AIMS For a better birth...

Why grandmothers deserve education and support – they are worth it!

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By Mary Nolan

Quite a long time ago, I was at a lecture given by a senior obstetrician whom I had worked under as a student nurse and was a figure of awe and trepidation in the hospital! In the course of his lecture, he uttered the memorable statement that 'nature abhors an infertile female'. This particular consultant had never presented himself as having much respect for the 'females' whom he treated, and his utterance was both slightly vindictive and, as I later discovered, based on no evidence at all.

What he said both worried and intrigued me for many years, especially as I headed towards my own menopause. After all, I was about to become one of those abhorrent infertile females! Thus it was with relief and huge interest that I came across the work of Sarah Hrdy and Edmund Wilson and read their amazing books, 'Mothers and Others' (2011)[1] and 'The Social Conquest of Earth' (2012).[2] Wilson describes every human being as 'a compulsive group-seeker' and Hrdy explains that parenting alone or even with a partner is not species-specific behaviour for human beings. The 'grandmother hypothesis' attempts to answer the question of why human females often survive many years after their childbearing days are over. Anthropologists propose that the care provided by grandmothers to their grandchildren enables daughters to enjoy healthier pregnancies and less risky childbirths owing to the reduction in fatigue and stress resulting from having their mothers' help. In addition, grandmaternal help may have

been critical to the success of the human species because being able to delegate care of children who are dependent for far longer than any other mammalian children, frees mothers for further pregnancies. The short inter-birth interval of human females - two to three years - is very different from that of our closest primate relatives. Chimpanzees and orangutans typically give birth every five to ten years to a single highly dependent baby for which the mother has sole responsibility over its prolonged childhood and adolescence.

Anthropologists describe grandmothers as 'alloparents' or non-parent parents. Thousands of years ago, grandmother care would have been primarily practical – helping to feed children and keep them warm/cool and safe. As immediate threats from the environment diminished over centuries, grandmother care continued to be valuable in freeing the mother for economically productive work, and in offering her emotional support. Today, of course, in addition to providing practical and emotional support, grandmothers and grandfathers are often playing a key role in financial support of their sons, daughters and grandchildren!

Grandmothers in the Global South

We should remember that the nuclear family is not the species-specific norm for human animals; approximately 88% of all human societies are fundamentally collectivist (Henrich, 2010).[3] Our western idea of what grandparents can contribute and of the boundaries of their input are often very different from the roles that grandparents in the Global South fulfil. If we look at settings in Africa, Asia and Latin America, we find grandmothers occupying a highly influential position within collectivist cultures where the mother is deeply embedded not just within a multi-generational family system, but also within community and cultural systems. Hierarchies based on age and experience mean that grandmothers are very influential; seniors are the educators of young people and especially of new parents. Interdependency is valued over autonomy and young mothers do not expect to make unilateral decisions regarding the care and upbringing of their babies and young children. Instead, grandmothers play a significant role in the reproductive cycle, advising their daughters/daughters-in-law from pregnancy through to the postnatal period, and involving themselves in the day to day care of newborns and infants. While their care practices may be culturally specific, their role as wise women, respected for their direct knowledge of childbirth and child rearing, is significant within all collectivist systems.

Such committed support for new mothers is enviable unless, of course, grandmother and mother don't get on, or grandmother's advice is harmful to her grandchildren's welfare. Grandmothers can indeed hold beliefs that are hostile to the wellbeing of babies, such as that colostrum is 'dirty' and that a variety of herbal drinks can be used to satisfy babies who are unsettled. Western researchers have often seen grandmothers in developing low- and middle-income countries (LMICs) as barriers to change (although, of course, grandmothers in 'weird' [western, educated, rich, post-industrial, democratic] countries may be equally resistant to up-to-date information and practices!) However, Judi Aubel, who has dedicated her career to understanding and maximising the positive impact of grandmothers in the Global South, urges:

> *Given their proximity, authority and commitment to newborn survival, [grandmothers] should be explicitly involved in newborn interventions in order to optimise this abundant local resource for newborn health and survival.* (Aubel, 2021:1)[4]

Aubel is highly critical of research and health policies which focus narrowly on biological parents, ignoring the fact that in many parts of the world, there is *collective* responsibility for the welfare of childbearing mothers and their babies. She attributes this to lack of commitment to maximising community assets, bias against senior women and a Eurocentric assumption that mothers are autonomous caregivers, so failing to recognise the implications of multi-generational caregiving.

