ABSTRACT

GRANDPARENTS RAISING THEIR GRANDCHILDREN
NEW ROLES BEING DEFINED

By Dawn Rajean White

The role of grandparent is changing as some take on the new role of being surrogate parents to their grandchildren. Using both quantitative and qualitative approaches, five grandparent caregivers who were primarily responsible for their grandchild were studied. The focus of this study was on 1) the reasons these grandparents assumed the surrogate role; 2) the needs and challenges these grandparents faced; 3) the resources these grandparents needed to assist them in this new role. The resulting five case studies highlighted unique aspects of grandparents raising their grandchildren where four common themes were found: informal custody was established; feelings of failure as parents to their biological children; the grandchild not returning to their parent’s home when given the option; and,- grandparents lack of feelings of regret for becoming a surrogate parent. The findings from this study can be used to develop a support system to aid in the reunification of the family; to alert grandparents of the services available to them; and, help the child cope with the situation they are faced.
GRANDPARENTS RAISING THEIR GRANDCHILDREN:
NEW ROLES BEING DEFINED

A Thesis

Submitted to the

Faculty of Miami University

in partial fulfillment of

the requirements for the degree of

Master of Science

Department of Family Studies and Social Work

by

Dawn Rajean White

Miami University

Oxford, Ohio

2007

Advisor______________________________

Dr. Elise Radina

Reader_______________________________

Dr. Chuck Hennon

Reader_______________________________

Dr. Sean Newsome
TABLE OF CONTENTS

CHAPTER 1: INTRODUCTION 1

THE ROLES OF GRANDPARENTS 1
STATEMENT OF THE PROBLEM 2

CHAPTER 2: LITERATURE REVIEW 4

RELEVANCE 4
LITERATURE REVIEW 5

CHAPTER 3: METHODOLOGY 11

THE RESEARCHER 11
SUBJECT POPULATION 13
RECRUITMENT 13
PARTICIPANTS 14
TREATMENT OF PARTICIPANTS (RISKS, DISCOMFORTS, BENEFITS) 14
SAFEGUARDING INFORMATION 15
INFORMED CONSENT 15
RESEARCH PROCEDURE 18
THE STUDY 19
DATA COLLECTION 20

CHAPTER 4: RESULTS 22

CASE STUDIES 24
CASE STUDY 1: “JESSICA” 24
  Researcher’s Perceptions 25
CASE STUDY 2: “JIMMY AND PETER” 26
  Researcher’s Perceptions 29
CASE STUDY 3: “ADAM” 29
  Researcher’s Perceptions 31
CASE STUDY 4: “SAMUEL” 31
  Researcher’s Perceptions 33
CASE STUDY 5: “IAN” 34
  Researcher’s Perceptions 35
THEMES 36
CHAPTER 5: DISCUSSION/CONCLUSIONS 38

LESSONS LEARNED 38
UNANTICIPATED FINDINGS 40
LIMITATIONS 41
BIASES 42
RECOMMENDATIONS FOR FURTHER STUDY 43

REFERENCES 45

APPENDIX A 50

APPENDIX B 65

APPENDIX C 66

APPENDIX D 67

APPENDIX E 68

APPENDIX F 69

APPENDIX G 70

APPENDIX H 73

APPENDIX I 74

APPENDIX J 81

APPENDIX K 91
LIST OF TABLES

TABLE 1                      2
TABLE 2                      9
TABLE 3                     10
TABLE 4                     17
TABLE 5                     23
ACKNOWLEDGEMENTS

It has been a very difficult and laborious six years to reach this point in my educational career. Without the direction given this past year by my new thesis chair, Dr. Elise Radina, I am definite I would not be reaching the end of my endeavor at this particular time. For this, I would like to acknowledge my sense of gratitude to her for providing the support and encouragement I needed to see my goal come to fruition.

I would also like to acknowledge the sacrifices made by my family to allow the pursuit of my educational endeavors. To my husband, Steve, for his patience and emotional support; to my daughter Ana, for it is with her in mind that I strive to reach my goals and be the best person I can be; and, to my parents for believing in me when I did not.

I also want to thank Sandy for the time she spent editing my thesis and providing the unbiased review I needed to complete this fulfillment. She has been a great friend.
Chapter 1: Introduction

The Roles of Grandparents

To Grandmother’s House We Go and Stay is not only the title of Carole Cox’s (2000) book but also a recurring theme facing grandchildren today. Historically, parenting roles by a grandparent have been tied to life events: death, divorce, and abandonment. Grandparents are finding themselves in a tricycle of caregiving – caring for their parents, their grandchildren and often their children (Climo, Patterson & Lay, 2002). The type of involvement grandparents have in the lives of their grandchildren is also changing (Rodgers & Jones, 1999). The crucial issue during the last decade has been grandchildren being raised by their grandparents (Smith, 1999).

Diverse meanings have been associated with the grandparent role. The grandparent can assume a formal, traditional role. Others are fun seekers, fulfilling an informal and playful role with their grandchildren. The role of the grandparent may be a distant figure where grandparents are present only during holidays and special occasions (Hawes, 2001). Their relationships with their grandchildren may be remote, where symbolic and infrequent contact is made. Grandparents in companionate relationships take pleasure in being a grandparent, while assuming limited responsibility with the raising of their grandchildren allowing the parents to play the most important role in the grandchild’s life. Grandparents may also have an involved relationship with their grandchild. They are playing an active role in the grandchild’s life often acting as a surrogate parent (Hawes, 2001). In this type of relationship, there are three categories of caregiver roles: custodial, informal (co-residence with no legal authority), and day care. Depending on the type of caregiver role being provided, grandparents may change their lifestyles, routines, or retirement plans. At the same time, they may become emotionally and physically tired while also experiencing increased purpose for living (Hawes, 2001).

Kinship care, or care provided by family members other than the child’s parents, is the most desirable option for children whose parents are unable or unwilling to care for them. Kinship care includes children being raised by their grandparents through informal placements, legal custody, or guardianship orders. “More than one million children live apart from their parents and in the care of kin” (Clark, 1999). Child welfare agencies favor family members providing care over any foster or institutional home placements. “A child in kinship care may
derive feelings of connectedness, belonging and security from familiar family habits and customs and from a sense of the long term nature of family ties” (Clark, 1999).

**Statement of the Problem**

According to the 2006 American Community Survey provided by the U.S. Census Bureau, 4,691,170 grandchildren were residing in a household with a grandparent present. Of this number, 1,000,438 were in the grandparent’s home where the biological mother or father of the child is absent. Of these grandparent-maintained families, the majority of the grandchildren were between the ages of 12 to 17 years of age; living in households dominantly Caucasian; with average family incomes of $31,405. Table 1 illustrates how the national percentages are similar to those found in grandparent-maintained homes in Ohio (U.S. Census Bureau, 2006).

**Table 1 – 2006 American Community Survey Comparisons**

As caregivers, grandparents may be responding to a crisis situation of their child such as an illness, birth of another child, death of a family member or a job loss. For example, nearly 125,000 children lost their mothers to AIDS by the year 2000 (DeToledo & Brown, 1995; Glass & Huneycut, 2002). Grandparents may be providing help with transitional circumstances that threaten overload for an adult child such as being called into active duty for the military. When an adult child is facing a divorce, the grandparents may aid in helping them during this time of family transition. Nearly one million children experience divorce yearly, a majority with their
parents remarrying and neglecting their own offspring (DeToledo & Brown, 1995; Glass & Huneycutt, 2002). One parent households are not just from divorce, but also from single adults who never married. Often, however, grandparents face a new role as surrogate parents when their child is a substance abuser or a teenage mother unprepared to handle motherhood. Teen pregnancy rates are on the rise. Half a million children are born to teenagers in the United States yearly (Moore, 1995; Glass & Huneycutt, 2002). Regardless of the reasons for raising their grandchildren, grandparents find that new goals consistent with the role of raising their grandchildren must be adopted.

When a child is placed outside of their parent’s home because of abuse, neglect or other family situations, foster parents may be a primary option for custodial care. In light of the troubling history of foster care, in which children were often allowed to languish in foster placements for several months or given serial placement in consecutive foster placements for years, family ties were often irrevocably broken (Connealy & DeRoos, 2002). Custodial grandparenting is an alternative philosophy and practice emerging that argues for maintaining family contact and ties by reducing outplacement of children as much as possible. Custodial grandparenting allows the possibility of protecting children, preventing out of the family placements into either foster care or institutional care, while strengthening and supporting the functioning of the family unit. Custodial grandparenting passes on culture and family history while providing a sense of continuity (Smith, 1999).

“Increased longevity, delayed fertility, and declining death rates all equate to children having multiple grandparents” (Hodgson, 2002). Grandparents are finding increased emotional and financial responsibilities in caring for their grandchildren. The age of grandparents range from the 20’s to centenarians. Grandparents themselves might still be in childbearing years or have great-great grandchildren. They may be employed, at the peak of their career or retired. “They may be at a similar age and life stage as their grandchildren” (Hodgson, 2002). The number of caregiver grandparents is rising. This has necessitated a redirection in research and policy efforts to help grandparents deal with the immediate and long term consequences of the grandparent and grandchild (Hodgson, 2002).
Chapter 2: Literature Review

Relevance

“A generation or two ago, in the 1930’s to 1950’s, grandparenthood was often seen in a rather negative light. Grandparents were seen as older people who were likely to be frail and cantankerous and to interfere in the raising of grandchildren, being inflexible and either too lenient or indulgent or too strict and old fashioned in their views” (Smith, 1999, p. 206). In today’s generation, how is the role of the grandparent changing when they take on the role of parenting again? Grandparents who are not raising their grandchildren freely admit they have the best of both worlds when interacting with their grandchildren. They get to spend time together without having to draw the same kind of boundaries as parents do (Billig, 1993; Glass & Huneycutt, 2002). The grandparent’s change in role from a “love then leave” grandparent to a parent substitute is an “off-time” and unexpected role transition (Glass & Huneycutt, 2002).

What are the circumstances that result in a grandparent providing care to a grandchild? What new set of needs and challenges are grandparents facing as they deal with changed expectations for themselves and their families with this interruption of life cycle events (Waldrop & Weber, 2001)? The grandparent who once assumed a role of family historian, occasional caretaker or fun-loving stabilizer is now being seen as the primary caretaker or surrogate parent (Pinson-Millburn, Fabian, Schlossberg, & Pyle, 1996). This transition is often unanticipated which could precipitate role conflict, erosion of self-confidence, inability to make changes in roles or relationships and incompatible relationships with the grandchild. The grandparents may also face chronic hassles that include personal concerns regarding health, finances, housing and medical care. The transition that occurs may be positive as the grandparent enjoys the opportunity to become a “parent” once again. Conversely, the transition can also be negatively perceived as the grandparent encounters a loss of freedom or experiences difficulty in overcoming unique problems or adjustments associated with their expanded role. These grandparents, who had perhaps waited a long time for their children to become adults; in order to travel, pursue their hobbies, and spoil their grandchildren, are now finding their role of a grandparent being redefined and new boundaries drawn (Cox, 2000).

Are the needs and problems encountered by these grandparents going unnoticed? There is currently no comprehensive policy or program designed to meet the needs of custodial
grandparents. In 1995, the White House devoted a specific session to concerns of custodial grandparents with the objective of bringing these concerns to the attention of policy makers. There is a need to establish comprehensive programs for grandparents, financial, social and legal supports; to remove barriers faced to public programs; social services, legal services or the promotion of intergenerational programs that aid in strengthening the family unit. Assistance must also be given to help with the role transition from grandparent to the surrogate decision making authority in absence of a natural parent. Research has been completed addressing the factors that influence the grandparents to assume caregiving roles (Jendrek, 1994); stressors that often result with this role including effects on physical and emotional health (Burton, 1992; Minkler, Rose & Price, 1992); and the identification of social service needs of the grandparents (Minkler, Rose & Robertson-Beckley, 1994). Less research has been completed identifying the changes in roles that have occurred as a result of this unexpected transition. As grandparents parent their grandchildren, they report experiencing significant social and emotional intrusion in their lives. Because of this reason, they are reporting major losses and adjustments as they take on this surrogate-parenting role (Cox, 2000; Jendrek, 1993; Poe, 1992). Assuming parenting responsibility at an unexpected time changes everything about the grandparents’ lives including their leisure activities, friendships, work, health and finances (Pinson-Millburn, Falvan, Schlossberg & Pyle, 1996).

**Literature Review**

There are many reasons for grandparents to assume the surrogate role of parenting their grandchildren. Rogers and Jones (1999) found in their qualitative study that grandmothers were raising their grandchildren as a consequence of substance abuse by grandchild’s parent. Substance abuse was also a predominant reason for why the grandparents were caring for their grandchildren in the research findings of Sands and Goldberg-Glen (2000). Sands and Goldberg-Glen also discovered an inability of the parent to care for their children as a result of neglect or financial difficulties. For Waldrop and Weber (2001), the reasons that precipitated grandparent caregiving included substance abuse, parental abandonment, divorce, teen pregnancy, mental health problems or the death of an adult child, with substance abuse remaining the highest occurrence. Jendrek (1994) identified a variety of reasons including the grandchild’s mother was having emotional problems, the grandparents did not want the child placed in a foster care setting or the grandchild’s parent was having a drug, mental or alcohol problem. In her study, the
grandparents viewed their families as dysfunctional and they wanted to bring a sense of security to their grandchild. Their focus remained on providing a stable, healthy environment for their grandchildren. Most grandparents in her study did not view themselves as taking the grandchild away from the biological parents but only responding to a situation that needed their attention (Jendrek, 1994). Various reasons consistent with previous research studies were also found by Climo, Patterson and Lay (2000). In their study, grandparents came forward to care for their grandchild because of their commitment to their family and a sense of responsibility to their child, as the biological parent of the grandchild.

Developmental theories suggest that older grandparents face particularly more stressors in caring for their grandchildren due to the likelihood of experiencing health problems, loss of a spouse or disruption of plans in retirement (Sands & Goldberg-Glen, 2000). Sands and Goldberg-Glen however found that the younger grandparents were experiencing the most stressors in caring for a grandchild. These grandparents were met with high demands from different generations, perhaps providing care for their children, grandchildren and even parents in addition to experiencing demands from the workplace. The emotional and physical needs of the grandchildren they were caring for significantly added to the stress of the grandparent provider. Lacks of resources were also cited as a reason for additional stress being felt by the grandparent. The lack of resources did not focus on financial support as much as support to facilitate the re-establishment of family relationships. For the grandparents in Rogers and Jones’ study (1999), the most difficult stress was related to the additional financial stress they have incurred as a result of taking care of their grandchildren. And while this was a concern, several felt great satisfaction that their grandchildren were well taken care of. Taking on this new role has also made their relationships more difficult with other family members, namely other grandchildren not living in their home, their spouse and their own adult children. (Rogers & Jones, 1999).

Climo, Patterson and Lay (2000) found that the degree of stress was linked to the amount of sacrifices and rearrangements made in their lives as a result of the grandchild’s placement into their home. In speaking with each grandparent, changes in lifestyle, health, financial circumstances, friendships and social life were all cited as coming directly from their decision to take custody of their grandchild (Climo, et al., 2000). Waldrop and Weber (2001) cited family relationships as the main source of stress for grandparent caregivers. This would include the
grandchild’s parent’s unpredictable behavior, the grandchild’s well-being and marital strife. The well-being of the grandchild was an added concern since most were traumatized by their parent’s abuse or neglect.

