

# Developing Evidence-Based Approaches for Working with Custodial Grandparents: Findings from a Review of the Literature

## Executive Summary

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## Executive Summary

### 1.0 Introduction

- A review of the research literature on custodial grandparents and grandchildren was conducted as a first phase in the potential development of a framework to guide practice across all RCSD systems, including health, education, disability services and child protection services.<sup>1</sup> Research indicates that grandparent-headed families are generally underserved, and many experience multiple barriers when accessing these services. Developing an evidence-informed approach to working with this population both within and across systems is critical.

### 2.0 Profile

- Canada has seen a sharp increase in the number of grandparents assuming fulltime care of their grandchildren due to issues like the opioid crisis and changes to child welfare policies. (Because children in kinship care tend to experience better outcomes than those in foster care,<sup>2</sup> kinship placements have become the preferred placement for child welfare agencies across Canada).
- While any relative or adult associated with the family or cultural community can serve as kinship caregivers, grandparents provide the majority of kinship care, comprising about 88% of all kinship caregivers in the US.
- Custodial grandparents are diverse and come from a wide range of ethnocultural and sociocultural backgrounds. However, research suggests that a majority are:
  - Single, separated, divorced or widowed;
  - Female;
  - Low income;
  - Informal kinship caregivers (i.e., not formally supported by the child welfare system);
  - Often forced to make changes to their employment (i.e., reduce their working hours or quit their jobs altogether) when they assume parenting responsibility for their grandchildren.

### 3.0 Key challenges

#### *3.1 Conflict with the biological parents and other family members*

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<sup>1</sup> Note: This review did not include identifying practices germane to specific populations (e.g., Indigenous, refugee/immigrant).

<sup>2</sup> For example, they tend to experience: greater placement stability, better mental health functioning, lower risk of re-entering care after being returned to their biological parents, better overall physical and mental health, better behavioral outcomes, greater cultural continuity, increased sense of belonging and greater connection to family and friends.

- Conflict with the biological parent is consistently cited as the biggest challenge for custodial grandparents who often:
  - Feel ‘caught in the middle’ between the demands of their adult child and the requirements of the child protection system;
  - Have difficulty imposing protective restrictions during parental visits, and can feel conflicted as they try to meet the needs of both their grandchild and their adult child
  - Experience feelings of anger and resentment towards their adult child (e.g., resentful that life plans have been interrupted, or that they’re not able to enjoy the traditional role of grandparent, or that they now have less time and energy for their other grandchildren);
  - Experience harassment and abuse from child’s parent if they work with a child protection agency.
- Often, relationships with their spouse, other adult children, and other (non-custodial) grandchildren are also strained when they assume this new role. Grandparents have reported that they feel sorrow, frustration and guilt about having less time and energy for their other grandchildren.

### 3.2 Grief and Loss

- Custodial grandparents are exposed to many losses, including loss of freedom and lifestyle, loss of their hopes and dreams for mid/late life, financial loss or insecurity, and loss of the traditional grandparent-grandchild relationship.
- They are also often dealing with multiple sources of grief, including grief over their child’s inability to parent effectively and grief or loss related to whatever circumstances prompted the need to assume responsibility for the child (e.g., parental death, substance abuse, mental health issues, etc.).
- Their grief is made all the more complex by the fact that their losses are often not openly recognized, socially supported or publicly mourned, a phenomenon known as *disenfranchised grief*.

### 3.3 Parenting Challenges

- Custodial grandparents experience more parenting stress than foster parents.
- Parenting stress among this population can be exacerbated by:
  - Age-related factors such as physical limitations, exhaustion and social isolation;
  - Complexity associated with households where intergenerational disadvantage and transgenerational trauma are present;
  - Lack of training and support – particularly around dealing with challenging behaviors, mental health issues and disabilities;
  - Tensions associated with abruptly and unexpectedly taking on parenting responsibilities
  - Physical and mental health issues.

