

This article examines the prevalence of grandparent caregiving in the U.S. and presents a national profile of grandparent caregivers based on current data from the National Survey of Families and Households. More than one in ten grandparents are found to have cared for a grandchild for at least 6 months, with most of these having engaged in a far longer-term commitment. Although custodial grandparenting cuts across gender, class, and ethnic lines, single women, African Americans, and low income persons are disproportionately represented. Multivariate logistic analysis indicates that three groups — women, recently bereaved parents, and African Americans — have approximately twice the odds of becoming caregiving grandparents. Implications for further research, policy, and practice are discussed.
Key Words: Custodial grandparenting, Grandparents raising grandchildren

A Profile Of Grandparents Raising Grandchildren In The United States¹

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A much-discussed finding of the 1990 Census was the dramatic 44% increase over the preceding decade in the number of children living with grandparents or other relatives. Five percent of all American children were living with grandparents or other relatives by 1990, and in an estimated one third of these homes, neither parent was present (Saluter, 1992), often making the grandparent the sole or primary caregiver. Substance abuse, teen pregnancy, AIDS, incarceration, emotional problems, and parental death are among the factors that have been found to contribute to this phenomenon (Burton, 1992; Dressel & Barnhill, 1994; Feig, 1990; Jendrek, 1994; Joslin & Brouard, 1995; Minkler & Roe, 1993).

The early-to-mid-1990s saw increasing research attention to the phenomenon of grandparent caregiving (Burton, 1992; Dowdell, 1995; Dressel & Barnhill, 1994; Jendrek, 1994; Joslin & Brouard, 1995; Minkler & Roe, 1993; Shor & Hayslip, 1994). Although these studies provided much useful information, including initial explorations of the special problems and challenges faced by grandparents raising children of imprisoned mothers (Dressel & Barnhill, 1994) and of drug-involved parents (Burton, 1992; Minkler & Roe,

1993), most of the research to date has been based on small nonrandom samples in particular geographic areas. The findings of these studies, consequently, cannot be generalized to the growing population of custodial grandparents nationally.

An important recent exception is Chalfie's (1994) national study of grandparents raising grandchildren in skipped generation households — those comprising grandparents and their grandchildren with neither of the child's parents present. Utilizing previously unpublished data from the March, 1992 Current Population Survey, the study provides important information about the minority subset of grandparent caregivers who reside in two-generation households. However, 1990 census figures suggest that two thirds of children living with grandparents live in homes in which at least one parent also is present (Saluter, 1992). Consequently, Chalfie's study does not provide nationally representative data on the broader population of grandparents who are raising their grandchildren. In addition, the latter study is solely concerned with bivariate analyses. Multivariate analyses are needed to clarify which characteristics are related to grandparent caregiving independently of other variables, and which are primarily spurious.

The current research attempts to fill these gaps by developing a national profile of grandparent caregivers in the United States, including both skipped-generation households and those comprising three or more generations. Both bivariate and multivariate analyses were conducted to establish this comprehensive profile. The study, supported by the Commonwealth Fund, uses the second wave of data from the National Survey of Families and Households, collected from 1992-1994.

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Following a brief look at the study's conceptual framework and its research design and methods, this article will present initial findings concerning the prevalence and lifetime incidence of grandparent caregiving in the United States, and a demographic profile of the subgroup we have labeled America's "grandparent caregivers of the 1990s." Implications of our findings for future research, policy, and practice will then be discussed, with particular attention to their salience in light of recent national-level policy developments.

Conceptual Framework

As Bengtson, Rosenthal, and Burton (1995) have noted, contrary to popular notions of the American family in decline, a wealth of research evidence suggests that intergenerational solidarity and strong intergenerational bonds remain the rule rather than the exception in American family life (Bengtson & Silverstein, 1993; Rossi & Rossi, 1990). The large number of grandparents who are involved in extensive caregiving for their grandchildren represents a graphic example of the strength of intergenerational bonds, and conceptualizations of solidarity between generations form an overarching conceptual framework for this study. In particular, the research is grounded in notions of functional solidarity, as witnessed in the level of assistance provided to grandchildren (Aldous, 1995; Cherlin & Furstenberg, 1986; Kornhaber, 1985).

