identified correlations between micro-aggressions and depressive and anxiety symptoms, women believed they had greater control over subtle, unconscious expressions of racism; therefore, micro-aggressions resulted in fewer damaging effects on women's mental health (Donovan, Huynh, et al., 2013).

Experiences with both macro-and micro-aggressive forms of racism are injurious to Black women's psychological functioning. Nevertheless, additional information is needed to address the internal process of experiencing racism and will be addressed in the current study. Carr et al. (2014) examined the link between multiple oppressions and depression among African American women and sought to understand how sexual objectification, racism, and gendered racism impacted the lives of low-income women. The findings presented all three forms of oppression induced depressive symptoms: however, exposure to racist events positively foretold depressive symptoms. Findings from this study provided context to the internalized coping mechanisms, including taking ownership of perpetrators' behaviors, are directly linked to depressive symptoms. Additionally, these findings provided context to the damaging effects of internalization of racist exchanges. Consequently, women's inability to assert themselves led to feelings of powerlessness, helplessness, and blaming oneself for victimization, and increased the

risk for a depression diagnosis (Carr et al., 2014). Consequently, these feelings are associated with identified symptoms of depression.

Poverty

The literature identifies poverty as a major risk factor for depression. African Americans have disproportionately experienced low socioeconomic status. Over 27% of African Americans live below the poverty line, in contrast, to 10.8% of White Americans (American Psychiatry Association, 2017). Further explanation is needed to identify the context in which poverty impacted the psychological functioning of Black women. Siefert et al. (2007) examined depressive symptom moderators and risks in 824 low-income African American women. One-third of participants reported depressive symptom levels, while 18% reported clinical depression levels. Researchers identified household food insecurity and dilapidated housing conditions as poverty risk factors. Not providing stable housing and food, especially for a family, can be highly stressful for women. Study participants perceived they were the recipients of unfair treatment fueled by discrimination (Siefert et al., 2007). Opportunities for stable housing and employment are systematic issues women have little control over.

It is important to note, the above study provided specific incidents associated with low-socioeconomic status, not the socioeconomic status itself as causing depression. However, socioeconomic status is not a protective factor against depression (Jackson et al., 2001). Jackson et al. (2001) examined the socioeconomic life-course of well-educated, Black women during childhood and adulthood for relationships between contextualized stress and depression. Criteria for contextualized stress included exposure to racial and gendered environmental stressors, while clinical depressive symptoms were assessed over two weeks. Subsequently, experiences with contextualized stress predicted depressive symptoms despite child- and adulthood socioeconomic

status. The current literature provided evidence that despite socioeconomic status, women's exposure to racism exacerbated their susceptibility to experiencing psychological distress.

Environmental stressors

Adverse home environments had demonstrative short- and long-term health and mental health implications for women. Internalized strengths are required as approximately one-third of Black women have experienced a sexual or physical violation in their lifetime (Justice, 2013). When compared to White women and other women of color, Black women are 35% and 2.5 times more likely to experience intimate partner violence (Justice, 2013). Black women are also more likely to die from domestic violence (Simmons, 2020). One study linked intimate partner violence to the onset of mental and physical disorders like mood disorders, substance- and alcohol abuse, and suicide (Lacey et al., 2015). Like the Angry Black women trope, stereotypes marginalize Black women as crime victims without equitable justice in a court of law (Simmons, 2020).

Outside of the home, Black women experience neighborhood crime as a stressor. Low-income Blacks found themselves relegated to low-cost yet high-crime communities. These living conditions presented short- and long-term implications to the health and well-being of women. Simning et al. (2012) examined the consequences of environmental stressors and mental illness and found that Black Americans who perceived their neighborhoods as dangerous were at increased risk of developing chronic and acute psychiatric disorders. These findings provided a correlation between Black Americans' home life and the implications for mental health. Ohm (2019) showed that while Black women experienced increased stressors, these same women concurrently possessed a high resilience when living in hostile environments.

Cultural-Specific Coping Strategies

Black women used cultural-specific coping strategies to manage stressors associated with racism. These coping strategies are considered culturally specific due to their origins in being a direct response to the African American experience. Throughout the literature, researchers provided examples of cultural-specific coping strategies (Atkins, 2016; Conner et al., 2010; Hall et al., 2019; Hall et al., 2012; Ward & Heidrich, 2009). Frequently mentioned coping strategies included: the reliance on strength and resiliency and informal social ties for mental health treatment.

While Black Americans have adapted ‘strength’ and ‘resiliency’ as cultural protective factors for mental health, these strategies also posed potential risks (Campbell, 2017). Beliefs of strength and resiliency critically impacted depressive symptoms acknowledgment and help-seeking from mental health professionals after experiences with racism with a preference for using informal social ties, defined as friends, family, faith leaders, and religion (Ward, Clark, & Heidrich, 2009). Furthermore, Black women’s beliefs regarding seeking mental healthcare included distrust in the cultural competence of professionals’ abilities after previous or vicarious experiences seeking mental health services (Nicolaidis et al., 2010; Rusch et al., 2008; Ward et al., 2009). Adoption of such beliefs increased the risk of depressive symptoms. By endorsing these beliefs, women relied on individuals or religious systems for mental health services which possessed little or incorrect knowledge for diagnosing and treating clinical depression (Conner et al., 2010; Ward & Heidrich, 2009; Woods-Giscombe et al., 2016).

Campbell (2017) examined the socio-cultural and historical context of Black Americans' experiences with managing depression and seeking help. Black Americans internalized beliefs linking depression diagnoses and treatment were for White Americans and believed Black people

did not experience depression. The denial of depressive symptomology is connected to avoidance activities (Conner et al., 2010). The cultural belief that Black people did not experience depression is linked to Black women's display of depressive symptomology presented differently with clinical diagnosis of depression (Jones & Shorter-Gooden, 2009). Green (2019) found that African American women shared the expectation that life contains hardships and mental strain. Women referenced the experiences of their ancestors as the standard for strength and resiliency. By adopting strength and resiliency as a coping mechanism, women denied experiencing psychological distress and increased the risk of exacerbating depression symptoms (Green, 2019). This expectation of life's hardships and mental strain presented risky cultural beliefs as coping strategies while endorsing SBW beliefs during socialization with daughters.

Depression risks and children

Children born to parents with a history of Major Depressive Disorder (MDD) are roughly three times more likely to develop depression (Downey & Coyne, 1990; ENSMINGER et al., 2003; Sullivan et al., 2000; Williamson et al., 2004). This risk is elevated when a grandparent has also experienced MDD (Weissman et al., 2005). Mothers are two times more likely than fathers to transmit psychopathology and maternal depressive symptoms significantly influence daughters' depression onset during adolescence (Mason et al., 2017). The ages of the mothers at the time of depression onset influences the onset timing and severity of depression expression in children across their lifetime (Murray et al., 2011; Petersen et al., 2003). Wickramaratne & Weissman (1998) found that mothers who experienced depression before 30 significantly increased the risk of depression onset during the child- and adulthood years. Additionally, researchers identified that children were 13 times more likely to experience

depression before puberty and seven times more likely during adulthood. Significant to the current study's population, Wickramaratne and Weissman (1998) identified high instances of female children experiencing adolescent depression compared to male children. These findings support daughters' additional vulnerability to maternal depression.

Children of depressed parents experience emotional and behavioral challenges across the lifespan (Rhonda C. Boyd et al., 2011; Conners-Burrow et al., 2016; Petersen et al., 2003; Sanger et al., 2015). As a result, children of different ages utilized different coping skills that influenced how stressors are managed. Depressed children of depressed parents reported more severe depressive symptoms and more recent stressors than depressed individuals without depressed parents (Timko et al., 2009). In turn, depressed children of depressed parents reported using more effective coping strategies like seeking guidance and support from a mental health provider (Timko et al., 2009).

Children of depressed parents processed stressors differently than adults (Conners-Burrow et al., 2016). In the home environment, children exposed to the negative emotional outbursts of depressed parents are associated with poor school performance, problems maintaining attention, and hostile behaviors associated with delinquency in children (Alpert et al., 2003). Maturity may contribute to the way adult children of depressed parents coped compared to children. Adults are more cognizant of the more significant consequences internalizing and externalizing behaviors had in their lives, leading to help-seeking behaviors. A gap in the literature does not account for an ethnic breakdown of help-seeking behaviors of adult children of depressed parents. For the current study, SBW beliefs of self-reliance and fear of vulnerability would inhibit daughters of depressed Black mothers from utilizing positive coping strategies like seeking mental health services observed in the literature (Timko et al., 2009).

Daughters of Depressed Black Mothers

Black daughters are exposed to various genetic and environmental factors that increased their risk of depression onset in adulthood (Chapman et al., 2004). Goodman and Gotlib (1999) identified several factors associated with the risk of psychopathology in children of depressed mothers, including "(a) heritability of depression, (b) innate dysfunctional neuroregulatory mechanisms, (c) exposure to mothers' negative cognitions, and (d) the stressful context of the children's lives will increase the risk children will have abnormal development and psychopathology". Significant to the current research study, daughters' exposure to stressful environments involving gendered racism and negative cognitions like SBW beliefs increases their likelihood of developing depression. When depressed Black mothers endorsed SBW beliefs, like presenting strength and self-reliance, these beliefs possibly hindered mental health treatment and exposed daughters to untreated maternal depression in their home environment. Exposure to maternal mental illness is considered an adverse childhood experience (ACE) and has long-term implications across the daughters' lifetime (Chapman et al., 2004). As a result of experiencing maternal depression and other environmental stressors, Black daughters have a greater risk of experiencing anxiety, depression, and internalizing behaviors (Rhonda C. Boyd et al., 2011).

Children of depressed mothers are genetically predisposed to depressive traits, however other factors contributed to mental health onset (Connors-Burrow et al., 2016). Much like Goodman and Godlib's (1999) identification of stressful environments as a mode of transmission, genetically predisposed children are at increased risk of depression onset in early adolescence due to environmental stressors experienced before the age of 5 (Hammen et al., 2012). In sum, Black daughters' early exposure to environmental stressors like gendered racism,

high crime neighborhoods, and family violence exacerbated their genetic predisposition and increased the likelihood of experiencing a mental health disorder. Despite the barriers, maternal mental health shaped the experiences daughters have with their mothers in the preparation for their journey in Black womanhood.

The Black Mother-Daughter Relationship

The Black mother/daughter relationship laid the foundation for how daughters understand the nuances of womanhood (Collins, 1991). Black mothers are responsible for instilling culturally specific values and beliefs linked to the survival of historical and present-day marginalization in American society (Collins, 2002). Teaching daughters to be self-reliant, determined, and have a strong spiritual foundation, Black mothers in the literature are found to instill messages associated with SBW ideals (Joyce E. Everet alt et al., 2016; Oshin & Milan, 2019; Thomas & King, 2007; Walker, 2004). Black mothers place a high value on their daughters' displays of assertiveness and independence as leadership qualities. In contrast, mothers of different ethnic backgrounds viewed the same behaviors in their daughters as obstructive (Oshin & Milan, 2019). In these relationships, Black daughters found value, support, and assurance of worthiness after their self-worth was constantly challenged by displays of controlling images and gendered racism (Collins, 2002; Thomas & King, 2007).

Mothers and Othermothers raising Black daughters

Daughters are taught the importance of resiliency and how to cope with life stressors and disappointments and reported mothers actively encouraged a strong relationship with God to meet support and safety needs (Joyce E. Everet alt et al., 2016; Hall, 2015). A healthy mother/daughter relationship instilled hope and self-esteem in daughters and their ability to not just survive but thrive in challenging situations. Black mothers used open communication and

modeling that inspired and prepared daughters to the best of their abilities (Collins et al., 1991). Additionally, Black daughters received socialization with different kin or fictive kin women in female focused networks (Collins, 2002). When there is a communication breakdown, or a mother cannot care for her daughter, women in the family and community assumed child-rearing responsibilities described as Othermothering (Collins, 2002). Many Black women experienced and are influenced by many mother/daughter relationships over their lifetime (Collins et al., 1991; Gibson, 2005; McWright, 2002; Walker, 2004). These relationships afforded opportunities to model strength- behaviors from women other than their biological mother and hold great significance in daughters' development. In Alice Walker's (2004), *In Search of our Mothers' Gardens*, she described mothers and grandmothers' influence in the intergenerational passing of creativity in daughters. Walker (2004) acknowledges the resiliency of Black mothers and grandmothers and their ability to survive atrocities while creating beauty through non-deliberate acts of creative expressions. As a result, the more women modeled their foremothers, the more they learned of themselves and how to operate in the world.

Racialized gender socialization

Black families utilized specific parenting practices that embedded unique messages into children's psyches concerning their survival in American society. McHale et al. (2006) evidenced the importance of racial socialization practices to Black families and children. Findings suggested that when Black parents prepared children with messages concerning racism and discrimination this act buffered the psychological distress associated with experiencing marginalization. Sellers et al. (2016) identified that racial discrimination is buffered when adolescents held positive regard for their culture of origin. More information was needed to understand how these messages were transmitted in the mother/child relationship as Black

mothers are identified as the main caregiver of children. When examining such interactions, Frabutt et al. (2002) discovered mothers encouraged faith and high moral behavior when faced with racism and discrimination. Mothers needed a combination of warmth, open communication, and attentiveness to ensure the most optimal outcome in the racial socialization process with children. Furthermore, the current study did not account for disparities in which mothers socialized male and female children differently.

Frabutt et al. (2002) does not account for a differences in gender, yet other examples in the literature supported Black families preparing daughters specifically to manage gender-based racism. Hill (2001) provided greater context to the differences outlined by Frabutt et al. (2002) by adding Black daughters are socialized for multiple roles. These roles include traditional gender construction of wife and mother, but also included that of financial provider. The author (Hill, 2001) elaborated that the historic underemployment of Black men had caused Black families to place additional, if not all, financial survivorship on female children and are now embedded in family cultural values. When viewing these roles from a traditional feminist perspective, being financially independent allowed Black daughters more autonomy than conventional male/female sex roles. However, Black daughters are reared in a cultural system that does not support healthy coping strategies for life's challenges and encouraged placing others' needs before her own (Collins, 2002). As a result, Black women have forged an identity embodying strength and resiliency that gave credence to their ability to overcome life's challenges. The problem with holding such beliefs is that it presents deleterious challenges to current and future Black women's mental and physical health.

Depression and the Mother/Daughter Relationship

In the literature, researchers identified the influence depressed mothers had on children's psychopathology across the lifespan (Rhonda C Boyd et al., 2011; Murray et al., 2011; Wickramaratne & Weissman, 1998). Unfortunately, there is a gap in research focusing on adult daughters' perceptions of maternal depression and this gap is widened by the inability to explain the variation experienced by different ethnic groups. However, a growing body of literature focused on adult children's perceptions concerning living with a parent with mental illness (Mordoch & Hall, 2002). A meta-synthesis of qualitative literature reviews (Källquist & Salzman-Erikson, 2019) assessing the childhood experiences and adult outcomes identified four themes: "(1) growing up in a dysfunctional home environment; (2) the child's feelings and thoughts; (3) the need of support; (4) the lingering effects on adult life". Below, each section further explored the identified themes in the literature to better understand adult children's perspectives of childhood home life with a mentally ill parent.

Dysfunctional household. In households with mentally ill parents, children are at increased risk of experiencing poor parenting skills and displays of emotional dysregulation (Alessandra Turini & Sonia Regina, 2020; Alpert et al., 2003). More information is needed to understand how children perceive their daily lives in these households. Many adult children reported being parentified, where the child assumed parenting responsibilities for the mentally ill parents (Foster, 2010; Petrowski & Stein, 2016). Due to children experiencing a variation in emotional warmth, adult children highlighted a sense of fear and mistrust with parents in childhood (Foster, 2010; Murphy et al., 2015). Furthermore, adult children recalled feelings of closeness and loving affections, while other times involved experiences of emotionally turbulent behaviors and distance (Petrowski & Stein, 2016). When assessing the other parent's support in the household,

fathers appeared to cope negatively with the mother's mental health diagnosis but formed closer relationships with the child to offset the mother's instability (Petrowski & Stein, 2016). The stigma of mental illness shaped the way it was discussed and managed in the household. These types of experiences shaped the lens through which adult children viewed their parents and how they felt about the disease.

Child's thoughts and feelings. In the literature, adult children expressed various thoughts and emotions, both positive and negative, concerning living with parental mental illness (Mordoch & Hall, 2008). Adult children expressed often feeling overwhelmed yet emotionally responsible for their parents (Foster, 2010). However, the way adult children perceived their relationship as positive or problematic shaped how they viewed this responsibility (Petrowski & Stein, 2016). While meeting the emotional needs of parents, some adult children questioned their own emotions and felt they lacked a sense of self in these relationships (Gillian et al., 2018; Mordoch & Hall, 2008). Foster (2010) found that adult children struggled with feeling unstable in their relationships and struggled to connect with siblings, friends, and parents due to parents' mental illness. This same study identified adult children believed their childhoods were cut short by managing their parents, which made them unhealthily focused on controlling their external environment. While some adult children recalled a sense of pride for being recognized by other adults as emotionally mature for managing their parents' mental illness, others desired support for managing complex responsibilities (Mordoch & Hall, 2008).

The need for support. Most adult children in the literature acknowledged the lack of external support when living with a parent with mental illness (Grové et al., 2016; Mordoch & Hall, 2002, 2008). Many experienced the silencing or avoiding of family members surrounding the parents' mental illness and left many children to deal with the emotional backlash alone (Mordoch &

Hall, 2008). However, some found support among peers and family members that helped emotionally process challenges (Grové et al., 2016). Seemingly, there were variations in responses to adult children finding support with medical professionals. Some identified frustration with the lack or inconsistency of information from a medical professional regarding parents' diagnosis (Foster, 2010), while others felt empowered and sought support from professionals (Grové et al., 2016) .

The lingering effects in adulthood. Adult children reported having problems in adulthood with their parents and when they become parents (Mordoch & Hall, 2008; Murphy et al., 2015; Murphy et al., 2018; Patrick et al., 2019). These problems were associated with the experiences with parental mental illness that continued to mold their lives. In the relationship with parents and because of parentification, adult children reported the need for boundaries to ensure they are mentally and emotionally healthy (Patrick et al., 2019). Due to their unmet emotional needs, many adult children reported a strain in maintaining closeness in relationships, especially with children (Källquist & Salzman-Erikson, 2019; Murphy et al., 2018). Some adult children acknowledged the active use of childhood coping strategies; however, some coping strategies were linked to deviant behaviors like alcoholism (Foster, 2010). At the same time, several adult children reported anxieties associated with them or their children developing mental illness, many struggled to identify with the emotional needs of their children. It is important to note; many adult children found compassion and understanding for their parents' mental illness after their personal experience with a mental health diagnosis (Petrowski & Stein, 2016). Overall, the literature provided evidence that the childhood experiences with parental mental illness influenced children throughout their lifetime and subsequent generations and how additional literature is needed to understand the differences of perceptions among different groups.

Most of the studies used in the literature review involved White participants, with little to no representation of ethnic/minority beliefs. Adult children displayed behaviors like parentification and meeting one's own emotional needs without support, which are easily identified in the SBW framework. More information is needed to understand how Black daughters ascribing to SBW beliefs and behaviors perceive mothers' depression in childhood and how this shapes their adult lives. Additionally, it is essential to understand the Black cultural adaption of strength and its impact on Black daughters' experiences with mental health and help-seeking behavior.

Chapter 3: Research Design and Methodology

The current body of research supports Black women's understanding of strength is formed by cultural idiosyncrasies attached to Black women's survival in American society and thus solidified as cultural beliefs. From the daughters' perspective, I used hermeneutic phenomenology to describe this culturally bound phenomenon. Semi-structured interviews were used to gather rich, thick descriptions of participants' accounts. As a result, participants lived experiences with a depressed mother provided great insight into how they made sense of being Strong Black women in adulthood.

This chapter provides an overview of the qualitative research design, critical-hermeneutic phenomenology. Additionally, the chapter includes detailed information pertaining to sample criteria and recruitment strategies. Information regarding participants, the protocol surrounding interviews, and data analysis is provided in detail. Most importantly, the chapter provides examples of validity measures, like reflexivity and the researcher's positionality statement, to ensure trustworthiness in the data analysis process.

The framework for this study grew out of my interest in creating more culturally-specific resources for daughters of depressed mothers, particularly Black American daughters bound by historical experiences of subjugation and marginalization influencing their lives today. Clinically acceptable depictions of depressive symptoms largely overlook Black women's social position in disease manifestation and management. As a result, Black women manage societal limitations, like low wages, by presenting a high functioning form of depression needed for survival. Strong Black Woman traits support their attempts to traverse obstacles, yet the psychological strain of adopting such beliefs has been identified with numerous deleterious impacts on their mental health. By examining the daughters' concepts of strength after witnessing the psychological challenges of

their mothers, provided additional insight into the modes and methods of intergenerational transmission of childhood gendered socialization messages.

