Perinatal Education and Grandparents: Creating an Interdependent Family Environment

Part II: The Pilot Study

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Abstract

This second of two articles presents a study of the grandparenting perinatal education program. The following aspects are featured: recruitment, the setting, the program's content, supporting material and teaching aids, and the program's organization. An evaluation of the program was conducted and is presented in the article.

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Background Information

The following observation of societal trends has motivated the author to develop and present a perinatal education class for grandparents. The review of the background literature and recommended class content was presented in Part I, "Documenting the Need," as featured in *The Journal of Perinatal Education* 8(2). The observed trends include (a) an increasing number of grandmothers acting as labor coaches for their daughters or daughters-in-law; (b) data from clinical observations revealing that increased numbers of couples are expressing frustration and conflict with their own parents who are not aware of certain changes regarding childbirth and parenting practices; (c) reports of certain grandparents being less available to help in the postpartum period due to work commitments, so this type of support is being passed onto other members of the social network such as healthy great-grandparents; (d) some grandparents are expressing confusion about the meaning of grandparenthood in today's context and about the enactment of the role; (e) some grandfathers are expressing a need to be more involved with the new

family so they will have a second chance to “father” if they were unable to do so with their own children; and (f) political recognition from both provincial (Quebec) and federal (Ottawa) governments of the valuable contribution of the elderly to society.

The Pilot Study: Phase I—Testing the Program

A perinatal education program was offered to grandparents on two different occasions: May 1996 and October 1996. The program was subsequently evaluated at five levels: (a) the recruitment of the participants, (b) the setting where the group encounters were held, (c) the program’s content, (d) the supporting audiovisual resources, written materials, and teaching aids, and (e) the program’s organization. The program evaluation was conducted in two ways: in discussion in the open group of grandparent learners and with a self-administered questionnaire. The questionnaire was distributed at the end of the group encounter to each participant who was asked to respond to a series of questions evaluating the above aspects, provide feedback on the positive and negative aspects of the program, offer suggestions for improvement, and rate her or his general satisfaction with the program. The results from this evaluation will be presented in this article.

Recruitment. The author teaches traditional perinatal education classes in the private sector to French-speaking (“francophone”), expectant parents in Montréal, Canada. This city, situated in the province of Québec, is characterized by a majority of people who are francophone.

Letters of invitation were sent to the grandparents through expectant parents. It was very important to take the time to explain the purpose of the program and its potential content to the expectant parents because their reactions influenced the response rate during the recruitment phase of the pilot study. The author assumed that the expectant parents’ enthusiasm for the program would be shared and transmitted to the grandparents. The letter of invitation was given a title (“Harmonizing Relationships Between the Generations”), the potential content was described, a reply-coupon was included, and the letter ended with the types of ‘treasures’ grandparents could give to the middle and younger generations.

The content, as presented in the letter, was divided

into three general topics: (a) suggestions on how to support the new family, especially if the mother has had a cesarean birth and if the new father is tired; (b) an update on various care topics such as breastfeeding, older infant feeding (especially the introduction of solid foods), description of colic, safety, cord care, what to do if the baby is sick, safe-proofing the home, and cardiopulmonary resuscitation; and (c) grandparenthood definitions, roles, and responsibilities.

Several expectant couples expressed doubtful reactions to the program for the following reasons: (a) the grandparents lived too far away, (b) their health status would prevent them from coming, (c) they lacked interest in such subject matter, (d) their parents already had many grandchildren, were involved with them, and had mastered the grandparental role, (e) the language barrier would prevent them from attending because they did not have knowledge of the French language, and (f) a relationship between the grandparents-to-be and the expectant couple was lacking or difficult.

For the May 1996 session, 90 letters of invitation were distributed and 14 grandparents participated (11 grandmothers and 3 grandfathers). For the October 1996 session, the same number of letters was sent and 15 grandparents were present (10 grandmothers and 5 grandfathers). The total response rate was approximately 16% and might be an indication of the current interest in the general population for these types of classes. This low rate, although disappointing, was consistent over two time periods. The doubtful reasons given by the expectant couples could partially account for the low response rate. However, the final group sizes were manageable and comfortable in terms of group exchange, self-disclosure, comments, questions, and discussion. They were, of course, a very self-selected group and, for the purpose of the study, were a sample of convenience.

