

Unseen Heroes: Caregiving Experiences of Elderly Grandmothers in Pakistan

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ABSTRACT

Aim of the Study: In Pakistan, a significant number of grandmothers take care of their grandchildren while their parents work or study. In recent years, this role has increased multifold because of the increased presence of women in workforce and women getting into higher education post children. The aim of the study is to examine the experiences of the elderly grandmother who are providing care to their grandchildren and what factors influence those experiences.

Methodology: This qualitative study looked into the lives of 15 elderly caregiving grandmothers aged above 60 years in Lahore providing care to their grandchildren for at least six months. The data was collected through semi-structured interview and analyzed through thematic analysis.

Findings: According to the data, elderly grandmothers had both positive and negative caregiving experiences. The negative experiences of caring for their grandchildren were social isolation as a result of limited social life and interaction with family and friends, as well as increasing physical and emotional health issues. One the other hand, many grandmothers believed that caregiving improved their health and well-being. These experiences were influenced by the duration of caregiving, the number and ages of children, the caregiving support system, and their health status.

Conclusion: The study sheds light on the crucial role of caregiving grandmothers in Pakistani homes, emphasizing their contributions to their families and the economy in the absence of affordable formal childcare. It also emphasizes the significance of raising awareness and providing support to families, in addition to elderly grandparents who may already be struggling because of their advanced age and precarious health. This research supports SDG 3 (Good Health and Well-being).

Keywords: Caregiving, Childcare, Elderly Grandmothers, Elderly Health, Intergenerational Relationships, Pakistan.

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Introduction

Increased female labor force participation, changing family structures, and the absence or limited formal childcare in developing countries is leading to increased role of grandmothers as unpaid carers of their grandchildren (Zhang et al., 2022; Hamilton & Suthersan, 2021; Du et al., 2019; Chung et al., 2018). In addition, divorce, death, or health challenges of either or both parents may also lead to grandparents taking on the carer role of their grandchildren. Also, grandparents, particularly those who share a household, are frequently considered as responsible for joint care of children, particularly in Asian families (Hoang & Kirby, 2020). However, as childcare is a gendered phenomenon, it is usually the grandmothers among the grandparents who is regarded responsible for childcare, much as mothers are considered more responsible for childcare than fathers (Zhang et al., 2022). The grandmothers also offer many sorts of assistance to parents, such as guidance or emotional support (Mtshali, 2015; Schatz, 2007; Sharma & Kanani, 2006). This type of help could reduce parental stress or improve their mental well-being, which could lead to better parenting. As a result, grandmothers are playing important role in the care and raising of their grandchildren in Pakistani homes. This caregiving role is often a significant responsibility for ageing grandmothers, who may face numerous challenges and experiences that can affect their health and well-being.

Grandmothers giving part-time or full-time childcare to their grandchildren is common in many countries throughout the world (Kanji, 2018; Schatz, 2007; Sharma & Kanani, 2006). These grandmothers may reside with the family or separately while caring for the children. The support they provide to their children and grandchildren is physical, emotional, and financial. Furthermore, they also contribute to the socialization of their grandchildren by instilling norms and values in them (Madikizela-Madiya & Buchanan, 2013). According to the literature, caregiving grandmothers may have negative, positive or mixed experiences of being the caregivers to their grandchildren. The negative experiences that these elderly women may experience include social isolation, health issues, a lack of acknowledgement, and an overburdening of obligations. On the other hand, the positive experiences may include becoming physically active, finding purpose in life and feeling needed (Lai, 2010; Marks et al., 2002; Ancura & Aldwin, 2009). Many of these grandmothers are dependent on their children, particularly in the absence of a husband, and rely on them or other family members for sustenance (Saeed, 2018). However, research has consistently shown that the contributions of these elderly women to child caregiving are frequently undervalued or ignored by families, communities, and governments (Lopez-Ortega et al., 2018). The purpose of this article is to look into the experiences, challenges, and contributions of elderly grandmothers who are providing care to their grandchildren in Pakistan.

