

AFRICAN AMERICAN CUSTODIAL GRANDMOTHERS PERCEPTIONS OF
STRESS FACTORS THAT IMPACT THEIR WELL-BEING AND FAMILY
RELATIONSHIPS

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DEDICATION

To my parents Cleveland & Euella Levy, although you are not here to celebrate this accomplishment, you always knew I could do it. I know you are celebrating in heaven. Thanks for loving me

To my husband, my best friend, my prayer partner, the priest of our household, and my pastor, Dr. Ross McKinley Cullins, Sr., thank you for reminding me daily how much you love me, how proud of me you are, and for encouraging me to keep going when I was on the verge of giving up. I love and appreciate you dearly.

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ABSTRACT

DANDY RUTH LEVY-CULLINS

AFRICAN AMERICAN CUSTODIAL GRANDMOTHERS PERCEPTIONS OF STRESS FACTORS THAT IMPACT THEIR WELL-BEING AND FAMILY RELATIONSHIPS

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The purpose of this qualitative study was to examine African American custodial grandmothers perceptions of stressors that impact their well-being and family relationships in the Greater Houston, Texas (Harris County) area. The study explored various factors such as age, marital status, finances, circumstances resulting in custodial care, parent-adult child relationship, grandparent-child relationship, number of children in care, age of children, length of time in care, and social support. A total of 10 African American custodial grandmothers were enlisted to participate in this phenomenological study.

Participants were recruited through a local Baptist Ministers Conference. After the initial contact to determine if they met the criteria for the study, an appointment was scheduled and a demographic survey was completed by each participant and mailed to researcher. Afterwards a one to one-half hour semi-structured interview was scheduled at a location convenient to the participants. Each face-to-face interview was audio-taped and later transcribed verbatim. Data was coded and examined to establish emerging themes. There were six major themes that emerged from the data. They were 1) the high cost of

custodial care, 2) importance of maintaining interpersonal relationships, 3) supportive systems, 4) family preservation, 5) a second chance, 6) I am still the Grandmother.

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CHAPTER I

INTRODUCTION

In the United States, over the last 40 years an unprecedented rise in the number of grandparents who have assumed the role of parent to their grandchildren has occurred (Scommegna, 2012). This is known as custodial, kinship or relative care. Since the 1970s the number of children residing in grandparent headed households (formal or informal) has risen from 3% to 7% in 2010 (Scommegna & Mossaad, 2011; Scommegna, 2012). Goyer (2010) reported that in 2010 there were approximately 5.8 million children under the age of 18 residing in households where the grandparents were the heads of household (U. S. Census Bureau, 2010). Of this number, over 900,000 minor children (children under the age of 18 years of age) lived in grandparent-headed homes where grandparents had sole responsibility of their grandchildren without a parent present, also known as “skipped generation” homes (Goyer, 2010; Scommegna, 2012). According to Livingston and Parker (2010), these skipped generation homes account for 41% of children being raised primarily by grandparents.

Although Whites have had the greatest increase in custodial grandparents since the recession of the 21st century, 9% compared to a 2% increase among African American custodial grandparents in 2007 to 2008, grandparent headed-households are still more commonly experienced among African Americans and Hispanic Americans (Goyer, 2010; Livingston & Parker, 2010). In a report by The Black Administrators in

Child Welfare, Incorporated (b.a.c.w), in 2010 the number of African American children in the United States living with both grandparents was approximately 1.6 million with 1,041,000 living in grandmother headed households. The U. S. Census Bureau (2012) reported that approximately 23.7% of African American custodial grandparents between the ages of 30-59 years old and 22% ages 60 and over were caring for their grandchildren. The number of grandchildren being cared for primary by grandmothers aged 30-59 years old was 65.3% and the older custodial grandmothers who were age 60 and up was 67.9%.

Various researchers have noted a number of circumstances and societal issues that have attributed to this phenomenal growth of grandparents assuming custodial care of their grandchildren. The reasons grandparents are presently assuming custodial care of their grandchildren range from death of a child (Fuller-Thomson & Minkler, 2001; Hayslip & Kaminski, 2005), incarceration (Arditti, 2012; Green, Ensminger, Robertson, & Juon, 2006; Poehlmann, Schlafer, Maes, & Hanneman, 2008), substance abuse (Burton, 1992; Crittenden, Adle, Kaye, & Kates, 2009; Hirshorn, VanMeter, & Brown, 2000), HIV/AIDs (Linsk & Mason, 2004; Ross & Aday, 2006), teen pregnancy (Scommegna, 2012), child physical abuse (Kelley, Whitley, & Campos, 2011), neglect (Bailey, Letiecq, & Porterfield, 2009), unemployment (Bachman & Chase-Lansdale, 2005; Dannison & Smith, 2004), divorce (Glass & Huneycutt, 2002), and in recent years to military deployment (Huebner, Mancini, Wilcox, Grass, & Grass, 2007). As more grandparents assume the responsibility for the fulltime care of their grandchildren, they may well be

placing themselves at risk for various stress factors that may have a deleterious effect on their overall well-being and various family relationships.

Statement of the Problem

The number of grandparents who have taken on the responsibility of raising their grandchildren is increasing. In 2000, the U.S. Census Bureau reported an increase of 30% or 4.5 million of children living with their grandparents since 1990. By 2010 the numbers had increased to 7.8 million. Approximately 62% of these caregivers are females with 34% being unmarried with the primary caregivers more commonly African Americans and Hispanics (Livingston & Parker, 2010). The U. S. Census Bureau reported that in Harris County, Texas, in 2012 there were approximately 24,542 African American grandparents residing with their minor grandchildren (those under 18 years of age). Of this number 13,685 grandparents were the primary caregivers for their grandchildren. The grandparents who ranged from 30 to 59 years old were caring for approximately 8,615 of their grandchildren and grandparents who were 60 years and older were caring for approximately 5,070 of their grandchildren.

Although there have been studies conducted on the physical, mental and social needs of custodial grandparents and non-custodial grandparents (Kaminski, Hayslip, Wilson, & Casto, 2008; Sands & Goldberg-Glen, 2000) and the effect this form of care has on the grandchildren (Poehlmann, Parker, Bouffiou, Abrahams, Shalfer, & Hahn, 2008), limited research exists on what factors African American custodial grandmothers perceive as having the most impact on their overall well-being and how this new role has

impacted the quality of other relationships within the family (Carr, Hayslip & Gray, 2012; Woodridge, Buys, & Miller, 2011).

Statement of the Purpose

The purpose of this phenomenological study was to examine factors that African American custodial grandmothers' perceive affected their overall well-being and other family relationships since assuming custodial care of their grandchildren. The researcher examined factors such as age (grandmother/child), financial status, parent-adult child relationship, grandmother/grandchild relationship, other family members, friends, reasons for assuming custodial care, and social support.

The extended family has been an instrumental part of the African American heritage from slavery to modern day. African American grandmothers have historically been called upon to not only be the keepers of traditions but also to act as a safety net for families during times of crisis (Billingsley, 1992; Hayslip & Kaminski, 2005). However, instead of helping families during certain periods of times, due to societal changes, today's grandmothers are now being called upon to assume the position of custodial parent. The way each grandmother perceives this custodial arrangement has an impact not only on her well-being but also on her family relationships. This study sought to provide policy makers, social agencies, family life educators, and family therapists insights into how they can become more aware of the need to formulate plans or programs that are more individualized and culturally sensitive to each family's needs.

Theoretical Perspective

Family Stress Model

An important theoretical perspective relative to this study is the family stress theory. Although this theory was based on Rueben Hill's (1958) ABC-X theory which originally focused on the stress families encountered when they were separated and reunited after World War II, it can be applied to families today are facing various societal changes that can lead to very stressful situations. Stressors are defined by Hill (1958) as "a situation for which the family has had little or no prior preparation and must therefore be viewed as problematic" (p. 139). These stressors can be categorized as being either normative - life events that are expected or predictable and are generally associated with developmental task; or nonnormative - those events that happen unexpectedly and are not planned for (Lavee, McCubbin, & Olson, 1987).

According to Hill's theory, during crises, families proceed through four stages: "crisis, disorganization, recovery, and reorganization" (Ingoldsby, Smith, & Miller, 2004, p. 138). The initial crisis stage refers to the precipitating event or stressor that the family experiences. This is then followed by a period when the family experiences disorganization as they attempt to find ways to cope with the situation. Once they have formulated a way to deal effectively with the situation, they enter into a recovery period which can be temporary or long-term. At this stage, the family reaches a different level of organization or a new normal which can result in the family doing better or things getting worse than before the crisis event occurred (Ingoldsby, Smith, & Miller, 2004).

Smith, Hamon, Ingoldsby, and Miller (2009), state that each basic assumption of Hill's (1949, 1958) ABC-X model of family stress has a corresponding component in the model. The "A" is the initial event or stressor that forces the change in the family (p. 96). These stressors can be internal or external which causes changes in the family system (Boss, 2002). The "B" refers to the resources (internally or externally) that the family seeks out to deal with the situation (p. 97). The "C" represents the meaning that the family applies to the stressor, whether it is seen to have a positive or negative impact on the family (p. 98). Finally, the "X" denotes the actual reaction to the crisis or the stress outcome (p. 99). If the family is not able to reach some kind of equilibrium due to the initial stressor they then enter into a state of crisis.

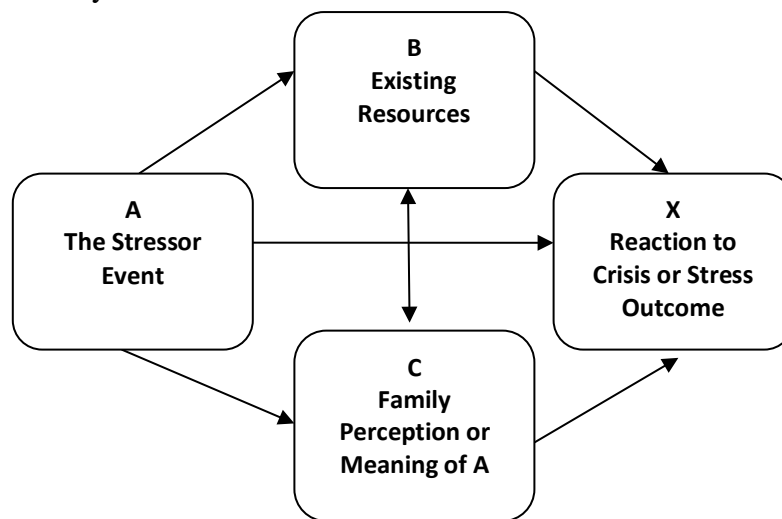


Figure 1. ABC-X Model (Hill, 1949)

McCubbin and McCubbin (1988) using the family stress model when researching resilient families, listed five basic assumptions about families: (1) stress is normal in all families throughout the life cycle, (2) families develop basic strengths and abilities that

allow them to grow and develop thus equipping the family to be able to deal with change or adversity when it happens, (3) some crisis situations will happen that will force the family to change their traditional views and adapt to situational changes, (4) each family has strengths that are unique to them that help protect them from those unexpected or non-normative stressors so that the family can successfully adapt to the change, and (5) the families must interact with other systems outside the family unit in order to benefit from the resources that are available to assist when they experience stress or some crisis situation that is beyond their abilities.

Research Questions

For the purpose of this study, the following research questions guided this study:

RQ1. What do custodial grandmothers perceive to be the major stress factor(s) impacting their overall well-being (physical, cognitive, emotional, and social)?

RQ2. How has the custodial arrangement affected the lifestyle of the grandmother?

RQ3. What impact has the custodial arrangement had on relationships with other family members?

RQ4. Does the custodial arrangement affect the quality of the relationship with grandchildren in their care?

RQ5. What resources (internal/external) are the grandmothers utilizing to care for themselves and the custodial grandchildren.

Assumptions

Several assumptions are made pertinent to this study. First, it is assumed that all participants will voluntarily consent to participate in the study. Secondly, all participants will be African-American grandmothers who have or have had custody of one or more grandchildren for a period of at least six months. Thirdly, no parent of the grandchildren will be residing in the household.

Definition of Terms

The following definitions will be used throughout the present study.

1. African American will refer to an ethnic group in the United States whose descendants were African slaves.
2. Custodial grandparents/grandmothers/great-grandmothers will refer to grandparents who are 30 years and older and are the sole providers for the offspring of their biological children in the absence of the biological parent.
3. Grandparent in this study will refer to the parents of a person's father or mother.
4. Grandchildren in this study will refer to the biological offsprings of the adult children of the custodial grandparent who are under the age of 18 years old.
5. Kinship care will refer to "a situation in which an adult family member, such as a grandparent, aunt, uncle, or other relative, provides a caring

home for a child who is not able to live with his or her parents” (CWLA, 2008, p. 22).

6. Non-evolved grandmother in this study refers to “one in which tension and hostility occurs because the grandmother is not able to evolve into the grandmother’s role and must assume an unreasonable burden as the surrogate mother to her grandchildren” (Hill, 1999, p. 108).
7. Primary caregivers for this study will refer to individuals who are solely responsible for the care of someone.
8. Skipped generation homes refers to homes in which the biological parents are absent and grandparents assume the role of primary caregivers for their grandchildren (Jendrek, 1993).
9. Stressors are “a situation for which the family has had little or no prior preparation and must therefore be viewed as problematic” (Hill, 1958, p. 139).

Delimitations

This study is delimited by the following factors:

1. Participants will be limited to African American custodial grandmothers who are the primary caregivers for at least one biological grandchild who is the child of one of their sons or daughters.
2. The parent of the grandchildren must not be a resident in the home.

3. Grandchildren must have been in the residence for a minimum of 6 months and must be minors (under the ages of 18 years old).
4. Participants currently reside in the southwest Texas area and in Harris County.
5. The participants must be willing to participate in an audio-taped face-to-face interview about their personal well-being and family relationships.

The Researcher as a Person

According to Creswell (2003), because the nature of qualitative research is interpretative, and the researcher “is typically involved in a sustained and intensive experience with participants” (p. 184), it is necessary for the researcher to state any “biases, values, and personal interests about the research topic and process” (p. 184). Tillman (2002), when addressing culturally sensitive research approaches, posits that although individuals conducting research in the African-American community do not necessarily have to be African-American, it is imperative that the researcher “has the cultural knowledge to accurately interpret and validate the experiences of African Americans within the context of the phenomenon under study” (p. 4).

The researcher in this study is a 61 year old African American female graduate student at Texas Woman’s University in the area of Family Studies who is currently employed as an instructor at Texas Southern University in the Department of Human Services and Consumer Sciences. The researcher has been married for twenty-three years, is a stepmother to five children (one deceased), grandmother of twenty-three, and

great-grandmother of ten (one deceased). The researcher has also in the past acted as a co-residential grandparent to three of her step-grandchildren and later as primary custodial caregiver to four of her step-granddaughters over a six-month period; later, care was provided for one step-granddaughter for one year; and in recent years to one step great-granddaughter for a period of nine months.

Summary

This chapter presents current demographic trends regarding the rise in the number of custodial grandparents; specifically African American grandmothers who have assumed custodial care for their grandchildren in the 21st century. A detailed description of the Family Stress Model was provided as it was the theoretical perspective that guided this study. This qualitative study was designed as an exploration of what stress factors African American custodial grandmothers perceive as having the most impact on their overall well-being and how this arrangement has affected other family relationships.

CHAPTER II

REVIEW OF LITERATURE

Introduction

In spite of the increased research on custodial grandparents and the impact it has on grandparents well-being and health (Goodman & Silverstein, 2002; Hayslip, Shore, Henderson, & Lambert, 1998; Heath 2009; Hughes, Waite, LaPierre, & Luo, 2007), little attention has been given to the perceived effect this new family structure has on the grandmothers' relationship with other family members (Gibson, 2002; Gibson 2005; Goodman & Silverstein, 2002). This chapter includes literature in the following areas: traditional role of grandparents, historical context of African American kinship care, demographic characteristics of African American custodial grandmothers, reasons for custodial assumption, stressors affecting grandmothers well-being (age, health, finances, parent-adult child relationship, grandmother-grandchild relationship, other family relationships, child behavior, and social support), and rewards of custodial care.

Traditional Role of Grandparents

Traditionally, grandparents have always played an important supportive role in the lives of their offspring and grandchildren. In a seminal study on the changing roles of grandparents, Neugarten and Weinstein (1964) investigated 70 sets of upper-middle class and lower-middle class grandparents from various ethnic backgrounds in the Chicago area regarding how comfortable they were in their role as grandparents, what the role

meant to them, and how they viewed their grandparenting styles. According to the findings, most of the grandparents felt comfortable and satisfied in their role. The significance that each grandparent stated the role meant to them was then categorized as either one of: (a) biological renewal in which their grandchildren made them feel young again; (b) emotional fulfillment because now the things they could not do for their children because they were too busy working, they were now in a position to do with their grandchildren; (c) a resource person who could contribute financially to the well-being of their grandchildren and also share their life experiences; (d) living vicariously through their grandchildren by watching them accomplish things they never could; and (e) feeling remote from their grandchildren. The findings of this study also resulted in the following different styles of grandparenting being identified: (1) “formal,” (2) “fun seeker,” (3) “surrogate parent,” (4) “reservoir of family wisdom,” and (5) “distant figure” (p. 202-203).

