Grandparents Raising Grandchildren: A Diverse Population

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SUMMARY. The number of grandparents who are raising grandchildren has risen dramatically as the result of several social trends. Within this article, diversity aspects of this population are explored including characteristics of the grandparents and grandchildren. In addition, support groups, the primary intervention for custodial grandparents, are overviewed with specific attention to models that have relevance for subpopulations of care providers. Finally, child welfare and kinship care policies are examined and critiqued from a diversity perspective. *[Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <docdelivery@haworthpress.com> Website: <http://www.HaworthPress.com> © 2004 by The Haworth Press, Inc. All rights reserved.]*

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Although grandparents have historically assumed roles in caring for their grandchildren, the number of grandparents in primary caregiving roles has increased dramatically. A national probability sample of grandmothers indicates that 43% provide supportive child care for grandchildren (Baydar & Brooks-Gunn, 1998). Of particular interest, however, is the number of grandparents who have primary responsibility for raising grandchildren. Current estimates of these "custodial grandparents" indicate that about 5-6% of children live in households with grandparents, with about 10% of grandparents having responsibility to raise children (Pebley & Rudkin, 1999).

Caregiving grandparents (also called "custodial grandparents") are a diverse group of individuals. One commonality, however, is the unexpected experience that many custodial grandparents share in having child-raising responsibility again. The impact of this unexpected and/or unplanned event has different outcomes for grandparents as a result of their characteristics and life situations. This article will present an overview of the diversity that is found within the custodial grandparent population, and discuss social work practice and policy for this group.

DIVERSE CHARACTERISTICS OF CUSTODIAL GRANDPARENTS

The experience of raising children is one that impacts various dimensions of a grandparent's life. Various outcomes appear to cut across experiences within the general population of custodial grandparents. Outcomes include a decrease in overall health and well-being of these grandparents, as raising grandchildren involves physically and emotionally demanding tasks (Bowers & Myers, 1999; Fuller-Thomson & Minkler, 2000; Jendrek, 1994; Musil, 1998; Szinovascz, DeViney, & Atkinson, 1999). Social well-being may also suffer, as less time and energy is available for social contacts and other relationships (Minkler, Roe, & Robertson-Beckley, 1994; Strawbridge, Wallhagen, Shema, & Kaplan, 1997). These consequences can create difficulty in grandparents' lives, and physical and emotional functioning.

There are caregiving aspects, however, that are more associated with certain profiles of grandparents. For the purpose of this article, aspects

of diversity within this population will be explored including race/ethnicity, age, gender, and geographic location. In addition, service and policy-related issues which are relevant for custodial grandparents will be highlighted and critiqued.

Race/Ethnicity

While custodial grandparents are represented in all racial and ethnic groups, African American and Latino grandparents are disproportionately represented within this population (Caputo, 1999; Fuller-Thomson, Minkler, & Driver, 1997). For this reason, one area of research with custodial grandparents has identified aspects of care provision for grandparents by racial/ethnic groups. Studies have focused on the experience of African American and Latino grandparents, and have compared their experiences to their White counterparts.

African American grandparents. An historical review of the grandparent role in African American families demonstrates that these family members have served an important role in caring for children. One function of African American grandparents has been as "kinkeepers" within the family, providing support during times of economic and social stresses such as slavery, or migration to other geographic areas for greater labor force opportunities (Burton & Dilworth-Anderson, 1991; Hunter & Taylor, 1998). Compared to White grandparents, African Americans are "less likely than Whites to embrace norms of noninterference" with higher probability that they will be involved in supporting and providing resources to younger generations within their families (Pruchno, 1999, p. 211). In kinship care arrangements, family boundaries may be quite fluid with the grandparents maintaining an informal custodial arrangement with the grandchildren. In addition, it is not uncommon to have the children's parents enter and exit the family system with some regularity (Baird, John, & Hayslip, 2000).

As social conditions have changed, however, the context and roles within families where grandparents raise children have also shown marked differences. The most prevalent reason for African American grandparents to be in custodial caregiving roles is the drug addiction of their own child. Crack cocaine abuse, in particular, has been a major factor within these families (Minkler et al., 1994). When a son or daughter is addicted to crack, children may experience abuse, neglect or maltreatment as a result of the parent's addiction. Grandparents often have additional struggles in raising children from these backgrounds, as they may exhibit challenging behavioral manifestations as a result of associated trauma.