The Setting. The grandparenting session was held in the basement of a church, which was easily accessible either from the major highways or by public transportation. The room itself was large and cozy, the walls were painted a soft beige color, and the chairs were comfortable. Bathroom facilities were easily accessible and clean. These criteria are important for adult learners since attention to their personal needs in a comfortable environment sends a very strong message that they are valued.

The coziness of the setting enhanced the ambiance of the group encounter so that the participants relaxed quickly, self-disclosure was facilitated, and mutual group exchange occurred. The church setting was conducive to that generation's upheld values regarding the place of religion in family life.

The Program's Content. In the first group encounter, the author followed the three major topics presented in the letter of invitation. After this experience, she revised the order of their presentation, starting with the second topic on knowledge update, followed by the first one pertaining to support for the new family, and ending with the third one relating to grandparenthood. This decision was consistent with one of the major principles of adult education in which the educator starts with neutral, general, and concrete content and progresses to more abstract and affective content. "To maximize learning, information should be presented in some organized fashion. Material can be arranged to proceed from simple to complex" (Darkenwald & Merriam, 1982, p. 110).

Supporting Materials and Teaching Aids. At the beginning of the group encounter, each grandparent received an information package on the following topics: breastfeeding, infant feeding, baby care, infant massage, diapers, what to do with a sick child, a list of dangerous plants, child safety, various articles relating to grandparenthood. They also received a list of references for reading purposes.

During the session, various articles used as teaching aids were distributed and discussed so that the participants' interest was increased, enhancing the personal meaning associated with the subject. According to Darkenwald and Merriam (1982), "meaningful material and tasks are more easily learned and longer remembered than nonmeaningful or nonsensical material" (p. 110). The following articles were distributed: a model of the female breast, breastfeeding pads, the breastfeeding comfort cushion, a breast pump, the plastic bag used for expressed milk, plastic bottles (with and without disposable bags), various baby skin products including sunscreen lotion, pacifiers, cloth and disposable diapers, digital thermometer, baby clothes, a car seat, and a baby bath set up with a doll, towel, and face cloth. Grandparents were invited to practice changing the disposable diaper on the doll.

Three French films were shown during the group encounter: (a) a 12-minute piece, entitled *Introduction to Solid Foods*; (b) a 20-minute piece produced by Johnson and Johnson, entitled *Infant Massage*; and (c) a 9-minute segment of a film discussing grandparenthood. Audiovisual documents are essential in this type of teaching since they reinforce information given to the group, permit the participants to raise their own questions, and provide a neutral environment in which to discuss sensitive topics, especially grandparenthood and the issue of interference or noninterference.

The Program's Organization. In the organization of the grandparenting perinatal education program, several factors had to be considered: (a) afternoon or evening sessions, (b) weekday or weekend sessions, (c) time of year, and (d) length of the session. The author had consulted several grandparents in the initial stage of preparation regarding the above factors and, based on their recommendations, a suitable time was chosen.

Letters of invitation were sent to the grandparents through the expectant parents. The grandparents telephoned the author for information and to reserve their place at the session. They were asked to send their reply coupon, along with payment, one week before the session was held. However, last-minute arrivals were accepted.

Once the participant arrived at the church, she or he was welcomed and shown the layout of the setting, given a name tag and information package, asked whose child was attending prenatal classes, and questioned whether or not this was her or his first grandchild. As each participant arrived, introductions were made. The participants became comfortable with each other and with the instructor. The instructor tried to find common ground among the participants. The results included that grandparents might have found that their children attended the same prenatal group, that one was expecting a granddaughter or grandson, that maternal and paternal grandparents had come together to better coordinate their efforts, that a grandchild had just been born and they wished to express the joy of that event and share photographs, and that some participants were already grandparents and were thus encouraged to think of ways to support the expectant grandparents.

The group then sat in a circle and the program began. A health break was taken midway through the program.

During this time, refreshments were served, the teaching aids were left on a table for further manipulation, and a baby's layette, as well as the baby bath, were left out for demonstration. The author offered the grandparents the opportunity to have their blood pressure checked during the break. This was initiated after the first group experience when the author realized that grandparents were talking about their own health issues. This gesture was greatly appreciated by the second group and permitted the instructor to develop a more personal contact with class members. A scale was left out, so grandparents could verify their weight. (The body mass index can be quickly determined and shared with the participant.) Then, after the break, the participants did some light stretching to continue to promote their own physical health. The program then continued.

