# Testimony of

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## Before the

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"Grandparents to the Rescue: Raising Grandchildren in the Opioid Crisis and Beyond"

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Good afternoon, Chairman Collins, Ranking Member Casey, and distinguished members of the Committee. Thank you for the opportunity to testify before you today about the academic research associated with grandparents raising grandchildren. I am Dr. Megan Dolbin-MacNab, Associate Professor of Human Development and Director of the Marriage and Family Therapy Doctoral Program at Virginia Tech. I have been researching and providing services to grandparents raising grandchildren for approximately 20 years. The testimony I provide today reflects my professional views, and not those of Virginia Tech.

Historically and around the world, grandparents have been important sources of emotional and instrumental support to younger generations (Uhlenberg & Cheuk, 2010). There is wide variation in how grandparents enact their roles and the degree of involvement they have with their grandchildren (Uhlenberg & Cheuk, 2010); grandparents raising grandchildren have the most intensive level of involvement. These grandparents hold primary responsibility for all aspects of their grandchildren's care and many live in "skipped generation" households, or homes where the grandchildren's parents are not present (Dolbin-MacNab & Hayslip, 2014). While some grandparents raise their grandchildren within the context of the child welfare system (e.g., 29% of children in foster care live with relatives), the vast majority of grandparents raising grandchildren are outside the child welfare system or raising their grandchildren informally (Generations United, 2016).

### A DEMOGRAPHIC PROFILE OF GRANDPARENTS RAISING GRANDCHILDREN

In the United States, approximately 2.6 million grandparents are primarily responsible for the care of their grandchildren (Ellis & Simmons, 2014). These grandparents play key roles in ensuring the safety and stability of 2.5 million or 3% of all U.S. children<sup>3</sup> (Annie E. Casey Foundation Kids Count Data Center, 2016). Data from the United States Census reveal that grandparents raising grandchildren are a heterogeneous population, representing diverse racial and ethnic groups, and cutting across all income levels and geographic regions. Key demographic characteristics of grandparents raising grandchildren include the following (Ellis & Simmons, 2014; Generations United, 2015, 2016):

58% are employed and in the workforce

<sup>1</sup> Data from the United States Census suggests that approximately one-third of grandparents raising grandchildren are doing so with no parents present in the home (Ellis & Simmons, 2014). The remaining grandparents raising grandchildren coreside with their grandchildren and at least one of the grandchildren's parents. In these multigenerational households, grandparents still have significant caregiving and financial responsibilities for their grandchildren (Baker & Mutchler, 2008).

<sup>&</sup>lt;sup>2</sup> Raising grandchildren informally implies that the grandchild is not involved in the child welfare system and/or that the grandparent does not have a legal relationship to the grandchild. Informal arrangements may appeal to grandparents for financial or relational reasons (e.g., avoiding a contentious custody battle with their adult child), but these arrangements may make it difficult for grandparents to access supportive services (Generations United, 2015), and may offer less security to the grandchild.

<sup>&</sup>lt;sup>3</sup> Data obtained from the Current Population Survey Annual Social and Economic Supplement (CPS ASEC). Estimates reflect a three-year (2013-2015) average. Statistics reflect "skipped generation" homes that do not include the grandchild's parents.

- 26% report having a disability
- 42% have been raising a grandchild for at least 5 years<sup>4</sup>
- 62% are grandmothers raising grandchildren<sup>5</sup>
- 66% are married
- 39% are over the age of 60
- 21% (approximately 1 in 5) have incomes that fall below the poverty line

Although there is great diversity within the population of grandparents raising grandchildren, some grandparents are more likely to be raising their grandchildren than others. According to Ellis and Simmons (2014), "grandparents who live with grandchildren are younger, less educated, and more likely to be divorced or widowed than grandparents who do not live with a grandchild ... Coresident grandparents are also more likely to be in poverty and more likely to be unable to work due to illness or disability compared with grandparents who did not live with grandchildren." (p. 2)<sup>6</sup>.

Additionally, grandparents raising grandchildren are disproportionately represented among racial and ethnic minority groups, though rates of raising grandchildren have increased among White, non-Hispanic grandparents (Ellis & Simmons, 2014; Livingston & Parker, 2010). Of those grandparents who coreside with their grandchildren, "Grandparents who were Asian (15%), Native Hawaiian and Pacific Islander (30%), or Hispanic (31%) were less likely to be responsible for grandchildren than Black (48%) or American Indian and other Alaskan Native grandparents (54%). Forty-three percent of White, non-Hispanic grandparents were responsible for their coresident grandchildren." (Ellis & Simmons, 2014, p. 16).