The studies that examined challenges faced by care providing found that grandparents face a number of challenges including increased burden of work, lack of recognition of their caregiving role, decreased physical and emotional well-being, as well as lack of family and community support for caregiving and reduced social engagement (Zaman et al., 2016). Furthermore, the caregiving role and absence of appreciation and recognition of the caregiving role of the grandmothers may lead to further isolation and marginalization (Lopez-Ortega et al., 2018; Schatz, 2007). In addition, grandmothers who cared for their grandchildren also had a lower quality of life, more physical health issues, a lowered sense of well-being, and a higher level of anxiety and melancholy (Moral-Fernández et al., 2017; Tucker & O'Shea, 2018).

Several countries have adopted interventions and programs to assist carer grandparents. In the United States, for example, the National Family Carer Support Programme assists and gives resources to grandparent carers (Fuller-Thomson et al., 1997). In South Africa, community-based programs such as psychosocial support and financial aid have been introduced to assist caregiving grandparents (Madikizela-Madiya & Buchanan, 2013). These approaches have demonstrated promising outcomes in enhancing the well-being of grandmothers who provide care. More research is required to better understand the challenges and requirements of caregiving grandparents in different cultures, as well as to design effective treatments and policies to assist them. In addition, interventions should be targeted to suit

the specific requirements of caregiving grandparents, such as treating their health concerns, providing respite care, and encouraging intergenerational activities that improve family bonds (Memon, 2015).

Literature Review

According to the studies on grandmothers who look after their grandchildren, these senior citizens in Pakistan have a range of experiences doing so. The grandmothers help and support their families as well as have a big impact on the lives of their grandchildren (Kanji, 2018). However, they could encounter many difficulties while doing so. The negative challenges include social isolation, health issues, a lack of acknowledgement, and an overburdening of obligations (Saeed, 2018). Furthermore, caring can be physically taxing, contributing to health issues such as hypertension and diabetes (Shahzad, 2017). Due to financial and time constraints, caregiving grandmothers frequently have restricted access to healthcare, which might exacerbate their health concerns (Zaman et al., 2016).

Caregiving grandmothers may also face social isolation in addition to health issues since their caregiving responsibilities may negatively influence their involvement in social activities (Memon, 2015). Reduced or lack of social involvement can lead to feelings of loneliness and isolation, which can lead to further decline in physical and mental well-being; additionally, caregiving grandmothers are frequently overlooked or underappreciated for their contributions to the family and society at large (Saeed, 2018). The literature also suggests that grandmothers in Pakistan find difficulties in balancing their caregiving responsibilities with other household and family responsibilities. Caregiving grandmothers, for example, may struggle to manage home chores and preserve their own health (Shahzad, 2017). Additionally, they could find it difficult to manage their caregiving duties while preserving their relationships with their spouses or friends. For instance, they might find it difficult to spend time with their spouse or friends or meet social commitments like attending weddings or funerals, among other things.

Numerous other studies undertaken around the world have produced outcomes similar to the Pakistani studies. Whether providing part-time or full-time care for their children, grandmothers face a range of challenges. These challenges include both physical and emotional health issues, such as sadness (Fuller-Thomson et al., 1997), lower social support (Gibson et al., 2011), stress (Fuller-Thomson et al., 1997; Chen & Silverstein, 2000), insufficient access to healthcare services, and financial strain (Madikizela-Madiya & Buchanan, 2013; George et al., 2017; Lopez-Ortega et al., 2018).

The researchers, on the other hand, also reported favorable impacts of caregiving on grandmothers, such as improved mental health, increased social support, and greater physical activity levels, all of which led to improved health. Furthermore, caring resulted in stronger family relationships, which increased their emotional well-being (Lai, 2010; Marks et al., 2002; 6; Ancura & Aldwin, 2009). Furthermore, grandmothers who provided regular childcare to their grandchildren reported higher levels of life satisfaction, fewer symptoms of sadness, lower levels of depressive symptoms, and improved physical health (Cheng & Chan, 2006; Hansen & Slagsvold, 2015). Liao et al. (2021) also discovered that caring grandparents had better cognitive functions than non-caring grandparents.