In another study, Kornhaber and Woodward (1981) interviewed 300 children regarding the importance of grandparents in their lives. They concluded that grandchildren saw their grandparents as having five significant roles depending on the closeness of their relationships. This list includes that of being an “historian” or someone with the ability to link the past with the present; the “mentor” who was wise and could teach them through their lived experiences; the “role model” who could provide visual of what a grandparent is or should be; the “wizard” who is able to transcend the real world

and inspire the child to use their imagination; and lastly, the “nurturer” who attends to the emotional and physical needs of the child (p. 167-177).

Historical Context of African American Kinship Care

According to Jimenez (2002), the role of grandmother with clearly defined roles and expectations that typifies the majority of the American culture was not one that existed for the majority of African American women. Their relationship was more surrogate mother than grandmother. Grandmothers were also an integral part of the workforce helping to provide for their families, caring for their own children as well as their grandchildren. Traditionally, grandparents in West Africa shared a friendly relationship with their grandchildren, which was almost that of social equality. Although the parents had authority over their children, grandparents could overrule them. If the child was mistreated, he or she could appeal to the grandparent (Guttman, 1976).

When African slaves were brought to the United States, American society was introduced to the African kinship system. Because slave families existed at the discretion of the slave owner, African slaves, in order to adapt to their new environment and to maintain some semblance of family cohesion, integrated their cultural traditions into what had now become their new reality (Coontz, 2000). According to Blassingame (1972), it was estimated that a large portion of all slave marriages was disrupted in part by the sale or the death of the spouse (as cited in Ferguson, 2011, p. 60). Thus they established “fictive kin ties; ritual coparenting or godparenting; and complex naming patterns that

were designed to authenticate extended kin connections, all in the service of building kin ties within the interstices of the slave trade and plantation system” (Coontz, 2000, p. 47).

After slavery, these kin ties remained as a vital link in the African American communities (Ferguson, 2011). The Great Migration of African-American parents from the South to the North between the 1910s and 1930s to search for jobs and ensure the safety of their children, often left their children with their parents while they sought a better future for their family (Franklin, 1997).

Characteristics of African American Custodial Grandmothers

According to various research findings and U. S. Census reports, African American custodial grandparents are generally female, older, single, less educated, poor (living below the poverty level), receive public assistance, and reside in rural areas in the South or inner cities (Fuller-Thomson & Minkler, 2000b/2001; Waldrop & Weber, 2000). In an article examining the demographic differences between custodial and non-custodial grandparents, Fuller-Thomson and Minkler (2000a) found that when compared to non-custodial grandparents, custodial grandparents had never been married, were divorced, widowed, or separated. They also had more grandchildren and had obtained custody of them when they were very young.

Although some researchers reported African American custodial grandparents as older, in a national study, Minkler and Fuller-Thomson (2005) found that custodial grandmothers ranged from 45 years and above. These findings are in alignment with those of a Pew Research Center report that currently more custodial grandparents are

younger with 13% being under 45 years of age and more than two-thirds younger than 60 years of age (Livingston & Parker, 2010).

Reasons for Assuming Custody

Although the ultimate reason grandparents assume custody of their grandchildren is because of the love and sense of duty they feel to preserve the family, almost all of today's custodial arrangements are as a result of a family crisis in which the biological parent can no longer provide adequate care for their children (Bailey, 2012; deToledo & Brown, 1995; Kornhaber, 1981). The African American community is continuing to respond to the need to preserve the family through kinship care networks either informally or formally (Fuller-Thomson & Minkler, 2000a; Scannapieco & Jackson, 1996). According to Heath (2009), African American grandparents are three times more likely to provide custodial care for their grandchildren.

The dramatic increases in custodial care can be attributed to a variety of societal issues that are plaguing society. Grandparents step in to assume the parenting role so that their grandchildren will not be placed in the foster care system as a result of parental neglect and/or physical abuse (Bowers & Myers, 1999; Lumpkin, 2012; Mills, Gomez-Smith, & DeLeon, 2005). Others gain custody because of parental substance abuse and incarceration. The use and abuse of illegal drugs are responsible for a large number of African American women receiving felony convictions resulting in their imprisonment (Engstrom, 2008). In 2010 the Bureau of Justice Statistics (BJS), Guerino, Harrison, and Sabol (2011) reported that the prison population in the United States was over 1, 612,395.

Although this number represents an overall decrease of 0.3% from the previous year (1,750,000), a disproportionate number of these prisoners were African Americans – 561,400 African American males and 26,600 African American females. A research brief by Bates, Lawrence-Willis, and Hairston (2003) reported that approximately ten to twelve million children have a parent who is incarcerated or on parole. Unless the child is placed in foster care, the burden for their care usually falls on the next of kin. Because of their connection with the parent and the child, the caregiver, who is most often a grandparent, feels an obligation to intervene out of love and concern. The caregiver soon discovers that the situation is more stressful than they imagined and that they are ill-equipped to handle the added responsibility of feeding, clothing, and housing the child or children. In addition to this there is the added cost of calls from the parent who is in the correctional facility along with any travel expenses incurred making visits.

Even though the incarceration of any parent is difficult, the arrest of a mother is more disruptive to a family due to the fact that the mother is often the primary caregiver (Schirmer, Nellis, & Mauer, 2009; Simmons, 2000). According to a report by Glaze and Maruschak (2008), 42% of females in state prisons and 12% of the male prison population identified the primary caregiver of their children as the grandmother. The incarceration of the mother not only affects the child but also puts three generations of a family at risk (Aaron & Dallaire, 2010; Ruiz, 2002).

Sometimes grandparents assume custody because of the death of the child's biological parent due to an accident, homicide or diseases such as HIV/AIDS. According

to the Violence Policy Center (2013), African Americans are disproportionately affected by homicide in the United States. Although African Americans represented only 13% of the population in 2010, they accounted for 49% of all homicide cases. The FBI data for 2010 reported 6,469 homicide cases for African Americans. Of that number, 5,582 were males and 887 were females with 542 being less than 18 years old and the average age of the others being 30 years old. For those who had children, unless family members step in to assume responsibility they will become a part of the foster system.

Even though African Americans represented only 14% of the population in the United States in 2011, the Center for Disease Control (CDC) reports that they account for 46% of the people infected with the HIV virus. To date, more than 240,000 men and women have died from AIDS making it the third leading cause of death for Blacks ranging from ages 35 to 44 (CDC, 2011). Parental death due to HIV/AIDS often results in the children being placed in the foster care system or being raised by grandparents or other relatives. This premature death causes disruptions in the lives of family and often results in financial burdens along with changes in family roles and responsibilities (Hattery & Smith, 2007).

Stressors Affecting Grandmother Well-being

Although historically African American grandmothers have always played a vital part in assisting parents raise their children (Conway, Boeckel, Shuster, & Wages, 2010; Guttman, 1976), when they have to assume sole responsibility for the care of their grandchildren, the added stress can be overwhelming and the risk impacts all areas of

their lives (Goodman & Silverstein, 2002; Ross & Aday, 2006). Servaty-Sesib and Wilkins (2008) posit that how custodial grandparents perceive their situation will also determine if they see it as something that will have a positive impact or a negative one. According to de Toledo and Brown (1995), this new role can have a negative impact on them emotionally, physically and financially. Raising grandchildren also requires a level of commitment that some grandparents are not prepared for the amount of their time, energy and attention involved (Bissell & Miller, 2012).

Age of Custodial Grandmother

Certain role changes are expected during the life cycle. Erikson's (1950) generativity stage of psychosocial development, also called middle adulthood (ages 35-55 years) states that when adults enter this stage they are highly motivated to help ensure that their grandchildren not only become productive citizens but also carry on their legacy and other cultural traditions. They will invest whatever resources they have to ensure that this is accomplished (Bachman & Chase-Lansdale, 2005). However, when non-normative transitions take place, this transition is often unexpected and the individual is oftentimes unprepared to handle it. Hill (1999) refers to these grandmothers who as "nonevolved grandmothers." These grandmothers experience stress and anger towards their adult children because they are no longer able to assume the normal role of grandmother and must now be burdened with the responsibility of parenting their grandchildren. These unplanned for circumstances can result in grandmothers experiencing burnout.

In a study conducted by Burton and Bengston (1985), they found that when they interviewed young mothers between the ages of 25 and 37 whose teenage daughters were pregnant, they reported feeling stressed and were struggling with the role of becoming grandmothers. The younger mothers felt that by becoming grandmothers at such an early age people would presume that they were older than they really were and would result in them being disconnected from their peers.

Mills, Gomez-Smith, and deLeon (2005) conducted a study in 1999 using data from the National Survey of America's Families to examine what factors were associated with psychosocial distress in custodial grandmothers in skipped generation homes. Their findings were consistent with those of Sands and Goldberg-Glen (2000) in a study of 129 African American and Caucasian custodial grandparents and great grandparents ages 50 years and older. Findings indicated that younger grandparents experienced more stress and anxiety. Because of their ages, these younger grandmothers were finding it hard to balance their careers and personal lives with the added responsibility of parenting their grandchildren.

In a comparative study of lifestyles and custodial grandmothers with mothers from low-income neighborhoods, Bachman and Chase-Lansdale (2005) reported that although custodial grandmothers and mothers from low-income neighborhoods fared about the same materially, they differed mentally and physically. Older custodial grandmothers had increased physical problems and disabilities but had fewer mental

health problems while younger grandmothers experienced higher incidences of chronic mental and physical health problems and greater material hardships due possibly to “early nonnormative transitions into the grandparent role” (p. 485).

Health of Custodial Grandmother

Some studies suggest that custodial grandparents have a greater tendency to experience health problems than non-custodial grandparents (Scommegna & Mossaad, 2011; Whitley, Kelley, & Sipe, 2001). Although some grandparents experienced poor health prior to the assuming custody of their grandchildren, the added stress often exacerbates their health problems. The grandparent may also be predisposed to depression and the transition may actually increase the levels of depression (Baker & Silverstein, 2008; Bluestein, Chan, & Guanais, 2004).

In a study by Roe, Minkler, Saunders, and Thomson (1996), African American grandmothers reportedly experience a number of health and financial issues stemming from the stress caused by assuming the responsibility of becoming a primary caregiver for their grandchildren. High incidences of depression, chronic pains, lack of sleep were associated with the demands placed on them in this new role. Although these new demands can be stressful, Hughes, Waite, LaPierre and Luo (2007), study of 12,872 grandparents ranging from 50 to 80 years old, found that most health disparities were due to pre-existing illnesses and/or other characteristics of the grandparents. Their findings also suggest that only in incidences where caring for grandchildren outweighed the abilities and resources of the grandparent were there noticeable declines in health. This is

in contrast to other studies that reported an increased decline in health and well-being of custodial grandparents (Burton, Dilworth-Anderson, & Merriwether-DeVries, 1995).

Finances

The costs of custodial grandparenting are high and for those who have taken on the task informally, they are oftentimes unable to receive the benefits they and the grandchildren need in order to make ends meet. Many live on fixed incomes and therefore are unable to provide neither basic needs of the children nor the added cost of healthcare (Bailey, 2012; Park, 2006). African American custodial grandparents are often poor and financially unable to meet all the recurring needs resulting in caring for their grandchildren. The Pew Research Center reported that 47% of custodial grandparents have incomes between one and three times the poverty line and approximately 18% are living below the poverty level (Livingston & Parker, 2010). Custodial grandparents experience a sense of shame when their child cannot adequately care for the needs of their grandchildren and therefore do not seek state assistance (Worrall, 2009). It is also reported that a majority of eligible custodial grandparents are caring for their grandchildren informally and therefore do not have the legal rights to obtain access to needed resources which make it more difficult obtaining permission regarding their educational and medical needs (Van Etten & Gautam (2012).

Social Isolation

Custodial care is beneficial to the grandchildren because when there is a disruption in the family they continue to be reared by relatives instead of being placed in the foster care system, resulting in better outcomes for the children (Day & Bazemore, 2011; Heath, 2009). However, the emotional well-being of the custodial grandparent may be at risk. Due to the fact that assumption is generally as a result of a teen pregnancy or other traumatic event, the sudden added responsibility and role change might impact the grandparent negatively. Along with personal loss of a child or the loss of their personal freedom, the grandparent must also assist the grandchild in making adjustments and dealing with the loss of a parent (Ehrle & Day, 1994). The stigma of having to care for the offspring(s) of an incarcerated or drug addicted child is also a stressor that custodial grandparents must endure (Hayslip & Kaminiski, 2005). The fact that the grandparents may be perceived as failures as parents to their peers, they sometimes live in social isolation (Ehrle & Day, 1994).

Grandmother-Adult Child Relationship

When there is dissension within the parent-child relationship combined with the custodial grandparents' physical, mental, financial and social problems as a result of caring for their grandchildren, there is a probability that this will affect the grandparent-grandchild relationship (Barnett, Scaramella, Neppl, Ontai, & Conger, 2010; Barnett, Mills-Koonce, Gustafsson, & Cox, 2012). This disruption adds to the stressors already experienced by the custodial grandparent.

When grandparents assume custodial care of their grandchildren due to nonnormative transitions, it has a tendency to have an adverse effect on the parent-adult child relationship which makes the relationship adversarial (deToldeo & Brown, 1995). The quality of the relationship between the custodial grandparents and their adult children can act as a stressor, especially when the relationship is already in conflict (Kornhaber & Woodward, 1981; Weber & Waldrop, 2000). Other studies revealed that if the parent-adult child relationship is already adversarial, efforts to secure the necessary services for the grandchildren might be hindered. This can widen the rift between custodial grandparent and their adult child.

Grandmother-Grandchild Relationship

In a longitudinal study examining the perceived relationship qualities of children to parents during their adolescent and adult lives and grandparents to their grandchildren, Barnett, Scaramella, Neppel, Ontai, and Conger (2010), findings revealed that the relationship between the parent and child can impact the quality of the future relationship between grandparent and grandchild. When daughters believed that they shared a loving and supportive relationship with their mother while growing up, they were more likely to involve the grandparent in the lives of their children. However, these findings were not the same for their sons who had experienced the same kind of warm and supportive relationship with their mothers. The quality of grandparent and grandchild relationship was dependent on the quality of relationship the mother had with the spouse of the son.

The aforementioned findings of Barnett et al., (2010), substantiate those of Goodman (2012) who conducted a nine year longitudinal study of fifty custodial grandmothers and their grandchildren to examine how the custodial arrangement would impact their overall relationship and well-being. The study found that favorable relationships between the grandmother and adult child prior to the custodial arrangement overshadowed any behavioral problems the grandchild might have displayed during the time of transitioning.

Grandchildren – Physical and Emotional Health

A number of children in custodial care have unique physical problems that are oftentimes predicated by the parents' addiction to alcohol or drugs (Pinson-Milburn, Fabian, Schlossberg, & Pyle, 1996). Some custodial grandparents are now caring for their grandchildren who have HIV/AIDS while some are caring for those who have learning disabilities such as attention-deficit hyperactivity disorder (ADHD). In a study examining the behavior of 230 children (2 to 16 years of age) being raised by grandmothers ranging from 37 to 80 years old, findings indicated that almost one third had heightened behavioral problems due to the events that resulted in their being removed from their homes. Coping with children who are displaying behavioral problems coupled with the challenges they are facing trying to provide for the children's needs adds psychological stress to the grandmothers. These findings corroborated those of Sands and Goldberg-Glen (2000) of 129 African American and Caucasian custodial grandparents, that when

grandchildren in their care had psychological and/or physical disabilities with little family support, they also experienced more stress.

Children in custodial care may also be emotionally scarred because of their experiences prior to their placement with their grandmother. These experiences could result in them being depressed and sometimes expressing themselves through acts of physical aggression against the custodial grandparent, especially in cases involving adolescents (Day & Bazemore, 2011).

Other Family Relationships

Strained marital relationships can result from the custodial arrangement. If the grandfather had plans of retiring and enjoying time with his wife, this crisis can cause a disruption in the family. It is even more stressful if the grandchild is not the biological offspring of the husband (Robinson & Wilks, 2006). Jendrek (1993) reported that the other offsprings of the custodial grandparents may become jealous because their children did not receive the same attention as those of their siblings children who resided with the grandparent.

Rewards

Despite the demands placed on the custodial caregiver, it does have its rewards (Erhle & Day, 1994; Hayslip & Shore, 2000). One of the primary benefits for custodial grandparents who have provided a home for their grandchildren is to relieve their concerns regarding their welfare (Waldrop & Weber, 2001). Despite the enormity of the task of raising one's grandchildren, grandparents contend that the joy of caring for their

loved ones outweighs the stress that accompanies this undertaking (Hayslip & Kaminski, 2005). The knowledge that they are able to provide a caring home for their grandchildren and keep the family together also enriches their lives (Moore & Miller, 2007). Other researchers noted that many custodial grandparents perceived this new parenting experience in a positive light as it gave their lives a renewed sense of importance (Hayslip & Goldberg-Glen, 2000).

Bailey (2012) posits that custodial grandparenting allows for the grandchildren to develop a close relationship with their grandparents and glean from their storehouse of wisdom. The family traditions, history and memories are shared in such a way that it gives the children a sense of normalcy and belonging in their lives.

