



A Comparison Study of Grandmothers and Grandfathers Involvement and Support to Mentally Retarded Grandchild

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ABSTRACT: Grandparents acknowledge several benefits when raising their grandchildren. These include a sense of purpose, a second chance in life, an opportunity to nurture family relationships, a chance to continue family histories, and receiving love and companionship. Grandparents also benefit from giving and receiving love, and perceiving themselves as more effective caregiver. An attempt was made to compare the grandmothers and grand fathers involvement and support as a caregiver, as a disciplinarian and as a friend in a family having a mentally retarded child. Families with mentally retarded children from RASS and MORE CBR projects in chittoor district of Andhra Pradesh numbering 200 families with boys and girls of age 6-15 yrs having mild moderate and severe levels of retardation was selected. Out of 200 families only 81 grand parents came forward voluntarily for the study. A designed grandparents involvement inventory comprised of as a caregivers, as a disciplinarians and as a friends was used for this comparison study, the results reveal that the grandfathers roles dominated for some selected areas as care takers and Disciplinarians where as grandmothers roles dominated for the area as friends.

Keywords: Grandmothers, Grandfathers, Grandparents, Grandchildren, Disability, Mental retardation, Care taker, Disciplinarian, friend

I. INTRODUCTION

Grandparents are also being called upon to serve as caregivers for their disabled grand child(ren). An aging caregiver is often thought of as an aging parent caring for an adult child with a disability. Instead, a new and growing population is beginning to garner the attention of researchers and is being referred to as the “skip-generation” (Janick, McCallion, Grant-Griffin, & Kolomer, 2000) caring for grandchildren and in some cases, great-grandchildren. Caregivers of grandchildren with disabilities are overwhelmingly female (e.g., greater than 90%), primarily minority (e.g., African-American, Latino), mostly in their late 50’s to early 60’s, with some high school education or a high school diploma, and from urban areas (Burnette, 2000; Force, Botsford, Pisano, Holbert, 2000; Janicki et al., 2000). In addition, one study indicates that these grandparent caregivers provide daily care for the grandchild for an average of 7 years (Janicki et al., 2000). Most of the children, who are cared for by their grandparents, are male (59%) with an average age of 4.83 years (Janicki et al., 2000). Most of the grandchildren have multiple problems or disabilities. The most common problems are learning disabilities, developmental delays, attention deficit hyperactivity disorder, intellectual deficits, speech or hearing problems, and neurological problems (Janicki et al., 2000; McCallion, Janicki, & Kolomer, 2000).

The most common reason for grandparent custody is parental child abuse and neglect (Dubowitz Feigelman, Harrington, Starr, & Zuravin, 1997; Janicki et al., 2000). Grandparent custody is often sought as an alternative to foster placement. Other reasons included teen mothers not being able to care for their child, AIDS, homelessness, unemployment, poverty, maternal imprisonment, and substance abuse (Burnette, 2000; Janicki et al., 2000; Pinson-Millburg, Schlossberg, & Pyle, 1996).

McCallion et al. (2000) identified five challenges for grandparents trying to care for their grandchildren. One issue was related to guardianship. Many families had informal agreements regarding child placement and legal guardianship had not been established, therefore making it difficult for then grand parents to access formal services (e.g., medical care or school support services). A second issue was financial. Many grandparents had difficulty accessing public assistance or emergency cash and Medicaid. A child staying in a home with a care-giving relative most often falls outside the formal child welfare system making them ineligible

for some public benefits such as Temporary Assistance to Needy Families (TANF) (Hegar & Scannapieco, 2000). A third issue with aging grandparents was the lack of time off or respite from the grandchild. A fourth issue surrounded the need for emotional support for the grandparents as many grandparents had not addressed their own feelings about the death, drug addiction, or imprisonment of the absent parent. The fifth issue was that grandparents had difficulty navigating the maze of the educational, judicial, and social service systems. For grandparents caring for children with disabilities, this maze of service systems can be particularly complex. Thus, it will be important for clinicians to assess these five factors when completing a comprehensive assessment. Similar to the findings concerning depression in mothers, grandmothers, who make up 90% of grandparent caregivers, are also susceptible to depression when they are the primary care taker of a disabled grandchild, due to the additional stress of caring for the child (e.g., Dellmann-Jenkins, Blankemeyer, & Olesh, 2002; Kelley, Yorker, Whitley, & Sipe, 2001; Fuller-Thomson & Minkler, 2000). Scales used for measuring depression include the CES-D (Center for Epidemiological Studies Depression Scale (Fuller-Thomson & Minkler, 2000) and the depression subscale of the Brief Symptom Inventory (Kelley, et al., 2001). Other predictors of stress and burden included being African-American, having lower family income, having lower levels of social support, and not receiving welfare support (Kelley, et al., 2001). However, it is not clear if caring for a grandchild with a disability exacts a greater burden for the grandparent than caring for a grandchild without a disability.

