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Understanding Grandfamilies: Characteristics of Grandparents, Nonresident Parents, and Children

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Abstract

Using data from the Year 9 Fragile Families and Child Wellbeing Study ($N \sim 3,182$), we investigated the characteristics grandfamilies (grandparents raising their grandchildren with no parent present, $N = 84$) and compared them to other key groups, including children's nonresident parents and other economically disadvantaged families with children. Results show that grandparents raising their grandchildren were generally better off in terms of educational attainment, marital status, and economic well-being than the child's parents. Grandparents raising their grandchildren also had very similar characteristics to other disadvantaged mothers. Academic and socioemotional well-being was poorer among children in grandfamilies compared with those living with their mothers, but parenting practices were very similar. These findings suggest that although children in grandfamilies may be at a disadvantage academically and socioemotionally, grandparent caregivers are in many ways similar to other fragile-family mothers. Overall, this study enhances our knowledge of an important, yet understudied family type.

Keywords

Fragile families; grandfamilies; grandparents; noncustodial parents

In 2013, approximately 2.2% of U.S. children lived in a household consisting of a grandparent and grandchild but no parent, referred to here as a *grandfamily* (authors' tabulations from the American Community Survey). Some studies document the characteristics, strengths, and challenges of grandfamilies (e.g., Cox, 2000). Missing, however, is an analysis of how the characteristics and well-being of those in grandfamilies, including the nonresident parents, compare to those in other families. We provide a detailed comparison of how grandparent caregivers compare with the child's nonresident parents and with other parents of similar socioeconomic backgrounds, and we examine the well-being of children in grandfamilies utilizing a wide range of high-quality measures of child well-being from multiple reporters.

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We do so using data from the Fragile Families and Child Wellbeing Study (FF), addressing the following questions: What are the characteristics of individuals in grandfamilies, including grandparents, nonresident mothers, and nonresident fathers, and how do they compare to other economically disadvantaged families with children? How does the well-being of children in grandfamilies compare to that of children in other, similarly economically disadvantaged households? In addressing these questions, our study provides key information not only to researchers but also to policy makers and practitioners. This analysis is situated in the theoretical perspectives of life course theory and particularly the notion of kinscripts, which emphasizes that families are complex systems in which individuals have reciprocal and ongoing relationships with one another (Stack & Burton, 1993).

Background

Characteristics and Comparison of Grandparents, Nonresident Parents, and Grandchildren

An extensive literature studies grandfamilies; given the nature of this brief report, we are not able to fully review this literature here, but we highlight some key studies particularly relevant to our research questions. Especially well documented are the characteristics and challenges faced by grandparents raising their grandchildren (e.g., Fuller-Thomson, Minkler, & Driver, 1997; Goodman & Silverstein, 2006; Hayslip & Kaminski, 2005; Prokos & Keene, 2012). Research using U.S. Census data found that 49% of children in grandfamilies live with both grandparents, 46% with just a grandmother, and 5% with just a grandfather (Dunifon, Ziol-Guest, & Kopko, 2014). Overall, compared to noncustodial grandparents, those raising their grandchildren generally have poorer physical and mental health, and more stress (e.g., Bachman & Chase-Lansdale, 2005; Musil & Ahmad, 2002), and grandfamilies are poorer economically than other households with children (e.g., Casper & Bryson, 1998). At the same time, grandfamilies exhibit numerous strengths, including a very warm bond between grandparent and grandchild, an increased sense of purpose on the part of the grandparent, and a wisdom and maturity that comes with parenting for a second time (Dunifon et al., 2014).

Most prior research studying the well-being of children in grandfamilies has compared grandfamily children's well-being to that of U.S. children generally, finding that grandfamily children had elevated behavior problems and poorer academic outcomes (e.g., Dubowitz et al., 1994; Kelley, Whitley, & Campos, 2011; Smith & Palmieri, 2007). A smaller set of studies have compared grandfamily children to other similarly economically disadvantaged children, finding elevated behavior problems (Pittman, 2007) and lower levels of school engagement (Billing, Macomber, & Kortenkamp, 2002), and one study showed no differences (Solomon & Marx, 1995). When compared to those in traditional foster care, research has found that children in grandfamilies fare better (Rubin et al., 2008). We consider a wider range of child well-being measures from multiple reporters, systematically comparing grandfamily children to similarly disadvantaged urban children.

Less well understood are the characteristics of nonresident mothers and nonresident fathers in grandfamilies. Although research documents that many nonresident parents have ongoing

regular contact with their children (Dolbin-MacNab & Keiley, 2009; Dunifon et al., 2014; Messing, 2006), virtually nothing is known about the characteristics of nonresident mothers and fathers of children in grandfamilies. This study fills that gap.