Summary

The present chapter provided a review of literature of the traditional grandparent roles and an abbreviated overview of history of the African American grandmother from slavery to present day kinship/custodial caregiver. It also identified research relative to the stressors that are experienced by those individuals who assume custodial care for their grandchildren and what factors grandparents perceive as affecting their well-being.

CHAPTER III
METHODOLOGY
Qualitative Research

Because the purpose of this study was to examine the factors that African American custodial grandmothers perceive affect their overall well-being and other family relationships since assuming custodial care of their grandchildren, the qualitative research paradigm was selected for this research study. Creswell (2003) defines a qualitative study as:

“one in which the inquirer often makes knowledge claims based primarily on constructivist perspectives (i.e., the multiple meanings of individual experiences, meanings socially and historically constructed, with an intent of developing a theory or pattern) or advocacy/participatory perspectives (i.e., political, issue-oriented, collaborative, or change oriented) or both. It also uses strategies of inquiry such as narratives, phenomenologies, ethnographies, grounded theory studies, or case studies. The researcher collects open-ended-emerging data with the primary intent of developing themes from the data” (p. 18).

The primary purpose of conducting qualitative research is to gain a deeper understanding of the lived experiences of specific individuals from their personal viewpoints (Patten, 2005). According to Denzin and Lincoln (2003), in order to get a more accurate assessment of how people interpret their experiences, researchers observe them in their natural setting.

Phenomenology

The phenomenological method was utilized to analyze participants' transcripts. This method is beneficial because "its major focus is on the way individuals subjectively assign meaning to the objects of their consciousness" (Daly, 2007, p. 94). Therefore in order to understand how African American custodial grandmothers perceive how the custodial arrangement affects their well-being and family relations, it is imperative to explore their experiences within the context of custodial care and how they interpret and apply meaning to their experiences.

Researchers in a phenomenological study must also "suspend any prior knowledge of lived experiences, also known as bracketing" (Creswell, 2007, p. 61). Because the researcher has experienced this phenomenon, the information collected was mostly via detailed interviews with participants. The number of participants can consist of as few as one to 20 individuals (Creswell, 2007; Patten, 2005).

Creswell (2007) states "that in a phenomenological study it is imperative that all individuals experience the same phenomenon" (p. 128). For this reason, the researcher utilized purposive sampling in which participants are deliberately selected who represent the population of interest (Greenstein, 2001; Patten, 2005). Therefore for the purpose of this study, a purposive sample of 10 African-American grandmothers who have custody of their grandchildren participated in this phenomenological study.

Interview Method

In addition to a preliminary demographic data sheet (Appendix A), the primary instrument for this study was a semi-structured interview protocol (Appendix B). The interview protocol consisted of questions specific to the study. The participants were 10 African American custodial grandmothers living in the Greater Houston, TX area. The interview protocol targeted the following areas: (a) perceived stressors that impact well-being and family relationships; (b) intrafamilial relationships; (c) coping resources; (d) challenges; (e) rewards; and (f) recommendations. This is consistent with the goal of qualitative research to allow participants to describe in their own words their lived experiences (Creswell, 2007).

The following research questions were used to guide this study:

RQ1. What do custodial grandmothers perceive to be the major stress factor(s) impacting their overall well-being (physical, cognitive, emotional, and social)?

RQ2. How has the custodial arrangement affected the lifestyle of the grandmother?

RQ3. What impact has the custodial arrangement had on relationships with other family members?

RQ4. Does the custodial arrangement affect the quality of the relationship with grandchildren in their care?

RQ5. What resources (internal/external) are the grandmothers utilizing to care for themselves and the custodial grandchildren.

The first five targeted areas of the interview protocol are aligned with the assumptions of Hill's (1958) ABC-X model: (A) stressor, (B) the available resources (family relationships/coping resources), and (C) the individuals' perception of the stressor (challenging or rewarding). All of these factors combined will determine whether each individual custodial arrangement will likely result in a favorable or unfavorable outcome.

Participants

Initially, there were 16 individuals who qualified for the study, however, two individuals never returned the demographic data sheet (Appendix A) or the signed participant consent form nor returned any calls or emails; one individual was hospitalized and withdrew so she could recuperate; 2 individuals decided that the demographic data sheet was too invasive; and one was disqualified at the start of the interview when it was realized that she misunderstood that the age limit was 18 years and her grandson was 22 years old. The final number of participants in this study consisted of 10 African Americans females between the ages of 46 to 81 years of age who have custody of one or more of their biological grandchildren. A demographic data sheet was administered to determine variables as age, education, socio-economic status, marital status, number of grandchildren in custodial care, and the time period in which they have been custodial grandparents. In selecting the final group of women to be included in the study, criterion-

based sampling was utilized (Patton, 2001). Inclusion criteria required grandmothers to be African-Americans who have custody of their biological grandchildren for a period of at least 6 months and the biological parent not residing in the home. The basis for this criterion is based on the fact that once the courts assign a child to the permanent custody of Children Protective Services (CPS), the court reviews the living arrangements of that child once every 6 months.

Recruitment

Interview Process

Prior to contacting participants, the researcher obtained approval to conduct this study from the Texas Woman's University Institutional Review Board (Appendix C). An initial mailing was sent to a local Baptist Ministers' Conference in which local pastors and lay ministers participate, requesting assistance in distributing recruitment flyers (Appendix D) and letters of recruitment (Appendix E) to potential participants. Each flyer and letter had the contact information of the researcher. Interested African American custodial grandmothers responded via phone or email. After being contacted by the potential participants, the researcher spoke with them via phone or email describing the proposed research and ensuring that they met the inclusion criteria. Participants were mailed a cover letter, two informed participant consent forms (Appendix F) (one for their records and the other for the researcher), along with a demographic data sheet. A self-addressed stamped envelope was sent also for the return of the completed survey and the signed copy of the consent form for the researcher. Upon receipt of the documents, the

researcher called or emailed the participant and requested a date, meeting time and place convenient to conduct the interview. All interviews were conducted by the researcher. At the time of the interview the researcher went over the participant consent form and informed the participant of her right to discontinue the interview at any time during the course of the interview. This was followed by the interview which lasted from 90 minutes to 2 hours and was audiotaped and later transcribed verbatim. At the conclusion of the interview the participants received a copy of “The Kinship Manual” which is prepared by the Texas Department of Child Protection Services. At the conclusion of the interview, field notes will be completed indicating the location and length of time, rapport and other observations. Field notes were used during the data analysis process in order to increase the trustworthiness and authenticity of the narrative data (Denzin & Lincoln, 2005).

Trustworthiness and Dependability

Trustworthiness in qualitative studies are often scrutinized because their validity and reliability cannot be addressed in the same manner as quantitative studies (Shenton, 2004), therefore several techniques were utilized to ensure this study’s trustworthiness and dependability. Triangulation, peer debriefing, frequent debriefing sessions, researcher’s reflective commentary, and member checks were utilized to increase the trustworthiness and dependability of the study.

Triangulation is the process of using various sources to verify data findings to reveal (Creswell, 2003; Shenton, 2004). The researcher asked a professor in the area of Family Studies to act as a peer debriefer to offer feedback regarding coding and to assist

in identifying themes. After transcribing the tape recorded interview, an email of the transcribed set was sent to the peer debriefer in order to increase the accuracy of the report. Names and other identifying qualifiers were omitted and/or modified, and the peer debriefer was asked to read and re-read the documents to locate patterns and themes. Once the readings were complete, the peer debriefer was contacted by phone to discuss the data and compare patterns and emerging themes.

Debriefing sessions were conducted between the researcher and the research chair. These frequent discussions allowed the chair to help researcher identify any biases or preconceived ideas. It also allowed the researcher to test her ideas to determine if there were any flaws in the interpretations (Shenton, 2004).

Reflective commentary was used to record any biases, prejudices and positions that the researcher might have so that the reader will know what the position of the researcher is along with any assumption (Creswell, 2003). Therefore, the researcher kept a journal recording personal impressions and observations that were relevant to the research topic at the start and conclusion of each interview session (Shenton, 2004).

Member checking was also used to verify emerging themes. Member checking is the process by which the researcher invites the participants to judge for the accuracy of the account of the interview. This process can allow the participants to read the transcribed interview, minus the reflective comments, to check for accuracy of content and proper articulations or the researcher can just allow the participants to verify the emerging theme (Creswell, 2003; Shenton, 2004). The researcher, after transcribing,

coding and identifying themes, contacted three of the participants by phone and read the themes to solicit their views as to the accuracy of the interpretation. All three felt that the themes were an accurate assessment of their interviews.

Data Analysis

Each interview was transcribed verbatim and then read individually several times to ascertain an overall understanding of them. Field notes were then incorporated as endnotes for further clarification. The type-written interviews were divided into two columns: one column contained the interview questions and the corresponding interview responses. The second column contained the coding and emerging themes. Structural coding was utilized as it applies a phrase representing a topic of inquiry to a section of data that is relative to a specific research question that was used to frame the interview (Saldaña, 2009). From each transcript, words, phrases or sentences and commonalities that are pertinent to the custodial grandmothers' experiences were identified and coded. The phrases representing a stressor mentioned in the initial interview question regarding the physical, emotional, financial and social impact of the custodial arrangement were color coded using 4 colors (yellow, orange, green, and pink). The phrases addressing family relationships were underlined. Once the categories had been segregated, the data were sorted and coded (Saldaña, 2009). Finally, the themes were utilized to provide in detail a description of the stressors that African American custodial grandmothers deemed had impacted their well-being and other family relations.

Summary

This chapter provides a summary of the research methodology, data collection and data analysis processes that occurred during this study. The researcher obtained participants for this study via purposive sampling. Flyers and letters of recruitment were sent to various churches of a local ministers' conference to solicit participants who responded via email or phone. Once it had been concluded that participants met the criterion for the study, they were mailed a demographic data sheet along with two letters of informed consent and a self-addressed return envelope. Upon receipt of the completed documents, the researcher contacted the participant and scheduled a date, time and place that was convenient to each of them. At the conclusion of the interview, the participants were given a copy of "The Kinship Manual," prepared by the Texas Department of Child Protection Services that lists various services and resources available national and statewide. All acquired data will be stored and disposed of following the procedures as outlined in the Texas Woman's University Institutional Review Board guidelines.

CHAPTER IV

RESULTS

This chapter describes the individual interviews of the nine custodial grandmothers and one custodial great-grandmother who participated in the study. To ensure the confidentiality of each participant they were allowed to choose pseudo names for themselves which will be used throughout this study when referring to them. Also other identifiable characteristics, including names of spouses, family members, grandchildren and great-grandchildren, friends, and locations have been modified. Therefore, any similarities that the participants might have with anyone that the reader is familiar with are coincidental.

All interviews were done voluntarily and no one was compensated for sharing their experiences. The interviews were conducted over a seven-month period in 2014. The participants chose the location for each interview. Although the majority of the interviews (6) were conducted in the home of the grandmothers, two were conducted in a public library, one in a church fellowship hall, and one in a parent conference room in at a local elementary school.

Sample Demographics

The sample consisted of all African Americans females residing in the Greater Houston, Texas area. They were primarily custodial grandmothers ($n = 9$, 90%) and one custodial great-grandmother ($n = 1$, 10%). Table 1 provides a detailed description of the

socio-demographic characteristics of the sample. The sample shows their ages ranging from 46 to 81 years with an average age of 58.2 years. These findings support those of a national study by Minkler and Fuller-Thomson (2005) stating that custodial grandmothers ranged from 45 years and above. However, at the time some of them assumed custody they were actually in their mid 30s which corresponds with those of a Pew Research Center report that there are currently more custodial grandparents who are younger with 13% being under 45 years of age and more than two-thirds younger than 60 years of age (Livingston & Parker, 2010).

Three of the grandmothers were married (n = 3, 30%), two were widows (n = 2, 20%), three were divorced (n = 3, 30%), one was separated (n = 1, 10%), and one had never married (n = 1, 10%). According to the reported employment status, four of the grandmothers were employed with wages ((n = 4, 40%), two were disabled (n = 2, 20%), one was a homemaker (n = 1, 10%), one was retired (n = 1, 10%), and one was retired and working part time (n = 1, 10%). Seven of the grandmothers owned their own homes (n = 7, 70%), while three of the grandmothers resided in rental residences (n = 3, 30%). Forty percent of the sample reported household incomes of less than \$10,000 (n = 4, 40%), while the remaining grandmothers had relatively higher incomes. Seventy percent (n = 7, 70%) of the participants reported receiving some sort of financial assistance. Educationally, the majority of participants were high school graduates (n = 6, 60%) or had some higher education (n = 3, 30%) and one reported having a GED (n = 1, 10%). All of the grandmothers reported that they were Christians (n = 10, 100%) and the

majority reported neither drinking nor smoking (n = 8, 80%). Sixty percent (n = 6, 60%) of the grandmothers reported having formal custody of their grandchildren and 40% (n = 4) reported having informal custody. Included in the formal custody we two grandmothers who had completed the adoption process and another was pending.

Table 1

Demographics of Custodial Grandmothers

Participants		n (%)
Grandmothers		9 (90%)
Great-Grandmother		1 (10%)
Grandmother/Great-Grandmother Ages		
46		1 (10%)
50		1 (10%)
51		2 (20%)
53		1 (10%)
60		2 (20%)
65		2 (20%)
81		1 (10%)
Mean		58.2 years
Range		46-81 years
Marital Status		
Married		3 (30%)
Widowed		2 (20%)
Divorced		3 (30%)
Separated		1 (10%)
Never married		1 (10%)
Employment Status		
Employed w/wages		4 (40%)
Disabled		2 (20%)
Homemaker		1 (10%)
Retired		2 (20%)
Other: Retired/work part-time		1 (10%)

Participants	<i>n</i> (%)
Residence	
Own	7 (70%)
Rent	3 (30%)
Household Income	
Less than \$10,000	4 (40%)
\$10,000 to \$19,999	-
\$20,000 to \$29,999	2 (20%)
\$30,000 to \$39,999	-
\$40,000 to \$49,999	1 (10%)
\$50,000 to \$59,999	1 (10%)
\$60,000 to \$69,999	-
\$70,000 to \$79,999	-
\$80,000 to \$89,999	-
\$90,000 to \$99,999	2 (20%)
\$100,000 to 149,999	-
\$150,000 or more	-
Receive Financial Assistance	
Child Support	2 (20%)
Social Security	2 (20%)
Supplemental Security Income (SSI)	2 (20%)
Adoption Subsidy	1 (10%)
No Financial Support	3 (30%)
Educational Background	
No schooling completed	-
Elementary (grades 1-6)	-
7 th , 8 th , 9 th , 10 th , 11 th grade	-
12 th grade, no diploma	-
High school graduate	6 (60%)
GED	1 (10%)
Associate degree	1 (10%)
Bachelor's degree	1 (10%)
Professional degree	1 (10%)
Doctoral degree	-

(Continued)

Participants	<i>n</i> (%)
Religious Affiliation	
Protestant Christian	9 (90%)
Evangelical Christian	1 (10%)
Roman Catholic	-
Jewish	-
Muslim	-
Hindu	-
Buddhist	-
Other (please specify)	
Smoke or drink	
Yes	2 (20%)
No	8 (80%)
Type of Custody	
Formal	6 (60%)
Informal	4 (40%)

Table 2 describes the characteristics of the grandchildren in custodial care and their respective custodial grandmother and/or great grandmother. The total number of grandchildren in custodial care was 21 ($n=21$), of this total 61.9% ($n=13$) were boys and 38.1% ($n=8$) were girls. The mean age of grandchildren in custodial care was 8.6 years.

Table 2

Demographics of Custodial Grandchildren

Grandmother/ Great-Grandmother	# of Grandchildren	Gender	Age	Length in Care
1	3	F	15	15 years
		M	14	12 years
		M	12	11 years, 6 months
2	2	M	6	2 years
		M	5	2 years
3	3	M	10	10 years
		M	8	7 years, 9 months
		F	7	7 years
4	2	F	14	14 years
		F	8	7 years, 4 months
5	1	F	8	7 years, 8 months
6	3	M	11	3 years, 6 months
		M	9	3 years, 6 months
		F	8	3 years, 6 months
7	1	F	12	6 years
8	1	M	5	2 years
9	3	M	9	7 years
		M	9	7 years
		F	5	0 years, 2 months
10	2	M	4	1 year, 9 months
		M	2	1 year, 9 months
a. Total number of grandchildren in custodial care (n = 21); Boys (n = 13); Girls (n = 8)				
b. Average Age in custodial care (8.6 years)				
c. Total length of time in custodial care (132 years, 5 months)				
c. Average length of time in custodial care (6.3 years)				

Table 3 lists the grandchildren who had been diagnosed with various illnesses or disabilities. A total of nine (n =9, 42.9%) of the 21 children were identified as having an illness or disability. Four boys were diagnosed with ADHD (n = 4, 44.4%); 2 were diagnosed as being bipolar (n = 2, 22.2%), and one (n = 1, 11.1%) had an intestinal disorder. One of the girls identified as having Downs Syndrome (n = 1, 11.1%) and one girl (n = 1, 11.1%) had scoliosis.