Studies of grandparents as surrogate parents to their grandchildren often have been framed in terms of "time disordered roles" (Selzer, 1976) and the stresses and disjunctures that may occur when heavy child care responsibilities are perceived as "off time" in the life cycle (Burton & Dilworth-Anderson, 1991; Dowell, 1995; Jendrek, 1994). Although the increasing fluidity of the postmodern life course has called into question the notion of rigid age stages and age-appropriate roles, a more general sense of certain events being "off time," and hence potentially more stressful, has conceptual relevance for the present research. This paper provides a first step in exploring the impact of the off-time role by developing a profile of individuals who become custodial grandparents. These findings will provide a context for researchers to investigate the nature and significance of this impact in future studies.

Methods

As noted above, data for this study come from a large longitudinal data set, the National Survey of Families and Households (NSFH) of adult Americans. The NSFH was funded by the Center for Population Research of the National Institute of Child Health and Human Development. The survey was conducted by the Center for Demography and Ecology at the University of Wisconsin–Madison.

The most recent wave of the National Survey of Families and Households, conducted during 1992, 1993, and 1994, interviewed a probability sample of

10,008 respondents. All data are weighted to adjust for nonresponse and for oversampling of ethnic minorities, nontraditional families, and recently married people. This weighting represents a sample that is demographically representative of the coterminous U.S. (for a more detailed summary of study design and questions see Sweet, Bumpass, & Call, 1988). Our study's subsample consists of the 3,477 respondents to the 1992–1994 NSFH who reported having one or more grandchildren.

Lifetime incidence of grandparent caregiving was determined through the proportion of grandparents who replied in the affirmative to the question, "For various reasons, grandparents sometimes take on the primary responsibility for raising a grandchild. Have you ever had the primary responsibility for any of your grandchildren for six months or more?" To determine the subsample of recent grandparent caregivers, those caregivers who had responded "yes" to the above question and who reported beginning or ending caregiving during the 1990s were selected. This resulted in 173 recent caregivers, representing 5% of the grandparents in the study. Using bivariate techniques, these recent caregivers were compared and contrasted with the noncaregiving grandparents with respect to their gender, marital status, family size, total number of grandchildren, number of coresident children, experience of a child's death in the last five years, race, education, urban/rural status, age, and family income. These variables were then included in a logistic regression predicting caregiver status in order to untangle the relative importance of each of these characteristics while controlling for other variables.

Results

Of the 3,477 grandparents in this study, 380 (10.9%) reported having had primary responsibility for raising a grandchild for a period of 6 months or more at some point in their life (see Table 1). In other words, more than one in ten grandparents have raised a grandchild for at least six months. As indicated in Table 1, nearly half (44%) of the grandparents in our study who had been primary caregivers for a grandchild took over parenting responsibilities when their grandchild was still an infant. Close to three quarters (72%) began caregiving before the child turned five. Two thirds (69%) of the grandparents were raising the child of a daughter, and one third (31%) were raising a son's child.

For many caregiving grandparents, this role did not represent a short-term commitment, and indeed more than half (56%) had given care for a period of at least three years. In fact, one in five grandparent caregivers took care of a grandchild for 10 or more years.

Table 2 provides a profile of the 173 grandparents who reported that they had raised a grandchild for at least six months during the 1990s, and contrasts it with a profile of noncaregiving grandparents. As the table suggests, slightly over half (54%) of custodial grandparents in the United States were mar-

Table 1. Lifetime Incidence, Duration, and Nature of Custodial Grandparenting in America

Variable	Percentage
Lifetime Incidence (<i>n</i> = 380)	
Percentage of grandparents having ever raised a grandchild for six months or more	10.9%
Age of Child when Caregiving Undertaken (<i>n</i> = 372)	
Under one year	43.5
One–four years	28.4
Five–ten years	15.7
Eleven years or more	12.4
Duration of Primary Caregiving (<i>n</i> = 286)	
Less than one year	16.9
One–two years	26.8
Three–four years	15.4
Five–nine years	21.1
Ten or more years	19.8

Table 2. Comparative Profile of Custodial Grandparents vs Noncustodial Grandparents of the 1990s