A key issue when examining the well-being of grandfamilies is determining the appropriate group to whom such families should be compared (Dunifon et al., 2014). Given evidence that grandfamilies often face financial, health, and emotional challenges (Dunifon et al., 2014; Musil & Ahmad, 2002), comparing those in grandfamilies to those in “average” families is problematic in that it does not allow for disentangling what is unique about the grandfamily living arrangement from the factors associated with disadvantage. This study systematically compares the characteristics of those in grandfamilies to several key groups of interest—the average urban mother, the average urban father, the nonresident parents with whom the children previously resided, and other disadvantaged urban children. Making such comparisons allows us to better understand how a child’s grandfamily living arrangement compares to other family contexts.

Method

Data

Data came from the Fragile Families and Child Wellbeing Study (FF), a longitudinal birth-cohort study of nearly 5,000 births in large U.S. cities sampled between 1998 and 2000. Nonmarital births were oversampled, resulting in a relatively economically disadvantaged sample. Mothers and fathers were interviewed soon after the birth of the focal child, and follow-up interviews were conducted when the child was approximately 1, 3, 5, and 9 years old. We mainly utilized the 9-year-old data, gathered when the average child was in third grade, although some descriptive information was drawn from earlier waves. We used 9-year-old data from the nonparental caregiver survey, the primary caregiver survey, the biological mother survey, the biological father survey, the child survey, and the teacher survey. We focused on the 9-year-old data because this wave represents the first survey with interviews of nonparental primary caregivers as well as nonresident mothers and fathers, and the children themselves.

Our analyses included 84 grandparents raising their grandchildren with no parent in the household (82 grandmothers and 2 grandfathers). Our analyses also included information on 79 children being raised by their grandparents (five children did not participate in the child survey). In the interest of maximizing cases, we retained all 84 grandparent responses. Additional analyses restricting the sample of grandparents to those whose grandchildren responded to the survey yielded similar results.

Our analyses also included information on 47 nonresident mothers and 34 nonresident fathers whose child was being raised by a grandparent. Data were missing for 37 nonresident mothers (seven were deceased and five in jail) and 50 nonresident fathers (eight were deceased or unknown and 13 in jail). Analyses of the 25 non-deceased and non-incarcerated mothers missing data in Year 9 show that they had very similar characteristics as those who were interviewed. In contrast, the 29 missing fathers were somewhat different from those who were surveyed; they were more likely to have been single at the birth of the child, to be

of Hispanic race/ethnicity, and to be an immigrant. We consider the implications of this differential attrition in the Conclusion.

We compared those in grandfamily households to individuals in other types of families. To perform meaningful contrasts, we restricted our comparison groups. To be included in the biological mother or the child comparison group, both the mother and child had to complete the survey, yielding 3,098 non-grandfamily mother and child responses. For the biological father comparison group we retained only cases in which the child had also responded, yielding 2,174 cases. Similarly for the teacher survey, we retained cases in which the teacher and child responded: 52 children who lived in a grandfamily and 2,064 children who lived with a mother primary caregiver.

Measures

Grandfamilies—Grandfamilies were identified as households including the focal child, at least one grandparent, and no parents. A variable indicating whether the child lived with a maternal or paternal grandparent was constructed, as well as one identifying whether the child lived with just the grandmother, just the grandfather, or both. Household structure more broadly was constructed to include spouses and partners of the grandparent, the grandparent's own parents (i.e., the child's great grandparent), the child's aunts or uncles, cousins, other relatives, or nonkin. We also measured number of people in the household and number of siblings of the focal child living in the household. We calculated the years that the child had lived with the grandparent using the current interview date and the date when the child came to live with the grandparent.

Demographic characteristics—We measured a number of demographic characteristics of the grandparent respondent, the biological mother, and the biological father, including relationship status (married, cohabiting, or single), age at child's birth, education (less than high school, high school, some college/associate's, college or more), nativity (foreign born), labor-force participation (employed, unemployed, out of labor force, retired, or disabled), health status (1 = *poor*, 5 = *excellent*), depression, an indicator of poverty (using official Census Bureau thresholds adjusted for household size and year), and material hardship (experienced any food insecurity, housing insecurity, inability to pay bills, forgone medical needs, or had utilities cut off). Frequency of visitation (how many days the mother or father saw the child in the previous month) was asked of the grandparent respondent about both mothers and fathers, and of the biological mother and the biological father themselves.