### 3.4 Physical and Mental Health Issues

- Custodial grandparents experience far more health problems than non-custodial grandparents do, including:

- Twice the rate of clinical depression and anxiety;
  - Worse self-reported physical and emotional health;
  - Worse self-assessed bodily pain, role functioning, activity limitations, physical functioning, and social functioning.
- Because parenting as an older adult is “out of sync with developmental tasks,”<sup>3</sup> this role can also engender enormous stress, dissonance, and ambiguity as grandparents try to navigate relationships in which they are simultaneously parent and grandparent. Sometimes referred to as *time-disordered roles*, this stress has implications for mental health.

### 3.5 Social Isolation

- While social isolation can be a concern for many older adults, it is a particular challenge for custodial grandparents.
- As second-time parents, they no longer fit in as well with others their age, and they are developmentally out of sync with other parents they meet at their grandchildren’s schools or recreational programs. This disconnect, combined with the time and energy demands required to care for their child, can limit their social involvement and impact their relationships with friends.
- Other relationships can also be affected by their new role. For example, family relationships can be compromised by the dynamics that brought the child into care, and community involvement can be impacted by stigma and/or fear of judgment.

### 3.6 Financial stress

- Custodial grandparents are significantly more likely than foster carers to have crippling debt and difficulty paying bills.
- US estimates show that 38% of kinship families live below the poverty line. Grandmother-headed kinship families are especially vulnerable, with 48% of those households living in poverty.
- Because many custodial grandparents do not wish to involve child welfare, they are not able to access services and supports that would help to mitigate financial stresses.

### 3.7 System Barriers and Challenges

- The wide range of systems needed to support kinship children can be overwhelming for grandparents to navigate, and the complexities of program eligibility and requirements are often challenging.
- Systems are often unaware of and/or unresponsive to the needs of this population, and interactions with system authorities can be very stressful for some custodial grandparents.
- Grandparents may underplay their grandchild’s behavior difficulties out of fear that they will appear incompetent and lose custody, thereby limiting the opportunity for providers to identify service needs.

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<sup>3</sup> Neely-Barnes, S. L., Graff, J. C., & Washington, G. (2010). The health-related quality of life of custodial grandparents. *Health & Social Work, 35*, 87-97, p. 87.

- The full report outlines barriers specific to each system (health, disability, child welfare, and education). These include:
  - **Child Welfare:** Low trust; fears related to loss of autonomy and/or having to terminate parental rights; grandparents' past experience with child apprehension; insufficient information offered about services, supports and entitlements; lack of training to help caseworkers understand the unique strengths and challenges of kinship caregivers; lack of parity with foster parents (kinship caregivers feel they are not given as much recognition, support, or financial compensation); lack of cultural appropriateness in child welfare policies and practice; financial pressures imposed by caseworkers (e.g., grandparents are told that their wards need to access more recreational activities, but are given no additional resources to accommodate this).
  - **Education:** Limited ability to navigate digital resources (homework assignments, communications with the school, etc.); generational gap that leaves them feeling disconnected from other parents and from policies that differ from those that were in place when they were raising their own children; often experience schools as unwelcoming and uncaring; lack of legal guardianship creates issues related to consent for field trips, etc.; may have limited capacity to help with homework due to chronic health issues or lower educational status; lack of understanding and/or sensitivity on the part of school staff to multigenerational caregiving situations.
  - **Health:** For those who do not have legal guardianship: 1) Inability to authorize health services or medical procedures when they do not have legal guardianship; 2) Unable to draw on health and dental insurance benefits to pay for services for their grandchild. Other challenges include: scheduling and transportation issues; caregiver's own mental or physical health; grandparents' negative experiences with the health system; stigma associated with mental health services; limited understanding of caregiver strengths and challenges on the part of health professionals.
  - **Disability Services:** Despite their heightened need, custodial grandparents raising children with disabilities experience significant challenges with accessing services and supports. One study found that only "10% of grandparents raising grandchildren with disabilities had contact with an agency providing disability services."<sup>4</sup> Others have found that these grandparents often experience stress when they try to obtain specialty services for their grandchild.

### *3.8 Additional challenges for informal caregivers*

- Research suggests that informal kinship families (i.e., those who are not formally involved with child welfare) experience greater challenges than formal kinship families care and are less likely to receive the necessary services and supports.

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<sup>4</sup> Gallagher, P. A., Kresak, K., & Rhodes, C. A. (2010). Perceived Needs of Grandmothers of Children With Disabilities. *Topics in Early Childhood Special Education, 30*(1), 56–64. <https://doi.org/10.1177/0271121409360826>, p. 62.