In a comparative study of grandparents who were raising a grandchild with a disability to grandparents who were raising a child without a disability, few differences were found between perception of health status and depression (Force et al., 2000). Both groups of grandparents had high average scores on the Center for Epidemiologic Studies- Depression (CES-D) scale (13.9 for the disabled child grandparent and 15.8 for the non-disabled child grandparent, with the clinical cutoff score being 16). One difference found was that grandparents of children with a disability were more likely to need help with school. This makes sense as there is a greater likelihood that a child with a disability needs special support services. Two important themes that have been previously identified that were confirmed by this study: both groups of grandparents experienced low access to potentially useful services and low levels of financial supports. This parallels the McCallion et al. (2000) grandparent study. In another comparative study, Burnette (2000) compared Latino grandparents who were caring for a child with special needs to Latino grandparents who were caring for a grandchild without special needs. Those who were caring for a child with special needs reported greater levels of depression and more unmet service needs than the grandparents who were not caregivers of special needs children.

However, the results of this study need to be interpreted cautiously due to the high number of comparisons and the risk of an inflated alpha yielding a statistically significant difference due to chance. Considering these studies together suggest that caring for a grandchild is stressful, but the results are mixed regarding the level of distress experienced if the child has a disability. Research has typically focused on the negative aspects or burden to the grandparents and its effects on their psychosocial functioning or health. An equally important area of focus is the positive benefits to raising a grandchild with a disability. Positive benefits include greater love and intimacy, finding meaning in the experience of care giving, personal growth, and improved relationships (Gardner, Scherman, Efthimiadis, & Shultz, 2004; Toseland, Smith, & McCallion, 2001). It is still unclear whether a grandparent raising a child with a disability experiences more stress and burden than a grandparent raising a grandchild without a disability.

Borrowing from the parent research, what may be most important is how the grandparent views the care giving experience. Thus grandparents who are able to reframe the situation in a positive way and are more accepting of the disability could experience less stress and burden. However, research with grandparents is still needed to substantiate this assumption. Grandparents acknowledge several benefits when raising their grandchildren. These include a sense of purpose, a second chance in life, an opportunity to nurture family relationships, a chance to continue family histories, and receiving love and companionship (Langosch, 2012). Grandparents also benefit from giving and receiving love (Doblin-MacNab & Keiley, 2009), and perceiving themselves as more effective caregivers (Strom & Strom, 2011).

According to Hayslip and Goodman (2007): “we have not spent as much time and effort in developing interventions which have proven beneficial to needy Grandparents and grandchildren”. Most, literature related to this population either focuses on the grandchildren’s experiences (Downie, Hay, Horner, Wichmann, & Hislop, 2010), or the adjustment of grandparent caregivers as regards coping with stress, role theory, or functional/economic issues (Backhouse & Graham, 2012; Conway, Jones, & Speakes-Lewis, 2011; Musil, Gordon, Warner, Zauszniewski, Standing, & Wykle, 2011). The purpose of this qualitative study is to understand the experiences of both grand mothers and fathers face and the challenges they experienced while raising their Mentally retarded grandchildren, particularly as it pertains to role changes and the effects on familial relationships as care takers, Disciplinary and as a friends.

II. METHOD

2.1:Sample:

A sample of 81 grandparents of age group 65-80 yrs randomly selected from 200 families having a child with mild moderate and severe levels of mentally retardation. The data was obtained from RASS and MORE CBR projects in chittoor district of Andhra Pradesh. The sample consists of both grand fathers (N=45) and grand mothers(N=36) .

2.2 .Tools used :

The grand parent involvement inventory (GPII) was designed to compare the extant of involvement of grandmothers and grand fathers in bringing up the grand children in a families having mentally retardation. This inventory (GPII) comprised of three areas firstly, as a care givers, secondly as a disciplinarians, and thirdly as a friends. The number of items under each area varies from 10-14. A pre-test was conducted for the test of applicability. The higher the score the more was grandparent's involvement. A split half reliability coefficient was calculated and found to be 0.75.

2.3 Procedure:

The designed grandparent's involvement inventory(GPII) was applied to the 81 grandparent's having the mentally retarded grand children of age group (6-15) in a family with mild, moderate and severe levels of retardation. An interview method was adopted to procure the detailed information and data from them. Among 81 grandparents, 45 are grandfather's and 36 are grandmother's and their age ranges from 65-80years.