Although the many stresses faced by grandparents raising their grandchild have been disclosed in various studies, there are many joys and expressions of satisfaction also prevalent. Many grandparents expressed their hope that someday their children would be able to re-establish themselves to be able to resume the responsibility of being a parent to their own children (Climo, Patterson & Lay, 2000). Grandparents want to see the grandchild’s nuclear family restored and want to be “grandparents, not parents to the third generation” (Jendrek, 1994). Grandparents expressed joy in sharing their grandchild’s life while also providing a sense of purpose and direction (Waldrop & Weber, 2001).

Rogers and Jones (1999) reported that several grandparents did not know how to get additional entitlements or services to help provide care to their grandchildren. It is because of this finding that they recommended that future research address the needs and concerns of grandmothers raising their grandchildren over time. The needs of the grandchildren and concerns of the grandparents will change as the children grow older. They believed that research needs to be conducted with grandmothers from various ethnic groups and economic levels. Grandfathers need to be also involved in the research efforts as participants in studies (Roger & Jones, 1999). Sands and Goldberg-Glen (2000) cited the need for research of caregiving and non-caregiving grandparents to assess the long-term effects of raising grandchildren on family members and the particular stressors that grandparents find most difficult. Further support should also be given to identify problems of the individual grandchildren early and evaluate the grandparents’ knowledge and capacity to deal with these problems (Sands & Goldberg-Glen, 2000). Climo, Patterson and Lay (2000) noted that parenting a grandchild means that the grandparents cannot encourage their own children to take a fundamental responsibility in parenting their grandchildren. It is not possible for the grandparents while providing custodial care to their grandchildren to avoid the conflict they experience between them and their own children. Further research needs to address the communication breakdown that inhibits grandparents to exit the situation they find themselves faced with (Climo, et al., 2000). Waldrop and Weber (2001) identified a need to help grandparent caregivers face and develop situation-specific coping strategies. Jendrek (1994) noted that family studies professionals need to
develop program and policies to meet the needs of grandparents when they are providing regular care to their grandchildren.

These research studies are just a few examples of the focus professionals are giving to the rising trend of grandparents raising their grandchildren. The Literature Map and listing of Research Completed, as illustrated in Tables 2 and 3, give insight into the steps being taken to understand this new trend; and, as professionals, what we can do to help understand, support, and prevent situations to occur where a grandparent is faced with the possibility of being a parent once again.
Table 2
Literature Map

On Lifestyles: Jendrek, 1993 Bowers & Myers, 1999 Dellman, Jenkins, Blankemeyer & Olesh, 2002
Parental: Jendrek, 1994
Parenting Stress: Musil, Youngblut, Ahn & Curry, 2002
Role Stress: Climo, Patterson & Lay, 2002 Sands & Goldberg-Glen, 2000
Support Groups: Strom & Strom, 2002 Sands & Goldberg-Glen, 2000
Service Delivery: Dellman-Jenkins, Blankemeyer & Olesh, 2002
Educational Implications: Glass & Huneycutt, 2002
### TABLE 3 – RESEARCH COMPLETED

<table>
<thead>
<tr>
<th>Researcher</th>
<th>Year Completed</th>
<th>Sample Size</th>
<th>Sample Ethnicity</th>
<th>Reason for Grandparent Intervention</th>
<th>Sample Source</th>
<th>Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burton</td>
<td>1992</td>
<td>N = 60 Grandparents</td>
<td>African American</td>
<td>Drug addiction of child’s parents</td>
<td>Support Groups, Social Service Groups</td>
<td>Stressors Costs/Rewards Social Service Needs</td>
</tr>
<tr>
<td>Jendrek</td>
<td>1993</td>
<td>N = 114 Grandmothers</td>
<td>Caucasian</td>
<td>Various reasons cited</td>
<td>Physicians, Schools, Courts, Social Service Groups</td>
<td>Impact: Effects on lifestyles; reasons for taking on the parental role</td>
</tr>
<tr>
<td>Jendrek</td>
<td>1994</td>
<td>N = 114 Grandmothers</td>
<td>Caucasian</td>
<td>Various reasons cited</td>
<td>Physicians, Schools, Courts, Social Service Groups</td>
<td>Circumstances which lead grandparents to assume parental role; how they decide to provide care</td>
</tr>
<tr>
<td>Minkler, Roe, Price</td>
<td>1992</td>
<td>N = 71 Grandparents</td>
<td>African American</td>
<td>Drug addiction of child’s parents</td>
<td>Health Care providers, Social Service Groups</td>
<td>Physical and emotional health of the grandparent</td>
</tr>
<tr>
<td>Minkler, Rose, Robertson-Beckley</td>
<td>1994</td>
<td>N = 71 Grandparents</td>
<td>African American</td>
<td>Drug addiction of child’s parents</td>
<td>Health Care providers, Social Service Groups</td>
<td>Family and friendship support present</td>
</tr>
<tr>
<td>Rodgers, Jones</td>
<td>1999</td>
<td>N = 22 Grandmothers</td>
<td>African American</td>
<td>Substance abuse of child’s parents</td>
<td>Social Service Groups, Churches</td>
<td>Needs, stressors faced by grandmothers</td>
</tr>
<tr>
<td>Sands, Goldberg-Glen</td>
<td>2000</td>
<td>N = 129 Grandparents</td>
<td>African American</td>
<td>Varied; majority substance abuse of child’s parents</td>
<td>Public, private schools, school services, churches, support groups</td>
<td>Social supports available to address stressors faced</td>
</tr>
<tr>
<td>Waldrop, Weber</td>
<td>2001</td>
<td>N = 54 Grandparents</td>
<td>Primarily Caucasian</td>
<td>Varied; majority alcohol/drug abuse</td>
<td>Support groups, statewide conference attendees</td>
<td>Stressors faced, family, legal and financial problems</td>
</tr>
<tr>
<td>Bowers, Myers</td>
<td>1999</td>
<td>N = 101 Grandmothers</td>
<td>Mixed ethnic groups</td>
<td>Varied; majority alcohol/drug abuse</td>
<td>Omnibus telephone survey, support groups, churches, advertisements</td>
<td>Difference between grandparents providing different levels of care to grandchild(ren)</td>
</tr>
<tr>
<td>Climo, Patterson, Lay</td>
<td>2002</td>
<td>N = 15 Grandmothers</td>
<td>EuroAmerican</td>
<td>Various reasons cited</td>
<td>Agencies that provide service to senior citizens</td>
<td>Role stress</td>
</tr>
</tbody>
</table>
Chapter 3: Methodology

This study involved interviewing five grandparents who had the primary responsibility of caring for a grandchild. Including in the methodology section is additional information regarding this subject population and the steps taken to recruit each participant. Detailed information on the steps taken in the research procedure is also provided.

The Researcher

When first enrolling in college to obtain my Bachelor’s degree 24 years ago, my interest was to pursue a degree in political science with aspirations of attending law school. This aspiration was further inspired due to my employment while enrolled in college as a Deputy Clerk for a local county juvenile court. In this position, I was able to witness how the judicial system must be involved in family situations in order to protect dependent, neglected, and often abused children. This position however biased me in thinking that situations existed because parents of these children were often negligent and unwilling to find the maturity and means of properly caring for their children. I gave little forethought or inquiry as to what brought the parents to that particular point in time. However, it was during my senior year in college that I was diagnosed with a life changing illness that altered my chosen career path.

This illness prevented my pursuit of attending law school after obtaining my bachelor’s degree. As a result, my employment with a local county Department of Human Services as a Welfare Investigator began. With this position, I was responsible to investigate and help prosecute those that were obtaining state benefits by falsifying and misrepresenting their financial situation. The individuals were often single women with children. After several years in this position, my path was to become a Child Support Investigator. This position enabled me to issue administrative orders to non-residential parents in the support of their child(ren) through court ordered child support payments. This was the first position that I held that changed my perception of trying to help the parents instead of evaluating any failures in parenting skills. During this time I also worked as a Guardian-Ad-Litem for the juvenile court system. The lessons that I learned from working as an advocate for the children involved in the legal system was priceless. Often what we see when evaluating a family’s situation as an observer only tells a partial story of the family’s true circumstances. Parents at times are doing the best they can with the resources and the education available to them.
Although the past experiences through various employers did influence my research topic, one may ask why a focus was given on grandparents raising their grandchildren. As a child, I was very fortunate to be raised in a stable family environment with a mother and father present. We lived in a residential community where strong relationships with neighbors were present. One particular neighbor was a family of five; mother, father and three children. Two of their children were very close in age to me; one was close to the age of my sister. It was during my attendance in high school that their oldest child became involved in drugs and put herself in undesirable situations with a pattern of incarceration becoming established. She left her parental home and contact with her family was also non-existent for several years. It was after being contacted by Children Services that her family became aware that their grandchildren were in danger. Both of the children’s mother and fathers were incarcerated with all having an established pattern of drug and alcohol abuse with the mother experiencing also physical abuse from one of the children’s father. The children were anticipated being placed with a foster family or children’s group home. Without hesitation, the grandparents provided these children with a loving and stable environment. They faced many adversities in raising their grandchildren to include difference in race. Through their unconditional love and support, these children have become very successful, loving and proud individuals. This study is an attempt to understand the sacrifices made not only by these grandparents but any grandparent who finds themselves in a situation where they are presented with a choice of becoming parents again to their grandchildren. And, given this decision, how did their choice alter their role and perceptions as a grandparent?

Having given a glimpse of my past involvement and employment in situations with parents and children, it seems plausible for the topic of this study to also involve the same. Many types of research rely on documents, fixed interviews, experiments that do not directly involve observation or participation on behalf of the researcher (Lofland & Lofland, 1995). As the researcher of this study, I was directly involved as an observer while also interacting with each participant. We know that “from our everyday experience that disagreement about the facts of an event, for an example, is quite common” (Lofland & Lofland, 1995). Questions must be asked as to if the researcher is accurately hearing what the participant is disclosing or perhaps falsely elaborating the details of the grandchild’s placement into the home. The researcher must question what the participants may be omitting or distorting when giving their responses. I had
to question if I was hearing only what I wished to hear in order for the data collected to conveniently serve my benefit. Acknowledgement is made that “truthful observation or listening depends heavily on sincere good faith, open mindedness and thoroughness of the observer” (Lofland & Lofland, 1995). Biased views can influence the findings and conclusions of this study, weakening the study’s validity.

**Subject Population**

Previous research has focused primarily on grandmothers raising their grandchildren. Because of the existing void in literature, the target population of this research study originally focused on grandfathers who were raising their grandchildren without the presence of a grandmother in the same home. However, due to the inability to identify any grandfathers to participate in the study, the target population was revised to include any grandparent who was raising their grandchild. The subject population consisted of grandparents who were currently raising or have previously raised their grandchildren. The grandparent was to have the responsibility of the child to include both physical and financial with legal or informal custody established. It was desired that the grandchild residing in the home be between the ages of five and eighteen years of age and have lived with the grandparent at least two months without the presence of their natural parent. The grandparents were not pre-selected as a participant on the basis of marital status, ethnicity or age. Because case studies were to be utilized in this study, a target sample of five participants was sought.

**Recruitment**

There are no grandparent registration lists identifying grandparents who are raising their grandchildren (Jendrek, 1994). Since a list of grandparents raising a grandchild is hard to obtain, a snowball sampling method was utilized. Referrals from others who are or know others who possess characteristics being sought for this study will be a tool in obtaining the participants needed. Contacts were made in the following counties: Preble, Darke, Montgomery, and Butler in Ohio and Wayne, Randolph and Union counties in Indiana. These counties were selected in anticipation of meeting with each participant for the completion of the personal interview, the counties chosen were in reasonable travel distance. Within these counties the following agencies were contacted to ask their help in alerting potential participants to the study: Domestic Relations, Juvenile and Probate Courts; public school districts, universities and colleges; health
and human service agencies; community focused organizations; senior citizen centers; adoption agencies and child day care centers (Appendix A). In all, 182 initial contacts were made.

**Participants**

Of the five participants in my study, the average age of each grandparent ranged from 38 to 72 years of age. Although all participants were married at one time, four participants were currently widowed after being married between 20 to 45 years. All participants were Caucasian and only one of the five participants had any college education, obtaining a bachelor’s degree. The number of biological children of the participants also varied from two to five children. The average family monthly gross income fell in the range of $30,000 to $39,000 per year.

The age of the grandchild the grandparent was raising varied greatly among each participant. The age range of the children varied from one year of age when the placement began to 15 years of age. The grandchild was the child of the participant’s daughter in three of the five case studies and the participant’s son in two. I think the most surprising demographic data collected was that in all but one of the case studies, the participants did not have formal custody established to place the grandchild in their home. While no changes in residency had to occur when the grandchild began residing with their grandparent, one child did have to change school placement. Each grandchild had at least one other half or full sibling.

**Treatment of Participants (risks, discomforts, benefits)**

There were no known or expected physical risks associated with participation in this research study. Due to the personal and sensitive nature of the circumstances leading to a grandparent parenting their grandchild, some questions on the preliminary questionnaire or during the personal interview may have lead to distress or discomfort to each grandparent and spouse, if married. The study asked the grandparent to recall information from the child’s past that could have caused emotional unrest to the grandparent. Additional emotional unrest was also a risk if the grandparent and spouse, if married, held differing points of view on questions asked during the research study. The researcher was prepared, if distress or discomfort was evidenced, to provide guidance and encouragement to contact a local counseling center for assistance since the researcher was not licensed or trained in counseling.

This study depleted four hours of each participant’s personal time. The participants were also able to express their desire in the location of the personal interview to include corresponding only by telephone, by mail, or in person at a location of their choice. No payment was provided
for participation in this study. All participants were eligible for a random drawing of a fifty dollar ($50.00) gift certificate from a local retail store upon completion of the research study.

It was hoped that participants were able to recognize their contribution in helping the researcher identify ways family studies personnel can help the transition to caretaker for grandparents raising their grandchildren. Furthermore, it is hoped that areas of additional study and support systems needed for grandparents could be revealed. Optimistically, it was hoped that each participant was able to realize how self-sacrificing their willingness to care for their grandchild actually was.

**Safeguarding Information**

Signed consents and completed preliminary interviews, along with any document with the participant’s name, names of grandchildren, and addresses are known only to the researcher. Any information obtained as a result of the participant’s involvement in this study was kept confidential. The name and address of each participant was kept with the researcher in a secure locked file. All documents will be destroyed upon completion of the research project.

When using case studies in research projects, it becomes important to disguise some aspects so the participants are not identifiable. Changes were made to alter specific characteristics of the participants and some specific characteristics were limited to protect the identity of the participants in the study. Caution was taken to not change any information that would alter the results of the research study.