Table 3. Grandchildren Illnesses/Disabilities

Illness/Disability	Boys	%	Girls	%
ADHD	4	(44.4%)		
Bipolar	2	(22.2%)		
Downs Syndrome			1	(11.1%)
Intestinal Disorder	1	(11.1%)		
Learning Disability	2	(22.2%)		
Scoliosis			1	(11.1%)
n = 9				
One male is ADHD/Bipolar/Learning Disability				

Research Participants at a Glance

Lynn is a very gracious 51 years old married mother of three adult children (two daughters and one son), and grandmother to 5 grandchildren, 3 of which are in her custody informally. Lynn has been happily married to her husband, Larry for 26 years and although Larry is not the biological father of Lynn's children, he embraces the role of father and grandfather wholeheartedly. Their two-story home is located in a quiet community at the end of a cul-de-sac and behind an elementary school. A basketball goal

is located in the corner of the cul-de-sac and is a place for the community kids to gather and play in plain sight of Lynn and her husband. Lynn became a custodial grandmother fifteen years ago, the day her granddaughter was born. Her oldest daughter, who was 17 at the time and “in her senior year of graduating high school,” did not connect with the newborn in the hospital and therefore Lynn had to literally take her from the hospital and assume full care of the granddaughter. Afterwards, her daughter had two sons and although she kept them until one was 2 years old and the youngest was 9 months old, Lynn eventually had to end up raising them also. Because their daughter lives an alternative lifestyle, Lynn and Larry prohibit or monitor the children’s contact with their mother, “we don’t allow the kids to interact with that lifestyle.” Although they acknowledge that these are her kids, they remind her that if they “had not stepped in, then CPS would have had them.”

Victoria is a 60 years old widowed mother of three adult sons, one deceased, and grandmother to two grandsons. She resides in a rural community in a home that is in need of some repairs. Victoria assumed formal custody of her two grandsons 2 years ago through CPS because of parental drug abuse and neglect and is presently going through the adoption process. The grandsons are the biological sons of her son who was killed in a car accident 6 years ago. The oldest grandson “at first was angry because he had to be taken from his mom. But now that he went through a little therapy and now that we interact mostly all the time, he’s fine, he’s good.” She has always been an integral part of

the boys' lives since they were born "to make sure that they had provisions to eat and they got to school."

Jaz is a very animated, talkative, and an active 65 years old divorced mother of 3 adult sons. She is the grandmother of 5 grandchildren, 3 of whom she has informal custody of. A retired Special Education teacher, Jaz owns her own home and volunteers at the school where her grandchildren attend. The custodial grandchildren are the children of her oldest son who was not married to the children's mother. She has had the oldest boy since birth and he came directly to her home from the hospital. The middle boy came to live with her at 3 months old after his mom "gave him some barley cereal because he wouldn't stop crying. She thought he was hungry." He has had intestinal problems since then. She also believes his mother was on drugs while carrying him because he would "scream and holler for 12 hours at a time." Finally, the baby girl, came to live with her at 3 weeks old because the baby was having allergic reactions to the milk she was being given which resulted in her having a "behind that looked like raw liver."

Lorraine is a 53 years old married homemaker, mother of one adult daughter, and a "sassy granny" to two custodial granddaughters. She has been happily married to her husband for 6 years and they are presently renting their two-story home which is located in a quiet upper-middle class neighborhood. She has had custody of her oldest granddaughter since birth and her youngest granddaughter since she was 8 months old. The youngest granddaughter was placed in her care by Children's Protective Services

(CPS) due to a domestic violence altercation between her daughter and the father of the child. Lorraine has since formally adopted her youngest granddaughter.

Precious is a very out-spoken 46 years old, married mother of 6 children (4 adults and 2 teenagers), and grandmother of 7, one of who is in her custodial care. She and her husband are presently renting their one-story home located in a middle class community. She assumed custody of her granddaughter when she was 4 months old after CPS received a report that the baby, who was born with Downs Syndrome and had open heart surgery hadn't been back to the doctor. Since her daughter was only 14 years old when she had the child, Precious was cited for medical neglect because she was "the adult of the house," and even though her daughter was the birth mother, "she was still considered a minor." The courts awarded her 'temporary' custody of her granddaughter 8 years ago until the mother reached maturity. Although the mother resides in another state, she calls the daughter every day.

Louise is a 50 years old separated mother of two adult daughters and grandmother of six, 3 of whom she has had informal custody of. Louise is a diabetic who underwent major foot surgery shortly after assuming custody of her grandchildren due to a spider bite which resulted in her having to get one of her toes amputated. The lengthy convalescent time forced her to have to quit her job and use all of her 401K. Her younger daughter, who lived with her until last year and was responsible for the household bills, accepted a job offer in another city and moved away with her daughter and is no longer able to help. Louise is currently waiting to hear from Social Security Disability. Louise's

assumed custody of her 2 grandsons and granddaughter after her oldest daughter, who moved in with her while going through a divorce, “walked out and she hasn’t been back since.” Louise was very emotional throughout the interview and needed to stop several times to regroup. Afterwards, she said she had an appointment with an agency who agreed to pay her monthly bills.

Mary, who describes herself as “not a people person,” is a soft-spoken but strong in the faith 60 years old mother of 3 adult children (one son and 2 daughters), and grandmother of three, one of which she has formal custody of. She is disabled and receives governmental assistance. Her granddaughter has been in her care formally for 6 years, although she has stayed with her “on and off ever since she was born.” Mary sought legal custody of her granddaughter after she suspected the child had been sexually molested while in her mothers’ care. The granddaughter is the daughter of her son.

Shirley, who says she is a “soccer mom,” recently moved back to Texas after several decades. She is a vibrant 65 years old divorced mother of 3 adult children and grandmother of 3 grandchildren, one of whom she has formal custody of. Although she has been retired since last year, she is employed part-time 2 days a week. Mary owns a beautifully furnished two-story home with a large backyard, in an upper-middle class neighborhood. Although she has always been in her grandson’s life since birth, “I was the 1st person who held him when he was born,” she obtained custody of him 2 years due to his mother’s mental illness. She has since adopted him and he was recently diagnosed with a disability for which he has been prescribed medication.

Jennie is a 51 years old divorced mother of four adult children and grandmother of 7 grandchildren, three of who are in her custody. Jennie has an Associates of Applied Science degree and is employed part-time at a nursing home. She resides in an apartment which she says is paid for with the subsidy check her two grandsons receive monthly, "Their little money pay the rent." The inside of the apartment was well-kept although the security gates were broken and the parking lot was full of potholes. She adopted two of her grandsons 8 years ago due to their mother's mental illness. Both boys have been diagnosed with disabilities. She presently has custody of her granddaughter after CPS removed her from her daughter's home.

Emily is an active 81 years old who has been a widow for 10 years. She still speaks highly of her husband as she shows off his mastery as a carpenter in the huge den that was once a two car garage. The mother of 12 adult children, one deceased son, she has a host of grandchildren and great grandchildren. Emily's large single story home, that she has lived in for 39 years, is situated in a cul-de-sac surrounded by other homes with beautifully manicured lawns. She proudly boasts that she is surrounded on her street by 4 pastors who have very large churches. She currently has custodial care of two of her great-grandsons. She was denied custody of two of their siblings, who were recently taken from their mother due to drug activity which resulted in child endangerment charges. After a home visit, CPS reported that although her home passed inspection, she was too old to provide adequate care for the additional younger great grandchildren but

they agreed to place them with one of her daughters. They are waiting another hearing in January after the six month period to see if the children can remain with her daughter.

Findings

The purpose of this phenomenological study was to examine factors that African American custodial grandmothers perceived affected their overall well-being and other family relationships since assuming custodial care of their grandchildren. The research questions below guided this study and were aligned (see Appendix G) with the following interview protocol:

RQ1: What do custodial grandmothers perceive to be the major stress factor(s) impacting their overall well-being (physical, cognitive, emotional, and social)?

RQ2: How has the custodial arrangement affected the lifestyle of the grandmother?

RQ3: What impact has the custodial arrangement had on relationships with other family members?

RQ4: How does the custodial arrangement affect the quality of the relationship with grandchildren in their care?

RQ5: What resources (internal/external) are the grandmothers utilizing to care for themselves and the custodial grandchildren?

Interview Protocol

1. How has becoming a custodial grandmother affected you:
 - a. Physically?
 - b. Emotionally?
 - c. Financially?
 - d. Socially?
2. What were your relationships like prior to your assuming custody?
 - a. Marriage or significant relationship?
 - b. Adult daughter/son of grandchildren in your custody?
 - c. Custodial grandchildren?
 - d. Friendships?
3. In what way has this custodial arrangement affected your relationships?
 - a. Spouse or significant relationship
 - b. Adult daughter/son of grandchildren in your custody
 - c. Grandchildren not in your custody
 - d. Grandchildren in your custody
 - e. Friendships
4. Do you have a support group? If so, who are they?
5. Do you have any regrets about assuming custody of your grandchildren?
6. How has the custodial arrangement benefited you?

After reading the transcribed interviews several times and incorporating field notes for further clarification, common words, phrases or sentences pertinent to the custodial grandmothers experiences were identified, coded, and categorized. Once the categories were segregated, the data was sorted and coded to establish the following five major 6 major themes along with ten subthemes: Theme 1: The High Cost of Custodial Care (subthemes: Physical Discomfort, Financial Hardship, Emotional Rollercoaster, Social Isolation); Theme 2: Importance of Maintaining Interpersonal Relationships; Theme 3: Supportive Networks (subthemes: Faith, Family, Friends, Grandparents as Parents (GAP)); Theme 4: A Second Chance; Theme 5: Family Preservation (subthemes: Safety Net, Shield); Theme 6: I'm Still The Grandmother.

Table 4: Themes and Subthemes

Themes	Subthemes
1. The High Cost of Custodial Care	a. Physical/Health Problems b. Emotional Rollercoaster c. Financial Struggle d. Social Isolation
2. Importance of Maintaining Interpersonal Relationships (marriage or significant relationship; adult daughter/son of grandchildren; custodial grandchild; grandchildren not in custody; friendships)	
3. Supportive Networks	a. Faith b. Family c. Friends d. GAP (Grandparents as Parents)
4. Family Preservation	a. Safety Net b. Shield of Protection c. Family Values and Beliefs
5. A Second Chance	
6. I'm Still The Grandmother	

Theme 1: The High Cost of Custodial Care

This theme was divided into the following four parts to ascertain how each one had an impact on the lives of custodial grandparents once they assumed custody: physical, emotional, financial, and social once they assumed custody of their grandchildren.

a. Physical/health problems. When asked how becoming a custodial grandmother had affected them physically, five (5) of the custodial grandmothers responded that the custodial arrangement had a negative impact on their lives. Two of the custodial grandmothers have grandsons who are bipolar. One stated that overall it did not, only when she relocated back to Texas and realized that she did not have the support system that she was promised then she began to have panic attacks.

Lynn:

“I’m more tired than I normally would be. I find myself with having to work and then come home and cook dinner and tend to them. Yea, it has affected me.”

Victoria:

“Oh, I’m tired quite a bit because I have to do a lot of running around here and there. So it’s affected me, it’s time consuming. It’s a little stressful.”

Louise:

“Uh, I’m depressed. I mean I suppose I’m not sleeping well. I go 3 and 4 days sometimes without really sleeping. I take like little cat naps. It’s not that I’m not tired, because I am... I’m a diabetic. When you’re stressed it affects that, they don’t tell you that my sugar goes up sometimes and then it goes to low sometimes.”

Mary:

“It keeps you running you know, because I’m retired and I didn’t expect to be starting over and she’s always in something so we’re always going and I have her 365 days.”

Jennie:

“Physically it’s, um, I don’t know. Sometimes I get overwhelmed. Because like I said with the little one it’s more energy with him than it is with the others. I’m dealing with it though. Oh yeah, I have high blood pressure but it’s not where everyday – it’s up everyday.”

Shirley:

“I think overall it has not. There have been in and out times, but the main time that it did affect me physically is right after I moved here because I was told by family members that I would have help with him and I left friends and church support system where I had total help with him, but no, you’ll come here and

we'll help you. So, I – it was a big move for me to come here and give up a lot of stuff I had there. But I came and then at the time he wasn't on both of the medications.”

Not all these grandmothers perceived the custodial arrangement to be physically taxing but actually found them to be very beneficial. Some regarded it as positive because it resulted in them living healthier lifestyles.

Jaz:

“Physically, it forces me to be more active than what I probably would be. I end up going more, walking more, just actually working more.”

Lorraine:

“Well, as far as physically, it hasn't really affected me because see, I'm still an outgoing grandmother. I still get my walking in.”

Emily:

“Oh no. I had all of this before they ever showed up!” (laughs)

One (1) custodial grandmother (Precious) stated that she didn't think being a custodial grandmother affected her physically at all because she already had children there.... So, I still have to work just as hard,...

b. Emotional rollercoaster. Although a few of the grandmothers reported experiencing no emotional distress after assuming custody of their grandchildren, most described a myriad of emotions from feeling blessed to having a lot of hostility. Some of these emotions exacerbated preexisting illnesses, such as Jennie who has high blood pressure and Louise who is a diabetic. A few of them who also had grandchildren who were diagnosed as ADHD or bipolar which also contributed to their emotional stress.

Precious:

“Emotionally it’s been a blessing...”

Lynn:

“I don’t have the patience I had when mine were younger.”

Jaz:

“I don’t even know what words to use for that. It’s been very trying, very stressful, emotional rollercoaster. Uh, it causes me a lot of hostility, anger. It causes me to be sad a lot...”

Lorraine:

“I would sit up a lot of nights and cry, and say, “Lord, why me?”

Louise:

“I cry a lot, scream more, you know it’s uh, I’m not as patient as I was at first.”

c. Financial struggles. Assuming custody of a grandchild or grandchildren has had a major impact on the household finances of the majority of these custodial grandmothers especially as Mary says, “...if you have a fixed income.” Households that reported incomes of <\$10,000, experienced some of the same anxiety and stress as those whose incomes were \$90,000-\$99,999. Only one grandmother, Shirley, who receives her retirement, Social Security, and an Adoption Subsidy, reported that she was better off financially since assuming custody.

Lynn:

“Oh, it’s hit the pocketbook financially a lot because although their dad pays us child support because he is in the military, the mom, which is my daughter doesn’t do anything and I can’t get her to see that even though the dad may pay \$1,000 a month for three kids, it takes more than a \$1,000 a month to raise three kids.”

Victoria:

“Drastically! Yeah, it’s been a real hard struggle because every penny I get it goes on grocery, you know on household. I’m not able to go beyond that.”

Jaz:

“I’m below the poverty line. I’m a retired HISD teacher. I make enough money to take care of me, not three additional kids!”

“... cause when it’s something that needs to be done, I find which utility bill I can pay next month. So that’s basically, but uh, you know I finally told them, ‘Granny can’t afford that. I don’t have that kind of money. And uh, that’s that.’”

Lorraine:

“Oh yeah, it was a struggle at first like I said. When I first got them I didn’t have a job and it was kinda hard...”

Precious:

“...if you take on the grandchild, I don’t see where anybody gives you any extra funding because you have your grandchild right now.”

Louise:

“Oh Lord, I am totally broke. Right about now I used up all of my 401K. ...that’s stressful also trying to figure out where the next money is going to come from, you know, and whether I’m going to have anything to take care of the needs you know.”

Mary:

“It drains you, especially if you have a fixed income...”

Jennie: “Deeply! I’ve had to cut back on work hours because I didn’t have anyone to get them out of school.”

Emily:

“These CPS peoples are crazy. They do not give me nothing but they want to dictate to you. So I’ve gotten them in school, taken them to the dentist. Whatever their needs are, I have supplied it – with my money!”

“Well, I don’t have money like I used to. Tell you the truth..., I don’t tithe like I used to.”

d. Social isolation. Another question the grandmothers was asked pertained to their social life and how it was affected since assuming custody of their grandchildren. The majority of the younger custodial grandmothers felt that their lives had been taken over by the grandchildren and left them little time for themselves or to socialize with their friends. They lamented on how in the past they used to hang out with their friends but now everything stops because they have obligations that their friends don't. Some have even decided not to date or those they were dating did not want the kids around. On the other hand, the older grandmothers did not notice any negative effects. Several of the grandmothers stated that they were loners before assuming custody so they were not affected either way.

Jennie:

"My life pertains to work, church, and these kids."

Lynn:

"Oh, I can't go do what I want to do when I want to do it."

Victoria:

"I don't have a social life."

Jaz:

"I can't do anything. They're with me everywhere I go, they go. If you see me, you'll see them."

Precious:

"I don't have no social life! I'm too tired to have a social life. No social life. What is that?"

Jennie:

"Really, I really don't have a social life."

Mary:

"Socially? Not much, because I'm not the people person. I can take care of people, but when it comes to going out and partying and all that, that's not me."

Emily:

“Well, my only social was going down there to the Senior Citizen Center and play bingo or whatever.”

Shirley:

“Having him has had no negative effect on that. I can’t blame him. I haven’t had a date since 1902! (laughs). Can’t blame him! Long before he was born, ok. I wonder about that though because it would be the rare older man who would care to get involved in the situation like this. And you know, that’s ok.