Qualitative Methodology and the Applicability to the Study

The purpose of this study was to gain further insight into the lives of Black women mothered by women they perceived as depressed. A qualitative study design provides context to research findings as it focuses on “how people make sense of their world and the experiences they have in the world (p.14)” (Merriam & Tisdell, 2015). Qualitative research inquiry seeks to understand and describe individual experiences with a phenomenon (Merriam & Tisdell, 2015). Merriam and Tisdell (2015) note the difficulty in creating a universal definition for qualitative research due to diverse “philosophical, disciplinary, and historical influences” (p.14). However, authors have identified universal characteristics where the researchers serve as the primary instrument to make meaning or gather understanding through an inductive process that provides rich descriptions of the phenomenon.

The current study used a qualitative research design to gather a more in-depth understanding of Black daughters’ childhood experiences with maternal depression and their current adult beliefs concerning the SBW role. My use of Strong Black Woman beliefs as a conceptual framework identified the process women experience when internalizing stereotypical images of strength (Woods-Giscombé, 2010). Black Feminist Thought as an epistemology guided the research study by centering the marginalization of Black women’s gendered racial identity and how this contributes to racial- and sexualized socialization messages in the Black mother/daughter relationship (Collins, 2002). The use of qualitative methods provided greater context to the participants’ experiences and how these are interpreted in their lives (Merriam & Tisdell, 2015). In the family science field, utilizing qualitative research methods in this study

centered the stories of Black families with historic misinterpretation in the social science fields (Few et al., 2003).

After an in-depth review of the literature related to SBW beliefs and Black women, in addition to assessing research pertaining to the experiences of adult children of mentally ill parents, several identified studies utilized qualitative methods to interpret participant's beliefs and life experiences (Patrick et al., 2019; Petrowski & Stein, 2016; Sullivan et al., 2000; West et al., 2016; Woods-Giscombé, 2010). Other identified studies employed qualitative methods to capture the essence of living with a mentally ill parent (Gillian et al., 2018; Grové et al., 2016). For the current study, utilizing the voices of daughters of depressed Black mothers provided nuance to lived experiences devoid in statistical interpretations (Few et al., 2003).

Research Design: Hermeneutic Phenomenology

The current study was grounded in a Hermeneutic phenomenological methodology created by early 20th century German philosopher, Martin Heidegger. Heidegger was a student and protégé of German Philosopher and father of phenomenology, Edmund Husserl (Creswell & Poth, 2016). Phenomenology has its origins in philosophy, however has been adopted by the human sciences to conduct qualitative research studies (Creswell & Poth, 2016). It is imperative the philosophical origins of Heidegger's version of phenomenology was compared in Husserl's original concept to give greater reasoning for the current study's adaption of Heidegger's as the best version to support its theoretical framework and goals.

While both philosophers sought to understand the lived experiences of humans, Heidegger and Husserl held very different ontological, epistemological, and methodological positions (Guba & Lincoln, 1994). Guba and Lincoln (1994) described various paradigms which researchers utilized to understand the nature of reality (ontology), their stance to the object of

inquiry (epistemology), and the process they will take to discover this information (methodology) as extremely vital in qualitative inquiry and critique. Husserl's phenomenology holds a positivistic stance in its quest to understand the human lived experience, while Heidegger holds more of an interpretive position (Koch, 1995). Husserl was influenced by Descartes', a French philosopher and mathematician, idea of "Cartesian duality" which separates the mind from the body (Koch, 1995). Koch (1995) elaborates "Husserl's phenomenology was the culmination of Cartesian tradition and came to mean the study of phenomena as they "appear through the consciousness". The nucleus of Husserl's approach to phenomenology is that it centers a person's experience as their core of understanding and reality. Lavery (2003) emphasized that Husserl believed the lived experience is something people are not consciously aware of or pay little attention to and it is only through in-depth inquiry into the "structures of consciousness" or essences they are uncovered. In Husserlian phenomenology, (Creswell & Poth, 2016), researchers critically examine and describe the essences for a greater understanding of a person's reality. Koch (1995) identifies the use of description in phenomenology as having a positivistic ontology supported by Husserl's "empiricist" ideas that knowledge is only acquired through individual's consciousness of the world around them.

Husserlian phenomenology utilizes three main tenants of intentionality, essences, and bracketing in its inquiry process to uncover and describe the meaning placed on people's experiences (Creswell & Poth, 2016). Husserl's idea of intentionality supports the notion that people's minds are directly attracted towards objects and this action is the foundation for an individual's awareness of reality (Koch, 1995). In practice, a researcher must seek the essences that represent an individual's awareness of their world. In the mind of these individuals, essences are manipulated through processes like in-depth interviewing and made explicit for the

researcher to describe. It is only through the process of bracketing, or temporarily setting aside any preconceived notions or beliefs concerning the phenomenon that a researcher could objectively describe the essences (Creswell & Poth, 2016). This is another example of the objective nature of Husserl's positivistic view of knowledge.

Heidegger's hermeneutic phenomenology shares the same quest to understand the essence of a person's lived experience as Husserl's version of phenomenology but otherwise has major differences in the way the process is conducted. While Husserl focused on understanding the phenomenon from the conscious awareness of the knower, Heidegger's hermeneutical position sought to interpret the meaning individuals placed on their experiences in the world or *Dasein* (Lavery, 2003). Heidegger's notion of "pre-understanding" implied an individual's consciousness concerning the world around them had already been preconstructed by historical experiences embedded in culture and organizations in society prior to their awareness (Koch, 1995). Lavery (2003) states "a person can not escape pre-understanding; it is understood as already being in the world". Heidegger's version of phenomenology moves the philosophy from a positivistic to interpretist paradigm. By shifting from Husserl's concept of seeking out an essence for a researcher to describe, Heidegger encouraged the interpretation of the meaning individuals place on their world from their perspective. As noted, the role of the researcher is very different in Heidegger's hermeneutic phenomenology.

Heidegger's concept of historicity or the influence an individual's background dictates in what they understand concerning being in the world is applied to both the subject of inquiry and the researcher (Creswell & Poth, 2016). Heidegger acknowledged pre-knowledge to be inescapable and should be included in the research process. This position contests Husserl's idea of suspending all prior knowledge or preconceived notions concerning the phenomenon

(Lavery, 2003). Instead, Heidegger's version urges researchers to explicitly state their positions in a reflexive statement and incorporate reflexivity in the data analysis process (Creswell & Poth, 2016). A reflexive statement is where a researcher explicitly states their experiences and beliefs concerning the phenomenon and how their positions in society may influence the interpretation of information (Koch & Harrington, 1998). Koch (1995) acknowledges reflexivity to be fundamental to the integrity of the researcher's interpretation of the data and should be fixed throughout the analysis process. This concept of reflexivity and interpretation is linked to Heidegger's Hermeneutic circle and the use of the researcher's experiences as a lens to interpret the findings as a continuous process to understand the phenomenon.

Grounding the current study with Heidegger's hermeneutic phenomenology ideally fit the identified theoretical framework for interpreting adult daughters' experiences involving being strong, Black women after they have experienced maternal mental illness in childhood. From an ontological perspective, Black Feminist Thought and hermeneutic phenomenology validated the participants' historical experiences as a criterion for knowledge. From an epistemological perspective, both the theory and philosophy validated the researcher's prior experiences with the identified phenomenon and Black womanhood as being imperative to the gathering, interpretation, and dissemination of research findings (Collins, 2002). From a methodological perspective, hermeneutic phenomenology identified and supported Black women's cultural pre-understanding concerning the saliency of dialogue in the acquisition and confirmation of knowledge. In sum, hermeneutic phenomenology philosophy directly acknowledged the salience of historical experiences in the socialization of Black women and how these experiences influenced the knowledge women hold concerning strength.

Participants

For a phenomenological study, Creswell (2016) recommends a range of 5 to 20 participants holding similar experiences to the phenomenon of inquiry. The current study was comprised of 11 adult daughters of depressed Black mothers. This small sample size allowed for the researcher to conduct an in-depth analysis of each participant's lived experience in the time frame of the current study.

Participants were purposively selected based on the study's theoretical framework, Black Feminist Thought, which supports the unique socialization experiences involving Black mothers and daughters. Additionally, participants were screened for their perception of maternal depression with both mainstream depression symptomology outlined in the DSM-5 and unique depression symptomology expressed by Black women. This unique symptomology, Sisterella Complex, is outlined in the study's conceptual framework and supports the inclusion criteria for the identified population. When daughters described the behavior to support the perception of mother's depression (see table 4.1), majority of the participants identified their mothers' placed others needs before their own (n=8), followed by hoarding various items (n=7), and using food to cope with stressors (n=6). The 11 participants in the study collectively self-identified as Black American and being raised by Black American mothers who identified as females at birth.

Participants varied in age, educational background, and geographical location. These differences in participants allowed for the study's variation in daughter's experiences. All participants were between the ages of 27 and 44 and resided in the Northeast, Midwest, and Southern Regions of the United States . Almost half of the participants (n=5) resided in the Northeastern Region (Connecticut, Delaware, Maine, Massachusetts, Maryland, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont) with multiple

participants residing in New York state (n=3). Educational levels varied from high school to PhD (see table 4.2), with majority of participants holding advanced degrees (i.e. Master and PhD) (n=9). Additionally, over half the participants (n=7) held degrees specializing in human services which contributed to their identification and understanding of maternal depressive symptoms.

The goal was to understand adult daughter's beliefs and behaviors associated with experiences concerning Strong Black Woman beliefs that are present after being raised by a Black mother they perceived as depressed. Additionally, the study seeks to identify the meaning adult daughters place on mental health and help-seeking behaviors. Most importantly, the phenomenological design of the study did not require mothers to meet clinical diagnostic criterion for Major Depressive Disorder outlined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-V). Instead, this qualitative study focused on the daughter's perception of the mother's mental illness. Previously noted in the literature review, Black women experience culturally specific depression symptomology that is often overlooked or misunderstood in the clinical setting. The daughter's understanding of her mother's symptoms is encouraged to discuss her perception of her mother's mental illness.

Eligibility Criteria

Participants were required to be raised by Black American women to meet the inclusion criteria for participation which allowed for the identification of Strong Black Woman beliefs associated with the marginalization of Black women in American society. To qualify, adult daughters were raised by their biological mother or another Black woman who assumed the role of mother. This criteria is supported by Black women's important cultural tradition of raising children that are not biologically connected to them as their own (Collins, 1991).

To be included in the current study, the adult daughters were required to be born after 1965. The choice for this age range is due to each generation being influenced differently by the advancements of the Civil Rights Act of 1964, and the lives of these Black women provide diversity in thought and experiences to the study. The current study excluded socioeconomic and geographic location variables as inclusion criteria. Additionally, individuals who were not born biologically female or those who identify as Black women, but their mothers are of another race/ethnicity were respectfully excluded from the current study. The interview screener questions can be found in Appendix A. All participants were volunteers but were eligible to receive a small compensation of a therapy journal designed by a Black psychologist valued at \$28.00 for the completion of the interview. Participants who did not fully complete the interview process were not eligible for compensation.

Research site

The research site for this study was completely virtual. Participants were recruited and interviewed in a virtual atmosphere via Zoom.

Recruitment Procedures

I used culturally relevant methods such as storytelling ((Palacios et al., 2015) and my positioning as a Black woman to build trust amongst participants and establish myself as a credible source of knowledge. Collins (2002) notes Black women uniquely use dialogue in their confirming and passing of knowledge. Participants were recruited from various digital mediums. Social media ads were designed to center Black women's culture, like images of women with natural hair styles, and were posted in various online groups along with hashtags dedicated to Black women populations (i.e. #blackwomenmentalhealth). Additionally, interested participants were directed to the research study's website www.daughtersofdepression.com which provided

an overview of the research project, its importance, and scheduling. Lastly, I created a YouTube page, Daughters of Depression, to connect visually with participants regarding my position as a researcher and Black woman.

Interested participants scheduled the initial screener which was conducted via Zoom, a video meeting platform. The initial screener was not recorded but offered an opportunity to establish rapport while discussing their experiences. To record their detailed answers, I advised in the beginning of the screeners that I would be typing as they answered questions. After completing the screener and eligibility was determined, the participants chose pseudonyms to protect their identity going forward. Initial screening ranged from 15-90 minutes with many participants using the time to elaborate on their experiences with a depressed mother and their personal SBW beliefs and behaviors. This process was integral for establishing rapport. Due to the vast and sensitive nature of the research topic, I used the screening process to gather information to help pinpoint behaviors and experiences to discuss during the interview process. This process proved to be extremely effective in aiding participants to streamline their thoughts relative to the current research question.

Participants used a Qualtrics form to complete the informed consent requirement for the study which was listed under the forms section of the website. I used snowball sampling techniques by encouraging participants to identify other qualified individuals for the study (Merriam & Tisdell, 2015).

Interview Guide

The interview guide was created based on the major themes and topics identified in the literature to include: (a) maternal depression and the mother/daughter relationship, (b) strength

socialization practices, and (c) maternal depression, SBW beliefs and adult experiences. The interview protocol questions can be found in Appendix B.

Data Collection and Analysis

Black women use dialogue amongst each other to discuss gender specific topics and issues (Collins, 2002). The use of individual interviews affords participants the privacy of disclosing information that is considered culturally taboo in group settings. Participants changed their screen name to their chosen pseudonym to appear in the recorded Zoom video interview to limit identifiable information. Interview durations ranged from 45 to 120 minutes and were recorded and transcribed via Zoom's platform. Additionally, I listened to the interviews and update any corrections to the transcript. Using a semi-structured interview style, participants were asked open-ended questions with prompts to divulge childhood experiences with maternal depression and beliefs and behaviors concerning strength.

After the participant completed the interview questions, the recording was stopped for debriefing. The process of debriefing included member checking to ensure accuracy of the participants' experience and an opportunity for participants to continue to unpack their experiences. Using member checking in a qualitative study establishes trustworthiness, credibility, and integrity in the research process. Due to the sensitive nature of the phenomenon of inquiry, many participants used the debriefing process to connect with my personal experience as a daughter of a depressed Black mother and as a Black woman. All participants were receiving some form of mental health counseling, and the debriefing process allowed for me to discuss additional resources that were available on the study's website. Many women were emotional during the debriefing process and offered additional information regarding the internal conflict they traverse daily with themselves and mothers. I took the time to affirm their

humanness in managing a complex situation with the best tools available. I congratulated them for seeking services and opportunities, like participating in the research study, to educate themselves and others on the influence on maternal depression and adult daughter's lives.

Data Security

Zoom interviews are kept in an encrypted cloud-based storage only accessible by myself and committee chair. Participant's data will be kept on a password protected hard drive for 3 years post data analysis.

Qualitative Analysis Plan

The current study used hermeneutic phenomenology and utilized the hermeneutic circle in its analysis process. In the hermeneutic circle process, smaller parts of the data continuously inform the whole and vice versa (Kafle, 2011). This style of analysis allows for the illumination and modification of data during the analysis process. In the book, *How to Write a Phenomenological Dissertation*, Peoples (2020) states "the goal of a phenomenological data analysis is to present a description from essential themes of an experience in a way that is comprehensible and identifiable to anyone who has had that particular experience" (p.57). As a result, I read participants texts and listened to the audio recordings multiple times to become engrossed in their lives. The process of revisiting the text and audio allowed for not easily identifiable characteristics to emerge, thus giving me further insight into the phenomenon and lived experiences of participants.

Developing Codes

Using Atlas.ti, a qualitative research analysis software, participants' transcripts were sectioned into initial meaning units and were further deduced to create final units encompassing deeper meaning of the phenomenon. Initially, there were 266 meaning units organized into 11

groups. Using the cloud code feature, the most prevalent meaning units emerged and allowed for further deduction. The final meaning units were comprised of five groups which later became the themes for the study. From these final meaning units/themes, I created narratives from participant accounts which are thematically organized and translated into a general description of the phenomenon.

Reflexivity

Journaling and member check ins are suggested when conducting a hermeneutic phenomenological study (Peoples, 2020). Journaling allows researchers to explicitly state biases and allow for the revision of these biases when analyzing data. Using the concept of the hermeneutic circle, I used journaling to challenge any preconceived notions or pre-knowledge and revised biases for greater awareness of the phenomenon during the analysis process. Due to the close proximity I hold with the research topic, journaling my thoughts and emotions was most effective after the completion of an interview with a participant. Member check ins are used in phenomenology to ensure the researcher has accurately interpreted the participants experiences (Peoples, 2020). Member check ins were conducted during the debriefing process to ensure I understood the participants' experience and clear any misconceptions during the interview.

Researchers Positionality

When conducting a qualitative research project, explicitly stating one's positionality reduces the influence of the researcher's bias and creates more trustworthiness in the analysis process (Creswell & Poth, 2016). Positionality include a researchers' various intersections and world view connected to how they view participants and the research process (Holmes, 2020). As an African American woman with clinical depression onset at 16 years old and raised by a

mother with clinical depression, I am aware of the strains mental health diagnosis poses on the self and Black family. Using a Black feminist thought lens, I believe the commonness of Black women's strain is associated with the perils of gendered racism experiences in American society and influences a culturally specific coping style that is detrimental to women's mental health. Having this worldview and being a Black woman with mental health challenges places me as an insider with participants. Additionally, my background involving growing up in a middle class, college educated home has afforded me mental health services and access to mental health education from various professionals in my personal network and colors the lens in which I understood depression in childhood. While cognizant of personal childhood experiences, I lack the understanding of other adult Black American women with diverse backgrounds who experienced maternal depression while growing up and is the motivation for the current research project. My goal was to understand the essence of what it is like for other Black women mothered by women with depression and how these experiences impact the way these women cope with difficulties associated with their double minority status including Black and female. Additionally, I sought to understand how coping mechanisms are formulated in the context of the mother/daughter relationship and how mechanisms present in these adult women's current mental health experiences.

Chapter 4: Findings

Introduction

The literature on Black mother/daughter relationships is supported in the research as salient for the intergenerational transmission of strength beliefs through mediums like direct messaging and modeling (Collins, 1991; Joyce E. Everet et al., 2016; Hall, 2015; Oshin & Milan, 2019; Walker, 2004). Additionally, research identified how maternal mental illness influenced the lives of children across the lifespan (Halgunseth et al., 2019; Kaimal & Beardslee, 2010; Erika M. Manczak et al., 2018; Milan et al., 2017). Therefore, the findings in this chapter presented adult daughters' experiences with Strong Black Woman beliefs and behaviors in adulthood and how they made sense of their childhood with perceivably depressed mothers. These earlier experiences shaped their understanding and behaviors involving being Strong Black Women in adulthood.

The following research and sub-questions guided the presentation of findings in this chapter:

1. How does living with a perceivably depressed Black mother influence their adult daughters' experiences with SBW *beliefs* in adulthood?
 - 1a. How does a mother's perceived depression influence strength socialization messages received in childhood?
 - 1b. Do childhood socialization messages translate into the lives of adult daughters?
2. How does living with a perceivably depressed Black mother influence their adult daughters' experiences with SBW *behaviors* in adulthood?
 - 2a. How does perceived depression influence the mother/daughter relationship bond?

Themes

Five themes were identified in the data, along with various subthemes. The following themes described how daughters made sense of their experiences with both SBW beliefs and behaviors in adulthood after being raised by a depressed mother: 1) Identifying and challenging learned coping strategies from mothers; 2) Defining and re-defining their mothers' version of Strong Black Woman in adulthood; 3) Mother's Strength Lessons and Alternative Versions with Othermothers; 4) The Making of Strong Black Girls, 5) Seeing Mother as a Woman. The following section is organized into five thematic sections to demonstrate the relationship between adult daughter's SBW beliefs and behaviors and living with a perceivably depressed mother (see Table 1). Additionally, themes are supported by various subthemes and quotes from daughters (see Table 2). Due to overlap with themes addressing both research questions, please refer to Table 3 outlining which specific themes answered each question.

