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Carmen Yvonne Ward

GRANDPARENTS RAISING GRANDCHILDREN: IMPLICATIONS FOR SCHOOL  
SYSTEMS AND SCHOOL PERSONNEL

A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of  
Philosophy at Virginia Commonwealth University

by

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## ABSTRACT

A crucial issue facing our educational system is the changing family structure, particularly the increase in the number of children being raised by their grandparents. Many of these children live in a situation that places them at risk academically. Thus, it is vital that the educational system consider identifying the special needs of these children to provide supports.

This study aimed to identify support services that middle school and high school grandparents perceived they needed from school systems and school personnel to ensure the educational success of their grandchildren. I developed a survey based on concerns and issues that were cited in the literature to determine grandparent's awareness of the services provided by the public schools, the extent to which their student utilized them, and other services that the grandparents themselves needed.

Participants were a convenience sample of 56 mostly African American grandparents from four high schools and five middle schools in a southern urban school district who were primarily responsible for raising their grandchildren. These grandparents contacted me to participate after receiving a recruitment flier that was sent home with each student at the participating schools. Over half of the grandchildren had received a failing grade on their report card in at least one of the core subjects the previous year. About one fourth of these children also had an Individualized Education Plan (IEP).

The study found statistically significant differences in the awareness of middle school and high grandparents regarding whether their grandchild utilized the academic services of tutoring, pull-out classes, and study skills classes. According to the grandparents, high school students used the services less than middle school students. In addition, of the 29 students with

discipline issues, more middle school than high school grandparents indicated that their grandchild “received help for behavior problems.” Both groups of grandparents requested support groups for their grandchildren to address behavior and provide assistance with school work. Middle school grandparents also requested support groups for teasing/ bullying. Both groups of grandparents requested that a Grandparent Education Council be formed, information on community resources, and training for teachers regarding the issues of both grandparents and grandchildren.

# CHAPTER 1

## INTRODUCTION

### **Background of the Study**

When parents will not or cannot care for their children, the persons that will usually provide that care are grandparents. Grandparents have served as one of the most important safety nets for children whose parents are unable or unwilling to provide care (Kornhaber, 1996). Grandparents raising grandchildren has become an increasingly common occurrence and is the basis for these grandparents being termed “stabilizers during divorce and remarriage” (Barranti, 1985, p. 346); the “silent saviors of children from faltering families” (Robertson, 1995, p. 245); and the “second line of defense” (Kornhaber, 1996, p. 131).

The commonality of grandparents raising their grandchildren has gained the attention of researchers, advocates, service providers, and even the popular press (Smith, Beltran, Butts, & Kingston, 2000). According to the data from the 2000 Census (U.S. Census Bureau, 2003), over five million children, inclusive of infants and teens, live in grandparent-headed households. Thirty-nine percent of these grandparent-headed households have been responsible for these children for five years or more. Furthermore, the 2000 Census data revealed that in 34% of the grandparent-headed households, the parents of the children were not present; additionally, 19% of these families were living in poverty. When comparing Virginia with the national data, Virginia ranks higher in two of the aforementioned categories: grandparent responsibility for five or more years and percentage of households with no parent present (U.S. Census Bureau, 2003). Statistically, Virginia has 42% of grandparent-headed households responsible for grandchildren in the category five years or more and 39% of households with no parent present in the home.

However, Virginia has 15% of grandparent-headed households living in poverty compared to the 19% nationally. There are over five million grandchildren living with grandparents; Virginia claims 140,015 of these children. In the southern urban area where this study was conducted, 4,971 grandparents are responsible for meeting the basic needs of their grandchildren (Simmons & Dye, 2003). These three factors (living five years or more with grandparents, no parent present, and poverty) can potentially lead to children being at risk for social, emotional and academic development. Presently, the 2010 Census data revealed that approximately six million minor age children are living in a grandparent-headed household in the United States. In Virginia, the number of grandchildren receiving primary care from grandparents is 137,362, which is still rather close to the figure of 140,015. The southern urban area involved in this study has increased to 6,740 grandparents responsible for providing primary care for their grandchildren.

### **Overview of the Study**

There are many scenarios that explain why grandparent-headed households have formed. Research has cited four major reasons for this national trend: divorce, desertion, drugs, and death. Researchers de Toldeo and Brown (1995) have labeled these reasons the “four Ds.” They discussed these social forces concluding they were the reasons why grandparents assumed care of their grandchildren. These negative life events were the impetus for the advent of many of these grandparent-headed families.

The challenges faced by grandparent-headed households include economic strains, health and psychological concerns, and social isolation (Minkler, 1999). These challenges impact what can be provided for the children’s mental and physical needs, hence impacting their educational successes. These challenges create an “at-risk” environment for these children.

Despite the many challenges grandparent-headed households face, often times, grandparents do not want their grandchildren being placed in foster care or being raised by others, so they accept the social and economic challenges to keep their families together. Between 1990 and 1998, the number of children raised solely by grandparents or other relatives grew by more than fifty percent. Across the country, grandparents and other relatives were unexpectedly becoming sole custodians, legal guardians, and primary caregivers. These children's parents were struggling with social factors, such as substance abuse, unemployment, illness, domestic violence, divorce, and other family crises (Smith et al., 2000). The aforementioned social forces contributed to the phenomenon of grandparent and relative care placements. Subsequently, the U.S. child welfare system has come to depend on the extended family as kinship care providers (Sands, Goldberg-Glen, & Shin, 2009).

As grandparent-headed households become more prevalent, the related literature includes topics such as: (a) the costs, benefits, and challenges of raising a grandchild, (b) the parenting practices among grandparent caregivers, (c) prevalence of African American grandparents raising grandchildren, and (d) suggestions for practitioners and educators working with grandparent caregivers (Hayslip & Kaminski, 2005a).

According to research, grandparents raising grandchildren can be found amongst all ethnicities and socioeconomic groups. Lugaila (1998) explained that by the middle 1990s, 13.5% of African American children were living with grandparents or other relatives compared with 6.5% of Hispanic children and 4.1% of White children. Even still in 2000, researchers Fuller-Thomson and Minkler maintained there was a difference by ethnicity with African American children living in grandparent-headed households compared to Hispanic children and White children (Fuller-Thomson & Minkler, 2000). According to Hayslip and Kaminski (2008),

African American (12%) and Hispanic (6%) grandchildren live with their grandparents at a higher percentage than White (4%) grandparents. Furthermore, Ruiz and Zhu (2004) contended that African American grandmothers are more likely to be grandparent caregivers than grandmothers of other races. The authors found that more than 25% of African American grandmothers had been custodial grandmothers while only 13% of White grandmothers had been custodial grandmothers at some time during their lives. In addition, the authors contended that it was common for African American grandmothers to care for their grandchildren for longer periods of time.

As grandparents assume the role of primary caregiver of their grandchildren, many do so despite their need for additional financial assistance. Most grandparent caregivers do not want to become involved in the formal child welfare system nor put the grandchildren in the custody of the state or county. Many relative caregivers prefer not to have a legal relationship with the children, but instead informally raise the children. The reason for these informal relationships is that although most caregivers sense that the arrangement is permanent, they hope that the children will be raised by the parent at some point in the future (Minkler, 1999).

However, as grandparents and relatives hope for stable parents to return and resume care of their children, they face economic strains, health and psychological concerns for themselves and the children, and social isolation from peers (Minkler, 1999). As grandparent caregivers embrace their new role of raising their grandchildren, they must contend with meeting the basic needs of shelter, food, and clothing. Additionally, other expenses such as medical expenses, school supplies, and recreational activities are required. In spite of these challenges and expenses, Brown and Mars (2000) found that grandparents contributed greatly to the financial support of their grandchildren. Many of the grandparents in their study did not receive

governmental assistance and provided 100% of the costs of supporting the grandchildren.

According to Smith et al. (2000), the majority of grandparents and relatives raising children lived in poverty, despite the fact that 48% worked outside the home. In 1994, it was found that grandparents raising grandchildren were 60% more likely to live in poverty than were grandparents who were not raising grandchildren (Smith et al., 2000). Consistent with the findings, Cox (2009) reported data from the 2000 census which suggested that grandparent caregivers were more likely to be in poverty than other families with 19% of grandparent caregivers' income calculating below the poverty line in 1999 as compared to only 14% of other families.

As grandparents raising grandchildren find themselves in a new demanding parental role, they are finding that this new role may lead to increases in physical, emotional, and economic vulnerability (Minkler, Roe, & Price, 1992). Research has found that many grandparents experience health issues as a result of assuming care for their grandchildren. According to Minkler and Roe (1993), grandmothers reported that their health had deteriorated in the past year. Even more significant, some of the grandmothers reported that their health had worsened since assuming full-time parenting responsibilities for their grandchildren. To help address these issues, during the late 1980s and early 1990s, the beginning of support groups for, and often by, grandparents who were raising their grandchildren emerged.

As grandparents parent a second time, they want to teach their grandchildren to become productive citizens. However, grandparents often need to be taught how to contend with contemporary childhood needs and tasks. To address this concern, grandparent education courses can be utilized to make the role of parenting a second time less frustrating and more rewarding for the grandparents (Chenoweth, 2000).



In regards to the children, researchers have found that whether children resided with relatives or nonrelative caregivers, both sets of children had physical, developmental, mental health, and school problems (Dubowitz & Sawyer, 1994). Subsequently, children in kinship care often experienced feelings of loss, anger, and rejection. As a result, these feelings make it difficult for children in kinship care to form trusting relationships with caregivers, teachers, and peers (Rogers & Henkin, 2000). Because of the emergence of the grandparent-headed household, school counselors, teachers, and school administrators will interact with grandparents as well as parents. As the number of grandparents raising their grandchildren continues to grow, it is crucial for the educational community to design programs to assist this population. Hence, it is imperative for school personnel to understand the significant impact the role of the grandparent will play in the lives of the next generation as well as the role of the educational system in addressing the social, emotional, and academic needs of these children.

### **Rationale for the Study**

The social problems that led to the phenomenon of grandparents raising grandchildren are not likely to disappear in the near future. Therefore, social service agencies and educational institutions should begin efforts to educate grandparents, grandchildren, tutors, mentors, helpers, and the general public regarding the issues surrounding grandparents parenting grandchildren (Glass & Huneycutt, 2002a). There will be a continued need for educational programs, in combination with other efforts from other institutions and agencies, to address the issues and concerns facing these caregivers, as well as the professionals who interact with them. Providing grandparent caregivers with services and support enhances their parental efficacy and strengthens families. Mary Brintnall-Peterson (1999), University of Wisconsin Cooperative Extension, contends that schools can provide support through various means, such as assisting

children with the transition of living with their grandparents, helping children adjust to a new school, providing social support groups for children being raised by their grandparents, and developing specialized training for teachers on the unique needs of grandparents caring for their grandchildren. According to Brintnall-Peterson, some schools are providing grandparents with resource packets on community resources, support groups for grandparents raising grandchildren, and child development information. Moreover, some schools are placing children living with grandparents with more seasoned and/or sensitive teachers.

Because of this sociological trend, Brintnall-Peterson states that “schools can be major players in helping grandparents adjust to new roles and become involved in their grandchildren’s education” (Brintnall-Peterson, 1999, p. 2). By helping grandparents recognize how parenting has changed dramatically from the time when they were raising their own children, schools can assist grandparents in better understanding the needs of their grandchildren and new parenting techniques. As this social trend continues, schools will have to continue to restructure the school environment to accommodate this phenomenon of families headed by grandparents.

### **Statement of the Purpose**

Unfortunately, one of the crucial issues facing the educational system is addressing the changing family structure of grandparents raising grandchildren. The number of grandparents raising grandchildren is increasing because of divorce, desertion, drugs, and the death of parents. These dreadful issues create an at-risk environment for the children. Thus, it is vital that the educational system consider the significance of providing support to grandparents as they parent for a second time.

Just as the grandparents face many economic, physical, health and emotional challenges, these same challenges also affect the children they are raising. Additionally, many of these

children have issues in the areas of health, academics, and behavior. Even though the children are in a better environment compared to a foster home setting, this environment frequently is defined as at-risk. Although grandparents and other relatives have always aided in caring for the children in their family, this 21<sup>st</sup> century phenomenon of grandparents raising grandchildren brings with it more concerns and issues, such as legal considerations, emotional, social, financial challenges and, of course, school problems. Consequently, many school districts are beginning to realize the academic and behavioral problems of the children being raised by grandparents as well as problems experienced by the grandparents themselves. Authors Morrison and Allen (2007) contend that there are important environments that affect these students, such as the classroom (including teacher behaviors and support), their peer group, school in general, family support, and family expectations. It is through these environments that at-risk children can develop resilience. The schools can become a major source for creating an environment that fosters resilience. In addition, educational institutions can provide protective factors for these children through school-based interventions. These interventions can support the grandparents, thus lessening the factors that put the children at risk plus they can support the children in the school or classroom. The purpose of this study was to ask grandparents to identify supports that schools could implement for grandchildren who may be at-risk students.

### **Research Questions**

This study addresses the following research questions:

1. What are the differences in the awareness of services being offered to middle school and high school students who are being raised by grandparents?
2. What are the differences in public school services being utilized by middle school and high school grandparents and grandchildren?

- Are there differences in services being utilized by middle school and high school grandchildren who are and are not failing at least one core subject?
3. Are there differences in the perceptions of grandparents of middle school and high school students of needed services in the public schools?

### **Design and Methods**

A survey was developed to generate both quantitative data and qualitative data about academic, social, and behavior issues pertaining to grandparents raising grandchildren. Both open and closed questions were used on the survey, which allowed for the collection of in-depth information and reactions from the grandparents. Through both types of questions, descriptive information about the sample and comments about grandparents raising grandchildren and their educational needs were obtained. These data were collected from four comprehensive high schools and five middle schools in a southern urban school district.

### **Summary of Findings and Conclusions**

Participants were a convenience sample of 56 mostly African American grandparents from four high schools and five middle schools in a southern urban school district who were primarily responsible for raising their grandchildren. These grandparents contacted me to participate after receiving a recruitment flier that was sent home with each student at the participating schools. Over half of the grandchildren had received a failing grade on their report card in at least one of the core subjects the previous year. About one fourth of these children also had an Individualized Education Plan (IEP).

The data reveal that there was a statistically significant difference in the awareness of whether pull-out classes were offered to middle school (MS) and high school (HS) grandchildren but not tutoring services or study skills classes. However, there were statistically significant

differences in the grandparents' awareness of their grandchild's utilization of all three academic supports. Despite the fact that the grandparents thought that the schools offered the academic supports, the grandchildren did not always take advantage of the services. Grandparents of high school grandchildren reported less utilization of these academic services. In addition, of the 29 students with discipline issues, more middle school than high school grandparents indicated that their grandchild "received help for behavior problems."

In terms of needed services, grandparents in both groups saw a need for support groups for behavior and assistance with completing school work. MS and HS grandparents showed a statistically significant difference for support groups on "teasing/bullying." In this scenario, the service was needed more for MS students than HS students. Further, both groups of grandparents would like to have a Grandparent Education Council formed, information about community resources, and training for teachers.

Recommendations for schools include offering workshops, small groups, and/or individual counseling on teasing/bullying, improving behavior, and completing school work for the middle school grandchildren. Also, offering workshops, small groups, and/or individual counseling on improving behavior and completing school work for the high school grandchildren. For the grandparents, support groups can be offered and forming a Grandparent Education Council on both middle school and high school levels. This council would provide information on new parenting techniques, community resource packets, and skills to assist grandparents with helping the grandchild with homework. Lastly, schools can clearly communicate to grandparents the academic supports that are offered in their schools to improve the students' use of them.

One limitation of this study is that the schools themselves were not contacted for information about the services that are in fact offered. Future research could include comparing the awareness of grandparents with the actual state of affairs in the schools. In addition schools could survey the classes of the grandchildren to determine if they are selecting rigorous classes, or conversely, identify HS grandchildren who need the academic supports and whether they are utilizing them. Last but not least, research could be conducted on gender differences.

This research adds to the literature by providing a study that addresses solely grandparents raising adolescent grandchildren and focusing on the perceptions of what the grandparents perceive as services that are offered by the schools; utilized by the grandchildren and themselves; and needed for both their grandchildren and themselves within the public schools.

### **Definition of Terms**

**Grandparent caregiver** is a grandparent or perhaps a great-grandparent who has the sole responsibility for raising one or more grandchildren in their home. According to the literature, grandparent caregivers are referred to as: custodial grandparents, relative caregivers, kinship caregivers, and relative foster care providers. A grandparent caregiver family is a family unit headed by a grandparent or great-grandparent.

**Custodial grandparent** is a grandparent who has physical custody of the grandchild. This physical custody can be a formal placement through the legal system or an informal placement without legal documentation.

**Relative placement** is the living arrangement of a child with a grandparent, aunt, or other close relative.

**Kinship care** is the formal placement of a child with a relative.

**Foster care** is the placement of children by child welfare workers in a home that is officially sanctioned as a foster home by the state.

**Grandfamily** was coined by Oliver W. Edwards (1998a) to identify families where children are raised by grandparents.

**Grandkin** are children in the grandfamily.

**“Pure” grandparent caregiver households** are households with no parent of the grandchildren, but grandparents only.

**Therapeutic Day Treatment Programs** are structured programs offered during school, after school, or as a summer program to assist grandchildren and grandparents.

**Grandparent Education Council** focuses solely on the responsibilities and educational needs of grandparents.

**Alternative School Placement Program** provides a learning environment for a student who may not be able to function academically or socially within the comprehensive school setting. This placement could be located within the student’s current school or outside the school at another location.

## CHAPTER 2

### LITERATURE REVIEW

#### Introduction

In the United States, the number of school-age children residing in grandparent-headed households has seen a 76% increase between 1970 and 2000 (Fuller-Thomson & Minkler, 2001). The United States Census Bureau (2008) report, entitled *Living Arrangements of Children: 2004*, revealed 6.5 million children lived in households with at least one grandparent present. While only 6% of White non-Hispanic children lived with a grandparent, there were 12% of Hispanic children and 14% of African American children living with a grandparent. Presently, grandparents who serve as primary caregivers support more than four million school-age children. Many of these families do not have biological parents in the home. Roughly, one million of these grandparents have been taking care of their grandchildren for five years or more. This phenomenon of grandparents raising grandchildren is not limited to any specific ethnic group. However, for over a period of seven years, researchers have all stated that there is a difference by ethnicity with 13.5% of African American children, 6.5% of Hispanic children, and 4.1% of White children living in grandparent-headed households (Lugaila, 1998; Minkler, 1999; Glass & Huneycutt, 2002a; Minkler & Fuller-Thomson, 2005).

The growing phenomenon of grandparents parenting their grandchildren was examined in a seminal work by Chalfie (1994), senior program specialist with the Women's Initiative, division of the American Association of Retired Persons (AARP). In this seminal work, entitled *Going it Alone: A Closer Look at Grandparents Parenting Grandchildren*, Chalfie's report provided the first-of-its-kind information about the demographic characteristics of pure grandparent caregiver households. These households contained only grandparents caring for



grandchildren with no parent of the grandchildren or other adults present. The study used unpublished data from the March 1992 Current Population Survey (CPS) collected by the U.S. Census Bureau. The report utilized a random telephone survey of a small sample of self-identified grandparent caregivers and introduced preliminary findings about some of the policy-based problems grandparents experienced. Chalfie (1994) presented vital new information on the social and economic situation of grandparents in “skipped generation” households or pure grandparent caregiver households.

Chalfie (1994) and AARP chose to focus primarily on pure grandparent caregiver households because public policy treated these households differently from households in which a parent was present. Due to the absence of a parent in a pure grandparent caregiver household, grandparents faced obstacles such as the inability to receive cash assistance, health insurance, housing; the lack of decision-making authority, and the absence legal rights to raise the grandchild. Also, because the grandparents were going it alone, or were solely rearing the grandchildren, they were exclusively responsible for financial support and childcare. These pure grandparent caregivers had fewer resources and faced greater challenges than traditional families, with both parents present; and extended families, which consisted of both parents and other adult relatives. Moreover, the report focused on the grandparents, rather than the grandchildren.

Chalfie (1994) revealed that approximately 551,000 older adults, with a median age of 57, lived in more than 350,000 pure grandparent caregiver households in which no other adults were present. Although three-fourths of these grandparent caregivers were married, large gender differences emerged, with women making up 93% of all single grandparent caregivers. White grandparents made up the majority of the grandparents (68%), but African Americans (9%) were

almost twice as likely as their White counterparts (5%) to be raising their grandchildren.

Nevertheless, research suggests that many of the circumstances which lead grandparents to provide regular care to grandchildren does transcend race.

Many reasons in a family's life serve as the impetus for grandparents assuming and providing care for their grandchildren. However, Minkler (1999) cited that the rapid growth in the number of children formally placed with relatives could be traced in part to a landmark Supreme Court case, *Miller vs. Youakim* (1979). This case upheld a lower court's decision that federal foster care benefits could not be denied to relatives who were otherwise eligible. Illinois, California, and New York were the states that implemented the most liberal and inclusive policies toward kinship care, or the formal placement of children with relatives. These states experienced the most rapid growth in kinship care placement (Minkler, 1999). By 1990, 29 states required that relatives be given first choice in the placement of foster children. However, federal and state laws, along with policies promoting kinship care, do not explain the concomitant growth in the number of children who informally have been going to live with their grandmother (Minkler, 1999). Minkler (1999) mentioned a study that she and her associates had conducted which used data from the National Survey of Families and Households. Their study found that 10.9% of American grandparents raised a grandchild for at least six months. However, the usual amount of time that grandchildren were with their grandparents was much longer than six months.

Due to the forming of grandparent-maintained households, the U.S. Census Bureau began taking notice of this phenomenon. Census 2000 was the first time that questions regarding grandparental caregiving had been included in the decennial census. Based on the 2000 Census Bureau data, grandparents raising grandchildren ranged in age from early 30s to 80s, but with the

highest percentage of grandparents found in the age range of 50 to 59 (U.S. Census Bureau, 2003).

As grandparents raising grandchildren has become a significant family configuration, several major topics have defined the literature on custodial grandparents over the past 15 years according to Hayslip and Kaminski (2005a). The topics and issues that have shaped the literature have implications for both practitioners and researchers. The issues are inclusive of: (a) the costs, benefits, and challenges of raising a grandchild; (b) custodial grandparents' parenting skills; (c) the prevalence of African American grandchildren being raised by grandparents; and (d) suggestions for practitioners and educators working with grandparent caregivers. The literature review in this study examines these topics extensively in each relevant sections.

#### **The Four Ds: Divorce, Desertion, Drugs, and Death.**

As the phenomenon of grandparents raising their grandchildren continued to increase, researchers were beginning to offer explanations. According to researchers deToldeo and Brown (1995), grandparents were raising their grandchildren for four reasons, which they labeled the four Ds: divorce, desertion, drugs, and death. Additionally, Connealy and DeRoos (2000) listed some of the circumstances under which grandparents assume the care of their grandchildren. These researchers cited scenarios that had the overtones of the four Ds: (a) a woman becoming a single parent, (b) a parent divorcing, (c) a parent becoming a substance user, (d) a parent being placed in prison, (e) a parent suffering a debilitating disease, and (f) a parent dying. All of these situations led to the increasing possibility of grandparental involvement and the chances that the grandparents would gain formal or informal custody of the grandchildren. Furthermore, Cox (2000b) contended there have been many factors that have caused an increase in

grandparent-headed households. This author cited some of the same factors as other researchers, inclusive of “parental substance abuse, AIDS, incarceration, homicide, and mental illness. Unfortunately, most grandparent-headed households never anticipated parenting a second time. Because of the situation with their own child, they were forced into the role of becoming parents again” (Cox, 2000b, p. 4).