Theme 2: Importance of Maintaining Interpersonal Relationships

The next two interview questions inquired about the quality of various interpersonal relationships the custodial grandmothers had before and after assuming custody of the grandchildren. It is important to maintain and nurture interpersonal relationships so that the custodial grandmother does not feel isolated. Question 2 asked about relationships prior to assuming custody. The relationship areas included: marriage or significant other; adult daughter/son of grandchildren in custody; custodial grandchildren; and friendships. Question 3 asked about the same relationships after assuming custody and also added another area inquiring how it affected the grandchildren not in custody.

Marriage or significant relationship before/after custody. When asked about their marital or significant relationships, the three married couples stated that their relationships were good. It should be noted that none of the three husbands are the biological fathers of their wives children and two of the grandmothers already had custody of their grandchildren before they got married. However, since they have been married, all of them stated that the “relationship is good.” One widow said that she “used

to date a little,” but no longer dates since she has custody of her grandsons. Others stated that having the grandchildren was a source of contention in their significant relationships:

Lynn:

(before) “Really nothing’s changed because Larry and I have - we’ve always had a great marriage. Um, and when I assumed custody of them, my kids were still in the house because Essence had Tiffany when she was 17 so she hadn’t even graduated high school or she was in her senior year of graduating high school and so I still had James and Angela in the home. So, it was like we were just bringing another kid in the house.”

(after): “I don’t think it’s affected it much because they’re just like an extension of our other kids. Because like I said Tiffany started with us when the other ones were here. So, it’s just like a carryover.”

Precious:

(before): “I was alone then. Before she was born, I was alone. I was in a transition from my children’s father, who I had been with for many years, and at that time I had just started to pretty much start dealing with who my husband is now. So, the transition was already there, so it didn’t have an effect on that.

(after): “..., we’ve never had an issue when it came to the grandbaby or to the children period in that case. He’s very supportive when it comes to her. Like his thing is even now when I just finished talking to him, he’s upset because she doesn’t know how to write her name, she doesn’t know how to do her address yet. I say, well baby you know. He says, ah no, no, no, no because she is smart as a whip. If something was to happen to her, she needs to know how to write her name, write her address. So things that I don’t see, he sees, that’s very important to him... So, I understand what he’s saying, it is an issue but he’s been very supportive in his relationship with her also.”

Lorraine:

(before) “...well, before I had gotten her, I was still like... Well I wasn’t married when I got her so as far as my social life before I got her it was fine, same like when I got her. So nothing never change.”

(after): “It hasn’t affected it at all. He took it all very well. ...because even with the situation of getting the little one, you know he had to even go because CPS even sent him to take a background check and he didn’t have a problem with it at all because you see most men would say, ‘why would I have to do that? That’s not my grandbaby.’ I mean he was willing to go do it.”

For those who were in other significant relationships, there was a definite change that I feel affected the esteem of the young custodial grandmothers. Some chose not to date at all while the children were in their custody which could result in further isolation.

Jaz:

“Actually, my having custody of my grandchildren was a really sore contention between the two of us. Because his position was, you reared your children, they need to rear theirs. And so we had that going. But it was interesting because I only had one at the time and then he would give me all this lip service. But then he would say, “you can just send them out in the middle of the street, they’ll come get ‘em.” And I would say, ‘uh huh’. And then when I would say, “I’m just going to send them out in the street, he’d say, “you can’t do that!” “I think the primary problem with having custody of them and the difficulty he had was because he traveled a lot and because he really wanted me to go and I couldn’t go and that just burned him a lot. And he traveled out of the country and he wanted me to go and I couldn’t go.”

(It should be noted that her friend has since died).

Louise:

“I had a friend, and that was a problem you know with the kids and stuff.”

Jennie:

“I am so serious. I mean, it was like, what will your boyfriend say? Well, it ain’t o say! It ain’t no say! It’s either you deal with me or keep walking. You know I tell them how I met this guy when I first got them and I sat him down and I told him what I was going to deal with and what I wasn’t gonna deal with and how with these right here, and I have 6 more of them, you gone respect them if you asking them to respect you. You’re gonna respect. Now, if you want to get on my bad side...”

Adult daughter/son of grandchildren in your custody before/after custody.

It should be noted that three of the custodial grandmothers (Victoria, Jaz, and Mary) were paternal grandmothers caring for the children of their sons. Although one (Victoria) had a son who was deceased, the other two fathers did not help them financially or assist then

in any other way. Some of the relationships were strained prior to assuming custody but got better I think with maturity, while others continue to decline.

Mary:

“It was good. It’s still good. Didn’t much change, he’s just a guy.”

Jaz:

(before): “We’ve always had a relationship. Uh, my thing was like, “if you lay down and make them, then you take care of them. I started telling them that when they were 7-8 years old, but he obviously didn’t get the message.”

(after): “...the relationship between he and myself, between him and me is strained because he’s there eating and sleeping and taking showers and washing clothes and isn’t contributing a dime.”

Louise:

(before): “It was ok. It wasn’t that bad. We talked and she would call and ask me, you know, how do you cook this, or different things, you know and stuff like that.

(after): “No, not at all now. The only time she calls is when she wants something.”

Lynn:

(before): “She and I’ve always had battles because she, she always was strong headed. She was going to do what she wanted to do regardless if you said no or whatever.”

(after): “So now she tends to think that I love her kids more than I love her and I can’t get her to see it’s not that. I love her, I don’t love her sin.”

Lorraine:

(before): “Yeah. Well we had an on and off relationship. It wasn’t as good as it is now because she’s always one, she was headstrong for one thing and didn’t want to listen and you know that’s the problem, that’s why I’m with the kids because of that headstrong stuff. Thinking she knew everything but she didn’t know everything and what I would tell her, she didn’t want to listen to. She wanted to do her own thing and you see that’s where I came in because I couldn’t – first of all she wasn’t stable enough to have the kids.”

(after): “Well, since I have custody of them now I think she – well first of all she got somewhere stable to live now and like anytime I call her up now, she there. I mean, she don’t gripe, or anything like that because at first she used to gripe and not answer the phone and all of that when I called her just to come see her kids.

Now, if I call her up, now she'll be there if she don't have anything else going on she would be there and like if I'm going out or something like that she's willing to take care of them. We don't have to fuss. I mean she's there 100% with them."

Precious:

"Between me and her? Oh, the relationship is good. The relationship is still good between us. You know she just happens to be one of them little hardheaded kids that just don't get it yet and pretty much a live wire. Yes, she's one of them live ones...."

In instances where the daughters have mental illnesses, the relationship is somewhat unpredictable and contentious:

Shirley:

(before): "Well, she and I've on and off have had a bad relationship because she was convinced when she was 8 years old that the psychiatrist who had her institutionalized did it as a favor to me. She has never had anything wrong with her, she was ok, and I was able to somehow convince that professional person to put her away. Then she's been in and out of different places. I've had her committed. I mean it's just been years and years, so she is very bitter."

(after): "Yes, she is resentful. I haven't seen her or talked to her. January 3rd it will be 2 years. That's the last time I saw her or spoke with her. But we know now why she disappeared."

Jennie:

(before): "It was good. I mean she would..., she was Mama's baby. She is the baby."

(after): "We can bond together... I get a little check every month and I'm against drinking and smoking, but she smokes cigarettes though. I supply cigarettes sometimes and just to kind of pacify her, to keep her from doing all of this stupid stuff. Be with people, because everybody don't understand her. Us, we hear what she say and go on. Anybody else, they might want to take it somewhere else. You know as far as that fighting, she's a fighter now but you know just...I try to keep her in her own little house, whatever you need, as long as it ain't drugs. I ain't buying no drugs."

Custodial grandchildren before and after custody. Most of the grandparents whose grandchildren were older when they assumed custody state that they had good relationships with their grandchildren. However, some of them, like Mary and Lynn, reported having problems with them after they went for a visit with the biological parent. Mary, who was awarded custody through the courts when her granddaughter was 6 years old, shared a situation when her granddaughter was about 10 years old and went for a visit to her mom's and she kept her for a week, even trying to enroll her in another school. She stated that "...in them 7 days, they had messed her mind up....they had constantly told her that I had taken her from her Momma and she believed it, so from then on we had struggles because she was believing that and so, but now she's growing up and the relationship has changed between her to where she really see that what they told her was lies..." Then there was Lynn, whose grandson came to live with her when he was 2 years old and is now 14. She said, "he would rather be with his mother and for a while, because he was giving us so much trouble, we let him go live with his mother..."

Mary:

(before): "It was good because then she was younger. So we had a good relationship."

(after): "It's just smooth. I'm so glad cause I thought I was gonna end up in prison."

Shirley:

(before): "He's always been in my life and he's never been a burden you know."

(after): "He calls me Gammy. He knows that he's adopted because he had to go to court for the final adoption and you know we had a whole slew of people there to the courthouse and cheered him on. Yeah, so he knows he's adopted, he's not 100% sure what it means but he knows he's going to live with me. He used to ask

about his mother everyday. He'll ask about her now, if something about a mommy, if something comes up, he'll ask. He knows I'm raising him. He knows that we'll live together until he's grown..."

Louise:

(before): "Always active, always on the go. Ah, plays, movies, concerts, parties, you know, all kinds of stuff."

(after): Now it's kind of hard because I don't have transportation. I don't have funds to take them different places. You know, not even to the free places because I don't have transportation anymore. So, it's been slowed down a lot and I don't think they understand that."

Lynn:

(before): "Oh they love us to death."

(after): "The ones in the house that live in the house with us tend to think that I favor the other ones because I buy them stuff all the time."

"He loves his mother dearly. He would rather be with his mother and for a while because he was giving us so much trouble, we let him go live with his mother. But with the incidence of the car, he had to come back home because she allowed him to drive so that's what sparked this whole thing. So we put our foot down – "No, you will be coming back home."

Lorraine:

"We have a real good relationship. You know you gotta get through that teenage stage and you know that being a parent and getting through that teenage stage, sometimes you get that frown and that look, but better not talk back, you know. Just being honest! She already know, you know you get that look and then the laziness, you got to stay on them for that but you know, the typical teenager."

Jaz: "She's fine. In fact all three of them because the 10 year old has always been right beside me and huh, it's just he's reaching an age where he want to try and be more independent and he wants to figure out, I guess like most people, why his momma, she doesn't want to have anything to do with him."

Victoria: "It was good. It was always good..., they just more closer to me than they were."

Grandchildren not in your custody. Although there seems to be some minor jealousy as it relates to younger grandchildren, most of the older grandchildren not in custodial care seem to take it all in stride. After Louise's daughter divorced and left her with the children, the father took the two youngest boys and he doesn't bring them around anymore.

Lynn:

"I think it does affect them because they tend to think that the ones living here are our favorites and they're not. I love them all the same. So I kinda try to make up to the other 2 by buying them more stuff. It's a rough life. You know to make up to them. You know because sometimes they'll want to spend the night and I'm like, "Oh God, I just got rid of these two."

Jennie:

"Them children don't care nothing about all that. See, they're in Louisiana."

Mary:

"... all of them are spoiled. What I do for one, I do for all of them."

Shirley:

(before): "I had a relationship, especially with my grandson but he was born in March and I left Houston that August so I never lived in the same city as he and his sister until I came back now...."

(after): "I really do like my grandson and we are buddies..... My granddaughter, we've gotten closer but she just graduated from high school and you can't find her."

"...my grandson whose 23 said, 'over my dead body and everybody else's because I'm not calling that boy uncle!'

Friendships before/after custody:

In situations where the grandmothers (e.g., Lynn, Precious, and Lorraine) assumed custody while their own children were still young, there was no significant change in friendships.

Lynn:

“It hasn’t affected it at all. Actually I have support from friends who think we’re brave and courageous...”

Lorraine:

“About the same, nothing different, because everybody gets along with them. Love the little one to death. Everyone, all of my friends, they love her. She’s a very outgoing child, very happy child, gets along with everyone, everyone. So she is... she really is and I haven’t had any problems with no one...”

Precious:

(before): “It’s pretty much the same. I’ve never been sort of street. You know I’ll go over my friends and we’ll talk maybe and go out for a drink or eat dinner. I wasn’t really big on going out and partying. I’ve never been like that.

(after): So, it’s pretty much the same. I talk to them on the phone, you know. I’ll go and meet up with them and we’ll go have dinner or stuff like that. It hasn’t been any different.

Victoria:

“..., because I really didn’t have no friends.”

Louise:

“Uh, as far as my friends I hang with, I don’t do that anymore. They go out a lot to movies and stuff like that and I can’t do that because I don’t have a babysitter for this and that...”

Jaz:

(before): “Oh, we were fine. We would go, some girlfriends and I would go out every Saturday and we’d go eat breakfast, go to a movie, go uh, after we’d go out to eat dinner. We did that every week.”

(after): “I hang out with my friends while school is going on, and they know that when school is out and the summertime, I’m off the grid. During school time I’m off the grid for the 1st month of school because I volunteer over here, but after that we can go to the movies and all that kind of stuff.”

Theme 3: Supportive Networks

This section asked about the support group, if any, that the custodial grandmother had. Throughout the interviews, several sources of support were mentioned as helping to assist by providing encouragement, respite care, or words of encouragement, to the

custodial grandmother or great-grandmother. Some relied on their faith, as Mary stated, “God meets our every need,” while others on their family, and some even on friends and neighbors. A few had recently attended a Grandparent as Parent meeting and stated that they would consider attending again.

Faith. All the grandmothers, with the exception of one, spoke continually about their faith and trust in God to supply their needs. Although she stated on the demographic data sheet that she was a Christian, she did not mention her faith but in fact cried throughout the interview having to stop several times to compose herself. She stated that she was depressed because she did not know how she was going to pay her bills and take care of the children. Others mentioned God and their faith throughout the interviews.

Mary:

“The Bible says, I have been young and now I’m old, I’ve never seen the righteous forsaken. And that’s what I try and tell her. Because I tell her, if I wasn’t afraid of God, then I could let you go.”

“...so I’m content. God meets our every need.”

“...So I’m holding on to what I know about the God that I serve. He’s on time and He’s good.”

“When I open that door, I say honey, this isn’t where I’d supposed I’d be in my life at 60 years old so it must be God’s plan.”

Jennie:

“...From time to time, I still ask God to show me me. Help me to be a better person for them.”

“I have a good Pastor, he said, take a vision and hold on to it...”

“...my Pastor, I go in and talk to him.”

Lynn:

“Now, if it’s a problem dealing with them, I go to God about everything.”

Victoria:

“...I knew if God wanted me to have them, He was going to place them – and He did.”

Jaz:

“I go to church.”

Lorraine:

“I thank God every person that I have in my life, I mean they get along well with them.”

Shirley:

“So, the last time, finally, and this is only God, I had been back and forth so many times making myself sick, crying, uh, DCF, this last time when I called, they came in and met me, went in and saw the condition...”

“This is the church I’d always looked for – this was a church that really lived like a church family and took care of each other and you never had to ask for something because if they knew something was wrong they were knocking at the door...”

Emily:

“...Put God first and love these young children because they didn’t ask to come into the world.”

Family. When asked about their support systems, many of them mentioned family members who stepped in and offered to help when needed. In some instances, even the parent of the grandchild stepped and helped.

Mary:

“Yeah, you know, it’s like if I can’t do something, I can call on one of my kids and say, this is what I need you to do, I can’t make it so. We are that type of family.”

Lorraine:

“Well, as far as the support group, it’s my baby sister. She supports me a lot, you know, when I’m down or in that mood, because you know we all get in it and you know she’s pretty good at talking to me, bringing me back up to where I need to be.”

Lynn:

“My mom, my son, my middle daughter, uh, my husband. I mean, we support each other. My brother, yeah.”

“He (the children’s father) supports us financially and because he’s in the military. He was here recently,...So, he’ll come in maybe once a year like for a week which is..., I mean, I tell him, ‘you probably need to come here a little bit more instead of taking trips to other places because they need that fixture that you’re their dad you know and we’re the grandparents’, but that hasn’t happened.”

Shirley:

“I’ve got a 23 year old grandson and a 19 year old granddaughter that if they’re not busy, will help me with babysitting.”

Jennie:

“My daughter, my oldest, my mom...”

Precious:

“...by the time she comes home and then I have to go to my part time job, my daughter is home and my son is home so she stays around with them.... You know I have my oldest daughter that’s out here now with her 3 children, she helps with doing her hair, when she gives the girls a bath, she helps give her a bath, and when the girl’s pick out their clothes they take her to pick out hers. So, it’s been a big help to me because now I don’t have to get her in the bathtub when I get in from work, I don’t have to pick out her clothes, I don’t have to worry about doing her hair. So now, it’s better now than it was before she came down here.

Friends. Although a few said they did not socialize much, some did have friends or neighbors who assisted them if they really needed help. Some friends offered encouragement which seen as a form of support.

Lynn:

“....Actually, I have support from friends who think we’re brave and courageous...”

Shirley:

“...when were in the other state, my closest friends were mostly my church members. They knew everything about the baby’s mother even before she got pregnant they’d, we’d been around and they knew the whole history and uh, they worked thing that were going on around me and I was very involved with the youth program, I taught the middle school girls so it was easy for me to find a babysitter. If for some reason I couldn’t, they would allow me to bring him and we’d get him on a computer or something...”

