



## Empowering African Grandmothers as Social Change Agents: Optimizing a Cultural Resource

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### ABSTRACT

In non-western hierarchically structured cultures, older women, or *grandmothers*, play a central role especially in the care and socialization of women and girls. In the Global South, programs supporting girls' rights and development consistently ignore the grandmother resource. In Senegal, the assets-based, grandmother-inclusive, Girls' Holistic Development (GHD) program addresses major issues regarding girls' education, child marriage, teen pregnancy and female genital mutilation. GHD empowers grandmother to support girls. A meta-synthesis of 14 earlier studies on GHD identified the impact of grandmother-inclusion on grandmothers themselves. Thematic analysis revealed positive changes in: community recognition of grandmothers' role with girls; grandmothers' knowledge on GHD; grandmothers' increased influence in family decision-making; and grandmothers' empowerment to promote community-wide change in social norms affecting adolescent girls. Based on the research data, a pathway was constructed linking grandmother-inclusion and empowerment to collective action by grandmothers to change social norms affecting girls. Empirical results of the GHD program supports the conclusion that grandmother-inclusion, can build their collective agency to actively promote change supporting girls. These results suggest that programs supporting girls' development should adopt grandmother-inclusive strategies.

### KEYWORDS

Adolescent girls; Global South; grandmother-inclusive; grandmothers; collective agency

Most programs to promote the development and well-being of communities in the Global South focus on younger family and community members and involve elders to a very limited extent (Aubel, 2010). A focus on youth ignores the culturally defined and central role of elders within family and community systems in non-western societies (Airhihenbuwa, 1995). While most international development organizations have a gender-based perspective which supports the inclusion of women, programs have consistently focused on younger women and overlooked older women (Lipman, 2013).

In hierarchically structured non-western societies in Africa, Asia, Latin America, elders play a central role in community and family life. Specifically related to the socialization and care of younger generations, it is older women, or *grandmothers*, who are culturally designated to play a central role within family systems (Aubel, 2023). However, across Africa, and elsewhere in the Global South, programs to improve the health and well-being of women and children invariably focus on younger women and girls and very rarely involve grandmothers (Lipman, 2013; Newman, 2023).

There is a consensus that social change initiatives should be grounded in cultural context and that receptivity of communities to social change interventions depends greatly on whether they resonate with local cultural frameworks and actors (Malunga & Holcombe, 2014). In the Global South, many programs designed both by local governments and external funders reflect only a superficial understanding of targeted cultural contexts, and invariably focus on deficits, or problems, ignoring local strengths and resources (Malunga & Holcombe, 2014; Serageldin, 1992).

There is growing concern with the incongruity between dominant western values conveyed through global development strategies and the structure and values of societies in the Global South (Malunga & Holcombe, 2014a). These concerns are reflected in calls for decolonization which involves recognizing

and building on the culturally grounded knowledge, values, roles and resources of non-western cultures that have been largely ignored in global development schemes (Newman, 2023). Key features of African families, across the continent, that influence the lives of girls include: the extended and multi-generational family structure; strong relationships between generations; collectivist values that prioritize interdependency and solidarity; collective decision-making and conformity to group ideas; and respect for elders' experience and guidance (Sudarkasa, 1980).

Evidence of the gap between the socio-cultural structure and values of African families and dominant programmatic approaches to support adolescent girls is the failure of programs to recognize and optimize the culturally designated role of grandmothers in the socialization and protection of girls. To understand this gap, Newman (2023) analyzed programs supporting adolescent girls and identified the prevalence of a *grandmother exclusionary bias*. She specifically observed this bias in many programs that promote abandonment of child marriage and female genital mutilation supported by international organizations, including influential institutions like the United Nations Fund for Population Activities (UNFPA, 2019). In her research, she identified two key factors that contribute to grandmother exclusionary bias. First, there is limited awareness on the part of Eurocentric international development practitioners of the structure of non-western, hierarchically structured cultures in which grandmothers play an influential role and have authority on all issues related to women and children (Newman, 2023). Second, sexist ageist attitudes support the assumption that grandmothers can have a negative influence on modern girls, and that they are unable to learn and to change their attitudes, for example, toward the importance of education for girls (Newman, 2023). As presented later, my findings show that grandmothers are able to change their attitudes on such issues (e.g., See Institute of Reproductive Health, 2020). Newman asserted that western feminist thinking supports grandmother exclusionary bias: "While feminists have placed women firmly on the agenda, privilege is given to girls, adolescents and young adults – while grandmothers/older women are rarely mentioned" (Newman, 2023, p. 1242).

The research presented here deals with the Girls' Holistic Development (GHD) program that uses an innovative grandmother-inclusive approach to address four issues that have a determining impact on girls' development. GHD promotes girls' education and discourages child marriage, teen pregnancy and female genital mutilation. Extensive research by Georgetown University concluded that the approach has had a significant positive effect on all four of these issues (Institute of Reproductive Health, 2019, 2020). The benefits of the GHD program for adolescent girls have been presented elsewhere "(e.g. Institute of Reproductive Health, 2019, 2020)." After discussing the background of the GHD program, and its connection to community psychology and positive psychology, the manuscript presents empirical evidence of the impact of grandmother-inclusion in the GHD program on grandmothers themselves.

## **Concepts underpinning the girls holistic development (GHD) program**

Development of the GHD program was influenced by a series of complementary concepts from community psychology, positive psychology, psychology of aging and adult education. Below, I review some of the major concepts and also show their relevance to the GHD Program.