#### FACTORS CONTRIBUTING TO GRANDPARENTS RAISING GRANDCHILDREN

Grandparents assume responsibility for the care of their grandchildren in response to a variety of intersecting *parental difficulties* and stigmatizing family events including abuse and neglect, incarceration, physical and mental illness, death, military deployment, deportation, adolescent pregnancy, divorce, and abandonment (Hayslip & Kaminski, 2005). *Parental substance abuse*, whether as a result of the crack cocaine epidemic of the 1980s and 1990s or today's opioid epidemic, has long been cited as one of the most common reasons that grandparents raise their grandchildren (Generations United, 2016; Minkler & Roe, 1993). *Economic instability* has also been associated with growth in multigenerational households, including those households in which grandparents are raising grandchildren (Livingston & Parker, 2010). Other relevant contributing factors include norms of grandmother involvement in family life and cultural traditions of familism (Goodman & Silverstein, 2002).

<sup>&</sup>lt;sup>4</sup> Thus, raising grandchildren may be best conceived of as a long-term caregiving arrangement.

<sup>&</sup>lt;sup>5</sup> The number of families in which grandfathers are raising grandchildren continues to be small, relative to the number of grandmothers raising grandchildren (Ellis & Simmons, 2014). Grandfathers raising grandchildren also receive relatively limited research attention. For two exceptions, see Bullock (2006) and Whitley and Fuller-Thomson (2015).

<sup>&</sup>lt;sup>6</sup> Ellis and Simmons (2014) do not distinguish grandparents raising grandchildren from grandparents who coreside with their grandchildren, but may not have primary responsibility for their care.

#### CHALLENGES, STRESSORS, AND IMPACTS ON GRANDPARENT PHYSICAL AND MENTAL HEALTH

## **Challenges and Stressors**

Raising a grandchild impacts all aspects of a grandparent's life. Researchers have consistently documented that grandparents experience numerous challenges and that these challenges are often sources of stress that contribute to adverse physical and mental health outcomes<sup>7</sup>. Commonly reported challenges (stressors) include *poverty* or economic distress (Baker & Mutchler, 2010), the *lack of a legal relationship* to the grandchild<sup>8</sup> (Generations United, 2015), *inadequate housing*<sup>9</sup> (Fuller-Thomson & Minkler, 2003), and *social isolation* (Gerard, Landry-Meyer, & Roe, 2006; Jendrek, 1993). *Strained family relationships* may be another source of stress, and include martial distress (Smith & Hancock, 2010) and conflict with the grandchildren's biological parents over the nature and extent of their involvement with the grandchildren<sup>10</sup> (Dolbin-MacNab & Keiley, 2009; Goodman, 2003; Musil, Warner, McNamara, Rokoff & Turek, 2008).

<u>Parenting</u> is central to the role of grandparents raising grandchildren. Parenting stress merits special attention because it has been consistently and specifically linked to grandparents' psychological distress (e.g., depression) and negative physical health outcomes (Goodman, Tan, Philip, Ernades & Silverstein, 2008; Hayslip, Shore, Henderson & Lambert, 1998; Sands & Goldberg-Glen, 2000; Smith, Cichy & Montoro-Rodriguez, 2015; Smith, Palmieri, Hancock, & Richardson, 2008; Sprang, Choi, Eslinger & Whitt-Woosley, 2015; Young & Dawson, 2003). Parenting grandchildren may be particularly stressful for grandparents, and result in adverse outcomes, for the following reasons:

- Grandparents with <u>age-related health and energy limitations</u> may find it difficult to manage the physical demands of parenting and keep up with their grandchildren's activity level (Dolbin-MacNab, 2006).
- Grandparents who <u>use of ineffective parenting practices</u> (e.g., harsh and inconsistent discipline; Kaminski, Hayslip, Wilson & Casto, 2008; Smith & Richardson, 2008) may find themselves dealing with challenging family interactions and difficult-to-manage grandchild behavioral issues.

<sup>&</sup>lt;sup>7</sup> The negative consequences associated with stressors may worsen as the number and severity of the stressors accumulates. Furthermore, challenges/stressors interact with grandparents' multiple social locations (e.g., gender, class, race, ethnicity, etc.) in ways that may leave some grandparents more vulnerable to negative outcomes (Collins, 2000).

<sup>&</sup>lt;sup>8</sup> When grandparents do not have a legal relationship (e.g., custody, guardianship) to their grandchildren, unless states have health care and education consent laws, it can be difficult for grandparents to obtain health care services for their grandchildren and/or enroll them in school (Generations United, 2015).