For mothers and fathers, we included marital status at the birth of the child, race/ethnicity (non-Hispanic White, non-Hispanic Black, Hispanic, or other race), whether drugs and/or alcohol had interfered with their life, the number of biological children currently living with them, and the distance from their house to their parent's house. These variables were not available for the grandparent caregiver respondents.

Child well-being—Child health was assessed using the overall health status measure reported by the caregiver about the focal child (1 = *poor*, 5 = *excellent*). Indicators for obesity were constructed using interviewer gathered data. We categorized children with a

BMI at or above the 95th percentile as obese, following guidelines from the Centers for Disease Control (Ogden & Flegal, 2010) and using percentiles calculated from data from their 2000 growth charts (Kuczmarski et al., 2000), adjusted for child's age in months, gender, height, and weight. Primary caregivers also reported whether the child had any health conditions including: attention deficit/hyperactivity disorder, a developmental delay or mental retardation, autism, or an other health problem such as a heart condition, deafness, or a speech problem.

Most of the child cognitive, socioemotional, and school well-being measures included scales or indexes. Each index was standardized to have a mean of 0 and a standard deviation of 1, so that higher scores reflect "more" of the outcome.

Child cognitive ability was assessed using the Peabody Picture Vocabulary Test (PPVT; Dunn & Dunn, 1997), the Woodcock-Johnson Passage Comprehension Test 9 and Applied Problems Test 10 (Woodcock, McGrew, & Mather, 2001), and the Weschler Intelligence Scale for Children—Digit Span subset (Wechsler, 2003). Teacher reports of children's academic performance in social studies, language literacy, and math (1 = *far below average*, 5 = *far above average*) were reported for a subset of children.

Child socioemotional well-being was reported by primary caregivers using the 6–18 Child Behavior Checklist (CBCL; Achenbach & Rescorla, 2001); capturing both externalizing (anger, defiance, or disobedience) and internalizing (sadness, affection, nervousness, and interest) behavior. Children also reported on their own externalizing and internalizing behaviors and emotions using the Self Description Questionnaire (Marsh, 1990). Teachers reported on children's behavior using the Social Skills Rating System (SSRS; Gresham & Elliott, 1990) and the Conners' (2001) Teacher Rating Scale. The SSRS included externalizing, internalizing, cooperation, assertion, and self-control subscales. Teachers also reported on approaches to learning, a scale that assessed children's attention, persistence and interest in learning. The Conner's Teaching Rating Scale assessed oppositional behaviors, cognitive problems or inattention, hyperactivity, and attention deficit/hyperactivity disorders.

Some measures of school well-being were collected from the child. Connectedness at school included measures of inclusiveness, closeness, happiness, and safety. Peer bullying included four items (picked on, hit, stolen lunch and/or money, left out). Task completion assessed children on five items related to staying on task and follow-through. Delinquency was reported by the child and comprised 15 items related to vandalism, truancy, or theft. Last, primary caregivers were asked whether the child had ever repeated a grade in school.

Because the study was descriptive in nature, we reported bivariate descriptive statistics. When applicable, *t*-tests were run to test for statistically significant differences across groups.

Results

Grandfamily Households

Table 1 provides descriptive information on the grandfamilies in our sample. Almost three-quarters of grandfamilies involved maternal grandparents. Most children lived with a grandmother, although about one-third lived with both grandparents. Nearly half of children (46%) also lived with an aunt or uncle, and many lived with cousins, nonkin, and great grandparents. More than half of children also lived with one or more of their own siblings, resulting in an average household size of nearly five people.

Table 1 documents the length of time the focal child had lived with the grandparent. On average, children in this sample, who were approximately 9.5 years old, had lived with a grandparent for 5.7 years, or 60% of their lives; 11% had lived with a grandparent for less than a year; and 42% had always lived with their grandparent (all children in grandfamilies at Year 9 had lived with their parent at some point). Most grandparents (86%) expected their grandchild to live with them until they reached adulthood.

Characteristics of Grandparents, Nonresident Parents, and Comparison Parents

Table 2 compares characteristics of grandparents raising their grandchildren to those of several groups. First, grandparents raising grandchildren are compared to nonresident mothers of children in grandfamilies, with results indicating that, in general, grandparents were more advantaged than the children's mothers. Grandparents raising their grandchildren were twice as likely as the children's nonresident mothers to be married, significantly less likely to have dropped out of high school (25% vs. 55%), and more likely to be college educated. Grandparents were also much less likely to be unemployed. Poverty and hardship rates were significantly lower among grandfamilies than among nonresident mothers. Finally, nonresident mothers were significantly less likely to be immigrants than grandparents; however, this may be driven by selection, as immigrant parents may not have their own parents in the United States, which makes it less possible to have their child live in a grandfamily.