At the end of the session, the group encounter was evaluated in the large group and was followed by a personal, anonymous evaluation on a questionnaire. A diploma was then given to each grandparent, attesting to their participation and to their willingness to contribute to their family's growth. Lastly, prizes were drawn—one for the grandmothers and one for the grandfathers.

Evaluation

The Open Group. The entire group of 29 grandparents was first asked their reasons for accepting the letter of invitation. Their reasons included the following: (a) They were curious about such an encounter; (b) their children had asked them to come, so they wanted to please them; (c) some felt unclear about the interpretation of the grandparental role in today's context and wanted to know what to do about it; (d) they wanted to be on the same wavelength as their children in terms of the latest information on infant care; and (e) they wanted to be a "good grandparent."

The group expressed overall satisfaction with the information given, the program's organization, the group dynamics approach, the written and audiovisual materials, and the comfort of the setting. The program's impact on each of the participants was satisfactory. Some felt they knew more about what to expect from the two generations, how to support the new family, and how to be more tuned-in or more sensitive to what their children were going through. Others felt they had developed more concern for child safety, especially cardiopul-

monary resuscitation. Some also felt more willing to use communication in a more effective way to express feelings and thoughts. Others said they were looking forward to becoming a grandparent and what the role entails, and not confusing this experience with the aging process. They encouraged the author to continue such group encounters and foresaw a future in their development. No negative comments were voiced.

The Anonymous Questionnaire. The letter of invitation was evaluated. All of the participants felt that the letter of invitation was clear, that its tone was welcoming, and that it piqued their interest and curiosity. The group suggested no changes to the letter of invitation.

The group's satisfaction with the following elements was fairly high: (a) Their needs as expressed in the letter had been met; (b) they now knew how to help the new family; (c) they felt up-to-date on certain subjects such as infant care and infant feeding; (d) the group approach was well-structured; (e) the setting was comfortable; and (f) the audiovisual and written documents were effective.

The participants were then asked to determine the impact the group encounter had on them. All of their comments were in relation to the grandparental role: There was more awareness of its importance in the family system, the values that they could transmit to the next generation, and the positive psychological aspects regarding the role. Others were sensitive to the sharing of the grandchildren between the two families and the equal sharing between the grandmother and the grandfather.

The elements most appreciated by the group were the updates on the topics presented, the ambiance created in the group, the group dynamics approach, child safety (especially cardiopulmonary resuscitation), and the relaxed atmosphere that permitted the participants to express their thoughts, feelings, and fears. No suggestions for improvement were proposed.

Finally, the grandparents were asked to rate their overall satisfaction with the group encounter using a 10-point Likert scale from 1 ("not satisfied") to 10 ("very satisfied"). The participants rated the group encounter as 8, 9, or 10; thus, there was high satisfaction with the grandparenting perinatal education program.

Discussion

A grandparenting perinatal education program would focus on the creation of an intergenerational (William-

son & Bray, 1988) “common ground” (Hagestad, 1985) for a balanced interdependent family environment (Hader, 1965) in which the family will function in a harmonious manner of respectful cooperation (Kornhaber, 1996).

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For a family to develop this intergenerational common ground, Steve Duck (1994) proposes *A General Model of the Serial Construction of Meaning*. (See Figure 1.) This model contains four stages. In the first stage of *commonality*, family members have the same attitude toward a topic such as the impending arrival of a new family member but are not aware that they have this in common. In the second stage of *mutuality*, the family members come to realize that they share the same feelings about the topic. In the third stage of *evaluation*, each family member interprets the feelings about the common topic and realizes to what extent she or he shares the same feelings with others. In the last stage of *shared meaning*, a collective perception has developed and is integrated into the existing core of shared meaning.

Perinatal educators can help families develop this shared meaning and collective perception (Boss, 1988). This is the common ground, uniting all family members in a common event such as the arrival of the new family member, thus facilitating the two transitions of grandparenthood and parenthood. Every family must undergo this process each time there is a major family event, situation, or problem. New meaning in relation to the major event, situation, or problem must be forged and integrated into the family’s already existing core of shared meaning (Monsour, 1994). This is one way for a family to create its own sense of intimacy, spilling over into feelings of family health and family well-being. The more layers of shared meaning there are in the family system, the more the family members will experience the feelings of belonging and intimacy. This can result in an interdependent family environment.