“Ok, mentally, I still have a support group where I used to live, but when you say God put you in the right place. That woman across the street with the 4 kids, now she’s younger, she’s 45, I think her husband is 51. The lady across the street, because even though they are dealing with 4, she has 4 grandkids there, one just turned 2. They were 1, 3, 4, and 5, now they’re 2, 3, 4, and 5, and her mother-in-law had her leg amputated, so she’s living there right now, and I said, I hate bothering you. She said, “Why? First of all I’m 20 years younger than you.” I mean she has, she’s got sons, daughters, everybody in and out trying to help her. She’ll have a house full of people so she says I’ve got it and they..., I know if I call them in the middle of the night, I know that between she and her husband will come and they check on me and if something doesn’t seem right...”

Jaz:

“...actually my girlfriends have been right there to go through some of the bull crap that I’ve had to go through with them.”

Lorraine:

“Also Sheila, she’s another one like a support when I’m down, get to getting into my depressed mood, which I don’t get into that often, but you know sometimes you get there. She’s a very motivated person.”

Emily:

“Well, I’m a member of the W.O.W. (Women of Worship) and they help me. They buy diapers and stuff and clothes to come to church.”

GAP (grandparents as parents). GAP (Grandparent as Parents) is a support group for custodial grandparents that provides information regarding programs and services grandparents and other family members who are caring for grandchildren. Several of the grandmothers had attended one or more meetings and felt that they would benefit greatly from the information they hoped to receive. Shirley helped to organize the past conference that the ladies attended. Mary said that she had “just ran across the information about the grandparent thing and that was the first time we ran across information.”

Theme 4: Family Preservation

It was important to all of the custodial grandmothers that the family should remain together at all costs. Making sure that the children did go into the system was the primary reason that they were willing to make such a great sacrifice. Besides providing a safe haven for the grandchildren, the grandmothers also acted as a shield or a wall of protection. Although they complained about having “no social life,” the majority of the participants voluntarily chose to put their personal lives on hold in an effort to protect their grandchildren from people who might reject them, disrespect, or harm them in any way – emotionally or physically. Instilling family values and teaching beliefs was also important.

A safety net. All of the grandmothers felt that in some way they were giving their grandchildren a safe place to live. They were able to catch them before they were put in the foster care system and making sure they stayed connected with the family. They felt as though they were investing in their future and one even mentioned that she wanted to make sure her grandson was able to go to college, while another said that her grandchildren were going to be somebody.

Shirley:

“... you know, I know when I made this commitment, I knew how old I was and I knew how old he was and I knew that more than likely the rest of my life would be spent raising him and getting him off to college. And if I can live long enough to do that, it’s ok, I made the commitment and that’s ok.”

Emily:

“I have these beautiful children and they won’t go into the system; they have a home. To me that’s the main thing.”

Louise:

“No, I wouldn’t say I wouldn’t do the same. I would do it all over again. If I knew all the situations, that..., you know. I would do it all over again.”

Jennie:

“Well, my grandkids are not out there being mistreated by nobody, because I hear so many horror stories.”

Jaz:

“What I have done so my grandkids have food. I have to go to food banks and stand in line to get food. My grandkids never knew where the food came from, they would think, ‘Oh Granny went and bought groceries.’ Granny ain’t got no money to go buy groceries. When I get through paying utilities, buying uniforms, even though I stand in line to get vouchers to buy uniforms, it’s still not enough to buy new uniforms for 3 kids and new shoes for 3 kids. I can’t go outside and pull leaves off a tree to go to the store and spend them.”

Lorraine:

“Because she was here, there, and everywhere and I didn’t want to see the kids drug backwards and forwards and it’s no telling what would have happened to those kids being drug backwards and forward like that. She never had a stable place to live at the time, because she was living with this person and that person and you see we can’t do that with kid and that’s another big reason why I took them on.”

A shield. Most of the grandmothers are very protective of their grandchildren and try their best to ensure that they are not hurt any anyway. They will even keep them from their birth parents if they felt it was in the grandchildren’s best interest. Several of the grandmothers, like Jennie, Shirley, and Victoria had adopted or were in the process of adopting their grandchildren in order to protect them from their biological parent.

Jennie:

“I don’t try to bring anybody around them that’s gonna make them feel bad. I’m not going to let you sit here and let them talk to them any kind of way, and you better watch how you look at them.”

Louise:

“I can’t have a relationship with a guy. They done had so many disappoints with their mom leaving and their dad leaving. I didn’t want to get someone else involved in their life and then it don’t work out.”

Mary:

“You know, he thinks him being a guy he just thinks all his friends are supposed to be able to, you know, because they say she’s cute and all that, I had to teach him, no, she can’t sit on they lap; you know they can’t pick her up because I don’t know what kind of feeling.... They don’t understand, but I understand.”

Emily:

“...and she was letting all kinds of different peoples hold the children, not taking care of them, and leaving them. But see my concern right now is..., “Why don’t you just leave them?”

“Now your child, grandson, granddaughter might have made bad mistakes bringing them in the world, don’t turn them a loose.”

Shirley:

“I couldn’t leave him in that place. It was unsanitary. I mean there were things that happened in this last place that were unbelievable. She had gone to the greatest extreme and he was in danger, and she had stopped bathing him and the daycare started complaining to me about he smelled of urine. She never washed his hair, and I found out why, she didn’t have any running water. It was just...oh it was horrible. You know because there was no other choice.”

Family values and beliefs. It was important for the majority of the grandmothers to make sure the grandchildren learned manners and were taught the Bible. They made sure they went to church and always tried to speak to them about the Word of God.

Emily:

“I take them to church with me.”

“I’m constantly telling her right from wrong. She don’t want to hear nothing good. Nothing! You know you want to tell your children you need to do XYZ. You need to let them know good manners.”

“...learn how to love those children. Put God first and love these young children because they didn’t ask to come into the world.”

Mary:

“...that’s what I always tell her, God put you here for a reason because I’m supposed to tell you you’re supposed to be with Him not the way the world says. If that was the case, He would have left you where you were.”

Jennie:

“...I try to keep them on the godly level, so I buy them little bibles and let them read them; teaching them how to say their prayers. I’m trying my best to be the better person.

“...So, I have to watch what goes on around him.... I try to set good examples, good goals for them...”

Shirley:

“...I know he loves being involved in the church and so do I. I got to get back on it.”

Theme 5: A Second Chance

The custodial grandmothers spoke of how it made them feel to be able to provide needed assistance for their grandchildren perhaps in ways they did not or could not provide for their own children. Some felt that it was God’s way of helping them find their purpose in life, and one felt like it gave her a reason to live.

Jennie:

“I believe that God didn’t bring me this far to let me - just have me start all over again. He gave me the strength and courage to be a grandmother and another chance to be a mother. Because in my... growing up and everybody knows I wasn’t the best mother I could be. I had streets, going out, drinking, smoking drugs. But now that, you know when you ask God to show you yourself and He shows this part of your life that you don’t –He didn’t want for you, but He sent you through it so you can find yourself. That’s what I went through. From time to time, I still ask God to show me me. Help me be a better person for them.”

Precious:

“It helped me grow. It helped me to have patience because I think it was easier for me to learn to have patience with a child with a disability when they belong to me then it would have been for a child on the outside. The patience level was different, you know cause babysitting another child or work to take care of this child, it’s only so much you can deal with, but when they’re yours you have to

learn patience or beat them – and I’m not going to beat her unnecessarily because she’s making me upset. I have to do a little woosas and walking back..., let me just get myself together and go back in here. So it helped me to learn more self-control. It helped me to grow in that area.”

Mary:

“Well, it gives me a reason to keep going because I’m a compassionate person. I love children, that’s why I had my children. It gave me a purpose.”

Victoria:

“..., it kept me from being lonely.”

Shirley:

“I didn’t realize how much a purpose it’s given me. that I could have 100% of my freedom now. I could just be me and I could do stuff. But I am just me. I don’t have a mate. You know I listen to my girlfriends say they’re going to dinner with their husband, a lot of this stuff I do by myself, I don’t even wait for a girlfriend if I want to do something, I go by myself. But at 3:15 p.m., I’m needed. I’m really, really needed.”

Emily:

“To hear my little grandson, gets up every morning and get dressed and say, ‘Good morning grandma’, and things like that. That makes me feel young again. So I feel real good taking care of them...I want CPS out of it. If CPS gets out of our life, these children can live happy - because they got family.”

Louise:

“Well, it keeps me from just, I don’t want to say that but, from disappearing. You know, I don’t think there is any other way to say it because they benefit and you benefit from helping people, watching them, and caring for them. I mean, even if...every now and then one of them will come and sit on side of me and put his head on me and say, ‘Granny, you know I just love you’, and that lets me know that what I am doing is worth it.”

Lorraine:

“I would sit up a lot of nights and cry and say, Lord, why me? And the answer came back to me saying, ‘Why not you? Why not you? What make you more greater than anyone else? You know. I gave them to you for a reason.’ That’s what God had showed me. He gave me them for a reason and really He gave them to me for a reason because it’s keeping me younger I can say, you know and like you say keeping me going, keeping my spirit up. You know I fuss at them a lot, they know that, but it’s keeping me going though.”

Some grandmothers, however, did not feel that being a custodial grandparent benefited them at all.

Lynn:

“Oh, benefited me? That’s a hard question because I don’t know that it has benefited me. I mean, I love these kids to death, don’t get me wrong, but I can’t see where it’s really benefitted me.”

Jaz:

“I don’t see where I’ve benefitted from it at all. I think I’m getting the short end of the stick. I was active before and now my activity is more geared toward what the kids need.”

Theme 6: I’m Still the Grandmother

There was another theme that emerged rather unexpectedly, that of the role of grandmother. All of the custodial grandmothers and great-grandmother, regardless if the custodial arrangement was formal or informal, whether they had them from birth or only a short time, they still wished to be identified as ‘the grandmother.’

Lynn:

“Grandma! Bailey started out when she was younger calling me Mama and we wanted to make sure she knew that I was Grandma and she did have a mother because I didn’t ever want her to grow up thinking that I was her mother and Essence was her sister because that’s not the truth. So we, from an early point it’s always been Grandma and Papi.”

Victoria:

“I’ve always been ‘the’ grandmother.”

Lorraine:

“Mama and Granny. I’m the Granny and she’s the mom. That’s one thing I taught them, that’s your mom. I never taught them against their mom because like I told them, she will always be our mom no matter what – that’s your mom - No matter what.”

Shirley:

“...but I’m still Gammy. Every now and then though, he’ll just out of the blue say something about, ‘I’m your son’ and I don’t push any of it because he’s not quite six, and I don’t know.

Precious:

“Yes, she knows I’m the grandmother. She calls me Mommy because I’ve always been her Mommy and she calls her mama, Mama TayTay.”

Mary:

“I’m still the Grandmother.”

Summary

This chapter represents the results of the qualitative analysis and coding of the semi-structured interviews that were transcribed verbatim from the 10 African American custodial grandmothers who participated in this study. In order to promote confidentiality, the demographic data was presented without any names or other qualifiers that might identify them. Data analysis revealed six themes and 10 subthemes.

CHAPTER V

DISCUSSION, RESULTS, IMPLICATIONS, LIMITATIONS, AND RECOMMENDATIONS

A phenomenological study using semi-structured interviews of African American custodial grandmothers was conducted to examine factors they perceived affected their overall well-being and other relationships since assuming custody of their grandchildren. The participants were recruited through local churches in the Greater Houston, Texas area. Information received from semi-structured interview questions were transcribed, analyzed and coded. The findings, which were based on five research questions along with Hill's (1949) ABC-X Family Stress Theory guided this study. The discussion of the results, conclusions, implications, recommendations and limitations of the study are included in this chapter.

Results in Relationship to the ABC-X Model

Hill's (1949) ABC-X Family Stress Theory model contains a total of four parts, three of which are interrelated and one part which is the outcome. All the parts of the model are utilized to determine why some families are able to cope when faced with stressful situations while others do not. The information from the interviews was used to try and determine if the custodial arrangement will likely result in a favorable or unfavorable experience for each custodial grandmother.

Lynn reports that her daughter becoming a teenage mother was her initial stressor (A). She described how her daughter was rebellious and when she became pregnant and delivered the baby, she did not bond with the baby in the hospital which forced Lynn to become the primary caregiver to her granddaughter from birth while still having two of her own children at home. Additional sources of stress were added when her daughter would have two more children that Lynn had to eventually rear as her own. Although Lynn was a primary resource, she relied on help from her husband, children and extended family (B). Financially, she reports that collectively she and her husband have financial resources of \$90,000 to \$99,999 annually, and also receive \$1,000 a month in child support from the father of the grandchildren, it is not enough to allow them to save as much they would like to. She complains that her “patience is thin” and although she doesn’t have “bouts of fits,” she is growing more impatient. Her overall attitude is somewhat pessimistic (C) as feels she is on her “second generation” and if she did not have to care for her grandchildren she could come and go as she pleased. Although she assures the researcher that she “loves these kids to death” she doesn’t see where having custody of them has benefitted her and will more than likely be more vulnerable to more stress (X).

Victoria is a widow who assumed custody of her two grandsons after their mother became addicted to drugs and became negligent. Her son, the father of the children had died in a car accident when the children were 1 and 2 years of age. She became somewhat of a surrogate mother until CPS finally took them from the birth mother and brought

them to her (A). She has no friends or family that she can depend on and is struggling to make ends meet financially by working, and using her husband's and her grandson's Social Security checks to make ends meet. She has faith in God that He will see her through this situation (B). She sees the custodial arrangement as a blessing to her (C), as it keeps her from "being lonely," and she "always have company of them." She believes that if people "just get their grandchildren and love them and train them up in the way of God it will be rewarded in the end."

According to the ABC-X theory, even though Victoria is struggling financially and is socially isolated, her positive perception of her situation will lessen the negative effects of stress. Because she perceives the custodial arrangement as a blessing, "I know they need me," and even though she states that "this is the time I should be able to do what I want to do....But they need me so it's no regret," she will most likely manage to cope successfully (X).

Jaz assumed custody of her son's three children almost from the time of their births because their mother was either incapable or did not want to take care of them (A). Financially she is surviving on her Teacher's Retirement which she states is just enough to take care of her and not three additional children. She does not receive any other monies to supplement her income from her son or the children's mother, however, she is also very resourceful, frequenting the food various banks and getting vouchers for the children's school clothes. She has friends who support her emotionally and also on occasion, she is able to socialize with them (B). She volunteers at the school where the

children attend so she is very actively involved in their lives. She describes the custodial arrangement using adjectives such as, “very trying, very stressful, emotional rollercoaster....it causes a lot of hostility, anger...and sad...” She also has a strained relationship with her son who is the father of the children who is unemployed because of an altercation with the children’s mother and is now unable to find employment because of the offense and has recently moved in with her temporarily. Throughout the interview she never mentioned that she loved the grandchildren although she has demonstrated her love for them by her actions. She is also planning on adopting them in the near future. However, when asked if she benefitted from the custodial arrangement, she asked, “How? I don’t see where I’ve benefitted from it at all. I think I’m getting the short end of the stick!” (C) According to the ABC-X theory, her lack of resources coupled with her attitude toward the custodial situation can result in her becoming more vulnerable to more stressful events which can possibly impact her and her family’s situation in a negative way (X).

Lorraine assumed her first grandchild because her daughter was a teenage mom and was not mature enough to be a parent. Several years later, she would assume custody of her second granddaughter after her daughter was involved in a domestic violence situation which put the grandchild in jeopardy (A). At the time Lorraine was going through a divorce, was unemployed, and living with her younger sister. She said she assumed the responsibility because she says “that was my grandbaby and I couldn’t deny her and I said, yes, I will take custody of her...” Her sister supported her and the girls

until she was able to get food stamps and WIC for the baby who she later adopted. Lorraine did find a job to help care for her family and has since gotten married and is presently a homemaker with a household income of \$90,000 to \$99,999. She does not receive any additional source of income. She is very actively involved in her grandchildren's lives, and enjoys a social life with longtime friends. Her sister still serves as a source of support for her and her daughter also helps with the grandchildren when she can. She also states that God gave her the children for a reason because it keeps her feeling younger, keeps her going, and keeps her spirit up" (B). She states that the custodial arrangement keeps her "more motivated," she "does more...I get out more with them." She says they keep her spirit up (C). According to the ABC-X theory, Lorraine's perception of the experience along with her internal and external resources will result in her having the coping skills to handle other stressors in a positive light (X).

Precious was awarded temporary custody of her granddaughter 8 years ago when her 14 year old daughter was deemed incapable of caring for a baby with Down's Syndrome and who had open heart surgery as an infant (A). At the time Precious says that she had divorced the father of her six children and was working two jobs trying to make ends meet. She has since remarried and relocated to Houston but she is still working two jobs. Her younger children help with the granddaughter and one of her older daughters has recently relocated with her three children and is helping her out also (B). She said although she did have friends that she socialized with, she works too much to do that anymore. Precious views the custodial situation as a blessing because she said "it

helped me to recognize the gift that God has given me, which was to take care of people with special disabilities because that's the field I'm in because He was preparing me for my child that was coming and going to be special needs." She also sees her granddaughter as both a blessing and a challenge. She does not see her has a financial burden because she says that she would have to work to pay bills anyway (C). Precious' perception of the problem as a blessing and her family as a means of support relieves the stress which gives her the ability to manage what could be a very stressful situation (X).