Next, we examined how grandparents raising their grandchildren compare to residential fragile-family mothers raising their own children. Few significant differences exist between the two groups. Grandparents were significantly more likely to be single and less likely to be cohabiting than resident mothers, whereas both groups were married at similar rates. Education differences were small, but grandparents were generally more educated than residential mothers. Grandparents were older than residential mothers and had significantly poorer health ratings, but no other health differences were significant. Among grandparents in the labor force, differences in employment were small. Thus, it appears that grandparents raising grandchildren have very similar characteristics to residential urban mothers raising their own children.

Comparing nonresident mothers to mothers who raising their own children shows that nonresident mothers were much more disadvantaged in terms of marital status, age, education, employment, health, and substance use. Although, by default, all mothers living

with their own children had children living with them, more than half of the nonresident mothers had one or more other children living with them.

Comparing fathers whose children were being raised by a grandparent to fathers whose children live with their mothers (note that these fathers included both those who reside with their child and those who did not but whose children lived with the mother) again reveals that nonresident parents of children in a grandfamily were more disadvantaged than other parents. As was the case with the mothers, 55% of nonresident fathers had other biological children living with them.

Table 2 also compares reports of the frequency of visitation by nonresident mothers and fathers to their children in grandfamilies. Grandparents reported that both mothers and fathers visited an average of nine days a month. Nonresident mothers and fathers reported seeing their children even more frequently—both said they saw their child 12 days per month. Additional analyses showed that many nonresident mothers (16%) and fathers (12%) reported seeing their child every day, yet a significant share (21% of mothers and 19% of fathers) did not see their child in the previous month. Only 2% of mothers and 15% of fathers did not see their child in the previous year.

Well-Being of Children in Grandfamilies

Table 3 compares the well-being of children in grandfamilies to that of children living with their mothers. The only significant health-related difference between children in grandfamilies and those living with their mothers was the incidence of attention deficit disorder/attention deficit hyperactivity disorder (ADD/ADHD). Twenty-percent of children in grandfamilies had been diagnosed by a doctor with ADD/ADHD, compared to 11% of children living with their mothers. More differences emerged when looking at cognitive and academic assessments. Compared to children living with their mothers, children in grandfamilies generally had lower cognitive scores, although only for the applied problems score was this difference significant. Teacher reports also show that children in grandfamilies had average language literacy and math grades that were significantly lower than children who lived with a parent.

Looking at socioemotional development and behaviors, caregivers reported significantly higher levels of externalizing behaviors among children in grandfamilies. Teachers reported that children in grandfamilies were significantly less cooperative, displayed more oppositional behavior, had more cognitive and/or inattention problems, and had lower scores on the approaches-to-learning scale (e.g., applying themselves, concentrating) than other children. Finally, children in grandfamilies reported significantly lower task completion abilities. They were also twice as likely to have repeated a grade and were significantly more likely to have engaged in delinquent activities than children living with their mothers.

In auxiliary analyses available in Appendix A we investigated differences in parenting approaches comparing grandparents to resident mother households on measures of parenting activities and engagement in school, monitoring, physical and psychological aggression, neglect, and household routines. We found few significant differences between the two types of households, although grandparents were significantly less likely to know the child's

friends and significantly more likely to eat meals together than “typical” resident-mother households.

Conclusion

This study contributes to the understanding of grandfamilies in several ways. It is the first study to use survey information gathered from all grandfamily members, including mothers and fathers living outside of the household. Given that the vast majority of children in grandfamilies remain in contact with their nonresident parents, obtaining information about these parents is crucial. This study is also the first to systematically compare the characteristics of grandparents raising their grandchildren to multiple other key groups—urban mothers raising their own children, urban fathers, nonresident mothers, and nonresident fathers. Last, this study provides new insight into how children in grandfamilies fare on a wide range of measures of child well-being as compared to s

Several key findings emerge. Nonresident mothers and fathers are much more disadvantaged than both grandparent caregivers and other urban parents raising their own children. This study is one of the first to be able to concretely document just how much better off grandparents are relative to the nonresident parents of the children they are raising. Grandparents have higher levels of human capital and significantly lower levels of poverty and hardship than do nonresident mothers and fathers. This suggests that children in grandfamilies often enter a living arrangement with more economic advantages than the one they left behind.

We note that more than half of nonresident parents had biological children living with them at the time of the survey. Given their relative disadvantage compared to grandparent caregivers, this is an area for future research. In particular, research that compares the well-being of children who are raised in a grandfamily with that of children who remain with a parent would help shed light on the implications of grandfamily living arrangements for child well-being.