**Informed Consent**

Each participant was sent a Consent and Information Form (Appendix G) with a Voluntary Consent Signature Page (Appendix H). The Consent and Information Form included the following information: complete title of research project; introduction; purpose of the study; description of procedures; risks and discomforts; benefits; costs associated with the research study; compensation for subject participation; confidentiality and voluntary participation. The Voluntary Consent Signature Page (Appendix H) also advised each participant that their participation was voluntary and the participant was free to withdraw consent at any time. Contact information was given for any potential questions or concerns regarding the study to include how to contact the researcher, faculty advisor, and the Institutional Review Board for Human Subjects Research at Miami University.
Each participant was provided with two copies of the Voluntary Consent Signature Page (Appendix H). The participant was asked to sign one copy of the Voluntary Consent and return it in a postage paid envelope to the researcher. The participant was able to keep the second copy provided for review. The participant also received a copy of the signed Voluntary Consent upon my receipt thereof.
Table 4

Flowchart – Step by Step Guide to Research Procedure

Alert potential participants to study
- List of contacts (Appendix A)
- Initial contact letter (Appendix B)
- Summary of Expectations (Appendix C)
- Post cards (Appendix D)

If no receipt of postcard,
- Second contact letter (Appendix E)

If receipt of postcard,
- Cover letter (Appendix F)
- Consent of Information Form (Appendix G)
- Voluntary Consent (Appendix H)
- Preliminary Questionnaire (Appendix I)

Interviews completed
- Interviews (Appendix I)
- Thank you letter (Appendix K)

Data collection
- Face sheets (from Preliminary Questionnaire)
- Field notes (from Interviews)
- Safeguarding Information

Results
- Case studies
A list of contacts was gathered (Appendix A) to alert possible participants to the study. An initial contact letter (Appendix B) was mailed to each potential participant. This letter provided information as to the purpose of the study and an explanation of the material enclosed for review. This material also included a summary of expectations (Appendix C) of the participants to include who was needed to participate, the purpose, and expectations and compensation to each participant. Self-addressed postcards (Appendix D) were provided to enable potential participants to ask the researcher for additional information about the study or as a means to express their interest in participating in the research study. The postcards were addressed to the researcher in care of Miami University Family Studies and Social Work.

If a return postcard was not received, a second contact letter (Appendix E), was sent however with no additional enclosures as provided with the initial contact letter (Appendix C; Summary of expectations Appendix D; postcards). No additional correspondence was sent if no response was received from a second letter being sent to each possible participant (Appendix A).

If a return postcard was received, the potential participant was mailed the following information: cover letter (Appendix F); consent and information form (Appendix G); voluntary consent signature page (Appendix H); preliminary interview (Appendix I); and a postage paid return envelope. It was expected that the voluntary consent signature page (Appendix H) and the preliminary questionnaire would be completed and returned in the post paid return envelope. The preliminary questionnaire was a 28 item questionnaire that asked each participant basic demographic information. The questionnaire advised each participant that their participation in this study was voluntary. They could refuse to answer any question they were uncomfortable answering and they may also stop their participation in this study at any time. The preliminary survey also provided the participant an option of expressing when they would like a personal interview to be scheduled. I asked for a telephone number in which I may contact them to schedule the personal interview. I also reiterated that their name, grandchild’s name, or telephone number would not be revealed to anyone.

If, after sending the initial information to the potential participant, no response was received within three weeks, a second letter was sent with the same enclosures asking again for
their consideration to participate. No response was received for three potential participants after the mailing of the second letter. No further contact was made to these individuals.

Once a response was received (receipt of the voluntary consent signature page (Appendix H) and preliminary questionnaire (Appendix I)), and based on the information each participant provided on the preliminary questionnaire, a personal interview was scheduled. It was decided upon the participant’s locality and preference to schedule either a telephone or in-person interview. In this study, a personal interview was completed by telephone for two participants; in person at their private residences for two participants; and at the researcher’s location of employment for one participant. The personal interview (Appendix J) consisted of a 47 item questionnaire that was given directly to each participant by the researcher. There were an additional five questions asked specifically for the participant’s spouse, if married. In this study, only one participant was currently married. The questionnaire contained both closed and open-ended questions. The questions centered on describing the circumstances under which each participant became the primary parents to their grandchild and the effects of this decision upon the child’s life and how it required the role of the grandparent to be redefined. Before the start of the interview the participants were again advised that their participation was voluntary and they may refuse to answer any question they were uncomfortable answering. They were also advised that they were entitled to stop the interview at any time.

One week after the personal interviews were completed with each participant, a thank you letter was sent (Appendix K). In this letter, I thanked them for participating in the research study and also expressed my feeling that their grandchild was very fortunate to be blessed with a caring and selfless grandparent who was willing to provide him or her with a loving and stable home.

**The Study**

This study placed importance not on predicting but describing and explaining a real life situation, explaining a situation where boundaries are not predetermined. This study attempted to draw attention to something that should be examined using individuals as the primary unit of analysis.

For this research study, a mixed methodology approach using both quantitative and qualitative measures was taken. This allowed for the use of a quantitative measure in the preliminary questionnaire that captured demographic information on each participant. This
closed-ended questionnaire was meant to guide the participants in disclosing information needed for comparisons and to make generalizations with the data collected (Creswell, 1994). A qualitative interview guide was used to collect data in the face-to-face interview giving voice to each participant. Qualitative interview guides allow researchers to learn why people behave, think, and make meaning of their actions. It is an ideal technique for studying emerging family patterns (Glatthorn & Joyner, 2005) such as grandparents raising their grandchildren. With mixed methodological designs, the researcher can, through data collected, present statistical comparisons and disclose common themes (Creswell, 1994).

Jendrek’s study (1994) collected both quantitative and qualitative data on circumstances that led grandparents to provide care for their grandchildren. Additionally, her article focused on parenting roles grandparents assume in relation to their grandchildren. Because of the parallel focus with my research study, the method of data collection illustrated in her study was mirrored. Similar methods of collection and questions in both the preliminary and personal interviews illustrated in her study were used and were addressed in both the literature review and validity discussion of this study.

Data Collection

Face sheets are used to record demographic information obtained from each preliminary interview (Appendix I) to include information regarding: date of birth of participant; marital status; ethnicity; religious affiliation; education; number of children; employment status; socio-economic status; legal relationship to grandchild; expenses incurred; support being received; involvement with the grandchild’s education; and extra-curricular activities.

Field notes taken during the personal interviews (Appendix J) were used to summarize what each participant said in reply to the prepared questionnaire, extra interview encounters, and personal emotional experiences, difficulties or successes (Lofland & Lofland, 1995). During the personal interview, questions were asked about the circumstances surrounding the grandchild’s placement into the home to include what type of custodial relationship existed. Questions were also asked about the child’s biological parents and if a visitation scheduled existed. Additional information was obtained in regards to the grandparent’s relationship with any biological children; relationship the grandparents had with their parents; grandchild’s physical or emotional needs; lifestyle changes experienced as a result of the placement; and support system that may have existed for them during this transitional period. Information was also gathered regarding
the location of each interview, conversations heard between other persons present, conversations held, and notation of physical settings, impressions or feelings of the researcher in response to each participant. Data collection takes place during the interview but also most importantly, after the personal interview is concluded.

Using the field notes gathered, case studies were completed on each participant. Case studies allow the researcher to focus on the commonalities or shared features or themes emerging from each participant in the study. Case study research focuses on studies in real life context using measures to explore, describe and explain. It enables a detailed description of a particular situation, individual or event. It also gives reference to individuals’ own perceptions and accounts of their experiences for research.
Chapter 4: Results

By reviewing the primary data from each participant through the quantitative preliminary questionnaire, I was able to chart the commonalities in demographics among each grandparent (as illustrated in Table 5).
### Table 5 - Demographic Results

<table>
<thead>
<tr>
<th>PRELIMINARY INTERVIEW</th>
<th>“Jessica”</th>
<th>“Jimmy”</th>
<th>“Adam”</th>
<th>“Samuel”</th>
<th>“Ian”</th>
<th>Summary of participants:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PARTICIPANTS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Age of participants</td>
<td>72</td>
<td>47</td>
<td>62</td>
<td>60</td>
<td>38</td>
<td>38 to 72 years of age</td>
</tr>
<tr>
<td>Marital status</td>
<td>Married</td>
<td>Widowed</td>
<td>Widowed</td>
<td>Widowed</td>
<td>Widowed</td>
<td>Widowed</td>
</tr>
<tr>
<td>Length of marriage</td>
<td>35</td>
<td>20</td>
<td>30</td>
<td>30</td>
<td>45</td>
<td>20 to 45 years</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Caucasian</td>
<td>Caucasian</td>
<td>Caucasian</td>
<td>Caucasian</td>
<td>Caucasian</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Religious affiliation</td>
<td>Lutheran</td>
<td>None</td>
<td>Methodist</td>
<td>Catholic</td>
<td>None</td>
<td>No common religious affiliation</td>
</tr>
<tr>
<td>Highest education completed</td>
<td>College</td>
<td>High school</td>
<td>High school</td>
<td>High school</td>
<td>High school</td>
<td>High School</td>
</tr>
<tr>
<td>Number of children of participant(s)</td>
<td>3</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>4</td>
<td>2 to 4 children</td>
</tr>
<tr>
<td><strong>GRANDCHILD(REN)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Age of grandchild(ren)</td>
<td>15 Girl</td>
<td>1, 3 Boys</td>
<td>10 Boy</td>
<td>8 Boy</td>
<td>1 Boy</td>
<td>1 to 15 years of age</td>
</tr>
<tr>
<td>Natural child of mother or father</td>
<td>Mother</td>
<td>Father</td>
<td>Mother</td>
<td>Father</td>
<td>Mother</td>
<td>Natural child of mother</td>
</tr>
<tr>
<td>Type of custody established</td>
<td>Informal</td>
<td>Formal</td>
<td>Informal</td>
<td>Informal</td>
<td>Informal</td>
<td>Informal custody</td>
</tr>
<tr>
<td>State residency change since placement</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No change in residency</td>
</tr>
<tr>
<td>Change of school since placement</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No change in schools</td>
</tr>
<tr>
<td>Number of siblings of grandchild</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1 to 2 other siblings</td>
</tr>
<tr>
<td>Costs – paid by participant for grandchild(ren):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Expenses paid by participant(s):</td>
</tr>
<tr>
<td>- Clothing expenses</td>
<td>All</td>
<td>All</td>
<td>All</td>
<td>Some</td>
<td>Some</td>
<td>All clothing expenses</td>
</tr>
<tr>
<td>- Educational costs</td>
<td>Some</td>
<td>All</td>
<td>All</td>
<td>Some</td>
<td>Some</td>
<td>Some educational costs</td>
</tr>
<tr>
<td>- Prescription medications</td>
<td>All</td>
<td>None</td>
<td>All</td>
<td>None</td>
<td>Some</td>
<td>Some prescription costs</td>
</tr>
<tr>
<td>- Physicians/Dentists</td>
<td>All</td>
<td>All</td>
<td>All</td>
<td>None</td>
<td>Some</td>
<td>All physicians/dentists</td>
</tr>
<tr>
<td>Support received from mother of child</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Support from mother</td>
</tr>
<tr>
<td>Support received from father of child</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No support from father</td>
</tr>
<tr>
<td>State assistance received for the child</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No state assistance provided</td>
</tr>
</tbody>
</table>
Case Studies

I interviewed five grandparents who are or have recently raised their grandchildren. With these interviews, five very different family situations and perspectives on grandparenting their grandchildren were revealed. Four of the five grandparents that participated in this study were identified through snowball sampling. Only one grandparent was responding to the information sent to contacts listed in Appendix A. All interviews described are labeled in the grandchild’s name. Each case study reflects information obtained directly during the interviews. Following each case information is a “Researcher’s Perceptions” section. The information in these sections was derived from the researcher’s field notes.

Case Study 1: “Jessica”

John and Rita have been married for 35 years and currently reside in Indiana. John, age 77, after completing his college education, established a career as a vice president in banking and is currently retired. Rita, age 72, did not work outside of the home. Both John and Rita are active members at their Lutheran church. They were very blessed to have three biological children. Their daughter’s child, Jessica, resided with them for the past six years beginning when she was fifteen years of age following the death of her mother (John and Rita’s daughter). She is currently 20 years old and is attending college. No formal legal custody was established during the time Jessica has been in their physical custody. Jessica has a 16 year old brother, Billy, who currently resides with their father. Even though Jessica and her brother reside separately, Rita stated that there is a strong, emotional bond between them.

After the death of her mother, Jessica found adjustment to life without her mother very difficult. She perceived her father to look at her as the caretaker, assuming the role left by her mother. As a result, she acted rebelliously, getting into trouble, and vying for her father’s attention. It was at this time that she decided she wanted to live with her grandparents in search of guidance and boundaries missing from her father. Her father, realizing that he was not providing for his child as needed, was in agreement with the child’s placement outside of his home.

The child’s father did establish regular unsupervised visits with Jessica. John and Rita were able to alter their schedules to prevent little interruptions in any visitation pattern. Also, since Jessica resided in the same county as John and Rita, she did not have to change schools, make new friends, or participate in different extracurricular activities. Jessica was able to
maintain a good relationship with her paternal grandparents, seeing them often during the holiday seasons. Even though no monetary support was given during Jessica’s placement with them, both Jessica’s father and paternal grandparents provided her love and emotional support. Jessica did, however, receive social security income as a result of her mother’s death which John and Rita were responsible for administering since Jessica was a minor.

John and Rita experienced very little changes in their life as a result of providing parental support to Jessica. They remain in good physical health and their plans for retirement have remained unaltered. Having to raise their grandchild did not change their perception that grandparenting is fun. They were able to rely on each other, strengthening their marriage in the process, in times where additional support was needed. Although they acknowledge some of their friends have also cared for a grandchild, they are not quick to offer any advice to any grandparent who is placed in the situation of caring for a grandchild in a parental role. They expressed very little fears in providing the support they have given Jessica but expressed great joy in knowing their granddaughter is happy, thriving and staying out of trouble. They are confident their daughter would be very proud of the young lady Jessica has become. They expressed that every situation is unique to the individual involved and every child and each child’s situation is different. They have faith that they have tried their best for their daughter, their grandchild and everyone else involved in the situation. They believe that given in the situation in which they were not able to provide care for Jessica, the father of the child would have eventually succeeded in providing the care and support their granddaughter was desperately seeking.

Researcher’s Perceptions

John and Rita were the first grandparents I interviewed for this study. The contact with them was through a mutual friend and not from any recruitment information sent to my list of contacts (Appendix A). My initial contact and resulting interview was conducted by telephone. They did not wish to meet me in person and were only willing to participate because of the trust they had in the mutual friend who first spoke to them about their participating in my study. Rita was the grandparent that completed both the preliminary and personal interview questionnaires. I felt John and Rita had an uneasiness and unwillingness to share personal, intimate information with me. I explained they could refuse to answer any question they were uncomfortable with or even stop the interview at any time. It seemed they were hesitant because they perceived that I
was trying to invade their privacy. They did not see their situation as unique and did not comprehend the fascination or interest I had in studying grandparents raising their grandchildren. Because of this, it seemed their answers in the personal interview were very calculated and guarded.

Jessica was very fortunate that her grandparents and father were able to establish a support system together to meet both her physical and emotional needs as a young teenager. I am impressed that Jessica was able to realize the path she was choosing was unhealthy and destructive for her and furthermore was able to acknowledge that living with her father was not in her best interest.

Case Study 2: “Jimmy and Peter”

Sharon is 53 years old and has seven children: two of whom are step-children. She has a total of 13 grandchildren. She currently resides in Ohio. She became a widow 20 years ago when the father of her biological children died at an early age. She has since been married and divorced and her recent boyfriend also met an early, untimely death. Her relationship with her ex-husband, Tom, remains very strong and she declares him to be her only system of adult support. Jimmy, age 6, and Peter, age 4, have been residing with Sharon since they were babies. Their placement with Sharon began when both their parents were adjudicated and ordered to be placed in rehabilitation facilities for their alcohol and drug abuse. The father was also convicted of selling illegal drugs to an undercover policeman. The children were going to be placed in the custody of Children Services if an adequate placement with a family member was not found. Although the children’s placement with Sharon began as a temporary one, she has since obtained legal custody of the children. Their biological mother did not want custody of Jimmy and Peter. Their father was not allowed custody by the courts due to his substance abuse and anger issues, which the court believed could lead to physical abuse of the children.

