SCHOLARSHIP

Family Coping and Adaptation Among Grandparents Rearing Grandchildren

SANDRA J. BAILEY, PhD, BETHANY L. LETIECQ, PhD, and FONDA PORTERFIELD, MS
Montana State University, Bozeman, Montana, USA

Guided by the Double ABCX Model of Family Adjustment and Adaptation, this study explored the coping strategies and adaptation processes employed by grandparent caregivers as they moved from the initial crisis phase of taking in their grandchildren to settling down and carrying out the daily tasks of childrearing. Using qualitative methods, we analyzed data from in-depth family life history interviews conducted with 26 grandfamilies. Our analyses revealed five themes: capturing grandparents’ adaptation processes or shifts in roles, identities, relationships, resources, and perceptions of the situation in order to cope with their family transitions and stressors. We conclude with considerations for future research that are needed to identify and support positive adaptations within these complex family constellations.

KEYWORDS grandparents rearing grandchildren, coping, adaptation

In growing numbers, grandparents have been called on to rear their grandchildren when parents are unwilling or unable to carry out their parenting responsibilities. Researchers suggest that living with relatives (as compared to nonrelative foster parents) may minimize child trauma because children are placed in familiar, supportive surroundings (Billing, Ehrle, & Kortenkamp, 2009).

Address correspondence to Sandra J. Bailey, PhD, Montana State University, Department of Health and Human Development, 316B Herrick Hall, Bozeman, MT 59717 USA. E-mail: baileys@montana.edu
However, grandparent caregivers may experience both positive and negative consequences. On the positive side, grandparents may have a strong sense of perseverance and determination to continue their familial responsibilities (Roe, Minkler, Saunders, & Thompson, 1996). On the negative side, Whitley, Kelley, and Sipe (2001) found that the trials and tribulations of parenting the second time around may lead to psychological, social, economic, and physical distress.

The social-support needs, coping skills, and resources utilized by grandparents to manage these hardships have been the subject of many studies (Kelley, Whitley, Sipe, & York, 2000; Landry-Meyer, Gerard, & Guzell, 2005; Mayer, 2002; Musil, 1998; Musil & Ahmad, 2002; Musil, Warner, Zauszniewski, Jeanblanc, & Kercher, 2006; Ross & Aday, 2006; Strom & Strom, 2000). Grandparents often must utilize all of their resources and coping skills to meet the demands of parenting a second time. Yet, little research has been conducted on the coping and adaptation processes of custodial grandparents as they move from the initial crisis phase where they take in their grandchildren to the adjustment phase where they work to meet their family’s daily needs. To add to the extant literature, this study examined the following research question: What are the coping strategies and adaptation processes employed by grandparents rearing grandchildren to ameliorate stressors and facilitate positive family transitions?

THEORETICAL FRAMEWORK

Grandparents rearing grandchildren experience an array of normative and nonnormative stressors as they navigate changes in their family system (Boss, 2002). To better understand grandfamilies’ adaptation to stress and crises and their responses to family transitions over time, the Double ABCX Model of Family Adjustment and Adaptation is useful (see Figure 1; McCubbin & Patterson, 1983). According to the model, families most cope with stressors or a life event impacting the family unit. Next, the family adaptive coping mechanisms and resources emerge. There are three types of resources affecting family adaptation, including family members’ personal resources, the family system’s internal resources, and social support. Finally, the family’s perception of the crisis provides situational definition and meaning. When a crisis demands change in a family, effective coping often requires redefining the situation—clarifying issues, hardships, and tasks—so that the crisis becomes more manageable and controllable. Redefining the situation also helps decrease the intensity of emotional burdens associated with the crisis and encourages families to carry on with its fundamental tasks of promoting members’ social and emotional development. The ability of families to form positive appraisals of the situation as an “opportunity for growth” as opposed to a “devastating crisis” facilitates family adaptation. Guided by the
Double ABCX Model, this study explores coping and adaptation among grandparents rearing grandchildren.