Another key finding is that grandparent caregivers have characteristics that are very similar to other urban parents. Some studies have shown that grandparent caregivers are disadvantaged relative to other grandparents in terms of their physical and mental health (e.g., Hayslip & Kaminski, 2005). Yet when compared with other economically disadvantaged parents, we find that grandparents look quite similar and have comparable parenting practices. Certainly, as compared with the U.S. population of children, those in grandfamilies are more disadvantaged, but the relative disadvantage as compared with other low-income households is not evident. Future research on grandparent caregivers should carefully consider the appropriate comparison group when drawing conclusions about the well-being of those in grandfamilies.

Consistent with previous research, we find that nonresident parents see their children frequently—two to three days a week on average. This has implications for thinking about how social service agencies and social workers engage with these families. Programs targeting nonresident parents of children in grandfamilies will likely have spillover benefits

for the children in grandfamilies as well, given the high levels of need, and interactions with these parents. Future research should consider the role of social service agencies in not only helping grandfamilies but also assisting nonresident parents in aiding children in grandfamilies. The frequent interactions with nonresident parents observed here also points to the need to think about how to best serve children and grandparents while taking into consideration the parents as a potential actor in the household system. Research on nonresident fathers of children living with their mothers suggests that contact with nonresident parents exhibiting problematic behavior may not be in the child's best interest (Jaffee, Moffitt, Caspi, & Taylor, 2003). Similar research is needed on the role of nonresident parents in the lives of children in grandfamilies, particularly in light of the high level of disadvantage among nonresident parents that this study demonstrates.

Our descriptive results suggest that children in grandfamilies have poorer outcomes than other children, despite the fact that we have compared grandfamily children to other relatively economically disadvantaged children being raised by their mothers. In particular, we found that the incidence of ADD/ADHD was much higher among children in grandfamilies than those in other households, and that this likely spills over into school interactions, as teacher-reported levels of cooperation were lower, and oppositional behavior and inattention were higher, among grandfamily children. This suggests that children raised by grandparents have some unique needs, particularly in the area of socioemotional development. Early trauma may explain some of these differences, but because we also found high levels of contact with nonresident parents who had high rates of depression, substance use, and health problems, research needs to consider how and whether this contact promotes or hinders children's development, and whether programs or interventions might be able to improve these interactions.

This study has several limitations. First, the sample is small, including 84 grandfamilies (although this is a relatively large sample for a study of this type) and only 47 nonresident mothers and 34 nonresident fathers. As noted previously, our sample of fathers may be more advantaged and more involved than nonresident grandfamily fathers in general. Second, this study has limited generalizability. The FF study only sampled families in 20 large cities, and the oversample of nonmarital births makes it more economically disadvantaged than the population at large. However, it is worth noting that the characteristics of the grandfamily grandparents in the FF sample are not that different from national samples in terms of age, employment, and education (authors' calculations using the American Community Survey).

Our findings suggest that, although in some ways children in grandfamilies fare worse than other fragile-family children, their grandparent caregivers may serve as an important source of refuge. Most grandparents expect to raise their grandchildren for "the long haul"; thus, more research is needed to better understand their unique circumstances.