Once again, the situations for grandparents assuming care of their grandchildren fell within the categories of the four Ds. In the years that followed, other researchers would cite reasons for grandparental care that could be categorized in the areas of the four Ds. Researchers Glass and Huneycutt (2002a) also asserted the four Ds as reasons why so many of the nation’s children were growing up in grandparent-maintained households. These authors elaborated on the categories and include: (a) domestic violence, (b) the rapid rise of single-parent households, (c) incarceration, (d) teen pregnancy, (e) mental and physical illness, (f) child abuse and neglect, (g) an increase in drug abuse among parents, (h) AIDS, and (i) homicide. Each of these categories could be aligned within one of the areas of the four Ds. Again, with the increase of grandparents raising grandchildren, researcher Edwards (2009) contributed three additional Ds: detention (incarceration), duties in the military, and disease. According to Edwards (2009), because many grandparent-headed households have formed as a result of the seven Ds, both the children and grandparents will most likely experience great levels of stress with regards to their psychosocial and physical well-being. Additionally, the children may experience school-related difficulties (Edwards, 2009).

### **African American Grandparents Caregiving.**

Although grandparents raising grandchildren can be found in all ethnicities, geographic regions, religions, and socioeconomic groups, much of the literature cites the prevalence of

African American grandparents raising grandchildren. According to the 2000 Census, relative caregivers are most likely to be female, African American, single, and living in poverty (U.S. Census Bureau, 2000). Regardless of the data from the 2000 Census, African American grandparents have always taken care of their grandchildren; however, the late 20<sup>th</sup> century brought with it different reasons for African American grandparents needing to provide care to their grandchildren.

In the United States, during the first half of the 20<sup>th</sup> century, oppression, poverty, racism and the lack of job opportunities in the South led to a great migration of African Americans to the North in search of employment (Fuller-Thomson & Minkler, 2000a). It was customary for grandparents to stay behind in the South to care for the children while the parents established themselves in the northern cities. Once the parents were settled, they would send for the children to join them in the northern cities. This pattern continued through the 1960s. After the families were reunited and settled, then urban parents would frequently send their children back to grandparents and other extended family in the South during the summer. These summer visits allowed the grandchildren to be exposed to cultural traditions and remain closely connected with their grandparent and other relatives in the South (Fuller-Thomson & Minkler, 2000a).

In the latter half of the 20<sup>th</sup> century, instead of caring for grandchildren so that adult children could get established in their jobs and with their families, or perhaps complete their education, contemporary grandparents had to contend with the effects of violence, teen pregnancy, joblessness, drug addiction, and HIV/AIDS infection (Burnette, 1997). Burnette stated that the social health problems, such as substance abuse and the HIV/AIDS epidemic, had caused family ties to be once more increased across racial and ethnic groups, social classes, and geographic regions. These social health problems have impacted the ethnic minority families in

struggling inner-city neighborhoods, which often have the fewest social, political, and economic coping resources (Burnette, 1997). Burnette's article supported the need for schools to recognize this family structure and devise programs to assist both the grandparent and the grandchild.

Baird, John, and Hayslip (2000) conducted a study with African American grandparents who had been parenting one or more grandchildren. The study consisted of two focus groups of 21 African American grandparents taken from an African American community of grandparents raising grandchildren in two southwestern cities.

In order to be selected to participate in the focus group discussion, the grandparent had to have been providing a considerable amount of care to one or more grandchildren. The data revealed that many of the participants in the study were providing what the researchers referred to as "supplemental care" for the grandchildren. Because the work and personal school schedules of the parents occupied most of the hours in the day, grandparents assumed the responsibility of providing transportation to and from school, to other activities, and medical appointments for the grandchildren. These responsibilities, or supplemental care responsibilities, were the most mentioned form of assistance provided by the grandparents (Baird et al., 2000). This study found, in spite of their many challenges, grandparents were devoted to their grandchildren. The grandparents had assumed some, if not all, parental responsibilities for the grandchild. These grandparents referred frequently to their grandchild as "my child."

Brown and Mars (2000) study echoed many of the same reasons for African American grandparents parenting their grandchildren. The researchers for this study collected data from interviews with 140 African Americans, ranging in age from 38 years of age and older, who were responsible for parenting a school-aged child for whom they were not the biological parent. The interviews were carried out with caregivers identified by the grandchild's school. Within this

study, 89.3% of the grandparents expressed that they were raising the grandchild because of kinship. The findings from this study indicated the importance of kinship bonds in the African American families. Most of the grandparents were caring for a relative's child, and in many cases, they were caring for multiple grandchildren as well. Furthermore, the study revealed that most of the grandparents did not want to have the child placed in the foster care system or with child protective services. Lastly, roughly about half of the grandparents had some form of a legal relationship with the grandchild (Brown & Mars, 2000). Conversely, according to Smith et al., (2000), some grandparent caregivers did not want to establish a legal relationship with the children because it would mean bringing a legal proceeding against the parents, one of whom is often their son or daughter. These caregivers did not want to strain family relationships by bringing these problems to the attention of the child welfare system and the courts. As of 2000, many states were unaware of the informal nature of many of these caregiving relationships and therefore have not developed responsive public policies (Smith et al., 2000). However, since that time, policies in the areas of financial support, housing, and legal issues have been implemented. The Kinship Navigator Program is a policy that has been instituted in many states to improve service access to grandparent-headed households. This program provides information on benefits, services, supports, and other programs that are available to kinship caregivers (Cox, 2009).

As research is revealing, many grandparents are electing to become the primary caregiver for their grandchildren instead of having the grandchildren become wards of the state. Urrutia (2002) investigated the lives of eight African American or multiracial grandmothers in primary caregiving roles from the South Bronx in New York City. The findings from the study revealed the majority of the children had been abused, neglected, and/or abandoned by their parents due to

the crack-cocaine epidemic. Most of the children had been, or were going to be, wards of the state had they not been saved by their grandmothers. Furthermore, these grandparents commonly had two to five grandchildren within the same household who demonstrated signs of crack-cocaine exposure. Hence, the children required numerous appointments at different clinics, schools, prisons, and other resources due to developmental delays, learning disabilities, behavioral problems, and court-ordered visits.

Urrutia (2002) asserted that because the number of grandmothers serving as surrogate parents to grandchildren is increasing, the educational institutions need to be concerned about this unique family constellation. The grandmothers in this study believed that the schools should provide ongoing one-to-one tutorial services for their grandchildren and recreational programs during and after school hours. This author stated that educational institutions should design programs to assist these grandmothers who are at risk in their caregiving role because of the amount of stress they experience from attending to the needs of their grandchild.

Ruiz and Zhu (2004) affirmed that grandmothers of other races were less likely to be grandparent caregivers than African American grandmothers. While only 13% of White grandmothers at some time during their lives were custodial grandmothers, more than 25% of African American grandmothers were custodial grandmothers. In addition, they found that the majority of grandmothers in the study had taken care of their grandchildren from birth or shortly thereafter. Ruiz and Zhu (2004) found that 56% of the African American grandmothers were caring for grandchildren without any adult children in the home.

The grandmothers in Ruiz and Zhu's (2004) study reported many of the same reasons described by other grandmothers who were providing care to their grandchildren. The primary reason grandmothers provided care in this study was due to the abuse of drugs and alcohol (45%)



by the parents of the grandchildren. The use of drugs and alcohol had been reported before by other researchers as the main reason for grandmothers assuming care of their grandchildren. The next most often reported reason for grandchild care in this study was a parent's neglect of the grandchildren's needs (38%). The other reported reasons for the need for grandparental care included the parent's need to work (23%), teenage pregnancy (18%), the parent's emotional or mental problems (17%), incarceration (12%), and the death of the parent (10%).

Many of the African American grandmothers in this study had provided care to their grandchild from birth or shortly thereafter, had taken care of their grandchildren for at least seven years, and were caring for grandchildren without the assistance of an adult child in the home (Ruiz & Zhu, 2004). Despite the reason that caused the situation, most of the grandmothers believed it was their responsibility to provide care for their grandchildren and said that their spiritual beliefs were very important in their decision to provide the care to their grandchildren (Ruiz & Zhu, 2004). Once again, deToldeo and Brown's (1995) four Ds (divorce, desertion, drugs, and death) were reasons grandmothers assumed care of their grandchildren in this study.

Kelch-Oliver (2011) conducted interviews with six African American grandparent caregivers and 14 African American grandchildren ages 10-16. The themes that emerged from the grandchildren included their few and far between contacts with biological parents; their response to living with their grandparent; their school functioning; and providing advice to other grandchildren being raised by their grandparents. The themes of the grandparents pertained to the challenges of grandchildren residing with their grandparents such as academic and behavioral challenges. The grandparents in this study indicated that their grandchildren started having academic and behavioral problems in middle school.

## **Summary.**

Grandparents raising grandchildren include all racial and ethnic minority groups. However, grandparents providing primary care for grandchildren exist largely in African American families. Research examining the prevalence of grandparent caregivers in the United States found that African Americans have twice the odds of becoming a grandparent caring for a grandchild.

Traditionally, grandparents provided care for their grandchildren in an effort to assist the parents while they found employment, relocated, or completed their education. These traditional reasons as to why grandparents raised their grandchildren were not the same as the contemporary reasons. Even though African American grandparents had always taken care of their grandchildren, the social ills of the 20<sup>th</sup> century, along with the four Ds (divorce, desertion, drugs, and death), had defined a different set of reasons for grandparents assuming care of their grandchildren and thus creating a new role for grandparents.

## **Types of Grandparent Caregiving**

Grandparents provide regular care to their grandchildren either formally or informally. Care provided formally may be by way of court order or decisions. Informal care consists of the grandchild either living with the grandparents or spending a regular portion of his or her day with the grandparent.

Based on the legal perspective, the role of parent customarily refers to both the legal and physical custody of a child. Jendrek (1994) wrote that legal custody is:

the right or authority of a parent, or parents, to make decisions concerning the child's upbringing. Legal custody might include the right to make decisions pertaining to a child's education, medical care, and discipline. The physical custody is the right to

physical possession of the child to live with the parent. The physical custodian is responsible for the daily care of the child. In a marriage, both parents are thought to act as the child's legal and physical custodians. (Jendrek, 1994, p. 207)

Jendrek (1994) conducted in-depth interviews with 114 mostly white grandparents who responded to advertisements that appeared in the media, schools, and courts. The study was carried out to collect both quantitative and qualitative data on the circumstances that led grandparents to providing care to their grandchildren and how they came to that decision. Jendrek examined whether the circumstances for providing care and the decision to provide that care varied by the grandparents' parenting roles. When she merged the concepts of legal and physical custody, three major categories of grandparent-as-parent roles emerged: custodial care, day care, and living-with grandparents.

A "custodial grandparent-as-parent" role is defined as a legal relationship with the grandchild in instances such as adoption, full custody, temporary custody, or guardianship. A custodial grandparent uses the court system to obtain the transfer of responsibility and authority for the grandchild's legal and physical custody from the parents over to the grandparents. These grandparents assume the duties of parenthood and become the grandchild's physical and legal custodians (Jendrek, 1994).

The "day-care grandparents" are not just laid-back baby-sitters. These grandparents provide grandchildren with daily care for extended periods of time. "Day-care grandparents assume responsibility for the physical care of their grandchildren, but they do not assume any legal responsibility" (Jendrek, 1994, p. 207). The parent or parents are still involved with the grandchildren.

The category of “living-with grandparents” takes on a parenting role that falls between that of the custodial and day-care grandparent. The “living-with grandparents” category does not have the legal custody but provides the bulk of the physical care for the grandchild. Jendrek’s (1994) study found at least two categories of living-with grandparents: those who have one or more of the grandchild’s parents living with them, and those who do not. The two categories of living-with grandparents are defined by the duties performed by the grandparents. The two categories do not carry any legal authority because the grandparents have not gone to court to obtain a legal relationship with the grandchild. As a result, these grandparents cannot make decisions about their grandchild because that authority still remains with the parent. If a parent resides with the grandparents, then the function of the grandparents may be either custodial or day-care grandparents, depending upon the amount of authority given up by the parent. When the parent or parents do not live with the grandparents, then the role of the grandparents becomes that of custodial grandparents in terms of physical and legal care.

The study revealed that at one end of the continuum of care, the custodial grandparents often obtained that relationship because of severe problems in the nuclear family. At the other end of the continuum were the day-care grandparents who provided regular help to the grandchild’s nuclear family. The study made known that the decision to provide care was often based on the “impulse to care,” particularly among custodial grandparent and living-with grandparent.

Conversely, a study conducted by Baird et al. (2000) found that depending on the particular need of the family at any given time, the family living arrangements were flexible and accommodating. The children, grandchildren, and great-grandchildren came and went from the grandparent’s home as determined by the need at the time. However, the most prevalent form of

living arrangements involved the grandchild living with the grandparent. These living arrangements were with or without any form of legal custody and with or without a parent present.

In summary, grandparents provide care to their grandchildren either formally or informally. Either of these two, formally or informally, can be categorized in three major categories of grandparent-as-parent roles. The three categories are custodial care, day care and living-with grandparents. However, the title of custodial grandparents is attained more often because of severe problems in the nuclear family. For this study, grandparents-as-parent roles will include the categories of custodial care and living-with-grandparents.

### **Economic, Physical and Emotional/Mental challenges of the Grandparents**

#### **Economic Challenges.**

As grandparent caregivers take on their new role of raising their grandchildren, which is usually forced upon them, they must contend with meeting the basic needs of shelter, food, clothing, medical expenses, and school supplies. The daily task of rearing a child and balancing work is challenging under the best of conditions for both parents and grandparents alike. In addition, grandmother caregivers may have extra caregiving responsibilities if the grandchild has special needs or if they have further caregiving responsibilities to other family members (Minkler et al., 1992). In the study conducted by Minkler et al. (1992), it was found that grandmothers who were balancing employment with raising grandchildren reported less parenting stress and less ill health than nonemployed grandmothers. Despite the complications of employment, working grandmothers were still less stressed than nonemployed grandmothers. It was believed that the fellowship with other adults was therapeutic.

In Burton's study (1992), 77% of the participants indicated that they needed financial assistance to take care of their grandchildren. Most of the grandparents were not receiving any economic assistance from the grandchildren's parent or social service agencies to support their grandchildren. Sixty-eight percent noted that respite service, which could provide occasional care for their grandchildren would also be helpful. The participants mentioned other services needed such as legal counseling concerning foster care and guardianship options; parenting programs to help them learn how to raise children better; job counseling and information on how to start their own business at home; seminars to facilitate their understanding of drug use by their adult children; and health care programs (Burton, 1992).

Minkler and Roe (1993) interviewed grandmothers and found that about two-thirds of the participants (n = 45) stated that they had been doing "okay" financially before the grandchildren came to live with them. Quite a few of the grandmothers mentioned that they had enough money to meet their needs, or that even though they had not had much money before the grandchildren came to live with them, they also had not needed much money prior to providing caregiving for the their grandchildren. However, the majority of respondents (87%) reported substantial financial difficulty since assuming full-time caregiving.

Even though grandparents may not have had a great amount of money prior to caring for their grandchildren, once assuming the role of primary caregiver, many grandparent-headed households were now classified as poor. In Chalfie's (1994) study, the median income of grandparent caregivers was \$18,000, and 41% were classified as poor or near poor. Even in a study conducted 13 years later of grandparent caregivers in the District of Columbia by Crewe (2007), the median income range was found to be between \$10,000 and 14,999 (Crewe 2007). When comparing the two studies of Chalfie (1994) and Crewe (2007), there was no increase in

the median income range even with a 13-year difference between the studies. In fact, the median income range was lower.

One of the major sources of stress most often mentioned by grandparent caregivers was the financial burden of rearing another generation of children. In most instances, grandparents did not seek government assistance, even when necessary, for fear of revealing the family situation and losing the grandchild. Also, grandparents may not have sought government help because of difficult eligibility requirements, which might include time limits, work requirements, and legal relationships (Musil, Schrader, & Mutikani, 2000). In the four studies that follow, the grandparents' interaction with government assistance varies from the difficulty of qualifying for aid to receiving a small amount of aid.

Brown and Mars (2000) maintained that grandparents contributed extensively to the financial support of the child. Their study found that the government provided financial assistance to just about two-thirds of the grandparents who were raising a child. This assistance came mainly from Aid to Families with Dependent Children (AFDC) and Social Security. Nevertheless, this assistance did not cover most of the costs of raising the child. First and foremost, only one-fourth of the costs for raising the grandchild came from government assistance. The grandparent provided the remaining financial support for the grandchild. Also, one-third of the grandparents did not receive governmental assistance, and therefore had to provide 100% of the costs of supporting the child. As a final point, only a few grandparents received financial assistance from one of the child's parents or another family member (Brown & Mars, 2000).

In focus group discussions conducted by Baird et al. (2000), African American participants undisputedly agreed that considerable financial difficulties had resulted from taking

on the care of their grandchildren. The grandparents discussed the difficulties encountered in obtaining financial assistance for which their grandchildren qualified. Several of the grandparents ceased trying to attain financial assistance and did the best they could on their own to provide for their grandchildren. The participants discussed the problems they met when attempting to obtain financial services for their grandchildren through AFDC and Medicaid.

In Kelly, Whitley, Sipe, and Yorker (2000), the 102 African American inner-city grandparents reported fewer resources and tended to describe greater psychological distress. Most of the families in this study received Temporary Assistance to Needy Families (TANF) and social security for income. This study confirmed that the grandmothers' financial resources were limited. There was a small proportion of grandmothers in this study who were employed. However, the findings indicated that the resources available to kinship caregivers needed to be improved. As well, the findings confirmed that financial pressures contributed to the psychological distress experienced by grandparent kinship care providers (Kelly et al., 2000).

Henderson and Cook (2005) examined the influence of Temporary Aid for Needy Families (TANF) on grandparent-headed families in southwest Virginia. The African American grandmothers in this study commented on the insufficient formal social support resources. The grandmothers noted that TANF was a "little bit of money, it does not pay for child care," it does not "purchase basic toiletries, it does not pay my car note, it does not raise a child for a month," nor does it "feed a family of four [sic]" (Henderson & Cook, 2005, p. 9). As well, grandparents told of challenges accessing child care, food stamps, Medicaid or health care, and local social support programs. The grandmothers in this study believed that people were on welfare because they needed help. The grandmothers articulated that "TANF helped their grandchildren; it did not directly help them" (Henderson & Cook, 2005, p. 10).



Many grandparents spend a substantial proportion of their income on renting their accommodations. A study conducted by Fuller-Thomson and Minkler (2003b) used data taken from the Census 2000 Supplementary Survey (C2SS). The study found that more than a quarter of grandparent caregiver renters were living in overcrowded quarters. In addition, the study found that almost one-third of grandparent caregiving renters spent 30% or more of their household income on rent, and for more than 17% of the grandparent caregiving renters, the rent consumed at least half of their income. Consequently, Living Equitably—Grandparents Aiding Children and Youth (LEGACY) was passed by Congress in 2003 to train social service staff to help grandparents qualify for housing assistance and to provide financial help to those seeking to remodel their homes to accommodate a grandchild (Generations United, 2004).

As grandparents adjust their life style and living arrangements in order to provide care for their grandchildren, public and private partnerships are finally beginning to respond to some of these challenges. For example, the state of Massachusetts accepted the responsibility of beginning to address the need for supportive housing for grandparents raising grandchildren. One Massachusetts' initiative was the creation of the GrandFamilies House. This housing site, located in Dorchester, Massachusetts, was owned and managed by Boston Aging Concerns-Youth and Old United (BOC-YOU), and was the first of its kind in the country. The building opened in the fall of 1998; the 26 apartment units were fully occupied by January 1999 (Gottlieb, Silverstein, Bruner-Canhoto, & Montgomery, 2000).

In summary, financial responsibilities are stressful for grandparents. However, many grandparents do not seek government assistance for fear of revealing the family situation and losing the grandchild. For the grandparents that choose to seek financial assistance, the process

for qualifying can be complicated. For the grandparents who are able to receive financial assistance, in many cases, only one-fourth of the expenses are covered.

### **Physical Challenges.**

As grandparents contend with the financial concerns of rearing their grandchildren, they must also address their own physical issues. Minkler et al. (1992) discussed the physical and emotional health status of 71 African American grandmothers raising their young grandchildren as a result of the crack cocaine involvement of the children's parents. The age of the grandmothers ranged from 41-79, with a median age of 53. These African American grandmothers were the sole and primary caregivers for infant and preschool-age children. The article described and analyzed the health findings from the Grandparent Caregiver Study conducted in Oakland, California in 1990-1991. The researchers found that even though the grandmothers in their study admitted to a variety of health problems, some quite debilitating, they refused to focus on themselves. The grandmothers did not let their health problems impede their caregiving responsibilities.

Burton (1992) performed two qualitative studies involving grandchildren who were being raised by urban African American grandmothers and great-grandmothers due to parental drug addiction. From the analysis of the data, themes emerged. The first theme pertained to the levels of stressors related to grandparent-extended family and surrogate parent roles. The grandparents referred to physical stressors related to their present situation as "those life events that caused them problems" (Burton, 1992, p. 748). The data from the second theme implied that the grandparents experience both costs and rewards in their roles as surrogate parents. In addition, all of the respondents indicated that they experienced some form of 'stressful outcome' in their current life situations. Eighty-six percent of the respondents reported feeling

depressed or anxious' most of the time; 61% noted that they were smoking more than they had ever had in their lives; 36% said that they were drinking quite heavily; 35% complained of heightened medical problems with diabetes and arthritis; 8% stated that they recently had a slight stroke; and 5% indicated that they recently had a mild heart attack in the last year. (Burton, 1992, p.749)

Forty-one percent of the grandparents reported multiple stressful outcomes, such as arthritis and heart trouble, or having diabetes, as well as being unable to walk. While the participants found parenting their grandchildren to be an emotionally rewarding experience, nevertheless, they suffered psychological, physical, and economic costs in carrying out their roles.

Moreover, Minkler and Roe (1993), in their study of African American women raising grandchildren and great grandchildren, found that 28% of grandmothers reported that their health had deteriorated in the past year. Even more drastically, 38% reported that their health had worsened since assuming full-time parenting responsibilities for their grandchildren. Also, about half of the participants reported that they had current concerns pertaining to their health; however, one-third had not been to a doctor in three years or more. Lastly, half of the grandmothers reported breaking a medical appointment in the past year due to child care responsibilities. Likewise, over one-third of Burton's (1992) sample reported increased medical problems since assuming full-time responsibility of their grandchildren.

Solomon and Marx (2000) found health status differences between custodial and noncustodial grandparents. Data from the Health and Retirement Study (HRS), Wave 1 (1995) compared demographic and physical health characteristics of custodial ( $N = 123$ ) and noncustodial grandparents ( $N = 1,152$ ). The study indicated that 45% of custodial grandparents reported fair to poor physical health as compared to only 24.3% of noncustodial grandparents.

The study also indicated that 57.6% of noncustodial grandparents were satisfied with their financial status as compared to 39% of custodial caregivers.

