Intergenerational African American families, where the grandmother is the primary caregiver of grandchildren and great-grandchildren, are increasing rapidly in the American society. Over the past decade, researchers and policy makers have shown considerable concern over the increases in grandparent maintained households. This concern has stimulated a proliferation of research on grandparent caregiving on a wide range of issues. Among these are the impact of multiple roles on health, reasons for the rapid increase, problems and needs, social structure and extended family relationships, social support, role satisfaction, the impact of the AIDS and crack-cocaine epidemics, and emotional/physical well-being (Brown and Monye, 1995; Burton, 1992; Burton, 1996; Burton and Dilworth-Anderson, 1991; Caliandro and Hughes, 1998; Dilworth-Anderson, 1992; Dilworth-Anderson, 1994; Emick and Hayslip, 1996; Hayslip, Shore, Henderson, & Lambert, 1998; Hunter, 1997; Jendrek, 1994; Joplin & Brouard, 1995; Kivett, 1991; Minkler and Roe, 1993; Minkler and Roe, 1996; Minkler, Driver, Roe & Bedeian, 1993; Pearson et al., 1997; Seamon, 1992; Taylor, Chatters, & Jackson, 1993; Taylor, Tucker, Chatters, & Jayakody, 1993; Wilson, Tolson, Hinton, & Kiernan; 1990. In spite of the rapid increase in grandparent headed households, there is little or no empirical research on African American grandmothers who are primary caregivers of their grandchildren and great-grandchildren.

Multigenerational households are not new in African American families. Although the present trend is seen in all ethnic and racial groups, the increase in grandparent-headed households is most prevalent among inner city low income African American families. A number of problems are responsible for the increase in grandparents assuming the role of parent, contributing to family disruptions and leaving dependent children without adequate support and adult supervision. Often forced to sacrifice both time and money in order to care for their grandchildren, many grandmothers maintain full time jobs. Some must return to work after
retirement. And, in addition to taking care of their own children, they are responsible for taking care of two or more generations, as well as ailing elderly parents and other family members. These problems, exacerbated by a lack of support from formal and informal support systems, make African American grandmother caregivers particularly vulnerable. However, in spite of the social, economic, and health demands faced by African American grandmothers, they accept parental responsibility for taking care of a vast number of children who would otherwise become wards of the state. The purpose of this article is to highlight the dramatic increase in African American grandmother maintained families with specific attention on the problems and their impact on African American families. More specifically, the article will address (1) increase in grandparent maintained families, (2) grandmothers raising a second generation, (3) the consequences of surrogate parenting, and (4) some brief recommendations for research.

Increase in Grandparent Maintained Families

According to the U.S. Bureau of the Census (1997), since 1970, there has been a 77 percent increase in the number of households headed by grandparents. In 1970, 2.2 million or 3.2 percent of American children lived in a home maintained by a grandparent. This number had increased to 3.9 million or 5.5 percent by 1997 (Casper and Brazen, 1998; U.S. Bureau of the Census, 1998; Velkoff and Lawson, 1998). In 1998, this figure had risen to 4 million or 6 percent of all children under 18 (U.S. Bureau of the Census, 1998). The greatest increase was among children with only one parent in the household. This pattern, grandchildren living in households maintained by grandparents with only mother present, increased by 118 percent from 1970 to 1997 (Casper and Bryson, 1998; U.S. Bureau of the Census, 1997). Since 1990, however, the greatest growth has been in the number of grandchildren living with their grandparents only, with neither parent present (Casper and Bryson, 1998; U.S. Bureau of the Census, 1998). The increase in households headed by African American grandmothers is especially noticeable. According to the U.S. Bureau of the Census (1992), African American children are more likely to live in the home of their grandparents than are Whites or Hispanics. In 1992, 12 percent of African American children lived in the home of their grandparents, in comparison to 4 percent of White and 6 percent of Hispanic children (Taylor, Tucker, Chatters, Jayakody, 1997; U.S. Bureau of the Census, 1992).

African American Grandmothers: Raising a Second Generation

In African American families, it is not uncommon for grandparents to assume responsibility for the care of grandchildren and great-grandchildren when a parent is no longer able or willing to care for their children. The high proportion of African American children living with grandparents, grandmothers in particular, reflects a continuing pattern of co-residence and shared caregiving with African American families (Roe, Minkler, & Barmwell, 1994; Stack, 1974; Wilson, 1986). Over the past decade, the crack-cocaine epidemic, HIV/AIDS epidemic, and incarcerations have all contributed to the dramatic increase in the prevalence of surrogate parenting by African American grandmothers. As long as crack-cocaine and AIDS remain a public health threat, this trend is likely to continue and even increase in the next century.