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References

- Achenbach, TM.; Rescorla, LA. Manual for the ASEBA school-age forms & profiles. Burlington, VT: Research Center for Children, Youth & Families, University of Vermont; 2001.
- Bachman HJ, Chase-Lansdale PL. Custodial grandmothers' physical, mental, and economic well-being: Comparisons of primary caregivers from low-income neighborhoods. *Family Relations*. 2005; 54(4):475–487.
- Billing, A.; Macomber, J.; Kortenkamp, K. Children cared for by relatives: What do we know about their well-being?. Washington, DC: Urban Institute; 2002. Research Report Series B, No. B-46
- Casper, LM.; Bryson, KR. Co-resident grandparents and their grandchildren: Grandparent maintained families. Washington, DC: Population Division, U.S. Census Bureau; 1998.
- Conners, K. Conners' Rating Scales—Revised: Technical manual. Toronto, ON: MultiHealth Systems; 2001.
- Cox, CB., editor. To grandmother's house we go and stay: Perspectives on custodial grandparents. New York, NY: Springer; 2000.
- Dolbin-MacNab M, Keiley M. Navigating interdependence: How adolescents raised solely by their grandparents experience their family relationships. *Family Relations*. 2009; 58:162–175.
- Dubowitz H, Feigelman S, Harrington D, Starr R, Zuravin S, Sawyer R. Children in kinship care: How do they fare? *Children and Youth Services Review*. 1994; 16(1):85–106.
- Dunifon R, Ziol-Guest K, Kopko K. Grandparental co-residence and family well-being: Implications for research and policy. *Annals of the American Academy of Political and Social Science*. 2014; 654:110–126.
- Dunn, LM.; Dunn, LM. Examiner's manual for the Peabody Picture Vocabulary Test. 3. Circle Pines, MN: American Guidance Services; 1997.
- Fuller-Thomson E, Minkler M, Driver D. A profile of grandparents raising grandchildren in the United States. *Gerontologist*. 1997; 37(3):406–411. [PubMed: 9203764]
- Goodman CC, Silverstein M. Grandmothers raising grandchildren ethnic and racial differences in well-being among custodial and coparenting families. *Journal of Family Issues*. 2006; 27(11):1605–1626.
- Gresham, FM.; Elliot, SN. Manual for the social skills rating system. Circle Pines, MN: American Guidance Service; 1990.
- Hayslip B, Kaminski PL. Grandparents raising their grandchildren: A review of the literature and suggestions for practice. *Gerontologist*. 2005; 45(2):262–269. [PubMed: 15799992]
- Jaffee S, Moffitt T, Caspi A, Taylor A. Life with (or without) father: The benefits of living with two biological parents depend on the father's antisocial behavior. *Child Development*. 2003; 74(1): 109–126. [PubMed: 12625439]
- Kelley SJ, Whitley DM, Campos PE. Behavior problems in children raised by grandmothers: The role of caregiver distress, family resources, and the home environment. *Children and Youth Services Review*. 2011; 33(11):2138–2145.
- Kuczmariski RJ, Ogden CL, Guo SS, Grummer-Strawn LM, Flegal KM, Mei Z, Johnson CL. 2000 CDC growth charts for the United States: Methods and development. *National Center for Health Statistics. Vital and Health Statistics*. 2002; 11(246):1–18. [PubMed: 12043359]
- Marsh, HW. Self-Description Questionnaire manual. Campbelltown, Australia: University of Western Sydney, Macarthur; 1990.
- Messing JT. From the child's perspective: A qualitative analysis of kinship care placements. *Children and Youth Services Review*. 2006; 28(12):1415–1434.
- Musil CM, Ahmad M. The health of grandmothers: A comparison by caregiver status. *Journal of Aging and Health*. 2002; 14(1):96–121. [PubMed: 11892763]
- Ogden, CL.; Flegal, KM. Changes in terminology for childhood overweight and obesity. Hyattsville, MD: National Center for Health Statistics; 2010. National Center for Health Statistics Reports No. 25
- Pittman LD. Grandmothers' involvement among young adolescents growing up in poverty. *Journal of Research on Adolescence*. 2007; 17(1):89–116.

- Prokos AH, Keene JR. The life course and cumulative disadvantage poverty among grandmother-headed families. *Research on Aging*. 2012; 34:592–621.
- Rubin DM, Downes KJ, O'Reilly AL, Mekonnen R, Luan X, Localio R. Impact of kinship care on behavioral well-being for children in out-of-home care. *Archives of Pediatrics & Adolescent Medicine*. 2008; 162(6):550–556. [PubMed: 18524746]
- Smith GC, Palmieri PA. Risk of psychological difficulties among children raised by custodial grandparents. *Psychiatric Services*. 2007; 58(10):1303–1310. [PubMed: 17914007]
- Solomon JC, Marx J. "To grandmother's house we go": Health and school adjustment of children raised solely by grandparents. *Gerontologist*. 1995; 35(3):386–394. [PubMed: 7622091]
- Stack CB, Burton LM. Kinscripts. *Journal of Comparative Family Studies*. 1993:157–170.
- Wechsler, D. Wechsler Intelligence Scale for Children: WISC-IV. 4. San Antonio, TX: Harcourt Assessment; 2003.
- Woodcock, RW.; McGrew, KS.; Mather, N. Woodcock-Johnson III tests of achievement. Itasca, IL: Riverside; 2001.