METHOD

Sample

For this study, we conducted 26 face-to-face interviews with grandfamilies rearing grandchildren in Montana. Interviews were conducted with a grandparent (n = 19) or with a married couple dyad (n = 7). In all, we heard from 23 grandmothers and 10 grandfathers. Grandparents ranged in age from 36 to 71 years, with a mean age of 56 years. Most (69%) participants were married at the time of the interview. The remainder was single, separated, divorced, or widowed. Grandfamilies in this study cut across all income levels, with annual household incomes ranging from less than $15,000 to more than $70,000. Participant education levels were also diverse, with 4 grandparents having less than a high school diploma, 9 having a high school diploma or general equivalency diploma, and 20 having some post-secondary education. Grandparents had been the primary caregivers of their grandchildren for an average of 5.5 years, with a range from 5 months to 24 years. The sample was primarily White, with the exception of one Native American grandparent.
Of the 26 grandfamilies interviewed, the majority (n = 18) had informal or private care arrangements. Of these families, 10 had hired attorneys to draw up documents establishing guardianship of the grandchildren in their care (but had not gone to court), 5 had no legal ties to their grandchildren, 1 couple had privately adopted their grandchild, and 2 had “mixed” informal arrangements, where one couple had privately adopted their granddaughter and had no legal ties to two other grandchildren under their care, and one couple had legal guardianship of two grandsons and no legal ties to another grandson under their care. The remaining eight grandfamilies were involved in the formal child welfare system as kin foster families.

Procedure

Family life history interviews (Goodley, Lawthom, Clough, & Moore, 2004) were conducted to better understand how grandparent caregivers came to be caregivers, the quality of their intergenerational relationships, and how they navigated social systems (e.g., health care, schools) to meet their grandchildren’s needs. Interview questions also documented legal issues facing grandparents, child welfare involvement, and receipt of state-based financial assistance and services. We used purposive and snowball sampling strategies to recruit grandparent caregivers. We limited the geographic distance between the location of the grandparents and the university to approximately 90 miles due to resource and time constraints. Participants were solicited through local newspaper ads, radio stations, and support groups. Other grandparents then heard about our study by word of mouth and contacted the research team. Inclusion criteria stated that grandparents were the sole, full-time care providers of their grandchild(ren) and biological parents of the grandchildren did not reside in the grandparent’s home. All interviews were conducted by two trained interviewers, were held in the grandparents’ home, and lasted about two hours. Participants received $100.00 for their time.

Data Analysis

Three steps were used to analyze the data. First, using the inductive method of grounded theory (Glaser & Strauss, 1967), the interviews were open coded. Next, to address our research question, we identified recurrent themes that emerged in the data that reflected coping and adaptation processes. Finally, a random sample of 20% of the interviews (n = 5) were coded by another team member to conduct a reliability check. The team met to discuss the coding and resolve discrepancies. Based on our analytical strategy, we found five emergent themes. Sub-themes were also identified to elucidate the themes and provide more depth of understanding.
RESULTS AND DISCUSSION

Reflecting the Double ABCX Model (McCubbin & Patterson, 1983), the grandparent caregivers in this study all shared their family histories—including what family life was like “precrisis” or before they became parents to their grandchildren. Each story eventually revealed a crisis situation in which the biological parents became unable or unwilling to provide primary care to their children (typically due to a substance abuse problem, mental health problem, or a combination of the two). Most common were stories about grandchildren being dropped off at the grandparents’ homes—sometimes in the middle of the night, sometimes with only one change of clothes for the grandchildren—with no word on when the parents would return. (See Letiecq, Bailey, & Dahlen, 2008, & Letiecq, Bailey, & Porterfield, 2008, for more details about the histories of participant grandfamilies.)