Positive effects of caregiving also lead to improved intergenerational relationships among three generations. Grandmothers who care for their grandchildren often report stronger bonds with both their children and their grandchildren (Memon, 2015). In addition, less intensive caring for children is also associated with better physical and mental health outcomes for caregiving grandparents due to healthier habits such as more physical activity and purpose in life ((Zhang et al., 2022; Jennings, 2021). Finally, providing child care for grandchildren has both positive and negative consequences. These effects may differ from person to person and culture to culture. However, identifying these factors is critical so that the caregiving experience can be understood holistically and the necessary support and recognition is provided to make the caregiving experience better for the elderly grandmothers.

Research Objectives

The purpose of this study is to investigate how Pakistani grandmothers in their later years care for their grandchildren. The primary objective of this research is to examine the complex nature of caregiving as it is experienced by elderly grandmothers, including their roles and obligations. The study also intends to find out how cultural norms affect elderly grandmothers' roles and obligations within the family, as well as the impact of cultural ideas and values on caring practices. The study also examines the challenges that these elderly carers confront and the formal and informal support that they have or ought to have to help them with their responsibilities.

Research Questions

The research questions of the study are:

1. What are the lived experiences of elderly grandmothers who provide care to their grandchildren in Pakistan?
2. Which factors affect the caregiving experiences of these elderly grandmothers?
3. What resources and support are available for elderly grandmothers with their caregiving duties?

Research Methodology

In order to gain a thorough knowledge of the experiences of grandmothers caring for their grandchildren, this study adopted a qualitative research approach. According to Flick (2022) a person's interpretations and meanings of their life experiences provide insight into their social world. In order to understand a phenomenon as it is experienced and develop a comprehensive understanding of individuals, situations, and context, it is necessary to examine subjective realities and their social contexts.

Population and Sampling Technique

The Population of the study were all women who were grandmothers and were providing care to their grandchildren. The care provided could be parttime or full time. The purposive sampling method was used in this study to choose the potential participants. It is a technique where specific people and situations are chosen on purpose in order to gather richer knowledge that cannot be found in other sources (Babbie & Edgerton, 2023).

Purposive sampling was used to identify women who satisfied the inclusion criteria of being 60 years or older, serving as primary or part-time care givers for their grandchildren for at least six months, and lived in Lahore city. The sample size of 15 individuals was established using the data saturation principle, which is the stage at which additional data no longer provides new insights. The data was gathered between October 2022 and February 2023. Eleven participants ranged in age from 60 to 79, with four exceeding the age of 80.

Data Collection

This study used in-depth interviews to collect data from 15 elderly grandmothers in Lahore, Pakistan, about their experiences as caregivers for their grandchildren in Lahore. In-depth In qualitative research, interviews are one of the most popularly employed methods of data collecting since they are seen to be effective at getting responses from the participants. When using an interview guide with open-ended questions, a researcher has the freedom to elicit as much information as feasible (Babbie & Edgerton, 2023). The interview was conducted by the research team in Urdu, and Punjabi. The interviews lasted 45-60 minutes and were held at a place specified by the participant, in all cases, their homes. The interviews were tape recorded with the consent of the participants. Each subject provided informed consent. The participants were informed of the study's goal and ethical consideration of confidentiality and anonymity.

Data Analysis

Thematic analysis is one of the most common forms of analysis within qualitative research (Majumdar, 2022). In this study the data gathered from these interviews was also analyzed using thematic analysis. The tape-recorded interviews were transcribed verbatim and translated into English language. To ensure the actual meanings are not lost in translation, the other research team members crosschecked the translated transcripts and changes were made after discussions. Through an iterative assessment of the data, the research team uncovered codes and themes. The codes were organized into categories, and themes were discovered according to the frequency and significance of the categories.

Findings

According to the findings of this study, caregiving grandmothers have both positive and negative experiences emerging out of childcare experiences. Data revealed several critical aspects about the experiences of caregiving grandparents in Pakistan. This section discusses the experiences of caregiving of the elderly grandmothers and the factors that contribute to these caregiving experiences.

Experiences of Caregiving

Social Isolation

For grandmothers who care for their grandchildren, caregiving can be a solitary experience. Because of their caregiving responsibilities, they may feel isolated from their social interactions, which may involve missing out on events and interests. This might result in feelings of isolation and alienation from their peer group. According to one 62-year-old participant, she used to have a very active social life, routinely visiting friends and family, attending get together, and Quran classes. She used to go for walks to the park with her neighbors, but when her son had children, she couldn't go everywhere. She felt sad when she saw their Facebook photos and realized they had stopped inviting her anymore.