There is an increasing body of literature that addresses the prevalence, causes, and problems of grandmothers raising grandchildren, or surrogate parenting; as well as increased interest in the topic over the last decade. However, very little research has focused on the
prevalence of surrogate parenting in African American communities. Most of the available research has focused on small qualitative samples, addressing issues pertaining to the needs of children, or problems of the biological mother. In addition, U.S. Census data are not available to determine the number of grandparents who have total childcare responsibility for grandchildren whose parents are absent from the home. Although the research is very limited, the scope of the research on surrogate parenting among African American grandmothers includes a number of meaningful issues, such as causes, problems for grandparents, rewards and costs, strengths and needs, roles and functions, social support, extended family relationships, health problems for grandchildren and grandparents among others. The causes and consequences of surrogate grandparenting are important issues to explore.

Causes

A Variety of reasons for surrogate grandparenting in African American communities are discussed in the literature. Among these are drug abuse, incarcerations, divorce, dissertation, death of parent, child abuse, unemployment, teenage pregnancy, and HIV/AIDS (Barnhill, 1996; Brown and Monye, 1995; Burnette, 1997; Burton, 1992; Burton, 1995; Burton and Bengtson, 1985; Burton, Dilworth-Anderson & DeVries, 1995; Caliandro and Hughes, 1998; Donaldson-Northrup, 1994; Dowdell, 1995; Dressel and Barnhill, 1994; Emick and Hayslip, 1996; Hayslip, Shore, Henderson & Lambert, 1998; Honey, 1988; Joslin and Brouard, 1995; Kee, 1997; Ladner and Gourdine, 1984; Larsen, 1991; LeBlanc, London, & Aneshensel, 1997; Lesar, Gerber & Semmel, 1995; Longino and Earle, 1996; Minkler, 1994; Minkler and Roe, 1993; Minkler and Roe, 1996; Minkler, Roe & Price, 1992; Minkler, Roe & Barnhill, 1994; Minkler, Roe, Robertson-Beckley, 1994; Poe, 1992; Pruchno and Johnson, 1996; Sands and Goldberg-Glen, 1996; Schable, et al. 1995; Seamon, 1992). The drug epidemic, AIDS epidemic, and incarcerations are among the most serious reasons for surrogate grandparenting, leaving a devastating impact on African American families and communities. Research shows that African American grandmothers assume responsibility for the care of their grandchildren and great-grandchildren in the case of drug abuse (Burton, 1992; Minkler, 1994; Minkler, Robertson-Beckley, 1994; Roe, Minkler, & Barnwell, 1994; Seamon, 1992; incarcerations (Dressel and Barnhill, 1994); and HIV/AIDS (Burnette, 1997; Caliandro and Hughes, 1998; Dowdell, 1995; Honey, 1998; Joslin and Brouard, 1995; LeBlanc, London & Aneshensel, 1997; Lesar, Gerber & Semmel, 1995; Schable et.al. 1995). According to AARP (1994), African American grandmothers are more likely to be surrogate parents and the number one reason is drug abuse. The cocaine epidemic, incarcerations, and HIV/AIDS are all interrelated, and will continue to present serious problems for African American families, and for grandmothers in particular, who must care for ever increasing numbers of crack babies, children whose mothers are incarcerated, and both mothers and babies with AIDS. A number of problems are associated with special needs children, and many grandmothers are not prepared to deal with some of their problems and needs. In an effort to ensure strong and healthy families, there is a need to understand how these and other social and public health problems influence the general health and well being of our greatest resource -- African American grandmothers.

Consequences of Surrogate Parenting for African American Grandmothers

New problems for grandmothers present new and challenging role responsibilities. Many grandmothers welcome the role of grandparenthood, whereas others view it as an untimely
burden. Surrogate parenting has presented a number of problems for African American grandparents, such as economic, physical, emotional, and educational problems. A small group of studies have investigated psychological, social and economic problems and needs of grandparents who are primary caregivers of their grandchildren (Burton and DeVries, 1993; Kelly, 1993; Minkler and Roe, 1993; Minkler and Roe, 1996).

In their study on surrogate grand, Burton and DeVries (1993) reported that African American grandparents, in general, see their role as necessary for the survival of the family. This role assumption reflects the strengths of grandmothers and the resiliency and adaptability of African American families (Billingsley, 1992). Historically, a very important value in African American families was the importance of addressing the needs of the family and community. For example, it is not uncommon for African American mothers and grandmothers to put the needs of their family above their own. Satisfying the needs of the family is consistent with the satisfaction of their own needs. In fact, the needs of the family are intricately connected to their own identity. This notion is demonstrated in a quote by a respondent in a study by Burton and DeVries (1993):

“I wasn’t raised to think about doing for myself. My grandmother taught me to think about what my family needs more than anything. I feel so bad sometimes because I need to do something for myself. I can’t though. These children need me.”