### **Community psychology and the GHD program**

Community psychology promotes collective social change grounded in an ecological, or systems, approach in which the unit of both analysis and intervention is the community, rather than the individual (Kelly, 2006). Hawe and colleagues (2009) assert that promoting systemic change in communities requires catalyzing interaction and strengthening relationships between community actors. Culture is considered to be a foundational element in all community interventions and Trickett (2009) argued that development of interventions should be based on an initial in-depth analysis of cultural context. Another fundamental dimension in community psychology is capacity building of local resources, or assets, including social networks, local knowledge and local leaders (Trickett et al., 2011). And Kretzman and McKnight's (1993) Asset-Based Community Development provides practical guidance for strengthening community assets. Trickett and colleagues (2011) underline the benefits of empowering and building the capacity of local actors to address current issues, as well as future ones. These

scholars (Trickett et al., 2011) contend that the creation of authentic relationships between intervention staff and community members contributes positively to program outcomes.

The GHD strategy embodies all facets of community psychology cited above, many of which resonate with those of positive psychology. It is grounded in the prevalent culturally defined hierarchy, values and roles, extant in Senegalese society. For example, in all activities elders are accorded respect and their experience elicited. GHD promotes community-wide change by involving all generations of men and women, traditional and religious leaders, explicitly targeting formal and informal leaders of each generation, catalyzing interaction and building relationships between them (Trickett et al., 2011). GHD's core objective, to strengthen community capacity to address priority issues, both community-identified and globally defined, is addressed through various community gatherings, including Days of Dialogue and Solidarity, that encourage open dialogue between community actors and that challenge them to identify relevant strategies to deal with them.

### **Positive psychology and the GHD program**

In their groundbreaking work in positive psychology, Seligman and Csikszentmihalyi (2000) critiqued mainstream psychology and asserted that "psychology is not just the study of pathology, weakness and damage; it is also the study of strength and virtue" (p. 7). Since its inception, the field of positive psychology has expanded through the work of other scholars who have identified additional aspects of well-being related to: the influence of the social context in which individuals are embedded (Linley et al., 2011); the need for research to target heterogeneous groups, to include both different socio-economic and gender groups (Rao & Donaldson, 2015); the analysis of different facets of human values and behavior (Fredrickson, 2001); the consideration of collective values and behavior that distinguish individualist from collectivist cultures (Neto & Marujo, 2014); the recognition of various types of social resources within communities (Nathan & Delle Fave, 2011); the value of altruism in promoting positive social change (Nathan & Delle Fave, 2011); and the development of models that build on the cultural values of non-western societies (Christopher & Higginbottom, 2008). Predominant trends in positive psychology that have been critiqued by various scholars include: the predominant focus on individuals and individual well-being (Schueller, 2009; Garcea & Linley, 2011), with a relative dearth of emphasis on community; and limited application of positive psychology principles in real-world contexts, especially with vulnerable, minority and non-western populations (Christopher & Hikinbottom, 2008; Neto & Marujo, 2014; Rao & Donaldson, 2015).

In efforts to promote positive social change, Garcea and Linley (2011) investigated how the creation of a positive emotional atmosphere within a group impacts both group cohesiveness and openness to change. They identified specific strategies that create positive collective mood and engagement within groups by using humor, positive encouragement, respect for different perspectives, and acknowledging the value of all participants' contributions.

Fredrickson (2001) *broaden-and-build theory* identifies the effects of strategies that promote collective positive emotions: widening individuals' thoughts and envisioned actions; catalyzing individuals' creativity and interest in new information; and increasing openness to new ideas. She identified the benefits of activities involving play that elicits a sense of positivity that increases dopamine levels in the brain, that counteracts the effects of negative emotions, that increases psychological resilience, and that strengthens physical health (Fredrickson, 2001). Further, Nathan and Delle Fave (2011) have documented the positive impact of altruistic actions on those who undertake such actions related to strengthening self-image and self-esteem, building relationships, and delaying mortality.

The vast majority of research in positive psychology has been in the Global North and has given limited attention to the structure and values of non-western societies. There is a growing critique of Eurocentricity in this field (Christopher & Hikinbottom, 2008; Kubokawa & Ottoway, 2009; Knoop & Delle Fave, 2013; Neto & Marujo, 2014; Rao & Donaldson, 2015). Neto and Marujo (2014) have argued that research in positive psychology is almost exclusively from North America and English-speaking countries. Christopher and Hikinbottom (2008) critiqued the biases in positive psychology research both in terms of the focus on the individual as the unit of investigation and on the values of western individualist cultures. They argued that positive psychology research and interventions need to give

greater attention to cultural diversity in non-western cultures in the *Majority World* – a term that indicates countries and regions of the world previously referred to as the Third World, or Developing World, which constitute a large majority of the world's population (Alam, 2008).

The cultural relevance of positive psychology is increasingly questioned by some scholars who have expressed concern regarding the positionality of Northern scholars who do not have a deep understanding of the marked differences between individualist and collectivist values (Kubokawa & Ottaway, 2009). This concern was reiterated by Christopher & Hickinbottom (2008) in their assertion that “positive psychology is doomed to being narrow and ethnocentric as long as its researchers remain unaware of the cultural assumptions underlying their work” (p. 565).

A recent contribution to positive psychology supporting social change is Hogan's (2020) notion of *Collaborative Positive Psychology*. Various facets of his construct are manifest in the GHD approach. Hogan's methodology illustrates a strengths-based approach and it catalyzes collaborative learning that leads to collective action for social change. Other key elements in Hogan's approach that are evidenced in the GHD program include the promotion of solidarity between local actors and of collective empowerment and teamwork. Hogan (2020) proposed the creation of *collaborative infrastructures* (p. 699) and the use of participatory methods to support development of *collective intelligence*. Other concepts in Hogan's model that are relevant to social change strategies include: the idea that negative emotions, e.g. feelings of loss and sadness, can be drivers of positive change in groups; the importance of grounding social change efforts in community identified problems and goals; the use of interactive methods with groups that encourage creative problem-solving and consensus-building; and the importance of promoting group solidarity through the use of playful activities that strengthen peer group integration (Hogan, 2020, p. 701).