Caregiving grandmothers may find it difficult to share their feeling with their adult children, who they feared might not fully understand the challenges they face, and may consider them selfish, contributing to feelings of isolation and exclusion. "My daughter thinks I have all the time in the world, but taking care of my grandchildren is a full-time job, if I ever mention my concerns, she gets irritable and tells me that all the grandmothers are happy to do it except me. She once told me that in this age I am only interested in enjoying myself and so not care about her and her children. She makes me feel like a bad mother." said another participant, 65.

Furthermore, caregiving grandmothers may find it difficult to combine their caregiving responsibilities with their own wants and interests, especially when it comes to their relationship with their spouses. Three of the participants discussed how caregiving has affected their relationship with their husbands, who may feel ignored or neglected. According to one 61-year-old participant, her spouse is continually irritated with her for never being present for him. He says that he expected them to spend the day together when he retired, having breakfast and going for walks, but she is always scurrying after the kids. He wants to go meet his friends and wants her to accompany her, but she is unable to do so. This causes tension and add to her sense of isolation and separation from her spouse.

Lack of recognition and feeling unappreciated

Participants expressed feeling undervalued by their children despite caring for their grandchildren. Many thought that in Pakistani society, grandmothers as carers were often perceived as having an expected role and familial obligation, leading them to feel obligated to care for their grandchildren even if they had qualms. As one person put it:

"When all my married daughters came to visit, they make plans for lunches, dinners and movies every day and leave their children with me without even asking me if I would like to join them." So, I have 11 grandchildren virtually every day. I never say anything, but I

am deeply hurt that they simply believed I am too old to accompany them. In our society, we have this assumption that once you reach a certain age, all you want to do is read the Quran and pray, and you should be uninterested in anything else. However, this is not the case. I may be over 80, but I still like to do all of those things. I can't even convey myself to my daughters for being judged".

Another participant shared her feelings, saying:

"I know I'm not doing anyone a favor by babysitting my grandchildren, but a thank you every now and then is always nice." Children must never take us for granted. Everyone enjoys a little recognition."

Similarly, another participant aged 82 stated:

"Forget about appreciation; my daughter-in-law enters the house and asks me what the kids did that day, what they ate. Then she starts yelling at me, asking why I gave her this or that or why I didn't put the baby to bed. I'm so afraid of her reactions that I call her for direction, and then she says, "Why do you keep calling me, don't you know I'm at work?" For me, it's a no-win situation."

Furthermore, some participants stated that their children do not provide them with adequate financial and resource needed for caregiving. "My son has a well-paying job and could easily afford to hire a maid or a carer for his children, but he wants to save money and makes me take care of them," said one participant, 65. I do it happily because they are my grandchildren, but I wish he would recognize that I am not getting any younger and that it is becoming increasingly difficult for me to meet their expectations."

Another 71-year-old participant expressed her displeasure, saying, "I take care of my seven and nine-year-old grandchildren, and they know how to order food online." They frequently order it without informing me, and I am forced to pay for the home delivery. They also begin to cry out for ice cream whenever they see the ice cream vendor pass by. I would love to pay for them, but I just have enough money for my medicine and other necessities. I end up wasting most of it on frivolous purchases. I am hesitant to ask my children for money back because of the fear of sounding cheap."

These statements emphasize the financial pressures that caregiving can place on grandparents, particularly when they do not receive any support help from them. They also feel that their adult children must at least recognize the sacrifices their parents are making to care for their grandchildren and provide them with the resources and assistance they require.

Feeling happy and positive leading to improved health

Several participants stated that the caregiving has led to positive changes in their life especially their health. "I used to have high blood pressure and was on medication," one 66-year-old participant explained. However, once my daughter-in-law started leaving her child with me, I became more active. I had to look after the baby, play with her, take her on walks, and cook for her. I lost weight, my blood pressure returned to normal, and I discontinued my medication. "I feel young and fresh again." Another participant, 72, stated that being a carer has given her life purpose and meaning. "I used to feel useless after my husband died, but taking care of my grandchildren has given me a reason to wake up every morning," she added. They require my assistance, which makes me feel wanted and valuable. "I'm not lonely anymore."