NOTE: In Figure 1 are represented schematically the progressively developing constructions of the two partners about each other in relation to topic X. In *commonality*, the persons A, B relate to topic X but do so independently of one another. In *mutuality*, they now know that the same topic is in the experience of each of them (*experience = events*). In *sharing*, they see how they evaluate not only X but also several other topics, events, and experiences that contextualize their evaluation (i.e., they have a common organization for meaning surrounding topic X). The figure should not be taken to illustrate only the role of similarity in meaning; rather, it depicts the general process that continues with different foci during all the unfinished business of relating, and it simply uses “similarity” as a convenient special instance.

S. Duck, *Meaningful Relationships: Talking, Sense, and Relating*, p. 119, © 1994. Reprinted by permission of Sage Publications, Inc.

Figure 1 A General Model of the Serial Construction of Meaning

Creating an Interdependent Family Environment

The perinatal educator can help establish an interdependent family environment of respectful cooperation by integrating four types of perceptions (self-perception, metaperception, perceived similarity, and understanding) in a series of activities (Acitelli, Douvan and Veroff, 1993; Allen & Thompson, 1984). Although this paper is primarily focused on grandparent class evaluation, the total program contains three parts: (a) The grandparents are supported by the perinatal educator in the formal setting to explore the transition of grandparenthood and to become aware of their children’s transition to parenthood; (b) the expectant parents will become more aware of the transition to parenthood and that of grandparenthood within the group encounters; and (c) the perinatal

Figure 2 Creating an Interdependent Family Environment

educator will create a social context (Bubenzer & West, 1993) away from the formal setting of the group encounters in which the grandparents and the expectant parents will continue to explore and discuss the issues relating to both transitions.

Teaching Activities and Strategies

Activity 1: Introducing the Grandparents. In the introduction of the grandparenting group encounter, the perinatal educator should try to find points of common interest among the grandparents. This could mean that their children are attending the same series of prenatal classes, that they already have a grandchild, and whether they are first-time expectant grandparents. This is a very important aspect of the group dynamics process because

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the group must find its own common ground in order to live it and practice it and, one must hope, to transfer the experience to the family system.

Activity 2: Recall and Social Support. Another important activity is having the grandparents go back in time to recall certain thoughts, feelings, fears, and experiences. The process of recall can be used by the perinatal educator to awaken those memories and to integrate them into the actual context. For example, the educator can ask the grandparents to remember pregnancy, labor, birth, and the postpartum. What do they remember the best about those times? What were the most difficult aspects in those times? What helped them to cope during that time period? As they relive those experiences in a group setting, a sense of déjà-vu emerges; a group feeling is established at another level. In regard to the coping strategies, the perinatal educator can guide the discussion indirectly towards social support, what forms it took, and by whom. The educator can then transfer the results of that discussion to the context of the group's children by retaining what worked in their time versus what works in their children's time and adding to the discussion new and relevant information on social support.

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In this regard, self-perceptions and metaperceptions are sought, resulting in discovering what the grandparents have in common with their children to establish perceived similarity and understanding.

Activity 3: Recall and Supporting Materials. Passing teaching aids such as baby equipment around the class renders the learning more meaningful for the grandparents, thereby increasing the integration and the retention of the new information. As is often the case, a few participants are more tuned-in or more sensitive to this element. Thus, this starts the ball rolling. Others will follow since the ambiance and group feeling have been established by the perinatal educator. Again, reconnecting with their children through the manipulation of baby articles brings forth the experience of parenthood and the anticipated and emerging feelings of grandparenthood. This contributes to the continued creation of the intergenerational common ground, as well as the interdependent family environment.

Activity 4: Recall and Grandparenthood. The recall strategy is also useful in the discussion relating to grandparenthood. What memories and feelings do they have of being a grandchild? What memories and feelings do they have of seeing their parents becoming grandparents? How does this tie in with their emerging identity as a grandparent and in seeing their children become parents? Two things usually occur at this point of the discussion: (a) The group ambiance is now at another level in which the participants sense that self-disclosure is respected and helps to tie everyone together, and (b) there appears to be a gradual transfer to the immediate family situation, in that the participants refer to themselves in relation to their children and grandchildren.