Table 1

Theme Definitions and Examples

Themes	Definition	Example
Identifying and Challenging Learned Coping Strategies from Mothers	Daughters identified two intervention phases: pre-education and post-education that challenged their learned coping strategies from mothers. Pre-education is where daughters identified mothers' coping beliefs and behaviors as maladaptive for their mental and physical health (i.e., binge eating, not asking for help). Post-education is where daughters used formal and informal resources that challenged learned lessons which assisted in creating more adaptive coping beliefs and behaviors (i.e., the importance of therapy, healthy boundaries, acknowledging emotions)	"My mother was never one to ask for help and I really trying hard to unlearn this dangerous behavior." - Gabrielle
Defining and Redefining Their Mothers' Version of SBW in Adulthood	Daughters connected mothers' beliefs and behaviors to traditional SBW role described in the literature review. Some daughters began their definition of SBW in the context of their mothers' SBW beliefs and behavior and redefined SBW role to match personal beliefs and behaviors concerning strength and Black womanhood in adulthood. Other daughters excluded their mother's version of SBW all together and independently defined SBW using their own SBW beliefs and behaviors formed in adulthood.	"I wish we didn't have to be stoic and take people's crap with a smile. Despite how many people beat you down, you always rise to the occasion. That is what a Strong Black Woman is, but I wholeheartedly feel like that should not be." - August
Mother's Strength Lessons and Alternative Versions with Othermothers	Daughters learned strength directly and indirectly from mothers and Othermothers. Othermothers are defined as women who assisted in certain child rearing responsibilities. Daughters identified mothers' strength displays as more masculine (i.e., emotional suppression and aggressive conflict resolution), while acknowledging Othermothers strength as more feminine (i.e., emotional displays and non-aggressive conflict resolution)	"She had a different kind of strength." - Missy
The Making of Strong Black Girls	Daughters negatively described living with a perceivably depressed mother. As young as 5 years old, daughters enforced traditional SBW behaviors like emotional suppression and self-silencing to cope with home life. Daughters identified how perceived depression and their mothers' coping strategies negatively influenced their mother/daughter relationship.	"She was like Dr. Jekyll and Mrs. Hyde" - Nika

Themes (cont.)	Definition	Example
“I understand her now”; Mother as a Woman	After leaving home, adult daughters separated their mothers’ identity as women and not just a parent. Daughters understood the context of their mothers’ past experiences, which many included childhood trauma and poor romantic relationships. Daughters understood their childhood strength lessons were inspired by the mother’s survival mechanisms likely formed in childhood.	“Up until I had children, I saw my mom as a mom. It was not until I had a child that I realized what it was like to be woman.” - Marie

Table 2

Sub Themes Definitions and Examples

Sub Theme	Definition	Example
Theme: Identifying and Challenging Learned Coping Strategies from Mothers		
Pre- educational interventions	Daughters described learning in early adulthood that their learned coping strategies from mothers had a negative impact on their mental and physical health. After a mental and physical breakdown from using learned coping strategies, daughters sought information on how to cope differently from formal and informal resources who assisted in identifying more adaptive coping strategies.	“Growing up, I did not talk about my feelings. Partly, because I did not feel comfortable enough but mainly because it was never modeled to me. We did not talk about our feelings at home.” - Brianna
Post- educational interventions	Daughters used both formal and informal resources to create more adaptive coping strategies. Daughters used new coping strategies when defining and redefining a SBW in adulthood. Daughters expressed a better quality of life in adulthood after implementing new coping behaviors.	“As I got older and participated in therapy, I realized some things about myself. Nowadays, I am more aware of the issues. I went from eating a pint of ice cream to being a vegan and able to lose weight.” - August

Table 2 (cont.)

Sub Themes Definitions and Examples

Sub Theme	Definition	Example
<hr/> Theme: Mother’s Strength Lessons and Alternative Versions with Othermothers <hr/>		
Family relatives as Othermothers	Daughters with female relatives as Othermothers described learning both similar and different manifestations of SBW than their mother’ version. Daughters also learned information about their mother’s past which helped them to further understand her strength behaviors and beliefs.	“Although we were close in age, I learned strength from my mom’s first cousin. I watched her navigate life as a single mother with three kids.” Missy
Non- relatives as Othermothers	Through educational and religious activities, daughters formed relationships with Othermothers who provided comfort and encouragement with their home life with perceivably depressed mothers. Daughters reported receiving encouragement to achieve in their life and how to manage both personal and professional relationships.	“I met her at one of my college internships and later her husband and two kids. I call us a misfit family because what I have with my mom, she has experienced with her dad.” - Ariel
<hr/>		
Sub Theme	Definition	Example
<hr/> Theme 4: The Making of Strong Black Girls <hr/>		
Mothers’ perceived depression	Daughters identified perceivably depressed behaviors in mothers, including crying, self-isolation, being distant, and irritability. Daughters described cultural-specific coping like placing others needs before own, religious coping, and hoarding negatively impacted their home life and mother/daughter relationship.	“God forbid you got rid of something. All hell would break loose.” - Gabrielle

Mothers' perceived depression (cont.)	Daughters described how their mothers' mood instability contributed to a dysfunctional home environment and caused distance in the mother/daughter relationship	"I would speak to her on the phone, and she would be totally calm. Then she would come home and be totally enraged, and my sister would be like," Wait, what just happened?" - Gabrielle
	Daughters reported how their mothers' perceived depression influenced the closeness in their relationship. Daughters expressed how mothers' irritability, authoritarian parenting, and distance negatively impacted their relationship.	
	Daughters described assuming household and parenting tasks when mother was perceivably depressed.	"I obviously don't hate my mom, but that relationship is so strong that pulling away is a slow process." - Jupiter
		"I honestly felt like when me and my sister got to a certain age, we were raising my mom." - Rosa

Sub Theme	Definition	Example
Theme 5: I understand her now; Mother as a Woman		
Daddy's girls	Daughters described how they learned in adulthood how many mothers witnessed the domestic abuse of their own mothers. Some daughters described mothers who were physically abused by fathers and understood how these early experiences determined what their mothers believed about strength	"Essentially, her father was abusive towards her brother and mother and not her. It got to the point where her mother was in the hospital and her brother was sent to boarding school. She grew up in complete chaos and I learned about it weeks before she died." - Gabrielle
Seeing an overwhelmed woman, not just a mom	Daughters were able to separate their mother as a woman and not just a parent. Daughters identified how their own life experiences allowed them to see their mothers as	"I understand her now" - Nika

overwhelmed women managing life
to the best of their ability

Table 3

Themes Addressing Each Research Question

Themes	RQ #1	RQ #2
Identifying and Challenging Mother’s Coping Strategies	X	X
Defining and Redefining their Mother’s Version of SBW	X	X
Mother’s Strength Lessons and Alternative Versions with Othermothers	X	-
“I understand her now”: Mother as a Woman	X	X
The Making of Strong Black Girls	-	X

Overview of Findings

Research Question 1: How does living with a perceivably depressed Black mother influence their adult daughter’s experiences with SBW beliefs in adulthood?

Adult daughters reported personal experiences and education acted as delineating factors which separated their use of mothers’ strength and coping lessons to developing strategies of their own. After implementing learned childhood lessons during major life stressors in early adulthood, daughters acknowledged negative psychological and physical effects. Formal (i.e., therapy and higher education) and informal (i.e., family and friends) interventions acted as educational opportunities which assisted daughters in creating new coping beliefs in opposition to their childhood understanding of strength from mothers. Daughters reported a better quality of life in adulthood when using their own coping beliefs which acknowledged the importance of boundaries, emotions, and seeking help. Daughters used these new coping beliefs when defining and redefining what it means to be a Strong Black Woman in adulthood.

Sub Question 1A: How does a mother's perceived depression influence strength socialization messages received in childhood?

When discussing childhood strength lessons, daughters reported their mothers used direct messages to stress the importance of independence and self-reliance. Specifically, mothers taught daughters not to depend on men to meet their personal needs and to take responsibility for their own well-being. Daughters learned the importance of resilience and perseverance by witnessing their mothers traverse hardships, mental health challenges, failures, and disappointments. Through relationships with women in other caregiving capacities described as Othermothers, daughters learned alternative versions of strength. Many adult daughters identified their mothers' strength behaviors, like aggression and lack of showing emotion, as less feminine and more aligned with masculine traits.

Sub Question 1B: Are these messages translated into the lives of adult daughters?

In relationships with Othermothers, adult daughters learned what they identified as more feminine characteristics, including the importance of showing emotion, conflict resolution without aggression, and healthy romantic relationships not witnessed or promoted in the strength lessons provided by their biological mothers. Ultimately, daughters understood their mothers' version of SBW was developed to manage their perceived depression in adulthood, but also created to survive early life traumas with their own parents and dysfunctional households. In turn, daughters were empowered with knowledge of their mothers' past, lessons from Othermothers, and lessons learned from personal experiences to self-define their own version of strength, which subsequently shaped their beliefs and experiences involving being Strong Black Women in adulthood.

Research Question 2: How does living with a perceivably depressed Black mother influence their adult daughter's experiences with SBW behaviors in adulthood?

Daughters as young as 5 years old residing with perceivably depressed Black mothers reported the endorsement of SBW behaviors to cope with stressors in their dysfunctional home environments. While daughters acknowledged using various traditional SBW behaviors, all daughters in this study reported using emotional suppression and self-silencing to cope. In childhood, daughters acknowledged knowing something was mentally off with their mother; however, many lacked the cognitive development and exposure to different perspectives to contextualize their mothers' behaviors. Exposure to their mother's unstable mood resulted in some daughters experiencing verbal and physical abuse. Other daughters developed a hypersensitivity to gauge their mother's mood and used avoidance techniques when perceived to be unsafe for their own mental well-being. The inconsistency in mood caused daughters to distrust mothers and internalize personal stressors, thus creating distance in the mother/daughter relationship.

Sub question 2A: How does perceived depression influence the mother/daughter relationship bond?

When reflecting on their mother/daughter relationship in childhood, many daughters negatively described this dynamic. Many described mothers as disconnected and authoritarian, which influenced the warmth and closeness in the relationship. Other daughters reported feeling like they were raising their mothers in a process called parentification (Earley & Cushway, 2002). When mothers were experiencing perceived depressive episodes, daughters reported taking on household and emotional responsibilities typically delegated to their mother.

Additionally, parentified daughters used their self-proclaimed rational temperaments in childhood to mitigate their mothers' displays of emotional dysregulation. Daughters identified mothers' emotional dysregulation behaviors as outbursts of anger and inappropriate reactions to minor stressors. Daughters reported mothers use of extreme emotional reactions when parenting as negatively influencing the mother/daughter relationship.

Adult daughters acknowledged their understanding of coping with stressors developed from modeling how their mothers coped. After experiencing a major life stressor in early adulthood, daughters used learned coping strategies like binge eating, emotional suppression, hyper independence, placing others needs before own, and staying busy. Daughters reported mental and physical strain associated with implementing learned coping strategies and sought assistance in the creation of new coping beliefs. After using information from formal and informal educational opportunities, daughters created more adaptive coping behaviors like emotional expression, participating in therapy, asking and receiving help, and enacting healthy boundaries. Daughters used these behaviors when defining and redefining what it is to be and have experiences as a Strong Black Woman in adulthood.

When asked to define a Strong Black Woman, many adult daughters used their mothers' behavioral manifestations of strength and traditional definitions identified in the literature. Afterward, adult daughters provided what they desired a Strong Black Woman should be. Other adult daughters excluded their mothers' version and traditional definitions completely and independently defined a Strong Black Woman for themselves. Whether included in the initial- or redefinition, all adult daughters stated strong Black womanhood consisted of self-care, setting personal boundaries, and acknowledging emotions. Nevertheless, the entire sample of adult daughters' definitions included Strong Black Women accepted help when needed and offered.

It is important to note in the findings that as daughters matured in adulthood, they enacted compassion for their mothers when separating the woman from the parent. Seeing their mother as a woman allowed for daughters to consider all the life experiences that shaped her strength behaviors. Daughters now examined their mothers' SBW behaviors through the lens of their life experiences, beginning with childhood. Many daughters acknowledged the impacts of mothers either witnessing domestic violence or being physically abused by their own fathers as having a life long impact. The violent behaviors perpetuated by their grandfathers contributed to the anger and controlling behaviors daughters experienced in their childhoods by their mothers. The residual effects of their mothers' childhood trauma caused distance, distrust, and lack of vulnerability in their mother/daughter relationship.

Theme: The Making of Strong Black Girls

In this section, daughters provided examples of how they used SBW beliefs and behaviors to cope with their mothers' perceived depression in childhood. Daughters described the impact their mothers' perceived depression and coping styles had on the mother/daughter relationship and contributed to dysfunctional home life. Daughters' answers provided context to their unique experience with the phenomenon and contributed to uncovering the essence of how daughters' adopted the SBW role at an early age. The following subthemes are included: (1) Daughters' early adoption of SBW roles, (2) Mothers' Perceived Depression, and (3) Mothers' Coping Strategies.

Daughters' early adoption of SBW roles in childhood

Daughters in this study utilized various SBW behaviors at an early age, as young as 5 years old, to manage stressors associated with perceivably depressed mothers. Experiencing their mothers' anger and aggression linked to perceived depression caused fear and avoidance in many

daughters. Missy described this fear as “walking on eggshells,” which alluded to the tension daughters experienced when attempting to avoid conflicts with mothers. Daughters used SBW behaviors to manage their relationships with mothers and dysfunctional households (see Table 4.1).

Table 4.1

Daughters Endorsement of SBW behaviors is Childhood

Name	Obligation to manifest strength (n=6)	Obligation to suppress emotions (n=11)	Resistance to being vulnerable or dependent (n=7)	Determination to succeed despite limited resources (n=4)	Obligation to help others (n=6)
Ariel	X	X	X	X	X
August	X	X	X	-	X
Brianna	X	X	X	-	-
CJ	-	X	X	X	-
Gabrielle	-	X	X	-	-
Jupiter	X	X	-	-	-
Lynn	X	X	X	-	X
Marie	-	X	-	-	-
Missy	-	X	-	X	-
Nika	X	X	X	-	X
Rosa	-	X	-	X	X

All daughters in this study ascribed to SBW beliefs and/or behaviors regarding the suppression of emotions. Brianna described how experiencing her mother’s emotional

suppression in the household contributed to her adopting the SBW belief of not burdening her mother with personal problems and the SBW behavior of self-silencing. Brianna explained:

I did not talk about my feelings because I did not feel comfortable enough, and it was not modeled to talk about your feelings at home. This is how I guess you coped with things. There were situations I was going through around that time that she still does not know today. I did not talk about it then because I did not want to add to her stress at that time.

Brianna also explained how managing herself with her mother included the use of self-silencing, the need to be perfect, and avoidance to avoid conflict:

I felt like that is where my self-soothing came into play. I just learned to avoid her in those moments because it would get taken out on me. I felt like I had to do everything right so that I did not get yelled at and end up feeling sad or negative about myself.

Daughters who experienced physical abuse discussed not crying as a coping response. Ariel recalled:

She beat me with leather dog leashes, pulled me down the stairs, and beat me when I took a bath. It was not normal, but it was all I knew, and no one was saving me. So for a long time, I did not cry. Part of it was out of spite, and I am sure part of it was for me to cope.

Ariel's unwillingness to cry out of spite connects with other SBW beliefs and behaviors, causing daughters to be resistant to vulnerability and dependence on mothers.

Daughters described perceived depression as creating a distance between their mothers and themselves, which challenged daughters' ability to be emotionally vulnerable or dependent on their mothers to meet their needs. Early in childhood, daughters identified deficits in mothers, which required them to take a leadership approach to maintain stability in their households.

August described, "I had to be the voice of reason at an early age. I do not feel like I had a

childhood and had to grow up quite quickly”. Like August, Nika described how being responsible at an early age was not an intentional act but an act of survival:

I think I’ve always felt like I had to parent my parent. People used to always comment on how mature I was for my age when they found out how old I was. I was really responsible but did not realize that it was not my choice.

Nika provided another example of why she chose to suppress her emotions when interacting with her mother, “I learned not to react because somebody has to.” Mothers’ responses to stressors with daughters influenced the SBW role daughters adopted. Lynn described her mother’s response to her being molested by her uncle, who was also her pastor, at the age of 11. This event occurred during her mother’s perceived depression and caused Lynn to suppress her emotions and avoid vulnerability in their mother/daughter relationship. Lynn shared:

When I told her what happened that night, her response to me was what disconnected us. She asked me what I was wearing that day. I had to think for a second because I began to question myself. At that point, I felt like maybe it was my fault. I should not say anything about it. Her sisters came back a couple of days later and reminded me of his position and that we did not want anyone looking crazy at our family. Everyone instructed me to do what I had to do to get through this. I was told to try not to be around him, but that is hard because he is my pastor.

By observing and listening to her mother, Lynn said she learned early what it meant to be strong and weak, which was how she learned to cope with her molestation. She explained:

Weakness was crying. Even if something hurt your feelings, you were expected to snap out of it. My sisters and I were constantly told what it meant to be weak. Hey, don't cry; get it done. If you do this, this is weak. Just move forward.

Like Lynn, daughters in this study recalled being emotionally torn from the behaviors and decisions their mothers made when perceivably depressed. Daughters adopted their mothers' direct and indirect strength lessons to manage the difficulties associated with their mother's perceived depression.

Mothers' perceived depressive symptoms

Daughters described various behaviors they perceived as depression when reflecting on their mothers' mental health during childhood and adolescence. These symptoms included crying, self-isolation, being distant, anger, and irritability. Daughters described the emotional dysregulation of mothers as, "She was like Dr. Jekyll and Mrs. Hyde," which negatively influenced their relationship and contributed to a dysfunctional household. As they navigated the highs and lows of mothers' emotional dysregulation, daughters responded to its unpredictability differently. Gabrielle's confusion began shortly after her mother returned home from work.

Gabrielle shared:

I would speak to her on the phone, and she would be totally calm. Then she would come into the house and be totally enraged, and my sister and I would be like, "Wait, what just happened?" As a child, I thought it was from the frustration of being tired from working long hours, but when I became aware of mental health in my 20s, I knew it was not necessarily normal behavior. One moment things are calm, then there is an argument, and then there is crying. Then literally five minutes later, she would ask us if we wanted something from the kitchen.

Reflecting on the love she possessed for her mother, Gabrielle described how the frustrations with her mood swings challenged their bond, “there was always much love coming from her, but it would be frustrating again because her mood could change at the drop of a dime.” Gabrielle’s response of feeling frustration and love simultaneously is an example of the push and pull daughters experience in the mother/daughter relationship with perceived depression. Gabrielle’s mother’s mood swings manifested after arriving home after working long hours. However, Brianna shared her mother's mood instability was heightened after she [Brianna] experienced a traumatic event around the same time as her young brother was incarcerated. Instead of experiencing continuous frustration like Gabrielle, Brianna developed a hyperawareness to know when it was safe to interact with her mother. Brianna shared:

Soon as my mom walked in the door, I observed her tone and body language for signals as to whether she would be ok or whether I would have to stay out the way and into my room to avoid her. I did this so I would not get yelled at for something. Whether it was not washing a particular dish or taking something out of the freezer, it would be about something I failed to do.

Brianna’s mother's criticalness in parenting is one example where daughters described how mood instability influenced their mothers’ practices.

Daughters described mothers’ extreme emotional responses as being associated with confusing punishments, which could include verbal and physical abuse. Daughters who experienced verbal and physical abuse spoke about the psychological toil these incidents had on them during childhood. Ariel shared, “there is a lot of my childhood I have mentally blocked out. I experienced mental and physical abuse due to her anger and silent treatments”. Another

daughter, Rosa, shared Ariel's same experience of childhood memory blackouts. Rosa shared how her mother's irritability caused her not to remember much of her life during that time.

Rosa explained:

I spilled some juice on the floor because my sister came running down the hallway, and it dropped out of my hand. Instead of my mom going to the store and trying to find cleaning products, I got a whipping. I tried to explain what had happened. I remember getting beat and going to school with my behind hurting because I was hit with a belt. That is the first whipping I can remember, and I mentally blocked out the rest of that time at that residence.

In sum, daughters' various experiences with mothers' mood instabilities left them feeling confused, frustrated, and internalizing their frustration. As a result, some daughters reported becoming hypersensitive to moods and having dissociations in childhood memories after extreme emotional responses guided their mother's parenting practices. These childhood moments with perceived depression contributed to the daughter's early emotional development. The making of Strong Black Girls, defined as daughters adopting SBW behaviors early in childhood, was constructed out of daughters' need to survive living with a perceivably depressed mother. From an early age, daughters observed their mothers' use of SBW behaviors, and used these same behaviors to manage incidents of stress and dysfunction reported in their households. Daughters recounted incidents from caregiving responsibilities to surviving physical abuse with mothers as reasons for developing strength. As a result, all daughters in this study

reported having to suppress their emotions in childhood when interacting with their mothers, which resulted in self-silencing.

Theme: Mothers' Strength Lessons and Alternative Versions with Othermothers

Daughters learned strength through direct and indirect messages from their mothers and Othermothers. Direct messages involved mothers explicitly discussing strength with daughters during one-on-one conversations or in the company of other family members. These messages shaped their thinking about social, romantic, and professional relationships. Daughters identified these messages focused on independence and self-reliance as strengths. For example, Missy explained, "My mother would say how she was raising her kids to not depend on nobody." Her mother used strength coaching as opportunity to stress the importance of independence by emphasizing to Missy, "You need to be strong and learn to do it by yourself." CJ's mother also stressed self-reliance and independence. CJ recalled:

She has always taught me that you do not depend on anybody. She would say, "You do not have friends; you have associates," which has saved me a lot of my adult life. My mom taught me that you do not ask people; you figure it out. You have a plan. She would say, "If you planned the way you were supposed to, you would not need to ask anybody."

