

1 Changes in Length of Grandparenthood in Finland 1790-1959

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6 Simon N. Chapman\*, Mirkka Lahdenperä, Jenni E. Pettay, Virpi Lummaa

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9 *Department of Biology, University of Turku, 20014 Turku, Finland*

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11 \*corresponding author: [sinich@utu.fi](mailto:sinich@utu.fi)

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30 **Abstract**

31 The importance of grandparents for their grandchildren is well-studied in several disciplines, and studies  
32 are now also addressing the potential effects of grandchildren on grandparental wellbeing. Any such effects  
33 are limited by the time grandparents share with their grandchildren. Changing child mortality rates,  
34 grandparental longevity, and childbearing patterns may have profoundly altered the length of  
35 grandparenthood across the demographic transition, but this has received little scientific attention. Using a  
36 genealogical dataset from Finland, we investigate changes in this shared time, from the late 18<sup>th</sup> to mid-20<sup>th</sup>  
37 century. We found the number of shared years between grandparents and grandchildren was low until  
38 roughly the onset of industrialisation in Finland, after which point shared time increased rapidly, from both  
39 the grandchild and grandparent perspectives. Understanding changing patterns in the opportunity for  
40 intergenerational transfers between grandparents and grandchildren has implications for several fields of  
41 study, including biology, demography, sociology, health studies, and economics.

42 **Keywords:** ageing, demographic transition, intergenerational relations, mortality

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## 58 Introduction

59 Although human residence patterns have varied dramatically both through time and space, in most  
60 societies large family units with close interactions between generations have traditionally been common,  
61 even if not all members or generations necessarily lived under the same roof. Living in close proximity to  
62 kin offers the chance for positive and negative interactions. Grandmothers in particular are key members of  
63 the family, often providing care to their grandchildren: in evolutionary literature, grandmother presence is  
64 known to have increased grandchild survival (Beise 2005; Lahdenperä et al. 2004; Sear and Coall 2011; Sear  
65 and Mace 2008; Voland and Beise 2002), whilst the presence of a grandmother is also associated with  
66 better nutritional status (Hawkes, O'Connell and Blurton Jones 1997; Sear, Mace and McGregor 2000), for  
67 example by encouraging their daughter to breastfeed (Mueffelman et al. 2015). Furthermore, the mental  
68 health and cognitive abilities of grandchildren may be affected by the grandmother (Coall and Hertwig  
69 2010; Tanskanen and Danielsbacka 2012).

70 The potentially beneficial effects of grandmothers to grandchildren may be greatest during the most  
71 sensitive periods during child development e.g. weaning (Sear and Mace 2008). For example, in historical  
72 Finland, the presence of grandmothers was associated with improved grandchild survival during ages 2-5  
73 (Lahdenperä et al. 2004). A few studies have also shown that in some circumstances, grandmother  
74 presence may be associated with negative outcomes for the grandchildren, such as reduced survival  
75 (Voland and Beise 2002; Strassmann 2011). Though there is less information on the effects provided by  
76 grandfathers - in part because it can be difficult to distinguish between effects of grandfathers and effects  
77 arising from grandmother involvement (Tanskanen and Danielsbacka 2012) - it is not completely lacking.  
78 Whilst survival of grandchildren was not always affected by grandfather presence in historical populations,  
79 for instance, there are still studies that have found (positive or negative) associations between their  
80 presence and child survival outcomes (Sear and Coall 2011; Sear and Mace 2008). There is also some  
81 limited evidence of grandfathers being as important as grandmothers to grandchild development in  
82 contemporary society (Sear and Coall 2011).