Variable	Percentage Noncaregiving Grandparents (<i>n</i> = 3304)	Percentage Grandparents (<i>n</i> = 173)
Marital status in 1993		
Widowed/divorced/separated/never married	32%	46%***
Married	68%	54%
Mean Age in 1993	62.3 years	59.4 years**
Race		
Black	10%	27%***
White, non-Hispanic	84%	62%
Hispanic	6%	10%
Other	0%	1%
Gender		
Male	44%	23%***
Female	56%	77%
Education Level in 1993		
Grade 11 or less	29%	43%***
Grade 12 or higher	71%	57%
Geographic Region in 1988		
South	34.8%	42.5%*
Elsewhere	65.2%	57.5%
Urban/rural status in 1988		
Nonstandard metropolitan area (rural)	27%	26%
Standard metropolitan areas (urban)	73%	74%
Income in 1993		
Mean income	\$37,814	\$31,643*
Median income	\$29,000	\$22,176
Families below poverty line	13.7%	22.9%**
Families above poverty line	86.3%	77.1%
Offspring		
Total number of children	3.25	3.94***
One or more coresident children	30.4%	52.8%***
One or more non-coresident children within 20 miles	69%	76%*
Total number of grandchildren	5.39	7.29***
Child died in past five years	2.7%	6.5%**

Note: *p*-values are based on the chi-square statistic for proportions and *t*-test statistic for means.

p* < .05; *p* < .01; ****p* < .001.

ried. More than three quarters (77%) of all caregiving grandparents were women. The majority (62%) were non-Hispanic White, with more than a quarter African American (27%), 10% Hispanic, and 1% classified as another race or ethnicity. Custodial grandparents had a mean age of 59.4 years. Almost three quarters (74%) of recent custodial grandparents lived in urban areas during the baseline year of 1987/1988. More than half (57%) of caregivers had completed high school.

Caregiving grandparents had lower mean incomes (\$31,643 vs \$37,814, *p* < .05) and median incomes (\$22,176 vs \$29,000). In fact, caregiving grandparents were 60% more likely than noncustodial grandparents to report incomes below the poverty line (23% vs 14%, *p* < .01). In 1992, the poverty line was a mere \$9,395 for a couple and \$14,228 for a family of four.

Custodial grandparents differed markedly from noncustodial grandparents on many demographic variables. Our findings indicate that custodial grandparents in the 1990s were significantly (*p* < .01) less likely to be married, to be non-Hispanic White, to be male, and to have completed high school. Furthermore, they were, on average, three years younger than noncaregiving grandparents (*p* < .01). Custodial grandparents did not differ significantly from their noncustodial peers with respect to 1987/88 urban/rural status, but were significantly more likely to have lived in the South (42.5% vs 34.8%, *p* < .05) during the first wave of interviews (1987/1988). The current region of residence is not yet available from the second wave of the NSFH.

To create a broader family context within which to better understand the situation of grandparent caregivers, data also were examined on total family size, number of and proximity to one's children and grandchildren, and parental bereavement within the last five years. Caregiving grandparents of the 1990s were significantly more likely to have more children (4.0 vs 3.3) and more grandchildren (7.3 vs 5.4) than noncaregiving grandparents, and also were more likely to have children in their immediate vicinity. More than half (52.8%) of the caregiving grandparents had one or more of their offspring in their home, versus less than a third (30.4%) of the noncaregiving grandparents (*p* < .001). In addition, caregiving grandparents were slightly more likely than noncaregivers to have their nonresident children residing within 20 miles (76% vs 69%, *p* < .05) of them.

A logistic regression was run to verify which factors help predict caregiving status in a multivariate analysis (see Table 3). In general, these findings supported the results of the bivariate analyses. The results shown in Table 3 indicate that the odds of being a caregiving grandparent were more than twice as high for females (odds ratio = 2.18, *p* < .001) and for those who had experienced the death of a child in the previous five years (odds ratio = 2.16, *p* < .05). African Americans had 83% higher odds of being grandparent caregivers than respondents from other races (odds ratio = 1.83, *p* < .01). For every decade of age, the odds of being a custodial

Table 3. Logistic Regression of Custodial Grandparents vs Noncustodial Grandparents of the 1990s