Although both Jimmy and Peter’s mother and father reside in a different county, the children have scheduled visitation with both of them. Their visitation with their mother occurs every other weekend as ordered by the court. Their mother is currently residing with a boyfriend and she has two other children besides Jimmy and Peter who reside with her. One of the children is the half biological sibling to Jimmy and Peter. Sharon has indicated that on a few occasions, the mother has either “missed” her visitation with the children or she has not left them for their visits due to her perception that the mother was intoxicated at the arranged time of
visitation. She alerts the court to these situations when they occur. The father is also allowed supervised visitation twice a month. If agreeable with Sharon, she can permit additional supervised visits with their father. At times, the father has also missed scheduled visitations with his children. The father has another child that resides with the child’s mother (half sibling to Jimmy and Peter). The father, Sharon’s son, is very angry with her for the “perceived control” she has over the situation involving his children. Perceived control in that Sharon has the authority to prevent additional visits with his children and is in the situation to make daily life choices for both Jimmy and Peter.

When the mother misses a scheduled visitation with their children, Sharon believes the children are indifferent to the missed visitation. The reaction when their father misses a scheduled visitation with them is quite different. The children become very upset and are difficult to control. She believes this is in part due to the infrequent visits the father is allowed and the fact that the father actually devotes his time and attention to the children when visitations are held. This is the opposite of the reaction and attention given by their mother during her scheduled visits. The children spend very little time with their maternal grandmother. Their maternal grandfather is deceased. The man currently married to their maternal grandmother has, in the past, had an addiction to alcohol. It is for this reason that the visitation with them is limited.

Some of her children reside a great distance from her and due to the lack of resources available, she is not able to see them except during the Christmas season. Two of her biological children are currently unable to care for their own children; and as a result, the children have been placed with the children’s maternal relatives. Sharon’s biological children feel resentment towards her since she is unable and unwilling to provide parental support to their children as she provides for Jimmy and Peter.

Sharon has encountered many challenges in assuming a parental role for Jimmy and Peter. At the time of placement, one child had weekly physical therapy due to a lack of stimulation to the right side of his body. Doctors believe this is a result of the child being placed on one side of his body repeatedly without the stimulation of being held and comforted but often neglected. This child was also underweight and at the age of three months weighed less than an average three month old child. His physical therapy has reduced to visits twice a year but he currently has monthly visits to a speech therapist and monthly doctor visits. The older child has
Attention Deficit Disorder and can be very physically abusive at times with the grandmother. He is currently on medication and visits a specialist monthly.

Because of the developmental and health challenges these children face, Sharon is very involved with the children’s teachers, physicians and therapists. She relies on social workers and court personnel to help guide her on the appropriate actions that should be taken in regards to the children’s visitation with their parents. Sharon is employed full time in the retail industry, making a little more than minimum wage. Due to her limited income, she does receive Temporary Assistance for Needy Families (TANF) and the children receive state Medicaid assistance. Both of the children’s parents are supposed to pay child support but because of their income earning capacity, what small amount that is made is paid to reimburse the state for the welfare benefits received. Although her income is limited, she is not eligible to receive monthly food stamps. She has relied on local service agencies to provide additional support to include the assistance given by a local hospital (free medical screenings), family service (counseling), food banks (weekly staples), and health department (vaccinations).

Sharon notes changes in her daily routine, recreational activities, frequency of the contact with friends and family, and limitations in the purchase of luxury items. She believes the most depressing change that has occurred is her inability to find social acquaintances. Even though she is not seeking a relationship that might result in marriage, all men who are equal or older in age to her, are not willing to become a parent once again. Because she is providing parental support to her grandchildren, most male acquaintances are unwilling to begin any social relationship with her.

Given all the trials and tribulations Sharon has and will continue to face, she is not resentful of the situation she finds herself in. She believes it is not the children’s fault that their parents were not able to care for them. She places the blame on herself for her failings as a parent in raising a child that is unwilling or incapable of providing the proper support for them. She has a fear that “she will die before Jimmy and Peter are grown” and reach adulthood. She has no regret in her life but she states honestly that she is often very sad at daily difficulties they face. Since the children’s placement with her, she believes her reflection that grandparenthood is fun has been altered. She knows the struggles she faces are well worth the alternative of the children being placed in the foster care system. She loves the children very much and knows,
although she may not be able to fulfill their wants, she is raising them in a safe, happy and loving environment.

**Researcher’s Perceptions**

My contact with Sharon was in response to my mailings alerting various agencies to my study. The personal interview was conducted at the home of her ex-husband. She requested this location since it was the same distance to travel for both of us. Additionally because of the close relationship she and her grandchildren have with her ex-husband, our visit would give him the opportunity to also visit with the children. It appears that Sharon and her grandchildren had a very close bond with her ex-husband and his children. This is definitely a support system for the entire family. The environment during the interview was very relaxed and welcoming.

As a teenager, Sharon was married during high school and became pregnant with her first child. Due to the turbulent relationship she had with her mother, she and her husband resided with her maternal grandparents. Her mother was also a teenage parent. Because of this, Sharon’s mother did not want her to face the same struggles she had encountered. In the process of trying to exhibit empathy for Sharon and her situation, her mother’s actions helped deteriorate the relationship between mother and daughter. The pattern of living outside of the home did not stop there. Two of Sharon’s children, while minors, also resided outside of her home with relatives prior to them reaching 18 years of age.

In Sharon’s words, she is trying to make her relationships healthy and make them work. This can be witnessed in the relationship she shares with her ex-husband. Sharon would like the relationship with all of her children restored, and although this has not yet occurred, she is confident she has taken all necessary actions and secured all available resources to develop a loving and supportive relationship with Jimmy and Peter.

**Case Study 3: “Adam”**

Pam is 72 years of age and has been widowed for 21 years. Pam and her husband were married 30 years prior to his death from Huntington’s disease. She currently lives in Indiana and works full time not because financially she needs to but because she wants to remain active physically and mentally. Pam and her husband had three children, however one daughter, Caroline, died of Huntington’s disease. Caroline had two children, Adam and Elaine. At the time of Caroline’s death, Adam was 10 years old and Elaine was twelve years old. No formal
legal custody as established during the time that Adam resided with her. Today, Adam is currently 20 years old and his sister, Elaine, is 22 years old.

Adam and his sister, Elaine, along with Caroline, their mother who was having marital problems, moved in with their maternal grandmother, Pam. Caroline, in addition to having difficulty with her marriage, was also suffering from Huntington disease. For Caroline, returning to her mother’s home seemed to be the only solution. After Caroline’s divorce and eventual death, both grandchildren resided with Pam for a short time and then her granddaughter chose to return to the home of her father. Adam chose to remain living with his grandmother.

Pam’s relationship with Adam’s father after Caroline’s passing was strained initially. After her death, he remarried and the involvement of his new wife hindered their ability to establish effective communication between them. Taking into consideration what was best for the children, they began working towards establishing a healthy, mutually supportive relationship. Although no formal custody arrangements were made, or a set visitation time scheduled, the father maintained a close relationship with his son. Financial support was provided on a limited basis by the father. Adam also had limited visitation from his paternal grandparents as dictated by his father. His father believed that his own parents would not be a good influence on his minor children. His parents lived in an unsafe environment (his father having caught himself on fire and had to reside in an assisted living unit for an extended period of time; his mother suffering emotional and physical problems) and therefore limited contact with them for holiday visits only.

Pam considers herself to be in good health even though she is struggling with an autoimmune deficiency and hepatitis. With the tragedies she has faced, the death of her husband and daughter to Huntington’s disease, and the infliction of this disease upon her two remaining children her greatest fear is that her grandchildren will also be afflicted or that they will not be able to experience the joy of being a parent for fear of passing this disease on to their children. She has no regrets of having her grandson reside with her after his mother’s passing. She is very grateful for the relationship they have. Her greatest joy is seeing the “resiliency of her grandchildren and the respect they have for both their mother and father.” She is very proud that her grandchildren have set very high goals for them to reach and both have a Christian foundation for their beliefs. She believes the best advice she can give to other grandparents who
are raising their grandchildren, is to communicate and listen to them. “Listen to their concerns, their fears, their joys, and let them express themselves for they have a lot they can teach us.”

**Researcher’s Perceptions**

Pam was very receptive and reflective during our personal interview answering all questions asked without reservation. I found her to be quite encouraging. Perhaps it is because of the relationship she had with her daughter or the fact that the grandchildren witnessed the progression of their mother’s disease, Pam feels that her grandchildren will have the same strength in dealing with any roadblocks they may encounter down their chosen paths. Pam expressed that she believes her grandchildren could benefit with a stronger relationship with her son and his child and she hopes that she can see this happen prior to her son’s disease progressing further. Adam and Elaine are both currently enrolled in college and have their focus on achieving all of their goals. While they are not currently involved in any long-term relationships, they both believe that they would like to someday marry and have children even with the risks they may face. They are both hopeful that someday soon a treatment or cure will be found for the disease that has taken the lives of their grandfather and mother.

**Case Study 4: “Samuel”**

Samuel is a vibrant, spirited, 10 year old boy. He began residing with his paternal grandmother, Ladonna, two years ago. Ladonna is 65 years old and had been widowed for 10 years at the time of Samuel’s placement in her home. Ladonna and her husband were married for 30 years. She and her husband had two biological children and were blessed with four grandchildren. Ladonna has never worked outside of the home and the only means of financial support to her has been the monthly pension received from her husband’s retirement plan. Samuel’s mother and father are divorced. Samuel’s mother continues to have legal custody of the child. And, although he is living with Ladonna, no legal custody or change of placement was ordered on Samuel’s behalf.

Before his placement with his grandmother, Samuel’s father had court ordered visitation with him every other weekend. Even though the legal visitation schedule was every other weekend, Samuel spent almost every weekend with his father. Ladonna believed they shared a strong father to son relationship. During these weekend visits, Ladonna was also able to spend a lot of time with Samuel.
Shortly after Samuel’s eighth birthday, his father was arrested, incarcerated and sent to prison for one year. During the father’s absence, his mother was experiencing difficulty controlling him partly due to his diagnosis of Attention Deficit Disorder and partly due to the sudden absence of his father in his life. Instead of Samuel’s father having weekend visitations, Ladonna started assuming the weekend visitation schedule left by her son. Ladonna would soon assume the role that her son was not able to provide for Samuel. Within a short period of time, Samuel expressed his interest in spending weekdays also with Ladonna, which his mother was most agreeable to. During this time, Samuel’s mother also relinquished custody of her four year old son (half sibling to Samuel) to his natural father.

Although no legal change in custody occurred, Samuel resided with Ladonna during his father’s period of incarceration. Samuel’s mother then relocated out of the county. She was able to provide some financial support to Ladonna and visits Samuel one or two weekends per month. Samuel’s maternal grandparents were a strong presence in his life. They also try to schedule weekend visitations twice a month and also provide some financial support to Ladonna. Ladonna was experiencing financial difficulties during this time since she not only was supporting her grandchild, but also paying some of the financial debts left by her son when he was incarcerated on such short notice.

Samuel kept in contact with his father by weekly telephone calls and letters. He did not actually see his father while he was incarcerated. Even after his father was released from prison, Samuel continued residing with Ladonna. His father, however now with limited options of where he could reside without financial means, also began residing with them in his mother’s home. Since Ladonna had been living alone for ten years after her husband’s death, it was an adjustment of having her grandson reside with her. Now being faced with having her son also reside in her home, more adjustments to her daily routine were required to be made. Having just been released from prison, it was almost six months before her son could find employment. During this time, she was supporting both her son and grandson on limited pension benefits that were provided to her. This financial constraint changed her ability to purchase as many gifts or provide monetary gifts on occasion to them.

Samuel’s placement in her home has changed her belief that grandparenthood is fun. She does not have resentment toward Samuel for she believes that he was thrown into his current situation and he cannot be held accountable for the actions of his parents. She is proud of the
improvements Samuel is making in coping with his Attention Deficit Disorder. The doctors believe this is in part due to the loving and stable environment that Ladonna has given him during the last two years. She is also renewed with hope that since Samuel’s father was released from prison, the father and son relationship is being restored and a stronger bond is being formed. Her greatest fear remains that Samuel’s mother will relinquish his placement with her and her son. She also contemplates how Samuel will view his father’s incarceration as he learns more about this time of his father’s life in later years. She is very honest in that she sometimes feels resentful towards her son for the financial difficulties she continues to have. She was the sole supporter upon his return from prison and continues to provide the majority of the support as a result of her son’s current earning potential being so low.

She does not profess to have any words of wisdom for other grandparents who are raising their grandchildren. She feels they should be glad they are there for the grandchild if and when the need arises. “Grandparents should do the best they know how to love their grandchildren, providing them with a stable home for them to flourish.” During the difficult time she faced during her son’s incarceration, it was her grandson’s anticipated excitement in seeing his father once again that gave her the strength to continue on.

Researcher’s Perceptions

Ladonna was guarded and uneasy in speaking with me about the situation surrounding Samuel’s placement into her home and the reason for her son’s incarceration. She was actually alerted to my study through a mutual friend and I believe would not have agreed to participate if it was not for our mutual friend. She expressed to me feelings of guilt on her perceived failing of parenting her son. I believe her son’s incarceration shook the foundations of her belief that her son was innocent of the charges that led to his arrest and incarceration. Ladonna does not doubt that Samuel’s mother loves him; however, she is still trying to understand how a mother could willingly relinquish custody of her children.

From what information was provided during the personal interview, Samuel has a more loving and stable environment being provided to him than when his mother was an active participant in his life. Ladonna is and should be very proud of the resiliency being demonstrated by her ten year old grandchild. The reason for her son’s incarceration was not discussed, by her choice; however, I was advised she was not aware that he was being investigated until a few days prior to his arrest. Her son pled guilty to all charges being filed against him and at his sentencing
hearing, was ordered to begin his incarceration immediately. Neither she nor her grandson was present at the hearing and was unable to say goodbye to him prior to his sentence beginning. In retrospect, she blames herself for not being at the hearing to provide the support he may have needed from her. Because of her unanswered contemplations, she is more determined to provide a healthy, stable and loving environment to her grandson. And although her son was making the wrong choices in life, changes are being made that is enabling the father to resume his parental role and allow Ladonna to return to her role as a grandparent to Samuel.

**Case Study 5: “Ian”**

Harry and his wife of 45 years had four children and four grandchildren. Harry’s wife died of cancer three years ago. One of their children died during high school in an automobile accident. As a young adult, Harry served in the military service. Upon his honorable release from service, he held various positions as a maintenance worker. Today he is 62 years old, he continues to work full time and enjoys his job very much. His wife, although she worked out of the home on infrequent occasions, spent the majority of her time as a homemaker. They enjoyed spending time with family and friends. He is continuing to learn how to adjust to a life without the wife that he loved for so many years. Harry’s youngest daughter, Cheryl, became pregnant when she was fifteen; she is currently 40 years old. Cheryl gave birth to a healthy son. Due to the difficulty she was having being a teenage mother, she moved out of state to reside with her sister and her husband to finish school. During this time, Ian, began residing with Harry and his wife. No legal custody arrangements were made and support was not given by Ian’s mother or father.