While several studies have now examined the pathways to and causes of grandparent caregiving (e.g., Hayslip & Kaminski, 2005; Pruchno & McKenney, 2002; Roe & Minkler, 1999), few have focused specifically on the ways in which grandparents adapt as they move from the initial crisis phase of taking in their grandchildren to settling down and carrying out the daily tasks of child rearing. Thus, this qualitative study explored the coping strategies and adaptation processes employed by grandparents rearing grandchildren as they worked to ameliorate their stressors and facilitate positive family transitions. What emerged from our analyses were five themes that captured the shifts or adaptations employed by grandfamilies, including shifts in roles, shifts in identities, shifts in relationships, resource shifts, and shifts in perceptions of the familial situation.

Shifting Roles

As mentioned, grandparent caregivers in this study took over the surrogate parental role as a result of familial crisis. Grandparent intervention necessitated that these caregivers shift their roles and responsibilities from grandparent to parent. Three subthemes capture the role shifts experienced by most grandparents, including shifting from retirement planning to primary caregiving and from “full-time employee” to “stay-at-home parent.” The third subtheme that emerged, “a second chance to parent,” captured grandfathers’ shifting roles specifically.

FROM RETIREMENT PLANNING TO PRIMARY CAREGIVING

Many grandparents had at one point made the transition from parenting their biological children to planning for retirement. From a developmental perspective, most grandparents anticipate an empty nest in their latter
years, where their focus shifts from primary caregiving and breadwinning duties to retirement planning and recreational activities (Feldman, 2005). For grandparents rearing grandchildren, they must make the shift from moving toward an empty nest back to primary caregiving. Such a transition is considered nonnormative and off-time (Landry-Meyer & Newman, 2004).

The shift from empty-nester to primary caregiver can be seen in the Hatfields’s story (the name is a pseudonym). The Hatfields had been married for 36 years and reared four children. They had been experiencing an empty nest for three years. Their son had two daughters with a woman who subsequently struggled with substance abuse and started abusing and neglecting the children. Custody was given to the father, the Hatfields’s son; while he had intentions of caring for his daughters, his work schedule made finding child care impossible. The Hatfields stepped in and became the primary caregivers of their granddaughters (aged seven months and two years). As Mrs. Hatfield stated, “We were used to peace and quiet. [We] didn’t have anybody here. [We were] coming and going whenever we wanted. [We went from] quiet to chaos.” As is the case for many grandparent caregivers, grandparents often must make swift shifts in their daily routines to meet the demands of their grandchildren.

The abruptness of the Hatfields’s role change was echoed by the Maxwells, who were younger grandparents at the ages of 36 and 41 years yet looking forward to retirement life without children. They were planning to travel in the coming child-free years when they found out that their 18-year-old daughter was pregnant. Mrs. Maxwell’s daughter dropped off the young grandson regularly for months at a time and left with no contact. The Maxwells took over primary care responsibilities when their daughter dropped the grandson off at his grandparents’ home for good. Mr. Maxwell explained that, although they had anticipated that their grandson might some day be living with them full time,

We just didn’t know it would take place at such an early age. We thought maybe eight or nine, ten years of age before it happened, but it happened sooner than we thought . . . it kind of caught us off guard, and then we scrambled . . . because now you’ve got this [young child] that needs care and, you know, we had alone time, and now we don’t have alone time. It’s a huge adjustment.

This adjustment from life without children back to a home with children was a challenging lifestyle and role shift. Grandparents who took over the surrogate role for grandchildren reported that they not only had to shift from grandparent to primary caregiver but that they also had to make shifts in their roles as breadwinners for their families.
FULL-TIME EMPLOYEE TO STAY-AT-HOME PARENT

As grandparents shifted their roles, many quickly realized that their grandchildren needed significant care, and many either could not afford child care costs or felt that their grandchildren needed extra time and attention to help them heal from earlier traumas. To adjust, many grandparents opted to leave their careers to stay at home with their grandchildren.