- Compared to formal kinship caregivers, they are also at greater risk for: Poverty/financial vulnerability, legal vulnerability, depression, negative outcomes related to well-being, lower life satisfaction, lower satisfaction with parenting.

### *3.9 Additional challenges for grandparents of children with disabilities*

- In more traditional family structures, parents of children with disabilities often rely on grandparents for respite, emotional support and financial assistance; however custodial grandparents don't have this option, and the strain on these caregivers can be significant.
- Compared to grandparents who are raising typically developing children, this population experiences: greater levels of caregiving burden; higher rates of social isolation; greater financial strain and life disruption; higher levels of stress; greater difficulty finding childcare; higher rates of emotional and physical exhaustion; less leisure time; lower rates of physical health; lower life satisfaction and family quality of life; greater levels of exhaustion, burnout, depression.

## **4.0 Existing Frameworks**

- While few practice frameworks have been specifically developed to guide practitioner interactions with custodial grandparents,<sup>5</sup> frameworks related to kinship care are fairly common.
- An analysis of these frameworks identified the following theories as foundational to this work: Attachment Theory; Social Role Theory; Social Support Theory; Life Course Approach; Child Development.
- Practices common to many of these frameworks include: Strength-based approaches; Relationship-based practice; Trauma-informed practice; Child-centred approaches; Cultural humility and responsiveness; Collaboration with families; Need to respect autonomy and not be overly intrusive; Specialized kinship workers; Kinship-specific capacity-building and assessment; Support for caregivers around parental visitation procedures; Supports for addressing conflict among family members.

## **5.0 Promising Practices, Programs and Approaches Applicable to All RCSD Systems**

- Few practices have been rigorously evaluated (i.e., using experimental or controlled designs). The exceptions include kinship navigation programs and peer liaisons. All other practices identified in the literature review are supported by non-experimental evaluations.
- Practices that apply to all RCSD systems can be grouped into seven themes, each of which is very briefly outlined below.

### *5.1 Reducing Access Barriers*

- Kinship Navigation Programs provide an evidence-based approach to reducing access barriers. They are also associated with better outcomes for both children and grandparents, including increased stability, safety and permanency for children, and reduced parenting stress for

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<sup>5</sup> The literature review identified three frameworks specific to custodial grandparents – all from the Education literature.

grandparents. These programs have been shown to be more cost-effective than other services, providing a sound business case for implementation.

- The literature suggests that Kinship Navigation Programs should include the following: needs assessments, resources and referrals, support groups, in-home services, financial support, and parent visitation support.
- Peer liaison programs represent another evidence-based approach to enhancing service utilization and reducing access barriers. Peer liaison workers engage with caregivers on an optional basis, helping to mentor and educate them. They also help to educate service providers on kinship issues, advocate for caregivers needs, and collaborate with community providers to improve services and supports for kinship caregivers. They are associated with a number of positive child and caregiver outcomes.
- Other research-based suggestions for addressing access barriers include using age-appropriate, culturally sensitive strategies; establishing trusting relationships; using a strength-based approach; assisting with completion of forms; working with schools, doctors and religious institutions to engage custodial grandparents; coordinating services; moving away from a 'one-size-fits-all' approach; and being aware of the caregiver's developmental needs (versus solely focusing on those of the child).

### *5.2 Facilitating Social Support*

- Evaluation data suggests that custodial grandparent support groups are associated with a number of positive outcomes, including enhanced coping strategies, more effective parenting strategies, and feelings of increased emotional and informational support.
- In addition to providing support groups, practitioners from all RCSD systems can work with custodial grandparents to enhance their connections to friends, family and community members. This work may involve helping to resolve conflict and assessing risks and opportunities within their social network.