III. RESULTS AND DISCUSSIONS

Table:III.1

S.no	Respondents	Group	Number
1	Grand parents	65-70yrs	42
		71-75yrs	23
		76-80yrs	16
2	Gender	Grand fathers	45
		Grand mothers	36
3	Education	Nuclear	119
		Joint	81
4	Levels of retardation	Mild	70
		Moderato	40
		severe	90
5	Mentally retarded brother/sister	6-8yrs	50
		9-11yrs	40
		12-15yrs	110

The table above 3.1it self is a self explanatory with regard to the present study social demographic data

For many of the items under the three domains for the grandparents roles which registered percentages over fifty, were considered under more positive impacts. A detailed role comparison of grandmothers and grandfathers as caretakers with each of the items in the table-3.2 showed some important differences with respect to the percentages obtained for item number 1, 2, 5, 4, 3and 8 registered above 50% for grandmothers, where as for grandfathers eight out of 10 items as care-takers scored above 50% as compared to those of grandmothers. Similarly, with reference to bidding good bye, type of service role none of the grandparents scored above fifty percent.

Table 3 - 2. Grandmothers and Grandfathers role percentages as care takers

Sl.No.	Items	Grand Mother		Grand Father	
		No 36	%	No 45	%
1.	CI (Take care about him when family goes out)	33	91.7	34	84.4
2.	C2 (Shows out word affection at him)	32	88.9	41	91.1
3.	C3 (Encourage him to speak correct language)	20	55.6	18	40.0
4.	C4 (Make him feel one among the family)	24	66.7	31	68.9
5.	C5 (P§se/tell him that he is good)	31	86.31	33	73.3
6.	C6 (Explain the reason for doing things)	14	38.9	29	64.4
7.	C7 (Encourage him to act on his own)	16	44.4	28	62.2
8.	C8 (Encourage him to interact with all family members)	21	58.3	28	62.2

9.	C9 (Help him take up responsibility for his things)	17	47.25	27	60.0
10.	C10 (Train him to say good bye as he goes to service centre \ special school)	17	47.25	19	34.1

It was therefore clear that grandfather's roles dominated for some selected items in terms of percentages and they proved to be greater caretakers on MRC. Low percent of recording for bidding good bye was an indication of poor cultural heritage for easy adaptation of unfamiliar friendly traits. Studies were carried out earlier for caretaking roles of grandparents but never distinguished the relative impacts of male and female grandparent's role on MRC in caretaking. In practical society, usually more caretaking roles are exerted by grandfathers as compared to the grandmothers very much like those of fathers and mothers in families with MRC. Sonnek (1983) appraised the roles of grandparents on MRC as care givers, gift givers playmates and as teacher therapists which was somewhat similar to the items of the domains adopted for the grandparents with MRC in the present investigation.

Hornby & Ashworth (1994) in their studies revealed that the supports grandparents during shopping, in household tasks, overnight stays on days of illness and financial assistance to the MRC and their unconditional availability to discuss on the grandchild disability problems. Thus, there was ample moral support from grandparents also as care takers as was evident from many items in the present study on grandparents information schedule.

Table 3-3. Grand –mothers and Grand-Fathers role percentages as Disciplinarians

S.No	Items	Grand Mother		Grand Father	
		No 36	%	No 45	%
1	D1 (Scold and threaten him like teacher therapists)	22	61.0	33	73.3
2	D2 (Encourage him to eat by himself)	17	47.2	27	60.0
3	D3 (Ask him to keep the house clean)	16	44.4	26	57.8
4	D4 (Train him to wear shoes and socks by himself)	17	47.2	24	53.3
5	D5 (Help in child's play habits)	19	52.8	22	48.9
6	D6 (Help him to learn by repeating words)	18	50.0	22	48.9
7	D7 (Make him keep things in right place)	15	41.7	30	66.7
8	D8 (Strict with him about table manners)	21	58.3	31	68.9
9	D9 (Make him join the family meal time)	15	41.7	26	57.8
10	D10 (Train him to make his bed)	17	47.2	22	48.9
11	D11 (Provide help to dress himself)	18	50.0	25	55.6
12	D12 (Make him help others)	20	55.6	24	53.3

Table – 3-3 showed the percentage comparison of grandmother and grandfather as disciplinarians. For six of the items such as DT₁, DT₅, DT₆, DT₈, DT₁₁, DT₁₂ grandmothers scored 50 and above percentages whereas for DT₁, DT₂, DT₃, DT₄, DT₇, DT₈, DT₉, DT₁₀, DT₁₂ grandfathers scored more than 50%. Thus, the grandfathers scored higher percentages for greater number of items as disciplinarians as compared to grandmothers in the presently adopted scale. Teacher therapist roles of grandparents were studied by Sonnek (1986), which was somewhat identical to item number *D₁* in the present study under disciplinarian.