Minkler and Fuller-Thomson (2005) wanted to determine the prevalence, sociodemographic characteristics, and the use of services by African American grandparents raising grandchildren as compared with non-caregiving peers. The researchers used data taken from the Census 2000 Supplementary Survey/American Community Survey. The study found over 500,000 African Americans age 45 and older were estimated to be raising grandchildren in 2000. The grandparents were disproportionately female, younger, and less educated than noncaregivers and more likely to be in poverty and receiving public assistance. The grandmother caregivers had significantly higher rates of functional limitations and poverty than either grandfather caregivers or other African American women aged 45 and older. The functional limitations was defined as whether or not a respondent had a condition that significantly limited one of more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. The study indicated that African American grandmothers represented an at-risk population economically. The findings showed that four-fifths of African American grandmother caregivers below the poverty line were not receiving public assistance. Therefore, there is a need for improving program outreach and better servicing this population.

Salzer (2005) stated that grandparent caregivers were more likely to be poor, single, female, African American, less educated and living in the South than grandparents who were not raising grandchildren. The researcher contended that health problems, depression, lack of resources, and social isolation impaired the grandparents' abilities to raise their grandchildren. Salzer (2005) utilized data from the *Healthy Grandparent Program*, which was founded for grandparents raising their grandchildren in Augusta, Georgia. The program used interventions to

improve the well-being of grandparent caregiver families and was conducted over a six year period, with 140 grandparents entering the program. After one year of intensive services, surveys were completed by a social worker concerning the program entry, home visits by a professional nurse, and management of each case regarding each participant (Salzer, 2005).

The *Healthy Grandparent Program* used a strengths-based approach to direct multifaceted interventions. The participants were provided with a service delivery system and were taught how to use the services. The grandparents made the initial contacts, discussed the results with their social workers, and were mentored through problem-solving. Consequently, their feelings of competency were strengthened, and they became better able to become their own case managers (Salzer, 2005). Other interventions included monthly home visits by a registered professional nurse, which provided grandparents with physical and mental health screening, health monitoring and health education. The intervention, which included participatory experiences with a group of peers, provided opportunities to learn and practice problem-solving and decision-making skills needed to improve family functioning. In addition, “a monthly support group meeting with child care and quarterly family activities provided grandparents with opportunities to establish a new social support network or reinforce diminished social support” (Salzer, 2005, p. 83). Lastly, grandparents were educated about options available regarding their legal relationship with their grandchildren. When a legal option was selected, grandparents were referred to an attorney who was informed of the referral. A social worker accompanied grandparents to the attorney meeting and final hearing.

The data from the *Healthy Grandparent Program* revealed that positive health changes had occurred. The grandparents reported that self-monitoring their health problems, understanding and taking their medications appropriately, and the healthy life style changes they

had made indicated that their health problems may have been stabilized and prevented from becoming worse (Salzer, 2005). The program empowered the participants throughout all of the interventions. The interventions provided in this study empowered grandparents raising grandchildren.

Overall, research indicates that once grandparents assume the care of their grandchildren, their health usually deteriorates. It was found that custodial grandparents reported fair to poor physical health compared to noncustodial grandparents. Nevertheless, the grandparents continued to focus on the needs of their grandchildren instead of focusing on themselves. In spite of declining health, the caregiving duties performed by these grandparents continued.

#### **Emotional/Mental Challenges.**

Even though much of the literature addresses the physical problems that grandparents may develop, participants in a study conducted by Harrison, Richman, and Vittimberga (2000) reported lower levels of stress for grandparents than for both single and married parents. Harrison et al. (2000) studied primary caregivers of 82 children exhibiting behavior problems. The caregivers were categorized into three family types: grandparent, single-parent, and two-parent. Each caregiver completed the Parenting Stress Index and the Child Behavior Checklist. The results of the statistical comparisons revealed that although all caregivers reported significant levels of behavior problems in their children, both single-parent and two-parent families reported higher levels of parental stress than grandparents.

In addition, the results found in this study were particularly noteworthy because much of the literature has emphasized the need to provide extra support for grandparents. The researchers commented that maybe the grandparents in this study perceived themselves to be well equipped to handle the problem associated with raising their grandchildren when they made the decision to

become their permanent caregivers. Also, grandparents in this study were more apt to have been involved with the local department of social services. Therefore, these grandparents had greater access to community resources and support (Harrison et al., 2000).

Conversely, Sands and Goldberg-Glen (2000) found in their study that younger (middle-aged) grandparents were more depressed and experienced more psychological anxiety than older grandparents. Because of conflicting responsibilities of younger grandparents, such as caring for several generations and their work schedule, the depression and psychological anxiety were present. In the study by Fuller-Thomson and Minkler (2000), when comparing caregiver and non-caregiver grandparents, it was found that caregiver grandparents had higher levels of depression. Their study, they investigated the physical and mental health of the growing subpopulation of African American grandparents who were raising grandchildren. The data were taken from the National Survey of Families and Households (1992-1994). Their study found major differences between caregiving grandparents and non-caregiving grandparents in the African American community. For example, three-fourths of the caregiving grandparents were widowed, divorced, separated, or never married, compared with one-half of non-caregivers. Also, caregivers were more likely to be female (77% compared with 55%), to have more grandchildren (on average, 8.2 grandchildren compared with 5.3 grandchildren), and to be poorer. Just about half of the caregivers lived below the poverty line, compared with one-quarter of non-caregiving grandparents.

Lastly, in Fuller-Thomson and Minkler's study (2000), African American caregivers were significantly more likely than their non-caregiving peers to have limitations in four of the five activities of daily living (ADL) examined. For example, caregivers had more problems moving around inside the house and doing day-to-day tasks. The study indicated that African

American caregivers had more symptoms of depression compared with their non-caregiving peers. More than one-third of the caregivers reported clinically-related levels of depression compared with one-fifth of non-caregivers.

Fuller-Thomson and Minkler (2000) maintained “grandparents who are in the poorest health and those raising children they recognize as having physical or behavioral problems may be among the least likely to seek and receive counseling and other help for themselves” (p. 114). The authors suggested that outreach centers can be created to provide mental and physical health care for the grandparents and services for the grandchildren. Also suggested were the inclusion of support groups designed to reinforce and build on the strengths of the African American grandparents (Fuller-Thomson & Minkler, 2000).

Because of the different situations that grandparents must deal with, the level of stress and depression will vary. In a 2006 study of 47 grandmothers raising grandchildren conducted by Cooney and Shin, it was found that the grandmothers who had living parents or in-laws experienced greater depression and burden than those who did not have living parents or in-laws. The researchers also found that there was an association with greater depression for the grandmothers that had grandchildren who had specific problems such as behavioral, health or learning problems. As well, Ross and Aday (2006) conducted a study comprised of 50 African American grandparents who were raising their grandchildren. Their study found that a majority of the grandparent caregivers were highly stressed emotionally. For example, the findings revealed that grandparents who were caring for their grandchildren because of parental substance abuse were less stressed when compared with grandparents who were raising a grandchild due to the death of a parent. This study found that the main reason grandparents were caring for their grandchild was related to parental substance abuse by one or both parents. The findings also



revealed that grandparents who had the highest level of annual household income experienced a higher level of stress when compared to grandparents who had lower levels of annual household income. Perhaps the added demand of employment and raising a grandchild resulted in greater stress.

Generally, then, as grandparents take on the role raising their grandchildren, they may find that they are not as prepared emotionally; the stress may be just too overwhelming. Therefore, as grandparents contend with meeting the basic needs for their grandchildren, they are prone to depression. Assistance can be provided in the form of outreach centers; also support groups can be designed to emphasize and build on the strengths of grandparents.

### **Parenting Skills of Grandparents**

De Toledo and Brown (1995) wrote that childrearing has changed since children were raised in the 1950s and grandparents raised their own children. Grandparents who have become surrogate parents are usually ill-prepared for the job. Grandparents may find themselves attempting to use 1950s parenting skills with the children (de Toledo & Brown, 1995).

According to de Toledo and Brown (1995), many of the disciplinary actions used in the past are no longer accepted as parenting techniques. As a matter of fact, some techniques are considered abusive. Many parents of the “old school” used a belt to discipline their own children when they were small, however, in today’s society that could be justification for removing a child from the home (de Toledo & Brown, 1995).

De Toledo and Brown (1995) maintained some grandparents were shy about parenting. Many of them felt they had made mistakes with their own children; as a result, they did not want to repeat these mistakes with their grandchildren. Then, there were other grandparents who had been away from childrearing so long that they had forgotten how children behave.

Consequently, they did not have a clear perspective on what was acceptable behavior and which actions should be disciplined (de Toledo & Brown, 1995).

Further, de Toledo and Brown (1995) recommended that grandparents who become surrogate parents consider taking parenting classes. These classes could be offered through child guidance clinics, family services agencies, hospitals, and local colleges. These authors believed parenting classes would teach grandparents' new methods for helping their grandchildren learn responsibility, accountability, confidence, and self-esteem (de Toledo & Brown, 1995).

Furthermore, these authors recommended support groups as good resources.

Grandparents raising grandchildren impacts all ethnicities; therefore, when parenting classes and programs are designed, the culture of each ethnic group must be considered. In a study conducted by Strom, Collinsworth, Strom, Griswold, and Strom (1992), the performance and effectiveness of African American grandparents from different regions of the United States in comparison with White grandparents was assessed. African American grandparents from Arizona were compared with perceptions about White grandparents living in the same community and with African American grandparents from Alabama. The aim of the study was to determine how a grandparent program proven successful with White families could be adapted to ensure its appropriateness for African American grandmothers and grandfathers.

The study was comprised of a self-selected sample of 408 grandparents, drawn from churches and senior centers, which included 204 Whites and 100 African Americans from Arizona and 104 African Americans from Alabama. The Whites in the sample were mostly from middle-class backgrounds. The African Americans reported lower incomes and less formal education (Strom et al., 1992).

The study made known that African American grandparents were considered more active teachers than White grandparents.

African American grandparents were seen as more influential in providing children a sense of direction through lessons on respecting other people's feelings, demonstrating the worth of religious faith, using good manners, reinforcing a sense of right and wrong, giving advice, and teaching the importance of learning throughout life. (Strom et al., 1992, p. 565)

This comparative study of White and African American grandparent performance reinforced the need to consider ethnic differences in planning educational programs for grandparents.

As grandparents parent a second time, they want to teach their grandchildren and help them become the best they can be. The area of guidance is always a concern for caregivers. Therefore, grandparents may need to be taught how to grasp contemporary childhood needs and tasks as well as learn to set reasonable limits and consequences (Chenoweth, 2000). Grandparent education is one approach that can be utilized to make the role of parenting a second time less frustrating and more rewarding for grandparents. According to Chenoweth (2000), grandparent education should be built on existing strengths of the grandparents, be culturally responsive, and provide support for the grandparents. A goal of parent education is to facilitate the development of caring, competent, and healthy children (Chenoweth, 2000).

As grandparents begin the process of parenting a second time, they can expect many changes in their life. In a study conducted by Baird et al. (2000), it was revealed that the grandparents had to make adjustments in many areas of their lives. The most significant adjustment was learning to parent this generation. One grandparent stated that she had changed how she was raising her grandchild. She indicated that she had learned how to punish without

using her hands. The grandparents agreed that their parenting styles had to change, if only because of the possible involvement of child protective services.

Caring for children of any age can be challenging for anyone, but for grandparents caring for younger children, it can be even more overwhelming. The grandparent participants in Baird et al. study were caring for grandchildren of school age. It was pointed out that they were relieved that they did not have to provide that constant care that is required for younger children. However, the participants did feel a loss of community involvement while parenting of their grandchildren. The participants talked about their experience of growing up, as well as their children's growing-up years. During those times, neighbors, church members, school personnel, and other parents would work together to support the morals and values taught at home (Baird et al., 2000).

Grandparents who parent a second time, especially during their middle and later years, frequently experience more stress than when they parented the first time. In addition to now having the responsibility of raising their grandchild, their adult child is often still involved. As grandparents consider their past parenting experience, powerful feelings can arise, and grandparents may question their parenting skills when they think about the life of their son or daughter, who is the grandchild's parent (Kern, 2003). Grandparents can refresh their parenting skills. They can put away old parenting strategies and add new ideas, information, and skills that can give them power to influence a young life to grow, mature, and take on responsibility. Grandparents can acquire new confidence as they take on this new parental role (Kern, 2003).

As grandparents parent for a second time, they now have the opportunity to parent this time with greater insight. Grandparents can take past experiences and build on them to become more effective parents for a grandchild (Kern, 2003). Author Kern discusses the Principles of

Positive Discipline, which is one approach to the development of effective parenting that has proven to be effective. This approach can bring insight and new understanding to grandparents' roles as parents. The Principles of Positive Discipline approach relies on cooperation based on mutual respect and shared responsibility. Based on this approach, grandparents can assist children in developing autonomy through a supportive and encouraging environment even in the midst of having experienced negative involvement in the past with adults (Kern, 2003).

Furthermore, grandparents can be provided with the skills and tools they need as they parent for a second time. Hayslip and Kaminski (2005a) asserted that providing information and skills training to grandparents may help solve current problems and prevent future problems. They believe providing this form of support may help relieve the more severe situations experienced by these caregivers. It was discussed that it is necessary to balance content and education with emotional support. Therefore, when designing custodial grandparent training, the content should emphasize:

(1) parenting skills such as discipline styles, setting limits and consequences, and other contemporary lessons on raising children; (2) communication skills on topics such as how to talk to a teenager, how to talk to a child's teacher; (3) advocacy issues that include legal/ custody question, and becoming knowledgeable about one's rights; (4) contemporary issues such as drug use and sexuality; and (5) grief and related issues of loss. Because many grandparents are raising children with psychological and behavioral difficulties, sessions focusing on learning disabilities and hyperactivity are especially valuable. (Hayslip & Kaminski, 2005b, p.161)

Gibson (2005) studied the parenting strategies used by 17 African American grandmothers in order to understand how they manage parenting their grandchildren. The grandmothers in the study stated that they maintained lines of communication, provided socio-emotional support, involved extended family, took a strong role in the educational process, involved the grandchildren in certain community activities, and understood grandchildren's feelings about the absence of the biological parents (Gibson, 2005). This study provided information about the parenting strategies used by grandparents; however, it did not focus on how the grandparents' experiences of parenting a previous generation of children has assisted them in parenting their grandchildren.

Dolbin-MacNab (2006) conducted an exploratory study to answer the question: How is raising one's grandchildren similar to or different from raising one's own children? In the study, most of the grandmothers recognized differences in parenting their grandchildren compared to their children. Some of the grandmothers described parenting their grandchildren as easier and more enjoyable. They pointed out that they had more wisdom and experience, were more relaxed, and had more time and attention to give to their grandchildren. The other grandmothers noted that parenting their grandchildren was more challenging.

Many of these challenged grandmothers focused on their lack of energy and physical limitations, which they attributed to aging. When they were younger, they saw themselves as possessing more energy to keep up with their children's schedules and to deal with unacceptable behavior. (Dolbin-MacNab, 2006, p. 573)

The findings from this study indicated that health problems, limited energy, changing family structures and roles, and a toxic social environment were viewed by custodial grandmothers as creating parenting challenges. The findings suggested that changes in the

family structure and roles, such as parenting without spousal support and trying to be both parent and grandparent, made raising grandchildren feel more challenging than parenting their own children (Dolbin-MacNab, 2006). Therefore, the researcher suggested that practitioners should incorporate material related to these issues into programs and support groups. It was proposed that practitioners need to provide caregivers with strategies and resources for managing the consequences of aging in the context of their parenting. “Some of these strategies and resources could include accessing mentoring and respite programs, organizing carpools, and using after-school programs” (Dolbin-MacNab, 2006, p. 574).

The research of Dolbin-MacNab (2006) also revealed that custodial grandmothers would benefit from parenting education and training that considers their prior parenting experience and addresses their challenges related to parenting grandchildren. The researcher suggested that based on these findings, family life educators and other practitioners should assist custodial grandparents in developing successful single-parenting skills; effective approaches to discipline, and strategies for balancing the coexisting roles of grandparent and parent (Dolbin-MacNab, 2006). Dolbin-MacNab (2006) suggested that practitioners working with grandparent caregivers need to design interventions focused exclusively on grandparents’ unique parenting challenges.

To summarize, childrearing has changed since children were raised in the 1950s when present-day grandparents raised their own children. Research has revealed that most grandmothers recognize differences in parenting their grandchildren compared to their children. Some grandmothers describe parenting their grandchildren as easier and more enjoyable. Grandparents raising grandchildren face many challenges. The one major challenge that concerns the grandparents is their lack of energy and physical limitations, which they attribute to aging.

The role of parenting a second time can be less frustrating and more rewarding for grandparents by simply educating grandparents in contemporary parenting techniques. It was suggested that classes could be offered through child guidance clinics, family services agencies, hospitals, and local colleges. These parenting classes, along with support groups, can teach grandparents' new methods for helping their grandchildren learn responsibility, accountability, confidence, and self-esteem. It is possible for grandparents to refresh their parenting skills and acquire new confidence as they embrace their new parental role. It was suggested that practitioners working with grandparent caregivers should consider designing interventions focused exclusively on grandparents' unique parenting challenges. In addition, life educators and other practitioners should assist custodial grandparents in developing parenting skills and effective discipline approaches.

### **Interventions for Grandparents**

To assist grandparents in raising their grandchildren, there should be formal as well as informal supports and resources in place to help grandparents cope with their challenging role. Researchers Minkler, Driver, Roe, and Bedeian (1993) asserted there was some interest in the phenomenon of grandparents raising grandchildren with the growing number of community interventions and service programs developing to aid and support grandparents raising grandchildren. In addition to support groups, informational and referral services were being identified as well. Just as various services and support groups were emerging, researchers were beginning to target schools as an avenue to assist grandparents raising grandchildren. Rothenberg (1996) asserted that schools can contribute greatly to helping grandparents cope with the stresses of parenting a second time around and better provide for the children.



As grandparents raising grandchildren find themselves in a new demanding parental role, they may also find that their new role leads to increased physical, emotional, and financial vulnerability (Minkler et al., 1992). According to Minkler et al. (1993), the late 1980s and early 1990s saw a tremendous amount of interest in the phenomenon of a growing number of community interventions and service programs to assist and support relative caregivers. Fifteen years later, much attention has been given to devising interventions and various programs for grandparents rearing their grandchildren. Through the Brookdale Grandparent Caregiver Information Project, many community intervention and service programs were identified and tracked.

The Brookdale Grandparent Caregiver Information Project was established in October of 1991 to determine the state-of-the art of community interventions and service programs for relative caregivers nationwide and to encourage program development and sharing. About three-quarters of the 124 programs examined in detail consisted solely or primarily of support groups for grandparent caregivers. Sixty of these support groups provided emotional and informational support to members without any additional services. Thirty-one other support groups offered at least one additional activity, such as one-on-one counseling, or a newsletter or handbook for relative caregivers. “While most of the support groups were autonomous and independent entities, others were part of a larger network of such groups, loosely connected by means of a common name, mission statement, and sometimes joint advocacy efforts” (Minkler et al., 1993, p. 808). For example, two organizations which originated as isolated support groups and now form the nexus of dozens of groups around the country were Grandparents as Parents (GAP) in Long Beach, California, and Grandparents Raising Grandchildren in Colleyville, Texas (Minkler et al., 1993).

Besides support groups, the researchers' initial investigation uncovered two informational and referral services. These services were precisely targeted to grandparent caregivers. Also discovered were a respite center and 24 comprehensive programs for grandparents raising grandchildren. The 24 comprehensive programs offered a range of services in addition to support groups that typically included individual counseling and advocacy, and a variety of supportive services for children in the care of relatives (Minkler et al., 1993).

For example, the intergenerational project of the Atlanta-based program, Aid to Imprisoned Mothers (AIM), limited its service to intergenerational families headed by grandmothers caring for the children of incarcerated mothers. It offers a regular support group and assistance to grandmothers in the form of individual counseling, help in accessing medical care, emergency food and housing, and respite care. Additionally, the project provided educational, social, and counseling services for children being raised by these grandmothers.

A program that provided service to any eligible relative caregiver was Grandparents As Second Parents (GASP) based out of Oakland, California, another example of one of the 24 comprehensive programs. "GASP was able to provide emotional support by phone, emergency help in accessing baby food, clothing and other needed resources. Furthermore, GASP began providing several support groups, a newsletter, a speakers' bureau, a peer training program and a directory of local services for grandparent caregivers" (Minkler et al., 1993, p. 810).

Presently, there are numerous support groups, both locally and nationally, that can help grandparents raising grandchildren manage their responsibilities. Some of these support groups are: The American Association of Retired Persons (AARP), Grandparent Information Center, Generations United, Grandparents Raising Grandchildren, Grandparents As Parents (GAP), Raising Our Children's Kids (ROCKING), Relatives as Parents (RAPPs), the Brookdale

Foundation Group, and the Casey Family Programs. Several of these support groups have joined together to form larger organizations. For example, the Generations United Grandparent Advisory Group, consisting of national organizations and experts from across the country, along with the Brookdale Foundation Group and many RAPPs, have met regularly since 1998 and continue to work on behalf of grandfamilies. Because of the efforts of Generations United groups, in 2008, the Casey Family Programs, founded in 1966 to focus entirely on foster care and improving the child welfare system, provided funding to formally establish this group as the Grandfamilies National Partnership Working Group. This body will organize future symposiums to identify and prioritize policy, research, and program goals (Butts, 2009).

Currently in Virginia, there are support groups and resources available for grandparents raising grandchildren. Some of the organizations provide weekly support meetings while others provide free monthly newsletters with child development activities, information for relative caregivers, and information about monthly activities. For example, a grandparent group in the Fairfax/Springfield area meets monthly. Another group for grandparents in Virginia Beach, Grandparents As Parents (GAP), meets monthly and addresses the grandparents' unique problems, needs, and questions (Virginia Grandparent Support Center for Kinship Care Givers-GrandsPlace, 2009).

Minkler et al. (1993) concluded that community interventions are important in supporting and assisting grandparent caregivers. However, as important as community interventions may be in supporting and assisting grandparent caregivers in their difficult and critical roles, they cannot take the place of larger public level policies and programs. Hence, community policies and programs should be aimed at recognizing and responding to the needs of the increasing numbers of multigenerational American families headed by grandparents (Minkler et al., 1993).

Though support groups and community interventions are a necessity, Strom and Strom (2000) maintained that support groups often fail because they tend to allow members to vent endless frustrations and complaints without moving on to positive and constructive topics. Even though members learn that there are other custodial grandparents, members may acquire feelings of helplessness and defeat when caught up in a negative cognitive loop. Strom and Strom (2000) asserted that it is important to introduce balance to these groups by emphasizing messages of hope, and celebrating some smaller successes of fellow members, as well as allowing other members to experience the need for catharsis. These authors contended that belonging to a support group can offer benefits when the emphasis is on joining positive attitudes. Also, members get the opportunity to practice in group process communication skills and learn up-to-date lessons on raising children.

According to Wohl, Lahner, and Jooste (2003), psychologists are starting to understand the effects this nontraditional family arrangement is having on both the grandparents and grandchildren and have observed the need for interventions with this group. They have recommended implementing support groups, educational groups, or both to assist custodial grandparents in coping with, transitioning into, and maintaining these new roles. The use of support groups provides the opportunity for catharsis, whereas educational groups can offer information and training related to raising a child in today's society that is exclusively designed for this population (Wohl et al., 2003).

As grandparents cope with the challenging role of raising their grandchildren, they should be provided with both formal and informal supports and resources. Researchers contend that grandparents can benefit from belonging to a support group. Grandparents can have the opportunity to practice in group process communication skills, learn up-to-date lessons on

raising children and experience the need for catharsis. The use of support groups provides the opportunity for catharsis, whereas educational groups can offer information and training designed for the child in today's society. With the phenomenon of grandparents raising grandchildren, community policies and programs must recognize and respond to the needs of the increasing numbers of multigenerational American families headed by grandparents.