Another participant aged 71 also shared that childcare improved her social life and physical activity at the same time. She shared:

"When I started looking after my grandchildren, I started taking them to the park even though I wasn't used to getting out often. I had no idea that many grandmothers and mothers visited. So, we walk or sit on a bench and talk while the kids play. I met a lot of

people, all ages. Meeting so many amazing women is wonderful. We chat and occasionally bring tea and snacks from home. We occasionally laugh like little girls. If anyone misses a day, others call or drop by to check on that person."

Another participant, 71, stated that caregiving has aided her recovery from a significant illness. "I was bedridden for many years and had lost all hope in life after undergoing a surgery but after my daughter-in-law started leaving her baby with me, I felt compelled to get up and care for her. Taking care of the infant aided my recovery. I began walking again and doing little chores. "I finally feel like living again."

Finally, some participants stated that caring for their grandchildren had provided them with a sense of purpose and fulfilment. "I feel needed when I take care of my grandchildren," one 78-year-old participant stated. They come to me with their concerns, and I listen and assist them. I like to think I'm making a difference in their lives. It's a nice feeling." Another participant, 65, stated, "I feel like I'm doing something worthwhile by caring for my grandchildren." I am instilling in them good beliefs and traditions. I want them to grow up to be nice people."

Stronger intergenerational relationship

Caregiving has made some individuals feel closer to their grandchildren, in addition to having a good influence on their health and happiness. "I didn't have a very close relationship with my grandchildren before, but now that I am their carer, we have become very close," said one 67-year-old participant. "My grandchildren tell me everything, and I can help them navigate life. It's an extremely rewarding experience." She further added. Many participants shared about their bonding with their grandchildren strengthen as they began to spend more time with them. As one participant shared:

"I go with the driver to pick my grandchildren from school. As soon as they get in the car, they begin telling me about their day, their teachers, their friends, and all the gossip. I truly enjoy that. When their parents come home in the evening and ask them about their day, the children tell them to ask me as they cannot repeat all the stories. My children tell me that the kids are closer to me than they are with them. They tell me all their secrets that they think they cannot tell their parents. I just love it."

In addition to grandchildren, few participants believed that their relationship with their children especially their daughters-in-law improved as a result of caregiving they provide to their children. They shared how they are appreciated for helping out with the children. One of the participants, aged 66, shared:

"My daughter-in-law was quite reserved and aloof. However, we have become close ever since she gave birth and I began caring for the baby during the day after her maternity leave. She says that many of her coworkers' mothers-in-law refuse to care for their children, so she considers herself extremely fortunate to have a mother-in-law like me. She always expresses her appreciation and gives me compliments in front of everyone. She also frequently buys me gifts. She tells me that she feels more closer to me than her mother since she had the baby."

In conclusion, the participants recounted their varied experiences, both positive and negative, of caregiving. For instance, some participants experienced social isolation, others found that their social life and relationships with their families improved. Similar to this, while providing care meant an increase in their physical and emotional health issues, for others it meant improved health and well-being. Their differing experiences were influenced by a variety of factors. These factors are discussed in the next section.

Factors that Contribute to Caregiving Experience of Elderly Caregivers

The data show that a variety of factors influenced the grandmothers' caring experiences, including the length of caregiving, the number of children and their ages, support, and their health status.

Duration of Caregiving

The participants cared for their grandchildren for varied lengths of time based on their mothers' absence. Some participants provided care from morning to afternoon because their daughters and daughters-in-law worked in schools or part-time employment, whereas others provided care until the end of the day since their daughters worked in banks or the business sector. Many participants stated that the children's fathers' work hours had no impact on their caregiving responsibilities, as caring is considered a woman's role, especially for infants and younger children. Furthermore, some elderly carers cared for children whose moms had no set schedules and even worked at night, particularly mothers working in the healthcare and tourism sectors.