Grandmothers in WEIRD countries

Some excellent recent research into the role of grandmothers in western countries has been undertaken by Madelon Riem at Radboud University in the Netherlands. Most strikingly, her recommendation that grandmothers should be the focus of policy, research and education exactly mirrors that made by Judi Aubel with reference to LMICs. Riem writes:

> *Recognizing grandmothers as collaborators in maternal and child health may afford more effective perinatal health programs and clinical practice, thereby reducing the risk of adaptational and developmental problems.* (Riem & van der Straaten, 2024)[5]

In the western world, postnatal support is often thought of as care delivered by health care professionals and by peer support groups such as parent and baby groups or groups of women who met at antenatal classes. Fathers/partners have also been increasingly considered and valued for their role in helping mothers adapt to new parenthood – although it is also now recognised that they, too, have a life-changing transition to negotiate and may be in need of as much support as their partners. It is surprising that grandparents have generally been overlooked as key figures in postnatal support given that they are now providing significant amounts of childcare to enable their sons and daughters to return to work and avoid prohibitive childcare costs. Yet social support, of which grandparents form a significant part, has been shown to be highly influential in preventing postnatal depression (PND) which currently affects an

estimated 10-15% of women in the western world (Pop et al, 2019).[6]

Grandmothers' influence on perinatal wellbeing

What does research tell us about whether and how grandmothers promote maternal perinatal health and child development? The first important point is to note that the studies which have been carried out to date focus pretty much exclusively on grandmothers and on maternal rather than paternal grandmothers. (There is an almost total absence of research on grandfathers.) It's fairly obvious, and the research makes this clear, that the quality of the relationship between the new mother and her mother is crucial in determining the effectiveness of grandmother interventions. Not all grandmother support is welcome or helpful in reducing stress and improving the wellbeing of new mothers. Conflict with grandparents, and especially conflict with the paternal grandmother, has been shown to be detrimental to mothers' mental health and the quality of their parenting (Lau & Wong, 2008).[7] A recent meta-analysis, however, of 11 studies which included 3381 participants, found that involved grandparents - in particular mothers' own mothers - constitute a protective factor against the development of postpartum mental health problems (Riem et al., 2023)[8] and at least one study has found a positive effect of supportive grandmothers on maternal cortisol levels during pregnancy (Fox et al., 2023),[9] thereby influencing the wellbeing of the baby in the womb.

In addition, maternal grandmothers who have a good relationship with their daughters have been shown to have a positive impact on young children's socio-emotional and cognitive development (Sadruddin et al., 2019).[10] If the mother is depressed, the attentive care of her own mother may provide the stimulation and security that newborns need, thereby mitigating the negative impact of poor maternal mental health on the mother's relationship with her baby. Support from grandmothers can also lead to improved mother-infant bonding (McNamara et al., 2019).[11] Grandmothers' positive impact on their grandchildren's development may be accounted for indirectly in terms of the support they offer to their daughters reducing their stress and enabling them to parent more effectively; and directly in terms of the grandmothers acting as secondary care providers to their grandchildren. Not surprisingly, mothers in need of a high level of support, such as those with pre-term babies, seem to benefit particularly from grandmothers' emotional and instrumental support (Noy et al., 2015).[12]

From an anthropological viewpoint, these findings are predictable. Down the ages, human mothers have typically shared the care of infants with other family members. Grandmother cooperation in the care of children meant that considerable amounts of time and care could be devoted to exceptionally helpless infants in addition to that provided by mothers. Grandchildren were the beneficiaries of the cumulative wisdom of their grandparents and their freedom from the demands of reproduction (Hrdy, 2011).[1]

Co-resident grandmothers

Even in the West, many grandmothers do not live separately from their daughters and grandchildren, offering periodic help, but in the same house as their children and their grandchildren. Under such circumstances, the relationship between grandmother and daughter becomes critical in determining

whether grandmothers' impact on their daughters' wellbeing is positive or detrimental. A study of co-resident grandmothers living with at-risk teenage daughters found that six months postpartum, the young mothers had fewer symptoms of depression than other adolescents not enjoying the support of their mothers (Kalil et al., 1998).[13] However, the authors flagged up that mothers who lived with grandmothers experienced fewer depressive symptoms only when there was positive family cohesion.