Activity 5: The Psychology of Grandparenthood. This topic is opened with a viewing of a 9-minute segment of a French film presenting grandparenthood. The

grandparents are invited to react to the film: What emerges as their reactions to the announcement of the pregnancy? In what ways have they prepared or are preparing for the grandchild's arrival? What feelings are associated with the event? The author then asks the group to respond to a series of statements appearing in Kornhaber's book (1996, p. 4). (See Table 1.)

Since the groups averaged 14 to 15 participants, they were subdivided in such a way that two participants were given one statement to consider. The participants had 5 minutes to discuss the statement; then, they presented their results in the plenary session that followed. Other participants were invited to contribute their comments to any of the statements. The author found that the use and integration of this series of statements is an extremely powerful strategy. All of the content relating to grandparenthood as presented in the first article can be integrated at this point of the discussion (Polomeno, 1999a).

Activity 6: Open Group Exercise. The author terminated this part of the discussion of grandparenthood with an open group exercise. Horn and Manion (1985) present seven statements pertaining to controversial parenting issues and five scenarios relating to potential family situations. The author distributed a handout containing these statements and asked the group to comment on them. Each participant was invited to share his or her thoughts and feelings. The point of this exercise is

Table 1 Statements about Grandparenting for Response from the Group*

1. The grandparent-grandchild bond was second in emotional importance only to the parent-child bond.
2. Grandparents and grandchildren deeply affected each others' lives.
3. Many grandparents did not repeat the mistakes they had made with their own children and grandchildren.
4. Grandparenting provided many elders with meaning and joy in their lives.
5. Children who had dedicated and close grandparents were enhanced in important ways.
6. Parents benefited greatly when grandparents were involved in their families.
7. There appears to be a new social contract whereby grandparents have opted out of their grandparenting roles and left the rearing of their grandchildren to the parents (p. 4).

*Adapted from Kornhaber (1996)

for the grandparents to realize is that there is no right or wrong answer, that opinions are personal and diversified, just as family members are. The same holds for the scenarios. The solutions to the family situations are as varied as the families themselves, and their solutions are personal and apply to them only. What might work for one family may not work for another.

Activity 7: The Grandparent-Grandchild Relationship. The grandparent-grandchild relationship can be enhanced through two strategies. In the first strategy, the grandparents were taught cardiopulmonary resuscitation and practiced the technique on two dolls. At this point in the session, the group was very serious and very concentrated. The instructor could “feel” the personal meaning attached to the learning of the technique. Several grandparents even stated that being able to care for a grandchild in this way is part of being a “good” grandparent. The situation had special significance for several of them who had swimming pools at their homes. A few said that the experience was empowering.

The second strategy involved the viewing of a film on infant massage. At one part in the film, the commentator reveals that other members of the family such as grandparents can carry out infant massage. The participants reacted at this point, some saying they could not wait to try the techniques. The author teaches fetal massage (Polomeno, 1997a, 1997b, 1998) to expectant parents. If the expectant parents are comfortable with the idea, they are invited to encourage the grandparents to touch and massage the fetus. This is another way to create an interdependent family environment even before the baby arrives. The grandparents and expectant parents who have participated in fetal massage reveal that the sense of bonding among the three generations merges during that time. They say it is difficult to describe, that one must experience it to understand the feelings.

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Creating Family Support in Context Beyond the Classroom

When teaching expectant parents, the author is careful to include activities to assist them to comprehend the transition to grandparenting. This is done through activities in which they share the grandparents’ response to the pregnancy, talk about their parents’ role transition to grandparents, and explore their own perception of the grandparent-grandchild relationship.

Each generation, both the upper and the middle ones, have had different issues and concerns discussed in the classroom setting. Through the suggestion of “homework assignments,” both generations can be encouraged to continue to explore concerns and issues pertaining to the transitions of grandparenthood and parenthood.

A suggested strategy is that the family members first answer the questions individually, then share their answers with members of the same generation. This exchange is followed by sharing with the other generation. Participants should expect that reactions and feelings will vary from one family member to another, from one generation to another, and from one family to another. Drawing from the communication and the emotions that emerge, the family will feel that it is open, that it is able to discuss these issues and concerns, that the generations are cooperating respectfully together, and that they are practicing certain skills that will be beneficial for the next generation. The assurance of family health and family well-being can become stronger as the issues and concerns are discussed, creating a common ground, a collective perception, and a family environment in which all family members are interdependent. Examples of past class homework activities are described in Box 1.