Participants who provided care for a limited number of hours considered it easier than those who gave care for longer periods of time or had no set timetable. "My daughter-in-law works until 6 p.m., and it takes her an hour or so to get home," said one 70-year-old participant. I don't have enough time to care for the children because I have to change them, feed them, and handle their Quran and tuition teachers. On weekends, I only have time to sleep or lie in bed in the afternoon. It is not safe for me to leave the youngsters unattended. I'm fatigued by the afternoon."

Similarly, another participant aged 67 shared:

"Since my daughter is an air hostess and frequently travels for extended periods of time, I am required to care for the children for days at a time." When the children are smaller, they are usually alright during the day, but at night they always require their mother. They are always crying for their mother, especially when they are ill or have tests. In addition to being physically exhausting, caring for the children is emotionally draining, and I have often remained up all night with them."

Participants with limited hours of childcare, on the other hand, reported fewer difficulties. According to an 80-year-old participant:

"My daughter-in-law is a visiting professor at a university, she usually goes for a few hours. She usually puts the baby to sleep so I don't have to deal with them for long. Her job hours are flexible, so if the baby has an issue, she reschedules her classes and returns immediately."

Number of Children and their Ages

The numbers of children and their ages also have an impact on the caregiving experiences of grandmothers, who are the major carers in the absence of parents, particularly mothers. Because family sizes in Pakistan are typically bigger, study participants were caring for one to four children at a time. Furthermore, the grandmother is frequently responsible for the children of their various offspring who live in the joint household. Furthermore, children from other houses may occasionally leave their children with the grandma during working hours. The increased number of children means more labor for the older carers.

One grandmother aged 63 who takes care of five boys under eight years of age shared laughingly:

"My friends and family describe my house as a "little mad house" Imagine five hyperactive and rambunctious boys. My one son has three, and the other two. Despite the fact that I have a maid to assist me, they are all tiny Denis the menace. I only have to glance aside for a split second before I hear something breaking or one striking the other. They keep the maid and I on our toes all day. I can't even go to the toilet or get groceries for a long time. No matter how careful I am, one or other gets a bruise or bump."

Similarly, another grandmother, 72 years old, stated that caring for numerous children at the same time is difficult because it demands a lot of attention and energy. "When you have four children to care for, you have to be constantly alert, and it becomes physically exhausting to keep up with them," she explained. She went on to say that caring for smaller children necessitates greater physical strength since they must be picked up, carried, and attended to more frequently.

Participants also stated that the age and number of children had an impact on their capacity to offer quality care. Some participants found it simpler to provide one or two children individualized attention, whereas others struggled to give appropriate attention to all of the children in their care. One 68-year-old grandma expressed concern about not being able to pay equal attention to her two grandchildren of varying ages.

"I find it difficult to balance my time between my nine-month-old granddaughter and my four-year-old grandson," she explained. The infant and the toddler both have different needs and require constant attention which is difficult to provide all the time."

Participants also mentioned how the children's temperament and behavior influenced their caring experiences. Children with behavioral problems, such as tantrums or aggression, were more difficult to manage, particularly if the carer lacked support or resources to address these issues. Furthermore, children whose mothers were absent for extended periods of time had more behavioral issues.

Care Support

The experiences of caregiving grandparents were also influenced by the support they receive from formal help or family members. Furthermore, whether they lived in a joint family or solely with a couple and their children impacted their experiences. For example, one 77-year-old woman reported that her daughter leaves her two children with her along with a maid. She revealed:

The maid does all the work of the children while I only have to oversee things. Although I prefer to feed the children myself. My daughter is also at ease because I am there with the kids else, she does not feel safe leaving her children with a maid alone at home.

Other participants, on the other hand, stated that they did not have assistance from family members or formal help and had to manage on their own, which was a difficult and stressful endeavor. They expressed a wish for additional support and assistance from family members to make caring easier and less stressful. Overall, the availability of assistance had a substantial impact on grandmothers' caregiving experiences, emphasizing the necessity of family support in elderly caregiving. Furthermore, some grandparents said that living with unmarried daughters made caregiving easier since they could share tasks. One 68-year-old participant stated:

"My unmarried daughter assists me greatly in caring for the children." She looks after the older children, while I concentrate on the younger ones. It's not easy to deal with all of them on your own, but having her there makes it easier."

Participants also reported how their caregiving experiences differed depending on whether they lived in a joint family or simply with a couple and their children. Those who lived in joint families reported receiving greater support and aid in caring for their children from other family members.