Ian’s father, also a teenager, had a few visits with him prior to committing suicide shortly after reaching 18 years of age. Although Cheryl did return to Ohio from her sister’s home in Missouri, Ian continued to live with Harry and his wife. The mother had liberal visitation and lived with Harry and his wife sporadically as a young adult. When Ian was old enough to understand that he was living with his grandparents and not his mother, he was given the option to return to Cheryl’s home; however, Ian chose to remain with his grandparents. Ian’s mother married and remarried several times during the child’s early school years. His mother did have another child, a daughter, Angela, whom she raised for the majority of her minor years with her husband, Angela’s father. Even after Cheryl and her husband divorced, Angela remained with Cheryl. Ian is currently 25 years of age; his sister is now 17 years old.
Harry and his wife’s greatest fears were not for their grandson, but for their daughter, Cheryl. They wanted their daughter to be able to provide a stable environment for Ian, a home for him to return to with her. Because of Cheryl’s numerous marriages that ended in divorce, they were fearful that she would not be able to provide the stability that Ian would need or deserve. They were concerned that Cheryl’s lack of education would also prohibit her from providing financially for Ian.

Harry expressed many joys and no regrets or resentment for being placed in the situation of raising his grandchild. This is not to neglect the issue that he wishes his daughter would have been mature enough to actually be the one raising his grandson. He is honest with himself that placement with his daughter would not have been the best for Ian. He and his wife were happy that their grandson resided with them over the years. As a result of this placement, they established a closer relationship than a grandparent to child. He is very proud of the fine young man that Ian has become. Ian today has two children of his own and is providing a healthy and happy environment for his children. Harry hopes that he and his wife played a part in teaching Ian how to accomplish this.

Although he does not have any acquaintances of other grandparents raising their grandchildren, he believes the key to providing a home for a grandchild “includes loving them with all of your heart and making things right for them”. In retrospect, he feels that although the support was given for his grandson, they often were not there to provide all the support his daughter Cheryl needed. Their permission to allow Cheryl to move out of state to the home of her sister was their way of allowing her to reclaim and redefine her life given the challenges she had to deal with at such a young age.

Researcher’s Perceptions

I first met Harry through a mutual friend. And although he did not view his providing parental support to his grandson as an exceptional occurrence, he was willing to participate in my study. He did not feel comfortable meeting with me in person and therefore the personal interview was completed by telephone contact.

Harry believes that his daughter Cheryl did not want to give up physical custody of Ian but felt for the sake of her son, she needed to finish high school and re-evaluate the path she had chosen for herself. She wanted to be able to provide a home for her son, however by the time this occurred, her son was having his needs met and dreams fulfilled living with his
grandparents. Cheryl continued to struggle with her relationships, marrying several times before her son became 18 years of age. She just recently survived her fifth divorce and is currently residing with a male friend. Although her relationships were not stable, her relationship with her son continues to grow. At no time would Cheryl forbid the child to live with his grandparents or would Harry and his wife limit visitation with Cheryl. Cheryl today is very involved in Ian’s life and that of his children. And although Ian’s grandmother is now deceased, he continues to share a very close relationship with his grandfather.

**Themes**

After completing the face-to-face interviews, field notes were compared to identify common answers, opinions or thoughts expressed by all grandparents interviewed. Specific questions considered in these comparisons included, what did each grandparent have in common? Did they have the same concerns, fears, expectations or joy in their new role as a surrogate parent for their grandchild? What did they all share when evaluating the needs and challenges they faced in caring for their grandchild? As a result of this comparison, four common themes were identified. These themes are described below.

The first, with the exception of Jimmy and Peter’s case, all grandparents had informal custody of their grandchild. They did not see a reason to seek legal, permanent custody through the court system. They were able to reach an agreement with the parent that had legal responsibility for the child in order to be able to continue an informal placement where they were responsible for meeting the physical and emotional needs of the grandchild.

The second common theme, which was expressed by the grandparents in three of the five case studies, was feeling they had somehow failed in their role as a parent to their own biological children. They questioned that if they had been a better parent to their own child, would their grandchild be currently placed with them. Through self-reflection, three grandparents have stated they have tried to trace back to the particular instance where they made a mistake in raising their own child. Because of their perceived feelings of failure, they are more determined to be a better parent to their grandchild. They have been given a chance to “parent again”, however this time as a surrogate parent to their grandchild. In Rogers and Jones (1999), the placement of grandchild in the home of the grandparents also makes their relationships with other family members, grandchildren, spouses and biological children difficult. This would also contribute to the feelings of failure on the part of the grandparent caregiver.
The third theme was present in four case studies. Even when the situation allowed, the grandchild did not return to the home of the legal parent. At some given point in time, Jessica, Adam and Ian were given the option to return to the home of their parent. In all three situations, the children decided living with their grandparent was the best placement for them. And although Samuel was able to reunite with his father after his father’s release from prison, they are currently residing together in the grandmother’s home. Samuel’s father does not have legal custody of Samuel. Jimmy and Peter have not been given an option by the courts to return to the home of their mother or father. In Climo, Patterson and Lay (2002), grandparents had hope the parents of the grandchildren would somehow reestablish themselves to assume responsibility of the children. In Jendrek’s study (1994), a hope was expressed by the grandparents to be able to restore the nuclear family of their grandchild.

The last common theme was shared by all grandparents interviewed in this study. Although stated in a variety of ways, each grandparent expressed no feelings of regret for assuming the surrogate parent role for their grandchild. And although many sacrifices have been made by each grandparent, some experiencing more sacrifices than others, they did not resent the child’s presence in their home. Their focus remained on providing a healthy, secure and happy environment for their grandchild to flourish.
Chapter 5: Discussion/Conclusions

The five grandparents interviewed expressed a desire to provide each of their grandchildren with the emotional, physical and financial support they desperately needed. I found minimal financial support was provided to the grandparents raising their grandchild. The mother of the grandchildren in three of the five case studies provided some support to the grandparent. The support given by the fathers of the children was even less with only one father offering any financial support to help raise his child. State assistance was received by two grandparents, one in the form of social security benefits; and, the other, Temporary Assistance for Needy Families (TANF). And while some support was provided for clothing expenses, educational costs, prescription medications and physicians or dentists, the majority of the support continued to be provided to each child by the grandparent.

Another interesting comparison to make, although not directly asked in the preliminary interview but was revealed in the interview, was the reason the children first came to be placed in the grandparent’s home. One common reason for the placement into the grandparent’s home did not exist across the five cases. In the first case, the reason for the child’s displacement from the parents’ home was that the mother of the child died and the father was not providing the support needed for the child. The second case involved a situation where the mother and father were substance abusers and were ordered into rehabilitation by the court system. At the initial placement of the minor child in the third study, the mother was ill and completing a difficult divorce proceeding. In the fourth case, the father was incarcerated. He was divorced from the child’s mother, however, and shortly after the father’s incarceration the mother came to the decision that she did not want placement of the child to continue in her home. And lastly, in the fifth case, the minor child was a result of his mother becoming pregnant with him as a teenager while she was still enrolled in high school. All grandparents interviewed expressed that no matter what the cost to them personally or financially, they were going to find a way to give their grandchild the love and support they needed because it was not being provided to them by their parents.

Lessons Learned

The literature review indicated, the dominant reason for a grandchild being placed in the custody of a grandparent was the result of substance or alcohol abuse of the parent (Bowers &
Myers, 1999; Burton, 1992; Minkler, Roe, & Price, 1992; Minkler, Rose, & Robertson-Beckley, 1994; Rodgers & Jones, 1999; Sands & Goldberg-Glen, 1996; Waldrop & Weber, 2001). The findings of this researcher’s study were not indicative of the research previously completed. Although a small sample was used in this study, only one situation existed where the reason for a grandchild being placed in the custody of the grandparent was due to the substance or alcohol abuse of the child’s parent. Alcohol and substance abuse could have been present in each case, but was not cited as being the primary reason for the child’s removal from the parent’s home.

Grandparents are facing countless new challenges with assuming the surrogate parental role for their grandchildren. Although grandparents of Jessica and Adam were financially stable, grandparents of Jimmy, Peter, Samuel and Ian were faced with limited financial means to meet the needs of their grandchild. Jimmy and Peter had severe medical issues facing them as young babies and face continuing difficulties as young children. Samuel, although not as severe as Jimmy and Peter, has Attention Deficit Disorder that impacts his health and perhaps his learning and social abilities. Adam is faced with the looming possibility that he will be inflicted with the same disease that took the life of his mother and grandfather. At the center of each of these situations are the grandparents who are trying to provide a stable, healthy environment for the children to flourish. As seen in the study of Sands and Goldberg-Glen (1996), meeting the emotional and physical needs of their grandchildren is an issue that adds additional stress to the grandparent caregivers.

A challenge to continue social relationships with family or friends was not readily prevalent in the case studies with the exception of Sharon. Sharon really wants to find that special male acquaintance that she can share her time with. But, given that she has legal custody of two small grandchildren, she believes this prevents men from developing a relationship with her. Pam, Ladonna and Harry did not express a desire to form a relationship with a person of the opposite sex. They are all divorced after having been married for many years and do not seem to be seeking a long term relationship. Although the questionnaire did not specifically address the issue, Ladonna expressed concern that she was having difficulty helping Samuel with his homework. Because it has been several years since her children were in school, she is faced with new ways of learning to include computers and electronic technology even at Samuel’s young age.
Kinship care programs are being developed as a response to the increased care being given by grandparents and relatives of children placed out of the home. Kinship care programs do not require legal custody to be established. For example, the Kinship Permanency Incentive program’s goal is to promote the caregiver to establish legal custody or guardianship with the child in their care. Financial incentives are being offered initially to the caregiver to help with the costs of legal representation and continue until a maximum of $3,500 is reached to help support the stability being offered to the minor child. Because this program encourages a legal change of custody, it is not appealing to every caregiver situation. In review of the case studies completed in this study, only one of the five grandparents would be interested in this type of program. So what about the other four grandparents who are providing care for their grandchild? Services appear to be limited to each of the grandparents. State department of family services have resources available to caregivers to help with finances, food, counseling, vaccinations or educational assistance, to name a few. However, grandparents must be willing to initiate contact with the service providers and also be willing to accept the help being offered. Grandparent caregivers in the studies of Rodgers and Jones (1999), Sands and Goldberg-Glen (1996), and Climo et al. (2002) all cited a lack of information on what services are actually available to them. While states are seeking to expand kinship care programs, many are hoping to pass laws to make it easier for grandparents and other family members to gain legal rights to enroll the children they are caring for in school and to provide and seek medical assistance for them. Some states are enacting laws making grandparents guardians of grandchildren already residing with them. Emphasis is being placed by courts and children services to find placements with relatives that are able to provide safe, nurturing homes to children that must be placed outside of their parent’s home. The greatest lesson that can be learned is to acknowledge that some grandparents are taking the role of a surrogate parent to their grandchildren. This is a role that is changing the way grandparenthood is defined. It is an occurrence that is happening more frequently, less unexpectedly, and with little support being given to the grandparent.

Unanticipated Findings

Upon review of each case study completed, unanticipated findings were identified. Given that a small number of case studies were completed, five different reasons for each child being placed into the grandparent’s home existed: for Jessica, her mother died of cancer; for Jimmy and Peter, their parents were substance abusers who were incarcerated as a result of their
habits; for Adam, his parents were getting a divorce and then he later lost his mother to Huntington’s disease; for Samuel, his father was incarcerated and his mother willingly placed him outside of her home; and, for Ian, his mother and father were teenagers who became parents before they were of the maturity to assume this role. Given this small sample population, the expectation of common situations leading to the grandchild leaving the home of their parents was expected.

When I began this research study, I anticipated identifying grandparents who would be more than willing to discuss their situation that led them to become a surrogate parent to their grandchild. I was expecting their willingness to disclose how assuming this new role had changed their life, their plans for retirement, and their social activities. Being able to understand the sacrifices made financially and personally were a few of the disclosures expected. I was not, however, expecting the amount of hesitancy, reluctance or distrust in participating in the study. Naivety was present in assuming that full disclosure of their private, personal situations might be given.

Another unanticipated finding was the lack of knowledge grandparents had regarding what services were available to them through family services, social service agencies or through the court system. Given the financial difficulties the grandparents experienced, I was anticipating the grandparents exploring financial resources that may be available to them. Resources are available through court ordered child support payments for the child’s placement in their home; resources from state social service agencies through Temporary Assistance for Needy Families (TANF) and Food Stamps; through state Medicaid assistance since grandparents assumed the medical expenses of the children; or free vaccinations or counseling services provided by local hospitals or health departments. I found the grandparents were not willing to explore these opportunities regardless of their need if it meant sharing their personal information was needed.

**Limitations**

There is no precise way of setting criteria for interpreting the findings of case studies (Yin, 1984). The mere focus of case studies is to direct attention to something that should be examined. This was accomplished. Through this study, several pieces of information related to grandparents raising their grandchild were obtained through identification of common themes. When several case studies are completed, with the same or similar answers being given to the
questionnaire instruments, this replication provides a source of validity for the findings discovered. This study is limited with the small number of studies completed. “Strength of qualitative research is validity and participants must be interviewed in sufficient detail for results to be true, correct and complete. A weakness of qualitative research is when limited numbers cannot be representative even if great care for cross sections of the population is obtained” (Hakim, 1987).

The non response from potential participants is also a limitation in research. This limitation could be reflections of the instruments used not being clearly written. The initial contact letter soliciting participants may not have been written in a manner to convince the grandparents to participate or the importance of the study not shown to be relevant to them. The limitation also exists as to being able to determine the exact reason why the unwillingness to participate was present. These limitations address the size of the sample and the instrument used but another limitation exists in the researcher conducting the study and completing the interviews with each participant.

**Biases**

The biases the researcher brings into each situation could affect the validity of the research study. With qualitative research, unlike qualitative studies, a margin of error in findings reached cannot be calculated. Qualitative research findings rely on the abilities of the researcher completing the interviews with each participant. The researcher needs to be able to ask good questions, which is also a reflection of the instrument used. Researchers should be good listeners, adaptive, flexible, and unbiased by preconceived responses while possessing a firm grasp of the issues being studied— in this case grandparents raising their grandchildren (Glatthorn & Joyner, 2005). Running descriptions of events, people, conversations heard during each interview could be misinterpreted by the researcher when the interview guide or facesheets are completed during each interview.

The interviewee should be given the researcher’s full attention, listening to what he or she is trying to express. The researcher should possess active listening skills, being cognizant of recording the information given and not actually adding personal comments to the conversations. A good listener captures the mood of the interview, understanding the context or manner the information is being offered. It can be difficult to assimilate the large amount of information often provided in interviews without the bias of the researcher being present.
Recommendations for further study

As illustrated in the literature review and chart of research completed, the majority of sample populations studied include homes where only a grandmother is present or both a grandmother and grandfather. Very little research has been completed where the grandfather is providing parental support to his grandchild without a grandmother being present. This void in literature was acknowledged and became the initial focus of my study. With little resources, and the lack of willing participants found within the geographic areas defined, the focus of the study then allowed for any grandparent providing support to their grandchild. This is definitely an area in which further study would be beneficial.

The ethnicity of the grandparents sampled in previous research was predominantly Caucasian and African American. While nationally of the two ethnic groups accounted for 52.6% and 35.5% respectively, 13.1% of Hispanics or Latino grandparents were responsible for the support of their grandchildren. Do the challenges Hispanic or Latino grandparents face differ vastly from that of grandparents of Caucasian or African American ethnicity? Are the reasons the grandchildren are being placed with a grandparent similar? Are they more willing to seek and accept services being offered through state or local agencies? And what can be done to alert grandparent caregivers of the support services available to them? Support should not only be given to help care for the physical and financial needs of the grandchildren but emotional support should also be given. We need to help the children cope with the situation their families are facing through family therapy or counseling.