Appendix A. Parenting in Grandfamilies

	Grandfamilies % or M(SD)	Not Grandfamilies % or M(SD)	t-Test
<i>Monitoring</i>			
Know friends scale	−0.24	0.01	*
Know what child does scale	−0.06	0.01	
Monitoring scale: Child survey ^a	0.03	0.02	
<i>Routines</i>			
Number of nights/week eat dinner together <i>M</i>	6.09 (1.3)	5.41 (1.88)	**
TV hours/weekday <i>M</i>	2.16 (1.40)	2.3 (1.65)	
<i>Stress/chaos</i>			
Parenting stress	−0.05	0.00	
Household chaos	−0.04	0.02	
<i>Parenting</i>			
Psychological aggression	−0.09	0.01	
Physical aggression	−0.22	0.01	
Neglect	−0.06	0.01	
Parenting activity scale (reading, talk about day, homework check and help)	−0.08	0.01	
<i>Involvement in school: Teacher report^b</i>			
Attended conferences	0.83	0.82	
Initiated contact with teachers	0.73	0.74	
<i>N</i>	84	~3098	

^aFrom child survey, *N* = 73 for children in grandfamilies and *N* = 3,098 for mother primary caregivers.

^bFrom teacher survey of the child, *N* = 51 for children with grandparent caregivers and *N* ~ 2,064 maternal primary caregivers.

* Indicates a statistically significant difference between grandfamilies and other families from t-tests ($p < 0.05$).

Table 1Grandfamily Household Composition ($N = 84$)

	% or M
Grandparent type	
Maternal	0.74
Paternal	0.26
Grandparent gender	
Grandfather	0.01
Grandmother	0.62
Grandmother and grandfather	0.37
Other people living in the household with focal child and grandparent ^a	
Spouse of grandparent	0.37
Partner of grandparent	0.08
Great grandparent	0.10
Aunt/uncle	0.46
Foster child of grandparent	0.05
Great-aunt/great-uncle	0.07
Cousin	0.13
Other relatives	0.02
Nonkin	0.11
Number of siblings of focal child living with grandparents (M)	1.15 (1.4)
Number of people in the household (M)	4.73 (1.82)
Years focal child has lived with grandparents (M)	5.71 (3.36)
Grandparent expects child will stay until they grow up	0.86
<i>N</i>	84

Note. SD in parentheses.

^aHouseholds may fall into multiple categories.

Comparing the Characteristics of Grandparents, Nonresident Mothers and Fathers and Other Mothers and Fathers

Table 2

	Grandparents in Grandfamilies (1) % or M (SD)	Nonresident Mothers (Children in Grandfamilies) (2) % or M (SD)	Residential Mothers (3) % or M (SD)	Nonresident Fathers (Children in Grandfamilies) (4) % or M (SD)	Fathers of Children who Live with their Mothers (5) % or M (SD)	<i>t</i> -Test ^a
Nonmarital birth		0.89	0.76	0.91	0.70	<i>c, d</i>
Relationship status						
Married	0.36	0.17	0.38	0.03	0.42	<i>a, c, d</i>
Cohabiting	0.08	0.19	0.22	0.03	0.14	<i>b</i>
Single	0.56	0.59	0.39	0.94	0.44	<i>b, c, d</i>
Age at focal child's birth <i>M</i>	46.5 (7.62)	21.68 (4.83)	25.12 (5.99)	24.64 (5.80)	28.08 (7.09)	<i>a, b, c, d</i>
Education						
Less than high school	0.25	0.55	0.32	0.39	0.29	<i>a, c</i>
High school	0.31	0.26	0.32	0.42	0.33	
Some college	0.29	0.19	0.25	0.16	0.25	
College or greater	0.16	0.00	0.11	0.03	0.13	<i>a, c</i>
Labor force participation						
Employed	0.45	0.36	0.64	0.53	0.75	<i>b, c, d</i>
Unemployed	0.17	0.34	0.16	0.29	0.15	<i>a, c, d</i>
Out of labor force	0.10	0.30	0.20	0.18	0.10	<i>a, b</i>
Retired	0.18					
Disabled	0.12					
Health problem that limits work		0.26	0.12	0.24	0.13	<i>c</i>
Health status, 5 = <i>excellent</i> <i>M</i>	3.22 (1.02)	3.06 (1.26)	3.55 (1.04)	3.73 (.93)	3.73 (1.03)	<i>b, c</i>
Depressed	0.11	0.17	0.12	0.24	0.10	<i>d</i>
Substance use interferes with life		0.09	0.01	0.03	0.01	<i>c</i>
Poor	0.42	0.62	0.37	0.42	0.23	<i>a, c, d</i>
Hardship	0.40	0.66	0.50	0.71	0.46	<i>a, c, d</i>
Foreign born	0.17	0.02	0.15	0.03	0.15	<i>a, c</i>
Race/ethnicity						
Non-Hispanic Black		0.57	0.50	0.64	0.50	
Hispanic		0.19	0.26	0.21	0.25	