The Barkers, both in their 50s, had been caring for their three grandchildren—ages 10, 8, and 5 years—for 3.5 years. The children had suffered from years of parental abuse. Mr. Barker lamented about the first months after their three grandchildren moved in, stating, “there was a time when we . . . went into hiding with just the kids because everything was so overwhelming.” Mrs. Barker further shared, “When we got the kids there was no way we could have left them with anybody.” To best care for their grandchildren, she decided to stay home to nurture them as they adjusted; she therefore retired from her professional career in the health care industry, giving up a $55,000 annual salary and health care benefits.

For grandparents who quit their jobs, adjusting to full-time caregiving was challenging. Mrs. Pierson, a married grandmother who adopted her two-year-old grandson, stated that she had to quit working due to the costs of child care. She shared, “It’s hard, very hard. I don’t have a babysitter and he’s never been with day care. It just keeps me busy twenty-four seven and sometimes there’s times when I just need a break.” She spoke of the frustrations that also came with the social isolation of having no family in the area to go to for support. For many grandparents, finding a balance between work and family was difficult. To adjust, some grandparents, mainly grandmothers, shifted their roles from wage earner to stay-at-home caregiver.

A SECOND CHANCE TO PARENT

One emergent subtheme shared by nearly all grandfathers was their opportunity to shift from their traditional familial role of breadwinner to caregiver. When asked about their new roles as primary caregivers, nearly all grandparents shared that they felt like they were better parents now than when they were rearing their biological children. However, for grandfathers, this shift seemed more profound. Grandfathers lamented that when their own children were young they were working hard to provide and missed out on many of the joys of parenthood. Because many reported being better off financially than they had been in the past, parenting a second time around offered grandfathers a second chance to bond with and socialize their grandchildren.

This shift is exemplified by Mr. Colins, a 54-year-old grandfather who adopted his three grandchildren. Mr. Colins shared that when he was younger, he was busy being a “breadwinner” for his biological
children. His wife stated that when their granddaughter was born, “It was the first opportunity he had to bond with the [grand]child, because he had never been there for the birth of any child or to know what that felt like. He was the first one to hold her.” Mr. Collins concurred, “I missed things because I was working. I never did bond with those three kids. [I] had them in my heart, but nothing like with [our granddaughter]. [Having her] was just like having a child.” Grandfathers like Mr. Collins seemed to bond early with their grandchildren, which may be important to their shifting of familial roles to perform caregiving duties.

Shifting Identities

Grandparents in this study reported that they had not planned on parenting again but had taken on the parenting role in an effort to keep their grandchildren safe and to nurture their healthy development. Overtly, grandparents were performing parenting duties, yet the grandparents’ identities as grandparent or parent seemed to be up for interpretation. Whether or not grandparents shifted their identities to “match” their roles depended on several factors. For some, identity shifts seemed to be related to the age of their grandchildren. For example, grandparents with older grandchildren (e.g., adolescents) often shared that their grandchildren knew who their “real” parents were and knew who their grandparents were. In these families, grandparents held fast to their identities as grandparent caregivers and did not shift—and this was perhaps in the best interest of the child. However, for grandparents of younger grandchildren, there appeared to be two kinds of shifts. Some grandparents appeared to accept their grandchildren as their own children, whereas others experienced identity ambiguity.

BECOMING “MOM” AND “DAD”

As grandparents were shifting their roles to perform the surrogate parental role for their grandchildren, there appeared to be—for some—a parallel shift in their identities from “grandparent” to “parent.” Becoming “Mom” and “Dad” was perhaps most apparent in the four grandfamilies in this study who had adopted their grandchildren. In these families, the grandchildren were all quite young and the biological parents’ rights were terminated by the courts. For other grandparents, adoption wasn’t necessary for them to make the shift from grandparent to parent. As Mrs. Franklin, who along with her husband had guardianship of their six- and seven-year-old granddaughters for four years, shared, “They really are our kids . . . [and this is] the best thing for these girls. This is where they belong.”
For other grandparents, the identity shift appeared to come after everyone had settled into their new roles. As can be seen in the following example, Mr. Barker described his epiphany of realizing he was no longer a grandpa:

"It took us the first two years of this whole thing to realize and conversations with each other that—wait a minute—we’ve finally got to quit being grandparents. We can’t be grandparents anymore. We’re now parents. . . . You have to physically say “hold it, I’m doing this wrong. I’m trying to be Grandpa.” I can’t be Grandpa and that is a hard thing for grandparents to give up."