<sup>&</sup>lt;sup>9</sup> Grandparents may experience occupancy restrictions, overcrowding, or reside in homes that are not appropriate for children. It may also be difficult for grandparents to afford housing for themselves and their grandchildren (Fuller-Thomson & Minkler, 2003; Generations United, 2005).

<sup>&</sup>lt;sup>10</sup> Grandchildren's parents, especially those parents struggling with substance abuse, may be inconsistent, unpredictable, or experiencing behavioral issues that make contact with grandchildren dangerous or otherwise illadvised (Dolbin-MacNab & Keiley, 2009).

- The <u>generation gap</u> (e.g., related to leisure activities, dating, friends, etc.) between grandparents and their grandchildren can be a source of family conflict and erode the emotional closeness within the grandparent-grandchild relationship (Dolbin-MacNab & Keiley, 2006).
- Children being raised by grandparents often have <u>significant emotional, behavioral, and physical difficulties</u><sup>11</sup> stemming from their histories of trauma (e.g., abuse/neglect, exposure to violence) and other adverse circumstances (e.g., prenatal exposure to substances, chronic poverty). Grandparents may find these difficulties to be challenging to manage (Gleeson, Wesley, Ellis, Seryak, Talley & Robinson, 2009).

## **Impacts on Physical and Mental Health**

Collectively, the challenges and stressors experienced by grandparents raising grandchildren are thought to adversely impact their physical and mental health. In terms of grandparents' *mental health*, there is consistent and substantial research evidence, spanning two decades, that grandparents raising grandchildren experience significant levels of depression (e.g., Hayslip et al., 1998; Minkler, Fuller-Thomson, Miller & Driver, 1997; Musil, Warner, Zauszniewski, Wykle & Standing, 2009; Whitley & Fuller-Thomson, 2017; Whitley, Fuller-Thomson & Brennenstuhl, 2015). These rates of depression have been shown to be higher than those of single parents and those of the general population (Whitley & Fuller-Thomson, 2017; Whitley et al., 2015). In addition, Baker and Silverstein (2008a) found that grandparents' depression is often exacerbated by transitions in and out of raising their grandchildren, while Hughes and colleagues (2007) suggest that, due to chronic stress and other sources of adversity and disadvantage, some grandparents raising grandchildren may be predisposed to depression prior to assuming responsibility for their grandchildren's care.

With regard to grandparents' *physical health*, the research literature paints a more complex picture. Early research suggested that grandparents raising grandchildren experienced compromised physical health, dissatisfaction with their health, and functional limitations (Minkler & Fuller-Thomson, 1999). In a more recent study, using nationally representative data from the Health and Retirement Study, Hughes et al. (2007) "found no evidence to suggest that caring for grandchildren has dramatic and widespread negative effects on grandparents' health and health behavior" (p. 108). That said, the grandparents living in skipped-generations households within this particular study did experience health declines. The authors argue that grandparents' health declines may have less to do with raising grandchildren per se, but are more likely reflective of other risk factors such as poverty, age-related health declines, racial/ethnic minority status, and preexisting health conditions (Hughes et al., 2007; Whitley & Fuller-Thomson, 2017). Additionally, in a longitudinal study comparing grandmothers raising grandchildren to traditional grandmothers and grandparents living in multigenerational

<sup>&</sup>lt;sup>11</sup> Research suggests that children being raised by grandparents fare worse than children from normative samples and children living in other family constellations. Specifically, grandchildren have higher rates of internalizing and externalizing behavior problems and more problems with academic performance (Billing, Ehrle & Kortemkamp, 2002; Pilkauskas & Dunifon, 2016; Smith & Palmieri, 2007).

households, Musil and colleagues (2010) found that grandmothers raising grandchildren reported more initial physical health problems and that the grandmothers' physical health worsened over time, particularly when they moved to higher levels of caregiving (e.g., assuming responsibility for another grandchild). As the findings from these studies collectively suggest, grandparents' physical health is complex and must be understood within its larger personal, relational, and environmental contexts.

While a significant amount of research has focused on grandparents' general ratings of their physical health, some studies have delved into grandparents' health in a more detailed manner. These studies reveal that grandparents raising grandchildren experience a variety of chronic health conditions including obesity, heart disease, hypertension, chronic obstructive pulmonary disease, arthritis, diabetes, and asthma (Whitley & Fuller-Thomson, 2015; Whitley & Fuller-Thomson, 2017). Grandparents may also engage in risky health behaviors including smoking, excessive alcohol consumption, and physical inactivity (Hughes et al., 2007; Whitley et al., 2015; Whitley & Fuller-Thomson, 2017). The presence of these chronic health conditions and risky health behaviors is particularly problematic given evidence that grandmothers may forgo preventative health care (e.g., influenza vaccinations, cholesterol screenings; Baker & Silverstein, 2008b), particularly when they first assume responsibility for their grandchildren. Grandparents may also fail to obtain preventative health care for themselves due to an inability to pay for medical care or because they are prioritizing their grandchildren's needs over their own.