83 Interactions in a grandparent-grandchild dyad are not, however, one-way. Presence of grandchildren can  
84 lead to both health benefits and costs for grandparents (Hilbrand et al. 2017), and for grandmothers this  
85 can depend on their care 'work-load' and socioeconomic status (Di Gessa, Glaser and Tinker 2016a). The  
86 potential effects can differ between study populations. For example, grandmothering has been associated  
87 with a greater risk of coronary heart disease in the US (Lee et al. 2003), but also with better health in  
88 general in Europe (Di Gessa, Glaser and Tinker 2016b), whilst mental health of both grandmothers and  
89 grandfathers can be both positively and negatively affected by looking after grandchildren (Kim, Kang and  
90 Johnson-Motoyama 2016). Relatively little is known of the physical health effects of childcare on

91 grandfathers, however, possibly due to lack of data on the intensity of grandfathering (Di Gessa, Glaser and  
92 Tinker 2016b). Furthermore, such impacts of grandparenting on grandparent health are not particularly  
93 well-studied in developing countries or for more traditional hunter-gatherer societies.

94 The extent of the potential effects of grandparents and grandchildren on each other are limited by the  
95 number of years a grandchild has a living grandparent. Indeed, variation in the duration of grandparent-  
96 grandchild shared time may even explain some of the heterogeneity in the results regarding effects on  
97 grandparents and grandchildren, and it is therefore of great importance; in societies with longer shared  
98 time, direct care effects are likely to be greater than in populations where shared time is much more  
99 limited. The length of grandparenthood is likely to vary not only between individuals, but also through time  
100 and space. In particular, decreasing fertility rates, decreasing childhood mortality, and increasing lifespan in  
101 relation to industrialisation and the accompanying demographic transition all may have affected the  
102 number of years grandchildren and grandparents co-existed. Any changes in the length of grandparenthood  
103 could have altered the costs or benefits of grandparenthood for both the grandchild and grandparent.  
104 Understanding such changing patterns in the opportunity for intergenerational transfers between  
105 grandparents and grandchildren is of importance for several fields, including population health,  
106 demography, economy, sociology, and biology (Leopold and Skopek 2015), in particular for evolutionary  
107 studies into family formation. For example, effects on grandchild survival might have changed between pre-  
108 industrial and industrial society, with the advent of effective healthcare and hygiene measures. However,  
109 studies on the length of time a grandchild has at least one living grandparent have thus far been hampered  
110 by a lack of detailed information on the mortality of both grandparents and grandchildren or on the  
111 number of grandchildren that they may have (Margolis 2016; Uhlenberg 2004). Estimates of shared time  
112 have thus not gone beyond the 20<sup>th</sup> century.

113 Using historical church records to construct an extensive multi-generational dataset on births and deaths  
114 from Finland, we investigate for the first time, to our knowledge, how the length of grandparenthood has  
115 changed over an extensive period of time, from 1790s until the cohorts born in 1950s (170 years). This  
116 period in Finland coincided, initially, with the typically high fertility and infant mortality rates of the pre-  
117 healthcare era (Scranton, Lummaa and Stearns 2016). Industrialisation and the demographic transition  
118 began largely from the 1870s/1880s (Hjerppe 1989, Scranton et al. 2016), and by our last study decade in  
119 the mid-20<sup>th</sup> century the average family size per woman had more than halved, childhood mortality had  
120 radically reduced, and life expectancy in adulthood had also risen. Our dataset thus offers an exceptional  
121 opportunity to investigate the length of grandparenthood under vastly different living conditions within the  
122 same country. We first quantify the proportion of grandchildren in each birth cohort who had any  
123 grandparent available at all to them at birth. Second, we investigate changes in the number of years  
124 grandchildren had at least one grandmother or grandfather available across the different stages of the

125 demographic transition - these were done in separate analyses. Though grandfathers did not provide  
126 survival benefits to grandchildren in historical Finland (Lahdenperä, Russell and Lummaa 2007), we still  
127 investigate how their shared time with grandchildren has changed across the demographic transition and  
128 beyond, as they are too often overlooked in studies relating to grandchild outcomes. Finally, we investigate  
129 from the grandparental perspective how the potential time for grandparent-grandchild relationships  
130 changed through time, quantifying how many years a grandparent would have grandchildren to potentially  
131 care for.