While many grandparents seemed to make a clear shift in their identities from grandparent to parent, others were less clear. In such cases, grandparent identities seemed to vacillate or be dictated by their grandchildren. In other words, their identities were more ambiguous.

**IDENTITY AMBIGUITY**

Many grandparents seemed to feel caught between two identities: functionally, the grandparents were parents to their grandchildren; however, some resisted giving up their grandparent identities or were slow to embrace becoming “Mom” or “Dad.” In addition, some grandparents were more passive, allowing the grandchildren to decide their identities for them. As Mrs. Stevens, who along with her husband had full-legal custody of their five-year-old twin granddaughters, explained:

"They call me “Grandma,” they call me “Mom,” they call me “Mommy.” Depends on what’s going on. . . . My husband is “Papa.” There have been rare occasions when they call him “Daddy.” My daughter and I have gotten into arguments over this and I flat told her, “They call me what they want. I’ve been there from day one. I’m the one that’s rocked them in the middle of the night, fed them . . . been there when they’ve been sick and they can call me what they want to.”

As grandparents shifted their roles and identities to accord with their grandchildren’s emergent needs, such shifts appeared to also influence their relationships with others in their network.

**Shifting Relationships**

**LETTING GO OF THE ADULT CHILD**

While grandparents discussed shifts in relationships with their extended family and communities, perhaps the most difficult shift for many was the “letting go” of their adult child who was either unwilling or unable to
parent. The repeated, and often failed, efforts to help their children get it
together and regain their parenting role appeared to exhaust grandpar-
ents’ patience and hopes. Mrs. Dixon, a 46-year-old grandmother who had
been rearing her 5-year-old grandson since infancy spoke of her lost hope
for her daughter who had been in jail repeatedly. “I kind of stay away
from her anymore. I broke myself off. It can’t be fixed . . . I can’t deal with
it no more. I got him to raise.” For other grandparents, the decision to
truncate their relationship with their adult children was endorsed by pro-
fessionals. Mrs. Maxwell lamented, “The counselor told us to stop contact
[between the mother and grandson] because she was doing more harm
than good.” Grandparents who “let go” of their custodial grandchildren’s
parents appeared to do so for self-preservation and for the well-being of
their grandchildren. Such relational adjustments appeared to correspond
to role and identity shifts as well as shifts in other family and community
relationships.

SHIFTING FAMILY RELATIONSHIPS

Taking over parenting roles from their adult children presented new famil-
ial challenges. Some grandparents reported jealousy and resentment in
their other adult children. Mrs. Barker stated that her adult son “was a little
angry with us, a little put out with us for allowing this to happen.” Mr.
Barker added, “It was like we should have been more coldhearted and
[used] tough love. But you know, you try really hard not to.” This experi-
ence of jealousy within the family was echoed by the Franklins. Mrs.
Franklin, referring to her other adult son, stated, “He is jealous because he
sees the [grand]kids get more. Because we do have a little more than
when they were [kids].” The grandparents further explained that their
other adult daughter was also jealous, but for different reasons. Their
adult daughter had noticed the differences in attention that her kids got
versus the attention enjoyed by the custodial grandchildren. The grand-
mother empathized with her daughter, but also felt that she was going to
have to “come to grips with it.” Other grandparents reported anger and
resentment from their adult children. The Gavins, for example, were not
supported by their adult children in their decision to rear their two grand-
daughters. The family had an intergenerational history of sexual abuse,
leaving complicated, unresolved issues between the family members. Mrs.
Gavin said:

They [her adult children] do not like it at all, not one positive thing.
They are not talking to us much, . . . They just said, “We don’t want to
know how the girls are. We don’t want to know how [the granddaugh-
ter’s father] is. We don’t want to hear; we don’t even want to talk about
them in our presence.”
SHIFTING COMMUNITY RELATIONSHIPS

Grandparents also shifted how they related to members of their communities and larger institutions (e.g., education, social services). Researchers have noted a lack of norms and traditions on which grandfamilies might draw to make sense of their circumstances and a lack of extended kin network supports available to facilitate their family functioning (Bowers & Myers, 1999; Hayslip, Shore, Henderson, & Lambert, 1998; Jendrek, 1993). Rearing grandchildren within a nonnormative framework or life course stage may conflict with the normative framework expected by the larger society.

The lack of understanding by community members was mentioned as a consequence faced by many grandparents. However, several adjusted by communicating openly with community and institutional representatives, such as school counselors and teachers. One grandmother, Mrs. Arnold, who had been rearing her 10-year-old grandson and 2-year-old granddaughter, talked about how she handled her grandson’s teachers (and essentially resocialized them to better meet her “nonnormative” family’s needs) when she said:

I went in . . . met with his teachers ahead of time to train them a little bit about his background. [I told them] “If you’re going to be talking about moms and dads, he doesn’t have a mom and dad. Well, he does, but they’re not in his life, so it’s going to have to be “grandparent,” or it’s going to have to be “Grandma” or “folks” or “parent.”

Another grandmother, Ms. Tomkins, a widowed grandmother who had been caring for her adolescent grandchildren for about six months, said she was motivated to start communicating with her 13-year-old grandson’s school so she could access his grades. She said, “He had tried very hard in school to not even let them know there was a problem with his mother’s drinking. He simply doesn’t want it to follow him any further.” The counselor and teachers had been watching the grandson carefully all year, suspecting something was amiss. These grandparents found that being proactive with teachers about their unique family situations was imperative as the grandfamilies adapted. For many grandparents, however, this experience of advocating for their grandchild’s education required the acquisition of new skills and renewed understanding of how the educational (as well as other) systems worked.

Unfortunately, some grandparents did not feel supported by their larger community, which also necessitated relational shifts. For example, the Hogans, a grandparent couple in their 60s, stated that they did not feel community support in their efforts to rear their grandson, which left them feeling isolated. Mrs. Hogan explained, “The community thought we was crazy for raising him.” She continued, “I don’t think they thought he would do good because [of] being raised by grandparents instead of his mother.”
While not all members of their communities supported the grandparents’ efforts, the shifting of community relationships appeared necessary for grandparents to best meet the needs of their grandchildren.

Shifting Resources

After the initial crisis phase of coping with the immediate psychological and physical demands of their grandchildren, grandparents appeared to seek and acquire new resources to meet the pileup of stressors that occurred over time (McCubbin & Patterson, 1983). Grandparents often had to struggle with the cumulative effects of financial, emotional, and physical stressors, which motivated them to explore new resources. Finding adequate resources was more complicated for some grandparents depending on their internal resources (e.g., positive outlook, faith, flexibility, communication style) and perceptions of the availability of external resources (e.g., family, friends, church, government programs). Clearly, the most significant resource shift for grandparents was financial.

As they adjusted to primary caregiving, grandparents reported that their financial resources were necessarily shifted from themselves to meeting their grandchildren’s needs. Grandparents incurred many unexpected expenses. For example, the Olsons, who were both in their 40s, had been caring for their infant grandson for five months and were expecting the arrival of two granddaughters (aged four and two and a half years). Mrs. Olson stated:

> At this point, we’re just kind of waiting to see what’s going to happen with our retirement plans. It’s been a little bit harder financially . . . the bills have gone up a bit, changed the grocery habits. I mean, I haven’t bought animal crackers and juice boxes in years. In the back of our minds at night it’s like, “Oh, how long do you think they’re going to be here?”