### *5.3 Addressing grief and loss*

- Custodial grandparents are potentially dealing not only with their own grief and loss, but also with that of their grandchild's. Because the grief that custodial grandparents experience is often one that is not socially recognized or validated, acknowledging the sadness and loss that grandparents are experiencing can be an effective first step.
- Grandparents encounter very few people who understand the complex feelings of grief and loss they experience. Therefore, practitioners who can help them recognize and process their feelings and develop greater self-knowledge can be enormously helpful.
- Practitioners across all RCSD systems should consider:
  - Becoming more familiar with dynamics related to disenfranchised grief and ambiguous loss;
  - Drawing out grandparents' perspectives on navigating the significant changes in their lives while anticipating 1) great variation between grandparents and 2) the mix of

seemingly contradictory feelings (i.e., simultaneous grief/loss and joy at being able to care for their grandchild);

- Helping grandparents make meaning of their changed circumstances.

#### *5.4 Providing parenting and behavioural supports*

- Research suggests that evidence-based parenting interventions designed for other populations should be adapted for custodial grandparents.
- Grandparents should be supported to: understand the importance of secure attachment and sensitive parenting; develop practical strategies for managing difficult child behaviors; develop positive disciplinary methods; and learn how to set appropriate boundaries.
- Grandchildren should be supported financially to engage in structured recreational activities, and grandparents should be provided with respite and childcare options.

#### *5.5 Addressing family conflict*

- Conflict between the kinship carer and the biological parent can adversely impact the child, and “boundary definitions” can be difficult in this context. Therefore, providers across all systems should be alert to conflict and boundary-related issues between custodial grandparents, biological parents, and extended family members.
- Practitioners can support grandparents by:
  - Acknowledging the “kinship triad” (grandparent-parent-child);
  - Offering services such as mediation and supervised visitation;
  - Being sensitive to safety concerns that can be exacerbated if grandparents struggle to enforce protective restrictions because of family loyalties;
  - Working to engage birth parents in order to promote successful reunification;
  - Providing legal information and referrals for those grandparents who are struggling with custody and/or guardianship issues.

#### *5.6 Addressing financial stress*

- While the literature focuses primarily on policy shifts related to financial support for this population, it does mention a few things that practitioners can do in this area, including:
  - Familiarizing themselves with the range of financial supports available so that they are able to help caregivers access any supports for which they might qualify;
  - Assisting with applications for financial support and deliver case management services to reduce financial strain;
  - Including economic functioning and stress in assessments of grandparent-headed families;
  - Advocating on behalf of custodial grandparents.

#### *5.7 Addressing the needs of Grandparent-Headed Families*

- Physical constraints, parenting practices, depression and anxiety, and access to resources should comprise elements of needs assessment across all systems.



- Instruments that are used to assess the strengths, needs and parenting skills of foster parents in the child welfare system are not an ideal fit for this population, and ones that are specifically tailored to kinship care should be developed.

## 6.0 System-Specific Practices and Considerations

### 6.1 What Child Welfare Workers Can Do

- Numerous practice recommendations emerged for this system. Some of the key considerations outlined in the report include the following:
  - Offer supports in ways that are not too intrusive and that give grandparents a sense of autonomy and control;
  - Offer emotional support and validation;
  - Acknowledge the fear that many grandparents have about the future. Reassure them that their grandchildren will be cared for after they're gone and assist them with long-term planning, wills and standby guardianship;
  - Recognize the complexity of guardianship and/or adoption given the context of familial relationships and adjust permanency goals accordingly;
  - Acknowledge the complexity of the caregivers themselves and ensure that case management focuses on positive outcomes for the caregiver as well as the child;
  - Support grandparents in interactions with their adult child.
- Child welfare leadership should consider specialized kinship care training for workers, and support the implementation of kinship-only positions.

### 6.2 What Educators Can Do

- A growing body of literature now exists to support schools in their efforts to work with custodial grandparents and their grandchildren. Based on this, overarching principles and approaches can be identified, including the following:
  - Be empathetic and non-judgmental in communications with grandparents;
  - Use language that builds on strengths (e.g., “‘You might already know this...’ and ‘I’m impressed you are so committed to helping your grandchild succeed,’ etc.”)<sup>6</sup>
  - Make the school environment more welcoming by hosting grandparent-only open-houses; soliciting grandparents’ questions and concerns; inviting them to participate in parent-teacher councils; initiating communication that is not problem-based (i.e., sending home positive reports); and acknowledging that due to health and transportation issues, grandparents may participate differently but are still very invested in their grandchild’s education;
  - Move away from one-way, ‘educator-as-expert’ communication to a more collaborative form of communication with custodial grandparents by: “Acknowledging and building on

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<sup>6</sup> Edwards, O. W., & Daire, A. P. (2003). School-Age Children Raised by Their Grandparents : Problems and Solutions. *Journal of Instructional Psychology*, 33(2), 113–120, p. 117.

the wisdom already present in the family,”<sup>7</sup> and treating the caregivers as equals, rather than subordinates.