However, in the present investigation under the domain of disciplinarian the grandfathers scored higher percentages as equated with the roles of grandmothers who scored percentages over fifty only for six of the items. Evidently, it was established that MRC would be controlled/disciplined more by grandfathers. The grandmother's role as disciplinarians appeared very meager for many reasons of intimacy, affectionate looks, loose anger and light beating, etc. However, in the present investigation on the grandfathers role as disciplinarians towards their MRC registered for higher number of items with higher percentages for the items, whereas disciplinarian role of grandmothers were far less.

Table. 3-4 Grand-mothers and Grand-Fathers role percentages as Friends.

Sl. No.	Items	Grand Mother		Grand Father	
		No 36	%	No 45	%
1.	F1 (Remained him of his belongings)	21	58.3	27	60.0
2.	F2 (Take him out to zoo, museum temple park etc).	19	52.8	18	40.0
3.	F3 (When travelling shows him important things)	17	47.2	20	44.4
4.	F4 (Encourage him to play with siblings in the family)	20	55.6	25	55.6

5.	F5 (Express admiration on his wearing a new dress)	29	80.6	35	77.8
6.	F6 (Point at objects and ask him to name them)	19	52.6	20	44.4
7.	F7 (Allow him to play with neighbors)	16	44.4	20	44.4
8.	F8 (Encourage him play with other sex)	22	61.1	24	53.3
9.	F9 (Spend some time playing with him)	21	58.3	29	64.4
10.	F10 (Provide play things for him)	18	50.0	21	46.7
11.	F11 (Answers patiently to him to learn)	23	63.9	13	28.9
12.	F12 (Speak slowly and clearly for him to learn)	21	41.7	17	37.8
13.	F13 (Encourage him to share things with other siblings)	17	47.2	32	51.1
14.	F14 (Allow him to listen radio and watch T.V)	10	27.8	8	17.8

Under the domain grandparents as friends 14 items were selected for comparison of the percentages between the roles of grandmothers and grandfathers (Table-3-4). Fifty and above percentages for items were taken for appropriate comparison. Grandmothers scored percentages, over fifty and above for nine (F1, F2, F4, F5, F6, F8, F9, F10, F11) of the items out of fourteen with friendly attitudes, whereas the percentages for grandfathers for the items as friends was scored above fifty percent only for five (F1, F4, F5, F9, F13) of the items out of 14, for the rest of the items their friendly roles were below fifty percent.

Commonly both the grandparents scored higher percentages for *admiring for new dress wearing*, (f_5), for *reminding them about their belongings* (f_1), *in spending time for play with them* (f_9) and for *taking them to outing* (f_2). It is clear from the items of study under the domain friends, the grandmothers showed greater interest for the prospective needs of their MR grandchildren as compared to grandfathers. The reason might be that, many of the grandmothers exhibit readily acceptable friendly smile and peaceful face with attractive convincing and winning looks towards their MR grandchildren, to please their delicate inner sensitivities hidden in them due to fear, psychic mind, ignorance and timidity. The sensitivities of MRC though not connected and useful for normal development their inner point wise hesitation was quite evident by their strongly unwilling acts and blunt ambitions, unfortunately, few studies are available on the physiological and biochemical domains of MRC in relation to their neurone and neuro transmitters functions in their central nervous system which might have assisted more to understand the needs exclusively to friendly approaches of grandparents with their MRC. However, studies carried out on grandparents showed impressively direct aid like buying gifts for their grandchildren (Robertson 1977; Boyd, 1969) and help to defray for the grandchildren's education expenses (Bell, 1968). Grandparents have been found to serve as mediators in the conflicts between parents and their normal children (Schorry, 1960) as well acted more as a friend to their MR and normal children (Radcliffe Brown, 1952).

IV. CONCLUSION

The role of the grandparents during the current era increased the family support. More research is needed which documents the positive reactions of grandparents, their contributions to family adaptation and the effectiveness of interventions designed to modalise their support. Hence in the present study it is clear that grandfather's roles dominated for some selected items under the areas as caretakers and as disciplinarians, whereas the grandmothers dominated more for selected items in the area as friends.

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