Variable	Odds Ratio	(95% Confidence Interval)
Marital Status in 1993 (married = 1) ^a	0.76	(0.53, 1.10)
Age in 1993 (by decade)	0.75***	(0.63, 0.89)
Race (Black = 1) ^b	1.83**	(1.19, 2.81)
Gender (female = 1)	2.18***	(1.47, 3.22)
Education (High school graduate = 1) ^c	0.72+	(0.50, 1.03)
Geographic region in 1988 (South = 1) ^d	1.17	(0.84, 1.66)
Urban status in 1988 (urban = 1)	0.99	(0.69, 1.44)
Poverty level (Families below poverty line = 1)	1.08	(0.71, 1.65)
Total number of biological/ adopted/stepchildren	0.98	(0.88, 1.09)
Number of coresident biological/ adopted/stepchildren	1.23*	(1.02, 1.49)
Total number of grandchildren	1.08***	(1.03, 1.12)
Parental bereavement (Child died in past five years = 1)	2.16*	(1.06, 4.38)

^aReference category includes all people not currently married — widowed, divorced, separated, never married.

^bReference category includes all non-Blacks.

^cReference category is 11 or fewer years of education.

^dReference category is all other areas of U.S.

+ $p < .10$; * $p < .05$; ** $p < .01$; *** $p < .001$.

grandparent decreased 25% ($p < .001$). There was a trend ($p < .10$) indicating that those with a high school diploma had somewhat lower odds of being a caregiver; however, this trend did not reach the level of significance it had achieved in the bivariate analyses. Family size and structure also played a significant role. Although in contrast to the findings of the bivariate analyses, the overall number of children was not significantly associated with caregiving status in the multivariate analysis, the number of co-resident children remained a significant factor. For every coresident child, the odds of being a grandparent caregiver increased 23%. Furthermore, the number of grandchildren was directly related to the odds of being a grandparent caregiver. The odds of reporting caregiving responsibilities were 8% higher (odds ratio = 1.08, $p < .001$) per grandchild. Finally, in contrast to the cross-sectional findings, marital status, living in the South, and living below the poverty line no longer contributed significantly to the equation once included in a multivariate model. Urban/rural status did not contribute significantly to our understanding of caregiving status in either bivariate or multivariate equations.

Discussion

The findings of this study indicate that grandparent caregiving is not as rare a phenomenon as is commonly believed, and that it cuts across class, race, and gender lines. The facts that nearly three quarters of the custodial grandparents in this national study took in grandchildren when they were under age five, and that over half provided care for at least three years, suggests that for many, this role

involves a long-term and labor-intensive commitment. Yet our knowledge of the real parameters of this experience remains fragmentary. A major limitation of the present study, for example, lay in the failure of the NSFH data set to include information on the number of grandchildren and other relatives for whom a grandparent had primary responsibility. Since earlier studies have suggested that most custodial grandparents were raising two or more of their grandchildren (Joslin & Brouard, 1995; Minkler & Roe, 1993), it is important to determine the proportion of grandparent caregivers nationally who are, in fact, raising multiple grandchildren. Furthermore, national data are needed regarding reasons why grandparents undertake primary responsibility for raising their grandchildren or other young relatives.

The finding that grandparents with coresident offspring are considerably more likely to be caregivers than those without children in the home lends support to our conviction that analyses such as Chalfie's (1994), which are limited to skipped-generation households, pose too narrow a definition of grandparent caregiver families. Additionally, this finding underscores the importance of an ecological perspective that stresses the "double duties" many grandparent caregivers fulfill when they find themselves caring for their own children and one or more of their grandchildren. The ecological perspective is further supported by our findings that grandparent caregivers have significantly more grandchildren than noncaregivers, as well as having more of their offspring living within twenty miles of them. Research is needed to determine the patterns of help and support received from and given to the additional proximate family members. In summary, far more information is needed about the entire caregiving picture of which caring for one's grandchildren may be only a part.

The importance of examining multiple bonds and relationships across generations is particularly well highlighted in the case of African Americans, who in our study had twice the odds of becoming caregiving grandparents. The disproportionate representation of African Americans among grandparent caregivers reflects, in part, a long tradition of caregiving across generations in Black families, which has its roots in West African culture (Sudarkasa, 1981; Wilson, 1989). But as Burton and Dilworth-Anderson (1991) suggest, the experience of many of today's African American grandmothers, who assume the role of caregiver as a result of a daughter's drug addiction, incarceration, teen pregnancy, or incapacitation due to AIDS, may be very different from that of their foremothers and forefathers who took on a caregiving role under far different sociohistorical circumstances. Further studies of the meaning and significance of grandparent caregiving for different racial and ethnic groups, and in different situational contexts, are needed to flesh out our understanding of this phenomenon and its contemporary manifestations.