The findings of the present study can be furthered by exploring the perspectives of grandchildren being raised by their grandparents. Doing so would allow for support to be given regarding the physical, financial and emotional needs of the grandchildren. Family life educators need to help the children cope with the situation their families are facing through family therapy or counseling. Educators could benefit by inquiring as to how the grandchild describes the family situation that necessitated their placement outside of their parent’s home. The following are examples of possible research questions in this area. Were their needs being met by their placement with the grandparents? What obstacles did they feel existed that prevented their return to their parent’s home? What system of support did they feel needed to exist to help with the reunification of the family?
It would also be beneficial to explore if the grandchild’s relationship with his or her parents is restored. If the relationships were repaired, what steps were taken by the parents to re-establish a healthy relationship with their child? What role did the grandparent play in helping to reunify the parents and grandchild? If a longitudinal study was available, did the grandchild remain in the legal custody of the parent or did a reoccurrence of a placement outside of the home occur? By taking a critical view of the situation, family advocates could provide a support system that would aid the child in reunification with the family given it is in the best interest of the child. By identifying the issues that may still exist, family life educators can assist the parents to learn, grow and develop healthy relationships in anticipation of the day they become grandparents.
References


Publications.


APPENDIX A

COURTS

Butler

Butler County Domestic Relations Court, Family Unit
Administrative Office, Government Services Center
315 High Street
Hamilton, Ohio 45011

Butler County Common Pleas Court, General Division
Manager Court Administration, Mary Swain
315 High Street
Hamilton, Ohio 45011

Butler County Juvenile Justice Center, Court Administrator
280 N. Fair Avenue
Hamilton, Ohio 45011

Butler County Probate Court, Court Administrator
101 High Street
Hamilton, Ohio 45011

Darke

Darke County Common Pleas Court, Court Administrator
4th and Broadway
Greenville, Ohio 45331

Darke County Juvenile Court, Court Administrator
4th and Broadway
Greenville, Ohio 45331

Darke County Probate Court, Court Administrator
4th and Broadway
Greenville, Ohio 45331

Montgomery

Montgomery County Domestic Relations, Court Administrator
301 W. Third, Box 972
Dayton, Ohio 45422

Montgomery County Juvenile Court, Court Administrator
303 W. Second Street
Dayton, Ohio 45422

Montgomery County Probate Court, Court Administrator
41 N. Perry Street
Dayton, Ohio 45422
**Preble**

Preble County Common Pleas Court, Court Administrator  
100 E. Main Street  
Eaton, Ohio  45320

Preble County Juvenile Court, Court Administrator  
100 E. Main Street  
Eaton, Ohio  45320

Preble County Probate Court, Court Administrator  
100 E. Main Street  
Eaton, Ohio  45320

**Randolph**

Randolph County Circuit Court, Court Administrator  
100 S. Main  
Winchester, Indiana  47394

**Union**

Union County Circuit Court, Court Administrator  
26 West Union  
Liberty, Indiana  47353

**Wayne**

Wayne County Circuit Court, Court Administrator  
401 E. Main  
Richmond, Indiana  47374

**COMMUNITY SERVICES**

**Butler**

Butler County Children’s Service  
300 N. Fair Avenue  
Hamilton, Ohio  45011

Butler County School District Head Start Program  
250 N. 9th Street  
Hamilton, Ohio  45011

Butler County School District Head Start Program  
1140 S. Front Street  
Hamilton, Ohio  45011

Catholic Social Services of Butler County  
140 N. 5th Street  
Hamilton, Ohio  45011

Colonial Senior Services  
520 Eaton Avenue  
Hamilton, Ohio  45013
Community Christian School
3100 Princeton Road
Hamilton, Ohio  45014

East Butler County YMCA
6645 Morris
Hamilton, Ohio  45011

Holy Cross Child Development
5071 Winton Road
Hamilton, Ohio  45014

Immanuel Lutheran Christian Day School
1285 Main Street
Hamilton, Ohio  45013

Job and Family Services
315 High Street
8th Floor
Hamilton, Ohio  45011

Job and Family Services
1021 Central Avenue
Middletown, Ohio  45044

Just Like Home Children’s Center
6558 Liberty
Fairfield, Ohio  45011

Kiddie Kampus Preschool and Day Care Centers
1217 Hicks Blvd.
Fairfield, Ohio  45014

Lifespan
1900 Fairgrove Avenue
Hamilton, Ohio  45011

Oxford Senior Citizens
922 Tollgate Drive
Oxford, Ohio  45056

Oxford Talawanda Community Services
5445 College Corner Pike
Oxford, Ohio  45056

Presbyterian Creative Center for Children
23 Court Street
Hamilton, Ohio  45011

The Goddard School
6124 Ambassador Drive
Fairfield, Ohio  45014
The Goddard School
7739 Princeton Glendale
Hamilton, Ohio 45011

WIC Butler County
111 Buckeye
Hamilton, Ohio 45011

Wonderful World of Kids
1290 Northwest Washington Blvd.
Hamilton, Ohio 45013

YMCA Child Care Center
3431 Hamilton Middletown
Hamilton, Ohio 45011

YWCA Preschool
244 Dayton Street
Hamilton, Ohio 45011

YMCA of Great Miami Valley
4803 Augspurger Road
Hamilton, Ohio 45011

YMCA of Great Miami Valley
4601 Fairfield Avenue
Hamilton, Ohio 45014

Darke

Community Action / Scope
1469 Sweitzer Street
Greenville, Ohio 45331

Darke County Senior Center
1469 Sweitzer
Greenville, Ohio 45331

Family Health Services
5735 Meeker Road
Greenville, Ohio 45331

Greenville Head Start
1170 Sweitzer
Greenville, Ohio 45331

Head Start
116 E. Third Street
Greenville, Ohio 45331

Job and Family Services
365 Martin Street
Greenville, Ohio 45331
Kids Learning Place  
1170 Sweitzer  
Greenville, Ohio  45331

Senior Citizens Inc.  
904 Wayne Avenue  
Greenville, Ohio  45331

The Child and Family Therapy Center  
127 W. 5th  
Greenville, Ohio  45331

Young Mens Christian Association Darke County  
301 Wagner  
Greenville, Ohio  45331

**Montgomery**

A and D Daycare and Learning Center  
1049 Infirmary Road  
Dayton, Ohio  45418

Adoption by Graceworks Lutheran Services  
3131 South Dixie Drive, Ste. 300  
Dayton, Ohio  45439

A Little Place to Grow  
2101 E. Stroop  
Dayton, Ohio  45429

Aley United Methodist Church Child Development  
4143 Kemp  
Dayton, Ohio  45431

All People’s Child Care  
781 Summit Square Drive  
Dayton, Ohio  45427

Beavercreek YMCA  
560 Grange Hall Road  
Dayton, Ohio  45430

Branches of MT Olive Child Care Center  
5501 Olive Road  
Dayton, Ohio  45426

C Orsp Inc – Council of Rural Services Program  
Montgomery County Headstart  
5350 Denlinger Road  
Dayton, Ohio  45426

Catholic Social Services  
922 West Riverview  
Dayton, Ohio  45407
Centerville Child Development Center
8095 Garnet Drive
Dayton, Ohio  45458

Cherub International
1827 W. Tamarron Ct.
Springboro, Ohio  45066

Child Care Works
3077 Kettering Blvd.
Dayton, Ohio  45439

Children’s World Learning Centers – District Office
245 W. Elmwood Drive
Dayton, Ohio  45459

Children’s World Learning Center
1875 Ebert Avenue
Dayton, Ohio  45439

Christ United Methodist Preschool
3440 Shroyer Road
Dayton, Ohio  45429

Clara’s Academy of Excellence
2075 Shiloh Springs
Dayton, Ohio  45426

Community Services
211 S. Main Street 500
Dayton, Ohio  45402

COR Care
200 Homewood Avenue
Dayton, Ohio  45405

Counseling Services
3131 South Dixie Drive
Dayton, Ohio  45439

Cross Point United Methodist Church
506 E. Main Street
Dayton, Ohio  45426

Dayton Association for Young Children
5206 Belle Isle Drive
Dayton, Ohio  45439

Dayton Public Schools – Head Start
115 S. Ludlow
Dayton, Ohio  45402
Downtown YMCA  
316 N. Wilkinson  
Dayton, Ohio 45402

Family First Enrichment Center  
502 E. Main Street  
Dayton, Ohio 45426

Family Service Associates  
184 Salem Avenue  
Dayton, Ohio 45406

First Baptist Day Care  
5310 Packard Drive  
Dayton, Ohio 45424

First Presbyterian Preschool  
125 Wilson Park Drive  
Dayton, Ohio 45449

Germantown Senior Citizens  
33 N. Cherry Street  
Germantown, Ohio 45325

Grandma’s Child Development Center  
8711 N. Dixie Drive  
Dayton, Ohio 45414

Huber Heights YMCA  
7251 Shull Road  
Dayton, Ohio 45424

Immaculate Conception Child Care  
2268 S. Smithville  
Dayton, Ohio 45420

Integrated Youth Services  
3095 Dayton Xenia  
Dayton, Ohio 45434

Jewish Family Services  
4501 Denlinger Road  
Dayton, Ohio 45426

Job and Family Services  
Job Center Administration Center  
Dayton, Ohio 45402

Kettering Youth Services  
5350 Lamme Road  
Dayton, Ohio 45439
Kindercare Learning Centers
951 E. Rahn Road
Dayton, Ohio  45429

Lutheran Social Services
6430 Inner Mission Way
Dayton, Ohio  45459

Miami Valley Child Development Centers – Head Start
215 Horace
Dayton, Ohio  45402

Miami Valley Hospital – Child Care Center
28 Hill
Dayton, Ohio  45409

Mini University – Montgomery County Child Care
40 Vista View
Dayton, Ohio  45402

Montgomery County Children’s Services
3304 N. Main
Dayton, Ohio  45405

New Hope Lutheran Child Care
2000 Catalpa Drive
Dayton, Ohio  45406

New Reflections Counseling Inc.
42 E. Rahn Rd., Ste. 200
Kettering, Ohio  45429

Oak Creek United Church of Christ Day Care
5280 Bigger Road
Dayton, Ohio  45440

Ohio Head Start Association
505 Windsor Park
Dayton, Ohio  45459

Ohio Youth Advocate Program
1020 Woodman Drive, Ste. 330
Dayton, Ohio  45432

Saint Anthony Child Care Center
830 Bowen Street
Dayton, Ohio  45410

South Community Family YMCA Child Care
4545 Marshall Road
Dayton, Ohio  45429
YMCA of Greater Dayton
2100 S. Holland Sylvania Road
Dayton, Ohio 45449

YMCA of Greater Dayton
111 W. 1st Street
Dayton, Ohio 45402

YMCA Neighborhood Development Center at Cross Pt.
506 E. Main Street
Dayton, Ohio 45426

Youth Engaged For Success
5300 Salem Bend Drive
Dayton, Ohio 45426

Preble

Preble County Council on Aging
800 E. Saint Clair Street
Eaton, Ohio 45320

Preble County Headstart Eaton Center
121 Industrial
Eaton, Ohio 45320

St. Clair Academy
116 W. St. Clair
Eaton, Ohio 45320

YMCA of Greater Dayton
450 Washington Jackson Road
Eaton, Ohio 45320

Wayne

Community Action of East Central Indiana
1845 W. Main Street
Richmond, Indiana 47374

Community Action of East Central Indiana
315 National Road W.
Richmond, Indiana 47374

Communities in Schools of Wayne Inc.
33 S. 7th Street
Richmond, Indiana 47374

Division of Family Children
50 S. 2nd Street
Richmond, Indiana 47374
Head Start 714 Center
714 N. 12th Street
Richmond, Indiana 47374

Head Start Caeci I. Center
1845 W. Main Street
Richmond, Indiana 47374

Head Start
701 Crestdale Drive
Richmond, Indiana 47374

Head Start Sadia Hodgkin Center
904 N. 13th Street
Richmond, Indiana 47374

Head Start Townsend Center
855 N. 12th Street
Richmond, Indiana 47374

Head Start Wayne County
855 N. 12th Street
Richmond, Indiana 47374

Kids Kingdom Childcare
5600 U.S. Highway 27 N.
Richmond, Indiana 47374

Lutheran Counseling Center
2300 W. Main Street
Richmond, Indiana 47374

Noah’s Ark Day Care Center
131 Northwest 8th
Richmond, Indiana 47374

Northeastern Senior Center
107 U.S. Highway 27 S.
Fountain City, Indiana 47341

Old Richmond Daycare
121 S. 3rd Street
Richmond, Indiana 47374

Richmond Senior Center
1600 S. 2nd Street
Richmond, Indiana 47374

Senior Opportunities Services
401 S. 4th Street
Richmond, Indiana 47374
Spring Grove Child Care  
1516 Chester Blvd.  
Richmond, Indiana 47374

Tots and Toys Day Care  
709 S. 7th Street  
Richmond, Indiana 47374

Townsend Community Center  
855 N. 12th Street  
Richmond, Indiana 47374

Truth Tabernacle Church  
408 South O Street  
Richmond, Indiana 47374

Trinity Lutheran Childcare  
2300 W. Main Street  
Richmond, Indiana 47374

Wernles Childrens Home  
2000 Wernle Road  
Richmond, Indiana 47374

EDUCATION

**Butler**

Fairfield City Schools  
211 Donald Drive  
Fairfield, Ohio 45014

Edgewood City Schools  
3500 Busenbark Road  
Trenton, Ohio 45067

Hamilton City Schools  
533 Dayton Street  
Hamilton, Ohio 45011

Lakota Local School District  
5572 Princeton Road  
Liberty Township, Ohio 45011

Madison Local School District  
1324 Middletown Eaton Road  
Middletown, Ohio 45042

Middletown City School District  
1515 Girard Avenue  
Middletown, Ohio 45044
Monroe Local School District  
30 Overbrook Drive, Ste. D  
Monroe, Ohio  45050  

New Miami Local School District  
600 Seven Mile Avenue  
Hamilton, Ohio  45011  

Ross Local School District  
3371 Hamilton Cleves  
Hamilton, Ohio  45013  

Talawanda Local Schools  
131 W. Chestnut Street  
Oxford, Ohio  45056  

*Darke*  

Ansonia Local Schools  
600 E. Canal Street  
Ansonia, Ohio  45303  

Arcanum Butler Local Schools  
2 Weisenbarger Court  
Arcanum, Ohio  45304  

Franklin Monroe Local Schools  
P. O. Box 78  
Pitsburg, Ohio  45358  

Greenville City Schools  
215 W. 4th Street  
Greenville, Ohio  45331  

Mississinawa Valley Local Schools  
419 E. Elm Street  
Union City, Ohio  45390  

Tri Village Local Schools  
P. O. Box 31  
New Madison, Ohio  45346  

Versailles Local Schools  
4 Virginia Street  
Box 313  
Versailles, Ohio  45380  

*Montgomery*  

Brookville Local Schools  
325 Simmon Avenue  
Brookville, Ohio  45309
Centerville City Local Schools  
111 Virginia Avenue  
Centerville, Ohio  45458

Dayton City Local Schools  
348 W. First Street  
Dayton, Ohio  45402

Huber Heights City Local Schools  
5954 Longford Road  
Huber Heights, Ohio  45424