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### 133 **Methods**

134 The Lutheran church has kept records of births, deaths, marriages and dispersal events in Finland for tax  
135 purposes for centuries, and from 1749 onwards these covered all individuals in the country (Gille 1949). We  
136 have used such publicly-available church records, as well as published genealogies, for eight parishes of  
137 Finland (Hiittinen, Kustavi, Rymättylä, Tyrvää, Pulkila, Ikaalinen, Jaakkima, and Rautu) to construct  
138 pedigrees that follow the life events of known individuals from birth to death across a maximum of 15  
139 generations (Bolund et al. 2015; Pettay et al. 2016). Much of the data pre-dates industrialisation (Bolund et  
140 al. 2015), which began in Finland towards the end of the 19<sup>th</sup> century (Hjerpe 1989).

141 For this study, we included individuals born between 1790 and 1959 for whom the identities of both  
142 grandmothers are known ( $n = 10,257$ ;  $n = 3,049$  grandmothers), with 9,640 individuals also having known  
143 identities for both grandfathers ( $n = 2,848$  grandfathers). We separated individuals into ten-year birth  
144 cohorts (i.e. 1790-1799, 1800-1809 and so on), to quantify any changes in the length of grandparenthood  
145 alongside changing conditions with time. Sample size between cohorts varied from 137 to 1501. Finland  
146 experienced great upheaval during the study period: a war between Sweden (to which Finland belonged)  
147 and Russia during 1808-1809 led to Finland becoming a part of the Russian Empire; there was a major  
148 famine 1867-1868 (Hayward et al. 2012); Finland gained independence in 1917, and then civil war broke  
149 out the following year; and eastern regions of the country were ceded to the Soviet Union following a  
150 series of wars from 1939-1944.

151 We calculated the length of grandparenthood separately for each individual as the number of years that an  
152 individual (i.e. grandchild) shared with whichever grandmother (or grandfather) lived longer. For example,  
153 if one grandmother died at individual age 4 and the other at age 10, and the individual lived beyond 10  
154 years, the number of shared years for this individual would be 10. The length of time was calculated across  
155 the individual's lifespan, not just during childhood. If the death date of the focal individual or any of the  
156 grandparents was unknown, the length of grandparenthood was censored at the point (age) when all  
157 parties were last recorded as being still alive (or of known death status) by the Church (grandmother

158 analysis n = 2,354; grandfather analysis n = 1,869). Of the study individuals, 5.1% (n = 528) had no  
159 information on grandmothers available at birth, and 4.9% (n = 475) for grandfathers, leading to them being  
160 censored already at this point (shared time of 0 years).

161 From the grandparent perspective (n = 7,227 grandmothers; n = 6,882 grandfathers), we calculated the  
162 number of years, again on the individual level, that a grandparent had at least one grandchild whilst still  
163 alive themselves, and also the cumulative number of years that they had grandchildren (as an indicator of  
164 how they might have to divide potential care between the grandchildren). For the number of years, we  
165 totalled all years that a grandmother was alive and had at least one grandchild, regardless of how many  
166 grandchildren were alive at the time, e.g. a year in which three grandchildren were living would only count  
167 as a single year; for the cumulative number of years, we instead summed the number of years for all  
168 grandchildren, e.g. a year in which three grandchildren were living would count as three years. Individuals  
169 were censored at the year they were last recorded if they did not have a date of death, or at 0 years if this  
170 was before the birth of their first grandchild. Birth cohort for this analysis was taken to be the cohort in  
171 which the first grandchild was born.

172 Analysis was conducted with R 3.3.1 (R Core Team 2016). To determine the extent to which individuals  
173 could potentially interact with grandparents, we first calculated the proportion of grandchildren who had at  
174 least one grandmother/grandfather alive at birth for each birth cohort. We then used the *Surv* and *coxph*  
175 functions from R package *survival* (Therneau 2015) and implemented cox proportional hazards models,  
176 which control for censoring. The response variable in the cox models was time spent together, with birth  
177 cohort (17-level factor) as the explanatory variable. From these models, we were able to extract the  
178 average number of years across different cohorts a grandchild could be expected to share with at least one  
179 grandmother/grandfather, the average number of years that grandparents would have grandchildren, and  
180 the average cumulative number of years a grandparent would have grandchildren, all using the *survfit*  
181 function from the *survival* package.