#### A RESILIENCE PERSPECTIVE ON GRANDPARENTS RAISING GRANDCHILDREN

Although the academic research highlights the many challenges, stressors, and adverse outcomes experienced by grandparents raising grandchildren, the experience of raising grandchildren is not entirely negative. The emotional connections that grandparents form with their grandchildren are highly rewarding, as is the opportunity to have a second chance at parenting (Dolbin-MacNab, 2006; Waldrop & Weber, 2001). In addition, grandparents may experience a sense of purpose related to knowing that they are providing their grandchildren with better opportunities (e.g., education, values, stable and safe home life) for a successful and productive life. There are also significant benefits of the caregiving arrangement for grandchildren<sup>12</sup>.

Because not all grandparents experience adverse outcomes and many are able to thrive in the face of significant challenges, researchers are increasingly examining resilience among grandparents raising grandchildren. Resilience can be defined as a "pattern of positive (or the avoidance of negative) adaptation in the context of past or present adversity or risk that poses a substantial threat to healthy adjustment" (Hayslip & Smith, 2013, p. 252; Rutter, 2007; Wright

<sup>&</sup>lt;sup>12</sup> Benefits to grandchildren include a sense of stability and safety, perceptions of a better life trajectory, continuity in relationships with siblings and extend family members, and maintenance of cultural identity and community ties (Dolbin-MacNab & Keiley, 2009; Generations United, 2016). Children raised by grandparents also have better behavioral and mental health outcomes than children raised by nonrelatives (Generations United, 2016).

& Masten, 2005)<sup>13</sup>. According to a resilience perspective, as risk factors (e.g., poverty, health problems, social isolation) accumulate, grandparents become more vulnerable to experiencing adverse outcomes (e.g., depression, health problems). However, interactions of resilient personal attributes (e.g., finding benefits in challenging situations), adaptive processes (e.g., coping or problem-solving skills), and other protective factors (e.g., social support, spirituality) can mitigate the negative impacts of risk factors and reduce grandparents' vulnerability to adverse outcomes (Cohler, Stott & Music, 1995; Hayslip & Smith, 2013; Vanderbilt-Adriance & Shaw, 2008; Wright & Masten, 2005).

Researchers have identified a variety of personal attributes associated with grandparent resilience. These include optimism (Castillo, Henderson & North, 2013), a sense of empowerment (Cox & Chesek, 2012), positive perceptions of available social support and family resources (Musil & Ahmad, 2002; Whitley, Lamis & Kelley, 2016), benefit finding (Hayslip & Smith, 2013), resourcefulness (Musil, Warner, Zauszniewski, Jeanblanc, & Kercher, 2006; Musil et al., 2010), and an ability to positively appraise the caregiving arrangement (Smith & Dolbin-MacNab, 2013). Additionally, adaptive processes such as engaging in active coping or problem-solving (Castillo et al., 2013; Smith et al., 2015) and accessing informal and formal supports (Gerard et al., 2006) have also been associated with resilience and positive outcomes (e.g., reduced depression, enhanced psychological well-being) for grandparents.

Resilient personal attributes and adaptive processes, such as those outlined above, represent promising avenues for intervention, such that practitioners can offer skill training and other interventions aimed at promoting grandparents' resilience. In doing so, practitioners can develop grandparents' resources and build protective factors, with a goal of reducing risk factors and vulnerabilities to adverse outcomes (Dolbin-MacNab & Hayslip, 2014; Hayslip & Smith, 2013). Improving the quality of the larger environments (e.g., neighborhoods, schools, etc.) in which grandparents are raising their grandchildren can also be useful in promoting resilience.

### **DELIVERING SUPPORTIVE SERVICES: OVERCOMING BARRIERS**

Given the many challenges they face, grandparents raising grandchildren are in need of and can benefit from a variety of support services. Support services play a central role in 1) promoting resilience, 2) decreasing grandparents' feelings of social isolation, 3) meeting grandparents' instrumental needs, 4) offering grandparents emotional support, and 5) helping grandparents develop new skills and knowledge (Dannison & Smith, 2003; Gladstone, Brown & Fitzgerald, 2009; Hayslip, 2003; Kolomer, McCallion & Janicki, 2002). Despite these benefits, there is evidence that grandparents raising grandchildren underutilize formal supports (Carr, Gray &

<sup>&</sup>lt;sup>13</sup> Resilience can be conceptualized as existing on a continuum (i.e., grandparents can be more or less resilient) and as being dynamic (i.e., resilience can vary with time and in response to changes in the quality of a grandparent's environment) (Baltes, Reese & Nesselroade, 1988; Dolbin-MacNab & Hayslip, 2014; Hayslip & Smith, 2013; Smith, Dannison & James, 2013).