Jefferson Township Local Schools  
2989 S. Union Road  
Dayton, Ohio  45418

Kettering City Local Schools  
3750 Far Hills Avenue  
Kettering, Ohio  45429

Mad River Local Schools  
801 Harshman Road  
Dayton, Ohio  45431

Miamisburg City Local Schools  
540 E. Park Avenue  
Miamisburg, Ohio  45342

New Lebanon Local Schools  
278 E. Main Street  
New Lebanon, Ohio  45345

Northmont City Schools  
4001 Old Salem  
Englewood, Ohio  45322

Northridge Local Schools  
2011 Timber Lane  
Dayton, Ohio  45414

Oakwood City Schools  
20 Rubicon Road  
Dayton, Ohio  45409

Trotwood Madison Local Schools  
444 S. Broadway  
Trotwood, Ohio  45426

Valley View Local Schools  
64 Comstock Avenue  
Germantown, Ohio  45325
Vandalia Butler Local Schools  
306 S. Dixie Drive  
Vandalia, Ohio  45377

West Carrollton Local Schools  
430 E. Pease Avenue  
West Carrollton, Ohio  45449

**Preble**

College Corner Local Schools  
230 Ramsey Ct.  
W. College Corner, Ohio  45003

Eaton Community Schools  
201 East Saint Clair Street  
Eaton, Ohio  45320

National Trail Local Schools  
6940 Oxford Gettysburg Road  
New Paris, Ohio  45347

Preble Shawnee Local Schools  
124 Bloomfield  
Camden, Ohio  45311

Tri County Local Schools  
436 N. Commerce  
Lewisburg, Ohio  45338

Twin Valley Community Schools  
100 Education Drive  
West Alexandria, Ohio  45381

**Randolph**

Monroe Central Local Schools  
1918 N. C.R. 1000 W.  
Parker City, Indiana  47368

Randolph Central Local Schools  
103 N. East  
Winchester, Indiana  47394

Randolph Eastern Local Schools  
907 N. Plum  
Union City, Indiana  47390

Randolph Southern Local Schools  
P. O. Box 385  
Lynn, Indiana  47355
**Union**

Union County College Corner Joint School District  
107 Layman  
Liberty, Ohio 47353

Union School Corporation  
8707 W. U.S. Highway 36  
Box 148  
Modoc, Indiana 47358

**Wayne**

Centerville Abington Local Schools  
115 W. South Street  
Centerville, Indiana 47330

Nettle Creek Schools  
297 E. Northmarket Street  
Hagerstown, Indiana 47346

Northeastern Wayne Local Schools  
314 W. Main  
Union City, Indiana 47341

Western Wayne Local Schools  
519 Queen Street  
Pershing, Indiana 47370

Earlham College  
801 National Road West  
Richmond, Indiana 47374

Indiana University East  
2325 Chester Blvd.  
Richmond, Indiana 47374

Richmond Community Schools  
300 Hub Etchison Parkway  
Richmond, Indiana 47374
To Whom It May Concern:

I am conducting a research study, *Grandparents Parenting Their Grandchildren: New Roles Being Defined*, to fulfill the requirements for a Masters thesis in Family Life Education at Miami University under the supervision of Dr. M. Elise Radina, Assistant Professor. My study will focus on the factors that influence grandparents to assume the role of parental caretaker of their grandchildren. It will also explore the stressors grandparents face as they assume this new and unexpected role.

I am asking for your assistance in identifying participants for this study. I have included a Summary of the Expectations of the participants involved. Included with this summary is additional information regarding the purpose of the study and contact information. Also enclosed you will find self-addressed postcards that each possible participant can return to me to obtain additional information regarding this study.

I believe this study can give voice to the grandparents who are taking on the sometimes daunting task of caring for their grandchildren. Your cooperation is important and very much appreciated.

Please feel free to contact me with any questions you may have. Thank you for your assistance.

Sincerely,

Dawn White
APPENDIX C

PARTICIPANTS NEEDED

Participants are needed for a research project involving grandparents who are raising their grandchild(ren). The topic of the research project is *Grandparents Parenting Their Grandchildren – New Roles Being Defined* and is being completed by Dawn White, a masters-level student at Miami University, Oxford, Ohio. (Faculty Advisor: Dr. M. Elise Radina; Contact information: Miami University, Family Studies and Social Work, 101 E. McGuffey Hall, Oxford, Ohio 45056; Telephone: (513) 529-3639; e-mail: radiname@muohio.edu).

WHO IS NEEDED TO PARTICIPATE

Grandparents who have the primary responsibility of a grandchild to include both physical and financial with legal or informal custody being established. The grandchild residing in the home should be between the ages of five and eighteen years of age; lived with the grandparent at least two months; without the presence of the natural parent. No preference will be given to the grandparent’s marital status.

PURPOSE

The purpose of this study is to discover the factors that influence grandparents to assume the role of parental caretaker of their grandchild(ren). It will also explore the stressors grandparents face as they assume this new and unexpected role.

Grandparents as caregivers are a marginalized group in today’s society. Through a qualitative approach, I hope to give voice to the grandparents who are taking on the sometimes daunting task of caring for their grandchild(ren).

EXPECTATIONS OF EACH PARTICIPANT

Each participant will be asked to complete a Preliminary Survey to be returned with a signed Voluntary Consent Signature Page in a prepaid return envelope to the researcher. Participants will also be asked to also complete a Personal Interview Questionnaire with the researcher either in person or by telephone. This research study will require four hours of each participant’s personal time.

COMPENSATION

No payments will be made for participating in this study. All subjects participating in this study however will be eligible for a random drawing of a $50.00 gift certificate from a local retail store.

Interested participants should contact Dawn White in care Dr. M. Elise Radina of Miami University, Family Studies and Social Work, 101 E. McGuffey Hall, Oxford, Ohio 45056; Telephone: (513) 529-3639; e-mail: radiname@muohio.edu).
APPENDIX D

(Return postcard sample)

Front of postcard:

Dawn White
% Miami University
Family Studies and Social Work
101 E. McGuffey Hall
Oxford, Ohio  45056

Back of postcard:

I would like to receive additional information regarding your research study on Grandfathers Parenting Their Grandchildren – New Roles Being Defined.

Name: __________________________________________________________
Street Address: ___________________________________________________
City, State, Zip: ___________________________________________________
Email: __________________________________________________________
Telephone: ______________________________________________________
Date

Participant’s Name (Potential)
Street Address
City, State, Zip

Dear (Participant’s Name):

Information was previously sent advising you of a research study I am conducting regarding *Grandparents Parenting Their Grandchildren – New Roles Being Defined*. Since you have not returned the Preliminary Survey or Voluntary Consent Signature Page, it is my hope that you are still willing to participate.

If you have any questions or concerns regarding your involvement in this study, please feel free to contact me by letter at the address listed above or by telephone at (513) 529-2323.

I believe this study can give voice to the grandparents who are taking on the sometimes daunting task of caring for their grandchild(ren). Your cooperation is important and very much appreciated.

Sincerely,

Dawn White
Dear Mr. Shaffer,

Again, thanks for taking the time to consider participating in my research study. Enclosed you will find the following:

- **Consent and Information Form** - for the participant to keep;
- **Voluntary Consent (Signature Page)** – this must be completed by the grandfather participating in the study and also by the spouse if they are also willing to participate. You may return the completed signature pages in the prepaid return envelope enclosed. Once received, I will also complete the signature page and return a copy for the participant to keep;
- **Preliminary Questionnaire** – this is to be completed by the participating grandfather and also returned in the prepaid return envelope enclosed;
- **Personal Interview** – this is a copy of the interview questions that will be asked during the personal interview. The personal interview can be completed by telephone or in person (at the participant’s choice of location). If the participant is uncomfortable with either method, arrangements can be made to complete this questionnaire in writing. If this is the preferred method, please advise and an additional questionnaire that allows for answers below each question will be provided.
- **Prepaid return envelope**

Any question the participant is uncomfortable with answering; do not have to be answered. If you have any questions, please feel free to contact me. You may contact me at my email (herrmadr@muohio.edu). If you need forms for additional participants, please advise and I will send them to you. I have also included a summary sheet of my study that will list additional contact information.

I look forward to working with you on this research study.

Sincerely,

Dawn White
APPENDIX G

CONSENT AND INFORMATION FORM

Complete title of research project

Grandparents Parenting Their Grandchildren - New Roles Being Defined

Introduction

You have been asked to participate in this research study because you are a grandparent who is parenting a grandchild. The purpose of this document is to provide you with information to consider in deciding whether to participate in this research study.

This study is being conducted by Dawn White, a masters-level student, in the Department of Family Studies and Social Work at Miami University, Oxford, Ohio. This research is being conducted to fulfill the requirements for a master’s thesis in Family Life Education, under the supervision of Dr. M. Elise Radina, Assistant Professor.

Purpose of the Study

The purpose of this study to discover the factors that influence grandparents to assume the role of parental caretaker of their grandchild(ren). It will also explore the stressors grandparents face as they assume this new and unexpected role.

Description of Procedures

Upon your expressed interest in this research study, each participant will receive a packet of information to include:

- Consent and Information Form (information only)
- Voluntary Consent Signature Page (two copies: one to complete and return in the prepaid return envelope to the researcher; a second copy for you to keep)
- Prepaid return envelope (to return the signed Voluntary Consent Signature Page and the Preliminary Survey)
- Preliminary Survey (which asks demographic and introductory questions. This survey should be completed and returned in the prepaid return envelope provided to you.)
- Personal Interview Questionnaire (for you review only at this time. This is a copy of the questions to be asked during the personal interview which will be conducted either in-person or by telephone at a later date.)

Both the Voluntary Consent Signature Page and the Preliminary Survey needs to be completed and returned to the researcher in the postage paid return envelope provided. After both documents are received, a personal interview will be scheduled with each participant. A copy of
the questions to be asked during this personal interview (Personal Interview Questionnaire) is being provided to you for your review.

Although encouraged, you do not have to answer all the questions on the written questionnaire or that may be asked during the personal interview. Your participation is voluntary. You may refuse to answer any question you are uncomfortable answering. You may also stop your participation at any time.

Personal interviews may be conducted in person or through telephone contact. I will be taping our conversation during the personal interview so I can accurately record your answers. If you are uncomfortable with our conversation being taped, we can still proceed with our interview. Your name will not appear on the tape. The tape will be destroyed after all data is collected and analyzed.

Your time participating in this study should not exceed 4 hours.

**Risks and Discomforts**

There are no known or expected physical risks associated with participation in this study. Due to the personal and sensitive nature of the circumstances leading to a grandparent parenting their grandchild, some questions asked on the preliminary survey or during the personal interview may cause distress or discomfort to each participant. The study will ask the grandparent to recall information from his past or his child’s that will perhaps cause emotional unrest to the participant. Additional emotional unrest may occur if the participant (grandparent) and his spouse (if married) hold differing points of view on questions asked during the research study. If this occurs, guidance and encouragement will be given for the participant to contact a local counseling center since the researcher is not licensed or trained in counseling.

This research study will also deplete 4 hours of each participant’s personal time.

**Benefits**

Grandparents as caregivers are a marginalized group in today’s society. Through this research, I hope to give voice to the grandparents who are taking on the sometimes daunting task of caring for their grandchild(ren).

It is hoped that each participant will be able to recognize their contribution in helping the researcher identify ways family studies personnel can help the transition to caretaker for grandparents raising their grandchildren. Areas of additional study and support systems needed for the grandparents can also be revealed.

Optimistically, each participant will be able to realize how self-sacrificing their willingness to care for their grandchild actually is.
**Costs Associated with the Research Study**

There are no costs to you associated with this study. A postage paid envelope will be provided for you to return the Voluntary Consent (Signature Page) and Preliminary Survey. If the personal interview is conducted by telephone, the researcher will pay for any long distance charges that may be incurred. If an in-person interview is scheduled, the researcher will incur any costs associated with meeting with each participate at their home address or location of choice.

**Compensation for Subject Participation**

No payments will be made for participating in this study. All subjects participating in this study however will be eligible for a random drawing of a $50.00 gift certificate from a local retail store.

**Confidentiality**

Any information that is obtained as a result of your participation in this study will be kept confidential. Your identity will be coded and will not be revealed with any published results. Your name and address will be kept with the researcher in a secured file. Audiotapes will also be kept in a secured file and will be destroyed after all data is collected and analyzed.

**Voluntary Participation**

Your participation in this research study is voluntary and you may stop your participation at any time. You may refuse to answer any question you are uncomfortable answering.

Completion of the following Voluntary Consent (Signature Page) must be completed and returned prior to a personal interview being scheduled.

If the grandparent (participant) is married, a Voluntary Consent (Signature Page) must also be provided if their spouse if also agreeing to participate in the study.
APPENDIX H

VOLUNTARY CONSENT

(Signature Page)

*Needs to be returned in the postage paid envelope provided.

I understand…..

• Participation in this study is voluntary.
• I am free to withdraw my consent to participate in this study at any time.
• The personal interview will be taped for accurate recording however my name will not appear on the tape and the tape will be destroyed after all data is collected and analyzed.
• All the above information regarding this study as outlined in this consent form.
• I am encouraged to ask questions about any aspect of this research study and questions will be answered by the researcher listed on this form.

By signing this form I agree to participate in this research study. A signed copy of this consent form will be given to me.

<table>
<thead>
<tr>
<th>Participant’s Name</th>
<th>Participant’s Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

*If applicable, name and signature of person who helped complete this Voluntary Consent (Signature)

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

I certify that the nature and purpose, the potential benefits and possible risks associated with participation in this study have been explained.

<table>
<thead>
<tr>
<th>Researcher’s Name</th>
<th>Researcher’s Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Contact Information

You can talk to the researcher about any questions or concerns you have about this study. Contact the researcher in care of Department of Family Studies and Social Work, (513) 529 – 2323 or at (937) 248 – 9052.

If you have any questions, comments or concerns about taking part in this study, first talk to the researcher listed above. If, for any reason, you still have concerns you may contact the faculty advisor, Dr. M. Elise Radina, at (513) 529 – 3639.

For information regarding your rights as a research subject, you may contact the Institutional Review Board for Human Subjects Research at (513) 529 – 8734.
APPENDIX I

PRELIMINARY QUESTIONNAIRE

This is a preliminary questionnaire to be completed by you, the grandparent, and returned to me in the enclosed prepaid envelope. Once this questionnaire and the Voluntary Consent (Signature Page) that is enclosed are returned, a personal interview will be scheduled. If you are married, your spouse will also need to complete a Voluntary Consent (Signature Page) if she is willing to also participate in this research project.

Your participation in this study is voluntary. You may refuse to answer any question you are uncomfortable answering. You may also stop your participation at any time. Please check your correct response.