	Grandparents in Grandfamilies (1) % or M (SD)	Nonresidential Mothers (Children in Grandfamilies) (2) % or M (SD)	Residential Mothers (3) % or M (SD)	Nonresidential Fathers (Children in Grandfamilies) (4) % or M (SD)	Fathers of Children who Live with their Mothers (5) % or M (SD)	<i>t</i> -Test*
Non-Hispanic White		0.23	0.20	0.12	0.22	
Other		0.00	0.03	0.03	0.03	
Own children living with them		0.56	1.00	0.55	0.77	<i>c, d</i>
Distance to parents ³						
within 2 miles		0.41	0.33	0.44	0.31	
2–30 miles		0.34	0.36	0.39	0.34	
30–100 miles		0.06	0.09		0.08	
100+ miles		0.19	0.23	0.17	0.27	
Frequency of seeing child in last month, # of days ² <i>M</i>						
GP report of mother	9 (11.2)					
GP report of father	9 (10.4)					
Parent's Report		12 (11.2)		12 (9.5)		
<i>N</i>	84	47	3,098	34	2,174	

Note. GP = grandparent.

^a grandparent versus mothers with children in grandfamilies,

^b grandparent versus all mothers,

^c mothers with children in grandfamilies versus all mothers,

^d fathers with children in grandfamilies versus all fathers. Fathers of children who live with their mothers may be coresident or nonresident.

¹ Only asked about mothers (*n* = 54) and fathers (*n* = 38) who have had contact with the grandparent.

² *N* = 32 for the mothers with children in grandfamilies because children are living with maternal grandparents, and *N* = 18 for fathers with children in grandfamilies because child is living with paternal grandparents.

* Denotes statistically significant differences from *t*-tests (*p* < 0.05).

Table 3

Child Characteristics and Well-Being in Grandfamilies

	Grandfamilies M or % (SD)	Not Grandfamilies M or % (SD)	t-Test
<i>Health</i>			
Overall health status: PCG Survey ^{a,b}	4.23 (0.95)	4.37 (0.82)	
Obese: Child survey ^c	0.25	0.25	
Health conditions: PCG survey ^b			
ADD/ADHD	0.20	0.11	*
Developmental delay/retardation	0.06	0.04	
Autism	0.01	0.01	
Other health condition (deaf, blind, heart, limb)	0.10	0.13	
<i>Cognitive</i>			
Cognitive assessments: child survey ^c			
Peabody Picture and Vocabulary Test	−0.07	0.01	
Passage comprehension (Woodcock Johnson)	−0.13	0.02	
Applied problems (Woodcock Johnson)	−0.27	0.02	*
Weschler Intelligence Scale for Children—Digit Span subset	−0.12	0.01	
Cognitive assessment: Teacher survey ^{a,d}			
Social studies	2.76 (0.74)	2.96 (0.86)	
Language literacy	2.49 (1.00)	2.88 (1.04)	*
Math	2.54 (1.00)	2.90 (0.99)	*
<i>Socioemotional</i>			
Externalizing behavior			
PCG survey ^b	0.24	−0.02	*
Child survey ^c	0.13	−0.01	
Teacher survey ^d	0.20	−0.01	
Internalizing behavior			
PCG survey ^b	0.09	−0.01	
Child survey ^c	−0.03	−0.01	
Teacher survey ^d	0.16	−0.01	
Other behavior: Teacher survey ^d			
Cooperation	−0.34	0.02	*
Assertion (plays well with others)	−0.14	0.02	
Self-control	−0.20	0.02	
Approaches to learning	−0.27	0.02	*
Oppositional behavior	0.28	−0.01	
Cognitive problems/inattention	0.40	−0.02	*
Hyperactivity	0.11	−0.02	
ADHD	0.21	−0.02	
<i>School well-being/outcomes: child survey ^c</i>			

	Grandfamilies M or % (SD)	Not Grandfamilies M or % (SD)	t-Test
School connectedness (higher = better)	-0.12	0.00	
Task completion (higher = better)	-0.31	0.01	*
Bullied	0.06	0.00	
Ever repeat a grade	0.31	0.16	*
Delinquency scale	0.28	0.00	*

Note. PCG = primary caregiver.

^aHigher scores are better from a five-point Likert scale.

^bFrom primary caregiver survey, $N = 84$ grandparent caregivers and $N \sim 3,098$ parent or other caregivers.

^cFrom the survey of the child, child response, $N = 79$ for children with grandparent caregivers and $N \sim 3,098$ for children with parent or other caregivers.

^dFrom the teacher survey of the child, $N = 51$ for children with grandparent caregivers and $N \sim 2,064$ parent or other caregivers.

* $p < 0.05$.