CJ and other daughters in the study identified mothers' stressed self-reliance, which has benefited in navigating life but also has shaped their view of relationships with others and how to ask for help. While some mothers stressed independence, others included messages which incorporated persistence and resilience as strengths. For example, Marie shared how her mother

had zero tolerance for excuses when teaching her daughter how to persevere in life. Marie recalled her mother saying, "You gotta do what you gotta do with a no excuse tolerance. Whatever you need to go through, you need to do it with no complaining and by any means necessary". August experienced similar messaging; however, she was able to identify how her mother's direct messages on independence in her younger years differed from her actions of support when she was older. She explained:

I think my mom was interesting because she was part old school and part advanced thinking. The old school messages would be "suck it up and keep moving," which I believe many Black women do. However, she also stressed, "No matter what is going on, you gotta do what you gotta do because nobody will help you. You gotta do it for yourself". However, on the other hand, she personified things that she did not have, like support and guidance. If I needed something, I could go to her. It is interesting because I got a different response depending on the age I was.

August's account of experiencing different versions of her mother's strength messages supported her mother's use of motivational speakers' recordings and books to better herself. As a result of her efforts, August experienced more evolved versions of her mother's strength beliefs and behaviors throughout the years to incorporate guidance and support.

Many mothers stressed the notion of self-sufficiency without any expectation of assistance from others explicitly in direct messages. For example, Gabrielle's mother stressed independence while instructing her to defy societal gender norms and behaviors. Gabrielle shared:

We would have conversations about independence. She stressed, "You do not let no man do anything for you, do for yourself, and always have your own money. It would be best

if you learned how to build something or how to put something together. Be your own person and depend on nobody.

Missy, CJ, Marie, August, and Gabrielle's awareness of strength was crafted by conversations with their mothers throughout childhood. Other daughters reported not having any direct messages and learned strength from witnessing their mothers' actions. Although Brianna disclosed not having any direct strength conversations with her mother, she developed her understanding by observing her mother model strength behaviors. She witnessed her mother's perseverance in managing her son's incarceration and daughter's trauma incident at the same time. Brianna believed, "Strength equated to perseverance and that I just have to keep going. I cannot stop to think about anything. If I want things to change, I will have to do it myself and be self-sufficient".

Not all daughters adopted their mothers' behaviors to shape their strength beliefs. Much like Brianna, Nika did not experience any direct messages. However, their experiences differed because Nika's beliefs were crafted in opposition to her mother's expressions of vulnerability. Nika described:

I learned strength was the only option as a child because I saw her as weak. Even the thought of me being vulnerable to people would make me weak too. Any sign of openness was a weakness, and I did not want any parts of it.

Though Nika expressed it most directly, all daughters recalled understanding the importance of presenting to be strong as the most frequent in their direct and indirect messages.

Mother's expectation for daughters to mimic their childhood strength

Some daughters recounted how their mothers would minimize their reactions to life stressors by comparing childhood experiences. There was an expectation for daughters to

manage stressors previously experienced by their mothers with the same or more remarkable emotional fortitude. These expectations reportedly left daughters questioning their strength after their inability to manage stressors was downplayed or ridiculed by their mothers. Jupiter recalled:

If I was struggling with anything, I was not strong. If I was unable to deal with something I should be able to manage, the opposite of being strong was weak. My mom and her sisters would compare our lives by saying, "Oh, I have been through that growing up. That ain't no problem. We grew up doing that kind of stuff. It is a shame how social media just got yall minds". I think I got from her that you should be able to deal with inevitable adversities because I dealt with them. Also, I got she was explaining how life worked and that I need to be able to survive in this world.

Jupiter's mother believed social media contributed to a generation's weakened resilience to adversity. Jupiter's mother's beliefs concerning the internet exemplify how some older generations interpret social media content that validates emotions and encourages boundaries as problematic. As a result of this thought process, younger generations' who engage in social media are believed to lack the resilience and strength required to persevere through life's challenges.

Rosa's mother shared how her parent's separation required strength to take on her father's parenting responsibilities, including raising her siblings and financially contributing to their household. As a result, she required Rosa and her sister to mimic her same strength behaviors. She explained:

My mother said she had to be strong because she was the oldest girl and responsible for raising her older brother. She told us, "I had to be strong for them because I had to raise

my siblings, get a job, go get food, and do what I had to do. I had to get a job at a young age to help pay bills." So when my sister and I were 16, we got jobs, and she asked for our money to help pay bills. We were in high school and trying to save for college while wanting to go out with our friends. What does this have to do with us being strong?

Like Rosa, most daughters reported having a different childhood than their mothers, which required another type of strength. In relationships with other women, daughters learned about alternative versions of strength through direct and indirect messages.

Alternative Versions of Strength with Othermothers

During adolescence, daughters in this study reported seeking life advice from other women described as Othermothers. Daughters critiqued their mothers' version of strength while equating her beliefs and behaviors with more masculine depictions of strength. Othermothers provided daughters with what they described as "more feminine" versions of strength. According to the study's theoretical framework, Black feminist thought, Othermothers are women who assume some child-rearing responsibilities, like giving advice and offering guidance to non-biological children (Collins, 2001). In this section, femininity as strength and the locations of Othermothers will be discussed. Inside these salient relationships, daughters were exposed to various strength beliefs and behaviors that enhanced their worldview and understanding of womanhood. In addition, Othermothers were found inside and outside of their families of origin. As a result, daughters sought knowledge from these women to fill gaps or offer a different perspective from their mothers.

More Feminine Than Mother

Most daughters described Othermothers as displaying a version of femininity very different from what they witnessed in their mother. Daughters associated femininity with societal perceptions concerning womanhood and patriarchy identified in the literature. They highly valued being physically attractive, displaying softness, and submissiveness when describing their desired version of femininity. Daughters identified this version of femininity as a strength. Marie and Missy learned this version of feminine strength from other women inside their families. Marie's sister, whom she described as "real girly, pretty, and feminine," taught her a different version of strength not observed in her mother's behaviors. Marie explained, "Growing up. My sister taught me my strength and power in being a woman." Similar to Marie, Missy learned a different version of feminine strength in a close relationship with her mother's sister. She connected her aunt's use of feminine strength by observing how men rewarded her aunt by fulfilling her desires. Missy described, "My aunt is strong but a different kind of strength from my mom. Hers is more like a feminine prowess, using men to buy her things like handbags, trips, and anything else she wants". Missy further explained that her mother provided context to her aunt's methods to get men to provide such luxuries. She shared:

On the other hand, my mom was like, "you never need a man for nothing. I do not care if your aunt goes on trips. I do not have to travel anywhere because I never have to degrade myself or depend on a man to open me up to new experiences.

Missy disapproved of her mother's unwillingness to compromise her values or be dependent on a man to provide new life experiences. She explained, "She [her mother] would rather go without than find alternative ways to meet those desires." Missy's aunt had a significant influence on how she viewed femininity and strength. Missy's aunt was a self-employed hair

salon owner who appeared more glamorous and lucrative than her mother, working multiple jobs. Missy's aunt was also connected to a criminal empire resulting in the death of her only child's father. Additionally, Missy's aunt allowed her only child to be raised by her mother to continue living her lifestyle of travel and luxuries. Missy's Othermother was instrumental in shaping her strength beliefs and behaviors. Additionally, their relationship offered Missy a different perspective concerning expressing feminine traits very different from her mother's. Missy shared the nature of their relationship and some lessons she learned from her aunt:

My aunt, a hairstylist, is where I think I get my business savvy. I admired her and wanted to be like her. I knew doing hair was not for me, but I wanted her life of access and resources. She would travel to places like Aruba. She had men and was gorgeous. She taught me self-care and how to run a successful business.

Female family members as Othermothers

Also, Missy mentioned a female cousin that taught her strength. This cousin's life was more aligned with her mother's version of strength than her aunt's. She shared, "Although we are close in age, I learned strength from my mom's first cousin. I watched her navigate life as a single mother with three children. I would also spend time learning family recipes with her". Missy's exposure to Othermothers in her family offered different and similar versions of strength displayed by her mother. However, Missy placed more importance on her aunt's lesson as it offered a different outlook other than the struggle and resilience she witnessed in both her cousin and mother. The lessons she learned from her mother and cousin, whether directly or indirectly, enforced independence, hard work, family, and sacrificing for your children.

Missy's aunt's lessons taught her that if she behaved differently from what she witnessed with her mother while having a successful business, she could also yield material benefits financed by men. Missy appeared dismissive of her mother's warnings about using this version of femininity and the challenges of being dependent on a man. Missy explicitly discussed the strength messages provided by her mother while describing the lessons she learned from her aunt through observations. Based on her mother's defense of adopting such practices and the nature of their relationship, there may have been limited opportunities to directly discuss the full scope of benefits and cautions associated with her aunt's lifestyle.

Non-related females as Othermothers

While Missy and Marie learned strength inside their families, Ariel, August, Rosa, and Marie found Othermothers outside their families. Both Ariel and August used educational opportunities to locate Othermothers who modeled different versions of strength needed for learning another way of living and being. Ariel met her Othermother through an internship in college. Both women shared childhood experiences with parents who displayed similar mental health behaviors. Ariel found comfort and support in her sexual preference while being taught to cultivate positive relationships, which was very different from her mother's lessons. Ariel shared why her relationship with her Othermother was essential to her development into womanhood:

I met her at one of my internships and her husband and two kids later. I call us a misfit family because what I have with my mom, she has with her dad. Her husband and I also related because of his relationship with his late father. My mentor taught me to stop showing up for other people that do not reciprocate. She said to figure out where my

family is and identified herself as family. They have taught me to break down some barriers that I established initially because of my jaded past.

Ariel further elaborated on the process her Othermother used to break down the defenses she created to survive the abuses she experienced with her mother. She explained:

I did not realize how jaded I had become in coping with everything. My mentor recently wrote a blog post about her mentoring me throughout the years. When I read it, I just cried. I cried because there was a point where she mentioned I was like, “Look, I am gay. If you do not like it or cannot handle it, I cannot talk to you. I just cannot take any more”. At that moment, I realized how I had been carrying around this for so long. That defensiveness was my armor to be strong, either accept me or leave my life. Through my relationship with my mentor, I have learned to accept people where they are. When people do not accept me where I am, I just remove myself because I do not have to explain anymore.

Ariel’s Othermother taught her the power of boundaries and standing up for herself as strength. These lessons contrasted the incidents Ariel disclosed about her mother and boundaries. When Ariel disclosed she was gay, her mother told others, treated her differently, and would destroy her belongings. She recalled:

So when I was 16, my mom outed me and never treated me the same. She told members of the church that I was gay, so I was very isolated. She did not make a church announcement, but the church was owned by a particular family, like an extended family. They were my godbrothers and like my aunts and uncles. So she told my grandma, and it was like a scarlet letter for me.

Ariel's Othermother provided non-judgmental acceptance of her sexual preference while teaching through her defensiveness. In this relationship, Ariel found unconditional love and support from her Othermother and new extended family. They could understand the complexities of a relationship with a perceived depressed parent due to their personal experience.

Ariel's relationship with her Othermother developed from an adult relationship in college. However, August's Othermother provided indirect lessons while in high school when operating as her teacher's aide. August speaks to finding this version of strength very intriguing and very different from the poverty mentality she witnesses with her mother and other family members. August described:

I remember being a teacher's aide in high school to this Afrocentric, Black 5th-grade teacher. She taught the kids Swahili and many different things related to Black culture. She always amazed me that she was brilliant and teaching children. She was a model to me of intelligence and self-reliance, but she did not appear to be struggling. That was new for me because most Black women I knew were struggling. She did not seem to be, at least on the outside. I think she was the first Black woman that I looked at and saw a different way of life was possible. It is not destined for me to be poor, destitute, and not have anything. It is possible that good things can happen for me.

Similar to the children in the classroom, August became inspired by learning a different perspective. August admired how her Othermother used intelligence to inspire the next generation in the classroom. By being exposed to an alternative version of strength that was uncommon in her home environment, she indirectly learned strength. August never disclosed any direct messages from her Othermother. However, the importance of being exposed to a different version of strength assisted in making different life choices. After working closely with this

woman she identified as highly intelligent and composed, August left knowing she was more than her current circumstances. She could strive to be a different version of womanhood that did not involve scarcity and instability. August and Missy were inspired by their Othermothers' indirect lessons, which exposed them to alternative lifestyles that provided stability and opportunities. August attributed her Othermother's success to intelligence and a collected persona, while Missy connected her Othermother's use of men aided in providing an alternative lifestyle. Both daughters used these relationships with Othermothers as a reference in developing a life that was fundamentally different from their mothers.

When seeking spiritual and personal development opportunities with their mothers, some daughters created relationships with Othermothers. In these spaces, daughters reported learning lessons on managing conflict and showing emotions. For example, Rosa met her Othermother while attending youth services at her family's church. As a young and newly married woman, Rosa's Othermother offered a perspective on managing conflict and adversity in life that significantly differed from how Rosa's mother reacted in various situations. Rosa described her mother as extremely religious in service at church but did not follow the religious teaching in other aspects of her life. At home, Rosa's mother was verbally and physically abusive. Rosa also observed how her mother poorly managed conflict with strangers and would attempt to re-teach her mother how to behave. Rosa's Othermother was aware of her home life and provided wisdom and religious guidance on ways to manage her situation. In this relationship, Rosa did not have to rely solely on her own understanding to teach her Othermother how to navigate life, which is very different from the role reversal in the relationship with her mother. Instead, Rosa received direct messages about how her faith made her a strong woman. She learned how to use her religious tenants in every aspect of her life, especially when navigating difficult situations

with people. Rosa described the nature of their relationship and the lessons she learned concerning strength:

There was a woman in my teen group in the church. She and her husband led the group. She had her college degree, was pretty, and I wanted to be like her when I was older. They would talk to us when they used to drop us off at home. She would encourage me to go to college. She is from Florida and worked for the government. She grew up in a single-parent house, and she still managed to be successful in gaining two degrees. She was an overall nice person. I would use the opportunity to talk to her when she would take us shopping for shoes. She was such a good mentor for my sister and me. She would say, "Unfortunately, you girls are younger and in school, but soon you will grow up and see that many people do not want the best for you and will see you as competition. Please do not make them competition; befriend them. You kill people with kindness and with honey. If they mistreat you, treat them nicer. You are a woman, a God-fearing woman. Exhibit in the world what you want to see. Your light is going to shine anyways. Just continue and be the strong woman you are. You will endure some stuff, but God will always see you through". Since then, I have always carried with me that I can do whatever I want to do. I just kept her words in the back of my head pretty much my whole life.

Rosa's Othermother provided an example that Rosa has used to excel in life. This relationship is an example of the positive aspects of adopting religious teachings. Her Othermother modeled academic excellence by holding two degrees and inspired Rosa to complete her Masters in Public Health. Additionally, Rosa holds a leadership position and is in a long-term committed relationship, which mirrors more of her Othermother's life choices than her

biological mother's choices. During a time when Rosa described having to manage office conflict, many of the tactics shared by her Othermother allowed her to overcome and be successful with a problematic superior. Rosa shared:

I have this White woman at work that's older than me. I think she is upset because people are not genuinely fond of her. They will ask me when I am around, and she is my boss. I remember when she tried to say I did something that I did not. I responded by asking, "Can you tell me what you found? What you saw?" and she could not provide that information. So, in turn, I went to someone in HR because she displayed many micro aggressions during that conversation. She stated, "Oh, you should be thankful because I am the reason why you are here." After all, I am in a higher position but have the education and work experience for the position. She also stated, "If it were not for me, you would not be here." I am like, who the hell does she think she is talking to.

I felt like she wanted me to flick off on her and be that angry Black woman. I decided I was not doing that, so when she finished, I went to HR and time stamp recorded the conversation. They spoke with her in the room where I could be present. She seemed very uneasy that I was able to detail her trying to move away from the topic and form a tangent. After the meeting, she retaliated back with an off-beat comment. I did not play into her baiting an argument because I had already said what needed to be spoken. I am not arguing back and being like, "bitch, who are you talking to?" because I definitely could have, but I got bills to pay. I am going to end this like a grown woman.

Rosa handled this situation much as her Othermother instructed versus what she had witnessed with her mother. Her Othermother's lessons had assisted in maintaining a leadership position while handling conflict professionally. For example, Rosa recalled childhood lessons

from her mother where she witnessed her use profane language when thought to be offended; however, she understood the unprofessionalism and inappropriateness of that type of behavior in the workplace. As a result, Rosa placed healthy boundaries between herself and someone who did not have her best intentions at heart, a lesson directly taught by her Othermother.

Marie and her mother began attending a rite of passage program when she was 12. This program was designed to help both mother and daughter navigate the complexities of adolescence while providing the mother support amongst a Black woman-centered network. Marie recalls how a community mother gravitated towards her, taught her the power of emotions, and how it looks to show them to the world freely. Marie identified her mother as hardened and very strict with her. Previously, Marie mentioned learning strength from her older sister, who displayed softer aspects of femininity that focused on "being girly and pretty." Her relationship with this Othermother taught her how to connect with emotions she had not witnessed before. Marie described the nature of their relationship and the lessons she learned:

I went through this women's rites of passage program from ages 12-to 14. A community mother assigned to help my mother took me under her wing. She was not like my mother because she was very emotional. She feels very deeply and cries all the time, whether happy or sad. She is the only woman around me that expressed those types of emotions. By always being around her as a kid, she taught me the strength of emotions.

The community mother working closely with Marie's mother may have witnessed her emotional suppression and attempted to assist Marie in understanding the value of experiencing emotions. As a result, she modeled how to acknowledge a range of emotions, not just sadness but also happiness. However, even after witnessing her Othermother display emotions as strength in childhood, Marie reported still struggling to relinquish her unwillingness to express emotions

established in her childhood. She shared, "I am not very emotional. I did not grow up with a bunch of affection or a fuzzy household which contributed to me being this way. I am not against emotions, I just do not express them". Ultimately, Marie was able to identify the strength in showing emotions from a different perspective observed in her Othermother. However, her mother's strength socialization involving emotional suppression in childhood has impacted her adult experiences despite her awareness of the importance of emotions.

Daughters in relationships with Othermothers described them as imperative to learning strength differently, which contributed to a more positive understanding of strength in adulthood. All daughters compared their mothers and Othermothers when describing their relationships and problems they identified with their mothers' version of strength. Othermothers' opposing perspectives were identified as a softer and more feminine version of strength. Behaviors of this softer, feminine manifestation of strength emphasized physical attractiveness, caregiving, and used logic/reason instead of anger when addressing conflict management. Many daughters found strength in the way their Othermothers managed conflict. They reported learning non-violent tactics to resolve conflict healthily.

It should be noted that all the daughters previously mentioned in this section had relationships with their Othermothers prior to becoming parents themselves. Other daughters established relationships with Othermothers after having a child in emerging adulthood. These daughters found support and guidance from their children's grandmothers when navigating motherhood. Both CJ and Nika became mothers while experiencing a strained relationship with their own mothers before and after childbirth. CJ shared how her mother's religious beliefs caused a more profound separation between the two. She explained, "Once I got pregnant, she completely separated from me. It was not until recently that I realized my mother essentially

disowned me". Like CJ, Nika also experienced separation from her mother. However, she initiated them being apart. She described how she reached a point in their relationship where being apart was best for her mental well-being. Her mother's decisions made it difficult for Nika to trust her judgment. She shared, "There was a point where I could not be around her. She just triggered me in so many ways. Every choice she made just made me dislike her more and more".

Both CJ and Nika learned lessons about strength and motherhood from their daughters' grandmothers as Othermothers. Inside these relationships, both received indirect lessons on the pros and cons of using strength to care for someone other than yourself. For example, Nika learned the strength in committing to doing whatever is necessary for her children in the relationship with her Othermother. While she still held certain beliefs about strength, Nika acknowledged that her Othermother offered a different perspective. Nika explained:

My daughter's grandmother taught me strength, and I saw her as what I wanted my own mom to be at one point. She taught me so many different things. I still saw being vulnerable as weak, but she showed the importance of doing whatever is necessary to provide for your children legally. She worked a lot and really supported us with our kids. When they get off the bus after school, it is at her house. This happens because her dad and I are still working. I never needed anyone to babysit when they were younger. She was always willing to help because she struggled as a young parent.

Nika's adverse childhood experiences with her biological mother caused her to seek parenting advice from her Othermother, which was her daughter's grandmother. She explained: She would be the person I would call if I had questions about my kids because my mom would not have the answers. I would not dare ask because I knew what she was like

taking care of kids. She [her Othermother] definitely modeled what I saw as strength in another woman.