### **Grandchildren Issues**

According to Dubowitz and Sawyer (1994), whether children reside with relative or nonrelative caregivers, both sets of children have physical, developmental, mental health, and school problems. Dubowitz and Sawyer (1994) noted that specifically, the health problems included much higher rates of asthma, anemia, visual and dental problems, and developmental delays. The children experienced cognitive and academic delays as well.

The first comprehensive assessment of children in kinship care was conducted by Dubowitz et al. (1994). They assessed the physical and mental health as well as the educational status of the children. The study was to evaluate all 524 children in kinship care under the supervision of the Baltimore City Department of Social Services on April 30, 1989. The majority of the children were African American with about equal numbers of females and males. The reasons for the children's placement in kinship care were neglect (75%), physical abuse (20%), abandonment (1%), and sexual abuse (7%).

The study was comprised of three sub-studies. It was found that only 25% of the children had received adequate child health supervision. The adequacy of care for most of the remainder of the children was uncertain. The most prevalent health problems were anemia, asthma and dental problems. Substudy 1 revealed that children in kinship care have substantial health care needs. Many of the problems of the children in this study had not been identified; however,

when the health problem had been identified, follow-up care was often lacking (Dubowitz et al., 1994).

Substudy 2 found that in most age categories, boys were reported to have more problems than girls. Also, as the boys became older, there were more behavioral problems. The major difficulties were delinquent and aggressive behavior, as well as social and attention-seeking problems (Dubowitz et al., 1994).

Substudy 3 examined school performance and behavior. Approximately 30% of the children received special education services. Forty-one percent of the children had repeated a grade at least once and 4% had repeated more than one grade. The substudy found that in academic achievement, the teachers rated few of the students above average in the core subjects. Only four percent to 9% of the students performed well in reading, written language, spelling and math. Forty-nine to 58% of the students performed below average in these same areas. Furthermore, the teachers rated more children below average than above average in cognitive functioning, problem solving, reasoning skills and listening comprehension. However, more children were rated above average than below average in oral expression. In addition, Substudy 3 found:

approximately equal thirds of the children had general behavior, ability to follow class routines, and motivation to learn rated as good, average, or poor. Most of the children were rated as having average or better relationships with their peers (78%) and teachers (87%). The problem areas rated as poor were work study habits (53%) and attention skills (47%). School attendance for students in kinships care in 1989-1990 was 89% of the days enrolled in school, compared to 86% for the city's public school population. During the prior school year, the

suspension or expulsion rate for students in kinship care involved only six students (1.6%), compared to 2% in the general school population. (Dubowitz et al., 1994, p. 98)

The overall findings in this study indicated that “many children in kinship care had substantial school-related problems. Almost one-third of children were receiving special education services and 45% had repeated a grade. Children in kinship care appear to have increased learning and behavior problems requiring special services”(Dubowitz et al., 1994, p. 99). However, positive indicators of school behavior were school attendance, plus the low frequency of suspension and expulsion, with slightly better rates than for the general school population. The findings in this study were representative of children in kinship care in Baltimore in 1989. It is likely that the “findings can be generalized to children in other kinship care settings, but agency policies and sample characteristics must be considered before extrapolations can be made” (Dubowitz et al., 1994, p. 101). The researchers believe that comprehensive services for all children in kinship care should include monitoring of school performance and behavior; appropriate interventions should be implemented when needed (Dubowitz et al., 1994).

Dubowitz and Sawyer (1994) reviewed the study conducted by Dubowitz et al. (1994). The authors noted that schools, caseworkers, and pediatricians should pay special attention to children in kinship care and ensure that this high-risk group of children receive necessary services. The authors cited an article by Canning (1974), which suggested several ideas such as regular meetings between school personnel and caregivers along with making special efforts to involve these substitute families in the children’s schooling. “The well-being of this high-risk group of children is a shared responsibility; and the relatives and professionals caring for these

children should be sensitive and responsive to these children's needs" (Dubowitz & Sawyer, 1994, p. 909).

In a study conducted by Sawyer and Dubowitz (1994), they found that many children in kinship care, who were being raised by grandparents, were found to have weak reading, math, and cognitive skills. The study found that 30% of the children in kinship care being raised by grandparents showed signs of mental retardation, emotional disturbance, and learning disabilities that negatively affected their school functioning. Lastly, the study found that there was a 63% grade failure rate among the children in kinship care being raised by grandparents (Sawyer & Dubowitz, 1994).

Furthermore, Sawyer and Dubowitz (1994) data showed that children who entered kinship care as adolescents performed better on math and reading tests than children who entered kinship care before they began the first grade. Also, the data revealed that when four or more children lived in a single home, they were more likely to have lower reading scores compared to homes with fewer children. Therefore, homes with fewer children were able to provide more academic support.

Conversely, the study by Dubowitz and Sawyer (1994) asserted that case managers who were provided to children in kinship care by social service agencies perceived caregivers as being involved in the children's schooling at a 90% level. Yet, the teachers of these children viewed the level of school involvement from caregivers at a level of 64%. The teachers in the study reported that over 30% of the students living in kinship care were unmotivated, noncompliant with class rules, while demonstrating unacceptable school behavior. Dubowitz and Sawyer (1994) contended that caregivers may not be aware of the children's behavior problems in school. The caregivers tended to rate the children's general school behavior much



better than did their teachers. Lastly, more than half of the children displayed below average work and study habits, inattentiveness, and poor concentration skills (Dubowitz & Sawyer, 1994).

In a study conducted by Solomon and Marx (1995), the health and school adjustment of children raised solely by grandparents were examined. The researchers chose to use a national data set containing a large number of both African American and non-African American grandparent-grandchild families ( $N = 17,110$ ). Most of the existing research on grandparents raising grandchildren had focused on African American families. Hence, the researchers were able to make comparisons between racial groups based on the association between children's health and school adjustment and living in a grandparent-headed home. What was found was a preliminary look at gender and racial differences within grandparent families, which revealed that boys were much less well-behaved in school than were girls. The measure on school adjustment, which included both academic performance and behavior problems, applied only to those children aged 5-17 years of age attending school. The researchers found that the grandchildren did quite well as compared to children in families with one biological parent present, which included both single-parent and blended families. Moreover, children raised solely by grandparents were not significantly different, except for academic performance, from children raised in traditional families with two biological parents present (Solomon & Marx, 1995). Regarding academic performance, the researchers found that grandmothers were more likely than mother figures in other family configurations to report that the children were average or below average students. Also, children raised by grandmothers were more likely to have repeated a grade than children in two-parent families. However, when the grandchildren were compared to children raised by a single parent, Solomon and Marx (1995) found that children

raised by grandparents fared better across health, academic, and behavioral dimensions. The findings in this study were not consistent with most research (Dubowitz et al., 1994; Sawyer & Dubowitz, 1994).

Edwards (1998a) coined the term “grandfamily” to easily identify the families in which children were raised by grandparents. The grandchildren in these families were called “grandkin.” The purpose of his study was to determine whether grandkin experienced a greater number of behavioral and emotional problems than their peers who lived in single parent or dual parent biological families. Also, the study was to determine whether grandkin occupied more school personnel time due to problematic functioning (Edwards, 1998a).

Edwards (1998a) empirically investigated the impact of grandfamilies on students and school services. The results revealed that grandkin experienced significantly greater levels of emotional and behavioral problems than their peers by displaying behavior that was unruly and unrestrained as well as exhibiting nervous behavior and becoming disruptive elements in the classroom. Nevertheless, the grandkin were not referred for discipline problems in substantially larger numbers. The results revealed that the practice of education should change to allow for the development and provision of social support procedures in schools. The social supports could help to relieve the stress which is manifested in emotional and behavioral problems that children experience as a result of living with surrogate parents (Edwards, 1998a). Edwards (1998b) asserted that in these grandfamilies one crucial life activity that is usually affected is the children’s school functioning. The author maintained that grandchildren raised by grandparents tend to manifest behavioral, emotional, and academic problems in school.

As children being raised by their grandparents contend with physical, developmental, mental health, and school problems, researchers Rogers and Henkin (2000) asserted that children

in kinship care frequently experience feelings of loss, anger, and rejection as well. These feelings can make it difficult for children in kinship care to form trusting relationships with their caregivers, teachers, and peers. Subsequently, the children may experience split loyalties among the kinship caregiver, the parent, siblings, and professionals plus feeling they have to pick between loved ones (Rogers & Henkin, 2000).

Racicot (2003) developed a survey to study the social and emotional needs of grandparents along with the educational, social, and emotional needs of the children. The participants were mostly educated Caucasian, middle-class married women with a mean age in the early 50s. The grandparents gave a variety of reasons why their child did not parent the grandchild. The most common reasons were substance abuse, teenage pregnancy, and incompetent parenting. Many grandparents agreed that their grandchildren had attention-deficit disorders while many thought that the educational needs of the children were not being well met. The grandparents indicated that the educational needs were not well met especially when their grandchildren were likely to display behavioral problems, learning problems, hyperactivity, poor concentration, health problems, and developmental delays. These grandparents expressed a need for child support groups and child counseling in the schools (Racicot, 2003).

In comparison to Racicot's study of middle class, Caucasian grandmothers, Edwards (2003) found that the grandchildren from lower socioeconomic grandfamilies were performing poorly in school as well. Edwards (2003) wrote the demands of raising grandchildren who have experienced negative life events and who obviously display social-emotional and academic difficulties may decrease grandparents' ability to ensure their grandchildren's appropriate development in the school environment. When families come about because of the four Ds, which are bad conditions that predate the placement of the children with grandparents, the

children's ability to function in academically, socially, and behaviorally demanding school environments can be affected (Edwards, 2003). Edwards mentioned that "in poor grandfamilies, the grandkin may fail to do well in school and eventually drop out simply because of a lack of intellectual and educational stimulation" (Edwards, 2003, p. 208).

A study conducted by Salzer (2005) found 7.8% of children raised by grandparents were diagnosed with asthma. Salzer also revealed over 15% of the children in the study had been diagnosed with attention deficit hyperactivity disorder (ADHD). Depression was the second most commonly diagnosed mental health problem (6.6%) followed by learning disorders (5.9%) and developmental delays (3.9%). Also, comorbidity of mental health disorders was common in the children as well (Salzer, 2005, p. 159).

An article by Edwards and Sweeney (2007) expounded on the reasons why children should be placed with relative caregivers instead of non-relative caregivers. One explanation discussed the fact that children who live with non-relative caregivers enter a new environment where they must adjust and adapt to complete strangers. Children living with their relatives have the possibility of interacting with their biological parents. Nevertheless, whether children reside with relative or non-relative caregivers, both sets of children have physical, developmental, mental health, and school problems (Edwards & Sweeney, 2007).

Children who are cared for by persons other than their parents frequently experience problematic school functioning. Caring for these children can be quite stressful for these grandparents, since many of them are older than 60 years. Because of the difficulties of returning to the role of a full-time surrogate parent, these grandparents' ability to assist in the appropriate development and education of their grandchildren may be hindered (Edwards & Sweeney, 2007). In addition, many grandparents have health problems or negative physical

conditions that likely will cause grandparents to have less energy to assist their grandchildren with school.

Rogers and Henkin (2000) stated grandparents were often particularly frustrated because they are unable to help their grandchildren with homework. The authors contend that some grandparents were embarrassed and intimidated to share private information with school district personnel. As well, the grandparents attended school conferences and activities only minimally due to embarrassment and intimidation. “Some of the kin providers also cited the lack of available time, patience, and energy as deterrents in helping their children succeed academically”(Rogers & Henkin, 2000, p. 223).

The most recent study pertaining to children raised by grandparents was conducted in a large suburban high school in Texas during the school year 2006-2007. The student population was 2,649 for grades 9-12. The researcher was most interested in the achievement of children raised by grandparents compared to those raised by mothers, fathers, both, or others. Grades of the grandchildren for both the first semester and second semester were compared with children with various types of guardians (father, mother, and others). It was found that children raised by grandparents achieved lower semester grades than children raised by other categories of guardians. Another comparison was made regarding attendance; it was found that children raised by grandparents suffered from a greater incidence of excused absences. Many of the excused absences were for medical reasons; however, the attendance office did not specify whether the excused note was for the grandchild or the grandmother. Lastly, the attitude of the grandchildren toward their classes was examined. Children raised by grandparents tended to report to class after the tardy bell more often than other groups of children. Also, it was found

that children raised by grandparents had the lowest level of rigor in their coursework (Mauderer, 2008).

Much of the literature supports the fact that many children who are raised by their grandparents experience academic and behavioral problems. Some of the research speaks to the fact that perhaps the younger the grandchild is at the time grandparental care is assumed, the more the academic issues become problematic. Perhaps the return to the role of a full-time parent and the age of some of the grandparents makes it difficult to monitor the development and education of the grandchild.

### **School-based Interventions**

Grandchildren being raised by grandparents are still at a higher risk for developmental delays and potentially serious emotional problems than children in general (Pinson-Millburn et al., 1996). Just like children that drop out of school, run away from home, are abused or neglected, become pregnant, are arrested for a drug offense, are injured by a gun, and bring their guns to school, children and youths who are being raised by their by grandparents are also children at-risk (Pinson-Millburn, Fabian, Schlossberg, & Pyle, 1996). Pinson-Millburn et al. (1996) discussed intervention strategies school counselors should consider as they work with grandparent-headed households.

As school counselors work with this at-risk population, Pinson-Millburn et al. (1996) suggested the following interventions: (a) providing support groups for children modeled after the support groups for children of divorce, (b) provide individual or group counseling, (c) implement grandparent training groups such as helping with homework, handling parent-teacher conferences, dealing with issues such as drugs and sexuality, and (d) provide training and

development to all school personnel on the issues raised by grandparent households (Pinson-Millburn et al.,1996).

Rothenberg (1996) recommended that schools could provide better experiences for kinship caregivers by offering information, referrals, and using family-friendly interventions. The school setting has the capability to substantially contribute to the successful development of these kinship children. Based on Rothenberg (1996), schools can contribute significantly to helping grandparents cope with the stresses of parenting a second time around. Schools can use many strategies to support grandparents who are working to raise and educate their grandchildren. The author suggested that perhaps schools can examine the policies on enrollment to accommodate children living with their grandparents. Further assistance could include having helpful information on hand such as brochures on various topics for grandparents. School counselors might want to write to organizations to receive more information on parenting a second time. This information could be shared with teachers and grandparents. Also, schools should be sure that school policy supports appropriate referrals, as needed, for educational, health, and social services.

To assist grandparents in adjusting to their new role, Strom and Strom (1995) advocated for forming grandparent education councils, which would focus solely on the responsibilities and needs of grandparents. A council would be made up of grandparents, a volunteer coordinator, and someone representing the faculty, generally the principal. The main focal point of the council would be to plan opportunities for grandparents to learn how they can make a greater contribution to family harmony. The second goal of the council would be to acquaint grandparents with ways in which they can enhance the children's school experience by volunteering and supporting them as students (Strom & Strom, 1995). These authors maintained

that if the goal of the school, which is to ensure student progress, and the goals of the council were complementary, then everyone would benefit. The combined efforts of both the school and the council could lead to higher student achievement, more effective volunteers, and stronger families (Strom & Strom, 1995). This educational program for grandparents had been field tested and adapted to accommodate the needs of culturally diverse families. This program benefited the grandparents, the students, and the school. For the students, the benefits were receiving individual attention, getting to know people outside their age group, and learning that older people care about them. In addition, the students made greater academic gains. The advantage for the grandparents was that volunteering allowed them to help others, remain creative and productive, and feel valuable. With grandparents assisting in the schools and becoming an ally, there was now a group that could observe and vocalize about the hard work and success of students and teachers.

Strom and Strom (1995) contended that grandparents had become the largest group of helpers for teachers in the classroom. The authors asserted that a partnership between the two could be created to meet the needs of the school and grandparents. Since grandparents were volunteering at school, classes for them should be offered at the schools where they volunteered.

Strom and Strom (1995) wrote that helping grandparents adjust to a new role has not been a major concern for scholars, government agencies, or private foundations. However, society has an increasing number of grandparents who are raising their grandchildren, as well as acting as full-time babysitters or volunteering in schools. Grandparents could be more effective in these roles if there were courses to help them understand contemporary childhood, parenting, and schooling (Strom & Strom, 1995).



Moreover, it is crucial for professionals working with children being raised by their grandparents to reach out to both the grandparents and the children. Teachers must ensure that children being raised by grandparents have consistent access to nurturing adults in their home and school environments. By providing predictability and consistency within the school environment, children's feeling of security and personal competence will be increased (Smith, Dannison, & Vach-Hasse, 1998). "Teachers can greatly enhance children's feelings of self-worth by conveying their caring and confidence in the child's abilities and by providing them with opportunities to act out their conflicting emotions in appropriate ways" (Smith et al., 1998, p. 16).

Teachers and school personnel should become more perceptive to the fact that grandparents are raising grandchildren due to many different circumstances. Urrutia (2002) wrote that educational institutions need to be mindful of the needs of this unique family constellation and should design preventive/comprehensive programs within the educational setting. "These grandmothers and children may benefit from educational designs which incorporate and provide linkages to medical, dental, socio-psychotherapeutic, optical, ecclesiastical and legal services within the school system" (Urrutia, 2002, p.31). The location of these services within the schools would reduce the travel, lessen the number of school absences due to clinic appointments, and increase the contact between the grandparents and school personnel (Urrutia, 2002). Furthermore, in Urrutia's study, all of these grandmothers believed that the schools should provide ongoing one-to-one tutorial services for their grandchildren. The grandmothers considered recreational programs during and after school hours extremely necessary. Four of the grandmothers thought that special gym programs for students with

exceptionalities should be part of the curriculum. Also, students with exceptionalities needed earlier release time from class if they operated a motorized wheelchair or scooter.

Edwards and Mumford (2005) maintained that grandchildren may need intervention to ensure appropriate educational functioning. For instance, the school professionals can provide educational and emotional support to both the grandparents and the grandchildren. The authors believed these “intervention services should be developed and implemented concurrently with other social service agencies” (Edwards & Mumford, 2005, p. 26).

The data collected from Edward’s (1998a) dissertation resulted in the development of a proposed intervention program for grandfamilies entitled the Grandfamily School Support Network (GSSN). This project was developed by Edwards to be a structured academic and social support system for grandfamilies. The focal point of the GSSN was to provide grandfamilies with a method to ease stress and improve the students’ school performance. Edwards (1998b) asserted that children raised by their grandparents comprised between 7% and 10% of the school population in low socioeconomic status schools. The author maintained that these same children accounted for 90% of the school personnel time when it came to managing academic and behavioral problems. Edwards (1998a) asserted that school personnel may be able to ease the stress by implementing a GSSN program in their schools.

The GSSN project was the only one of its type that attempted to assist grandkin in the school setting on the elementary level. As grandkin were enrolled in the GSSN, they were provided with a peer partner (classmate) and a teacher or paraprofessional who served as a surrogate parent on site. Also, the school counselor and school psychologist formed several brief counseling groups. The grandkin and grandparents’ groups were held separately to help grandfamilies adjust to their situation.

The sessions with the grandparents helped to create support groups. During these sessions, “grandparents were taught to utilize other family members, friends, or members of their church to help with homework, transportation, baby-sitting, and to serve as a general backup for themselves” (Edwards, 1998b, p. 179). The GSSN also taught grandparents how to carefully supervise their grandchildren. If the grandparents were unable to provide proper supervision, “they were encouraged to use their backup helpers and support network for supervision in order to decrease current and future antisocial behavior” (Edwards, 1998b, p. 179).

When the GSSN was in place, the reports from teachers, grandparents, and grandkin suggested that there was a reduction of stress in the grandfamily. The school administrators reported a 20% decline in behavioral problem referrals among students from grandfamilies. This decline was compared with the first and second quarters of the school year when the GSSN was not in place to the third and fourth quarters with the GSSN in place. The GSSN was designed to improve the academic functioning of students of grandfamilies (Edwards, 1998b).

“Schools can be major players in helping grandparents adjust to new roles and become involved in their grandchildren’s education” (Brintnall-Peterson, 1999, p. 1). According to Brintnall-Peterson (1999), children who are raised by grandparents are statistically at higher risk for more emotional and developmental disorders than are children raised by two parents. Furthermore, they are more likely to be average or below-average students. The grandchildren may experience feelings of rejection and abandonment, while the grandparents may be at higher risk of feeling stressed by caregiving and financial obligations (Brintnall-Peterson, 1999).

Mary Brintnall-Peterson (1999), University of Wisconsin-Extension specialist on aging, asserted that many school districts are beginning to work more closely with grandparents to support them in raising their grandchildren. Brintnall-Peterson explained, “Schools can do many

things to help grandchildren and provide resources to grandparents who are raising grandkids” (p. 1). Brintnall-Peterson asserted, “Schools can recognize that many grandchildren are in transitional arrangements and will need help adjusting to new routines in a new home and a new school. They may need help in making friends, or could benefit from a social group for kids being raised by grandparents (p. 1).”

Brintnall-Peterson (1999) cited a study that had been conducted at the Gerontology Institute and Center College of Public and Community Service at University of Massachusetts. The study investigated what grandparents raising grandchildren say they need from their schools and communities. The study found that the need for respite care was the most frequently cited need of grandparents involved in the survey. Other needs reported from the survey included receiving information from the schools on children’s health and learning problems along with sensitivity training for teachers on grandparent caregivers’ needs and concerns.

Rogers and Henkin (2000) discussed a Philadelphia-based intervention program for children being raised by grandparents. In 1995, Temple University’s Center for Intergenerational Learning in Philadelphia received a federal grant from the Center for Substance Abuse Prevention to implement a drug abuse prevention program for children in kinship care. The program was titled Grandma’s Kid. The primary population for the Grandma’s Kid project was elementary children not living with their biological parent, often because of parent abandonment, substance abuse, illness, incarceration, neglect and/or abuse. The children ranged in age from seven to 12 years old and attended one of four Philadelphia public elementary schools. The schools were located in low-income areas and served predominantly African American children.

Grandma's Kid had three major components: (a) student support, (b) caregiver support, and (c) school support. The student support component was comprised of before-or after-school programs, life skills/drug education, academic tutoring, group counseling, and summer programs. The caregiver support included resource and referrals, and workshops and special events. The school support component consisted of providing feedback to teachers and teachers receiving invitations to family events. Because school personnel rarely had the opportunity to socialize with the caregivers in a nonthreatening environment, the program sponsored luncheons and trips. These activities provided the opportunity for school personnel to talk casually with caregivers. Most of the events were held during school time; therefore, usually the counselors and school principals attended.

A descriptive study performed at the University of Massachusetts-Boston of grandparents raising grandchildren was reviewed by Silverstein and Vehvilainen (2000). The purpose of the study was to understand the characteristics and needs of grandparents raising elementary school-age children in Massachusetts. The authors interviewed 134 grandparents with an average age of 60, which was slightly higher than the ages, 55 to 57, reported by Chalfie (1994). Also, most of the grandparents were White (74%) and only 20% had completed four or more years of college. The sample of grandparents in this study was more educated than the sample in Chalfie's (1994) study. However, in contrast to Chalfie, the findings from Silverstein and Vehvilainen (2000) revealed that most of the grandparents were involved with the school of their grandchildren. The areas investigated were overall satisfaction with schools, grandchild's adjustment and use of counseling services, help with homework, contact with teachers, use of before-school or after-school programs and participation in school activities (Silverstein & Vehvilainen, 2000).