In addition to child-rearing challenges, other stressors have been reported by African American grandparents. These caregivers incur psychological, emotional, social and financial stress within their caregiving roles (Burton, 1992). This stress is particularly acute for many African American grandparents, especially grandmothers, who have experienced the "triple jeopardy" experience of being Black, female, and in late life. A life long experience of oppression and discrimination in social and economic roles creates a limited buffer for these caregivers when they assume a caregiving role for grandchildren.

In addition, the responsibility of raising grandchildren may attenuate the grandparent's social network which can lead to feelings of burden and depression. In addition, health problems may be exacerbated or occur as a result of child-raising demands (Minkler, Roe, & Price, 1992). While these stresses are experienced for many African American grandparents, those who are in "off time" caregiving roles (e.g., are beyond the usual time frame for parenting) are especially at risk for these stressful experiences (Burton, 1996).

Latino grandparents. Similar to African Americans, Latinos are disproportionately represented in the population of custodial grandparents. One national study on custodial grandparents estimated that Latinos comprise about 10% of relative caregivers (Chalfie, 1994). In addition to the sheer number, the ethnicities represented in this group of caregivers is diverse and include Puerto Rican, Dominican, Cuban, Mexican, Ecuadorian, Honduran, Panamanian, and Nicaraguan grandparents. Within the Latino population, there is considerable diversity in terms of cultural practices and other social factors.

Combined with the "typical stresses" of caregiving, these grandparents often struggle with language and acculturation difficulties (Burnette, 1999). Quite obvious are the problems that grandparents encounter due to language barriers, including interacting with their grandchildren's school, health providers, and other services. In addition, the cultural norms may pose barriers in help-seeking behaviors of these grandparents, especially the grandmothers. There is a Latino cultural expectation that "women should be self-sufficient and must not show vulnerability by disclosing family problems outside the home environment" (Cox, Brooks, & Valcarcel, 2000, p. 227). This attitude can add to the isolation, alienation and shame that is experienced by grandparents who are in a care provision role.

Comparisons by race/ethnicity. In order to identify unique and common experiences, research on custodial grandparents has compared caregivers by race/ethnicity. Typically, research focuses on the consequences of caregiving; that is, the impact of this role on the grandparent's social, physical, and emotional functioning. In addition, the experience of support from both informal and formal sources has also been a major theme.

Some important similarities exist in the experiences of custodial grandparents. In a study comparing African American and White grandparents, several areas of commonality were reported (Pruchno, 1999). One shared stressor was balancing work demands and child care, such as having to miss work or leave early, and being unavailable outside of school hours. Regardless of race, grandparents reported high levels of satisfaction in their role performance. Similarly, neither African American nor White married grandparents reported detrimental consequences of child care on their relationship with their spouse.

Differences have been found in the experiences of custodial grandparents by race/ethnicity, however. African American grandparents are more likely than Whites to have friends who are raising grandchildren, which may decrease the sense of isolation in this role (Pruchno, 1999). In addition, another study that examined caregiving in African American and White families reported a greater degree of caregiving burden in White families (Pruchno & McKenney, 2000). Interesting, other predictors of burden (besides race) were being in a relationship (e.g., married or partnered), raising grandchildren with problematic behaviors, being in poorer health, and having poorer relationships with the child's father. This finding suggests that both personal factors and family dynamics may play a larger role in defining the caregiving outcome for White grandparents who are raising grandchildren.

In comparisons that included Latino grandparents, this group was especially at risk for poverty and lack of resources. In one study comparing African Americans, Latinos, and White grandparents, Latinos had the highest poverty rate (33% of the sample) and the lowest educational attainment (Goodman & Silverstein, 2002). For some, the lack of a legal immigration status compounds their dire economic situation as they are ineligible to receive various forms of social supports.

Gender

As in other caregiving situations, females overwhelming assume the custodial grandparent role. In establishing a caregiving hierarchy, studies suggest that most non-parent kin caregivers are grandmothers, followed next by aunts (Burnette, 1997; Dressel & Barnhill, 1994). Studies including grandparents of both genders consistently report that females greatly outnumber men, with estimates in study samples ranging from

77% to 86% being grandmothers (Fuller-Thompson et al., 1997; Hayslip, Shore, Henderson, & Lambert, 1998; Silverstein & Vehvilainen, 1998). Clearly, this is another caregiving situation that is predominantly filled by women.