Similar to Nika, CJ reflected on the nature of her relationship and the lessons she learned from her Othermother. CJ identified how her Othermother taught her independence, self-reliance, and how to be a mother. After her death, CJ connected her strength to care for the needs of everyone around her as the catalyst to an early death. CJ shared:

My daughter's grandmother took me under her wing after I had her. She was definitely a Strong Black Woman, and I honestly believed her strength killed her early. I loved her so much! She really prided herself on being there for a lot of people, and it killed her in her early 50s.

When reflecting on her strength lessons, CJ explained, "She taught me how to be a mommy. She taught me how to plan, have a backup plan, and how to survive. That is why I fight so hard to get out of survival mode and get right". CJ received lessons about planning and being prepared from her biological mother. The relationship with her Othermother just reinforced those lessons after she and her mother separated. The lessons from both her mother and Othermother allowed CJ to begin progressing in life. Unfortunately, her relationship with her Othermother began to suffer once she became more self-sufficient and did not rely on her advice to be successful in life. CJ shared:

She and I became more distanced once I started becoming more self-sufficient. I went back to school, started getting my own things, and I no longer needed her as much. I think that is what drove a wedge between us. Later on, I realized that was her love language. She really needed to be doing for other people.

The more independent CJ became, the more evident the paradoxes in her relationship with her Othermother. By adhering to the strength lessons of her Othermother, CJ was able to progress forward in life. While this would appear to be a source of pride for her Othermother, CJ was met with distance because her Othermother's caregiving was more for herself than for those she helped. Caregiving allowed her to feel a sense of validation about herself and her actions. Her identity as a Strong Black Woman required someone who needed her. CJ explained:

While she had a college degree and was in a leadership position, she still worked as a caregiver to individuals with special needs. She did that kind of work for over 20 years. Can you imagine 20 years of caring for people on your job and in your personal life? Most definitely, she was the epitome of a Strong Black Woman.

Like CJ, Nika benefited from the SBW behaviors of her Othermother. Unlike CJ, Nika viewed her Othermother's strength behaviors, primarily her actions of providing for everyone, as positive. Nika was able to identify her excessive work on her job and her substantial involvement in helping raise her grandchildren as the model of strength. Both CJ and Nika's relationships with Othermothers shaped their Strong Black Woman beliefs and behaviors in adulthood.

In learning strength from their mothers, many daughters accepted their mother's teachings but sought different versions of strength in relationships with Othermothers. The relationships with Othermothers provided daughters with another Black woman's perspective on strength. Daughters reportedly used these relationships to compare and validate the effectiveness of their mothers' lessons. In turn, daughters identified these relationships as paramount in their process of creating beliefs and behaviors used in adult experiences requiring strength.

Theme: Identifying and challenging learned coping strategies from mothers

Mothers' Coping Strategies

Daughters provided an account of how mothers chose to cope with perceived depression in childhood. Some coping strategies are associated with the Sisterella complex (Jones & Shorter-Gooden, 2009) which supported Black women's use of culturally-approved coping mechanisms to manage or mask their high functioning form of depression. Sisterella's (2009) coping strategies included: overeating/food as comfort, excessive shopping, hoarding, and placing others' needs before their own. Some mothers used a combination of strategies, including the Sisterella complex and other avoidant coping strategies associated with clinical depression like isolation, religion, and alcohol to manage perceived depression.

The most prominently discussed coping strategies of mothers included excessive shopping, hoarding, and placing others' needs before their own. Daughters linked these coping strategies to financial and emotional strain in their childhood homes. Rosa recalled when she began to question her mother's spending habits, "I remember thinking to myself if my mother does not have money like she claims, why does she keep buying stuff?" Much like Rosa, Gabrielle questioned why her mother excessively shopped and hoarded items that created a dysfunctional home environment. Gabrielle remembered:

Growing up in a house where my mother was hoarding, there was much arguing about my mother's possessions, and it was not healthy for anyone. I wanted to be a child with a normal upbringing, but there was always so much chaos. I did resent her for that for many years. I still loved her very much, and we were equally protective of one another, but I still had this feeling like, "Why are you like this?"

Gabrielle further described her mother's unwillingness to manage her hoarding, "Our living room was filled with boxes from QVC. God forbid you went in there to try and get rid of something; all hell would break loose in our household." Most mothers were reported to have

purchased clothes and jewelry. Both choices are associated with Sisterella's concept of extreme makeovers, where depressed Black women focused on their external appearance to mask their internal struggles. Yet, other mothers hoarded items that reminded them of special moments during their life. Lynn shared how her mother collected memories of her late grandfather's pastoral memorabilia after his death. Marie described the items her mother collected, "she excessively hoarded encyclopedias. She was the type that would have four garbage bags full of empty toilet paper rolls". In addition to hoarding, Marie's mother used avoidance-based coping, like placing the needs of others before her own, as a distraction. While Jones and Shorter-Gooden (2009) define this action as a coping mechanism, this behavior is also associated with the SBW role. Daughters reported multiple instances where mothers used others to distract themselves from their problems. Marie recounted how her mother overextended herself to meet the needs of those she deemed less fortunate than herself. Marie shared:

My mother would get up at 3 am and go, go, go. She would be meeting one person's needs after the other, whether that was for family or people in the community. She did not like to stop. When she did, she would be drinking alcohol.

As a result, Marie recalled taking advantage of her mother in these moments of being overwhelmed. The laxness displayed by her mother allowed Marie to push boundaries which ultimately caused her to be sent to live with other family members during her high school years.

Marie explained:

I would take advantage of my mom's attitude of being overwhelmed and checking out to hang out with my friends. Let me push the limits this way or hang out a little longer. Let me do what I want and try to get away with more because maybe she will not notice me.

Maybe she will be so caught up that I can do whatever I did not need or should know how to do.

Daughters identified the manner in which mothers responded when challenged about their coping strategies influenced the closeness in their relationship. Marie's example illustrated how mothers in this study used Sisterella coping and other coping strategies not identified in the conceptual framework. Many Black mothers in this study were reported to use religious coping to manage perceived depression that greatly impacted the mother/daughter relationship. Jupiter, Ariel, and CJ described how the use of religious coping influenced the way mothers showed up for themselves, their children, and others. Jupiter describes her mother as "a true Christian servant at heart with a special place for the elderly and the church. She would go to bat for other people but not her children. As a coach, she would pour into other people's children more than her own". By disclosing words her mother shared with her, Jupiter provided additional context to how religious beliefs supported her mother, placing the needs of others before herself. Her mother exclaimed, "I do not want to waste out; I want to wear out. I am on earth to be about my father's business, so I do not have time to play around". Ariel shared Jupiter's sentiments in feeling like her mother also placed the needs of her religious organization above her own and family, "her life completely relied on the church. She was so immersed and obsessed that she would put church people before herself and her immediate family."

Daughters' descriptions of their mothers' use of religious coping are congruent with the literature describing how Black women's religious faith has been identified as a protective or risk factor for managing depressive symptoms (Heath, 2006; Beagan, Etowa, and Bernard, 2012; and Cheadle et al., 2015). Many daughters acknowledged their mothers used religion to cope and were able to distinguish between regular spiritual practices (i.e., religious institution and

frequency of church attendance behaviors) and increased religious involvement after perceived depression onset. Jupiter's family pastored various churches in her hometown, resulting in significant family involvement in regular religious activities. She provides insight into her spiritual life growing up, "My grandfather pastored five churches. We went to church A LOT! We were definitely there on Sundays, and we would be in a revival during the week. I think she would be busy with church, discussing other religious practices, and conducting lots of prayers to distract herself from her own life". Other daughters identified a significant shift away from regular family religious practices after her mother experienced a series of stressors. CJ shared how she and her mother regularly attended the same church her entire life but acknowledged that her parents' separation initiated an extreme shift in her mother's practices. CJ explained:

When I turned 18, my mother separated from my father. She became very involved in church, but not in the church we grew up knowing. It was this Holiness church where she began the process of becoming an ordained minister. However, she clung to another female minister who became her mentor. This mentor was responsible for teaching her through the ordainment process. During this time, she became very distant from me but not from the religion or her church family.

CJ shared how her mother's religious commitment did not leave room for her to focus on anyone outside of the needs of her church family. She explains, "My mom kicked me out of the house and moved her spiritual mentor into my room.". Ariel divulged how losing her grandmother's house to foreclosure sparked a religious devoutness in her mother that was not previously a part of their regular religious practices. Ariel explained:

In 1996, we moved into my grandmother's old house with my mom, brothers, their dad, my uncle, and aunt with her two children. In 2000, my mom kicked my brother's father

out of the house because he was on drugs. The house went into foreclosure, and then we suddenly started going to church. We moved into a small basement apartment which I think really hurt her because she never wanted anyone to come over. We went from not going to church to going every Wednesday and Friday night, all day Saturdays in the summer, and all-day Sundays from 11 am to 8 pm. Sundays were first service, second service, even if that meant we had to travel someplace else. We also would go to any revival service during the week. She was totally obsessed with the church.

Ariel continued her description by explaining how her mother's religious coping overshadowed all other aspects of her life, including the relationship with her children:

She has never shown up as a mom, but there was a total commitment to going to church. Even if she had to be at work at 11 pm, she went out of her way to make it to church. We could only listen to gospel music when we were in the car. When we were in church, my brothers and I did not exist. We were just figures sitting in the back that was attached to her. We would drive home in complete silence.

Mothers' use of religious coping was identified as a major stressor for daughters in this study. Experiencing religious coping in childhood impacted the way daughters identified the purpose of religion and its practices in their adult lives. Ariel explained:

I often joke that I have all of my Jesus credits from childhood, so I do not have to go to church anymore. I do not believe in heaven or hell. If heaven does exist, I am going for however many times I have gone to church.

Mothers' use of Sisterella (Jones & Shorter-Gooden, 2009) and other coping strategies challenged their relationships with daughters and contributed to a dysfunctional household in childhood.

Adult Daughters' Coping Strategies

Adult daughters recalled using coping strategies observed in mothers at various points after leaving home in emerging adulthood. Daughters managed life stressors by adopting emotion-focused coping strategies, including both avoidance and denial behaviors. Daughters described the mental and physical backlash of implementing learned coping behaviors from mothers. As a result of this newly identified awareness, daughters were receptive to receiving outside help from various intervention strategies. Interventions consisted of formal education, therapy, and newfound support systems. Before these interventions, daughters believed their mothers' versions of coping were appropriate measures to manage stress. This section is organized into four parts: mothers' coping strategies, daughters' coping strategies, pre-, and-post educational interventions to describe daughters' transition from learned to new coping strategies.

Pre-Education

Pre-education represents before daughters were exposed to formal and informal resources challenged learned coping strategies from mothers. Daughters recounted using the same coping strategies as mothers, including binge eating, staying busy, and hyper independence when stressed. In the mother/daughter relationship, daughters reported learning through direct messages or modeling the importance of independence and perseverance. In a quest to be independent, daughters experienced stressors that challenged their success and mental well-being as adults. Gabrielle recalled how her mother's lessons on independence manifested early and the difficulty in her switching perspectives in adulthood:

My mom was never one to ask for help, and I am trying really hard to unlearn this dangerous behavior. I would see the weight of managing everything caused her to be

overwhelmed and frustrated. Even still, not asking for help is a hard habit to break since I have gone 30-plus years doing so. Growing up, my parents never helped me with schoolwork. I wanted to do everything by myself. It really does you a disservice in the long term. As an adult, I tried really hard to open myself and be vulnerable to say I can not do this alone.

Gabrielle's early adoption of independence and the difficulty she experienced in adulthood highlights the permanency of socialization messaging beyond childhood with daughters. Unlike Gabrielle, who witnessed her mother's frustrations and adopted early independence to complete responsibilities without assistance, Brianna developed early emotional independence due to her mother not displaying emotion when experiencing stressors. When describing her mother's coping strategies, Brianna shared:

She did not show emotion. I guess her way of coping was that if I did not know how to feel, I guess it was not real. She always seemed like she was trying to hold it together, but there were few and far between times I ever saw her cry.

Both Gabrielle and Brianna provided accounts of childhood coping strategies while living in the home with their mothers. Other daughters reported similarities in coping once they left home for college. The demands of higher education caused both August and Jupiter to incorporate learned coping strategies for managing their stress. August shared how being in an unsupportive academic environment increased her stress levels, which took a toll on her physical and mental well-being. August explained how she modeled what she witnessed in her mother when managing stress:

My coping mechanism was food, and that was hers too. My mother slept a lot, and so did I. These behaviors were especially prominent in undergrad when I was really depressed. I used to weigh 250 pounds and could eat a pint of ice cream in one sitting.

Like August, Jupiter experienced higher education's academic and personal demands and used learned coping strategies. However, her mother did not use sedentary behaviors to cope. Instead, she would steadily keep herself busy to avoid her personal stressors. In her strength messaging, Jupiter described her mother detested idleness and equated it to laziness. Her mother also connected productivity to self-worth. So, when overwhelmed in graduate school, Jupiter disclosed how her mother's coping caused her to overwork herself:

When I was at the University of Florida, I would work myself tirelessly and thought this was the standard. During this period, I noticed I coped just like her when stressed. I get really busy and involved in many things. If I am not doing, I am being lazy and not fulfilling my purpose.

After experiencing various stressors at different periods in their lives, the daughters recognized the mental and physical toll of their learned coping strategies. This awareness was the first step in challenging learned coping strategies. Daughters also reported accepting interventions that offered alternative ways to cope after experiencing the drawbacks of coping similarly to their mothers.

Post-Education

Daughters participated in different intervention activities focused on challenging their learned coping strategies. The most common intervention involved education in various mediums. Daughters participated in informal educational interventions (i.e., advice from family

or friends) and formal educational interventions (i.e., information from educational institutions and therapy) to acquire new coping beliefs and behaviors.

After learning independence at an early age and witnessing her mother not ask for help, Gabrielle disclosed that she was struggling financially after being laid off during the Covid-19 pandemic. She declined attempts from family and friends to provide financial support. Instead, she maxed out credit cards and used her savings to meet basic needs. Gabrielle learned the importance of asking for help during an intervention where a female cousin helped her find financial assistance after receiving an expensive hospital bill while unemployed. Her cousin provided instructions and support in applying for financial assistance with various programs designed to help indigent individuals. This hands-on intervention changed Gabrielle's commitment to being independent and not seeking assistance. Gabrielle explained:

It is hard to get out of the mindset. However, it is an essential process to break the cycle of what I learned from my mom. It is a slow process to open yourself up to be vulnerable enough to say I can not do this alone. But, in doing so, it has taken much stress off me.

Like Gabrielle, Brianna struggled with emotional vulnerability after being raised by a mother committed to not showing emotion when stressed. Brianna holds a Masters in Mental Health Counseling and actively attends to clients. Her education and practice experiences offered a different perspective concerning the salience of emotion and emotional displays. Brianna described her ongoing process of unlearning her mother's coping strategies:

While still a new learning experience, I do not pretend like I am ok when I am not. I have become more vocal overall because I tend to be a strong friend and not show other people when I am going through something. I have been trying to do the opposite of what my mom does. She isolates herself and does not talk about her problems.

Brianna's formal educational intervention in mental health provided the theoretical understanding of coping and an opportunity to adopt new coping behaviors into her practice of unlearning the older ones. However, even after educational interventions, both Gabrielle and Brianna identified an ongoing and purposeful commitment to new ways of coping with stress.

August learned coping that included binge eating and sleeping caused excessive weight gain. She attributes the change in her coping behaviors to maturity, active involvement, and learned skills in therapy. August explained:

As I got older and participated in therapy, I realized some things about myself.

Nowadays, I am more aware of these issues. I went from eating a pint of ice cream to being vegan and was able to lose weight. I have therapy every other week. I am more conscious when I am down, and I do my best to figure out what is wrong with me.

Sometimes I just sit with it, and other times I do things to boost my mind. Whether it is going out for a walk or standing in the sun during Chicago's 3-degree weather, I do all these things because I am educated and know better.

Jupiter used an informal educational intervention with her sisters to change how she coped with being in a Ph.D. program. While her mother stressed constant busyness as being productive, Jupiter learned to enact boundaries between her personal and student life, which she deemed as successful when managing stress. Jupiter shared:

I am learning to be more kind to myself in the Ph.D. process. I give myself more grace because I cannot give my fullest if I pour from an empty cup. I think it is a strength to know and understand where your boundaries are. Boundaries only work when you work them, so I have not pulled an all-nighter in a year. I try not to work after 5 pm on Fridays.

I have learned to be kind by permitting myself to complain when I am tired and when life is overwhelming.

Jupiter was able to identify the negative impact her learned coping skills had on her well-being and academic performance. Jupiter's enactment of boundaries concerning her time and efforts with school responsibilities is in direct contrast to the strength messages and behaviors learned from her mother. Like Jupiter, other daughters identified the similarities and differences in their learned coping styles and used educational interventions to create new coping methods that juxtaposed learned behaviors. As a result, the daughters agreed that the newly adopted coping skills allowed for a more positive way to manage stressors and better quality of life. Many daughters incorporated these attributes when defining their version of a Strong Black Woman in the next section.

Theme: Defining and Re-defining their mothers' version of SBW in adulthood

Many daughters exposed to perceivably depressed mothers used traditional definitions identified in the literature to define Strong Black Woman roles and behaviors. As daughters defined what SBW meant in the traditional context, they disagreed with its roles. August provided an example of what she believed to be a Strong Black Woman and her desire for it to be different. She shared:

What comes up first when I think of a Strong Black Woman are things I wish we did not have to do. I wish we did not have to be stoic and take people's crap with a smile. Despite how many people beat you down, you always rise to the occasion. That is what a Strong Black Woman is, but I wholeheartedly feel like that should not be. We should not have to be this force to be reckoned with, not have any support, and lean on ourselves to be

independent. Right now, a Strong Black Woman can do anything, take on everybody's shit, and keep moving forward.

The current study's theoretical framework supported August's account of the SBW role. Black Feminist Thought (Collins, 2001) linked Black women's historical and current positioning influenced what she believed required strength from this group of women in society. Specific behaviors like not asking for help and an over-reliance on religion to cope with life stressors were viewed as a byproduct of knowing there would be no assistance for Black women. CJ described how her mother's strength behaviors contributed to how she defined a Strong Black Woman, "They think all they need is God. They especially do not need any humans to ask for help. Instead, they are the go-to person in their families and insert themselves in everything. At least that's what my mom did". While CJ identified her mother's religious fortitude as a barrier to utilizing human support, Missy's mother's conviction of not relying on anyone, especially a man, shaped her daughter's understanding of a Strong Black Woman. Missy shared:

A Strong Black Woman is alone and does not get a lot of help. I am not going to say she does not get a lot of help; she does not ask for help. She has challenges or difficulties receiving help. It is a person who is resentful and envious of other women who seem to have it easier. Strong Black Women say, "These women have it so nice. I want that life too". You can, but you wear this label or title around like a cape. So, that is the title and the roles you will wear until you change it.

When describing other Strong Black Woman behaviors she observed, Missy described:

You do not see cracks because that is weakness. After all, then I would not be a Strong Black Woman. I would be just another Black woman. It is like a level of narcissism to

say I have mastered resilience, strength, and trauma, making me better than other Black women.

All daughters connected their mothers' inability not to show emotion while experiencing life stressors to Strong Black Woman roles and behaviors. Many were adamant about not being viewed as a Strong Black Woman and redefined SBW to fit their beliefs. August said, "What I wish was a Strong Black Woman would be able to admit that we have pain and weaknesses. We need help to continue life despite our weaknesses". Missy believed her mother's version of SBW required the exertion of mental and physical energy to maintain. She explained:

My mother's depiction of a Strong Black Woman is exhausting, I have always told myself that I do not know what I have to do, but it will not be that. Whatever it is, I have seen a Strong Black Woman, and it is not beneficial. It does not look exciting. It does not look sexy, and it is not attractive. That is not what I would want for myself. My definition of being a Strong Black Woman is a working one. She is financially savvy and emotionally sound. She can allow assistance and knows how to ask for help. She can also discern when it is appropriate in romantic relationships to be submissive or not.

Like Missy, CJ witnessed her mother not ask for assistance and explained her desire not to be a Strong Black Woman. CJ shared:

She always taught me that I could not depend on anybody. Over time and as an adult, that has caused me to believe I have no support system when I do. I recently just recovered from Covid-19. While my daughter's father and I are not together in a relationship, he and his new wife were checking in on me and bringing me items. It was just a reminder that I have a support system and do not have to sit in my house and not call anyone. Growing

up, my mom taught me that no one would help you out and that followed me. As a young adult, I was a Strong Black Woman. Now that I am older, I do not hold that belief.

Some daughters described Strong Black Woman beliefs and behaviors beyond the traditional definitions found in the literature. When asked, daughters offered their SBW beliefs which did not include their mothers' strength version. For example, Lynn's version of a Strong Black Woman included self-care and boundaries. She described:

I think a Strong Black Woman finds time for self-care by taking time for herself. My whole regime at night is my time. There is great strength in saying I need to get away and do not want to talk to anyone. There is strength in saying NO. That is a word I am practicing this year. It was tough for me to say no to people in previous relationships. I would give an elaborate explanation as to why I said no. Now, I just say that is not going to work for me. I think that is just as strong as taking on another task.