This study revealed that most of the grandparents played an active role in the education of their grandchildren and reported a positive experience with the schools of the grandchildren. Also, most of the grandparents reported they were involved with school activities, attended school events (78%) and had contact with the children's teachers (84%). "Moreover, 79% of the grandparents did help with homework, while 77% felt comfortable with this task. Math homework was considered to be the most difficult subject for the grandparents in assisting the children (Silverstein & Vehvilainen, 2000, p. 277). Eighty-six percent of the grandparents who reported that they helped with homework mentioned having difficulties with assisting with math homework. Language arts (32%) and science (27%) were considered other difficult subjects for the grandparents to assist with homework.

School personnel often are the first to become aware of a child's behavior, health, and learning problems; for that reason, they should be aware of the child's family situation (Silverstein & Vehvilainen, 2000). They asserted teachers, school counselors, and school nurses can provide immense support to the grandparent and child. Grandparents can be informed of federal and state programs and services for which they may be eligible from school assessments and referrals. Also, grandparents could receive assistance with workshops on curriculum, such as math, and help with homework strategies. The authors mentioned the Kinship Family Resource Center, a school-based initiative in Fitchburg, Massachusetts. This school-based initiative was headed by the school counselor who had taken the lead in providing support to grandparent caregivers and their grandchildren. In addition, the school counselor acted as a liaison with community service providers. Because of this initiative, grandparent caregivers were identified within the school system; as a result, targeted support had been developed for them. "For example, a school counselor can provide referrals for health and social services, such

as counseling to help cope with emotional and psychological problems” (Silverstein & Vehvilainen, 2000, p. 279). The authors affirmed that a further study would help to better define and strengthen the nature of school relationships with grandparents and their role in their grandchildren’s lives and schools. The authors contended that encouraging grandparent involvement in the educational system would serve to benefit not only the grandparents but the schools, communities, and children served by the school system

Glass and Huneycutt (2002a) discussed that while the numbers of grandparents raising grandchildren has risen significantly, individuals and agencies have not been able to adapt with quick responses. The authors stated that the responses needed are not all easy nor are they limited to any one issue. However, one issue discussed pertained to educational concerns. The authors asserted that some grandparents do not feel capable to assist their grandchildren in today’s public schools. Subsequently, one educational need is for tutors. Grandparents could use tutors to assist their grandchildren with their homework. These tutors and their actual training could be provided by local churches, schools, and civic organizations (Glass & Huneycutt, 2002a). Furthermore, the authors contend that issues associated with grandparent-maintained households as a family configuration should be a topic included in all areas of family studies for social work, sociology, psychology, counselor, clergy and education majors. In addition, continuing education on this topic could be offered to school personnel, persons in departments of social service and mental health, counselors who deal with domestic issues, and clergy (Glass & Huneycutt, 2002a). According to Glass and Huneycutt (2002a), nearly one-third of grandchildren living in these homes were being raised by grandparents who did not have a high school diploma (Glass & Huneycutt, 2002a). It is important to note that since the time of this article, many schools have incorporated before- and after-school tutoring programs; some

churches now provide after-school tutoring services as well. What is important to consider is whether or not grandparents are receiving this information, and if so, do the grandparents fully understand what support tutoring can provide for the grandchild.

Perhaps, if grandchildren would take advantage of the various clubs and services offered by schools, they may be able to build a support system within their own school. Baker, Dilly, Aupperlee, and Patil (2003) contended that schools influence students' development because their structures and practices to some extent socialize students to the mores, values, and expectations of their community. Baker et al. (2003) conducted research regarding students' school satisfaction. Their findings proposed teaching styles that were relational and nurturing correlate with improved quality of life and cognitive outcomes for students considered at risk. Consequently, children being raised by grandparents and also experiencing negative life events, such as separation from parents, which may lead to attachment issues, can benefit from the relational focus of some school satisfaction approaches. The relational and nurturing approach can assist school staff in helping grandchildren internalize social values and become committed to their schools and communities. The grandchildren's commitment to school and community will enable them to enjoy their school experience and function better academically (Baker et al., 2003).

Similarly, a study by Certo, Cauley, and Chafin (2003) found that in order to promote a sense of belonging and engagement within the school setting amongst the students, the school personnel should attend to the quality of student learning and relationships. They maintained that students need to feel that they belong to their school community and are accepted and respected by peers and teachers alike. When students experience this sense of belonging, they have a more positive attitude toward school, teachers, and peers. Additionally, the students



participate more in school activities and are more apt to socially interact positively with peers and adults. Because of this positive interaction, students who have a sense of belonging also demonstrate higher academic engagement and achievement. “Conversely, students who feel rejected or alienated display behavioral problems, lower interest, and lower achievement in school, and frequently drop out” (Certo et al., 2003, p.706).

While school personnel and the public often believe that students display low levels of school engagement because of factors intrinsic to the child or home environment, Certo et al. (2003) suggest that research challenges that perspective. They contend that literature supports the fact that the school directly contributes to the students’ levels of engagement “how students feel about school, their classes, and their relationships with teachers and peers strongly influences their sense of belonging and acceptance in school and their academic engagement” (p.708-709). These findings indicate that by promoting a sense of belonging and engagement within the school environment, a support system is created for at-risk students (i.e., grandparents raising grandchildren).

Researchers Strozier, McGrew, Krisman, and Smith (2005) offered a school-based intervention for kinship caregivers and the children in their care. The researchers underlined outcomes from the Kinship Care Connection (KCC), an innovative school-based intervention designed to increase children’s self esteem and to mediate kin caregiver burdens. The researchers conveyed that whereas child welfare has initiated efforts in kinship care practice, policy, and research, there is a growing need for the school system to provide support to kinship care families. The researchers asserted that school systems must increase their knowledge about the special needs of kinship care families to ensure that children are receiving adequate support to meet school outcomes. The researchers advocated for the school system’s intervention to

include support groups for the grandparents and counseling, as well as tutoring, mentoring, and counseling for the grandchildren.

According to Strozier et al. (2005), grandparent caregivers often find that one of the most difficult areas for them in raising grandchildren is in helping their grandchildren become more successful in school. The grandparents themselves do not feel skillful in working with the schools. It was noted that children in kinship care experienced more borderline delinquent behavior and more severe attention problems than those children in the general population. It was stated that teachers and other professionals who work with kinship care families should be aware of special emotional and behavioral issues and should develop strategies to help children in kinship care overcome these barriers (Strozier et al., 2005).

The results of the study demonstrated the effectiveness of school-based services that not only increased caregivers' sense of self-efficacy in relation to dealing with their children's school-related issues and needs, but also provided a valuable source of self-esteem for the children themselves. The findings also indicated the value of support groups. The study called attention to the importance of initiating and evaluating a kinship care program based in the school system (Strozier et al., 2005). As well, McGowen, Ladd, and Strom (2006) suggested that schools should provide courses for grandmothers about child norms, discipline problems, resources available, and expectations of students and families. The authors believe that "schools should cultivate teacher awareness of the unique problems grandmothers face raising grandchildren and indicate ways to collaborate with them" (McGowen et al., 2006, p. 682).

Frequently the reasons grandparents assume caregiving responsibilities of their grandchildren are negative; nevertheless, the placement with their grandparents increases the children's chances of experiencing greater life success than if they were to remain with

biological parents who are pathological. Therefore, grandparents who assume the parental role can positively affect the emotional well-being and educational functioning of their grandchildren. Conversely, due to the distress that grandparent's experience, they may also adversely affect the emotional well being and educational functioning of their grandchildren (Edwards & Sweeney, 2007).

As grandparents take on the new role of caring for contemporary children, they must contend with the modern children's interests in computers, video games, and various other similar activities. In addition, grandparents may have difficulty understanding the recent requirements of schools and current academic subjects. Moreover, grandparents may not be able to offer their grandchildren substantial assistance with homework and other school-related activities. Custodial grandparents are attachment figures because they provide physical and emotional care. Grandparents raising grandchildren should serve as a secure base. Grandparents can be taught to provide sensitive care and appropriate school assistance to their grandchildren (Edwards & Sweeney, 2007).

The literature is revealing that schools should take on a more active role in providing grandparents with skills and tools for raising grandchildren. Edwards and Sweeny (2007) wrote that schools are established in all communities and play a central role in the lives of not only students, but most community members. In view of the fact that children spend approximately one-third of their day in school, interventions developed for children cared for by grandparents should include schools as an important context for these interventions. The authors believe a proactive intervention approach should be recommended for all children cared for by their grandparents who are at risk for school failure. Likewise, preventative intervention assistance for grandchildren who are considered to be currently functioning well should also be provided.

Edwards and Sweeney (2007) commented that in view of the increasing number of children being cared for by their grandparents, this social phenomenon has implications for schools.

Edwards and Sweeney (2007) reviewed an intervention program designed to help lessen stress and provide social and academic support systems for grandparents and grandchildren. Within this intervention program, once students began receiving services, they continued to receive services until the end of the school year. The grandparents were offered brief counseling groups to help them adjust to their situation of custodial parenting. The success of the program was based on teaching the grandparents appropriate and contemporary parenting skills. In addition, grandparents were encouraged to utilize other family members, friends, or members of their faith-based organizations to assist with homework, transportation, and to serve as helpful resources. Grandparents could use family members and faith-based organizations as daycare for the grandchildren. This would provide a respite period for the grandparents.

Furthermore, Edwards and Sweeney (2007) articulated that few studies have been conducted that focus exclusively on the children being raised by their grandparents. Most of the studies conducted with children living away from their biological parents have involved public care placements or placements with relatives other than grandparents exclusively. The authors noted that there are many children in the care of their grandparents who are functioning quite well at home and at school. The authors further stated that it is important to note that children having difficulty functioning in school may not represent the result of being cared for by grandparents. Perhaps their difficulty may reveal the events leading to grandparents being required to assume the surrogate-parenting role. “Nonetheless, in light of this growing social phenomenon and the difficulties experienced by the children and some grandparents, school

professionals will need to respond to the unique needs of pupils cared for in these families” (Edwards & Sweeney, 2007, p. 183).

As children in grandparent-headed households approach adolescence, a new set of concerns develop. In addition to the children adjusting to physical changes in their bodies, they are also making a transition to a new school, either middle school or high school. According to Cauley and Jovanovich (2006), making a transition to a new school causes anxiety in students and challenges the coping skills of many adolescents, in particular at-risk students. The authors assert “schools can prepare students for the transitions by becoming aware of students’ needs and by taking a proactive role in addressing those needs” (p. 15). For example, the authors suggested that the sending school can communicate about each student’s subject area achievement, special needs, and behavior problems. In addition to that information, a student’s particular situation, such as being a member of a grandparent-headed household could be shared with the receiving school, especially if the student has exhibited at-risk academic and behavioral concerns.

Researcher Pittman (2007) found that young adolescents being reared by custodial grandmothers displayed greater behavior problems over time than their peers co-residing with their grandmothers or living in multigenerational households. The researcher found that grandmothers rearing younger children and providing them with loving and supportive parenting was adequate. However, the findings reported that young adolescents presented more externalizing behaviors than the younger children. The researcher suggested that perhaps the older children were considering their family situation and beginning to question why their biological parents were not in their lives. The findings suggested the need to provide extra support to custodial grandparents as well as counseling to the young adolescents. The counseling for the young adolescents would address the underlying emotions associated with the

externalizing behaviors, which were found among young adolescents living with custodial grandmothers. Therefore, the researcher advises the development of prevention programs targeting custodial grandparents who were now raising young adolescents.

Weinberger (2009) writes that developing mentoring programs can be one approach to assisting children of relative caregivers. She believes that formal youth mentoring programs will help children that do not have the skills to surround themselves with mentors on their own. Weinberger (2009) contends that extensive research has been conducted regarding the benefits of mentoring. The research indicates that youth who are mentored improve their academic performance and school attendance. Furthermore, “they improve attitudes, peer relationships, self-esteem, and they stay away from risky behavior” (Weinberger, 2009, p.347). The author encourages caregivers to inquire about effective mentoring programs in their communities through local volunteer programs, United Way, Boys and Girls Club, Big Brothers Big Sisters agencies, and school districts. Hence, developing a mentoring program to align grandchildren with mentors can be one method to assist these children as they approach the adolescent stage of development.

Cox (2008) contends that the most challenging stage of development for both the youth and the grandparents or other relatives raising them is the period of adolescence. There are many reasons attributed to this challenging period. First, young people are more interested in the outside world. Secondly, they are disinclined to talk to their grandparents but will spend countless hours on the telephone or the Internet with their friends. Thirdly, most of the time, they are already on an emotional roller coaster and having difficulty managing their impulses or behavior. In addition to these challenges, grandparents are concerned that the children may turn out like their parents. Therefore, the grandparents are susceptible to becoming too

demanding and strict regarding rules and behaviors. The grandchildren's adolescence period can be a difficult stage of life for the grandparents because they may be going through their own life changes. Cox (2008) believes the challenge becomes maintaining a "stable home life while showing respect for young people and allowing them to have some freedom with their peers" (p. 15). According to Cox (2008), the period of adolescence is the time when grandparents find themselves struggling with the increased demands and moods of their grandchildren. It is during this period when a grandparent may ask the question: Does anyone really understand what I am going through while raising my grandchild? This question should have school professionals and other agencies asking the question: What type of supportive services would grandparents raising grandchildren who are in middle school and high school want or need from our organization? While organizations are determining what programs should be implemented to assist grandparents raising grandchildren, such as mentoring programs or grandparent councils, this study will ask grandparents directly what is it that they need the school system to provide to their grandfamily in order to ensure that the grandchild will be successful in school.

### **Summary**

As grandparents take on this role of parenting a second time, they are requesting assistance from schools. The grandchildren have many needs because of their previous living situation before coming to live with their grandparents. Research is revealing that grandparents are requesting that schools provide tutorial services and recreational programs during and after school hours. This request for assistance from grandparents should pique the interest of school personnel. School professionals should want to examine this population within their school and school district to determine what resources can be incorporated to support grandparents raising grandchildren.

Research about the functioning of children raised by their grandparents has revealed mixed emotions. Some researchers show these children functioning adequately in schools and in their social environment when compared to their peers. In addition, other researchers indicated that grandchildren experienced few differences in health and academic performance when they were compared to children raised in traditional two-parent families. Other studies showed that grandchildren and children in kinship care experienced high rates of respiratory ailments and behavioral problems in schools. It was determined that children reared by their grandparents experience significant school-related problems. Children raised by grandparents often exhibited considerable behavioral and emotional problems. These problems often occupy excessive amounts of the grandparents' time, as well as the teachers' time. In addition, children raised by grandparents encounter problems with psychological development, adjustment, and educational functioning. The grandparents who raise their grandchildren influence the development of these children in the social and educational environments. Intervention and strategies were recommended that could be incorporated by school personnel to address school-related problems. It is critical that school personnel recognize this special population and devise appropriate programs to address the needs of these children and their grandparents. Therefore, this study will improve upon existing literature by asking grandparents directly what it is that the school district and school personnel can provide to both the grandparents and grandchildren. This question will give grandparents a voice that represents their concerns. Therefore, the research questions will focus on the school services that are offered, utilized, and needed by grandparents and grandchildren. The research questions will allow data to be collected that will provide information to school personnel so that they may assist grandparents with the educational success of the grandchildren. As the number of grandparents raising their



grandchildren continues to grow, it is imperative for the educational community to design programs to assist this at-risk population. This new family structure can be difficult for both the grandchild and grandparent. Therefore, it is crucial for schools to recognize and provide support to grandparent-headed households.

## **CHAPTER 3**

### **METHODOLOGY**

#### **Introduction**

This quantitative study examined the role the public school system can play in providing assistance to the grandchildren being raised by their grandparents. The literature suggests that the needs of grandchildren transitioning from young adolescents to teenagers should be explored.

#### **Research Questions**

1. What are the differences in the awareness of services being offered to middle school and high school students who are being raised by grandparents?
2. What are the differences in public school services being utilized by middle school and high school grandparents and grandchildren?

One sub-research question will also be addressed:

- Are there differences in services being utilized by middle school and high school grandchildren who are and are not failing at least one core subject?
3. Are there differences in the perceptions of grandparents of middle school and high school students of needed services in the public schools?

This chapter will discuss the design of the study, sampling procedure, instrumentation, data collection, institutional review board, delimitations, and limitations.

#### **Design**

The study used a nonexperimental research method design to examine the type of services from school personnel that would be helpful to grandparents raising grandchildren during middle school and high school. I developed a survey based on concerns and issues that

were cited in the literature. The questions addressed possible interventions or needs of grandparents raising grandchildren identified in studies and/or articles by such researchers as Dubowitz and Sawyer (1994), Strom and Strom (1995), Rothenberg (1996), Edwards (1998a, 2003), Rogers and Henkin (2000), Glass and Huneycutt (2002), Urrutia (2002), Racicot (2003), Edwards and Mumford (2005), Salzer (2005), Edwards and Sweeney (2007), and Mauderer (2008). The survey included 43 items on a categorical scale and seven open-ended questions to expand on the quantitative data and obtain additional information from grandparents regarding the educational needs of their grandchildren.

### **Sample and Site**

The study involved a convenience sample comprised of grandparents with children in four high schools and five middle schools in a southern urban school district. The sample was defined as grandparents who were primarily responsible for raising their grandchildren. Participants for the study were recruited via fliers sent home with each student at the participating schools. Interested grandparents contacted me to schedule a visit. There were an additional 19 grandparents who were recruited for the field test. Participants in the field study were recruited at a community center and by word of mouth. All participants received a \$5.00 Walmart Gift Card.

This study had an  $N=56$  (MS 27, HS 29). There was one grandparent who decided she no longer wanted to participate in the study after she read the Participant Information and Consent Form documents. This participant still received the \$5.00 Walmart Gift Card. Other grandparents ( $n=7$ ) expressed an interest but ultimately could not find an agreeable time or place to meet.

## **Field Test**

The survey was field tested to help assess the quality of the questions, survey format, and to establish reliability. The survey was administered to the 11 grandfamilies at the community center on a Thursday at their regular morning meeting. The survey was also administered to eight other grandparents who heard about the study by word of mouth. The first group of 19 participants provided feedback for the survey related to wording of directions, statements, and questions. Of the 19 participants, I read the survey to six grandparents and recorded responses for four grandparents. The changes made to the survey included rewriting questions and directions and adding response option categories.

The revised draft of the survey was administered two weeks later in the homes of 12 grandmothers: nine of the original grandmothers and three new grandmothers, who also had heard about the field test by word of mouth. The revised survey was completed in 30-45 minutes. Two weeks later, I visited each grandfamily's home for the second administration of the revised draft to establish the survey's test-retest reliability. The test-retest reliability requires participants to complete the survey twice about two weeks apart. "The more participants' scores on the first measurement correspond to their scores on the second measurement, the higher the test-retest coefficient" (Mitchell & Jolley, 2004, p.97). The test-retest reliability coefficients for all survey items were above .70, with ranges between .741-1.00. Subsequently, nine of these grandparents actually completed the survey three times. A total of 22 grandparents participated in the pretest, with 12 of the 22 completing the test-retest portion of the pretest. I read the survey and recorded responses for four of the grandparents for the test-retest.

Additionally, the field test ensured validity because it helped to improve the questions, format, response scales, and established the face validity of the instrument (McMillan, 2004).

The field test also assisted me in knowing approximately how long it would take to complete the survey. Most of all a final version of the survey reflected changes made to it by committee members, which also established validity.

The final version of the survey required the participation of only one grandparent per household and it asked that grandparent to focus on only one grandchild when completing the survey. If the grandparent had grandchildren in both middle school and high school, the grandparent was asked to choose only one grandchild for the focus of the survey. As shown in Table 1, the survey consisted of six categorical scale assessment sections (for a total of 43 items), 13 demographic questions, eight open-ended questions, and eight closed questions. The survey opened with five closed questions in the first portion of the Academic Section to gather information about the grandchildren's academic performance relevant to their core subjects (English, math, history, science). The questions pertained to concerns such as whether or not the grandchildren had failing grades on their report card, which core subject the grandchildren had failed, was homework completed by the grandchildren, and whether or not the grandchildren had Individualized Education Plans (IEP).

In Section IV, which was the Counseling Section, the grandparents were asked to provide additional topics for support groups and individual counseling that they would like to see offered in the schools (4 open questions). Lastly, the four open-ended questions at the end of the survey allowed the participants to provide additional information and will provide data for the qualitative narrative. See Appendix F for the survey.

Table 1

*Survey Sections*

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Section I - Academic	6 items with 5 closed questions
Section II - Discipline	5 items with 1 closed question
Section III – Social Activities	3 items
Section IV – Counseling Services	14 items with 4 open-ended sections
Section V- Support Services	8 items
Section VI - Personal, Financial, and Legal Issues for Outside Referrals	7 items
Questions and Reflections	3 Open-ended Questions with 1 closed
Demographic Questions	13 items with 1 open and 1 closed question

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**Data Collection and Procedures**

The survey was administered to 55 grandparents in a paper/pencil format and one grandparent online through Survey Monkey. All paper/pencil surveys were entered into Survey Monkey so that all of the data could be downloaded directly into Statistical Package for Social Sciences (SPSS), version 19.0.0.

The data collection occurred between the end of April 2011 to the end of September 2011 (5 months). The only avenue of recruitment for the final survey was a flier sent home with all students in each school; grandparents had to decide if they were interested and contact the investigator. Grandparents who had enrolled their grandchild in school, had full-time care of

their grandchild, and expressed an interest, were allowed to participate in the study. See Appendix C for the Recruitment Flier.

To aid me in collecting data, persons whose jobs involved working with the public, were trained by me to administer the surveys (See Appendix D) and signed a confidentiality statement (See Appendix B). However, when appointments were scheduled with the grandparents to administer the survey, I was the only person permitted to administer the survey.

Of the 56 participants, only one completed the survey online through SurveyMonkey. As aforementioned, the other grandparents requested that I meet them myself to have them sign the consent form and administer the survey. The paper survey was administered to 55 participants at either their home ( $n = 52$ ) or the local library ( $n = 3$ ). Because I was not always notified by the participant that there was now a schedule conflict or that they had decided not to participate, contacting the participants just prior to their appointment times was necessary.

Each participant completed the Participant Information and Consent Form documents (See Appendix E) before the survey was administered. Twelve of the grandparents requested that I read the consent documents and survey aloud and record their responses. Once the survey was completed, the survey was put into a 9x12 envelope and sealed and the consent form was put into another 9x12 envelope and sealed. Grandparents generally took 30-40 minutes to complete the survey, some lasted as long as 90 minutes, especially when the participants needed someone to just talk with and enjoy a visit.

### **Institutional Review Board**

This study was approved by the Virginia Commonwealth University Institutional Review Board (IRB), which was consistent with the rules and regulations of the institution. The study

was also approved by the Office of Research and Evaluation within the participating school district.

### **Delimitations**

The delimitation of this study was including only grandparents of middle and high school students from one school district. The participants were from 4 of the 5 comprehensive high schools and 5 of the 8 middle schools selected from a southern urban school system.

Grandparents with students in the three specialty schools in the district were not selected for participation in the study.

### **Limitations**

The limitation in this study was that the grandfamilies were not randomly selected. According to McMillan and Schumacher (2006), a threat to validity is possible when the sample is not randomly selected. The study was also limited to urban school divisions and may not be generalizable to suburban or rural school divisions. Other limitations could include the social economic status (SES) and ethnicity. Additionally, the study was limited because I did not inquire about the services that were offered in the participating schools. The study was further limited because the grandfamilies that participated may not have provided truthful information.