### **General positive psychology concepts and the GHD program**

The GHD program is a real-world example of the application of insights from positive psychology to support collective social change. GHD activities, like Intergenerational Forums, use interactive methods to create group cohesiveness which increases community members' self-confidence and openness to new ideas (Fredrickson, 2001). These forums, attended by three generations of men and women, empower community actors and strengthen consensus-building for collaborative action (Hogan, 2020). All GHD activities, in these and other program activities, use songs, dance and humor to create positive emotional experiences that strengthen group cohesiveness and openness to new ideas (Garcia & Linley, 2011). While many community programs view grandmothers as an obstacle, a strengths-based approach is personified in innovative Grandmother Leadership Training where grandmothers are viewed as a resource and where their knowledge and role in the community is reinforced (Aubel & Kapungu, 2024). Recognition of the grandmother resource is further promoted through the use of Songs of Praise of Grandmothers, in schools, on the radio and in all community activities. Altruistic engagement of communities promoting GHD builds relationships and self-esteem (Nathan & Delle Fave, 2011). To overcome Eurocentric trends in positive psychology, the GHD program exemplifies an Afro-centric approach that explicitly builds on culturally designated roles of elders, traditional and religious leaders; and promotes core cultural values such as respect for elders and intergenerational learning (Christopher & Hickinbottom, 2008; Knoop & Delle Fave, 2013; Neto & Marujo, 2014).

### **Positive psychology of ageing and the GHD program**

In gerontology and the psychology of aging, the tendency is to focus on older persons' limitations while overlooking positive aspects of aging. Ranzijn (2002) and de St. Aubin and colleagues (2004) have emphasized the need for greater attention to the positive psychology of aging. These authors all view elders as a social resource, given their extensive lived experience and contributions they can make to the lives of families and communities. Ranzijn (2002) reported that “an increasing body of evidence indicates that there is much unrealized potential in older people” (p. 82).

Elders' role is also supported by the generativity construct that de St. Aubin and colleagues (2004) defined as “the adult's concern for and commitment to the next generation, as expressed through parenting, teaching, mentoring, leadership” (p. 4). These scholars (de St. Aubin et al., 2004) discussed

how the bonds between community members are strengthened through intergenerational relationships and the transmission of values. Ranzijn (2002) and McAdams & Logan (2004) discussed how western societies' excessive focus on the virtues of youth has contributed to ageist attitudes that devalue elders' worth and overlook their innate desire to support younger generations.

In contrast, in non-western societies, reverence for age and for elders' wisdom is deeply rooted in cultural and religious values, and younger generations seek guidance from older ones (Knoop & DelleFave, 2013; Takyi-Amoako & Assié-Lumumba, 2018). Cheng (2009) discussed core Asian and Confucian values of respect for elders that bolster elders' generative concern for supporting younger generations. The negative view of aging in the Global North and its hegemonic influence in the one-way transmission of values through globalization constitutes a threat to the role of and respect for elders in the Global South implicitly conveyed through policies and programs that reflect values of the North (Aubel, 2010).

Clarke and Wolverson (2016) discussed the profound influence exerted on elders by the social environment in which they are embedded, and they referred to the concept of *Social Role Valorization*. This concept, which is very relevant to elders' lives, addresses the problems that arise from societal devaluation of individuals or groups. In Osburn's (2006) discussion he identified several types of negative experiences faced by devalued individuals or groups, including elders rejected by their communities or families, perceived as deviant or incompetent, and generally kept at a distance. He proposed two promising strategies for promoting Social Role Valorization, namely, "enhancement of people's social image in the eyes of others, and enhancement of their competencies" (Osburn, 2006, p. 5).

American psychologist, McHugh (2016), discussed the concept of societal devaluation specifically of older women and the importance of promoting their positive aging. She explained that "Elderly women in our culture are both ignored and devalued" (p. 280), especially when they are beyond child-rearing age and when they show signs of physical decline. McHugh (2016) contended that successful aging can be nurtured through older women's involvement in civic and social activities. She asserted that while activism is usually associated with youth, older women are potential agents of meaningful social change. She affirmed that "women's well-being is enhanced when they participate in organizations that encourage democratic interactions, collaboration and respect, and a sense of making a contribution" (p. 292).

The GHD strategy illustrates the various concepts and theories from the positive psychology of aging literature, such as: recognizing the knowledge and experience of elders, especially of grandmothers; viewing grandmothers as an invaluable social resource (Ranzijn, 2002), given their central role in the socialization and protection of adolescent girls; strengthening grandmothers' sense of generativity through their involvement in schools, teaching traditional values to younger generations and strengthening intergenerational relationships (de St.Aubin et al., 2004); celebrating Days of Praise of Grandmothers, thereby increasing community respect for them; and implementing Grandmother Leadership Training, which applies social role valorization theory (Osburn, 2006) to increase their competencies in supporting the development of adolescent girls.

### **Adult education methods in the GHD program**

The field of transformative learning, the predominant current orientation in community adult education, supports collective reflection and consensus-building that leads to social change (Mezirow & Taylor, 2009). Transformative learning involves a constructivist process in which learners are challenged to critically reflect on their past experience, to consider new ideas and to actively construct their own solutions, or strategies, to deal with real-life situations or problems (Mezirow & Taylor, 2009). Beyond knowledge acquisition, transformative learning empowers people individually and collectively, to promote change in their sociocultural environment. This increasingly important field provides participatory methods, including *critical incidents*, for use with groups to catalyze collective dialogue and decision-making that can lead to action (Cranton, 2016). In the GHD program, all community learning activities are based on transformative learning concepts. These have been applied in the development of participatory group learning tools, including stories-without-an-ending and problem-posing drawings, that present critical incidents dealing with extant community situations affecting GHD. These tools catalyze

dialogue, collective reflection and consensus-building toward culturally relevant actions to support GHD

### **Grandmother-inclusive girls holistic development (GHD) program**

To address major challenges faced by adolescent girls in southern Senegal, regarding their education, child marriage, teen pregnancy and female genital mutilation, the GHD program was developed by *Grandmother Project - Change through Culture* (GMP), an American and Senegalese non-governmental organization. This program was initiated in 2008 and consists of an ongoing multi-year action-research effort to develop a methodology that promotes both girls' empowerment and creation of a supportive social environment around them to promote collective and sustained change in favoring their rights and well-being.