Most daughters connected a Strong Black Woman to their mother's beliefs and behaviors while offering a new definition based on their own strength beliefs. These beliefs were developed after a critical critique of their mothers' observed strength behaviors. Other daughters' definitions were inspired by their personal beliefs and did not include their mother's version of strength as the standard of what it meant to be a Strong Black Woman. Daughters believed expressing vulnerability and being emotionally aware were essential components of being a Strong Black Woman. Additionally, daughters identified the validation of emotions and actively developing coping skills as strengths. Whether using their mother as the standard or their own beliefs to define SBW, all daughters reportedly rejected their mother's version of a Strong Black Woman.

Theme: Seeing Mother as a Woman

Daughters reported in their process of self-defining what it means to be a Strong Black Woman, an awareness to extend compassion towards their mothers developed in adulthood. Most mothers were seen simply as women who had experienced multiple traumas across their lifetimes, operating to the best of their abilities. After asking different family members questions about family history or mother offering direct messages, daughters pieced together the seeds of trauma that supported the roots of their mothers' behaviors. Daughters identified how these life experiences significantly influenced their mothers' parenting skills and strength messages. Daughters described these incidents as fundamentally molding their mothers' personalities and how each would experience the world.

Daddy's Girls

Some daughters disclosed how mothers' relationships with their grandfathers shaped the way strength manifested in both their lives. Mothers had either witnessed or experienced domestic violence during childhood, resulting in daughters' varied responses regarding their mothers' use of physical violence in romantic and parenting relationships. During Nika's interview, she described her exposure to domestic violence, where her mother acted as the perpetrator in romantic relationships. She connected this behavior to her mother's childhood exposure to domestic violence. Nika's mother explained to her daughter that she witnessed her father physically abuse her mother as early as the age of four and recalled the efforts her mother took to keep her safe. Nika explained:

She is just a product of her childhood traumas. Her father was physically abusive to her mother. When there would be a fight, her mother would take my mother and siblings to the neighbor's house next door. Because they lived in row homes in Philadelphia, she remembers hearing her mom getting beaten by her father. She became an abuser later in life.

Nika's mother witnessed domestic violence initiated by her father and adapted his abusive tendencies in her relationships with partners. At an early age, Nika's mother witnessed her mother's vulnerability and inability to defend herself. As a result, Nika's mother initiated violence when managing conflict with men versus being the recipient. Based on her childhood experiences with domestic violence, being able to initiate physical violence with men first was perceived as a strength and was developed in contrast to her mother's perceived weakness to defend herself from her father.

Instead of using physical violence in romantic relationships like Nika's mother, Rosa's mother used physical violence in their mother/daughter relationship. Rosa disclosed numerous childhood incidents involving physical abuse and how it shaped her awareness that strength is only physical. Rosa's advanced mental health intellect was attributed to her early academic commitment beginning in high school. Rosa internally challenged behaviors she identified as extreme responses to minor problems from an early age. Her internalization process throughout the years involved deep introspection that challenged the legitimacy of her mother's behaviors. This process allowed Rosa to link the origins of her mother's perceived depression to childhood traumas involving abuse. Ultimately, Rosa gained a greater awareness of how these experiences had shaped their interactions and strength messages. Rosa shared, "My mom was abused in every way as a kid, so she had to be strong and learn to fight back against her father." Rosa connected

her mother's willingness to use physical force as a trauma response and connected to her survival instincts. She recalled when her mother described a time when she had been strong, "She was telling us how she had gotten into a fight when she was younger with a girl in the neighborhood over a boy. She said, "I had to be strong, and I punched her in the face. Her behavior to stand her ground in adversity was connected to beliefs regarding courage and strength. Based on her mother's adverse childhood experiences, Rosa's mother used physical violence to stand her ground when parenting her children. As a result, Rosa was a recipient of her grandfather's abusive tendencies when her mother used extreme forms of corporal punishment. Like Nika's mother, Rosa's mother was aware of her father's problematic use of violence in her childhood, yet she mirrored his aggressive behaviors when raising children.

Both Nika and Rosa's mothers disclosed their childhood incidents with domestic violence involving their fathers in a timely manner which offered future opportunities for discussions with daughters. Gabrielle's mother did not disclose she witnessed her father abuse her mother and brother until on her deathbed. While reporting he never abused her, Gabrielle described how her mother positively described her grandfather and the nature of their relationship her entire life. She identified that her mother's excessive hoarding was connected to a profound control issue developed from childhood trauma. Gabrielle explained:

On her deathbed, she wrote us a letter because she could not deal with the pain anymore. She had my uncle read it to us, and it basically explained what she actually went through growing up. This letter was the aha moment describing the experiences that contributed to the behavior we saw our whole lives. Essentially, her father was actually abusive towards her mother and brother but not her. It got to a point where her mother was in the

hospital, and her brother was sent to a boarding school. She grew up in complete chaos, and I learned about it weeks before she died.

Gabrielle further elaborated:

Everything is now coming full circle. I understand my mom's behaviors were a mental health issue that stemmed from her childhood. She said she never wanted to speak on these issues because she wanted her father to be seen as a positive person. He clearly was dealing with some unaddressed mental issues, but at a different time in the 70s when mental health education was not as widely available as it is now. Watching her repeat that cycle of mental illness has inspired my sister and me to do the work to stop the cycle. I want to be the good parts of my mom and not bring in all the bad shit.

Gabrielle's mother's inaccurate portrayal of her childhood to her daughters during a period where she was physically able to answer any questions appeared to be more about control. Instead, she shared information on her deathbed where she was no longer in control, allowing her daughters to act with compassion in seeing her as a woman first. In turn, Gabrielle expressed wanting to continue the good parts of her mother after her death while leaving the animosity she held against her for the controlling behaviors stemming from her childhood experiences with domestic violence and chaos. Nika, Gabrielle, and Rosa understood their mother's aggressive and controlling behaviors were an extension of being exposed to or experiencing their grandfather's acts of violence in the household.

Seeing an overwhelmed woman, not just a mom

Other adult daughters shifted their negative critique of their mothers from childhood to view them as women overwhelmed by life experiences and responsibilities. As adults and having experienced some complexities in life, daughters extended compassion for their mother's

inability to maintain strength when overwhelmed by life circumstances. For example, August's grandmother died when her mother was very young. In turn, her mother struggled with mental illness her entire life. August explained:

My mom did not start therapy until she was 60. I remember her telling me how the therapist thought she had been depressed for a long time without it being addressed. She had my mom order one of those mood lights for winter. Interestingly, my grandmother passed away in the winter when she was 10. Apparently, the winter exacerbated all these feelings and emotions, and therapists translated that to being part of why she gets really, really depressed during the wintertime.

Marie acknowledged that after becoming a mother, she understood how life could become very heavy in the presence of your children. She mimicked her mother's coping mechanisms, like drinking alcohol in her room, to conceal being stressed and overwhelmed in front of her children. Marie questioned whether what she witnessed was perceived depression or just a woman dealing with life, based on her adoption of these behaviors as normal responses to life's problems. She stated:

Up until I had children, I saw my mom as my mom. It was not until I had a child that I realized what it was like to be a woman. You are a woman raising a being to see you as their mother and still having to raise yourself. We both were growing and learning. I am still figuring it out, but I am raising yall. It is hard to see now, but maybe she was just stressed out because of life. Having kids is stressful, mainly when you cannot feed them. That is some stressful shit because I have been through that. I saw the stress she was under trying to feed us. Now I get what it is like to go to bed hungry.

Marie described the stress involved in single parenting and co-parenting:

As a mother, you know what that means for your children. As a child, I did not know what that meant for her. I did not know what that felt like to worry about my life, feeding myself, or not having money to pay bills. I did not understand the stress of her sending us off places because we used to go back and forth with my dad. Now I get what it feels like just to send your child out the door and be separated like that.

Marie identified the similarities shared between her and her mother's coping strategies now that she is a parent:

When you put things into context, maybe she just had a lot of shit going on, and I get that now. I ain't get it as a kid, but I now know going in my room to take a minute to get myself together. Mom drank, hell, I understand because sometimes I drink too, sometimes the whole bottle. You have moments like that as a parent. So when I can say my mom was depressed, maybe she was just going through life.

As daughters experienced life as adults, they now comprehended the experiences that made their mothers women first and then parents. By understanding their mothers as women, daughters connect mothers' beliefs and behaviors with strength as a survival mechanism. It was through mothers directly telling stories or daughters piecing together information that they were able to understand the context of their mothers' lessons and their childhoods. This compassion has extended to some adult daughters reporting a newfound vulnerability which has created a safe space to express their emotions and stressors. Daughters reported the emotional suppression in their childhood caused them to lose their voice. In adulthood, they were able to find their voice and have open conversations with their mothers without fear. For example, Rosa felt like she had a good relationship with her mother in adulthood because she was able to challenge her mother's behaviors despite the physically abusive childhood that left her voiceless. Rosa shared:

I think I have a good relationship with my mom because I call her out on her stuff. If she gets mad, not to say I do not care, but you need to know what you are doing is wrong.

You need to be held accountable, too, especially at your age.

Brianna shared her process of being emotionally vulnerable with her mother when managing her own depression:

More recently, I have allowed myself to be more honest with my mother about where I am emotionally. I allowed myself to break down in front of her and say I was not ok. I think slowly but surely, I am trying to figure out how to let her into me as a woman and a person because, for so many years, I did not.

Additionally, some daughters reported a change in mothers' childhood strength messaging to now be more aligned with their personal SBW beliefs and behaviors in adulthood. CJ described how finding her voice after the birth of her daughter allowed her to receive valuable information concerning strength from her estranged mother. CJ shared:

My mother has had her spurts trying to reconnect with me, but it is always temporary. It is so much water under the bridge that it is hard to get there. About 3 or 4 years ago, she said, "you have to stop being so stubborn and let people know when you need help with something." It was like I got permission from my mom that it was ok to allow people to help me.

In this section, daughters identified the benefits of separating the woman from the parent. Understanding their mother's past provided insight into her perceived depression and childhood trauma. When daughters linked their mother's past experiences to her SBW beliefs, behaviors, and coping strategies, they were able to view their mothers more compassionately. Daughters' awareness of her mother's parenting practices as a byproduct of her extended family assisted in

managing their expectation of having a childhood more than what they experienced. Some daughters reported creating a different type of relationship to include the emotional vulnerability with mothers in adulthood that was absent in childhood. These relationships offered daughters the opportunity to challenge and be emotionally vulnerable without the fear of invoking the negative emotional responses experienced in childhood.

Chapter 5: Discussion

“Black mothers are carrying their world and the worlds of women before them up the rough side of the mountain with no shoes on.”

The purpose of this phenomenological research was to highlight how being raised by a perceivably depressed mother influenced daughter’s experiences with SBW role in adulthood. Eleven Black female participants met the criteria of experiencing the phenomenon of perceived maternal depression and exposure to cultural-specific coping strategies when living with their mothers. The term “perceived maternal depression” refers to mothers who were never formally diagnosed owing to black women’s underdiagnosis of depressive disorder. Accounting for the limited research addressing the impact of Black mothers’ mental illness in the lives of adult daughters, the goal of this study was to understand how daughters made sense of their experiences of living with a perceivably depressed mother and how it shaped their endorsement or rejection of SBW role when living in the home and in adulthood. This study is the first of its kind to study the second-generation impact of SBW and maternal depression. There is limited research where Black daughters explicitly describe home life with a Black mother with perceived mental health problems.

Theoretical and conceptual representations of SBW

The theoretical frameworks undergirding this study included Black feminist thought (BFT) (Collins, 2002; Patricia Hill, 1989; Patterson et al., 2016), the Sisterella Complex (Jones & Shorter-Gooden, 2009), and the concept of intersectionality (Crenshaw, 1990). This collection of theories aided in understanding the phenomenon of living with a perceivably depressed mother. BFT played a critical role in understanding Black women’s historical and present

oppressions, culture, and socialization practices with daughters, while Sisterella Complex provided a framework to understand the coping strategies adopted by Black women to manage depression. The concept of intersectionality in this study framed how various oppressions experienced by both mothers and daughters contributed to their experiences with SBW roles across time. Each research question and sub questions are connected to the theoretical perspectives guiding this study.

The questions that guided the research were as follows:

1. How does living with a perceivably depressed Black mother influence daughters' experiences with Strong Black Woman *beliefs* in adulthood?
 - 1a. How does perceived depression influence the socialization messages received in childhood?
 - 1b. Are these messages translated into the adult lives of daughters?
2. How does living with a perceivably depressed Black mother influence daughters' experiences with Strong Black Woman *behaviors* in adulthood?
 - 2a. How does perceived depression influence the mother/daughter bond?

Analysis of the data produced five primary themes and multiple subthemes. The primary themes were: (1 The making of Strong Black Girls; (2 Alternative strength lessons and Othermothers; (3 Identifying and challenging learned coping strategies from mothers; (4 Defining and re-defining their mothers' version of Strong Black Woman in adulthood; and (5 Mother as a Woman. This chapter begins with an overview of findings. This is followed by key findings from each theme, the connection to the literature and to the study's theoretical frameworks along with gaps and contradictions in the current literature. The chapter concludes

with an overview of the study's limitations, implications for professional practice, and recommendations for future research.

Overview

In the present study, daughters of depressed mothers used the lessons learned from their lived experiences with mothers and Othermothers to reject traditional SBW beliefs and behaviors to self-define what it means to be a Strong Black Woman in adulthood. These participants came to acknowledge strength as receiving and asking for help when appropriate which contradicted their earlier child- and - adolescent socialization messages from mothers that endorsed independence and self-reliance. Almost all daughters described Othermothers as displaying a different version of strength from mothers. Contrarily, one daughter acknowledged her Othermother's commitment to a traditional SBW role which was similar to her mothers'. The phenomena of living with a perceivably depressed mother resulted in daughters endorsing traditional SBW beliefs and behaviors to manage personal stressors and dysfunctional households at an early age. Adult daughters described mothers as strict and authoritarian and were left to feel voiceless in expressing frustrations with home life involving their mothers' extreme emotional responses (i.e anger) and culturally endorsed coping strategies (i.e., hoarding and religious coping). As a result, daughters described feeling optionless with significant damage being caused to their mother/daughter relationship bond.

Beginning in early adolescence, daughters were exposed to different strength beliefs and behaviors through their interactions with Othermothers. Both mothers and Othermothers provided lessons in the form of modeling and direct messages that shaped adult daughters' adult experiences. In emerging adulthood and not living with mothers, daughters utilized learned coping strategies to manage life stressors. As a result of their personal experiences, daughters

came to regard their mothers' strength lessons as maladaptive and the cause of psychological and physical strain. Daughters' shift in consciousness was supported by formal and informal resources which aided in the creation of more effective coping strategies. These strategies became synonymous with daughters' self-defined version of a Strong Black Woman. In this study, all daughters rejected their mothers' version of SBW in adulthood. Through conversations with mothers and family members in adulthood, daughters linked their mothers' version of SBW to adverse childhood experiences with domestic violence perpetuated by their fathers. Seeing their mothers as women and not just a parent, daughters acknowledge their mothers' strength beliefs and behaviors as an appropriate survival mechanism based on their lived experiences.

The next sections will be organized by childhood and adulthood to provide a richer discussion regarding the emerging themes in this study. The childhood section will explore how daughters' living with mothers shaped their understanding of SBW role in childhood. The adulthood section begins with daughters shaping their own SBW beliefs and behaviors beginning in emerging adulthood. This section focuses on daughters' adult understanding of SBW role.

Childhood

The Making of Strong Black Girls

Dysfunctional Households

The goal of this study was to understand how adult daughters made sense of living with a perceivably depressed mothers and how it shaped their endorsement or rejection of SBW while living at home and in adulthood. Daughters of perceivably depressed mothers endorsed traditional SBW beliefs and behaviors at an early age to manage dysfunctional households with their mothers. With respect to the first research question, these daughters endorsed independence

and self-reliance to manage dysfunctional home environments involving extreme religious coping practices and hoarding by mothers. This finding is consistent with that of Foster (2010) who described how the unpredictability of emotional dysregulation caused hostile home environments, like unorganized living spaces and exposure to parent's mood instability, for children with mentally ill parents. In the current study, daughters who experienced parentification, including household management tasks (i.e., applying for benefits, cooking, and washing clothes) and providing support to mothers, reported this process as burdensome. Petrowski and Stein (2016) described daughters of depression's relationship with parentification, or role reversal, as requiring independence and maturity in providing caregiving tasks typically assigned to mothers. As a result of their experiences, daughters reported either rejecting or embracing the parentification role when living with their mothers. Thus, supporting the idea that individuals process this responsibility differently.

Using emotional suppression to cope

Women who endorse the SBW role often utilize emotional suppression to manage stressors (Beauboeuf-Lafontant, 2009). With respect to the second research question, it was found that, in childhood, daughters in this study used traditional SBW behavior involving emotional suppression to manage their mothers' emotional dysregulation. In addition to using emotional suppression, another important finding described the development of daughters' hypersensitivity to mothers' unstable moods and the use of avoidance techniques to mitigate potential conflict between the two (Murphy et. al, 2018). This finding broadly supports the work of other studies in the area linking adult children's accounts with managing parental mental illness in childhood (Källquist & Salzmänn-Erikson, 2019; Mordoch, 2010; Mordoch & Hall, 2002; Patrick et al., 2019). What is interesting is that some daughters reported emotional

suppression as both a belief and a behavior. As a belief, daughters recalled their mothers' socialization messages associated crying or other emotional displays as weakness to support the use of emotional suppression. As a behavior, daughters described their unwillingness to show emotion when mothers inflicted emotional and physical harm as a protective measure.

Daughters' reports of socialization for emotional suppression is consistent with that of Hooper et al. (2018) who found Black preschoolers modeled the emotional expression of mother and if responded negatively, this act to encourage children to practice emotional suppression. These results further support the idea that mothers' emotional dysregulation acted as both a stressor and strength lesson in early childhood for daughters in the current study. Stressors associated with managing their mothers' mood instability resulted in daughters implementation of learned strength messages which associated emotional displays with a sign of weakness and an ineffective strategy for overcoming life's challenges.

Mothers strength lessons and alternative versions with Othermothers

SBW to manage interpersonal relationships vs. societal marginalization

The current study's findings offered contextual differences to the circumstances under which Black daughters endorsed SBW beliefs involving independence and self-reliance not previously identified in the literature. In previous literature focusing on mother/daughter strength socialization messages, daughters learned the importance of independence and self-reliance when managing racial and gender oppressions (Oshin & Milan, 2019; Patricia Hill, 1989). Contrary to my expectations, the current study did not find any instances where daughters' childhood strength beliefs involved managing racial oppressions. Surprisingly, daughters were found using SBW beliefs to manage oppressions at the interpersonal level (i.e., relationship challenges with individuals) and not at societal level (i.e., systemic discrimination and racism). A

possible explanation for this finding is that daughters were focused on surviving the immediate oppressions experienced inside the home which may have overshadowed their awareness of the need to address outside societal challenges. Another explanation for this finding is that Black daughters are socialized at a very young age to take on tasks that contribute to the wellbeing of the entire family and not just themselves (Collins, 1991; Denby, 2018; McLoyd et al., 2019). While daughters may have resented being independent and self-reliant at a young age, collective Black familial and cultural beliefs supported their acceptance of this responsibility.

Mothers' strength as masculine

A strong relationship between Black mothers' socialization practices and daughters' understanding of strength, resilience, and identity has been reported in the literature (Collins et al., 1991; Everet alt et al., 2016; Hall, 2015). In these relationships, "girls establishing feminine identities by embracing the femaleness of their mothers (Collins, 1991)" contributed to daughters adoption of SBW role (Beauboeuf-Lafontant, 2009; Collins et al., 1991). Daughters of depression did not identify with or endorse their mothers' versions of feminine strength (Beauboeuf-Lafontant, 2016; Davis-Maye & Perry, 2007; Everet alt et al., 2016; Green, 2019; Hall, 2015; Walker, 2004; Watson & Hunter, 2016). Daughters learned strength as hyper-independence without the expectation of help from others, especially a man, and the importance of resilience to perseverance in life. In addition, daughters reported mothers' believed strength was physical and used as a protective factor which resulted in them witnessing verbal and physical altercations in childhood.