"Living in a joint family has its benefits," said one 74-year-old participant. Other family members are always available to assist with child care, especially if we need to do an errand or take some time for ourselves. It makes the whole thing lot easier."

Those who solely lived with a couple and their children, on the other hand, reported having greater duties and finding it more difficult to balance caregiving with other household tasks. "Living only with the couple and their children means that all the responsibilities fall on me," one 71-year-old participant explained. It can be difficult at times, especially since my grandson is just one and a half years old but is a

big baby. He wants me to carry him, yet doing so causes discomfort in my shoulder and back. But there are times when I have no choice but to do it, even if it means being in pain for hours."

Health Status

The caregiving grandparents' age and health state are major elements that influence their caregiving experiences. Caring for grandchildren can be difficult for senior carers who have chronic health conditions, especially when it comes to physical chores like bending and carrying the children. Some participants, for example, stated that they had arthritis, shoulder, or back problems that made such duties difficult. As a result, they frequently endure pain or discomfort, which might impair their capacity to care for others.

For example, one 69-year-old participant stated that she has arthritis, which makes it difficult for her to pick up her grandchildren to run errands such as getting them to the toilet or giving them a bath. She gets back pain whenever she performs it, and she has to take pills to manage the pain. However, taking pain relievers on a regular basis impacts her stomach, causing her additional health problems. Despite these obstacles, she does not burden her children with her health issues because she recognizes that they can't afford to hire a paid babysitter due to financial restraints. Similarly, another grandmother, 84 years old, shared:

"I take medications for a variety of health issues. Some medications have side effects that cause me to feel drowsy and nauseous during the day. Taking care of the children becomes quite difficult for me during this time. I have to force myself to stay awake by drinking tea or skipping pills."

Some participants, on the other hand, who were relatively fit and energetic, did not suffer substantial obstacles when caring for their grandchildren. They were able to carry out their caregiving responsibilities with ease, and they were even energized by spending time with their grandchildren. However, some of these individuals stated that they still needed to be cautious with their movements and prevent overexertion. They also mentioned that they needed to be mindful of their health and ensure that they were taking care of themselves while caring for their grandchildren.

In short, the age and health status of caregiving grandparents are critical aspects to consider. The findings show that younger elderly women in their early 60s were more suited to care for their grandchildren than those in their 80s. Furthermore, health issues were equally critical determinants affecting the ability of older carers to provide help. It can also alleviate the burden and stress of caregiving, so enhancing their quality of life and general well-being.

Discussion

In Pakistan, grandmothers who care for and raise their grandchildren play an important role by providing support to their children by providing childcare or its supervision. It is common in many Pakistani families for grandmothers to care for their grandchild while their parents work or study. This custom is profoundly ingrained in Pakistan's cultural and social fabric as in many other countries around the world (Kanji, 2018; Schatz, 2007; Sharma & Kanani, 2006). As a result, the vast majority of participants readily embraced and accepted the role of carer. According to the literature, grandmothers responsible for caring for their grandchildren often feel resentful of their caregiving roles since they no longer have the freedom that comes with retirement (Sampson & Hertlein, 2015). However, no participant in this study felt forced to play this role. The issues they highlighted were more about their capacity of performing the role, how they were expected to do it, or their children's behaviors or attitude. However, none of them were resentful of their grandchildren or the prospect of caring for them.

The literature on caregiving grandmothers examines both primary and secondary caregiving experiences. However, in this study, all of the carers were secondary carers. A substantial number of these elderly women lived in the same house as the family, although two participants lived separately from their

children and provided part-time care while their children were at work or school. Although the grandmothers who were staying in the house with the grandchildren continued to offer care after the children's parents returned. Many of these grandmothers were part of a joint family arrangement, with multiple married sons and children living together. Moreover, in other situations, their married working daughters with children living apart were also leaving their children with them for the entire work day or for a couple of hours after school. As a result, many grandmothers were caring for several children of a variety of ages from their different children. This significantly raised their burden of care.