The GHD program draws on concepts and methods from several fields, especially positive psychology and community psychology, but also from adult education. The *Intergenerational Forum* is a salient feature of the GHD strategy that constitutes an original approach to social change for girls, and it reflects concepts and strategies from community psychology, positive psychology (including positive psychology views in gerontology, and ad. This Forum is characterized by such features as: a strengths-based orientation; an inclusive and intergenerational format to support systemic change in communities; a recognition of elders' experience and wisdom; conferring a central role on grandmothers while strengthening their knowledge and confidence to collectively engage in actions to support adolescent girls; and the use of interactive activities based on dialogue and problem-solving to build the capacity of community leaders and groups to identify strategies to address priority issues affecting girls' lives.

As noted earlier, the benefits of the GHD program for adolescent girls' development has been presented elsewhere (Institute of Reproductive Health, 2019 & Institute of Reproductive Health, 2020). Below, the evidence of the impact of the grandmother-inclusion of the GHD program are presented and discussed.

### **Research methodology**

Thus, the objective of this research attempted to determine the effects of grandmother involvement in the GHD program, that is, on grandmothers themselves. This research involved a meta-synthesis (Walsh & Downe, 2005) of 14 earlier studies, both quantitative and qualitative, which investigated different facets of the GHD program (See Table 1.). The studies eligible for inclusion consisted of the total universe of studies conducted between 2011 and 2023 on the GHD program initiated in 2008. All 14 studies aimed to identify the effects of the grandmother-inclusive approach on girls. I realized, however, that all studies included some findings regarding the effects of the program on grandmothers themselves. All 14 studies included extensive qualitative data and a multitude of interviewee quotes, in addition to the quantitative findings. All studies were conducted in the local language, Pulaar, and 12 of the study reports are in French. This research did not involve any primary data collection and, therefore, no IRB approval was necessary.

The meta-synthesis was conducted using thematic analysis as proposed by Braun and Clarke (2006), but complemented with inputs both from researchers involved in eight of the studies and from GHD program implementors. The initial step in the process consisted of reading, and rereading, the printed copies of each of the study reports and underlining all information dealing with the effects of the program on grandmothers. A second step involved manually coding the data using an inductive, data-driven approach. This involved first, making hand-written lists of the ideas and interviewee quotes in English dealing with grandmother involvement and attitudes. Second, I organized zoom discussions with six of the researchers who had conducted eight of the studies to share with them the listed ideas and asked them for their understanding of each of those points and also their suggestions on how the various ideas could be grouped together. The coded items were progressively combined to create 14 categories, later reduced to 10 and the coded items were put into a table containing 10 rows. The next step was to title the 10 overarching themes reflected in each cluster of coded elements. Once the provisional theme titles were defined, I organized a participatory session with 8 of the GHD field staff where

**Table 1.** Studies and evaluations examined in the meta-synthesis.

1. Ndione, M.S., Faye, M.M. and Nagnonhou, M. (2011). *Final Evaluation: Girls' Holistic Development program\**. World Vision/Senegal.
2. Newman, A. (2011). *Increased communication between generations enables communities to act to educate and protect girls*. Velingara, Senegal.
3. Lulli, F. (2011) *Teen pregnancy and child marriage decrease due to combined efforts of teachers and grandmothers*. Commissioned by GMP. Velingara, Senegal.
4. Newman, A. (2017) *Evidence Synthesis Review of The Grandmother Project's "Girls' Holistic Development programme*. PASSAGES/USAID. Washington, D.C.
5. Diallo, K. (2019) *Family Dynamics and Decision-making regarding the marriage of young girls: A Qualitative Study*. Mbour, Senegal.
6. Lulli, F. (2018) *Evaluation of the Grandmother Leadership Training: Strengthening the role of grandmother leaders to promote the well-being of adolescent girls*. PASSAGES/USAID, Washington, D.C.
7. Diallo, K. (2019a) *Role of Grandmothers in the process of abandonment of FGM in Kandia Commune*. Mbour, Senegal.
8. Institute of Reproductive Health (2019): *Girls' Holistic Development program: Qualitative Research Report*. IRH, Georgetown University, Washington, D.C.
9. Institute for Reproductive Health (2020). *Girls' Holistic Development program: Quantitative Research Report*. IRH, Georgetown University, D.C.
10. Lulli, F. (2020) *Changes in Gender Norms and in the Status of Women*. Mbour, Senegal.
11. Lulli, F. (2020a) *Changes in Relations between three generations of women that contribute to their influence and wellbeing*. Mbour, Senegal.
12. Quiroz-Saavedra, R. (2020) *Cultural Adaptation of the Girls' Holistic Development program and its effect on community engagement*. Mbour, Senegal.
13. Grand Challenges Canada. (2024) *Final project evaluation: Building intergenerational alliances of women to support Girls' Holistic Development 2022-2023*.
14. Balde, F. (2024) *Final evaluation: Grandmother Leadership Training*. Velingara, Senegal.

Note: This list includes the 14 studies and evaluations reviewed in the meta-synthesis.

I presented the 10 themes, on file cards, and asked them to identify the sequence in which they were observed. This participatory exercise led to refinement of several theme titles (See Table 2.) and to construction of the pathway diagram (Figure 1).

## Results

Through the thematic analysis, 10 interrelated themes emerged that describe different and interrelated effects of grandmother inclusion in GHD on grandmothers themselves (Table 2). Triangulation of the key results of the various studies reveals a high degree of convergence on these 10 themes. Each theme is described below, with examples of changes that have come about in grandmothers' lives that are illustrated with direct quotes from grandmothers and other community members.