## **CHAPTER 4**

### **FINDINGS**

#### **Brief Overview of Study Purpose and Goal**

This study examined the school experiences of middle school and high school children being raised by their grandparents to collect information that could be shared with school personnel to better meet the needs of this population. Information was gathered about grandparents' awareness of the services being offered in the public schools, the services utilized by their grandchild, and the services that were needed by the grandchildren. Also, study determined whether there were statistically significant differences between middle school and high school grandparents' perceptions of the services being offered, utilized, and needed in public schools.

#### **Participant's Demographics**

The grandparent participants for this study were recruited from middle and high schools within one urban school district. Fifty-four females and two males ranged in age from 46-85, with 52% of the grandparents in the 56-65 age range. The participants were primarily African American grandmothers, with two white grandmothers, one African American/Hispanic grandmother, two African American/White grandmothers, and two African American grandfathers. The marital status for the grandparents included 11% single, 41% married, 32% divorced, 16% widow. The educational status consisted mostly of grandparents who had "some high school" (32%) or "high school graduate (34%). The demographics of the grandparent participants were consistent with the national and state demographics for grandparents raising grandchildren in term of age (56-65) and gender (mostly female). See Tables 2 through 5.

Table 2

*Age of Grandparents in Years*

	46-55 years	56-65 years	66-75 years	76-85 years	<i>n</i>
MS	5	11	10	1	27
HS	4	18	6	1	29
Total	9 (16%)	29 (52%)	16 (29%)	2 (3%)	56

Table 3

*Grandparent's Racial/Ethnicity Group*

	Black or African American	White	African American/ Hispanic	African American/ White	<i>n</i>
MS	24	1		2	27
HS	27	1	1		29
Total	51	2	1	2	56

Table 4

*Grandparent's Marital Status*

	Single (never married)	Married	Divorced	Widow	Widower	<i>n</i>
MS	4	10	9	4	0	27
HS	2	13	9	5	0	29
Total	6 (11%)	23 (41%)	18 (32%)	9 (16%)	0	56

Table 5

*Grandparent's Education*

	Less than high school	Some high school	High school graduate	At least 2 years of college, no degree	Associate degree	College graduate	Graduate School	Post graduate school	<i>n</i>
MS	0	10	9	1	1	5	1	0	27
HS	1	8	10	6	2	2	0	0	29
Total	1 (2%)	18 (32%)	19 (34%)	7 (13%)	3 (5%)	7 (13%)	1 (2%)	0	56

The grandparents reported information for 27 middle school (MS) grandchildren and 29 high school (HS) grandchildren. The majority of the grandparents were the primary caregiver (MS 85%, HS 100%) and the grandchildren had been living with the grandparents for an average of 12 years. Thirty-three percent of the MS grandchildren and 38% of the HS grandchildren had been living with both grandparents. More MS grandparents (68%) than HS grandparents (27%) reported that their spouse was a step-grandparent. For some of the grandfamilies, at least one of the grandchild's parents lived in the household (MS 41%, HS 24%).

A total of 28 male grandchildren and 28 female grandchildren, consisting of grades 6-12, ranged in age from 11-19 were reported by the grandparents. The average MS grandchild's age was 12 and the average HS grandchild's age was 15. There were 8 grandchildren who were 18 years of age and 4 grandchildren who were 19 years of age. Only 30% of the MS grandparents and 10% of the HS grandparents reported that the school had assigned a mentor or an in-school agency counselor for their grandchildren. The grandchildren were primarily African American,

with one African American/Hispanic male, one white male, one African American/White male, and two African American/White females.

The final open-ended question pertained to the reasons the grandparents were raising their grandchildren. Fifty-three of the 56 grandparents responded. The reasons varied from the parents' use of drugs, death, abandonment, incarceration, financial issues to living outside the country. Table 6 lists the reasons the grandparents were raising their grandchildren. See Appendix A for direct quotes.

Table 6

*Reasons Grandparents Were Raising Grandchildren*

Topics	n
Divorce	1
Desertion	8
Drugs	14
Death	8
Detention	3
Duties in the Military	1
Disease	1
Family Support	12

**Data Analysis**

The statistical analysis of the survey and the creation of the database were conducted using Statistical Package for the Social Sciences (SPSS), version 19.0.0, a software program commonly used by behavioral and social science researchers. This software program was used for the analysis of the qualitative data as well. The software program notated all the written responses from the open-ended questions. The probability level for this study was set at  $\alpha = 0.05$ .

Because nominal data was obtained from the survey questions, chi-square tests were conducted to compare the two groups, middle school and high school. If the number of responses was less than five in each category, the chi-square test would be corrected with a procedure called the Fisher's exact test, which is used when a small number of observations are observed. The descriptive statistics such as the mean, standard deviations, frequencies, and percents, when applicable, were computed for the closed questions.

The data for each open-ended question was organized and coded. The coding process identified words, themes, concepts, or perhaps phrases within the data, which allowed for underlying patterns to be identified and then analyzed. I reduced that information into themes and categories, which provided the data to summarize the findings in a narrative form. I analyzed the information for the open-ended questions according to the steps identified by Creswell (1994, p.155). In addition, a reader reviewed the comments and statements from the open-ended questions. The reader is a high school assistant principal and has a doctorate degree in Educational Leadership. I used a qualitative procedure from Creswell (1994) to gather information from the three open-ended questions:

1. One question was analyzed first.
2. Responses for this question were read through and a list of all topics was compiled. Like topics were grouped together into columns that would be regarded as major topics, unique topics, and leftovers.
3. Abbreviations were assigned to the topics as codes and the codes were written next to the text that was similar. This initial format for organizing the data was used to determine if new categories or codes emerged.

4. The most descriptive wording for the topics were selected and then turned into categories.
5. Categories were reduced by grouping topics that related to each other

Therefore, each response to each question was assigned to a category to determine themes for that question. The major categories and themes for each question were identified and a summary of the information was provided.

**Research Question #1:** What are the differences in the awareness of services being offered to middle school and high school students who are being raised by grandparents? The chi-square test was used to determine if the two groups, middle school grandparents and high school grandparents were differentially aware of the academic support services (pull-out class for tutoring programs during the day, study skills classes, and tutoring after school) and the Social Activities (field trips for students, clubs that meet after school, and special activities) that were offered at their grandchild's school.

With regard to academic services (Table 7), only the chi square for the variable "pull out classes for tutoring programs during the school day" was statistically significant,  $\chi^2(2, N=56) = 6.088, p = .048$ . It appears that more grandparents of MS students (56%) than HS students (24%) believed that "pull out classes for tutoring programs during the school day," was available in the schools. For the variable "study skills classes," both groups (MS 44%, HS 59%) reported that they did not know whether the schools offered the service. However, for the variable "tutoring after school," both groups (MS 74%, HS 86%) reported high percentages for this service being offered at their schools.

Table 7

*Grandchild's School Offers Academic Support*

Academic Support	Yes		No		I do not know		<i>p</i>
	MS	HS	MS	HS	MS	HS	
Pull-out Classes	55.6% (15)	24.1% (7)	18.5% (5)	24.1% (7)	25.9% (7)	51.7% (15)	.048
Study Skill Classes	37.0% (10)	10.3% (3)	18.5% (5)	31.0% (9)	44.4% (12)	58.6% (17)	.058
Tutoring After School	74.1% (20)	86.2% (25)	11.1% (3)	6.9% (2)	14.8% (4)	6.9% (2)	.509

Note. Cell size is in parentheses.

There was no statistically significant difference in the awareness of the frequency of social activities reported by middle school and high school grandparents. For the variable “field trip,” approximately 57% of both groups indicated that field trips were offered “more than twice a year” and approximately 22% of both groups reported their grandchildren did not attend any of the field trips. For the variable “clubs that meet after school,” 63% of the middle school grandparents indicated that their grandchildren did not participate in clubs that met after school, while grandparents reported that 38% of the high school grandchildren did not participate. For the variable “special activities at school” 62% of the high school grandparents and 52% of the middle school grandparents reported that special activities were held “1-2 times a semester.”

**Research Question #2:** What are the differences in public school services being utilized by middle school and high school grandparents and grandchildren? The chi-square test was used to examine the responses for each group (middle and high) on each of the

variables from the Academic Section and the Discipline Section of the survey. The Academic Section focused on the services the grandparents indicated that their grandchildren utilized at school (pull-out class for tutoring programs during the day, study skills classes, and tutoring after school), and the Discipline Section spotlighted the support the grandchild and/or grandparent received in the area of discipline.

Table 8

*Academic Services Being Utilized by Grandchildren*

	<u>Yes</u>		<u>No</u>		<u>I do not know</u>		<i>p</i>
	MS	HS	MS	HS	MS	HS	
Pull-out Classes	44.4% (12)	13.8% (4)	37.0% (10)	75.9% (22)	18.5% (5)	10.3% (3)	.011
Study Skill Classes	22.2% (6)	3.4% (1)	40.7% (11)	86.2% (25)	37.0% (10)	10.3% (3)	.002
Tutoring After School	55.6% (15)	37.9% (11)	33.3% (9)	62.1% (18)	11.1% (3)	.0% (0)	.038

Note. Cell size is in parentheses.

In Table 8 there was a statistically significant difference ( $p < .05$ ) in each of the academic supports that were utilized by middle and high school grandchildren. For each variable, “pull-out class for tutoring programs during the day,”  $\chi^2(2, N=56) = 8.940, p = .011$ ; “study skills classes,”  $\chi^2(2, N=56) = 12.730, p = .002$ ; and “tutoring after school,”  $\chi^2(2, N=56) = 6.552, p = .038$ , the MS grandparents reported a higher percentage of utilization of the academic supports by the MS grandchildren than what was reported by grandparents of



the HS grandchildren. About twice the number of HS grandchildren did not utilize the services as of the MS grandchildren.

The sub-research question considered whether there are differences in services being utilized by MS and HS grandchildren who are and are not failing core subjects in the public schools. Over half of the grandchildren had received a failing grade “F” on their last report card in at least one core subjects (English, math, history, science) during the 2010-2011 school year (MS 52%, HS 57%). The data for each core subject was as indicated: English (MS 36%, HS 64%), math (MS 44%, HS 56%), history (MS 38%, HS 62%), and science (MS 29%, HS 71%). In addition, 44% of MS and 59% of HS grandparents indicated that their grandchildren failed to get homework done at least once a week or more. The percentages were exactly the same for both MS and HS in English (50%) and history (50%). Conversely, the data the for core subjects math and science were very different. For math, 41% of MS grandchildren and 59% of the HS grandchildren failed to get homework done. For science, 57% of the MS grandchildren and 43% of HS grandchildren failed to get homework done. Lastly, twelve grandparents (21%) indicated that their grandchild had an Individualized Education Plan (IEP) for the 2010-2011 school year (MS 19%, HS 24%).

There were no statistically significant differences in the utilization of “pull-out classes,” “study skills classes,” or “after school tutoring” between MS students who were failing or not failing. Approximately the same number of students who fail use the services as those who are not failing. See Table 9.

Table 9

*Utilization of Academic Services by MS Students Failing vs. Not Failing*

	Yes		No		I do not know		<i>p</i>
	Failing	Not Failing	Failing	Not Failing	Failing	Not Failing	
Pull-out classes	50% (7)	38.5% (5)	35.7% (5)	38.5% (5)	14.3% (2)	23.1% (3)	.780
Study Skills	21.4% (3)	23.1% (3)	35.7% (5)	46.2% (6)	42.9% (6)	30.8% (4)	.797
After School tutoring	50% (7)	61.5% (8)	42.9% (6)	23.1% (3)	7.1% (1)	15.4% (2)	.505

Note. Cell size is in parentheses.

Similarly, there were no statistically significant differences in the utilization of “pull-out classes,” “study skills classes,” or “after school tutoring” for HS students who were failing or not failing. The majority of high school students do not use the services whether they are failing or not. See Table 10.

Table 10

*Utilization of Academic Services by HS Students Failing vs. Not Failing*

School	Yes		No		I do not know		<i>p</i>
	Failing	Not Failing	Failing	Not Failing	Failing	Not Failing	
Pull-out Classes	18.8% (3)	8.3% (1)	68.8% (11)	83.3% (10)	12.5% (2)	8.3% (3)	.780
Study Skills	0% (0)	8.3% (1)	87.5% (14)	83.3% (10)	12.5% (2)	8.3% (1)	.482
After School tutoring	37.5% (6)	41.7% (5)	62.5% (10)	58.3% (7)	0% (0)	0% (0)	.823

Note. Cell size is in parentheses.

Forty-four percent of the MS grandparents and 55% of the HS grandparents indicated that their grandchild had discipline problems in the school year 2010-2011. The grandparents ( $n=29$ ) who responded to the question with a “Yes” response were instructed to respond to five possible responses in the area of discipline (Table 11): Receives help for behavior problems, sent to in-school suspension, suspended from school, expelled from school, and contacted to attend conferences with the school personnel. There was a statistically significant difference in the frequency with which grandparents reported that MS (83%) and HS (47%) students received help for behavior problem:  $\chi^2(2, N=29) = 6.967, p = .031$ . Both MS and HS grandparents reported percentages over 50% for three of the other four areas of discipline (sent to in-school suspension, suspended from school, contacted to attend conferences).

Table 11

*Support Grandparent Received for Their Grandchild with Discipline Problems*

Areas of Discipline	Yes		No		Unsure		<i>p</i>
	MS	HS	MS	HS	MS	HS	
Receives help for behavior problems	83.3% (10)	47.1% (8)	8.3% (1)	52.9% (9)	8.3% (1)	.0% (0)	.031
Sent to In-School Suspensions	58.3% (7)	76.5% (13)	25.0% (3)	23.5% (4)	16.7% (2)	.0% (0)	.204
Suspended from school	41.7% (5)	82.4% (14)	50.0% (6)	17.6% (3)	8.3% (1)	.0% (0)	.062
Expelled from school	.0% (0)	5.9% (1)	100% (12)	94.1% (16)			.393
Contacted to attend conferences	91.7% (11)	76.5% (13)	8.3% (1)	23.5% (4)			.286

Note. *n* =29. Cell size is in parentheses.

Grandparents also responded to the qualitative question: “Tell us about the services the school offers that you or your grandchild uses.” Table 12 lists other school services reportedly used by the grandchild and/or grandparent. The in-school service most used was the tutoring program. In addition, the grandparents also listed community services that were utilized such as tutoring programs offered within churches; programs offered at the Young Men’s Christian Association (YMCA); Boys and Girls Club of America; Community Healthcare Program; PAL Program (Police Athletic League); Day Treatment Programs; In-Home Counseling Agencies; and community art programs.

Table 12

*Grandparent's Open-ended Responses Regarding School Services Utilized*

Service	<i>n</i>
Exceptional Education	2
Alternative School Placement	1
After-School Tutoring Services	6
Saturday Academy for SOLs and tutoring	1
Free Lunch Program	1
Day Treatment Program	2

**Research Question #3:** Are there differences in the perceptions of grandparents of middle school and high school students of needed services in the public schools? The chi-square test was used to examine the two groups, middle school grandparents and high school grandparents for the variables in three sections within the survey: Counseling Services, Support Services, and Personal, Financial, and Legal Issues. The data for these sections were notated in Tables 13-18.

Table 13

*Support Groups Grandparents Want Offered During School Hours for Grandchild*

Support Group	Yes		No		Unsure		<i>p</i>
	MS	HS	MS	HS	MS	HS	
Self Esteem	40.7% (11)	32.1% (9)	44.4% (12)	60.7% (17)	14.8% (4)	7.1% (2)	.425
Grief	29.6% (8)	7.1% (2)	63.0% (17)	89.3% (25)	7.4% (2)	3.6% (1)	.066
Teasing/Bullying	70.4% (19)	7.1% (2)	29.6% (8)	89.3% (25)	.0% (0)	3.6% (1)	.000
Friendships	59.3% (16)	28.6% (8)	40.7% (11)	67.9% (19)	.0% (0)	3.6% (1)	.055
Behavior	59.3% (16)	60.7% (17)	40.7% (11)	35.7% (10)	.0% (0)	3.6% (1)	.589
School Work	74.1% (20)	62.1% (18)	25.9% (7)	37.9% (11)			.336
Our Grandfamily Arrangement	22.2% (6)	7.1% (2)	66.7% (18)	78.6% (22)	11.1% (3)	14.3% (4)	.283

Note. Cell size is in parentheses.

Under the Counseling Services section, MS grandparents reported that support groups were most needed during school hours for: Teasing/bullying (70%), friendships (59%), behavior (59%), and school work (74%). The HS grandparents reported high percentages for support groups for two services: Behavior (61%) and school work (62%). MS and HS grandparents only differed significantly in the need for support groups for teasing/bullying,  $\chi^2(2, N=55) = 23.509, p = .000$ . On the middle school level, grandparents reported that a support group for teasing/bullying (70%) was needed, while at the high school level, only 7% of the grandparents requested a support group for teasing/bullying. Both groups agreed that

support groups for the variables “self-esteem,” “grief,” and “grandfamily arrangement” were not needed.

The Counseling Services section of the survey provided the first group of open-ended questions. Grandparents were asked to suggest additional support groups that they would like the school counseling department to offer during the school hours for their grandchildren. Fifteen grandparents responded. As indicated in Table 14, the question generated 11 topics, with “leadership” being mentioned by two grandparents. Three grandparents’ response was “none,” indicating no additional supports should be offered during the day. The topics were grouped under three categories: Academic, behavior, and social.

Table 14

*Other Support Groups that Grandparents Would Like Offered for the Grandchildren During the School Hours*

Academic	Behavior	Social
Adjusting to high school	Displaying respect for self and those in authoritative roles	Counseling for children who miss their parents
Honor group	Not succumbing to peer pressure	Developing life skills
Help with math	Understanding the dress code	Leadership (learning to be a leader not a follower ( $n = 2$ )) School helpers for teachers Young men’s mentorship

Note.  $n = 12$  (11 topics; 3 responses of “none”).

As with support groups, Table 15 shows that grandparents reported a statistically significant difference in the need for individual counseling for “teasing/bullying,”  $\chi^2 (2, N=55) = 15.117, p = .001$ . MS grandparents (59%) reported that individual counseling was

needed for the variable “teasing/bullying,” whereas HS grandparent (82%) did not see a need. MS grandparents requested individual counseling for the variables “self esteem” (52%), “behavior” (56%), and “school work” (67%). HS grandparents only requested individual counseling for variables “behavior” (54%) and “school work” (54%). Both groups did not see a need for individual counseling for the variables “grief,” “friendships,” and “our grandfamily arrangement.”

Table 15

*Grandparent Would Like Individual Counseling Offered During School Hours for Grandchild*

Individual Counseling	<u>Yes</u>		<u>No</u>		<u>Unsure</u>		<i>p</i>
	MS	HS	MS	HS	MS	HS	
Self Esteem	51.9% (14)	28.6% (8)	40.7% (11)	64.3% (18)	7.4% (2)	7.1% (2)	.191
Grief	22.2% (6)	7.4% (2)	66.7% (18)	85.2% (23)	11.1% (3)	7.4% (2)	.245
Teasing/Bullying	59.3% (16)	10.7% (3)	40.7% (11)	82.1% (23)	.0% (0)	7.1% (2)	.001
Friendships	44.4% (12)	21.4% (6)	55.6% (20)	71.4% (20)	.0% (0)	7.1% (2)	.095
Behavior	55.6% (15)	53.6% (15)	44.4% (12)	39.3% (11)	.0% (0)	7.1% (2)	.363
School Work	66.7% (18)	53.6% (15)	33.3% (9)	42.9% (12)	.0% (0)	3.6% (1)	.431
Our Grandfamily Arrangement	19.2% (5)	7.1% (2)	61.5% (16)	78.6% (22)	19.2% (5)	14.3% (4)	.321

Note. Cell size is in parentheses.

Furthermore, grandparents were asked to suggest additional individual counseling sessions that they would like the school counseling department to offer during the school



hours for their grandchildren. Responses were received from eleven grandparents, with more suggestions for individual counseling being offered in the social area. Two of the grandparents indicated that they would not want additional individual counseling offered for their grandchildren during the school hours. See Table 16.

Table 16

<i>Other Topics that Grandparents Would Like Individual Counseling Offered for the Grandchildren During the School Hours</i>		
<i>Academic</i>	<i>Behavior</i>	<i>Social</i>
<i>Aid faltering students with individual futuristic goal planning and follow-up with the students</i>	<i>Learning to avoid trouble</i>	<i>Absent parent</i>
<i>Help with math</i>		<i>Being different but happy</i>
		<i>Getting a job</i>
		<i>Mentor-male role model</i>
		<i>To talk one-on-one with someone</i>
		<i>Parent and child counseling together</i>

Note. The italics indicate the exact words of the grandparents; *n* = 1, unless otherwise noted in parentheses.

As Table 17 shows, there were no statistically significant differences in the services that MS and HS grandparents wanted for themselves. With regards to support services, over 50% of both MS and HS grandparents requested help for all services mentioned with the exception of “create a study area.” The four most requested services were “resource packets on community resources” (MS 89%, HS 67%), “training for teachers” (MS 74%, HS 83%),

and “Grandparent Education Council” (MS 70%, HS 76%). Both groups (MS 67%, HS 69%) requested support groups for grandparents.

Table 17

*Support Services Needed for Grandparents*

Support Service	Yes		No		Unsure MS	HS	<i>p</i>
	MS	HS	MS	HS			
Help my grandchild with homework	66.7% (18)	48.3% (14)	29.6% (8)	48.3% (14)	3.7% (1)	3.4% (1)	.356
Create study area	25.9% (7)	48.3% (14)	70.4% (19)	48.3% (14)	3.7% (1)	3.4% (1)	.221
New parenting techniques	55.6% (15)	51.7% (15)	40.7% (11)	44.8% (13)	3.7% (1)	3.4% (1)	.953
Resource packets on community resources	88.9% (24)	75.9% (22)	7.4% (2)	24.1% (7)	3.7% (1)	.0% (0)	.150
Adjust to new school	63.0% (17)	55.2% (16)	37.0% (10)	37.9% (11)	.0% (0)	6.9% (2)	.366
Training for teachers	74.1% (20)	82.8% (24)	7.4% (2)	13.8% (4)	18.5% (5)	3.4% (1)	.163
Support group for grandparents	66.7% (18)	69.0% (20)	25.9% (7)	20.7% (6)	7.4% (2)	10.3% (3)	.856
Grandparent Education Council	70.4% (19)	75.9% (22)	11.1% (3)	17.2% (5)	18.5% (5)	6.9% (2)	.380

Note. Cell size is in parentheses.

Table 18

*Personal, Financial, and Legal Issues for Outside Referrals*

	Yes		No		Unsure		<i>p</i>
	MS	HS	MS	HS	MS	HS	
Personal, Financial, and Legal							
Health problems for my grandchild	48.1% (13)	44.8% (13)	44.4% (12)	51.7% (15)	7.4% (2)	3.4% (1)	.742
Behavioral support	48.1% (13)	58.6% (17)	51.9% (14)	41.4% (12)			.432
Individual counseling for grandchild behavior	48.1% (13)	55.2% (16)	51.9% (14)	44.8% (13)			.599
In-home Counseling for our Grandfamily	48.1% (13)	13.8% (4)	48.1% (13)	82.8% (24)	3.7% (1)	3.4% (1)	.019
Financial help for our Grandfamily	55.6% (15)	51.7% (15)	37.0% (10)	48.3% (14)	7.4% (2)	.0 (0)	.273
Legal help with custody issues	14.8% (4)	27.6% (8)	66.7% (18)	62.1% (18)	18.5% (5)	10.3% (3)	.414
Support groups for me	55.6% (15)	55.2% (16)	40.7% (11)	37.9% (11)	3.7% (1)	6.9% (2)	.863

Note. Cell size is in parentheses.