The participants also expressed their difficulties and inability to care for their grandchildren due to health or other issues, such as the number of children and other domestic responsibilities (Tucker & O'Shea, 2018; Moral-Fernández et al., 2017; Sampson & Hertlein, 2015). They did, however, emphasize that they were aware of the difficulties their children experienced in caring for their children due to employment or study. According to them, this was due to a variety of factors, including the high cost of living, which meant that a family cannot survive on a single income, driving women to enter the labor force, especially in the low and middle-income families. Secondly, long working hours, notably in the private sector, and a dearth of part-time employment opportunities. Lastly, organizations and the government's failure to provide structured, affordable daycare to working parents. This resulted in a more sympathetic understanding of the situation by the grandmothers and led to a lack of hostility towards their children, as mentioned in some studies.

The caregiving grandmothers had both positive and negative experiences of providing care to their grandchildren. These experiences were influenced by a number of factors, including the length of caregiving, the number of children and their ages, level of support, and their health status. Since these grandmothers were elderly, the most common challenge they experienced was health-related, restricting their ability to care for their grandchildren. Participants discussed their health concerns, which included arthritis, back pain, diabetes, and high blood pressure. They believed that their health difficulties, as well as the medications they were taking, hindered their capacity to provide care at times. As the number of children, they cared for increased and reached a more active age, the situation became more challenging. These issues, however, could be managed if they had any in-house formal or informal help, making their role more supervisory in character.

Many grandmothers in the literature and our study findings reported mental and emotional health difficulties in addition to physical health issues. Several grandmothers, similar to literature, reported feeling socially isolated since the adults in their lives are gone for the majority of the day and they were alone with their grandchildren (Zaman et al., 2016). In addition, their social life, time with spouse, and time to pursue hobbies or interests suffer as a result of their carer position. Furthermore, they, at times, felt undervalued or underappreciated for the obligations they have taken on (Mumtaz & Salway, 2005). As previously stated, grandmothers taking on the role of carer is embedded in Pakistani culture, which may lead to children taking their mother for granted and making decisions for them without their approval. Refusing this responsibility may characterize the grandmother as selfish and unloving, and it may also have an impact on her relationship with her children.

Despite the difficulties, many elderly grandmothers' caregiving role resulted in a positive impact on their physical and mental health. According to the literature and our findings, caregiving grandmothers led to a strong and lasting relationship with their grandchildren and children (Lai, 2010; Ancura & Aldwin, 2009; Marks et al., 2002). A large number of participants in this study also shared similar positive experiences of childcare stating that their grandchildren made them feel important, needed, and unconditionally loved. This improves their mental health by making them happier and less anxious. The physical part of care encourages elderly grandmothers to be more physically active both indoors and outside, which had a favorable impact on their physical and mental health (Zhang et al., 2022). Many of the study's participants shared similar experiences, such as how taking their grandchildren to the park increased their social interactions with other mothers and grandmothers that helped some of them form new friendships.

Conclusion

In conclusion, elderly grandmothers providing part-time childcare is a widespread but undervalued custom in many Pakistani families. This practice has grown significantly in Pakistan as a result of rising female labor-force participation and a lack of affordable formal childcare options. These grandmothers are contributing to the country's economy by allowing young females to enter the workforce, many of whom would otherwise be forced to give up formal employment due to their status as primary carers of children in Pakistani culture. These grandmothers who provide care are a diverse group that come from various socioeconomic and ethnic backgrounds. In giving care, they face several physical, mental, and financial challenges and may require support. These elderly grandmothers are a vulnerable population that is frequently ignored by government policies and programs.

This study's findings emphasize the need of examining the diverse experiences of this group. More awareness is needed about their contributions to the families, communities, and economy of Pakistan. Furthermore, recognizing the obstacles they face will enable the planning and provision of required support that will facilitate and lessen their burdens and challenges in providing childcare. Policymakers and healthcare practitioners must develop policies and comprehensive and inclusive social welfare programs that address not only grandmothers who provide informal childcare, but also interventions, support, resources, and childcare facilities for parents of young children. The current study suggests a need for community-based social welfare programs that aid parents of small children and grandparents who care for their grandchildren. The findings of this research will also contribute in the achievement of Sustainable Development Goals such as SDG 3 - Good Health and Well-being - and SDG 5 - Gender Equality.

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Conflict of Interest


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