### **Theme #1: Increased community recognition of grandmothers' roles and experience**

At the outset, in all communities where GHD is implemented, community members, including grandmothers themselves, underestimated the importance of grandmothers' role and experience, specifically related to the socialization of young girls. Grandmothers were infrequently involved in community gatherings.

In communities where the grandmother-inclusive program has been implemented, grandmothers have been involved in both schools and communities promoting children's and adolescents' cultural identity and well-being and communities' appreciation for grandmothers' experience and role has increased. The Institute of Reproductive Health (2020) evaluation showed that 90% of grandmothers feel valued by their communities, compared to only 60% in control communities.

Prior to GHD, community members, and grandmothers themselves, viewed grandmothers as outdated elders who promoted conservative values and did not understand present day life. Through the GHD approach that considers grandmothers as agents of change, community members, including adolescent girls, gained newfound respect for them (Institute of Reproductive Health, 2019).

In Balde's evaluation, a grandmother stated, "In the past we were accused of being witches. Now the community has realized how important our role is in children's upbringing, especially of girls" (Balde, 2024, p. 14). According to a community elder, "In other communities, grandmothers are not appreciated at all. It is only in GHD program communities where grandmothers are valued and listened to" (Quiroz-Saavedra, 2020, p. 28).

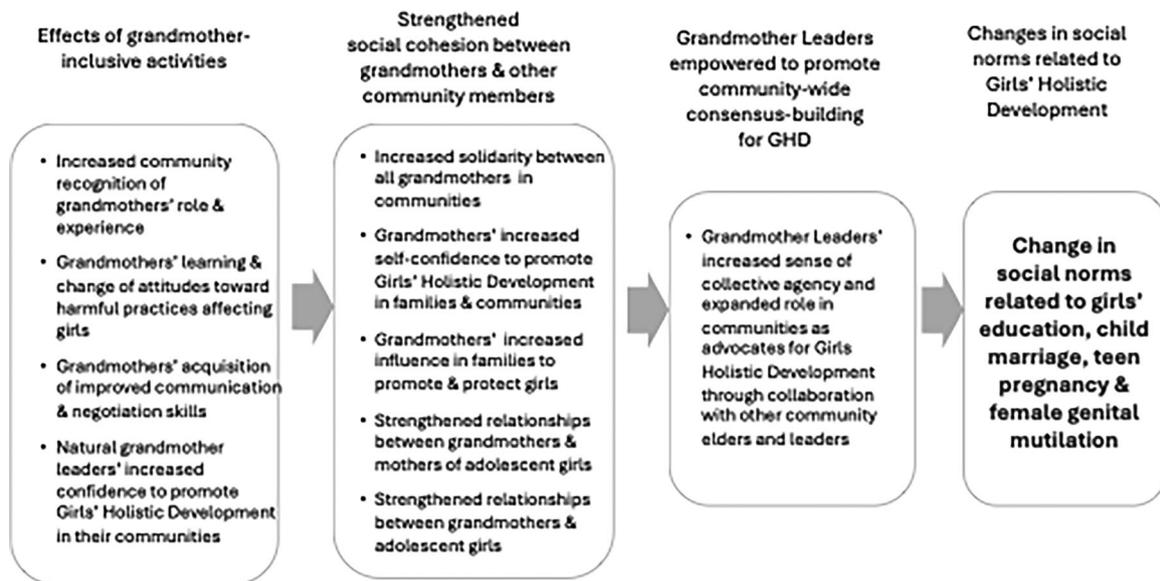
**Table 2.** Themes and sub-themes identified through the meta-synthesis.

Themes of grandmother-inclusion in girls' holistic development program	Sub-themes
1. Increased community recognition of grandmothers' role and experience	<ul style="list-style-type: none"> <li>• GMs' role in children's upbringing is now widely acknowledged</li> <li>• GMs' critical role supporting and protecting girls is recognized</li> <li>• GMs' voices are now more valued in the community</li> <li>• GMs are transmitting positive cultural traditions and values in schools</li> </ul>
2. Grandmothers' learning and change of attitudes toward harmful practices affecting girls	<ul style="list-style-type: none"> <li>• GMs have more information regarding: girls' health and well-being; puberty-related changes; early/forced marriage; teenage pregnancy; female genital mutilation/cutting; the importance of girls' education</li> <li>• GMs have adopted new attitudes in favor of girls' education and against child marriage, early pregnancy and FGM</li> </ul>
3. Grandmothers' improved communication and negotiation skills	<ul style="list-style-type: none"> <li>• GMs adopt an approach to communication based on listening and dialogue</li> <li>• GMs use new communication skills to negotiate with family and community members to solve problems</li> </ul>
4. Increased confidence among natural grandmother leaders to promote girls' development in communities	<ul style="list-style-type: none"> <li>• Natural GM leaders play a more active role in communities</li> <li>• GM leaders catalyze discussion on GHD issues with other GMs</li> <li>• GM Leaders collectively engage in activities to promote GHD</li> <li>• GM leaders share their new knowledge on adolescence and on better ways to communicate with girls with other GMs</li> </ul>
5. Increased solidarity among all grandmothers in communities	<ul style="list-style-type: none"> <li>• Significant increase in communication between grandmothers in communities</li> <li>• Grandmothers meet in groups more frequently</li> <li>• GMs share what they have learned on GHD with other GMs in their social networks.</li> </ul>
6. Grandmothers' increased self-confidence to promote GHD in families and communities	<ul style="list-style-type: none"> <li>• GMs are more open to discuss taboo topics, e.g. sexuality, FGM.</li> <li>• GMs express themselves with more confidence in family and community settings.</li> <li>• GMs feel more valued and useful than prior to the GHD program.</li> </ul>
7. GMs' increased influence in families protecting and promoting girls well-being	<ul style="list-style-type: none"> <li>• GMs are more respected and have more influence in families</li> <li>• GMs are better informed and play a strong role promoting change for girls</li> <li>• Men give more attention to GMs' opinions (i.e. girls' GMs)</li> <li>• GMs use a more effective communication approach in the family based on listening and dialogue</li> </ul>
8. Strengthening of grandmothers' relationships with mothers of adolescent girls	<ul style="list-style-type: none"> <li>• GMs share with daughters-in law and daughters their new knowledge on adolescent development and on more effective ways to communicate with girls.</li> <li>• Mothers of adolescents have more respect for GMs' role and experience.</li> <li>• Improved communication between GMs and mothers of adolescent girls.</li> </ul>
9. Grandmothers' relationships strengthened with adolescent girls	<ul style="list-style-type: none"> <li>• GMs have closer relationships with their own granddaughters and with other teenage girls</li> <li>• GMs have improved the way they communicate with girls</li> <li>• GMs openly discuss girls' reproductive health/sexuality topics with them</li> <li>• Girls feel comfortable discussing these topics with GMs</li> </ul>
10. Increased collective agency among grandmothers and their expanded role advocating for GHD with other community leaders	<ul style="list-style-type: none"> <li>• Strengthened leadership and communication skills allow them to effectively collaborate with other community elders &amp; leaders</li> <li>• GMs are involved in solving many types of community problems</li> </ul>