The experience of men in custodial grandparent roles has started to be explored, albeit in limited ways. In a study of 33 grandfathers who participated in two grandparent support programs in the Northeast, the experience of caring for grandchildren was compared to grandmothers who also were program participants (Kolomer & McCallion, under review). These grandfathers were either primary caregivers, or jointly caring for their grandchildren with their spouses. Results indicated that caregiving grandfathers were more likely to be White, married, working outside the home, and home owners compared to custodial grandmothers. In addition, depression scores were clinically significant for grandmothers but not for the grandfathers. Through focus group discussions conducted with these grandfathers, several caregiving stressors were reported including a loss of free time, worries about future care for the grandchildren, and having health concerns.

Grandchildren may also experience their relationship with their grandfather differently than the one with their grandmother. In research with grandchildren who were being raised by grandparents, the children reported that grandfathers played a less significant role in their lives than their grandmothers (Hayslip, Shore, & Henderson, 2000). Differences seem to be gender related, however, as female children reported the most salient relationships with grandmothers while male children reported more parity in their relationships with both grandparents. Clearly, the role and experience of grandfathers who are raising grandchildren is an area where additional research is warranted.

Age

Grandparenting is a generational, not an age-based, role within the family. Therefore, a grandparent can be a thirty-five or ninety-year-old person. In addition, custodial grandparents may actually be the children's great-grandparent, as often these two roles are aggregated within the research. The timing and transition that occur within intergenerational caregiving situations have an impact on the experience and outcome for the care providers with "off time care" creating role stress and overload (Burton, 1996). However, studies on custodial grandparenting often include age as a variable for sample description, without investigating the experience of caregiving at different life phases.

The limited research in this area suggests that older care providers experience greater difficulty in role performance. In a study of rural grandparents, older caregivers in the sample reported greater physical and mental health problems than the younger ones (Robinson, Kropf, & Myers, 2000). As Burnette (1997) states, "Grandparents who are engaged in their own age-appropriate developmental tasks may be psychologically or physically unprepared to assume this level of responsibility, particularly given the challenging circumstances of this role" (p. 494).

Geographic Location

Although the majority of research on custodial grandparents has been conducted in urban areas, grandparent caregiving is not limited to these communities. One estimate indicates that about 25% of skipped generation families live in rural areas (Fuller-Thomson et al., 1997). While rural areas and small towns are sometimes perceived as idyllic, these communities experience various social problems including poverty, limited resources, and geographic isolation.

The experience of rural grandparents has some unique aspects, when compared to custodial grandparents in more urban areas. Transition issues may be especially stressful for the grandchildren, who may be leaving more urban settings to live with grandparents in smaller communities. Behaviors, norms, and experiences of children and adolescents that are accepted in urban locations (e.g., diverse lifestyles, clothing) may be shunned in smaller locations (Myers, Kropf, & Robinson, 2002). The isolation of children from peers can make the transition especially difficult for all members of the household.

Grandparents in rural communities may also struggle with locating and accessing resources to assist them in caring for their grandchildren. In research on mental health of grandparents in rural areas, findings indicated that these grandparents had low levels of both informal and formal support (Robinson et al., 2000). School districts, which may be a source of aid in some communities, seem especially unprepared to interact with grandparents in more rural areas. In addition, other sources of support (e.g., support groups, case management programs) are unlikely to be found in rural communities.

DIVERSITY OF GRANDCHILDREN RAISED BY THEIR GRANDPARENTS

In addition to the forms of diversity that exist within the population of custodial grandparents, grandchildren are also a heterogeneous group. The characteristics of the children include both behavior and medical issues, which are often related to the reasons that they are in the care of their grandparents. As a result, these children may present additional challenges for the grandparents within their care provision role.

Health Related Concerns

One pathway into care with grandparents is HIV/AIDS, as an increasing number of children and adolescents are being raised by grandparents because of parental illness or death. These youngsters, termed "AIDS orphans" (Michaels & Levine, 1992), have experienced social and emotional trauma through the illness (and possibly death) of their parent. In addition, they may be HIV-infected themselves which may create additional physical and emotional concerns within the family. Caring for a grandchild who is HIV+ also creates emotional stresses for the grandparents such as anticipatory grief at the prospect of losing grandchildren to this disease, and keeping this medical condition secret as a way to avoid the stigma that is still associated with HIV/AIDS (Caliandro & Hughes, 1998; Pinson-Milburn, Fabian, Schlossberg, & Pyle, 1996; Poindexter & Linsk, 1999).