Daughters reported mothers' strength displays as more masculine, citing aggression, suppressed emotions, and the lack of submissive behaviors, all of which are closely associated with the Matriarch controlling image described in this study's theoretical framework (Collins,

2002; Simmons, 2020; Staples, 1981). These behaviors associated with the Matriarch's controlling images speak to experiences of Black women in American society and act as protective factors (Hudson-Weems, 2019; Simms, 2001; Staples, 1981; West, 1995). Daughters described how mothers, from an early age, were exposed to family violence, poverty, and relationship instability with their fathers and how these experiences shaped their mothers' worldview regarding the acceptance of help. The socialization messages daughters received stressed independence without expectations of a man to help which are linked to the Matriarch controlling image, stereotypical imagery designed to weaponize Black women's independence due to life circumstances (Hill-Collins, 2001). It is important to note that daughters in this study were raised in Matriarchal households where women were solely responsible for the wellbeing of the family, even if they were married. It is also important to note, the adaption of such Matriarchal behaviors was not attributed to the internalization of stereotypical images of Black womanhood as outlined in the research (Brown et al., 2013; Brown Givens & Monahan, 2005; Pinel, 1999; West, 1995) but to these mothers' exposure to life experiences involving the abuse of power by men and to their personal resilience.

Othermothers and Traditional Gender Roles

Relationships with Othermothers were more significant to daughters' endorsement of different feminine behaviors that contrasted with those endorsed by their mothers. These included: displays of emotion, physical attractiveness, non-confrontational conflict management, and submissiveness. These attributes were reported as more attractive than mothers' feminine displays. These findings are supported in foundational gender literature outlining the beginning of acceptable versions of femininity first introduced to American society during the 19th century for middle class to wealthy White women through media, religious, and social teachings (Degler,

1974; LeGates, 1976; Mitchell, 1981; Roberts, 2002; Welter, 2012). Outside of relationships with Othermothers, daughters reported living in closed environments and the consumption of media may account for daughters' endorsement of traditional gender roles and stereotypical beliefs concerning Black women and strength. Scharrer (2013) identified media as another possible medium in which children learned about gender roles, citing greater emphasis was placed on women's physical attractiveness and less aggressive nature, both of which were identified in daughters' reports. In the limited literature focusing on media consumption and Black girls, researchers identified music videos (Ward, 2004; Ward et al., 2005), cinema (Ward & Grower, 2020), and reality tv (Coleman et al., 2020) as factors in the adoption of traditional gender roles and stereotypes concerning Black women (Scharrer, 2013).

Adulthood

In the current study, daughters reported their mothers' use of culturally specific coping strategies, particularly excessive spending/compulsive buying, hoarding, and religious coping, contributed to a dysfunctional household environment resulting in their adoption of traditional SBW roles at an early age. In this section, excessive spending/compulsive buying and hoarding will be discussed, while religious coping will be discussed later in the chapter. The findings in the current study are supported by the study's conceptual framework, Sisterella, and its identification of culturally acceptable coping strategies, like excessive shopping, were utilized by Black women reportedly experiencing high functioning depression (Jones & Shorter-Gooden, 2009).

Identifying and challenging learned coping strategies from mothers

While the topic of excessive buying/compulsive shopping is an understudied research area, there are no known studies that link secondary accounts of adult Black women raised in

households with perceivably depressed mothers who compulsively acquired and hoarded items and its association to SBW role. Excessive shopping/compulsive buying is distinguished from normal, recreational shopping by two major factors: dysfunctional object attachment and a sensitivity to reward (Lawrence et al., 2014). Several studies found individuals suffering from unhealthy attachments to objects have experienced early life traumas (Baker et al., 2013; Fontenelle et al., 2021), stressful life events (Lawrence et al., 2014), negative mood (Moulding et al., 2021), and depression (Kyrios et al., 2020), which daughters acknowledged their mothers to have experienced. Additionally, the pleasure-seeking behaviors observed in excessive shopping/compulsive buying is linked to the reward sensitivity observed in individuals with addiction and gambling disorders (Díez et al., 2018; Lawrence et al., 2014).

Dysfunctional object attachment

Early childhood traumas

Daughters disclosed their mothers' early life traumas included instances involving exposure to family violence, death of a parent, child abuse, and sexual abuse which contributed to an unhealthy attachment to objects noted in these women. Prior to the manifestation of hoarding behaviors in adulthood, early childhood experiences involving loss and deprivation are linked to an increased unhealthy, emotional attachments to objects and timing of such events strongly predicted the type of hoarding these individuals would practice (Baker et al., 2013; Fontenelle et al., 2021). As a result of these early experiences, mothers' cognitive schemas included beliefs and motivations that fueled hoarding tendencies observed by daughters (Baker et al., 2013; Fontenelle et al., 2021; Landau et al., 2011). The extent in the variation of hoarding practices described by daughters could explain how the severity of mothers' exposure to early

childhood traumas influenced their hoarding and why some mothers used compulsive buying while others used compulsive acquisition, both different subsets of hoarding practices.

Negative mood and depressive symptoms

Mothers were reported to shift their mood from negative to positive by using excessive shopping/compulsive buying and is consistent with the relationship identified between excessive shopping/compulsive buying and poor coping behaviors for negative emotions (Kyrios et al., 2013; Landau et al., 2011; Leite & Silva, 2016). Mothers experiencing a series of negative emotions utilized excessive shopping/compulsive buying to cultivate a temporary sense of euphoria responsible for elevating their negative mood yet dissipated quickly resulting in further depressive symptoms (Miltenberger et al., 2003). Both excessive shopping/compulsive buying are found to have a negative feedback loop where one behavior influences the others and vice versa (Kyrios et al., 2013). Daughters reported mothers who used excessive shopping/compulsive buying quelled the negative emotions momentarily and experienced short-term relief due to the consequences associated with their purchase behaviors (i.e., overspending) promoted depression. Mothers reportedly continued with these coping patterns despite how these behaviors resulted in financial hardships and relationship strains with family members.

Discrepancies in self-identifications

Daughters reported mothers' self-identification with SBW negatively contributed to how these women chose excessive shopping/compulsive shopping instead of professional mental health services to manage perceived depression. These findings are supported in research linking the concept of self with object attachment in hoarding and compulsive buying. Individuals with "underdeveloped, ambivalent, or discrepant self-concept were vulnerable to dysfunctional object attachment" (Higgins, 1989). Some mothers in this study who closely identified with internalized

strength beliefs also had an unhealthy attachment to objects. As a result, they experienced negative emotions when their reactions to stressors were incongruent with how they internalized themselves to be strong Black women (Barnett et al., 2017; Higgins, 1987, 1989; Higgins et al., 1985). These internalized strength discrepancies held by mothers' presented negative moods that endorsed excessive shopping/compulsive buying as acceptable coping behaviors (Moulding et al., 2021). It is important to note, excessive shopping/compulsive buying is the mechanism for hoarding practices. A possible explanation for these findings is that the incongruent self-image in mothers' promoted unhealthy object attachment resulting in various forms of hoarding practices that contributed to a dysfunctional home environment. The internalization of SBW role in mothers and excessive shopping/compulsive buying existed in a negative cycle reinforcing both unrealistic expectations of self to manage stressors and the utilization of poor coping strategies (Moulding et al., 2021). The consequences from mothers' purchases created additional life stressors (i.e., financial strain and poor interpersonal relationships) which required these women to rely on internalized SBW roles to cope.

Reward Sensitivity

In the current study, the variation in buying severity of perceivably depressed mothers explained why some mothers regularly engaged in compulsive shopping and others with sporadic shopping binges. Albeit, these behaviors acted to both alleviate and contribute to negative emotions and depressive symptoms. People suffering from excessive shopping/compulsive buying are believed to have a sensitivity to rewards and behavioral phenomena observed in compulsive buying is likened to other reward sensitive disorders like drug and gambling addiction (Bani-Rshaid & Alghraibeh, 2017; Díez et al., 2018; Lawrence et al., 2014). While no daughters in this study spoke of mothers' having drug addictions, many described how their

mothers used food to cope with stress. Food addiction is also associated with individuals with reward sensitivities. For example, Loxton and Tipman (2017) found women who practiced emotional eating also had higher reward sensitivities and food addiction symptoms, which may explain why mothers in this study who practiced emotional eating were also reported to either compulsively shop or acquire items that lead to hoarding practices.

Individuals with compulsive buying behaviors are also more likely to experience depressive symptoms than those suffering from other reward sensitive addictions (Díez et al., 2018). It is unclear whether increased reward sensitivity associated with excessive shopping/compulsive buying predicts depressive symptoms (Bani-Rashid & Alghraibeh, 2017). When examining both excessive shopping/compulsive buying and depression, women are noted to experience these disorders more frequently than men (Bani-Rashid & Alghraibeh, 2017; Leite & Silva, 2016; Lejoyeux et al., 1997). For example, Kyrios et al. (2020) identified a relationship between women with increased thoughts of purchasing significantly predicted compulsive buying but depression was not a predictor of buying severity. However, the lack of data available on the topics prevents from definitively understanding how depression influences both gender and compulsive buying.

In the current study, there were mothers who did not excessively or compulsively purchase items but did compulsively hoard what daughters identified as insignificant mementos (i.e., plethora of event programs) or household items (i.e., trash bags of empty toilet paper rolls). There is a noted relationship between excessive shopping/compulsive buying and hoarding, yet the current gap in the literature fails to separate the motivations for compulsive acquisition from general hoarding constructs. Compulsive acquisition includes “hoarding possessions that were discarded by others” (Frost et al., 1998). More information is needed to understand the

underlying social and biological factors that contribute to compulsive acquisition in hoarding practices.

In conclusion, daughters' disclosures of various early childhood traumas and internalized SBW role with mothers was supported by the current research's identification of specific circumstances that increased the susceptibility to hoarding practices. A possible explanation for the current findings is that mothers' hoarding practices are associated with incongruencies in their strength identity that did not match their reactions to life's stressors. This strength identity was formed from their resilience involving overcoming early childhood traumas. Their identity incongruencies held both internal and cultural consequences that resulted in emotional distress and the use of excessive shopping/compulsive shopping when believed to not behave as Strong Black Women. These actions had significant financial and relationship repercussions resulting in dysfunctional household dynamics experienced by daughters. As a result, daughters were challenged to use traditional SBW roles at an early age to manage consequences of their mothers' hoarding practices. Importantly, these findings showcased the relationships between mothers' childhood traumas and internalized traditional SBW beliefs and behaviors increased their likelihood of having an unhealthy attachment to objects thus contributing to a dysfunctional home environment for daughters. These findings also provided a culturally-relevant account of hoarding motivations and behaviors in Black mothers missing from the literature and evidenced the origins of specific hoarding behaviors in Black mothers', including the exposure to early family trauma and its connection to dysfunctional home environments, a dominant feature widely associated with depressed mothers and children (Downey & Coyne, 1990; Foster, 2010; Gillian et al., 2018; Goodman & Gotlib, 1999; Grové et al., 2016; Källquist & Salzmänn-Erikson, 2019; Mordoch, 2010; Mordoch & Hall, 2002; Petrowski & Stein, 2016).

Defining and Redefining Their Mothers' Version of SBW Beliefs and Behaviors

All daughters in this study rejected traditional SBW beliefs and behaviors of presenting strength and not asking for help which are both consistent and contradictory with current research pertaining to the characteristics of strong Black women (J. A. Abrams et al., 2019; Beauboeuf-Lafontant, 2016; Green, 2019; Watson & Hunter, 2016; Woods-Giscombe et al., 2016). Due to the early socialization of strength with Black women beginning in childhood, Davis and Jones (2021) identified three options these adult women have with the SBW image: subscribe, reject, or change. In the current study, daughters utilized their early adoption of SBW roles that developed from managing their mothers' emotional dysregulations, coupled with personal experiences in early adulthood, to both reject and change traditional SBW beliefs and behaviors. Specifically, daughters rejected and changed how they viewed performative strength, a belief and behavior endorsed by Black women which encouraged strength displays and discouraged emotional vulnerability when managing stressors (Beauboeuf-Lafontant, 2016). For example, daughters' in this current study indicated that crying in the face of abuse was seen as weakness by mothers. Performative strength in the lives of Black women is associated with the development of depressive symptoms (Abrams et al., 2016; Belgrave and Adams, 2016; Carter and Rossi, 2019; Donovan and West, 2014; Green, 2019), influencing help-seeking practices for professional mental health services (Campbell and Long, 2014), and maladaptive coping behaviors (Beaubouf- Lafontant, 2007; Jones and Shorter- Gooden, 2009).

Daughters rejected the endorsement of performative strength as a characteristic of strong Black women only after personally experiencing the psychological backlash in early adulthood which is inconsistent with current research. Despite being fully aware of the psychological risk,

some Black women still endorsed SBW role, including the use of performative strength and decreased emotional vulnerability (Nelson, Cardemil, and Adeoye, 2016). Women have identified socialization, particularly their modeling of their mothers and grandmother's performative strength (Beauboeuf-Lafontant, 2016), along with cultural (J. A. Abrams et al., 2019) and gender (Green, 2019) expectations as driving their endorsement decisions. However, it is unclear whether personal experiences with negative mental health outcomes would yield another perspective.

In the current study, a possible explanation could consider how the daughters' home environment with a perceivably depressed mother offered an opportunity to both witness and practice performative strength across time. Thus, allowing daughters' personal instead of vicarious experiences and cultural beliefs to guide their informed decision of whether to endorse performative strength or to ask for and receive help. Black women's unwillingness to endorse performative strength was changed to be identified positively within the daughters' version of SBW in adulthood; this action reversed the negative associations with women's displays of emotional vulnerability noted in SBW research (Watson & Hunter, 2016; West et al., 2016; Woods-Giscombe et al., 2016) and the study's theoretical and conceptual framework.

After successfully implementing their redefined version of SBW to include asking and receiving help for life stressors, daughters acknowledged an improved quality of life which further supported their understanding of performative strength acting as a barrier to mental wellness. Daughters' rejection and understanding of performative strength contradicts the emotional experiences of other Black women (Nelson, Shahid, Cardemil, 2020). Daughters' choices redefined what it meant to be strong Black women and inspired help-seeking practices

not observed during childhood with perceivably depressed mothers which ultimately shaped their experiences with SBW beliefs and behaviors in adulthood.

Mother as Woman

As part of redefining SBW beliefs for themselves these daughters acknowledged how their mothers' childhood experiences with early traumas, including witnessing domestic abuse of grandmothers, influenced their adoption of SBW role and the independence socialization messages transmitted to daughters. Daughters' understanding of their mothers as women was constructed from information gleaned from relationships with Othermothers, personal experiences in emerging adulthood, and informal and formal mental health resources. These findings are consistent with the study's theoretical framework, Black feminist thought, particularly how Black women's social position in America influenced their exposure to physical abuse, sexual exploitation in the Black community, and larger society has shaped their mental well-being across time (Collins, 2002). Like their mothers, these daughters adopted SBW beliefs and behaviors at an early age to manage dysfunctional households and early life traumas.

Adverse Childhood Experiences

Daughters reported their mothers' early life experiences significantly influenced their mother/daughter relationships and contributed to their mothers' adoption of SBW beliefs and behaviors. These Adverse Childhood Experiences (ACE) involved a host of early circumstances shown to impact the mental, emotional, and physical wellbeing of adults. ACEs negatively interfere with development, including decreased mental wellbeing for individuals with exposure to multiple ACEs and supports the current study's findings and theoretical framework, *Black feminist thought*. Early research on ACEs focused on the impact of early exposure to household

dysfunction and child abuse on middle class, White Americans but failed to acknowledge how other social factors, like race, contributed to adverse experiences of other minority populations, especially Black Americans (Felitti, 2002; Felitti et al., 1998; Hampton-Anderson et al., 2021). The current study's theoretical framework, *Black feminist thought* (2001), described the matrix of domination (structural, disciplinary, hegemonic, and interpersonal) as power imbalances in American society influencing the daily lives of Black women and daughters. In the current study, mothers' early exposure to hegemonic power, the endorsement of gendered expectations promoted in social institutions (i.e., church), and interpersonal power imbalances amongst Black men and women resulted in personal trauma that contributed to perceived depression and strength beliefs and behaviors. Daughters reported mothers' early exposure to family violence, poverty, sexual and physical abuse, and parental death contributed to how mothers endorsed the expectation of strength from themselves and subsequently from their daughters. Furthermore, researchers focusing on the impact of ACEs in Black Americans cited the need to understand how history, community, and culture further increased the vulnerability of Black Americans. In the creation of a framework to understand ACEs in African Americans, researchers stated:

The combination of historical-systemic, community (i.e., racism, deep poverty, police brutality, deficits in child protection), intergenerational, and personal trauma exposure may impact African Americans stress related biology and approach to coping and thus render them more vulnerable to the negative long term effects of ACEs (Hampton-Anderson et al., 2021).

Many mothers were reported to have multiple ACEs and poor romantic relationships in adulthood which significantly impacted their mental wellbeing and was supported by research

recognizing the long-term consequences of ACEs (Narayan et al., 2021). Daughters reported witnessing inter-partner violence, abandonment, and divorce as factors that contributed to mothers' perceived depressive. However, it may be possible that many mothers in this study were actually suffering from post traumatic stress disorder (PTSD) from ACEs and adult traumatic experiences and the reported behaviors observed by daughters were connected to something larger than just perceived depression and SBW role (McLaughlin and Lambert, 2017). Like research focusing on the impact of traditional SBW beliefs and depression, individuals suffering from PTSD also have poorer help seeking behaviors and expressing behaviors that are identical to depressive symptoms (Narayan, Liberman, and Masten, 2021). Behaviors associated with "stress sensitization, maladaptive stress reactivity and regulation, deficits in social information processing, and emotional regulation (McLaughlin and Lambert, 2017)" are all identified in diagnostic criteria for both PTSD and depression. While there are noted similarities and potential overlaps, more information is needed to understand how ACEs contribute to both PTSD and SBW beliefs and behaviors that may manifest as depression for Black women before making any credible claims.

Separating perceived depression from mothers

Daughters reported strained mother/daughter relationships with perceivably depressed mothers in childhood. Prior to daughters having personal experiences with mental stressors and receiving education resources in emerging adulthood, they were unable to recognize the challenges their mothers faced as Black women and how this impacted their mental wellbeing. This shift in daughters' perspective is better understood using Kaimal and Beardslee (2010) research focused on understanding emerging adults' perspective of parental depression. Their

framework identified three categories for the various perspectives associated with emerging adults of depressed parents to include: self-oriented, ambivalent, and other-oriented perspectives. Shifts from self-oriented perspectives to other perspectives happened across time and under different circumstances. The findings from the current study are similar and different from Kaimal and Beardslee (2010).

Researchers (Kaimal & Beardslee, 2010) described the self-oriented perspectives category included rejecting and negative perspectives. Within this category, emerging adults were unable to separate their parents from the disease, meaning the behavioral implications of depression were thought to be associated with the parents' identity described negatively by emerging adult children. Parents were described as "inscrutable, frightening, stressful, and/or unpleasant" (p.1216), however participants were able to shift from negativity once they lived separately from depressed parents (Kaimal & Beardslee, 2010). The findings from the current study are similar and different from Kaimal and Beardslee (2010) definition of self-oriented perspectives in emerging adults. Daughters in this study did not report rejecting perspectives but did hold negative perspectives when living with mothers. Nevertheless, some daughters in this study were still exposed to rejecting perspectives in family members when they did not assist in managing their mothers' emotional dysregulation behaviors. The difference in these findings and the current study is that all daughters reported knowing something was "off" about their mothers' behavior. All daughters reportedly lacked the vocabulary and exposure to mental health resources to fully communicate their concerns with their mothers' perceived depression, which is different from Kaimal and Beardslee (2010) findings that some emerging adults recalled not holding an awareness of parental depression completely. First-hand experiences with their

mothers' behaviors increased daughters' negative perspectives of mothers which inhibited their ability to separate their parent's identity from the disease.

Ambivalent perspectives were identified as emerging adults having a mix of emotions that were conflicting in nature when living with depressed parents. The most reported emotions were "negativity and compassion" with researchers citing "the respondents expressed conflicting perspectives of both a desire to be compassionate toward the parent's situation while also feeling frustrated by their inadequacies as a parent" (Kaimal & Beardslee, 2010). These findings are similar to daughters who reported being parentified in household tasks and also taking responsibility for their mothers' behaviors. These daughters understood their mothers' possessed limitations, even if, they were unable to fully comprehend the problems. Ambivalent perspectives initiated the process of separating the parent and the illness and allowed for the acknowledgement of the presence of depression. This perspective was psychologically burdensome for many taking responsibility for their parents' mood and wellbeing which is supported in the current study's findings.

Daughters described feeling overwhelmed with the adult-like responsibility in their childhood households and how it challenged the power dynamic in the mother/daughter relationship. Many daughters reported feeling like they were raising their mothers instead of their mothers raising them. Kaimal and Beardslee (2010) described the sense of ambivalence was enhanced when having personal experiences with depression resulting in their assuming additional household and familial responsibilities which was different in the current study. Daughters assumed household and familial responsibilities when living with mothers and did not report mental health challenges until living apart in emerging adulthood. Additionally, daughters

reported taking on household and family duties out of survival and not because of a shift in perspective towards compassion or acceptance. Daughters accounts of parentification were mainly viewed as negative and did not serve to shift their perspectives while living with mothers.