*Note:* This table contains the 10 themes identified through the meta-synthesis of the 14 studies listed in Table 1 as well as the sub-themes related to each theme.

### **Theme #2: Grandmothers' learning and attitude changes toward harmful practices affecting girls**

Grandmothers' knowledge on many aspects of GHD has increased and various studies provide evidence of grandmothers' openness to change. In the Institute of Reproductive Health (2020) evaluation, about two-thirds of all grandmothers asserted that their attitudes have changed toward child marriage (68%), teen pregnancy (64%), girls' education (68%) and female genital mutilation (64%). Compared to control villages, girls in GHD program communities state that grandmothers are now more supportive of girls' education (85% vs 79%), delaying marriage (81% vs 65%) and preventing teen pregnancy (76% vs 45%) (Institute of Reproductive Health, 2020).



**Note: Figure 1 presents the sequence of steps that link grandmother-inclusion to the change in social norms for girls. Key steps in the pathway are: initial effects of grandmother-inclusive activities on grandmothers; strengthened social cohesion between grandmothers and other community members; grandmother leaders are empowered to promote community-wide consensus-building for GHD; and lastly, changes in social norms related to GHD.**

**Figure 1.** Pathway from grandmother inclusion to change in collective social norms supporting girls' holistic development.

At the outset, many communities believed that female genital mutilation is recommended by Islam. Now, grandmothers in intervention sites oppose this practice much more than those in control sites (80% vs 51%) (Institute of Reproductive Health, 2020). This shift in grandmothers' opposition to this practice is significant given their decisive role in family decision-making regarding this practice. A 2024 evaluation in GHD program communities showed that most mothers (96%) stated that it is grandmothers who have the main influence on deciding whether to conduct female genital mutilation on a baby girl (Grand Challenges Canada, 2024). In that evaluation, in newer GHD sites, the percentage of grandmothers who claimed that they will not carry out this harmful practice on future newborn girls increased from 62% at baseline to 85% at endline one year later (Grand Challenges Canada, 2024).

A major justification for female genital mutilation in Senegal is the belief that Islam recommends it. The 2024 evaluation shows a significant increase in grandmothers in GHD program communities who now know that Islam does not recommend this practice, from 58% at baseline to 77% at endline (Grand Challenges Canada, 2024). In Quiroz-Saavedra's study (2020), a grandmother stated: "Before people thought that if a girl was not cut, she could not be a good Muslim. We now know that is not true" (p. 11).

### **Theme #3: Grandmothers' improved communication and negotiation skills**

Traditionally in African families, communication is directive and top-down, especially with children. A priority objective of Grandmother Leadership training is to encourage grandmothers to adopt a communication approach based on listening and dialogue. In interviews with grandmother leaders several months after training, all grandmothers said they have changed the way they communicate with girls. Furthermore, 87% of girls reported that the grandmothers have indeed modified how they communicate with them (Balde, 2024). One of the grandmothers claimed, "Our way of communicating with girls has really changed. We realize the importance of listening. Now, we yell at them less. We listen to them to understand their point of view" (Lulli, 2018, p. 21). A grandmother leader said, "It is very

important with adolescent girls to communicate through dialogue to support them as they go through puberty. With this new approach I can discuss sexuality with them” (Balde, 2024, p. 7).

#### ***Theme #4: Increase in confidence among natural grandmother leaders to promote girls' development in communities***

In all communities, natural grandmother leaders were identified by their peers. Viewing them as a valuable social resource, GHD aimed to strengthen their knowledge and role as leaders. “Grandmother Leader Training empowers GMs to act collectively to promote and protect girls” (Institute of Reproductive Health, 2020, p. 11). Trained grandmother leaders demonstrate more open, progressive attitudes and commitment to advocate for delaying marriage and pregnancy, keeping girls in school, and avoiding female genital mutilation compared to grandmothers in comparison villages. After the training, one of the Grandmother Leaders asserted: “Now I can stand on top of the roof and say what I think without trembling or crying.” (Lulli, 2018, p. 56).

#### ***Theme #5: Increased solidarity among grandmothers in communities***

Grandmother leaders have been determined to strengthen solidarity between grandmothers in their communities (Newman, 2011). Their efforts are manifest in the dramatic increase in grandmother leaders' initiation of discussion on GHD issues with other grandmothers from 38% before training to 70% after training (Balde, 2024).

Through these efforts, leaders share their new knowledge and encourage collaboration among grandmothers to collectively promote GHD. It was found that 92% of grandmother leaders feel there is more solidarity between grandmothers than in the past (Balde, 2024). One of the grandmother leaders stated, “We have reinforced the solidarity and communication between us, and now we have a common objective, to support our girls. Now we frequently discuss the problems they face related to child marriage, teen pregnancy and school dropouts” (Lulli, 2020, p. 6).