Evaluating the Revised Grandparenting Program

After the pilot study evaluations in May 1997, the author conducted the first official grandparenting perinatal education program. All aspects of the program had been either accepted or modified in accordance with the assessment results of the pilot study. The same approach was used: 90 letters of invitation were sent to the grandparents via the expectant parents, and 12 grandparents presented themselves at this first official session. The evaluation was conducted in two ways: a self-administered

BOX 1 Homework Assignments

Activity 1

Homework: Grandparents

The grandparents were given an information package, part of which focused on grandparenthood. The grandparents were asked to read the material, react to it, and share their thoughts and feelings with their generation and with their children. The strategy of using written documents is another way for families to explore issues and concerns. It creates neutral territory, similar to that of the classroom setting. The participants of either generation are also encouraged to broach any subject that was discussed in the classroom encounters. The neutrality of these two elements is powerful incentive for families to discuss any subject with potentially conflicting viewpoints, feelings, or thoughts. The grandparents are also given a copy of the interview guide in Kivnick's book (1982). In Appendix A, she presents a series of questions on grandparenthood that are relevant for family discussion.

Activity 2

Homework A: Expectant Parents

The first homework assignment for the expectant parents involves a series of questions pertaining to expectations for their health during pregnancy, for their birth experience, and for social support in the transition to parenthood. Once the expectations have been discussed by the couple and in the classroom encounter, the couples are encouraged to share their answers with their parents.

Activity 3

Homework B: Expectant Parents

In a second homework assignment, the expectant parents explore social support. They try to identify the situations in which their parents were helpful or not helpful, the forms of their support, how the support was perceived by the expectant parent and by the partner, the patterns of support in the family of origin, how the grandparents have offered support to siblings with children, and the expectant parents' perceptions of the parents' support to the siblings.

Activity 4

Homework C: Expectant Parents

In a third homework assignment on emerging parenthood, the expectant parents are asked which values they hope to transmit to the next generation. They are asked to share the answers to this question with the grandparents. Typically, both the upper and the middle generations hope to transmit the same values to the next generation.

anonymous questionnaire was distributed to each participant, and an open-group evaluation was conducted.

Part I: The Questionnaire Results. The characteristics of this group are as follows: (a) There were 8 grandmothers and 4 grandfathers; (b) 7 grandparents had just had their first grandchild within the last month; (c) one grandmother had just had her second grandchild in the last month; (d) 4 grandparents were expecting their first grandchild at the end of the summer; (e) in one situation,

the maternal grandmother and the paternal grandparents had come to the group encounter together, while in another situation, the maternal and the paternal grandmothers were present; and (f) one grandmother had assisted at the birth of her granddaughter. (See Table 2.)

Most reported that they came to the grandparenting session because the subject either interested them or because their children had encouraged them to attend. There was a high to a very-high satisfaction rate with the following aspects: (a) their needs being met, (b) suggestions given to support the new family, (c) infant care

Table 2 Planning a Grandparent Prenatal Class

When planning a prenatal class for grandparents, the perinatal educator should consider the following:

1. *During prenatal classes:*
 - a. keep a diary containing comments made by participants regarding their parents' reactions, thoughts, and feelings about baby care, birthing practices, the expectant parents, the experience of grandparenthood, and other subjects;
 - b. analyze these comments by determining the most frequently recurring tendencies; thus, subgroups of concerns will emerge; and
 - c. bring these tendencies back to the group in a very subtle and gentle manner (e.g., "I have noticed that a few of you have been saying 'Comment X' about your parents. How can you explain this? Why are your parents saying this? How do you feel about it? What would you like to do about it?").
2. *During postnatal classes:*
apply the third-step process presented in the prenatal class section.
3. *Intermediate Analysis:*
once the data have been gathered from both prenatal and postnatal classes, determine the major concerns that have been expressed by expectant and new parents.
4. *Consulting Grandparents:*
 - a. *Informal Consultation*
 - on a one-to-one basis between educator and grandparent, seek the latter's experience with his or her role and concerns relating to being involved with the new family;
 - the educator can verify with this grandparent how other adults in the same situation are coping—their concerns and fears about grandparenting and relationships with the expectant or new parents (same-generation experience);
 - the educator may consider consulting with grandparents whose children attended her classes or with others who are not connected with the classes but are perhaps in the community, church, or neighborhood;
 - the number to consult will depend on access to these grandparents and the educator's availability;
 - suggested number—5 to 10 grandparents.