The disability status of a grandchild is another situation that many grandparents face. Due to the high prevalence of addiction in the etiology of grandparent caregiving, it is not surprising that the children in these families may have medical conditions that are a result of prenatal alcohol or drug exposure. In studies of White and African American custodial grandparents who were raising grandchildren with and without disabilities, grandparents with disabled grandchildren reported greater unmet service needs and depressive symptoms (Brown & Boyce-Mathis, 2000; Force, Botsford, Pisano, & Holbert, 2000; Kolomer, McCallion, & Janicki, 2002). In addition, transfer of care issues (e.g., residential placement, quality of substitute care) are particularly stressful for older parents who remain in their caregiving role for sons or daughters with disabilities (Kelly & Kropf, 1995; Kropf, 1997). The worries and fears that exist with older parents most probably create anxiety for custodial grandparents as well.

Behavioral Challenges

In addition to health related issues, some grandparents experience the challenges of raising a child with difficult behaviors. Pinson-Milburn et al. (1996) outline the various events experienced within the lives of children and adolescents who are being raised by grandparents, and some of the emotional and behavioral consequences. One is the sense of shame that children may experience as a result of living with a grandparent. This feeling may be evident when a grandparent attends routine functions (e.g., PTA meeting, Little League game) where there is an obvious difference between these caregivers and the parents of their peers. Children may also feel a sense of difference and isolation from peers. This feeling was demonstrated by a young girl who participated in a support program for grandchildren being raised by grandparents. During the first outing of the group, she saw another grandmother walking her grandchild to one of the program vans, and she loudly exclaimed, "Oh look, she lives with her grandmother too!" (Robinson & Kropf, 2001). This experience was a normalizing one for her, and provided a mirroring of her family life by one of her young peers.

Children also may express the feelings of abandonment and anger toward their absent parent, and may also have psychiatric or physical health conditions that are a consequence of pre- and post-natal parental drug or alcohol abuse. These conditions are difficult ones for any care provider to handle, and may be especially problematic for grandparents in mid- or late-life who have fewer physical and social resources to be able to manage them effectively.

SUPPORT GROUP INTERVENTIONS

As already described, becoming a primary caregiver to a grandchild can lead to additional stressors and strains in the life of a grandparent. Some of these strains include physical problems, financial difficulty, limited housing space, regret, bereavement, and social isolation (Emick & Hayslip, 1999; Kelley, Yorker, & Whitley, 1997; Kolomer & McCallion, under review; Silverstein & Vehvilainen, 1998). Grandparent caregivers are also at higher risk for depression and anxiety disorders than other groups (Flint & Perez-Porter, 1997; Generations United, 1999; Janicki et al., 2000; Kelley et al., 1997; Kolomer, 2000; Phillips & Bloom, 1998; Roe et al., 1996). To alleviate these psychosocial conditions, many researchers and practitioners have strongly recommended

the use of support groups for grandparent caregivers (Burton, 1992; Dressel, & Barnhill, 1994; Kolomer, McCallion, & Overendyer, 2003; Minkler & Roe, 1993; Myers et al., 2002).

Peer-led support groups are one type of group that has been widely utilized by grandparent caregivers. The goals of these groups are providing mutual support, eliminating isolation, and sharing the challenges of raising grandchildren with others in similar situations. There are over 400 such groups registered with AARP's Grandparent Caregiver Information Center such as Relatives as Parents Program (RAPP), Grandparents as Parents (GAP), and Raising Our Children's Kids (ROCK) (Strom & Strom, 1993). In addition to mutual aid, many groups provide important information regarding guardianship and custody issues, child care, how to work with a child's school, and other legal matters.

Groups have also been started that target a specific grandparent caregiving population that use professionals as group leaders. Cox (2002) designed a support/education group specifically for empowering African American grandparent caregivers and then replicated the same model with Latino grandparents. This model provides grandparents with information and education, with an additional outcome of having the caregivers themselves become resource and peer educators for other custodial grandparents. The participants in the group had significant input into the design of the curriculum of the 12-week course. Following the completion of the group, several of the grandparents made presentations to other grandparent caregiver support groups thereby spreading the goal of empowerment.

McCallion and colleagues (2000) designed and implemented an intervention for grandparents caring for children with developmental disabilities. The intervention consisted of case management services and support/education groups. Participants were primarily African American or Latino, and were living in inner cities. Case management services included, but were not limited to, connecting families with health services, entitlements, summer camps, housing, and interfacing with schools. The six-to-eight-week support group meetings focused on content and information identified by the participants as critical information for their role as care providers. Content included custody issues, information about developmental disabilities and available services, relaxation techniques, understanding school systems, and working with the child's biological parent. Pre- and post-tests of the grandparent caregivers showed significant decreases in depressive symptoms, and increased locus of control (Kolomer et al., 2002).