#### ***Theme #6: Grandmothers' increased self-confidence to promote GHD in families and communities***

Before the GHD program, grandmothers were shy and hesitated to speak in community meetings. In all GHD activities, their role is acknowledged, and they are encouraged to participate and share their opinions. Various studies conclude that grandmothers' individual and collective sense of self-confidence has increased, and they now express themselves more assertively in families and communities (Ndione et al., 2011; Diallo, 2019a; Lulli, 2011). One grandmother said, “Before I was timid. Since the grandmother training, I am confident. Now, I confidently express my ideas on all issues in the family and community” (Lulli, 2018). Another grandmother asserted, “Before I didn't have confidence to organize meetings with village men but now it is easy for me to do so. I can easily express my ideas with men without hesitating. This has reinforced my power in the community” (Balde, 2024, p. 4).

#### ***Theme #7: Grandmothers' increased influence in families protecting and promoting the well-being of girls***

Researchers concluded that the GHD program has strengthened grandmothers' influence in families and communities (Institute of Reproductive Health, 2020). Parents' realization of grandmothers' valuable role supporting adolescent girls has increased grandmothers' inclusion in family decision-making. Compared to control sites, parents now ask grandmothers' advice much more frequently regarding girls' education (78% vs 49%), teen pregnancy (41% vs 23%), and marriage (90% vs 82%) (Institute of Reproductive Health, 2020). Compared to control communities, girls in intervention communities state that grandmothers positively influence family decision-making to delay marriage (80% vs. 68%), keep them in school (73% vs 61%), and prevent pregnancy (76% vs 45%) (Institute of Reproductive Health, 2020).

Evaluation data from 2024 on newer GHD program communities reveals grandmothers' ability to dissuade fathers from giving their daughters away in marriage before they are 18. Most other family members, i.e. 77% of girls, 91% of mothers and 97% of fathers, contend that it is primarily the girl's grandmother, i.e. the father's mother, who could convince a father to change his mind (Balde, 2024). This is illustrated by a statement from a teenage girl, "It is thanks to the grandmothers that we have not yet been married off. They are the ones who can put pressure on our fathers and dissuade them from giving us away in marriage when we are still very young" (Institute of Reproductive Health, 2019, p. 42).

### ***Theme #8: Strengthening of relationships between grandmothers and mothers of adolescent girls***

At the outset, in all communities, relationships between mothers and grandmothers were often conflictual, and mothers discouraged girls from spending time with grandmothers. To catalyze support for girls, Grandmother Project recognized the importance of strong relationships between grandmothers and mothers and intergenerational GHD activities to strengthen those relationships. Institute of Reproductive Health researchers concluded that following the grandmother leader training, "grandmothers are teaching mothers how to communicate more effectively with their daughters" (Institute of Reproductive Health, 2020, p. 5). Three significant factors that have contributed to positive change in grandmother-mother relationships include increased community support for grandmothers' role in promoting GHD, mothers' realization that grandmothers are an invaluable resource for supporting girls, and grandmothers' expanded knowledge and investment in GHD.

Mothers report that GHD activities have strengthened their relationship with grandmothers. Before training, only 41% of grandmother leaders stated that they often discussed GHD issues with mothers, but after the training, 99% said that they regularly discussed these issues with mothers (Balde, 2024). Mothers now have more respect for grandmothers and recognize their invaluable role in adolescent girls' up-bringing. One grandmother stated, "We meet often with mothers of adolescent girls to discuss GHD and how we can protect them from child marriage" (Lulli, 2018, p. 15). And a mother said, "Now we listen to grandmothers, have confidence in them and appreciate their advice and involvement in children's upbringing" (Lulli, 2020, p. 18).

### ***Theme #9: Grandmothers' relationships strengthened with adolescent girls***

Initially, in all communities, grandmother-girl relationships were strained and grandmothers used forceful messaging with girls. Through the GHD, "Grandmothers regained their privileged role and trust in their relationships with young girls by spending more time with them, increasing communication on topics including reproductive health" (Institute of Reproductive Health, 2019, p. 24). Although taboo in the past, most grandmothers (94%) say that they now discuss sexuality with girls. An adolescent girl contends that "Now grandmothers are closer to us and communicate a lot with us" (Lulli, 2018, p. 22). Prior to training, only 69% of grandmother leaders discussed menstruation with girls before their periods started. After training 99% of grandmothers said that now they initiate discussion with girls before their periods start (Balde, 2024).

Girls in intervention communities reported communicating much more with grandmothers than in control communities concerning marriage (42% vs. 10%), their education (61% vs 22%), and reproductive health (28% vs 5%) (Grand Challenges Canada, 2024). Many girls feel more comfortable discussing intimate topics with grandmothers than with their busy, impatient young mothers (Newman, 2011).

### ***Theme #10: Increased collective agency among grandmothers and their expanded role in advocating for GHD with other community leaders***

With grandmothers' increased knowledge and confidence, along with communities' increased appreciation of grandmothers, their role in communities has greatly expanded. Evaluators concluded that grandmothers have become *key change agents* in communities mobilizing others and advocating for GHD (Institute of Reproductive Health, 2019, p. 9).

“Grandmother Leaders organize meetings with community leaders and teachers to discuss child marriage, girls’ education and teen pregnancy and to encourage community members to change their behavior related to these issues” (Diallo, 2019, p. 9). The 2020 evaluation concluded that “grandmothers are seen as a resource by other community leaders, they feel empowered to make a difference in their communities and are more involved in community level decision-making” (Institute of Reproductive Health, 2020, p. 53). Prior to their training, only 20% of grandmother leaders said that they were able to organize meetings with community elders to discuss GHD issues, whereas after the training 87% reported that they confidently are organizing such meetings (Grand Challenges Canada, 2024)).