Louise assumed custody of her three grandchildren after her daughter moved in with her while she was going through a divorce. After the divorce was finalized, her daughter "walked out and hasn't been back since." During that time Louise was bitten by a spider which became so infected due to her diabetes that she had to have a toe amputated. The long recovery resulted in her having to quit her job. At the time her youngest daughter was living at home and helped her out financially. Because her daughter accepted a job that required her to move to another city, Louise had to use all of her 401K to survive. Combined with that, she no longer has transportation because she cannot afford to get it serviced. She has no family she can depend on and no longer socializes with her former friends because she has no funds or transportation. She presently relies on a friend who is also a custodial grandmother to drive her about and look for resources to help pay her bills. She has just recently starting attending a Grandparents as Parents support group and believes that she will benefit from that (B). Although she says that she finds herself crying a lot, screaming more, and not being as

patient as she was at first, when asked if she had any regrets, she responded, “No, I wouldn’t say I wouldn’t do the same. I would do it all over again....Cause I love them.” She also said that “every now and then one of them will come and sit on side of me and put his head on me and say, ‘Granny you know I just love you’, and that lets me know that what I am doing is worth it all”(C). Even though Louise is presently experiencing depression, she is still able to see the benefit in what she is doing for her grandchildren. If she continues reaching out trying to find outside support, and does not continue to feel overburdened she can possibly manage to cope with her present stressful situation (X).

Mary assumed court appointed custody of her granddaughter when the child was six years old and had been sexually molested (A). Her son signed the papers so that she could receive custody and the mother of the child did not show up at the court. Although her son paid child support when the granddaughter was in the care of the mother, he nor the mother pays her any child support. She manages to take care of herself and her granddaughter even though it is financially draining she continues to say, “by the grace of the God that I know, we making it. So I’m holding on to what I know about the God that I serve. He’s on time and He’s good.” Mary has also just started attending the Grandparents as Parents support group and hopes that it will help her get some more resources (B). She believes that she receives benefits of the custodial arrangement because as she states, “it gives me a reason to keep going because I’m a compassionate person. I love children, that’s why I had my children. It gave me a purpose and I still take care of my kids. We help each other. You know, just to know that I’m a part of their life

and they still need me it's a reason for me to go on. She's been the reason (C)." Because Mary has a strong family support system, very strong faith in God's purpose for her life, and has now accessed another avenue where she can locate resources, even with limited finances, her positive attitude will help her handle other stressors effectively (X).

Shirley assumed custody of her grandson and eventually adopted him over a year ago because of her daughter's mental illness. Because her daughter is both bipolar and has obsessive compulsive disorder she had put her son risk (A). Prior to moving to Houston, Shirley had the full support of her local church body and was gainfully employed but has since retired and has an annual income of \$50,000-\$59,999 a year, along with Social Security benefits for her grandson and Adoption Subsidy. She also works a part time job two days a week. Since moving to Houston, she has some support from her grandson and granddaughter and her neighbor when she needs help with her 5 year old grandson also bipolar. Her son has also recently relocated and moved in with her to help with his nephew. She is currently looking for a church home where they can worship. She has lifelong friends in Houston that she believes will step in and help her if she really needs it. She has also become actively involved with a Grandparent as Parent support group and intends to also become a Child Advocate (B). When asked how the custodial arrangement benefitted her, she responded, "I didn't realize how much a purpose it's given me....But at 3:15, I'm needed. I'm really, really needed....and I need him."(C). Shirley's positive outlook even though she knows that at her age she could

have some challenges raising a little boy, she is excited about the task. This ability to focus on the good will allow her to manage her stressors well (X).

Jennie assumed custody of her two grandsons when they were both infants due to their mother's mental illness. They are both 9 years old and she has since adopted them. One of the boys is bipolar and has learning disability. She presently has temporary custody of their little sister when they were taken from her daughter by CPS (A). Jennie had to cut her hours at work so that she could be home when the boys got out of school because she could not afford to cost of the afterschool programs. She also was told that she could not leave boys with just anyone because of the disability. She makes it by on her modest salary and the boys Social Supplemental Insurance checks. When she needs help with the children, she enlists the help of two of her daughters. When she needs spiritual guidance she generally speaks with her Pastor. She also recently began attending a Grandparents as Parents support group that they told her about when she got custody of her granddaughter (B). Jennie's has a very protective nature when it comes to her grandchildren and has very high standards that she wants them to live up to. She said when she first got them, she prayed, "Lord, am I fit for this?" She says that she has no regrets about having custody of her grandchildren and she feels comfortable with them.(C) Although she is living below the poverty line, she never mentioned the lack of money only that she wanted to be the best person that she could be for her grandchildren. Her positive perception of her situation will allow her to continue manage her stress well (X).

Emily is assumed custody of her great grandsons over a year ago due to their mother's neglect and something she said she initiated because she didn't want them to go into the system (A). She also tried to get custody of their other siblings recently but was told that she was too old to handle that much responsibility. She receives no financial assistance with the children and using her own money to meet all of their needs. Her daughter has moved in with her temporarily to help with the boys because she is presently having trouble with one of her knees and can't get around well enough. She also has the help of her daughter-in-law who comes over daily and cleans up the house. The women from her church assist her by buying diapers and clothing for her grandchildren. She also recently attended a Grandparents as Parent's meeting and hopes they can help her locate other resources (B). She says she wishes her granddaughter would get herself together but in the meantime she is hoping that one of her daughters would adopt the children as she is too old and does not want to "be too obligated." Her strong belief in God, family and her great love for her great grandchildren makes her overlook the fact that she is living on a fixed income. She says that as long as she has a home where they can live they don't have to "go into the system"(C). Her positive outlook and belief that she can be of some assistance in the lives of her family will have a positive effect on her and she will be able to handle stressors well (X).

Results in Relationship to Research Questions

The purpose of this phenomenological study was to examine factors that African American custodial grandmothers perceived affected their overall well-being and other

family relationships since assuming custodial care of their grandchildren. The following is a discussion of the findings of the five research questions along with previous research findings.

RQ1: What do Custodial Grandmothers Perceive to be the Major Stress Factor(s) Impacting Their Overall Well-being (Physical, Cognitive, Emotional, and Social)?

The first interview question the custodial grandmothers were asked pertained to how had becoming a custodial grandmother affected them in four areas: physically, emotionally, financially, and socially. This was based on research studies that indicated these were major areas of concern for this population (Goodman & Silverstein, 2002; Ross & Aday, 2006). In response to the first area, physically, the majority of the grandmothers responded in the negative stating that they were “tired,” “it keeps me running,” “sometimes I get overwhelmed,” “I’m depressed. I mean I suppose I’m not sleeping well,” and as Lynn stated, “I’m more tired than I normally would be. I find myself with having to work and then come home and cook dinner and tend to them.” These statements support previous research by Roe, Minkler, Saunders, and Thomson (1996) that African Americans grandmothers reportedly experience high incidences of depression, chronic pains, and a lack of sleep resulting from stress caused by assuming primary care of their grandchildren. Other studies report an increase in depression and for those who were already predisposed to depression the stress from custodial care would exacerbate the symptoms (Baker & Silverstein, 2008; Bluestein, Chan, & Guanais, 2004).

However, there were some grandparents who stated that custodial care had a positive physical impact on their health. Grandmothers like Jaz, reported that "...it forces me to be more active than what I probably would be. I end up going more, walking more, just actually working more." Another grandmother, stated that "...I still get my walking in." This corresponds with a research study by Burton, Dilworth-Anderson, and Merriwether-DeVries (1995) that posits that only when caring for grandchildren outweigh the abilities and resources of the grandparents were the declines in health noticeable.

Not all physical conditions are a result of custodial caregiving. Participants like Emily who is 81 years old, said "...I had all of this before they ever showed up!" This statement supports the findings of a study of 12,872 grandparents ranging from 50-80 years old that although the new demands are indeed stressful, most health disparities were pre-existing and could just be characteristics of the aging process (Hughes, Waite, LaPierre, & Luo (2007).

The second area of concern was how it affected them emotionally. A wide range of responses was noted, ranging from feeling blessed to feeling of hostility as a result of assuming custody of the grandchildren. Precious, whose granddaughter has Downs Syndrome stated, "Emotionally it's a blessing ... it helped me to recognize the gift that God has given me, which was to take care of people with special disabilities..." Research by Patterson (2011) was analogous to those expressed by Precious. They found that grandparents of a grandchild with a disability took pride in being a support person and

how it helped them reassess their values and what was important and who they were as grandparents.

On the other hand, others custodial grandparents expressed anger and frustration at the loss of socialization since assuming custody. Some of them said, “I don’t have the patience I had when mine were younger,” “...It’s been very trying, very stressful, emotional rollercoaster. Uh, it causes me a lot of hostility, anger. It causes me to be sad a lot...” Another grandmother said, “I would sit up a lot of nights and cry...” While another one said, “I cry a lot, scream more...”

The third area addressed was that of finances and how the custodial arrangement had affected them. All of the participants, with the exception of one, reported that assuming custody of their grandchildren had a major impact on their household finances due to an inability to receive the necessary benefits to take care of the children’s needs. Although Lynn and her husband earn between \$90,000-\$99,999 a year in annual income and receive \$1,000 a month in child support from the father of their 3 grandchildren, she states “Oh, it’s hit the pocketbook financially a lot ..., it takes more than a \$1,000 a month to raise three kids.” “Jaz, a retired Special Education teacher who is caring for her 3 grandchildren stated that, “I’m below the poverty line... I make enough money to take care of me, not three additional kids!” Another grandmother used up her savings taking care of her kids, “Oh, Lord, I am totally broke. Right about now I used up all of my 401K...that’s’ stressful also trying to figure out where the next money is going to come from...whether I’m going to have anything to take care of the needs....” And for those

like Mary who are on fixed incomes says, “It drains you, especially if you have a fixed income.” All of these statements substantiate findings by Bailey (2012) and Park (2006), who stated that custodial grandparents who have informal custody don’t often receive the benefits they need to make ends meet. Many live on fixed incomes and therefore are unable to provide even some of the basic needs for the children. Others, like Jennie reduced her work hours after being told in private by a CPS worker that because her children were so active (both boys are ADHD and one is also bipolar), if they were to be removed from her home because of a report of physical abuse, they would be put in foster care and probably would be dead within a year.

Being able to afford medical care is also hard for those who cannot afford the insurance premiums. Getting medical assistance for the grandchildren who are in informal care is also hard as stated by Jaz, who is caring for her son’s 3 children, “They have Medicaid, but that’s an ongoing battle because the mother would never send the papers in to get it renewed and then she finally, after I raised so much hell, she finally made me an authorized representative. So I started submitting the paper and we got them on a regular basis and she fell out with me for some reason so she unauthorized me.” Van Etten and Gautam (2012) state that even though a majority of custodial grandparents are eligible to receive benefits but because they have informal custody of their grandchildren, legally they have no rights to access the resources they need and also makes it difficult of them to get permission regarding their educational and medical needs.

RQ2: How has the Custodial Arrangement Affected the Lifestyle of the Grandmother?

The majority of the younger grandmothers responded that they felt their lives had been taken over by the grandchildren and therefore they had little or no time for themselves or to socialize with friends. Custodial grandmothers who had become grandmothers at early ages said, “I can’t go do what I want to do when I want to do it,” “I don’t have no social life! I’m too tired, to have a social life...What is that?” “I sometimes feel like, well, my life has been taken over and taken away, this is the time I should be able to do what I want to do.” These younger grandmothers, according to Hill (1999) are referred to as “non-evolved grandmothers,” those who transition into the role unexpectedly and are ill-prepared to handle it. They experience stress and anger toward their adult children because they can no longer enjoy the normal role of grandmother. Single grandmothers like Louise lament those days when she “had a friend....as far as my friends I hang with, I don’t do that anymore.” She misses going to movies and having relationships. Feelings of being isolated from friends can be perceived as relational losses as a result of custodial care according to Hayslip and Kaminski (2005).

Older grandmothers like Emily have a different perspective of the custodial arrangement, she said, “Well, my only social was going down there to the Senior Citizen Center and play bingo or whatever.” While Shirley laughingly said, “Having him has had no negative effect on that. I can’t blame him. I haven’t had a date since 1902!” Although

Shirley has friends she spends time with, she also enjoys doing things by herself. There are times, however, when her grandson is really wired, because he is bipolar, that she wishes “every other weekend I could have my total freedom.”

RQ3: What Impact has the Custodial Arrangement had on Relationships with Other Family Members?

In instances when the custodial grandmothers were married, the relationship was said to be good as stated in Chapter IV. None of the three husbands is the biological father of the children and only one was married when they became custodial grandparents, but all are very supportive. The other two custodial grandmothers (Lorraine and Precious) married after they became custodial grandparents. Lorraine’s husband had to go through a CPS review before they married and he agreed to do that. This is in contrast with research findings that the custodial arrangement can put a strain on marital relationships and also becomes more stressful when the husband is not the biological grandfather (Hayslip & Kaminski, 2005; Robinson & Wilks, 2006). Lynn and her husband have been married for 26 years and when they first became custodial grandparents they had been married 11 years. Lorraine and her husband have been married for 6 years and her oldest granddaughter is 14 and the youngest is 8 years old. Precious’ granddaughter is 8 years old and has Downs Syndrome and she has been married for 5 years.

None of the adult children in the study harbored any resentment toward their mother or the grandchildren being cared for by their mother. Most were very supportive

and helped with the grandchildren when necessary. Although Lynn commented that her children said that she is more lenient with the grandchildren than she was with them, they all get along well. This is in contrast to what Jendrek (1993) reported regarding the offsprings of the custodial grandparents being jealous because their children did not receive the same attention as those of their siblings children who resided with the grandparent.

The grandchildren not in custodial care also did not show any signs of anger, although Lynn's grandchildren did think that she loved those in her custodial care more than them. She overcompensates by buying them things all the time which makes the ones in her care think that she loves the others more.

According to Jendrek (1993) in those cases where there was some friction with the daughter while growing up it sometimes escalated because of the custodial arrangement. This appeared to be the case with custodial grandmothers who had problems with their daughters who they considered headstrong and strong-willed. For instance, Lynn, whose daughter became pregnant in her senior year of high school, said of her daughter, "She and I've always had battles because she..., always was strong headed. She was going to do what she wanted to do regardless if you said no or whatever." Lorraine spoke of the sometimes adversarial relationship she had with her daughter who got pregnant when she was 19, "Well, we had an on and off relationship. It wasn't as good as it is now because she's always one, she was headstrong for one thing and didn't want to listen and you know that's the problem, that's why I'm with the kids because of that headstrong stuff..." Then there was Shirley whose daughter was bipolar

and she had not spoken to in over a year. Researchers posit that when there is discord between the parent-child relationship, it will probably affect the relationship between the grandparent-grandchild relationship within the parent-child relationship which also adds to the stress that the grandparent is already experiencing caring for the grandchild (Barnett, Scaramella, Neppl, Ontai, & Conger, 2010; Barnett, Mills-Koonce, Gustafsson, & Cox, 2012). However, the results of this study did not confirm that. On the contrary it seems that the grandmothers were actually in very loving relationships with their grandchildren.

It should be noted that three of the grandsons had a hard time adjusting to the fact that they were not going to live with their birth moms. Victoria's oldest grandson, who she has had for 2 years, had to go to therapy for a while to adjust to the fact that he could no longer live with his mom. Jaz's middle grandson directed his anger at her and cursed at her because he didn't understand why his mom didn't want him. He has since had therapy. Lynn's oldest grandson would still rather live with his mom because there he has no rules and for a little while they allowed him to go because he had gotten really out of control. After a situation in which he borrowed his great grandmother's car without permission, he is now back living with Lynn and her family.

However, the studies also posited that in these adversarial parent-child relationships it could result in the parent hindering the custodial grandparent from securing the necessary services that the child might need. This was true for several of the grandmothers who had adversarial relationships with their daughter. Lorraine was denied

Food Stamps and WIC for her grandbaby because her daughter was still receiving benefits that were supposed to be for the child. Not only does it occur in parent-child situations, but it also occurs when there is an adversarial relationship with the birth mother of the son's children. As Jaz stated in her interview the children had Medicaid but she always had to battle with the mother to send the papers to get it renewed. The mother did finally authorize her as a representative but when she became angry with Jaz, she unauthorized her and since the mother didn't re-certify the children did not have insurance.

RQ4: How does the Custodial Arrangement Affect the Quality of the Relationship with Grandchildren in Their Care?

The research findings of this study show that the custodial arrangement does not negatively affect the quality of the relationship with the grandchildren. In fact, it is a loving and caring relationship in spite of the fact that caring for them is the cause of most of the stressors they face. Each one believes that these grandchildren have given them a second chance to do better. Jennie said she was not the best mother she could be but she is asking God to give her the "strength and courage to be a grandmother and another chance to be a mother." Others, like Mary said, "...it gives me a reason to keep going because I'm a compassionate person. I love children, that's why I had my children. It gave me a purpose." Shirley also commented on the fact that she hadn't realized how much of a purpose it had given her.