Schools are increasingly being used as a resource for recruiting grandparent caregivers to group interventions. Burnette (1998) targeted African American and Latino grandparents in an inner city school to participate in a psychoeducation/support group. Information about local, regional, and national resources was provided to the grandparents and discussion focused on stressors, supports, managing family conflict, parenting skills training, legal options, entitlement programs, advocacy, and community-based initiatives. Following participation in the support group, the grandparents' scores for depressive symptoms improved.

For African American and Latino grandparent families, the need for strong community supports is necessary to maintain the family unit. In society today, challenges and conditions have changed so that the informal supports that once existed are unavailable (McCallion, Janicki, & Grant-Griffin, 1997; Kolomer et al., 2003). As Cox states, "Lifelong histories of poverty, low incomes, poor health status, discrimination, and poorer physical functioning exacerbate the caregiving needs" (2002, p. 46). Program planners need to design culturally responsive programs (Chenoweth, 2000). Although all of the programs that were described were designed by researchers, the caregiving grandparents had tremendous input into the programs. Grandparent caregivers should play a larger role in the design and implementation of their own services and resources.

PUBLIC POLICY INITIATIVES

While greater numbers of grandparents are raising grandchildren, public policies have not been enacted that support the diversity of care arrangements within family systems. Policy initiatives often make assumptions about families, such as care will be permanent or biological parents are totally uninvolved with the children, that are untrue for some families. When considering grandparents of color, the value and meaning of their "family" may be inconsistent with the concept which provides the foundation for legislation. Within this section, major policy initiatives that are part of informal caregiving arrangements, and those associated with more permanent arrangements, will be highlighted and critiqued.

Informal Caregiving Arrangements

Most instances of custodial caregiving are done within an informal custody arrangement, which means that grandparents have "Physical

Custody," as opposed to "Legal Custody" of the child. Typically, the parents maintain the rights over the child which opens real possibilities that the parent(s) can reassume custody of the child at any point (Albert, 2000; Flint & Perez-Porter, 1997). This possibility is troubling to many grandparents, who live with a real fear that their grandchild may return to substandard or harmful conditions if a parent chooses. Grandparents in informal caregiving roles may also have limited access to decision-making, as in school systems or medical situations (Flint & Perez-Porter, 1997).

An option to enhance decision-making capacity is to have the grandparents pursue legal custody or legal guardianship. *Legal custody* allows the grandparent to make day-to-day decisions without having control over the child's property or financial responsibility. *Legal guardians* have decision-making capacity, but the parents' rights are still maintained (Flint & Perez-Porter, 1997). The requirement to legalize the caregiving relationship may be especially dystonic for families of color who have deep meaning systems attached to the concept of "family." Historically, African Americans have taken in grandchildren, nieces, nephews, and even orphans in times of need (Burton, 1992; Kolomer et al., 2002) which makes government interference in family matters seem inconceivable. Yet, without a formal arrangement, grandparents are limited in the ability to access the necessary resources and services for their grandchildren.

Kinship Foster Care

In the past 25 years, the Federal Government has put into place several policies, ostensibly to keep children with their families of origin or within a family which most closely resembles their own cultural heritage. However, additional sets of circumstances existed including a weakening of the foster care system which resulted from changing labor force trends of women, low recruitment of foster families, proliferation of lawsuits in child welfare, an increase in child abuse/neglect reports, and increased intensity of children who needed placement (Dubowitz, Feigelman, Harrington, Starr, & Zuravin, 1994; Ingram, 1996; Kolomer, 2000). The challenge of finding appropriate placements was further intensified by the dramatic increase in substance abuse, poverty, homelessness, and HIV infection within families who had children that needed foster care (Anderson, 1990; Burnette, 1997; McGowen & Studt, 1991). By utilizing relatives as caregivers, the demand for foster families could be alleviated.

Maintaining children in cultural communities. A trend within child welfare has been to keep children within their cultural communities. The Indian Child Welfare Act of 1978 was the first law based upon this cultural assumption. This Act was designed to maintain tribal authority over the placement of Indian children as a high percentage of Native American families were misserved by agencies that lacked an understanding of Native American culture and history (*Wabanki Legal News,* 2002). The law allowed Native American children needing placement to remain within their own community and remain connected to their culture.