Table 2 Continued

b. Formal Consultation
—conduct a survey by distributing a questionnaire addressed to grandparents via the expectant or new parents;
—conduct focus groups with grandparents;
—gather and analyze the data, and determine the general tendencies.
5. <i>Plan a Pilot Study</i>
—determine the following: a comfortable site, day or evening classes, weekday or weekend classes, recruitment strategies, a letter of invitation, fee for classes, and marketing;
—pretest content of classes with a small group of grandparents (about 3 to 5 persons);
—conduct a pilot study and obtain feedback on the class; and
—plan to recruit 15 participants/grandparents per class.

update, (d) the group dynamics approach, (e) the comfort of the setting, and (f) the audiovisual and written materials. The participants expressed a high or very high degree of overall satisfaction with the program (rating of 8, $n = 1$; rating of 9, $n = 5$; rating of 10, $n = 6$). The participants identified the group exchange as the most appreciated element. The session was considered too short, and many grandparents expressed an interest in a follow-up session when other concerns and issues could be discussed.

In the open group evaluation, everyone reported that they were pleased with the session. A list of the comments made by grandparents are presented in Table 3.

These findings are similar to those of the pilot study of the program and to those presented by Maloni, McIndoe, and Rubenstein (1987). They reported that the participants found the class had been helpful, the movies were informative, and the discussion on infant care, safety issues, and the grandparental role had been appreciated. "A common cited strength of the class was 'learning to be supportive' " (Maloni, et al. 1987, p. 29). The authors conclude by stating that "allowing grandparents to question, to air their views, and reflect on class content privately appears to be the best method to facilitate the adjustment to the grandparenting role" (p. 29). In this last group, 8 of the 13 stated that exchanging views with other grandparents was the most appreciated activity. There was one vote each for infant massage, infant feeding, update on infant care, experiences with actual grand-

Table 3 Comments Made by Grandparents About the Classroom Session

1. They felt that the time just flew by.
2. They were more tuned-in to their children's situation.
3. The expectant grandparents appreciated the advice and encouragement given by the actual grandparents.
4. They felt they had a special contribution to make to the family through their role as grandparent.
5. There was going to be a more equitable sharing between grandmother and grandfather.
6. They had a better idea of how to cope with the situation without interfering in their children's lives and being respectful of their wished-for parenting.
7. They were no longer afraid to broach any subject with their children as long as communication was open, honest, and calm.
8. Some felt a very special importance because, one day, their grandchildren could themselves be grandparents, so they were contributing to generations not yet born.
9. They felt their education as grandparents was just beginning and was to continue for the rest of their lives.
10. Some felt that the grandparents had much to contribute to the stability of the family unit and to society.

parents, and "everything." At least one participant found new information about breastfeeding, sun protection, diapers, skin care, resuscitation, use of solid foods, bottles, pacifiers, baby bath, safety, and the group ambiance. Lengthening the course was the only suggestion for improvement. Eight wanted a follow-up session, one did not, and three were not available for such an event.

Conclusion

Grandparents are an important source of social support for adults preparing for the transition to parenthood, but they also are experiencing their own transition into grandparenthood. The author's grandparenting perinatal education program used a group dynamics approach based on the intergenerational common ground or collective family perception within an interdependent family environment of respectful cooperation. Perinatal educators can help families deal with simultaneous life transitions through open communication, promotion of strong family bonds, and clear role expectations. The participants in the study were middle class French Canadians. The approaches described here may need to be modified for other cultural and/or socioeconomic groups.

The field of perinatal education is undergoing its own transition as it prepares for entry into the 21st century (Polomeno, 1999b; Polomeno 1999c). What lies ahead? Educators can continue to expand their knowledge base, conduct research to test teaching strategies and program effectiveness, and help develop perinatal education's unique paradigm to guide ways of thinking.

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Generational Wisdom

Parents can only give good advice or put them on the right paths, but the final forming of a person's character lies in their own hands.

—Anne Frank

If I had my life to live over, I would try to make more mistakes. I would relax. I would climb more mountains and swim more rivers. I would pick more daisies. I would have more actual troubles and fewer imaginary ones.

—Don Herold

If only we could have two lives: the first in which to make one's mistakes, which seem as if they have to be made; and the second in which to profit by them.

—D. H. Lawrence

You can have it all. You just can't have it all at one time.

—Oprah Winfrey