<sup>&</sup>lt;sup>14</sup> For examples of promising interventions focused on promoting resilience among grandparents raising grandchildren, see Hayslip and Smith (2013).

Hayslip, 2012; Coleman & Wu, 2016; Yancura, 2013). This is likely due to a number of well-established barriers to service utilization, some of which are related to characteristics of the services provided and others of which are specific to the grandparents themselves:

#### Service-Related Barriers:

- Financial or legal <u>ineligibility</u> for services (Burnette, 1999; Fruhauf, Pevney & Bundy-Fazioli, 2015; Smith & Beltran 2003)
- Difficulties <u>navigating multiple agencies</u> and services, including difficulties with logistics such as paperwork and documentation (Smith & Beltran, 2003; Yancura, 2013)
- Negative interactions with <u>professionals who lack an understanding</u> of the needs and experiences of grandparents raising grandchildren, or who are culturally insensitive (Burnette, 1999; Smith & Dannison, 2003)
- Feeling <u>judged by professionals</u> for having failed in raising their own children (Gibson, 2002; Gladstone et al., 2009)

### Grandparent-Related Barriers:

- Lack of trust in social service agencies, and fear of removal of the grandchild from the grandparent's care (Gladstone et al., 2009)
- Sense of <u>stigma</u> or embarrassment related to asking for assistance (Cox, 2009; Glass & Honeycutt, 2002)
- Lack of awareness of available services (Fruhauf et al., 2015)
- <u>Inability to pay</u> for services due to a lack of income or a lack of public assistance (Burnette, 1999; Yancura, 2013)
- <u>Difficulty accessing</u> existing services due to lack of transportation, child care, and/or inconvenient hours and locations (Gibson, 2002)
- Excessive levels of <u>stress</u>, which can make accessing services feel overwhelming or impossible (Burnette, 1999; Sands & Goldberg-Glen, 2000)

Although these barriers have been documented in diverse populations of grandparents raising grandchildren, as a result of the increase in the number of grandparents raising grandchildren in rural areas (Crowther, Ford & Peterson, 2014), the service needs of rural grandparents requires special comment. Unique barriers to service utilization for grandparents in rural areas include 1) higher rates of poverty, 2) limited service options and other community resources, 3) geographic isolation, and 4) loss of grandparents' informal and formal support networks due to economic distress and urban/suburban migration (Bigbee, Musil & Kenski, 2011; Crowther et al., 2014; Robinson, Kropf & Myers, 2000).

Practitioners and policy makers interested in meeting the needs of grandparents raising grandchildren would do well to adopt an ecological approach (Bronfenbrenner, 1979) to conceptualizing policies and programming (Dolbin-MacNab, Roberto & Finney, 2013). This way, it becomes possible to prevent (or mitigate) many of the aforementioned barriers to service utilization. An ecological approach to conceptualizing program and policy development and

implementation entails intentionally addressing each of the following domains, as well as their interconnections and interrelationships<sup>15</sup>:

- <u>Reducing grandparent-specific barriers</u> (e.g., building service awareness, addressing negative helping-seeking attitudes, and building trust in formal support systems)
- <u>Improving program accessibility</u> (e.g., providing transportation and child care, offering incentives for participation, providing home-based services, and offering flexibility in service hours, locations, etc.)
- <u>Educating and training program staff</u> (e.g., providing education about grandparents raising grandchildren, challenging staff biases and stereotypes, and developing staff rapport- and trust-building skills)
- <u>Tailoring services to grandparents raising grandchildren</u> (e.g., developing populationspecific services, improving eligibility of existing services, and coordinating grandparents' multiple service needs)

## **CONCLUSION**

Grandparents raising grandchildren are important resources to their families and communities. Despite the many challenges they experience, the grandparents that I have had the privilege of working with have been highly resilient and deeply committed to giving their grandchildren the best lives possible. I continue to be inspired by their efforts, and the children they are raising. Finding ways to support grandparents raising grandchildren means providing a lifeline to some of our nation's most vulnerable families.

Thank you for the opportunity to appear before you today. I look forward to responding to your questions.

<sup>&</sup>lt;sup>15</sup> For more detailed information about this approach to conceptualizing support services for grandparents raising grandchildren, see Dolbin-MacNab et al. (2013).

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