## 182 **Results**

183 Figure 1 shows, for each cohort, the percentage of grandchildren with at least one  
184 grandmother/grandfather alive at their birth. This has clearly increased through time: in all except one  
185 cohort before the demographic transition, less than 75% of grandchildren had at least one grandmother  
186 alive at their birth. In contrast, 93.9% of grandchildren born in the 1950s had at least one grandmother  
187 alive at birth. For grandfathers, the same value increased from 63.2% in the 1790s to 83.7% in the 1950s.  
188 Overall, between 1790 and 1959 21.4% of grandchildren were known to have died before both  
189 grandmothers had (n = 2,194), and 18.3% before both grandfathers (n = 1,765). More commonly,

190 individuals were pre-deceased by their grandparents: 30.7% (n = 3,153) had both grandmothers dying  
191 before themselves, and 24.7% (n = 2,381) both grandfathers.

192 The duration of grandparenthood ranged from 0 to a maximum of 49 years that a grandchild had at least  
193 one grandmother alive, and from 0 to 42 for grandfathers. The average duration of grandparenthood  
194 changed considerably across the study duration. The average number of years for which a grandchild had at  
195 least one grandmother alive remained relatively low (Figure 2) for a time, fluctuating around 5 years,  
196 before increasing for every cohort from 1870 onwards. It reached a high of 24 years for 1950-1959, our last  
197 birth cohort. Grandfathers, on the other hand, were rarely present during the life of grandchildren for the  
198 late 18<sup>th</sup> and much of the 19<sup>th</sup> century, averaging only a couple of years at most up to 1880. The number of  
199 years they were around to (potentially) interact with their grandchildren then increased greatly, reaching a  
200 high of 16 years for the 1920-1929 and 1930-1939 birth cohorts.

201 From the grandparental perspective, there were similar increases in both of the demographic markers we  
202 investigated. The number of years a grandparent had at least one living grandchild more than doubled from  
203 12 years for grandmothers and 6 years for grandfathers in the 1790s to 27 and 16 years for grandmothers  
204 and grandfathers respectively by the 1950s (Figure 3). There was a slight decline in the number of years  
205 spent with at least one grandchild from the 1890s to 1900s – 18 to 16 years for grandmothers and 12 to 10  
206 years for grandfathers (though the decline continued into 1910s, reaching a post-transition low of 8 years)  
207 – before a relatively fast rise to the highs of the 1950s. For the cumulative number of years, the pattern was  
208 very similar (Figure 4), increasing more than three-fold for grandmothers (1790s: 29 years, 1950s: 99 years)  
209 and more than four-fold for grandfathers (1790s: 9 years, 1950s: 39 years). Again, there was a decline after  
210 the 1890s, followed by a rapid increase from the 1920s to the 1950s.

## 211 **Discussion**

212 Over a 170 year period, the number of years grandparents and grandchildren had both been alive at the  
213 same time greatly increased. This large and near-continuous increase in the number of years grandparents  
214 (both grandmothers and grandfathers) were available for their grandchildren, and the number of years a  
215 grandparent had grandchildren, coincided with the onset and progress of the demographic transition  
216 (Scranton et al. 2016) and industrialisation in Finland, which brought about decreases in child mortality and  
217 fertility rates (Liu, Rotkirch and Lummaa 2012). It may be that an increasing presence of grandparents in  
218 early childhood because of increasing grandparental lifespan had as much a role in this expansion of shared  
219 time as decreasing childhood mortality. The largest declines in grandparenting time from the grandchild's  
220 perspective, and in the proportion of individuals with a living grandmother/grandfather at birth, occurred in  
221 the 1930s and 1940s and may therefore be related to increased mortality from war. The effect of the large  
222 famine of 1866-1868 can also be seen in Figure 1. The late 19<sup>th</sup> century decreases in both the number of

223 years and number of cumulative years a grandparent had a grandchild (Figure 3 & 4) could be linked to a  
224 wide range of demographic rates changing at different pace in the early period of the transition, including  
225 age at first birth, number and proportion of surviving children and grandchildren, and longevity. This  
226 requires further investigation.