Daughters reported a shift from self-oriented perspectives to other-perspectives once they were no longer living in the same households as mothers and having personal experiences with mental health challenges. The current study is both similar and different from Kaimal and Beardslee (2010) findings citing personal experience was not required for emerging adults to shift their perspectives concerning parents. While this was not the case for the current study, personal experiences with mental stressors contextualized their mothers' strength socialization messages and coping behaviors which assisted in soliciting other perspectives like acceptance and compassion. This shift allowed daughters to separate the disease from their mothers by identifying other factors like ACEs, poor romantic relationships, and mental stressors particular to Black women as contributory to the behaviors associated with their mothers' perceived depression.

Most Significant Finding: Maternal religiosity, socialization practices, and adult daughters SBW beliefs and behaviors

Religion emerged as a factor that influenced all other themes and experiences. In the current study, adult daughters reported religion as a stressor when describing their lived experience with a perceivably depressed Black mothers. Beginning in childhood, these early experiences shaped how daughters understood the function of religion in their lives and its connection to adult SBW beliefs and behaviors. Daughters' understanding of religion as a stressor significantly differs from other Black women's accounts of the function of religion

transmitted in the mother/daughter relationship. Religion is very important in the lives of Black people and families and is regarded as a tool for managing life stressors, particularly instances involving gendered racism with Black women. For example, in previous studies adult Black women recognized early socialization practices conducted by mothers as pertinent in their skill development to manage instances involving racism and sexism and involved using religion to build internal fortitude and resiliency (Caughy et al., 2011; Joyce E Everet et al., 2016; Frabutt et al., 2002; Hughes & Chen, 1997; McHale et al., 2006; Sellers et al., 2006; Thomas & King, 2007). Also, women described how mechanisms like the modeling of mothers' religious practices (Joyce E Everet et al., 2016), church attendance at an early age (Denise Davis-Maye & Tonya E. Perry, 2007; Joyce E. Everet et al., 2016), and open communication (Gaylord-Harden et al., 2013) assisted in the transmission of religious importance in the mother/daughter relationship.

Daughters in this study identified and understood religious socialization practices as being both similar to and different from those of other Black women. In the current study, daughter's description of their mothers' religious coping practices were similar to accounts of non-depressed Black women who identified the use of reading religious doctrines, prayer, and church attendance as religious coping behaviors (Dessio et. al, 2004). Black women endorsing religious coping identified the role closeness in mother/daughter relationship plays in the transmission of religious importance (Gaylord-Harden et al., 2013), however the mother/daughter relationship for women in this study was reported as strained or distant. Daughters described their mothers' overreliance or imbalance in religious coping practices resulted in daughters experiencing religion negatively and contributed to a dysfunctional household in childhood.

It is important to recognize how emotional dysregulation, specifically mood instability which is commonly reported amongst women suffering with depression (Alessandra Turini & Sonia Regina, 2020; Foster, 2010; Hentges et al., 2021; Mordoch & Hall, 2002; Murphy et al., 2015), acted as a barrier to fostering closeness and warmth for communication as described in other Black women's religious socialization experiences. Whether through modeling or direct messages, perceived depression inhibited effective communication in the mother/daughter relationship concerning religious importance. Daughters' identification of excessive church attendance, strict adherence to religious doctrine, strict religious parenting, and the changing of religious affiliation acted as stressors and contextualizes how perceived depression may alter the intensity and severity of Black mothers' religious coping behaviors and parenting practices. Some daughters reported physical and mental maltreatment by mothers who regularly attended religious services, acknowledging mothers were different women at church and at home. These experiences contributed to an altered understanding of how religious coping would assist in managing daughters' personal stressors involving living in a dysfunctional household with a religious and emotionally dysregulated mother.

As adults, daughters experienced religion differently than their mothers. Support for this claim can be found in literature examining the transmission of parental religiosity to children. Several studies found the transmission of religiosity functioned differently according to the parental circumstances that influenced parenting practices (Dollahite & Marks, 2009; Dollahite et al., 2019; Gur et al., 2005; Stearns & McKinney, 2019). When adult children of religious individuals believed they received positive parenting in their childhood, this encouraged the successful transmission of their parents' religiosity (Stearns & McKinney, 2019). However, parental circumstances, like maternal depression, have been found to inhibit the transmission of

religiosity in children, especially daughters (Gur et al., 2005; Jacobs et al., 2012; McClintock et al., 2019; Stearns & McKinney, 2017, 2019). For these parents, their version of religiosity included behaviors which significantly influenced whether children viewed religion positively and useful across the lifespan (Florr and Knapp, 2001).

Daughters in this study negatively described home life with mothers and acknowledged factors such as authoritarian parenting style, lack of communication, and distance in the relationship which is also highlighted in literature as parenting practices inhibiting the transmission of parental religiosity to children (Dollahite & Marks, 2009; Dollahite et al., 2019; Dollahite et al., 2004; Flor & Knapp, 2001; Jacobs et al., 2012). For example, Dollahite et al. (2019) acknowledged the degree of religiosity held by parents impacted how they parented children and supports daughters' reports of highly religious mothers having strict parenting practices. In Black families' religious practices (Gutierrez et al., 2014; Murry et al., 2018), particularly the influence of Black mothers' religiosity (Dessio et al., 2004; Mattis, 1997), heavily influenced their children's understanding of the importance of spirituality and its practices (Brody et al., 1996; Butler-Barnes et al., 2017).

Flor and Knapp (2001) argued the transmission of parental religiosity is significantly altered by several factors and emphasized how the stress involved in living with a depressed mother altered the closeness and communication with adolescents and altered the modeling practices deemed critical in the transference of religiosity. Additionally, depressed mothers were found to model religiosity that discouraged children from being pious in adulthood (Flor & Knapp, 2001). The results from the current study are similar to Flor and Knapp's (2001) findings and further explains why daughters in the current study decided to model religion differently than their mothers in adulthood. These findings illuminate the gap in the literature

contextualizing how individuals from different ethnic and racial backgrounds experience the transference of religiosity and adds diversity to the literature identified which mainly discussed the religious practices of White families with mental health challenges.

Adult daughters viewed the concept of religion negatively when describing the traditional SBW role. These findings differ from other Black women's accounts of the role of religion noted in SBW literature. Women who typically ascribed to the traditional SBW role acknowledged religiosity and the use of religious coping as imperative when managing difficult life situations requiring strength (Beagan et al., 2012; Beauboeuf-Lafontant, 2016; Cheadle et al., 2015; Watson & Hunter, 2016; Woods-Giscombe et al., 2016). Daughters in this study described mothers as SBWs, perceivably depressed, and emphasized that their strength beliefs and religious coping acted as a barrier to seeking professional mental health services. These findings are supported in mental health utilization research citing religiosity and strength as barriers to Black women requiring mental health care (Borum, 2012; Conner et al., 2010; Nicolaidis et al., 2010; Rusch et al., 2008; Ward & Heidrich, 2009), citing preference for religious interventions over professional services (Conner et al., 2010; Ward & Heidrich, 2009). In the current study, adult daughters offered alternative definitions of SBW that did not include concepts of religiosity nor religious coping practices. However, daughters did include seeking help, specifically professional mental health services as a strength, which directly contrasts with their mothers' religious coping practices, traditional definitions of SBW, and larger cultural practices of African Americans.

Additionally, adult daughters' exclusion of religion in their strength beliefs deviates from larger, cultural beliefs held by African Americans which encourages religious coping as an appropriate mechanism to manage adversity (Brody et al., 1996; Butler-Barnes et al., 2017;

Dessio et al., 2004; Gutierrez et al., 2014). Daughters' early adulthood challenges with coping strategies learned from their mothers offered an opportunity to independently evaluate the effectiveness of those strategies. Additionally, witnessing the negative outcomes from their mothers' coping behaviors acted as the catalyst for daughters to make different help-seeking decisions, thus shaping their understanding of the utility of religious coping in their lives. Daughters' willingly sought help from other formal and informal resources that did not include religious resources.

These findings significantly contradict traditional SBW definitions and this study's conceptual framework, Sisterella Complex, each of which emphasized that SBW do not ask for assistance, nor do they believe they will receive help from other people (Jones & Shorter-Gooden, 2009). Yet, these women relied on spiritual interventions or religious practices in the process of managing stressors that required strength (Conner et al., 2010; Ward & Heidrich, 2009). The current findings illuminate how perceived maternal depression alters the transmission of larger cultural values of African Americans concerning the importance of strength and religion to the next generation. This is also an identified gap in the current literature and theoretical framework's reports of gendered socialization practices in Black women, their daughters, and SBW role.

In SBW and mental health research with Black women, religion is identified as both a protective factor and barrier (Borum, 2012; Conner et al., 2010; Ward & Heidrich, 2009), yet the current study presents a different reality for daughters. Additionally, religious socialization practices by non-depressed Black mothers are identified positively by adult daughters (Giddings, 2006; Mattis, 1997; Taylor et al., 2003) While there is an identified gap in both the literature and theoretical framework to explain how perceived depression influenced Black mothers'

socialization practices with daughters, the opposite was true for daughters in this study. Instead, daughters acknowledged religion had a negative influence on their lived experience and as adults utilized religion differently than mothers and other Black women raised by non-depressed women. Daughters' refusal to model religiosity after their mothers altered adult experiences with SBW beliefs and behaviors. Their decision also contradicted larger African American cultural beliefs regarding religious devoutness as a strength and acceptable mechanism for coping with adversity (Brody et al., 1996; Dollahite et al., 2004; Gutierrez et al., 2014; Jacobs et al., 2012). Living with a perceivably depressed mother influenced daughters' deviation from both familial and cultural beliefs regarding religious strength and coping as appropriate mechanisms. Subsequently, their adult recognition of Strong Black Woman beliefs and behaviors included receiving and asking for professional help while excluding religion entirely. A possible explanation for these findings presents lived experiences with perceived depression caused daughters to reject traditional SBW beliefs and behaviors of not asking or receiving help while encouraging daughters to seek professional mental health services and other informal resources (i.e., support from family and friends) when managing life stressors in adulthood. Additionally, lived experiences with perceived depression may act as a protective factor against the adoption of larger, cultural beliefs promoting religious coping as a strength and appropriate in managing stressors which is evidenced to increase the underutilization of professional mental health services by Black women (Borum, 2012; Conner et al., 2010; Rusch et al., 2008; Ward & Heidrich, 2009; Ward et al., 2014).

Religious coping in mothers but not daughters

Daughters identified their mothers' use of religion as a stressor which impacted the daughter's understanding of religious practice across their lifespan. Mothers' religious beliefs

influenced their parenting practices which included religious socialization in the mother/daughter relationship. Daughters' identification of religious stressors involving mothers included excessive church attendance, strict adherence to religious doctrine, and switching of religious affiliations is consistent with literature describing Black women's religious coping strategies (Cheadle et al., 2015). For example, Dessio et. al (2004) found Black women's commitment to larger cultural beliefs supporting religious coping guided their use of reading religious doctrine, prayer, and church attendance as an effective and culturally appropriate means to manage stress. Black women's spirituality has been identified as a barrier when acknowledging and seeking mental health services which supported daughters in this study's claims of mothers' denial of depressive symptoms and refusal of professional help (Avent Harris, 2021; Beagan et al., 2012; Woods-Giscombe et al., 2016). There is a current gap in the literature linking how different circumstances, like maternal depression, influences the acceptance of cultural beliefs of the salience of religion during the socialization process between Black mothers and daughters. These findings suggested daughters may understand the importance of religion differently, particularly the use of religious coping for life stressors as appropriate, compared to other Black women due to their lived experience with perceived maternal depression.

The phenomenon of living with a perceivably depressed mother shaped the religious perception of daughters in this study from an early age. The identification of religion as a stressor differs from other Black women's perspectives noted in Black mother/daughter gender socialization research (Denise Davis-Maye & Tonya E. Perry, 2007; Joyce E. Everet, et al., 2016; Hall, 2015; Oshin & Milan, 2019). The majority of the known research regarding gendered socialization practices of Black mothers has mainly focused on the intergenerational passing of survival strategies when interfacing with societal problems involving gendered discrimination

(Caughy et al., 2011; Joyce E Everet alt et al., 2016; Susan et al., 2006). Additionally, research identified open communication practices as the mechanism mothers used to socialize daughters from a young age about the importance of religious strength as both a virtue and protective factor when challenging sexism and racism (Denise Davis-Maye & Tonya E. Perry, 2007; Joyce E. Everet alt et al., 2016; Hall, 2015). A possible explanation for these findings is that daughters' lived experience of perceived depression may alter the intensity and severity of religious coping practices in these mothers. This is evident in daughters' reports of excessive church attendance/participation and the switching of religious denominations/faiths as stressors. Additionally, the emotional regulation, specifically mood instability did not foster open communication between mothers and daughters, thus limiting the acceptance of religious importance and practice. In the current study, adult daughters do not identify religious strength when describing what it means to be a strong Black woman and describe experiencing religion differently than their mothers.

Implications and Future Research

This research has implications for practice and education. Practice implications include the creation of a formal support network with Black women servicing Black mothers and daughters experiencing depression. These networks should focus on supporting mothers and daughters with evidenced-based mental health education within the appropriate cultural context. Within these networks, participants should be exposed to depression education that is culturally reflective of Black women's experiences and symptomatology. For daughters who have depressed Black mothers, special emphasis on practitioners providing healthy coping strategies that may not exist in the mother/daughter relationship.

In the educational training of mental health professionals, parent educators, and family scientists, it is important to provide adequate understanding of Black family culture, how mental health and mental health issues manifest amongst Black individuals and understanding emotional dysregulation within a cultural context. In the educational training of parent educators, individuals must be sensitive to the historical and systemic barriers Black families face and how this translates into parenting behaviors. Additionally, parent educators need an awareness of how the culture of silence influences the receipt and acceptance of outside support for family problems. The child welfare and criminal justice system has a long history of penalizing vulnerable Black families, so parent educators need to be sensitive in their approach in providing services and the evaluation of family's involvement.

In training future family scientists, beginning at the undergraduate level, students should be exposed to culturally reflective teaching that provides an accurate, historical depiction of the origins of Black families' marginalization and how this has a modern influence on the mental well-being of families.

Future Research

More information is needed on the intergenerational passing of SBW beliefs and behaviors in Black mother/daughter relationships within the context of maternal mental health. Potential longitudinal studies that identify depressed mothers early and monitor their relationships with daughters across time would be beneficial to the discipline. There is a need for more Black female researchers holding experience with the phenomenon of living with a depressed Black mother to conduct research studies. The insiders' perspective allows for richer data collection with the understanding of cultural nuance that may be overlooked or

misunderstood. Depression manifests differently for Black women and more research that is reflective of these women's symptomatology seems in order. Additionally, future research studies should focus on compulsive shopping/buying amongst Black women with depression and holding SBW values. It is important to study the impact of traumatic childhood events with daughters of depressed Black mothers and the intergenerational passing of impulsive shopping/buying coping behaviors.

Because religion and spirituality are so important to Black Americans, more information is needed to understand the impact maternal mental illness has on the religious development of children. Additional information is needed to ascertain how factors like perceived mental illness impacts the transmission of religious messaging and the modeling of parental religious behavior witnessed by children which is missing from the current literature and this study's theoretical framework, Black feminist thought. Furthermore, additional research is needed to create frameworks explaining the varied experiences of Black women exposed to perceivably depressed mothers and how this influences the mother/daughter relationship and endorsement or rejection of the Strong Black Woman role in adulthood.

Limitations

There is no research study void of limitations and this includes the current study. This study relied on retroactive accounts of childhood, which may inhibit the accuracy of details regarding life with a perceivably depressed mother (Hardt & Rutter, 2004; Reuben et al., 2016). The majority of participants in this study were human service professionals which may have impacted their understanding of mental health and how this manifested in the lives of mothers when referencing childhood experiences. Having a more diverse background of participants may

produce diversity in thought concerning childhood experiences with perceivably depressed mothers and SBW role in adulthood. Another noted limitation is this study is the use of second-hand accounts from daughters regarding mothers' expression of perceived depression and SBW role. Having mother/daughter dyads would have provided a more accurate depiction of strength socialization messages in this relationship.

Conclusion

The findings from this study provide a deeper understanding of the environmental and relational influences contributing to Black women's endorsement of SBW roles across time. Living with a perceivably depressed mother acted as both risk and resilience for daughters' personal mental health and understanding SBW role. While daughters were at risk due to being exposed to perceived maternal mental illness and dysfunctional household dynamics, relationships with Othermothers fostered resilience in these women. Within these relationships, daughters were exposed to alternative versions of strength and femininity that made lasting impressions in their lives. Additionally, daughters' inability to find support amongst biological and fictive kin illuminates the cultural barriers that also causes risks in the lives of children exposed to maternal mental illness.

Daughters were at increased risk due to their exposure to the maladaptive coping strategies in mothers. Thus, resulting in daughters adopting SBW beliefs and behaviors at an early age to manage in the home environment. However, in emerging adulthood, daughters' personal experience with implementing these maladaptive strategies acted as the catalyst to defy socialized strength messages from mothers that encouraged extreme versions of independence and self-reliance. Daughters asked for and received help for mental stressors from other

individuals which was not modeled in their households when living with mothers. However, daughters were exposed to mothers' spiritual coping for mental stressors and identified these actions as a stressor. These personal experiences undergirded how these daughters redefined being a SBW. Unlike mothers, daughters did not list spirituality as part of their description of a SBW in adulthood. These findings challenge the salience of spirituality in the lives of Black women exposed to maternal mental illness.

Lastly, these findings contextualized the intergenerational transmission of SBW role amongst Black mothers and daughters under varied circumstances, particularly the exposure to mental health. There are no known studies that examine how perceived mental illness influences the strength socialization messages passed in the Black mother/daughter relationship. Subsequently, the findings from this study begins a larger inquiry into the private lives of Black families impacted by maternal depression. The goal of this research was to examine this phenomenon and bring awareness to the long term and intergenerational implications of Black women's endorsement and exposure to SBW role to manage life stressors.

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Appendix A

Screener Questions

1. Were you majority raised in a household with a mother or female caregiver who identified as Black American?
2. Did you perceive her to have depression? Can you give examples of behaviors?
3. Did you perceive you mother or female caregiver to exhibit behaviors where she used food to cope with stressors?
4. Did you perceive your mother or female caregiver to excessively shop or had hoarding behaviors with items like clothes, paper, or trinkets when it wasn't feasible?
5. Did you perceive your mother or female caregiver to place the needs of others before her own? This could be her children, husband, spiritual family, job.
6. Demographics:
 - a. Age
 - b. Geographical location
 - c. Highest education level
 - d. Socioeconomic level
 1. Under \$39,500
 2. \$40,000-\$69,000
 3. \$70,000-116,000
 4. \$117,000 and above

Appendix B

Semi-Structured Interview Protocol

Interviewer: Hi, thank you for participating in my research study. Before I began, do I have your permission to video record this interview. (If so) I would ask you change your screen name prior to me recording. Also, I would like to remind you that we can skip any question that makes you uncomfortable and your feedback is totally voluntary.

1. Thinking about your childhood, what experiences best describe your mother's mental health?

Prompt Questions

- a. Can you describe how she coped with stressful situations?
 - b. Were there any telling behaviors or incidents that stood out as abnormal?
 - i. If so, what did you use to compare this experience to be abnormal
 - c. Did someone in your immediate or extended family (including fictive kin) witness these behaviors/incidents?
 - i. If so, can you describe a time where your mother's behaviors were addressed by others?
 1. Were you allowed to be present?
 2. What was the outcome?
 - d. Are you aware if your mother ever sought professional help or was clinically diagnosed with a mental disorder?
 - i. If so, can you describe how getting professional help influenced your relationship
2. Describe the nature of your relationship with your depressed mother in childhood?

Prompt question

- a. Can you provide an example of how mental health influenced the nature of your relationship?
3. Did you learn about strength in childhood?

Prompt Questions

- a. Did you mother directly discuss strength?
 - i. If so, give an example of your mother's strength messaging and how you applied it to your life
 - ii. If no, did she model strength?
 1. Give an example of modeled behavior
4. Were there other women in your life that taught you strength either through direct messaging or modeling behavior?

Prompt Questions

- a. If so, give an example of a time where another woman taught you about strength and how you applied it to your life.
5. How would you describe a strong Black woman?
 6. Can you describe a time where your mother exhibited specific behaviors that impacted your view of her to being a strong Black woman?
 7. How has experiencing your mother's depression in childhood impacted your views on Strong Black Woman beliefs?
 8. Describe the ways SBW beliefs have manifested in your lives

Prompt Questions

- a. Can you describe a time where SBW beliefs influenced the way you cope with stressors and sought help?
- b. Are there any similarities or differences in the way you witnessed SBW beliefs manifest in your mother or mother figure to the way you've experienced them in your adult life?