At present, there is insufficient research into 'multi-generational families' (where grandparents, children and grandchildren co-habit) and 'skipped-generation families' (where grandparents live with their grandchildren in the absence of the children's parents) to be able to determine what kinds of help, under what circumstances and in what contexts, might yield positive outcomes for grandchildren. Multiple factors are likely to be at play including the age of the children being looked after, the health of the grandmothers, the socioeconomic status of the families, and whether grandparents are stepping in owing to parental incarceration or migration or conflict (Sadruddin et al., 2019).[10] Until studies have been undertaken which take account of these factors, it is unwise to make claims for the effectiveness of grandmother interventions in complex families even when initial research is generally positive about the potential for grandmothers to make a difference.

My own experience!

As the mother of three daughters and five grandchildren aged from 19 years down to 6 months, I have had a variety of grandmothering experience. I have been heavily involved in the care of two of my grandchildren, less so in the case of two others and very little in the case of the oldest. From this experience, and that of friends, I am convinced that where there is a positive, loving and sensitive relationship between grandmother and daughter, the impact of the grandmother is highly beneficial in terms of preventing postnatal depression and enhancing the enjoyment of parenthood.

Being a grandmother is to walk a very narrow path – avoiding giving too much support and advice and thereby disempowering the mother, but stepping in to challenge misinformation which flourishes in whatsapp groups and on the net. It's about accepting that I have to comply with parents' rules and practices in order to maintain family harmony and also to ensure that I will be allowed to go on caring for my grandchildren! The extraordinarily strong desire to indulge my grandchildren has to be tempered by the recognition that their parents will have to pick up the pieces of my crossing the boundaries which they have put in place.

Given the ubiquity of grandmaternal support, and the huge amount of effort that the grandmothers I know put into helping with babies and very young children, it might be thought that there would be a place for antenatal classes for grandparents-to-be. Interestingly a colleague of mine, living in London, tried to set up such classes but, despite advertising and employing word-of-mouth over a substantial network, the classes never took off. Presumably, the idea was too novel and perhaps revealed a conviction on the part of grandparents that, having 'been there before', they weren't in need of education.

Policy, research and practice

Grandparents are only now coming to the fore in terms of global policy making with calls for a shift away from an exclusive focus on parents, and a move towards recognising the need for 'parents,*caregivers and families*, to be supported in providing nurturing care and protection in order for young children to achieve their developmental potential' (Britto et al., 2017:91).[14] Principle among caregivers are grandmothers.

Research to date, like policy, has mainly focused on parents and has overlooked the contributions, positive and negative, made by grandparents and especially maternal grandmothers. A recent study has urged the need for better research to determine 'whether stimulating high-quality support from grandparents is a fruitful avenue for enhancing maternal postpartum mental health' (Riem et al., 2023:25).[8] Research is also in its infancy in terms of exploring other impacts of grandparental care such as how grandparents' beliefs about infant feeding might affect the eating behaviours of young children left in their care while parents are at work:

> *Grandparents' social role in the complex psychosocial space of child feeding warrants serious recognition and deeper understanding to engage them fully as stakeholders in children's nutritional health.* (Rogers et al., 2019:300)[15]

As far as practice is concerned, there is, I would argue, already sufficient evidence to warrant paying more attention to the role of grandparents and especially maternal grandmothers in the care of young children. Perhaps all of us engaged in the education and nurturance of new families need to recognise and utilise that body of devoted and unpaid workers who, with a little support and some education, might be able to make an (even more) substantial contribution to the welfare of new mothers and their babies.

Author Bio: Mary Nolan worked as a birth and early parenting educator for 28 years before spending 13 years as Professor of Perinatal Education at the University of Worcester. She has published extensively in academic journals on birth-related issues and is the author of eight books. The most recent, 'Birth and Parent Education for the Critical 1000 Days', was published in 2020.

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