1. First Name: _______________

2. Date of Birth: __/__/19__

3. Marital Status:
   o Single
   o Widowed – How many years? __________
   o Separated – How many years? __________
   o Cohabiting – How many years? __________
   o Married – How many years? __________
   o Divorced – How many years? __________

4. Place of residency: ________________(City)_______________(State)

5. Ethnicity:
   o African American
   o American Indian or Alaska Native
   o Asian American
   o Caucasian
   o Hispanic or Latino
   o Native Hawaiian or Other Pacific Islander
   o Other: _______________

6. Religious Affiliation:
   o Baptist
   o Catholic
   o Eastern Orthodox
   o Episcopal
   o Jewish
   o Latter-day Saints (Mormon)
   o Lutheran
   o Methodist
7. What is the highest level of education you have?
   - Less than 9th grade
   - High school 9 – 12 grades
   - Vocational, technical, training college
   - College
   - Post-secondary degree (i.e. graduate school)

8. How many children do you have?
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5 or more

9. Have any of your children ever resided outside your home?
   - Yes
   - No

10. Describe which category of employment experiences fits you best:
    - Retired/ not working
      When did you retire? __________
      What was your job before you retired? _______________________
    - Retired/ part time employment
      When did you retire? ______
      What do you do now? ________________________________
    - Retired/ full time employment
      When did you retire? ______
      What do you do now? ________________________________
    - Employed/ part time employment
      What do you do now? ________________________________
    - Employed/ full time employment
      What do you do now? ________________________________
    - Disabled/ part time employment
      When were you disabled? __________
      What do you do now? ________________________________
• Disabled/ full time employment
  When were you disabled? __________
  What do you do now? ____________________________

• Disabled/ not working
  When were you disabled? __________
  What was your job before you were disabled? __________

• Never employed

• Unemployed/ seeking employment
  How long have you been unemployed? __________
  What was your job? ____________________________

• Unemployed/ not currently seeking employment
  How long have you been unemployed? __________

  Did having physical custody of your grandchild influence your decision not to seek current employment?
__________________________________________________________________________________

11. Describe your socio-economic status - indicate your family income before taxes:
  • Less than 10,000
  • 10,000 – 19,999
  • 20,000 – 29,999
  • 30,000 – 39,999
  • 40,000 – 49,999
  • 50,000 – 59,999
  • Above 60,000

12. Please list all grandchildren residing in your home:

<table>
<thead>
<tr>
<th>First Name</th>
<th>Age</th>
<th>Sex (Male or Female)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Is your grandchild’s mother or father your child?
  • Mother
  • Father
  • Mother is my step-daughter
  • Father is my step-son

76
14. Date of grandchild(ren)’s entry into your home: _____________________

15. Custodial relationship of grandchild(ren):
   - Adopted
   - Temporary custody
   - Custody
   - Guardianship
   - Living with; no legal custody

16. Does the grandchild(ren) have other siblings who do not live with you?
   - Yes
   - No

   If yes,

<table>
<thead>
<tr>
<th>First Name</th>
<th>Age</th>
<th>Sex (Male or Female)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

17. Have these siblings ever resided with another person/relative?
   - Yes
   - No

18. Have you (and your grandchild) always resided in (state of residency from previous question)?
   - Yes
   - No

19. Did the child change his/her state of residency when entering your home?
   - Yes
   - No

20. Did the child change schools as a result of their placement with you?
   - Yes
   - No

21. Do you have a monthly family budget?
   - Yes
   - No
22. Over the last 12 months have you had any of the following expenses for your grandchild?

<table>
<thead>
<tr>
<th>Type of Expense</th>
<th>Did you pay for all, some or none of the expense?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clothing expenses</td>
<td>(1) All</td>
</tr>
<tr>
<td></td>
<td>(2) Some</td>
</tr>
<tr>
<td></td>
<td>(3) None</td>
</tr>
<tr>
<td>Educational costs</td>
<td>(1) All</td>
</tr>
<tr>
<td></td>
<td>(2) Some</td>
</tr>
<tr>
<td></td>
<td>(3) None</td>
</tr>
<tr>
<td>Prescription medicines</td>
<td>(1) All</td>
</tr>
<tr>
<td></td>
<td>(2) Some</td>
</tr>
<tr>
<td></td>
<td>(3) None</td>
</tr>
<tr>
<td>Physician</td>
<td>(1) All</td>
</tr>
<tr>
<td></td>
<td>(2) Some</td>
</tr>
<tr>
<td></td>
<td>(3) None</td>
</tr>
<tr>
<td>Dentist</td>
<td>(1) All</td>
</tr>
<tr>
<td></td>
<td>(2) Some</td>
</tr>
<tr>
<td></td>
<td>(3) None</td>
</tr>
<tr>
<td>Orthodontist</td>
<td>(1) All</td>
</tr>
<tr>
<td></td>
<td>(2) Some</td>
</tr>
<tr>
<td></td>
<td>(3) None</td>
</tr>
</tbody>
</table>

23. Do you currently get any money from any of the following people or organizations to help you with caring for your grandchild?

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes/No</th>
<th>Amount? / Provider?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child’s mother</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>Child’s father</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>Social security</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>Supplemental security income (SSI)</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>Disability Income</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>State subsidy (TANF, Food Stamps, medical card)</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>Religious organization</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
<tr>
<td>Housing, gas/electric subsidy</td>
<td>(1) Yes(2) No</td>
<td></td>
</tr>
</tbody>
</table>

24. Do you give your grandchild(ren) an allowance?
   - Yes
   - No

25. Do you regularly attend church services?
   - Yes
   - No
If yes, does your grandchild(ren) attend with you?

- Yes
- No

26. Is the grandchild(ren) currently enrolled in school?

- Yes
- No

If yes, what grade is the child enrolled? __________

If yes, please complete the following questions:

27. The following statements ask about your involvement with your grandchild’s school:

<table>
<thead>
<tr>
<th>Question</th>
<th>Scale Options</th>
</tr>
</thead>
</table>
| Do you have contact with the school?                                    | (1) Not at all  
|                                                                        | (2) A little  
|                                                                        | (3) Somewhat  
|                                                                        | (4) Much  
|                                                                        | (5) Very much                        |
| Do you have meetings with the child’s teachers?                         | (1) Not at all  
|                                                                        | (2) A little  
|                                                                        | (3) Somewhat  
|                                                                        | (4) Much  
|                                                                        | (5) Very much                        |
| Are you involved in the child’s school activities/committees?           | (1) Not at all  
|                                                                        | (2) A little  
|                                                                        | (3) Somewhat  
|                                                                        | (4) Much  
|                                                                        | (5) Very much                        |
| Do you help with the child’s homework?                                  | (1) Not at all  
|                                                                        | (2) A little  
|                                                                        | (3) Somewhat  
|                                                                        | (4) Much  
|                                                                        | (5) Very much                        |
| Is the child involved in any extra-curricular activities?                | (1) Not at all  
|                                                                        | (2) A little  
|                                                                        | (3) Somewhat  
|                                                                        | (4) Much  
|                                                                        | (5) Very much                        |

28. Do any of your close friends have custody or placement of a grandchild or relative?

- Yes
- No
Thank you for completing this preliminary questionnaire. Please return this questionnaire with the Voluntary Consent (Signature Page) in the envelope provided.

Please provide a telephone number in which I may contact you to schedule our personal interview. I have provided a copy of the questions to be asked in the personal interview (enclosed) for your review.

Your name, grandchild(ren)’s name and telephone number will not be revealed to anyone.

If applicable, name and signature of person who helped complete this Preliminary Questionnaire.

__________________________  ___________________________  ___________
Name                                    Signature                                            Date

_____________________________________________________________________________________

You may contact me at the number below to schedule a personal interview:

AREA CODE _________ TELEPHONE NUMBER _______________

The best time to contact me is:

  o  In the morning
  o  In the afternoon
  o  In the evening

_____________________________________________________________________________________

80
APPENDIX J

PERSONAL INTERVIEW

I will be taping our conversation during the personal interview so I can accurately record your answers. If you are uncomfortable with our conversation being taped, we can still proceed with our interview. Your name will not appear on the tape. The tape will be destroyed after all data is collected and analyzed.

Your participation in this study is voluntary. You may refuse to answer any question you are uncomfortable answering. You may also stop your participation at any time.

Identification number:
Date of interview:
Time of interview:
Location of interview:

1. Explain the circumstances under which you became the primary parent to your grandchild?

2. Was this a voluntary placement? Please explain.

3. What is your current custodial relationship? (i.e. temporary placement, guardianship, legal custody)

4. Has there been any occasion in which the custodial relationship changed? If so, how did it change and when did the change occur?

5. Where is the child’s natural mother?

6. When was the mother’s last contact with the child? Was the contact made voluntarily?

7. Who is present during the mother’s visitations? Are they supervised visits?

8. Has the mother missed a scheduled visit within the last 3 months?
   - Yes
   - No
If yes, how did the child react to this missed visit?

9. Where is the child’s natural father?

10. When was the father’s last contact with the child? Was the contact made voluntarily?

11. Who is present during the father’s visitations? Are they supervised visits?

12. Has the father missed a scheduled visit within the last three months?
   o Yes
   o No

   If yes, how did the child react to this missed visit?

13. What involvement does the child’s other (maternal or paternal) grandparents have with the child?

14. Did they ever reside with them?
   o Yes
   o No

15. What type of support do they offer you or the minor child?

16. When you were young, what relationship did you have with your maternal grandparents?

17. Did you ever reside in their home?
   o Yes
   o No

18. When you were young, what relationship did you have with your paternal grandparents?

19. Did you ever reside in their home?
   o Yes
   o No

20. How many siblings do you have?
   o 0
   o 1
   o 2
   o 3
21. Did any of your siblings reside with your (maternal/paternal) grandparents or a relative?
   - Yes
   - No

   If yes, for how long?

   What was the situation leading up to the placement with the grandparent or relative?

22. Tell me about any other grandchildren you have. Describe for me your relationship with them?

23. How often do you see them?

24. What type of support do you provide to them? (i.e. financial or emotional)

25. What difficulties have you encountered providing this support because of the child that is residing with you?

26. Does the grandchild(ren) that is residing with you have any physical needs/handicaps?
   - Yes
   - No

   If yes, please explain:

27. How often does the child visit a physician?
   - Weekly
   - Every other week
   - Monthly
   - Every 3 months
   - Every 6 months
   - Yearly
   - Other, please explain:

28. How would you rate your overall health at the present time?
   - Excellent
   - Good
   - Fair
   - Poor

29. Is your health better now, about the same, or not as good as it was when you first begin to provide care for your grandchild?
   - Better
30. How often do you visit a physician?

- Weekly
- Every other week
- Monthly
- Every 3 months
- Every 6 months
- Yearly
- Other, please explain:

31. Listed are some reasons given by other grandparents for why they are currently taking care of their grandchild(ren). Please indicate whether or not each of these reasons help to explain why you started to provide regular care and why you continue to provide such care.

<table>
<thead>
<tr>
<th>REASON</th>
<th>Started</th>
<th>Continue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents were divorced</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Parents were in the process of getting a divorce</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Parents were not married when child was born</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was a teenager when child was born</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was a teenager when child was born</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was having drug problems</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was having drug problems</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother worked full time</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father worked full time</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was having alcohol problems</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was having alcohol problems</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother died</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father died</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was sexually abusive</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was sexually abusive</td>
<td>(1) Yes</td>
<td>(1) Yes</td>
</tr>
<tr>
<td></td>
<td>(2) No</td>
<td>(2) No</td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-----</td>
<td>----</td>
</tr>
<tr>
<td>Mother was physically abusive</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was physically abusive</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Didn’t want the child in day care or at a sitting service</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother went back to school</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father went back to school</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was having emotional problems</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was having emotional problems</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Didn’t want the child in a foster home</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was in trouble with the law</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was in trouble with the law</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Mother was physically ill</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Father was physically ill</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
<tr>
<td>Child had medical problems</td>
<td>(1) Yes</td>
<td>(2) No</td>
</tr>
</tbody>
</table>

32. Upon whose initiative did you first consider obtaining placement of the child? (e.g. your idea, your son/daughter, other family member, the court or children service agency)

33. If you weren’t able to care for the child, were would the child have been placed? Why?

34. How has your retirement plans changed since the child’s placement with you?

35. Often when a grandparent assumes placement of a grandchild, changes in the grandparent’s lifestyle results. Have you noticed a change in the following? Please describe each change.

Recreational activities
- Yes
- No

Change in daily routines
- Yes
- No

Frequency of contact with friends
36. Listed are some things some grandparents have indicated changed when they had placement of their grandchild. Please comment as to whether you have also noticed.....

<table>
<thead>
<tr>
<th>A change in..</th>
<th>How did it change?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doing things for recreation?</td>
<td>(1) Yes (2) No</td>
</tr>
<tr>
<td>Having financial concerns?</td>
<td>(1) Yes (2) No</td>
</tr>
</tbody>
</table>
37. Sometimes custodial grandparents talk about feeling resentment about taking care of their grandchild. How do you respond to that? (What resentment, if any, have you felt for taking care of your grandchild?)

38. Are you currently involved in personal relationship (i.e. intimate relationship, dating)?
   - Yes
   - No

   If yes, for how long?

   What is his/her relationship with the child?

39. How has your friends/acquaintances changed or the time spent you’re your friends/acquaintances changed since the child’s placement with you?

40. Who do you turn to when needing help?
   - Emotional?
   - Financial?
41. Sometimes custodial grandparents have contact with social service agencies that help them in taking care of their grandchildren. What social service agencies, if any, have you had contact with?

How helpful have you found them to be?

Is this an ongoing contact for you?

- Yes
- No

How much did you know about these contacts prior to the child’s placement with you?

42. What types of chores is your grandchild responsible for?

43. Have you relied on any of the following people for advice regarding the placement of your grandchild in your home?

<table>
<thead>
<tr>
<th>Who?</th>
<th>What did he/she tell you?</th>
<th>How helpful was he/she?</th>
<th>Did you take his/her advice?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lawyer (Attorney)</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Social worker</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Clergy (Minister)</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Doctor</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Friend</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Child’s mother</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Child’s father</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td>Your siblings</td>
<td>(1) Yes (2) No</td>
<td>(1) Very (2) Somewhat (3) Not at all</td>
<td>(1) All (2) Some (3) None</td>
</tr>
<tr>
<td></td>
<td>(1) Yes</td>
<td>(2) No</td>
<td>(3) Not at all</td>
</tr>
<tr>
<td>----------------------</td>
<td>---------</td>
<td>--------</td>
<td>----------------</td>
</tr>
<tr>
<td>Judge (Court personnel)</td>
<td>(1) Yes</td>
<td>(2) No</td>
<td>(1) Very</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(2) Somewhat</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(3) Not at all</td>
</tr>
<tr>
<td>Teacher</td>
<td>(1) Yes</td>
<td>(2) No</td>
<td>(1) Very</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(2) Somewhat</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(3) Not at all</td>
</tr>
<tr>
<td>Other relative</td>
<td>(1) Yes</td>
<td>(2) No</td>
<td>(1) Very</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(2) Somewhat</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(3) Not at all</td>
</tr>
</tbody>
</table>

44. What are your greatest fears you have about your grandchild residing with you?

45. What has been the greatest joy?

46. Sometimes custodial grandparents find it helpful to participate in support groups made up of others like themselves. What support groups, if any, do you currently participate in?

   What is the purpose of this group?
   How did you learn about this group?
   How often do you attend the group’s meeting?
   Do you associate with any of the other members of this group outside of the regular meetings?
      o Yes
      o No

47. What advice would you offer any other grandparent raising or considering raising their grandchild?
Questions for participant’s spouse if married:

1. What influence did you have when the decision of placing your grandchild in your home was made? Who was the most receptive to this placement?

2. What changes have you noticed in your spouse since this placement began? (E.g. emotional, financial, physical)

3. What change concerns your most? Satisfies you the most?

4. Do you and your spouse share equally in the decisions regarding the minor child?

5. How has the placement of the child in your home strengthened your marriage? What has been the most difficult to overcome in your relationship?
Dear (Participant’s Name):

I would like to thank you for your participation in my research study *Grandparents Parenting Their Grandchildren – New Roles Being Defined*.

(Grandchild’s Name) is very fortunate to be blessed with a caring and selfless grandparent who is able to provide (him/her) a loving and stable home.

I wish both of you the best.

Sincerely,

Dawn White