As noted in Table 18, the need for outside referrals for “Personal, Financial, and Legal Issues,” was approximately at the same percentages for both groups. Within this section of the survey, all topics, with the exception of “legal help for custody issues” and “in-home counseling for our grandfamily,” were at approximately 50% for both groups requesting assistance for the remaining variables. The two highest topics in this section that grandparents requested assistance for were “financial help for our grandfamily” (MS 56%, HS 52%) and “support groups for me” (MS 57%, HS 55%). The topic with a statistically significant difference,  $\chi^2(2, N=56) = 7.974, p = .019$ , was “in-home counseling for our grandfamily.” Forty-eight percent of MS grandparents requested an outside referral for the topic “in-home counseling for our grandfamily” while only 14% of HS grandparents requested an outside referral for this topic.

To support the quantitative data for Research Question #3, under the section “Questions and Reflections,” grandparents were asked to respond to the question: What would you like the school to do to help your grandchild that was not listed in this survey? For this question, a reader also examined the participants’ responses with me. Twenty-four participants gave substantive responses. The responses ranged from requesting an Award’s Program for students with special needs to sponsoring workshops for grandparents and parents who need to learn to work together so that the children can view them as a unit. The reader and I agreed that the grandparents mentioned their grandsons more so than the granddaughters when responding to the question of what the school could do that was not listed in the survey. The reader and the I agreed on the following categories to group the grandparents’ responses: Academic, social, physical needs, health, behavior, personal, concerns of grandparents, and other comments. Table 19 lists the grandparents’ responses.

Table 19

*What the School Can Do to Help Grandchildren That Was Not Listed in the Survey*

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Academic

*Award programs for special children*

*Need more support for his ADHD; and teachers did not follow IEP in MS and HS*

*Grandson treated different because of his disability and he receives exceptional education*

*Keep grandchild and grandparent informed about grades; Have teachers sign daily log for trouble or bored children who want to sneak off school campus or cut classes*

*Explain the importance of the HS experience educationally as well as the social experience*

*Make sure they contact the grandparent if grandchild's grades start to fall*

*Like the school to issue school books. School said they didn't have enough books to go around.*

Social

*Want grandchild to be assigned to a "Big Sister" program*

*Teacher should suggest "things," sports, etc., that will motivate grandchild to get better grades.*

Physical Needs

*Provide supplies and help buy clothes*

*He is going away to college in 5 months. He has a job. He has a driver license. I am trying to find him a used automobile to have for the summer months. The prices are out of my range because I live on a fixed income. I will be grateful for any help.*

Health

*Sickle Cell groups*

Behavior

*Address coming to school late*

*Just take more time with him if possible*

*Because of child's behavior, staff already has an attitude before I get to school.*

*Insist on being informed by phone when student is sent to In-School Suspension*

Personal

*The school system would take time to assist grandchildren in general about being a grandchild-*

*"Why, how long, what happens, what's next in life"*

### For Grandparents

*School sponsor workshops for grandparents and parents learning to work together so that children can view them as a unit*

*Educate teachers on addressing guardian/grandparent when they attend school functions/sessions in place of parent*

*To have all 3 grandchildren in the same school*

*School not within zone and transportation is needed*

### Other Comments

*At this time, I do not need assistance however it would have been helpful in MS*

*This is my grandchild's last year in HS. There isn't anything the school can do to help*

*The school did a very good job with my grandson*

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Note. The italics indicate the exact words of the grandparents;  $n = 1$ , unless otherwise notated in parentheses.

To further support the data for Research Question #3, middle school grandparents were asked to respond to the question: Describe the type of services from public schools that would be helpful to grandparents raising grandchildren transitioning from middle school to high school? Out of 27 MS grandparent participants, 15 responded to the question. The reader and I found that more grandparents were concerned with transitioning to high school, with emphasis on the responsibility, expectations, and orientation within high school. In addition, the data established that the grandparents would like for the middle school to provide workshops or classes on “self-esteem,” “how to study,” “bullying” as well as the “expectations of high school.” Table 20 lists the remaining responses which were grouped in three categories: Academic, behavior, and social.

Table 20

*Services MS Grandparents Believe Would Be Helpful Transitioning From MS To HS*

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	Academic
	<i>Help them focus on their work and not peer pressure</i>
	<i>Explaining the importance of high school</i>
	<i>On-going orientation</i>
	<i>Practice schoolwork for 9<sup>th</sup> grade</i>
	<i>How to study harder and how to talk with teachers</i>
	<i>Scholarship information for high school</i>
	Behavior
	<i>Dealing with misbehavior</i>
	Social
	<i>Money</i>
	<i>Protection from bullies</i>
	<i>Getting along with new people</i>
	<i>Build self-esteem</i>
	<i>Leadership so when they get to high school they can better choose their friends</i>
	<i>Workshop to inform grandparents what to expect in high school</i>
	<i>Responsibility for his/her actions as a rising high school student; Expectations</i>
	<i>School counseling department to help with transitioning</i>
	<i>Wants a male role model to help with transitioning</i>

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Note. The italics indicate the exact words of the grandparents;  
*n* = 1, unless otherwise notated in parentheses.

High School grandparents were asked to respond to the MS grandparents' question from the perspective of what services would have been helpful to grandparents raising grandchildren transitioning from middle school to high school. Of the 29 HS grandparent participants, 20 grandparents responded. The responses to this question had the most prominent words as: Classes, help, expected, and IEP. The reader and I found that the grandparents wanted single sex classes, help with understanding and how to read an IEP, as well as what was expected in high school from the grandchild and grandparent. The reader and I found that grandparents were not made fully aware of what to expect in regard to the

expectations of high school. Table 21 contains the responses grouped in categories:

Academic, behavior, social, and other comments.

Table 21

*Services HS Grandparents Believe Would Have Been Helpful Transitioning From MS To HS*

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Academic

*Preparation for the work world*

*Tips for studying*

*Understanding the IEP*

*Help with follow-up on core subjects to ensure each student is completing their work assignments*

*Help grandchild and grandparent understand what is expected in high school (n=5)*

*Where they need to be academically for high school*

*Need to have all girl classes and all boy classes*

*Teachers understanding my grandchild's IEP and a need for smaller classes*

Behavior

*Classes on self-esteem, bullying, and choosing friends*

*Home visit between child with slight behavior problems and counselor (i.e., Day Treatment Counselor) before it becomes a big problem*

Social

*I want a service that makes grandparents aware of when their grandchildren are "hanging" with "bad" kids during the school day*

*Have a Meet and Greet (Welcome Session) for grandparents and grandchildren at the MS and HS (n=2)*

*Possibly conduct a get acquainted night for incoming students, guardians, parents to visit the high school at the end of the school year prior to their kids arriving the next fall/school year*

*Classes on social skills and understanding about life*

*Better transition for preparing students to move from one class to attending many classes*

*Present classes on male/female relationships*

Other Comments

*My grandchild had no problem transitioning from middle school to high school*

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Note. The italics indicate the exact words of the grandparents;  $n = 1$ , unless otherwise notated in parentheses.



## **CHAPTER 5**

### **CONCLUSIONS AND RECOMMENDATIONS**

The purpose of the study was to examine grandparents' awareness of the services provided to their grandchildren, the grandchildren's utilization of those services, and the services that grandparents believe are still needed for their grandchildren. The study revealed that there were no statistically significant differences, with a few exceptions, between MS and HS grandparents. A total of 56 grandparents, 54 females and 2 males participated. The participants were defined as grandparents who provided primary care for their grandchildren. The participants were mostly African American grandmothers, 41 of whom were married, high school graduates, and between the ages of 56-65. Grandparents in this study provided primary care for their grandchildren due to four main reasons: Parent's drug use, providing family support, death of parent, and desertion of parent.

The grandparents reported on a total of 28 male grandchildren and 28 female grandchildren, ranging in age from 11-19 and consisting of grades 6-12. Twenty-seven were in middle school and 29 were high school. The ethnicity of the grandchildren was the same as the grandparents. Consistent with findings of researchers Dubowitz et al. (1994), Solomon and Marx (1995), and Edwards (1998), over half of the grandchildren had received a failing grade of "F" on their report card in at least one of the core subjects during the school year 2010-2011. Additionally, the majority of grandchildren failed to get homework completed at least once a week. Twenty-one of the grandparents indicated that their grandchild had an Individualized Education Plan (IEP) for the 2010-2011 school year.

## **Research Question 1: Grandparents Awareness of Services Offered**

The first research question considered grandparents' awareness of the academic and social services offered by the middle school and high school. MS and HS grandparents showed different levels of awareness about whether the school offers "pull-out classes," and no significant difference in awareness for "study skills classes" and "after school tutoring." The study found that more MS grandparents were aware that "pull-out classes" were offered than HS grandparents. If true, this could be due to the high school credit requirements for graduation. Students are earning elective credits towards graduation and so it is difficult to pull them out of classes. On the other hand, it is easier to pull MS students out of other classes, ie., elective classes.

MS grandparents differed in their awareness of the availability of "study skills classes" and HS grandparents did not know if they were available or not. This could reflect a different emphasis on study skills at different schools, or a failure of the school to communicate the availability to grandparents. The nonsignificant difference regarding "tutoring after school" is likely because the majority of both groups were aware that this service was available. The supports identified in Urrutia's study (2002) seem to be present more so at the MS level than the HS level. My study found that the MS and HS grandparents differed in their level of awareness for some of the supports.

MS and HS grandparents did not differ in their awareness of available social activities: "field trips," "clubs that meet after school," and "special activities." They responded similarly regarding how often "field trips" were available and how often "special activities" were held.

Regarding recreational programs, over half of both MS and HS grandparents were aware that the schools offered social activities such as “field trips,” however, both school groups reported that about one-fifth of the grandchildren did not attend any of the field trips. This could have been due to lack of finances. Sixty-three percent of MS grandparents indicated that their grandchildren did not participate in “clubs that meet after school.” This lack of participation in “clubs that meet after school” on the MS level could have been because grandparents were not aware of what clubs were offered or because the clubs were simply not offered. It is possible that more after school clubs exist on the HS level than the MS level because HS students are trying to determine their interests as they prepare for college. The item “special activities” indicated that over half of the grandparents at both levels reported that the schools did provide activities such as dances, movies, and plays.

Urrutia (2002) believes that school should provide recreational programs after school for grandchildren. Because this study focused on grandparents’ awareness and did not ask schools about services offered, we cannot know if the issue is that schools need to offer more or if they need to communicate better to grandparents.

### **Research Question 2: Grandparents’ Utilization of Services**

The second research question examined grandparents report on the utilization of academic and discipline services by MS and HS grandchildren. There was a statistically significant difference in the awareness of MS and HS grandparents regarding their student’s utilization of all three academic services: “pull-out classes,” “study skills classes,” and “tutoring after school.” According to the grandparents, HS students typically did not use these services. The perceived utilization of these services by MS students was more mixed.

After reviewing the data and comparing the academic supports that were “offered” by the schools and “utilized” by the grandchildren, it appears that some of the grandchildren did not always take advantage of the “pull-out classes” or “tutoring after school.” Urrutia’s study (2002) believed that schools should provide one-to-one tutorial services during and after school for grandchildren. In this study, the grandparents perceived that the middle schools were offering the tutoring service during the day through the “pull-out classes” and “tutoring after-school” services. However, it appears that more research is needed to be sure that all students who need the help are getting it.

I considered whether the differences in utilization of the academic services could reflect whether the students were failing or not failing. With regard to MS students, there was no difference in utilization of the academic services whether the student was failing or not failing. Simply put, there was a lot of variability and no pattern in the utilization of these academic services at the MS level. With regard to HS students, there also was no difference in utilization whether the student was failing or not failing. Generally, the majority of HS students did not use the services regardless of whether they were failing or not failing.

I also examined the utilization of services for the 29 students who had discipline problems. The only statistically significant difference was “receives help for behavior problems.” Most of the MS grandparents indicated that their grandchildren “received help for behavior problems” but slightly less than half of the HS students received help. This may reflect that MS students’ behavior problems are easier to remediate than those of HS students. There was no statistically significant difference in the grandparents’ awareness of the other responses to discipline problems: “In-school suspension,” “suspension,” “expulsion,” and “conferences.” There was little variability between the two groups. The

majority of both MS and HS grandparents indicated that their student had received in school suspension and had been contacted to attend conferences. Virtually no one had been expelled from school. Although more HS students had been suspended from school than MS students, the differences between them was not enough to reach statistical significance. For the open-ended response, “Tell us about the services you and your grandchild uses,” many grandparents mentioned a school or community service, but there was little commonality among them.

### **Research Question 3: Needed Services**

The third research question asked grandparents about “needed” services regarding Counseling Services, Support Services, and Personal, Financial and Legal Issues. Under the Counseling Services section, the number one support group that both groups of grandparents would like offered during the school hours for grandchildren, was “school work.” The other top support groups requested by more than half of MS grandparents were “teasing/bullying,” “friendships,” “behavior.” The grandparents could want these supports because MS students can tend to tease and bully each other as well as display negative behaviors. Also, MS students can have difficulty making friends and establishing healthy friendships. The other important support group requested by more than half of HS grandparents was for “behavior.” Here again, some HS students can display negative behaviors as they try to find a balance between adolescence and young adulthood.

However, the only support groups in which MS and HS grandparents showed a statistically significant difference was in the need for support groups on “teasing/bullying.” In this instance the service was needed more for MS students than HS students. When considering “self esteem” and “friendship,” there was a non-significant difference between

MS and HS grandparents which reflects the large amount of variability in the responses and no distinct pattern. This could suggest that there are some grandchildren in MS and HS who could benefit from the supports, and other grandchildren who would not need the supports. With regards to “grief” and the “grandfamily arrangement,” the non-significant difference between the MS and HS grandparents could be because the majority of both groups indicated that there was no need for this service. While the literature in this study did not address the issue of grief, it is reasonable to deduce that since the grandchildren in this study had been with their grandparents for an average of 12 years, perhaps the grandchildren were no longer grieving over not being with their parent/s and were comfortable with their grandparent/s that the “grandfamily arrangement” was no longer a concern.

Eleven grandparents responded to the open-ended question about the desire for additional support groups. Three of these responses fell into the academic category, three fell into the behavior category, and five fell into the social category. It should be pointed out that while 11 grandparents listed additional support groups, none of the support groups were mentioned by more than two grandparents, suggesting a diversity of needs among the grandchildren.

The MS and HS grandparents’ order of choices for individual counseling for grandchildren during the school hours, for the most part mirrored their support group selections. Once again, the first choice for both groups for individual counseling was “school work.” Over half of the MS grandparents’ requested individual counseling for teasing/bullying, behavior, and self-esteem. Once again, “teasing/bullying” was the only variable that attained statistical significance, with MS grandparents requesting it more. Over half of the HS grandparents’ requested individual counseling for “behavior.” The majority of

MS and HS grandparents did not need individual counseling for “grief,” the “grandfamily arrangement,” nor for “friendships.” Individual counseling for “self esteem,” “behavior,” and “school work” showed a lot of variability and no distinct pattern of differences between MS and HS.

The data for the open-ended question regarding individual counseling sessions generated responses similar to the responses for the support group sessions. Once again, the responses were grouped into three categories: Academic, behavior, and social. Here again, grandparents mentioned a variety of other topics for individual counseling, suggesting a diversity of needs among the grandchildren. Counseling sessions for the grandchildren could be provided by the school counselor, the school social worker, or the school psychologist. Although the need for support groups and individual counseling for MS and HS grandchildren is evident in this study, school counselors should assess individual students to determine their specific needs. Grandparents in Racicot’s (2003) study expressed a need for child support and child counseling in schools as well.

There were no statistically significant differences between MS and HS grandparents regarding the support services that they need for themselves. In general, there was a lot of agreement among the groups, with the majority of each very interested in “resource packets on community resources,” “training for teachers,” “grandparent education council” and “support groups for grandparents.” In addition, over half of the grandparents in both groups requested the service “adjust to new school” and “new parenting techniques.” According to Minkler et al.(1993), in order to assist grandparents in raising their grandchildren, there should be supports in place, both formal and informal, and resources in place to help

grandparents cope with their challenging role of raising their grandchildren and might I add, when they become adolescents.

Grandparents' desire for "resource packets on community services" is supported by Urrutia (2002). He proposed an educational design which incorporated services and resources within the schools such as medical, dental, optical, and legal. While the grandparents in this study did not express a need to have these services and resources located within the schools, they were rather vocal in their discussion with me about being made aware of what resources were available to their grandfamily.

Regarding Personal, Financial and Legal Issues for outside referrals, there was only one statistically significant difference between MS and HS grandparents and that was in regard to "In-home counseling for our grandfamily." In this case, HS grandparents overwhelmingly rejected this idea. With regard to the other supports: "Health problems for grandchildren," "behavioral support," "individual counseling for grandchild," "financial help," "legal help with custody issues," and "support groups for me," there was much variability and no distinct pattern. Over half of both MS and HS grandparents would like outside referrals for financial help and support groups for themselves. In addition, HS grandparents would like outside referrals for "behavioral support" and "individual counseling for their grandchild." This would support school counselors, school social workers, and school psychologists having information on hand to share with grandparents or perhaps making referrals. Information gathered from my study is the same as information found in Burton's (1992) study, in which 77% of participants indicated the need for financial assistance with grandchildren. Other services mentioned in the Burton's study included assistance with legal counseling, and parenting classes.



Grandparents were invited to reflect on other supports that the school could provide that were not listed on the survey. While many supports were mentioned, they seemed to reflect the diversity of the grandchildren as there did not seem to be a preponderance of needs. When asked to describe the type of services from public schools that “would be helpful” to grandparents raising grandchildren transitioning from middle school to high school, MS grandparents identified a number of services that they believed would be helpful to their student. MS grandparents were definitely concerned with transitioning to high school. The responses were grouped into three categories that reflect those in Cauley and Jovanovich (2006). The academic categories included responses such as: helping grandchildren focus on school work, how to study, how to talk with teachers, and the importance of high school. The social category responses were such as: Protection from bullies, learn to get along with new people, building self-esteem, workshop to inform grandparents on what to expect in high school, and the MS school counseling department to help with the grandchild’s transition to high school.

High school grandparents were asked to respond to the same question but from the perspective of what services “would have been helpful” to grandparents raising grandchildren transitioning from middle school to high school. Again, the responses were grouped in the categories identified in Cauley and Jovanovich (2006). In the academic category, the HS grandparents mentioned wanting their students to understand what is expected in high school, and tips for studying, which was listed by both middle school and high school. Also, HS grandparents indicated that understanding the IEP would have been helpful as well as knowing where the grandchild needs to be academically for high school.

The responses in the behavior category suggested that the MS present classes on self-esteem, bullying, and learning how to choose friends. The social category responses included: Having a “Meet and Greet” activity for grandparents and grandchildren, the school holding a “Grandparent Night” so that the grandparents can talk and share different ideas that work for them as they parent a second time, and students visiting the high school to get a feel of the differences between middle school and high school.

Although the topics generated by both MS and HS grandparents were frequently offered by only one person, many of them have been identified by Cauley and Jovanovich (2006) as topics to address in a transition program. Certo, Cauley, and Chafin (2003) maintained that students need to feel that they are accepted and respected by their peers, teachers and belong to the school community. When students experience this sense of belonging and acceptance, they have a positive attitude toward schools, teachers, and peers (Certo et al., 2003). Some of the topics suggested by grandparents in this study such as a “Get Acquainted Night” for incoming students, guardians, and parents to visit the high school at the end of the school year prior to the students arriving next fall/school year or a “Meet and Greet” (Welcome Session) for grandparents and grandchildren so that they have the opportunity to meet each other can serve this purpose.

## **Conclusions**

Since grandparents can provide the stability and comfort of a home for grandchildren, it is imperative for schools to consider what support services can be implemented to assist this ever growing population. Based on the census reports, the phenomenon of grandparents raising grandchildren does not seem to be coming to a plateau. The data from my study indicated that grandparents were asking for assistance and were willing and open for

receiving information and learning new skills to aide in their journey of parenting a second time.

### **Recommendations for Schools**

Schools should consider:

- Clearly communicating to grandparents the academic supports that are offered in their schools.
- Offering workshops, small groups, and individual counseling on teasing/bullying, improving behavior, and completing school work for the middle school grandchildren.
- Offering workshops, small groups, and individual counseling on improving behavior, and completing school work for the high school grandchildren.
- Ensuring that HS grandchildren who are failing core subjects are utilizing the academic supports.
- Implementing a Grandparent Education Council on both middle school and high school, this would provide information on: New parenting techniques; resource packets on community resources; and how to help my grandchild with homework.
- Providing training for teachers on grandparents raising grandchildren.
- Providing support groups for grandparents.

### **Limitations and Recommendations for Further Research**

One limitation to this study is that the schools themselves were not surveyed about the available services. We only know about grandparents' awareness of them. Future

research could explore what academic and social services the schools actually provide and compare that to the awareness of grandparents. Another limitation is that this study surveyed urban, African American grandparents. The school system involved insisted that all income questions be removed from the survey. Hence, the findings cannot be generalized to other groups of grandparents or other types of school systems. Future research should consider studying the experiences of grandchildren being raised by grandparents in other settings.

In addition, this study did not examine gender differences. Future research could examine if male students respond differently to the availability of supports for discipline or academics than female students. Finally, there was little commonality among the services that grandparents recommended in the free response section. It might be useful to survey grandparents to determine if there is a larger need for some of the suggested services.

Much of the literature concerning grandparents raising grandchildren has had the spotlight on the elementary level. Previous research on grandparents raising grandchildren, such as Edwards (1998b), Rogers and Henkin (2000), and Silverstein Vehvilainen (2000) has focused on elementary aged students. This study adds to the literature by examining the adolescent population. In addition, it examines the grandparents' perceptions of services needed within the public schools to assist them with the task of raising their grandchildren. Hopefully, school personnel and school districts will garner information from this study to perhaps put supports in place to assist with this the phenomenon of grandparents raising grandchildren, which is not likely to disappear any time soon.

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## Appendix A

### Reasons Grandparents Were Raising Grandchildren

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#### Grandparents Were Raising Grandchildren Because

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*Divorce* n=1

For stability

*Desertion*

Mother runs the street. Doesn't work, still partying. Won't take care of her daughter

Mom moved to New York

White mom did not want child. My son drinks and does not work

His mother was a drug addict. She wasn't capable of taking care of him so she brought him to me. He was only two years old.

Mother did not like grandchild. She is my son's daughter

Their mother left them

My step-daughter abandoned them

Mother did not work and did not have a place for them to stay. She stayed in the streets most of the time.

*Drugs*

No stable home. Mother using drugs. Father died (my son). Grandchild started having behavioral problems

My son has a drug problem. No job

My son is homeless and the mother has a drug problem

His mother was a drug addict. She wasn't capable of taking care of him so she brought him to me. He was only two years old.

His mother was a drug addict. She wasn't capable of taking care of him so she brought him to me. He was only two years old.

Mother on drugs

My son was irresponsible and I did not want my granddaughter caught up in the system because her mother was on drugs

Parent is on drugs

My grandchild's mother happens to be a substance abuser (drugs and alcohol) and my son, her father, is very much irresponsible.

The parent is on drugs and not around very much

His mother is a drug addict. She still is.

Biological mother has a drug addiction and biological father is just irresponsible.