Previous research studies also indicate that despite the demands and hardships custodial grandmothers face, it does have rewards (Erhle & Day, 1994; Hayslip & Shore, 2000). Knowing that they have provided a safe place for the children is a relief for custodial grandparents (Waldrop & Weber, 2001). This is evident in statements by Emily, “I have these beautiful children and they won’t go into the system, they have a home. To me that’s the main thing.”

RQ5: What Resources (Internal/external) are the Grandmothers Utilizing to Care for Themselves and the Custodial Grandchildren

All of the custodial grandmothers, with the exception of one mentioned their faith in God to meet the needs for them and their grandchildren. They believed that despite the difficulties they were facing financially, emotionally, and socially that as Mary said “The Bible says, I have been young and now I’m old, I’ve never seen the righteous forsaken...” God would not forsake them. Then there’s Jennie who said “I believe that God didn’t bring me this far to let me- just have me start all over again.”

Although some received financial from their jobs, child support, and or social welfare agencies, some like Jaz and Louise visited food banks and community service places to provide for the children in their care. The majority also had the support of family members to help with babysitting or providing transportation when necessary or like Emily’s daughter who moved in with her temporarily and cooks and watches the 2 year old while the daughter-in-law cleans the house. Only a few of the custodial

grandmothers were aware of the organizations for grandparents and they had just recently found about this valuable resource.

Grandparents assume the role of parents to ensure that their grandchildren will not be placed in the foster care because of the neglect or abuse by the parents (Bowers & Myers, 1999; Lumpkin, 2012; Mills, Gomez-Smith, & DeLeon, 2005). Grandmothers and their homes are resources that are available to ensure that their grandchildren are cared for. The importance of family preservation causes them to give up their freedom, time, finances, and sometimes to sacrifice their health to make sure their grandchildren are kept out of the system, as Emily says, “To hear my little grandson, gets up every morning and get dressed and say, “Good morning grandma,” and things like that. That makes me feel young again. So I feel real good taking care of them....If CPS gets out of our life, these children can live happy – because they got family.”

Conclusions

This research study emphasized the importance of understanding the perceptions of custodial grandmothers as it related to stressors in their lives. The following conclusions are based on the research question and the

1. Custodial grandparenting is becoming more prevalent in today's society.
2. Although African American custodial grandmothers share the fact that they are caring for their grandchildren, the way they each perceive their situation will have a profound effect on whether the custodial arrangement will be a favorable one for both them and the grandchildren in their care.

3. Financial strain is a major factor in the well-being of custodial grandmothers.
4. Ensuring that the needed resources are adequate and easily accessible is a major concern.
5. Maintaining healthy interpersonal relationships was important in alleviating feelings of aloneness and social isolation.
6. Advertising Grandparents as Parents (GAP), Grandparents Raising Grandchildren (GRG) and Relatives as Parents (RAP) groups meetings in churches, clinics, and other community outreach facilities is needed to help custodial grandparents connect with individuals who can empathize with them.
7. The church is an integral part of the lives of the custodial grandmothers in this study.

Implications

The findings of this study will provide added knowledge to family practitioners, policy makers, social workers, community grandparent organizations, and churches in order to enhance their knowledge base and assist in providing the resources and support services needed to ensure that not only children fare well but also their primary caregivers in a way that is culturally sensitive. The African American community has historically been known culturally for its strong religious commitment. Because this study drew its participants from African American churches, pastors, and lay leaders must see that the church continues to provide support to those who turn to it in times of distress and need. According to Hill (1999) the Black church has a long history of

providing all sorts of needed social support to low-income families. Due to the decreasing governmental aid to many of the social organizations that once provided services to those in need, the African American churches must play an “expanded social welfare role” (p. 140), by increasing their support to fill in the gap left by this reduction in governmental resources.

According to Jamieson (2014), many of the services offered to senior citizens do not take into consideration that those who utilize these services are in a custodial situation. Therefore, policy and program changes must be made to ensure that custodial grandparents are not penalized for the things they have worked to acquire and/or there needs to be an increase in financial assistance that is readily accessible to custodial grandparents and respite care should be provided and supplemented for, along with other services that focus on grandparents needs.

Although the majority of the grandmothers in this study resided in the city of Houston, the study encompassed the Greater Houston area which included some outlying rural communities. According to Breidenstein (2003), much of the research and attention has been on custodial grandparents living in urban areas where resources are readily available. Many African American custodial grandparents who live in rural settings do not have access to these resources and they are often left to endure difficult circumstances with very little support, if any. Therefore, more research needs to be geared toward African American custodial grandparents who live in these rural areas. Also, more community programs need to be developed that focus on this population. Social workers

who are assigned to custodial grandparents must also become aware of those resources that are readily available and supply the custodial grandparents with the information.

Limitations

Although important insights were provided regarding African American custodial grandmothers perceptions of factors that affect their well-being and other relationships, several factors limit generalizability of this study. The following is a list of limitations to this study:

The researcher utilized a reflective journal to record her personal impressions and thoughts after conducting each interview. Bracketing was also utilized in an attempt to alleviate personal bias. However, the researchers' personal experience with grandparent custodial may have had an effect on some of the results.

Another limitation was the small sample size of 10 African American custodial grandmothers. The study was also limited to the Greater Houston, Texas area. Also excluded from this study were custodial grandmothers who had custody for fewer than 6 months and more than 18 years.

Recommendations

Future research on the African American custodial grandmothers such as the one in this study is needed to examine other factors that affect the well-being of custodial grandmothers, including but not limited to: 1) birth mothers of grandchildren being raised by the father's mother, 2) include more question on health disparities of grandmothers,

and 3) ask custodial grandparents about their initial reaction to the caregiving situation and what is it now.

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APPENDIX A
Demographic Data Sheet

DEMOGRAPHIC DATA SHEET

1. Date of birth:

2. Marital Status: Circle the category

Married	Widowed	Divorced	Separated	Never married
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3. Employment Status: Circle the category

Employed w/wages	Self-Employed	Unemployed	Disabled
Homemaker	Student	Retired	Other: <hr/>

4. Do you own or rent your own home?

5. Household Income:

Less than \$10,000	\$10,000 to \$19,999	\$20,000 to \$29,999	\$30,000 to \$39,999
\$40,000 to \$49,999	\$50,000 to \$59,999	\$60,000 to \$69,999	\$70,000 to \$79,999
\$80,000 to \$89,999	\$90,000 to \$99,999	\$100,000 to \$149,999	\$150,000 or more

6. Do you receive any financial assistance? If so, what kind(s) [i.e., SSI, TANF, child support]

- 7. Educational Background: What is the level of school or highest degree you have completed? Circle the category.**

No schooling completed	Elementary (grades 1-6)	7 th , 8 th , 9 th , 10 th , 11 th grade
12 th grade, no diploma	High school graduate	GED
Associate degree	Bachelor's degree	Master's degree
Professional degree	Doctoral degree	

- 8. Do you drink and/or smoke? _____ if yes, has it increased since you gained custody? _____**

- 9. Religious Affiliation (circle the category)**

Protestant Christian	Evangelical Christian	Roman Catholic	Jewish
Muslim	Hindu	Buddhist	Other

- 10. Number of custodial grandchildren in your care: _____**

- 11. Formal or informal custody:**

- 12. Gender, ages, illnesses of custodial grandchildren:**

Male	Female	Age	Age when you assumed custody	Any illnesses or disabilities

APPENDIX B
Interview Protocol

INTERVIEW PROTOCOL

Interview Protocol for Project: African American Custodial Grandmothers Perception of Stress Factors That Impact Their Well-Being and Family Relationships

Date of Interview: _____ Time of Interview: _____

Interviewee Name: _____

Interviewer Name: _____

Project Purpose:

Interview Questions:

7. How has becoming a custodial grandmother affected you:

- a. Physically?**
- b. Emotionally?**
- c. Financially?**
- d. Socially?**

8. What were your relationships like prior to your assuming custody?

- a. Marriage or significant relationship?**
- b. Adult daughter/son of grandchildren in your custody?**
- c. Custodial grandchildren?**
- d. Friendships?**

9. In what way has this custodial arrangement affected your relationships?

- a. Spouse or significant relationship**
- b. Adult daughter/son of grandchildren in your custody**
- c. Grandchildren not in your custody**
- d. Grandchildren in your custody**

e. Friendships

10. Do you have a support group? If so, who are they?

11. Do you have any regrets about assuming custody of your grandchildren?

12. How has the custodial arrangement benefited you?

APPENDIX C

Institutional Review Board (IRB) Approval Letter



Institutional Review Board
Office of Research and Sponsored Programs
P.O. Box 425 619, Denton, TX 76204-5619
940-898-3378
email: IRB@twu.edu
<http://www.twu.edu/irb.html>

DATE: March 6, 2014

TO: Ms. Dandy Ruth Levy-Cullins
Department of Family Sciences

FROM: Institutional Review Board - Denton

Re: *Approval for African American Custodial Grandmothers' Perceptions of Stress Factors That Impact Their Well-Being and Family Relationships (Protocol #: 17546)*

The above referenced study has been reviewed and approved by the Denton Institutional Review Board (IRB) on 2/21/2014 using an expedited review procedure. This approval is valid for one year and expires on 2/21/2015. The IRB will send an email notification 45 days prior to the expiration date with instructions to extend or close the study. It is your responsibility to request an extension for the study if it is not yet complete, to close the protocol file when the study is complete, and to make certain that the study is not conducted beyond the expiration date.

If applicable, agency approval letters must be submitted to the IRB upon receipt prior to any data collection at that agency. A copy of the approved consent form with the IRB approval stamp is enclosed. Please use the consent form with the most recent approval date stamp when obtaining consent from your participants. A copy of the signed consent forms must be submitted with the request to close the study file at the completion of the study.

Any modifications to this study must be submitted for review to the IRB using the Modification Request Form. Additionally, the IRB must be notified immediately of any adverse events or unanticipated problems. All forms are located on the IRB website. If you have any questions, please contact the TWU IRB.

cc: Dr. Karen Petty, Department of Family Sciences
Dr. Joyce Armstrong, Department of Family Sciences
Graduate School
Dr. Nerissa LeBlanc Gillum

APPENDIX D
Recruitment Flyer

Research Participants Needed!

for a Texas Woman's University
Dissertation Research Study on
African American Custodial Grandmothers

The purpose of this study is to examine stress factors that African American custodial grandmothers perceive affect their overall well-being and other family relationships since assuming custodial care of their grandchildren.

General Participation Requirements:

- African American custodial grandmothers;
- Must be 30 years of age or older;
- Must have custody of biological grandchild(ren) for a minimum of 6 months;
- The parent of the grandchildren must not be a resident in the home;
- Willing to complete a demographic data sheet and participate in a 90 minute to 120 minute confidential interview.

If you are interested in participating in this study, please contact Dandy Levy-Cullins at (713) 851-9080 or dlevycullins@twu.edu. You may also contact the research advisor Dr. Joyce Armstrong at (940) 898-2690 or jarmstrong@twu.edu or co-advisor, Dr. Nerissa LeBlanc Gillum at (940) 898-2696 or ngillum@twu.edu.

Your participation in this study is completely voluntary, and you are free to withdraw at any time, for any reason. Thank you in advance for your time and consideration!

*There is a potential risk of loss of confidentiality with any email, downloading, and internet transactions.

APPENDIX E
Letter of Recruitment

LETTER OF RECRUITMENT

African American Custodial Grandmothers Perceptions of Stress Factors that Impact their Well-Being and Family Relationships

My name is Dandy Levy-Cullins and I am a doctoral candidate at Texas Woman's University in Family Sciences. You are being asked to participate in a study that will examine African American custodial grandmothers' perceptions of factors that impact their well-being and their relationship with other family members.

If you are an African American female aged 30 years and older who has had custody of one or more of your grandchildren between the ages of 0 and 18 years of age for over 6 months, without the presence of their biological parents and live in the Greater Houston, TX, you qualify to participate in this study. I will meet with you at a place and time that is most convenient to you to conduct a one-on-one interview that will last approximately 90 minutes to two hours. Prior to the actual audio-taped interview, you will also be asked to complete a demographic data sheet and sign a participant consent form.

Because this study is voluntary, there will be no other compensation for your participation in this study other than the satisfaction in knowing that your contribution will help others gain a better understanding of the impact that custodial grandparenting has on the well-being of the grandmother and other family relationships.

APPENDIX F

Participant Consent Form

TEXAS WOMAN'S UNIVERSITY
CONSENT TO PARTICIPATE IN RESEARCH

Title: African American custodial grandmother's perceptions of stress factors that impact their well-being and family relationships.

Investigator: Dandy R. Levy-Cullins.....dlevycullins@twu.edu 713/851-9080
Advisor: Joyce Armstrong, Ph.D.....jarmstrong@twu.edu 940/898-2690
Nerissa LeBlanc Gillum, Ph.D.....ngillum@twu.edu 940/898-2696

Explanation and Purpose of the Research

You are being asked to participate in a research study for Ms. Dandy Levy-Cullins dissertation at Texas Woman's University. The purpose of this research is to examine factors that African American custodial grandmothers perceive affect their overall well-being and other family relationships. You have been asked to participate in this study because you are an African American grandmother who is the primary caregiver for her grandchildren and have identified yourself as a grandmother.

Description of Procedures

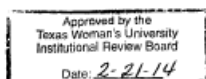
As a participant in this study you will be asked to complete a demographic survey and spend 90 minutes to two hours of your time in a face-to-face interview with the researcher. The researcher will ask you questions about your grandparenting and your relationships with your family and friends. You and the researcher will decide together on a private location where and when the interview will happen. You and the researcher will decide on a code name for you to use during the interview. The interview will be audio recorded and then written down so that the researcher can be accurate when studying what you have said. In order to be a participant in this study, you must be at least 30 years of age or older and have been a custodial grandparent for a minimum of six months.

Potential Risks

The researcher will ask you questions about your grandparenting experience. The researcher will also ask you questions about how your caregiving has affected your well-being and relationships with your family and your friends.

A possible risk in this study is fatigue. To combat fatigue, breaks will be given if you appear to tire or become upset.

Another risk in this study is loss of confidentiality. Confidentiality will be protected to the extent that is allowed by law. The interview will be held at a private location that you and the researcher have agreed upon. A code name, not your real name, will be used during the interview. No one but the researcher will know your real name. The tapes and the written interview will be stored in a locked cabinet in the researcher's office. Only the researcher, her advisor, and the person who writes down the interview will hear the tapes or read the written interview. The tapes and the written interview will be shredded within 5 years after the study is finished. The results of the study will be reported in scientific magazines or journals but your name or any other identifying information will not be included.



Initials
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Another possible risk in this study is loss of time. Several steps will be utilized to decrease the interview time. First, you will be mailed the demographic survey and the consent form along with a self-addressed stamped envelope. These forms will be mailed back to the researcher prior to making the appointment for the face-to-face interview. Completion of the survey should take no longer than 15 minutes. Secondly, you will schedule the interview for a time that is convenient for you. Thirdly, the face-to-face interview time will be limited to a minimum of 90 minutes and not more than 120 minutes. Finally, the face-to-face review time will be limited to not more than 30 minutes.

Another possible risk is physical discomfort. To help alleviate any physical discomfort, breaks will be given if you appear to tire or become upset.

A possible risk in this study is emotional distress/discomfort with these questions you are asked. If you become tired or upset you may take breaks as needed. You may also stop answering questions at any time and end the interview. If you feel you need to talk to a professional about your discomfort, a list of resources will be provided for you.

The researchers will try to prevent any problem that could happen because of this research. You should let the researchers know at once if there is a problem and they will help you. However, TWU does not provide medical services or financial assistance for injuries that might happen because you are taking part in this research.

Participation and Benefits

Your involvement in this study is completely voluntary and you may withdraw from the study at any time. Following the completion of the study you will receive a copy of "the Kinship Manual" which is prepared by the Department of Child Protection Services for your participation. If you would like to know the results of this study we will mail them to you upon request.*

Questions Regarding the Study

You will be given a copy of this signed and dated consent form to keep. If you have any questions about the research study you should ask the researchers; their phone numbers are at the top of this form. If you have questions about your rights as a participant in this research or the way this study has been conducted, you may contact the Texas Woman's University Office of Research and Sponsored Programs at 940-898-3378 or via e-mail at IRB@twu.edu.

Signature of Participant

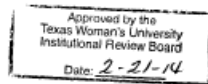
Date

*If you would like to know the results of this study tell us where you want them to be sent:

Email: _____

or

Address: _____



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APPENDIX G

Research and Interview Question Alignment

Research and Interview Question Alignment

Research Questions	Interview Questions
1. What do custodial grandmothers perceive to be the major stress factor(s) impacting their overall well-being (physical, cognitive, emotional, social)?	Interview Questions: 1, 2, 4, 5, 6
2. How has the custodial arrangement affected the lifestyle of the grandmother?	Interview Questions: 1 (psychosocial)
3. What impact has the custodial arrangement had on relationships with other family members?	Interview Questions: 2, 3
4. Does the custodial arrangement affect the quality of the relationship with grandchildren in their care?	Interview Questions: 2, 3, 6
5. What resources (internal/external) are the grandmothers utilizing to care for themselves and the custodial grandchildren.	Interview Questions: 4, 5