- The review also identified a large number of specific practices for teachers, school administrators and school counsellors. These practices should be explored through professional development opportunities within the education sector.

### 6.3 What Health Professionals Can Do

- Given that skipped-generation families are at higher risk for physical and mental health issues, it is terribly important for health professionals to be aware of the unique challenges and strengths of this population and to serve as a source of effective assessments, referrals and supports.
- Some of the many health-related practices identified in the literature review included the following:
  - Consider the implications of health limitations within the context of custodial grandparents’ capacity to provide care, and offer resources and strategies for managing those limitations;
  - Routinely screen for depression in custodial grandparents, particularly in those with chronic health problems and/or functional impairments;
  - Include an assessment of social support needs, where possible;
  - Work with multidisciplinary teams to improve grandfamilies’ overall health and well being;
  - Address barriers related to consent (for grandparents who do not have legal guardianship);
  - Promote participation in intergenerational leisure activities and provide suggestions for low-cost recreational options;
  - Explore and address any potential barriers to services (e.g., transportation, insurance coverage, fear of child apprehension, childcare, caregivers’ perceptions of the child’s needs, caregivers’ past experiences, etc.).
- Mental health professionals can:
  - Seek out opportunities to deliver mental health services in schools;
  - Discuss concerns related to the future (i.e., what will happen to their grandchildren when they can no longer care for them) and assist with long-term planning;
  - Provide therapeutic supports to address transgenerational trauma as needed;
  - Assess grandparents’ “appraisals of the situation, such as whether they focus on the stressors, challenges, or potential emotional rewards of caregiving;”<sup>8</sup>

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<sup>7</sup> Tucker, C. (2009). Low-Income African American Caregivers’ Experiences of Being Referred to Mental Health Services by the School Counselor: Implications for Best Practices. *Professional School Counseling, 12*(3), 2156759X0901200. <https://doi.org/10.1177/2156759x0901200311>, p. 247.

<sup>8</sup> Poehlmann, J. (2003). An attachment perspective on grandparents raising their very young grandchildren: Implications for intervention and research. *Infant Mental Health Journal, 24*, 149–173, p. 154.

- Help them to focus on positive aspects associated with aging and find meaning in parenting;
- Identify risks related to intergenerational patterns of trauma and relationship dysfunction;
- Build the capacity of custodial grandparents to respond therapeutically to children with disrupted attachments.

#### 6.4 What Disability Services Can Do

- The literature review identified a large number of practices and considerations for those working in disability services, including the following:
  - Ensure access to respite and other services/resources
  - Help grandparents to understand both the diagnosis *and* the child's potential
  - Offer strategies for managing challenging behaviours and treatment protocols
  - Offer strategies for strengthening family and social support
  - Offer peer support groups to discuss common concerns and decrease social isolation
  - Include a grandparent outreach component in special needs schools
  - Provide sector-wide training to help disability professionals better understand the expanded roles and needs of custodial grandparents
  - Help to allay worries about their grandchild's future by providing custodial grandparents with long-term planning information and supports (This may include identifying and funding assisted living options and residential care for adults with disabilities)
  - Help caregivers to develop effective coping strategies

## 7.0 Conclusion

- This literature review provides a basis for developing a multidisciplinary framework for working with skipped-generation families. Next steps might include: a literature review that focuses specifically on Indigenous and immigrant custodial grandparents; an environmental scan to identify existing practices, services and resources; stakeholder consultations; and workshops to collaboratively develop a framework.

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For a copy of the full report, please visit:

<https://www.calgaryandarearcsd.ca/assets/Uploads/General-Resources/RCSD-Custodial-Grandparents-Literature-Review-Final-2019-10-23-1.pdf>.