To summarize research findings, this meta-synthesis (Walsh & Downe, 2005) of data from 14 studies on the GHD strategy reveals significant increases in grandmothers’ knowledge, self-confidence, role and influence on others in families and communities, and ultimately on promoting positive change in social norms and practices affecting adolescent girls (Braun & Clarke, 2006). From this analysis, a pathway that links grandmother-inclusion to collective social norms change was constructed in collaboration with GHD field staff (Figure 1). The empirical evidence shows: increased community recognition of grandmothers’ role and experience; grandmothers’ strengthened knowledge and change of attitude toward harmful social norms affecting girls; grandmothers’ improved communication skills; and the empowerment of natural grandmother leaders to promote GHD. In turn: solidarity between all grandmothers increased; grandmothers’ self-confidence to actively promote GHD in families and communities increased; grandmothers’ influence in promoting GHD in families increased; and their relationships with both mothers and adolescent girls were strengthened. These changes have all contributed to grandmother leaders’ sense of collective agency observed in grandmothers’ collaboration with other community elders and leaders actively advocating for GHD and contributing to change in social norms affecting adolescent girls.

## Discussion

The purpose of this research was to understand how grandmothers have been impacted by their involvement in a community intervention supporting adolescent girls. Through the meta-synthesis (Walsh & Downe, 2005) of 14 earlier studies on the GHD program, 10 themes were identified that elucidate the impact that the innovative grandmother-inclusive intervention has had on grandmothers. The results of this research support the conclusion that the program has produced two salient outcomes related to grandmothers’ role and influence within families and communities. First, it increased grandmothers’ knowledge and community recognition of their role supporting girls. Second, it strengthened grandmothers’ self-confidence, competencies and collective agency to play a catalytic role promoting community-wide change in social norms related to girls’ education, child marriage, teen pregnancy and female genital mutilation.

An overarching conclusion of this meta-synthesis is that in the GHD program grandmothers have been very responsive to efforts to strengthen their knowledge, open to reconsidering deep-rooted attitudes and practices, and committed to expanding their role in families and communities to advocate for GHD. These findings refute the often-heard ageist assumptions that grandmothers are unable to either learn or change. Senegalese Professor Sall discussed the impressive changes observed in GHD program communities where, in the past, grandmothers were often accused of being witches and who today constitute “cultural levers for change for girls.” (Sall, 2019, p.14). He emphasized the central role of elders in Peuhl communities, and specifically of grandmothers “who are usually the strongest defenders of traditions concerning women and children” (p.13). Unfortunately, in Africa and elsewhere in the Global South, an accurate view of grandmothers’ influence and potential to support girls is constrained by an inadequate understanding of cultural context, ageist sexist attitudes, and a youth-focused perspective on social change. Sall (2019) attributed grandmothers’ engagement, and community support for them, to the cultural relevance of the grandmother-inclusive strategy. The empirical data presented here supports his assertion that grandmothers have become empowered change agents who can overturn age-old traditions related to girls’ rights and development (Sall, 2019).

## Limitations

Several limitations are identified that may compromise the significance of the results of this research. First, the 14 studies and evaluations reviewed in the meta-synthesis (Walsh & Downe, 2005) were very diverse in terms of the data collection methodologies used, the data collection period (between 2011 and 2024), varied data collection sites and different researchers involved. Second, in all studies, interviews were conducted in the local Pulaar language with responses recorded in French and later translated into English. Through this process certain nuances in meaning may have been lost or misinterpreted. Lastly, the results of this research regarding the positive impact of a grandmother-inclusive intervention supporting girls should be considered as preliminary until other grandmother-inclusive programs can be studied and results compared.

## Recommendations for future research

The research reported on here provides insight into a new area of practice related to adolescent health and development with the ground-breaking involvement of a previously ignored social resource – the grandmothers. This research has produced initial evidence, primarily qualitative, on the benefits of grandmother inclusion both to grandmothers themselves and to adolescent girls. There are numerous possibilities for future research that would contribute to this new dimension of GHD practice. One future research priority would be to assess grandmothers' self-efficacy before and after their involvement in a grandmother-inclusive intervention to better understand their increased self-confidence and sense of empowerment to use their authority to support GHD within families. Other priorities would be to study changes either in grandmother-girl relationships, or in grandmother-mother relationships, that may come about in strategies that aim to strengthen those relationships. Lastly, to validate the pathway from grandmother-inclusion to social norms change (Figure 1) future implementation research would be very beneficial.

## Conclusions

There is growing criticism by culturally Southern scholars of social change interventions that do not build on the structure and values of non-western societies (Malunga & Holcombe, 2014). Professor Sall (2019) asserted that this gap explains both limited community engagement and results of many social change strategies. He specifically critiqued programs supporting girls that do not explicitly involve grandmothers and their social networks, which he defined as “valuable endogenous socio-cultural structures and mechanisms which promote the well-being of adolescent girls” (p. 14). He identified the GHD program as an example of a culturally relevant approach insofar as it engages a wide range of community actors, including powerful elders, to build collective consensus for change for girls (Sall, 2019).

There is vast anecdotal evidence regarding the role played by grandmothers in the socialization of adolescent girls across Africa. However, scant research has investigated this critical role, many programs view grandmothers as an obstacle, and most do not involve them. Ignoring the role and influence of grandmothers in programs supporting women and girls is also attributable to the positionality of culturally western scholars who overlook the structure and dynamics of African families and communities.

This research provides empirical evidence that acknowledging and strengthening the culturally designated role of grandmothers to support adolescent girls, not only contributes to beneficial outcomes for girls, but also engenders immense benefits for grandmothers themselves. This research supports the need for inclusion of grandmothers in programs to support women and girls in African and other non-western societies, and to further investigate the effects of their involvement in social change strategies in Africa and elsewhere in the Global South.

## Author contributions

CRedit: **Judi Aubel**: Conceptualization, Data curation, Formal analysis, Methodology, Writing – original draft, Writing – review & editing.

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