Another Act, Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) defined "permanency planning" as a goal for children at risk of or who have been removed from their parents' care (Burnette, 1997). Emphasis was placed on "a set of goal-directed activities designed to help children live in families that offer continuity of relationships with nurturing parents or caretakers and the opportunity to establish lifetime relationships" (Maluccio, Fein, & Olmstead, 1986, p. 5). This policy introduced the concept of children being placed with relatives as the placement of choice. The year before the Adoption Assistance and Child Welfare Act was enacted, the Supreme Court barred the exclusion of relatives from the Foster Care System thereby giving permission for states to use relatives as foster families (*Miller v. Youakim)* (Burnette, 1997).

In spite of policies that aimed at preserving the bonds between children and their culture and family, gaps exist in the intent and outcome of policy initiatives. For example, some states require that kinship foster homes follow the same rules and regulations as required of traditional foster homes; including have case managers for the family or required parent-training courses (Kolomer, 2000). These policies are viewed as intrusive for some families, and impact the relationships and affectional ties between members. African American families who have a long history with interfering public policy, for instance, may harbor mistrust about the intention of these policy initiatives. In addition, caregivers may face criticism by others in their community for accepting government funding for what is seen as a moral responsibility to take in family members during times of need (Crumbley & Little, 1997; Kolomer, 2000).

Time limitations in care. Other child welfare policy addresses time limits for children within foster care. The Adoption and Safe Families Act of 1997 provides guidelines to limit the time children can stay wards of the state (Albert, 2000). Within 12 to 15 months of entering the foster care sys-

tem, "reasonable efforts" must be made to reunite a child with his or her biological parents. If unsuccessful, parental rights must be terminated.

While the intention to prevent foster care drift is a good one, this policy does not consider the norms of diverse racial/ethnic families. For example, adoption is inconsistent with the traditions of African American families (Burnette, 1997). Adopting one's own grandchildren changes the family structure and also denies the biological parent a role within the family. The termination of parental rights also ends the opportunity for the caregiver to become a grandparent to the child again. All of these assumptions can create problematic situations for grandparents, and can compromise functioning and relationships within the family system.

CONCLUSION

Examining custodial grandparents using a diversity perspective provides an understanding of ways that the profession of social work can be more responsive to the experiences of these caregivers. From a practice perspective, support groups have been a primary method of providing information and social support. However, the diversity within the population needs to be a part of assessing the structure and composition of the group. An assessment of the age, gender, and community type (e.g., rural, urban) will provide the facilitators with a beginning point to understand some of the issues that grandparents face.

In addition, a better theoretical understanding of grandparents is needed to guide practice. Information about transitions and risk junctures that might have particular meaning for diverse families is needed to understand the dynamic quality of life (Kropf & Wilks, 2003). For example, the current cohort of African American grandparents may have experienced segregated classrooms when they were enrolled as students. Their experience with educational institutions may impact their current understanding and participation with their grandchildren's school. Teachers, school social workers, and other educational personnel need to be sensitive to these issues when working with grandparents. Other junctures or risk situations may include late childhood/adolescence, where experimentation with drugs or sexual behaviors may begin. Work with families at this critical phase may help families from averting crises in functioning.

The diversity of grandparents who provide care also impacts policy-related issues of kinship care. Due to the various connotations of "family," grandparents who are raising grandchildren may or may not be interested

in formalizing their caregiving relationship. While various forms of formalized care exist, grandparents may find themselves in the position of pursuing actions that are antithetical to their beliefs about family systems. Adoption is a prime example where formal ties between biological parent and child are severed. For families of color, especially African American families that have an historic experience with separation of family members, this option may be culturally dystonic. Policies that diminish families' sense of their loyalties and bonds need to be reexamined in light of a more multicultural framework.

Finally, implications for social work education are also apparent. Content on grandparent-headed families can be infused in several places of the curriculum (Kropf & Burnette, 2003; Kropf & Wilks, 2003). Teaching strategies that provide students with an opportunity to learn about diversity within this population include the use of case studies that compare the experience between families from diverse racial backgrounds, specifically addressing the strengths and resilience that are evident. Other instructional strategies include service learning which is a type of community service that promotes both student develpment and community goals (Gray, Ondaatje, & Zakaras, 1999). Examples of service learning projects could be a "grandparents day" in a school setting or a community-based aging service, or a resource directory for grandparents who are raising grandchildren. These instructional methods provide students with a way of broadening their conceptualization of "family," and sensitize them to the diversity within this population of grandparents who are raising their grandchildren.

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