227 The amount of time a grandchild has a grandparent for offers - and limits - opportunities for interaction.  
228 However, though the potential time for grandparenting has increased - nowadays grandparents are more  
229 likely to survive throughout their grandchildren's childhood and grandparents are both healthier later in life  
230 - this does not necessarily indicate grandparents are able and willing to invest more actual time with their  
231 grandchildren. Families are no longer confined to small geographical areas, and the further away kin are,  
232 the less face-to-face contact they may have (Mulder and van der Meer 2009), though help can also occur  
233 through different routes e.g. economic support. Despite relatively short average shared times between  
234 grandmothers and grandchildren in the 19<sup>th</sup> century, they still encompassed a critical period (early  
235 childhood) for survival of grandchildren in pre-industrial Finland (Lahdenperä et al. 2004).

236 The nature of potential grandparental effects has also changed since the onset of the demographic  
237 transition, diminishing the importance of this increasing shared time in evolutionary terms: with reduced  
238 pressure from infant mortality, grandparents in contemporary industrialised societies are no longer  
239 important for child survival. However, only judging the importance of the grandparent-grandchild  
240 relationship by evolutionary fitness benefits underplays any developmental benefits on long-term  
241 outcomes that arise from having living, caring grandparents, and ignores the benefits to the grandparents  
242 themselves. Indeed, it may be that shared time is only beneficial to grandchildren's cognitive development  
243 and physical and mental health up to a point (transfer of resources could still continue though e.g. money),  
244 after which the grandparents become the main beneficiaries of the relationship (e.g. their own mental  
245 health). Shared time should, therefore, not be dismissed as irrelevant, nor should the relationship between  
246 grandchildren and grandparents only viewed from one perspective in contemporary societies.

247 Of course, it cannot be assumed that all grandparents are equal and have always been equal in their  
248 contributions to grandchild outcomes. Studies of pre-industrial Finland, for example, indicate that  
249 grandfathers had no assessable direct effects on the survival of their grandchildren (Lahdenperä, Russell  
250 and Lummaa 2007) whilst grandmothers did (Lahdenperä et al. 2004). In contemporary societies, the  
251 situation is somewhat different, with a growing body of literature on the potential effects and benefits of  
252 grandfathers. Effects could also differ by grandparental lineage (maternal/paternal), a distinction often  
253 made in historical populations - usually in regards to grandchild survival (see Sear and Mace 2008) - but less  
254 so in post-transition societies (Sear and Coall 2011). Though this is outside the focus of this study,



255 distinguishing between the shared time of grandchildren and their paternal or maternal lineages or  
256 combinations of different grandparents would be a highly interesting avenue of research.

257 We have shown how grandparenting time has changed across the demographic transition and alongside  
258 industrialisation. Future work could investigate the potential causes of these increases, whether they are  
259 due more to decreasing childhood mortality or increasing grandparent longevity, and how recent changes  
260 in fertility patterns (i.e. changing marital and childbirth ages, as well as fertility rates themselves) might also  
261 affect the duration and consequences of this relationship. Though the effects of grandparents on their  
262 grandchildren differ between contemporary and historic populations, the length of shared time is still  
263 relevant. With ageing populations, the duration of this relationship will become of greater social and  
264 economic importance: the longer the duration, the more grandparents could benefit from their  
265 grandchildren in addition to their children in terms of care and support (physical and financial) in their old  
266 age, but conversely the more grandchildren could compete with old and vulnerable grandparents for  
267 limited parental resources.

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353 **Figure 1. Percentage of individuals with at least one grandmother or grandfather alive at birth.** Dark grey  
354 circles represent grandmothers, red squares grandfathers.

355 **Figure 2. Average number of years grandchildren had a living grandparent, by birth cohort.** Solid line  
356 represents average for grandmothers, and dashed line for grandfathers. 95% confidence intervals are  
357 shown in colour: dark grey for grandmothers, red for grandfathers.

358 **Figure 3. Average number of years a grandparent had at least one living grandchild.** Grandmothers are  
359 represented by dark grey, grandfathers by red.

360 **Figure 4. Average cumulative number of years a grandparent had at least one living grandchild.**  
361 Grandmothers are represented by dark grey, grandfathers by red.