Her mother had some issues with drug addiction

My daughter was in the street life doing drugs, stealing, lying, cheating, and neglecting her children. She went to jail and I did not want my only grandchildren to have a foster home. The only concern is "when will the grandparents be grandparents." Because I wanted my grandbabies to stay in the family, I'm losing the grandparent role.

### *Death*

Both parents are dead  
Mom is dead. Father is an alcoholic  
Father is deceased (my son) and mother was on drugs and unemployed  
Mother passing  
Father deceased  
Her mother is deceased  
Mother passed  
Her mother passed away and her father wanted me to care for her.

### *Detention*

Their parent has been in and out of jail  
Her mother was in and out of jail.  
I received custody when my son was incarcerated

### *Duties in the Military*

My grandchild's mother became ill and was not able to take care for her child. Her father (my son) was in the U.S. Navy. His ship was on tour out of the country often.

### *Disease*

Her parents are not able or stable enough to care for her.

### *Family Support*

My daughter needed help  
I assist my daughter  
I help my daughter with her children  
I am raising my grandchild because I want to. My daughter had him at a early age.  
I wanted her to have a better life. My grandchild looks like her father (my son) and her mother was resentful and worked her to take care of the other children.  
My daughter lives in Europe and my grandchild will get a better education in the USA  
His mother needed someone to help with him. I got him at 8 months. He lives with grandmother and father too.  
Hardship with mother  
Mother met with hard times (eviction). Five children were split into three homes.  
Abuse in her mother's home  
Biological mother is not a responsible parent  
Her mother is not in the position to do it and she does not have a stable place to live  
I love him and he wanted to live with me. He would stay over/spend the night and not leave. Without me he has no one that will give him the calmness and belonging feeling that a child needs to become a giving and kind person. He moved in with me in the first grade. His grades were poor, but he was eager to learn, which made it easy for me to teach him how to read.  
My own personal desire  
For legal circumstances  
Due to his mother late chose in life, it was best he live with me. It was done through the court.

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## Appendix C

### Recruitment Flier



**ATTENTION\*\*\*ATTENTION\*\*\*ATTENTION: A CALL FOR GRANDPARENTS  
Grandparents,  
Are You Raising Your  
Grandchild or Grandchildren?  
IF SO,**

**Your Help Is Needed To Find Out What Support You And Your Grandchild Need From  
School Systems And School Personnel**

- A survey is being conducted by VCU Doctoral Candidate, Ms. Carmen Y. Ward
- If you are able to participate, Ms. Ward or a colleague will arrange a time at your convenience to visit you at home, a library, or another place convenient for you to give you the survey, which will take 30 minutes. *Your participation is completely voluntary.*
- If you choose to participate, you will receive a *\$5.00 Walmart Gift Card*
- To share your valuable insights, please contact Ms. Ward immediately to make arrangements to take the survey
- Ms. Ward may be contacted by:  
Phone: (804) 258-3581 or E-mail: [wardc@vcu.edu](mailto:wardc@vcu.edu)
- This is an opportunity for you to provide feedback that may help school systems and school personnel help you and your grandchild

## **Appendix D**

### **Reading Script for Personnel**

Once again, grandparents you are to be commended and praised for your efforts in raising your grandchild. Also, we thank you for taking time out of your busy schedule to participate in this survey.

At this time, I want you to know that I am here to assist you in completing your survey. If you wish, I will read the survey to you, write your responses to the questions, or both, read the survey and write your responses. Again, I am here to assist you in completing your survey.

Please know that if there are any questions you do not wish to answer on the survey, you do not have to answer. You may skip that question or questions.

Please know that you are free to quit the survey at any time.

Please know that the responses you provide are confidential.

At this time do you have any questions? First, I need to ask you to read and sign this consent form. When you are finished, please put the consent form in this envelope. When you are finished with the survey, you will put it in this envelope.

If there are no questions, we can begin.

## Appendix E

### Consent Form

**Title:** Grandparents Raising Grandchildren: Implications for School Systems and School Personnel

**VCU IRB NO.:** HM13501

**Investigators:** Primary- Kathleen M. Cauley, Ph.D.  
Student- Carmen Y. Ward, M. Ed.

This consent form may contain words that you do not understand. Please ask the study staff to explain any words that you do not clearly understand.

#### **Purpose of the Study:**

The purpose of this research study is to find out what type of supportive services from school systems and school personnel would be helpful to grandparents raising grandchildren who are in middle school and high school.

You are being asked to participate in this study because you are a grandparent who is raising a grandchild. This is an opportunity for you as a grandparent to have a voice in identifying supports that the schools could put in place to assist your grandchild.

#### **Description of the Study and Your Involvement:**

If you decide to be in this research study, you will be asked to sign this consent form after you have had all your questions answered and understand what is expected from you.

In this study you will be asked to complete a survey. It is the goal of the study to build awareness and a clear understanding of how schools can support grandparents raising grandchildren. The survey will take approximately 30 minutes to complete, however, you may have as long as you need to complete the survey. There are 6 sections in the survey. For example, there are questions about academic and discipline concerns related to your grandchild. There are 3 questions that ask you to respond with a written comment. You do not have to answer all questions. You may skip a question. You are allowed to stop taking the survey or quit taking the survey at any time.

**Risks and Discomforts:** The primary risk in this study is the breach of confidentiality. The investigators and persons involved in the administration of the survey take the protection of the confidentiality of your participation and survey responses seriously. Study procedures have been put into place to protect confidentiality.

#### **Benefits:**

You may not get any direct benefit from this study, but the information we learn from your survey will be provided to school systems and school personnel and may improve the assistance provided to grandparents raising grandchildren.

**Costs:**

There are no costs for participating in this study other than the time you will spend taking the survey.

**Compensation:**

Each participant will receive a \$5.00 Walmart Gift Card for completing the survey.

**Alternatives:**

The alternative to participating in this study is to decide not to participate.

**Confidentiality:**

You will not be asked to write your name on the survey. Your identity and survey responses will be kept confidential. However, information from the study and the consent form signed by you may be looked at or copied for research purposes by Virginia Commonwealth University. What we find from this study may be presented at meetings or published in papers.

All information gathered from this survey will be kept in sealed envelopes when the information is not being reviewed by the investigator. Any persons involved in the administration of the survey will attend a training session and sign a confidentiality form agreeing not to disclose or discuss any information learned from this survey. All information gathered will be stored in a password protected data base.

**Voluntary Participation and Withdrawal:**

You do not have to participate in this study. If you choose to participate you may stop at any time, and still receive the gift card.

**Questions:**

If you have any questions you may contact:

Ms. Carmen Y. Ward	(804) 258-3581	Email: <a href="mailto:wardc@vcu.edu">wardc@vcu.edu</a>
Dr. Kathleen M. Cauley	(804) 827-2633	Email: <a href="mailto:kmcauley@vcu.edu">kmcauley@vcu.edu</a>

If you have any questions about your rights as a participant in this study, you may contact:

Office for Research Subjects Protection  
Virginia Commonwealth University  
800 East Leigh Street, Suite 111  
P.O. Box 980568  
Richmond, VA 23298  
Telephone: (804) 828-0868





## Appendix F

### Grandparents Raising Middle School and High School Grandchildren Survey

Dear Grandparent:

You are to be commended and praised for your effort in raising your grandchild/grandchildren. Only you can help us to understand the issues and needs of your unique family, the Grandfamily. It is the goal of this study to build awareness and a clear understanding of how schools can support Grandfamilies. Please help us to better serve you and your Grandfamily by filling out this survey.

*All responses will be confidential and will be reported only in summary form so that individual responses cannot be traced back to the person making them. Please try to answer every question, but you may skip any questions you do not want to answer. Thank you for your valuable responses.*

**Note: If you are the caregiver for several grandchildren, please complete this survey focusing on the oldest grandchild who is in middle school or high school during the 2010-2011 school year.**

#### **I. ACADEMIC:**

1. Did your grandchild have a failing grade of "F" on their last report card in any of the core subjects (English, Math, History, Science) during the 2010-2011 school year?

Please check (√) Yes \_\_\_ No \_\_\_

2. If you answered Yes, please check (√) all that apply for the failed subjects below:

English \_\_\_\_\_ Math \_\_\_\_\_ History \_\_\_\_\_ Science \_\_\_\_\_

3. Does your grandchild fail to get homework done once a week or more? Please check (√)

Yes \_\_\_ No \_\_\_

4. If you answered Yes, please check (√) all that apply for the subjects below:

English \_\_\_\_\_ Math \_\_\_\_\_ History \_\_\_\_\_ Science \_\_\_\_\_

5. Does your grandchild have an Individualized Education Plan (IEP) for the 2010-2011 school year? Please check (√) Yes \_\_\_ No \_\_\_

During the 2010-2011 school year, please indicate if your grandchild's school **offers** the academic support listed below. Circle the number next to each support that best matches your response.

Support	Yes	No	I Do not Know
1. Pull-out class for tutoring programs during the school day to help with learning problems	1	2	3
2. Study skills classes to help with learning how to concentrate in school	1	2	3
3. Tutoring after school for core subjects (English, Math, History, Science)	1	2	3

During the 2010-2011 school year, please indicate if your grandchild **used** these academic supports listed below. Circle the number next to each support that best matches your response.

Support	Yes	No	I Do Not Know
1. Pull-out class for tutoring programs during the school day to help with learning problems	1	2	3
2. Study skills classes to help with learning how to concentrate in school	1	2	3
3. Tutoring after school for core subjects (English, Math, History, Science)	1	2	3

## **II. DISCIPLINE:**

Does your grandchild have discipline problems during 2010-2011 school year? Please check (✓)  
 Yes \_\_\_\_\_ No \_\_\_\_\_ (This could include unexcused absences from school and cutting classes.)

If you answered "no" to the above question, go to Section III.

During the 2010-2011 school year, please indicate the support you **receive** for your grandchild in the area of discipline listed below. Circle the number next to each support that best matches your response.

Areas of Discipline	Yes	No	Unsure
1. My grandchild receives help for behavior problems	1	2	0
2. My grandchild was sent to In-School Suspension	1	2	0
3. My grandchild was suspended from school	1	2	0
4. My grandchild was expelled from school	1	2	0
5. I am contacted to attend conferences with the school personnel regarding my grandchild's behavior	1	2	0

**III. SOCIAL ACTIVITIES:** During the 2010-2011 school year, please indicate if your grandchild takes part in the following social activities. Circle the number next to each activity that best matches your response.

Social Activity	Twice a year	More than twice a year	My Grandchild Does Not Participate
1. Field trips	1	2	3

Social Activity	Once a Week	Twice a Month	1-2 Times a Semester	My Grandchild Does Not Participate
2. Clubs that meet after school	1	2	3	4

Social Activity	1-2 Times a Month	1-2 Times a Semester	My Grandchild Does Not Participate
3. Special activities at school (i.e., dances, movies, plays)	1	2	3

**IV. COUNSELING SERVICES:** I would like the school counseling department to **offer support groups** for my grandchild during the school hours for:

Support Groups	Yes	No	Unsure
1. Self-esteem	1	2	0
2. Grief	1	2	0
3. Teasing/Bullying	1	2	0
4. Friendships	1	2	0
5. Behavior	1	2	0
6. School Work	1	2	0
7. Our Grandfamily Arrangement	1	2	0

Please list other topics for which you would like support groups offered:

1. Support Group (write-in): \_\_\_\_\_

2. Support Group (write-in): \_\_\_\_\_

I would like the school counseling department to **offer individual counseling** for my grandchild during school hours for:

Individual Counseling	Yes	No	Unsure
1. Self-esteem	1	2	0
2. Grief	1	2	0
3. Teasing/Bullying	1	2	0
4. Friendships	1	2	0
5. Behavior	1	2	0
6. School Work	1	2	0
7. Our Grandfamily Arrangement	1	2	0

Please list other topics for which you would like individual counseling offered:

1. Individual Counseling (write-in): \_\_\_\_\_

2. Individual Counseling (write-in): \_\_\_\_\_

**V. SUPPORT SERVICES:** Please indicate your response to the supports listed below. Circle the number next to each sentence that best matches your response.

Items	Yes	No	Unsure
1. I would like to receive training from the school so that I can help my grandchild with homework	1	2	0
2. I would like to receive training from the school to help me create a study area for my grandchild	1	2	0
3. I would like the school to invite me to attend workshops regarding new parenting techniques	1	2	0
4. I would be interested in receiving resource packets on community resources for grandparents raising grandchildren	1	2	0

5. I would like the school to help my grandchild adjust to a new school (high school or school district)	1	2	0
6. I would like the school to provide training for teachers on grandparents raising their their grandchildren	1	2	0
7. I would like my grandchild's school to offer a support group for grandparents raising grandchildren	1	2	0
8. I would like my grandchild's school to form a Grandparent Education Council consisting of grandparents, volunteer coordinator, faculty member, and principal	1	2	0

**VI. PERSONAL, FINANCIAL AND LEGAL ISSUES FOR OUTSIDE REFERRALS:**

I would like the school to assist in making **outside referrals** for the **following reasons**:

Outside Referrals for. . .	Yes	No	Unsure
1. health problems for my grandchild	1	2	0
2. behavioral support groups for my grandchild	1	2	0
3. individual counseling for my grandchild for his/her behavior issues	1	2	0
4. in-home counseling for our grandfamily	1	2	0
5. financial help for our Grandfamily	1	2	0
6. legal help for custody issues	1	2	0
7. support groups for me	1	2	0

**QUESTIONS AND REFLECTIONS**

What would you like the school to do to help your grandchild that was not listed in this survey?

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Tell us about the services you or your grandchild uses?

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During the 2010-2011 school year, my grandchild is in: (Please check  $\checkmark$ )

Middle School \_\_\_\_\_ and Grade Level \_\_\_\_\_

High School \_\_\_\_\_ and Grade Level \_\_\_\_\_

**Question for Middle School Grandparents ONLY:**

Describe the type of services from public schools that would be helpful to grandparents raising grandchildren transitioning from middle school to high school?

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**Question for High School Grandparents ONLY:**

Describe the type of services from public schools that would have been helpful to grandparents raising grandchildren transitioning from middle school to high school?

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**GRANDPARENT AND GRANDCHILD INFORMATION:**

**I. Grandparent's Information**

**Gender** - Please check ( $\checkmark$ ):    \_\_\_ male            \_\_\_ female

**Age** - Please check ( $\checkmark$ ) one category:

\_\_\_ 35-45

\_\_\_ 46-55

\_\_\_ 56-65

\_\_\_ 66-75

\_\_\_ 76-85

\_\_\_ 86+



**Your Racial or Ethnic Group** - Please check (√) all that apply:

- American Indian or Alaska Native
- Asian or Pacific Islander
- Black or African American
- Hispanic or Latino
- White

**Marital Status** - Please check (√) one category:

- single (never married)
- married
- divorced
- widow
- widower

**Education** - Please check (√) one category:

- less than high school
- some high school
- high school graduate
- at least 2 years of college, no degree
- associate degree
- college graduate
- graduate school
- post graduate school

## **II. Your Grandchild's Information**

Did the school assign a mentor or an in-school agency counselor? Yes  No

**Please fill in:**

I am the primary caregiver for my grandchild.  Yes  No

My grandchild has been living with me for \_\_\_\_\_ years.

Is this grandchild living with both grandparents?  Yes  No

If you answered "yes," is the other grandparent a step-grandparent?  Yes  No

Does at least one of the grandchild's parents live in the household? Yes \_\_\_\_\_ No \_\_\_\_\_

**Please complete:** Why are you raising your grandchild? I am raising my grandchild because...

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**Grandchild's age now:** \_\_\_\_\_

**Grandchild's gender:** Please check (√) \_\_\_\_\_ male \_\_\_\_\_ female

**Grandchild's Racial or Ethnic Group** - Please check (√) all that apply:

- \_\_\_\_\_ American Indian or Alaska Native
- \_\_\_\_\_ Asian or Pacific Islander
- \_\_\_\_\_ Black or African American
- \_\_\_\_\_ Hispanic or Latino
- \_\_\_\_\_ White

**YOU ARE AT THE END OF THIS SURVEY  
THANK YOU VERY MUCH**

## VITA

### Carmen Yvonne Ward, Ph.D.

#### Education

Ph.D., VIRGINIA COMMONWEALTH UNIVERSITY, May 2012  
Richmond, VA *Educational Leadership*

Post-Master's Certificate, VIRGINIA COMMONWEALTH UNIVERSITY, December 2002  
Richmond, VA *Principals and Supervisors Program*

M.Ed., VIRGINIA COMMONWEALTH UNIVERSITY, December 2001  
Richmond, VA *Counselor Education*

M.M., CATHOLIC UNIVERSITY OF AMERICA, May 1981  
Washington, DC *Vocal Pedagogy*

B.M., UNIVERSITY OF RICHMOND, May 1979  
Richmond, VA *Music Education*

#### Licensure and Certifications

Virginia Postgraduate Professional License in Administration and Supervision, PreK-12

Virginia Postgraduate Professional License in School Counseling, PreK-12

Virginia Postgraduate Professional License in Music in High and Elementary

Virginia Division Superintendent License

Virginia Certificate of Completion of the Technology Standards for Instructional Personnel

#### Leadership Assessment

*Central Virginia Leadership Academy*, May 2002: Virginia Commonwealth University,  
Richmond, VA

### **Administrative Appointments**

- 08/01/2004 – 2007      *Assistant Principal*, John Marshall High School, Richmond Public Schools, Richmond, VA
- 06/21/2004 – 07/26/2004      *Summer School Principal*, Thomas C. Boushall Middle School, Richmond Public Schools, Richmond, VA
- 06/23/2003 – 07/28/2003      *Summer School Principal*, Thomas C. Boushall Middle School, Richmond Public Schools, Richmond, VA

### **School Counseling Appointments**

- 08/15/2007 - Present      *High School Counselor*, Huguenot High School  
Richmond Public Schools, Richmond, VA
- 08/01/2002 – 06/18/2004      *Middle School Counselor*, Thomas C. Boushall Middle School  
Richmond Public Schools, Richmond, VA

### **Teaching Appointments**

- 08/24/1991 – 06/20/1996      *Director of Choral Music*, Binford Model Middle School  
Department of Music, Richmond Public Schools, Richmond, VA
- 08/25/1990 – 06/21/2002      *Director of Choral Music*, Franklin Military Academy  
Richmond Public Schools, Richmond, VA
- 08/28/1987 – 06/21/2002      *Director of Choral Music*, Armstrong High School Department of  
Music Richmond Public Schools, Richmond, VA
- 2001 - 2002      *Lead Conductor* for Richmond Public Schools All-City Chorus
- 1993      *Co-Chair* for the Virginia Music Education Association District I Chorus  
Auditions
- 1990      *Co-Chair* for Virginia Music Education Association District I Chorus
- 08/25/1982 – 06/20/1987      *Director of Choral Music*, Petersburg High School Department of  
Music Petersburg Public Schools, Petersburg, VA
- 08/25/1982 – 06/20/1987      *Director of Choral Music*, Peabody Junior High School  
Department of Music Petersburg Public Schools, Petersburg, VA

## **Community Music School Academic Appointments**

August 1981 - May 1991      *Voice Instructor*, Community Music School of Virginia  
Commonwealth University, Richmond, VA

September 1981 - May 1989 *Voice Instructor*, Swift Creek Academy of the Performing Arts  
Richmond, VA

## **Academic Professional Recognition**

*Fifteen-Year Service Award Pin*, 2002, Richmond Public Schools, Richmond, VA

*Teacher of the Year*, 1998, Armstrong High School, Richmond Public Schools, Richmond, VA

*Fifteen-Year Service Certificate*, 1997, Music Educators National Conference (MENC)

## ***K-12 Professional Development, Conferences, and Workshops***

### **02/27/2007**

*iSafe Staff Development*

Department of Instruction, Richmond Public Schools, Richmond, VA  
Received strategies to promote internet safety.

### **12/18/2006**

*National Incident Management System (NIMS)*

Department of Safety and Security, Richmond Public Schools, Richmond, VA  
Session designed to orientate administrators to a comprehensive national approach to incident management, which is applicable at all jurisdictional levels and across disciplines.

### **11/07/2006**

*Fred Jones Classroom Management Model*

Department of Instruction, Richmond Public Schools, Richmond, VA

### **08/07-12/2006**

*Leadership Academy*

Department of Instruction, Richmond Public Schools, Richmond, VA

### **06/25-29/2006**

*Virginia Association of Secondary School Principals (VASSP) Conference in Williamsburg,  
Virginia*

Virginia Association of Secondary School Principals, Richmond, VA

**08/01/2006**

*Understanding Economic Diversity to Increase Student Achievement*

Department of Instruction, Richmond Public Schools, Richmond, VA

Presenter: Ruby K. Payne, Ph.D., leading U.S. expert on the mindsets of poverty, middle class, and wealth.

**03/10/2005**

*Transition Outcomes Project: Preparing Students with Exceptionalities for the Transition to High School and the World of Work*

Department of Instruction, Richmond Public Schools, Richmond, VA

**10/13/2004**

High School Principals' Special Education Workshop, Fredericksburg, Virginia

**08/2004**

*Completion of Academic Review Certification*

Virginia Department of Education (Office of Accreditation), Richmond, VA

**03/18/2004**

Using Data to Improve Student Learning

Metropolitan Educational Research Consortium (MERC), *Richmond, VA*

**04/24-26/2003**

*Virginia Education Law Conference, Williamsburg, VA.*

Participated in workshop presentation sessions and panels. Heard speakers address current educational legal issues and participated in small group discussions and Q&A sessions.

**04/23/2003**

*2<sup>nd</sup> Annual Commonwealth Educational Policy Institute (CEPI) Legislative Conference, Williamsburg, VA*

**03/25/2003**

*Caper/Peer Tech Prep Consortia 2003 Counselor's Institute, Richmond, VA*

Participated in this institute which focused on preparing Virginia's leaders.

**01/2003**

*Inclusion Seminar (Students with Disabilities)*

Appelbaum Training Institute, *Richmond, VA*

Participated in this seminar to gain strategies for success in the inclusive classroom.

**07/08-12/2002**

*The College of William & Mary's School of Education School Leadership Institute and Richmond Public Schools, Richmond, VA.*

Participated in this institute, which promoted the development of emerging administrators in elementary and secondary public schools. The institute was committed to identifying and nurturing the next generation of leaders who will strive to impact public schools.

## **Presentations: K-12 Professional Development, Conferences, and Workshops**

**02/15/2007**

*Fred Jones Classroom Management Model*

Presented to Faculty and Staff of John Marshall High School, Richmond Public Schools, Richmond, VA

**12/07/2006**

*Fred Jones Classroom Management Model*

Presented to Faculty and Staff of John Marshall High School, Richmond Public Schools, Richmond, VA

## **Academic and Professional Activities**

*Presenter: 35<sup>th</sup> Annual Conference of the Eastern Educational Research Association (EERA) – February 17, 2012- Paper Topic:*

Middle School and High School Grandparents' Perceptions of Needed Services in the Public Schools

## **Community Service Leadership**

*Member of the Virginia Commonwealth University Alumni Council Board, Richmond, VA, 2007- Current*

*Guest Lecturer at The University of Richmond for the Hill-Cigna Scholars Program Series entitled *Standing on the Shoulders of Giants*, Richmond, VA, March 28, 2007*

*Member of the Westhampton College Alumnae Association Governing Board, Richmond, VA, 2002-2004*

*Choral Director for the Christian Arts Choir, Richmond, VA, 2001-2005*

*The Virginia - D. C. General Tour Manager for Eleone Dance Theatre of Philadelphia, PA, 1998-Present*