Financial strains were commonly mentioned by grandparents. However, the costs of childhood activities and basic needs were not the only costs incurred by the grandparents; many grandchildren required medical and dental care. Mrs. Gavin, who had been rearing her eight- and six-year-old granddaughters for two-and-a-half years, stated:

> We had saved for a down payment on a house, but we couldn’t [save money] from the time [the granddaughters] entered the picture for like three or four months. There were just so many needs when we got them. We’ve paid $1,000 probably each with dental bills because they had cavities up the gazoo and one needed glasses, and just all those things.
Other grandparents reported using up their savings to care for their grandchildren. As the Stevens stated, “We’ve depleted our savings. I don’t see it any differently than if they were my own biological kids. You dip into your savings for different things. Hopefully, by the time they’re ready to go to college, we’ll have that situation taken care of.” While the shifting of resources was challenging for grandparents, the rewards of rearing their grandchildren seemed to negate the resource difficulties most incurred.

Shifting Perceptions

Regardless of the persistent nonnormative stressors of parenting one’s grandchildren, the sentiment that rearing their grandchildren was a positive event in their lives was ubiquitous throughout the interviews. Shifting perceptions of the situation or the ways in which grandparents made meaning of their familial circumstances appeared critical to their positive coping and adaptation. As Mrs. Arnold said, “Well, it has really been a blessing for me. I don’t think most people get a chance to be as close to their grandchildren as I do. He [grandson] is a really special kid and so I really feel really blessed with having him.” Mrs. Hatfield echoed the positive sentiment:

There’s so many rewards in raising grandchildren, so many more rewards than negatives; there always will be. The biggest thing is, don’t look back on what you had and what you could have had if this had happened. . . . To me, it’s a reward, it really is. I guess I can honestly say I wouldn’t trade it for the world.

While grandparents often shared that they missed being “typical” grandparents, many were able to reframe perceptions and look to the future with hope rather than ruminating over the past.

Although the average age of the grandparents in the study was over the traditional age for childrearing, many grandparents perceived their age to be an advantage. Mr. Barker, who was 57 years old, stated, “I would not trade a day in my life right now for anything I had before . . . we’re fortunate because we are still young enough.” Mr. and Mrs. Jensen, both in their 60s, believed that being older rearing their grandchildren was perceived as a strength: “I think [he] and I are lucky because we’re not working. We are retired. We have more patience. We have more money than we did when our kids were young.” By redefining their nonnormative circumstances as positive, the grandparents appeared motivated to persevere regardless of their familial challenges. As Mr. Hamilton, a 54-year-old grandfather who had been rearing his 8-year-old grandson since he was an infant, stated, “I never felt burdened. I’ve been angry with her [the mother] before for not owning up to some responsibilities, but never ever felt burdened. In fact, I feel very fortunate to have [my grandson]. . . . It’s more of a gift.” According
to Boss (2002), the more able a family is to redefine their situation in positive terms, the more prone the family will be to successfully adapt to the demands being placed on them.

CONCLUSIONS

Although this study is limited by its small sample size and scope, it nonetheless offers insights into the coping and adaptation processes employed by grandparents rearing grandchildren. From our lens, grandparent caregivers made a series of shifts or adaptations as they coped with family stressors and transitions over time, including shifts in their roles, identities, resources, family and community relationships, and perceptions of their familial situation. Many of these shifts seemed critical to positive grandfamily adjustment so that grandparents could best meet the needs of their grandchildren. However, it should be noted that we are limited in our ability to assess which adjustments were positive or negative. Moreover, the findings of this study are not generalizable to all grandparents rearing grandchildren. Using larger, representative samples, future research should continue to identify the ways in which grandparents cope and adjust within grandfamily constellations. Future research should also identify the processes that result in either maladaptation or bonadaptation (McCubbin & Patterson, 1983). Such research is needed to determine which adaptations likely yield more positive outcomes over time for grandparents and the grandchildren under their care. Moreover, such research is critical to practitioners interested in developing interventions and supporting the health and well-being of grandfamilies.

REFERENCES