The significantly greater tendency of females than males in this study to be primary caregivers for their grandchildren is, of course, in keeping with the pro-

nounced sexual division of labor around family caregiving of all types (Abel, 1991; Brody, 1985). It should be noted, however, that while the majority of grandparent caregivers in this study were female, close to a quarter were grandfathers, whose roles in grandparenting have been almost totally ignored in the extant studies (see Thomas, 1990 and 1994 for important recent exceptions). As Bengtson et al. (1995) have noted, this neglect stems in part from “methodological individualism,” through which single family members, typically women caregivers or dyads (caregiver and care recipient) are focused upon, with the roles of secondary caregivers or other family members being largely ignored. Increased research attention to the roles and circumstances of grandfathers who are primary or secondary caregivers for their grandchildren, and a focus beyond individuals to the broader family as the unit of analysis should be undertaken to enrich our understanding of the complexity of care relationships in surrogate parent households. Similarly, more research should be directed to the large number of grandparent caregivers who are unmarried, and for whom the challenge of “unplanned parenthood” in mid- or late life may also entail greater financial vulnerability and the lack of respite that might have been provided by a spouse.

An important finding of this study was that four variables that were significant in bivariate relationships were not found to be significant in the subsequent multivariate analysis. Neither marital status, living under the poverty line, living in the South, nor the number of children provided a unique contribution to our understanding of custodial grandparenting when these factors were included in multivariate equations. In other words, the connection between these variables and caregiving status in the bivariate analysis may have been primarily spurious. Living below the poverty line, for example, is related to marital status, age, gender, education, and being African American. It appears to be these other variables — rather than poverty itself — which have the direct relationship with caregiving status. Such findings clearly underscore the need for further research using multivariate analyses.

Panel studies using multivariate techniques also are needed to follow up on earlier cross-sectional studies indicating an association between grandparent caregiving and depression (Roe et al., 1996); changes in self-rated health and health behaviors (Burton, 1992; Minkler et al., 1992); isolation from friends (Burton, 1992; Shor & Hayslip, 1994); lowered satisfaction with the grandparent role (Shor & Hayslip, 1994); and severe economic hardship (Minkler & Roe, 1993).

In addition to offering a number of promising avenues for further research, the results of our research have implications for current policy and practice. Although living below the poverty line did not contribute significantly to the odds of being a grandparent caregiver in our multivariate analysis, for example, it is important, from a policy perspective, to underscore our finding that almost a quarter of grandparents raising grandchildren were living

below the poverty threshold. While 28% of grandparents in skipped-generation families receive Aid to Families with Dependent Children (AFDC; Chalfie, 1994), the low level of benefits received, the stigmatizing nature of the program, and eligibility problems faced by many grandparent applicants make this a less than adequate option. Our findings concerning the large proportion of grandparent caregivers who are below the poverty line appear to support the need for more widely available “kinship care” programs through which low-income custodial grandparents in some states receive the more generous and less stigmatizing payments available to foster care parents (Takas, 1992). Further, our findings suggest that the recently signed Welfare Reform Act (which places a lifetime limit of five years on AFDC and imposes a mandatory work requirement after two years) may not bode well for the “economic health” of many intergenerational households headed by grandparents.

In addition to underscoring the 1995 White House Conference on Aging’s call for stepped up, rather than cut back, financial assistance to grandparent caregivers, our findings on the prevalence and intensity of care provision suggest the importance of other types of supportive programs and policies as well. The AARP’s Grandparent Information Center has identified more than 400 support groups for grandparent caregivers around the U.S. (Woodworth, 1997), in addition to a number of more comprehensive programs, which include counseling, respite, tutoring for children in the care of their grandparents, and other services (Dressel & Barnhill, 1994; Miller, 1991; Minkler, Driver, Roe, & Bedeian, 1993). Yet many of these programs are short-lived, and almost no evaluative studies have been conducted to determine their efficacy. Evaluative research on a variety of interventions to assist grandparent caregivers is needed, as is increased education of health and social service providers about the needs and concerns of grandparent caregivers and the children in their care. A combination of carefully focused research and appropriate policy and practice measures in short is recommended in recognition of the vital role which grandparent caregivers are playing in raising some of the nation’s most vulnerable children.

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