Placing the needs of children above their own is a familiar theme among African American mothers and grandmothers throughout the literature on precolonial African and American slavery literature. In more recent research on the black family structure, Staples (1994) found that African American women valued their children over their husbands. The strength and survival of African American families is dependent, in large part, on the commitment and unselfish acts of grandmothers.

Although grandmothers “deeply loved and were committed to their grandchildren,” their grandparent roles were not always gratifying (Burton and DeVries, 1993). Some grandparents expressed dismay because there were so many things they had to deal with in providing care for their grandchildren. Concerns involved the permanence of childcare, school, social, and physical activities. Additional problems involved stress related to multiple childcare responsibilities and job related issues for the employed grandmothers. It was also reported that grandmothers did not have time for themselves (Burton and DeVries, 1993). In her study, consisting of primarily white grandmothers, Kelly (1993) made similar observations. The childcare demands placed on African American grandmothers have left many of them socially isolated and lacking in social support.

Although African American families have traditionally been characterized as extended family networks with much cooperation and support, some contemporary studies show that African American grandmothers are not receiving consistent and reliable support (Burton, 1992) from family members. Others studies show a rich support network (Minkler and Roe, 1993), however, social isolation is seen among some of the younger grandmothers who are experiencing role conflict caused by being employed and having childcare responsibilities (Minkler, and Roe, 1993). Other psychosocial responses include feelings of guilt and shame because of the drug or alcohol use of their children. Raising grandchildren with special needs, (U.S. Senate Special Committee on Grandparents, 1992; Brown and Monye, 1995; Burton, 1992: Minkler and Roe,
1993) as well as caring for adolescent children (Kee, 1997), who have their own unique set of needs, all present social and psychological discomfort for African American grandmothers.

In their study of African American grandmothers, Minkler and Roe (1996) have identified consequences of surrogate grandparenting in the areas of health problems, economic difficulties, and the lack of government support. A number of health problems, such as depression, insomnia, hypertension, back and stomach pain, and other problems associated with the physical and emotional demand of childcare have been reported by clinicians (Miller, 1991, Minkler and Roe, 1996). In their study of grandmothers raising grandchildren as a result of the crack cocaine epidemic, Minkler and Roe (1996) also found that grandmothers tended to minimize the severity of the health problems in an effort to show that they were capable of taking care of their grandchildren. Findings from the California-based Grandmother Caregiver Study, Miller (1991) reported declining health after becoming surrogate parents. Other studies have found changes in social behaviors, such as increase in cigarette smoking and alcohol consumption (Burton, 1992; Minkler and Roe, 1996; Minkler, Roe, & Price, 1992).

The health problems of African American grandmother caregivers are often exacerbated by financial problems. African American women have traditionally occupied low paying jobs, often without good retirement benefits. Although they suffer financially, African American grandmothers make a sacrifice to become surrogate parents. As reported by Minkler and Roe (1996), grandparents must sometimes spend savings, or make other sacrifices in an effort to adjust the role of surrogate parenting. In addition, considering the vast number of grandparents, particularly grandmothers, caring for grandchildren in this country, their is little government support for their efforts. Grandparent caregivers do not get the type of financial support as do foster care providers. As reported by Minkler and Roe (1996), grandparents raising grandchildren are denied such benefits as psychological counseling and clothing allowance which are available to foster care providers. One may generalize from the limited surrogate grandparenting research that African American grandmothers have had some specific problems and needs in regards to health, economic, and social issues that need additional policy and research attention.

**Conclusion and Recommendations for Research**

It is clear that changing demographic and socioeconomic trends have drastically influenced the structure of African American families (Billingsley, 1992). Grandmothers’ roles will change along with societal changes and changing family structures (Burton and Dilworth-Anderson, 1991; Dilworth-Anderson, 1992). As we approach the new millennium, there will be a steady increase of older women, many grandmothers, assuming the role of head of households in spite of the social, economic, and health demands they might encounter. It is not easy to overlook the current stressors and problems that grandmothers experience while functioning as surrogate parents to their grandchildren. With the increase in HIV/AIDS, crime, crack-cocaine usage and incarcerations of adult child, custodial grandmothers face escalating financial and social burdens.

Currently there is very little research on the problems and issues of African American grandmothers raising their grandchildren and great-grandchildren. Not much is known about the incidence and prevalence of of this population. Generally, studies have not included African American grandparents in significant numbers, and those studies which have focused exclusively on African American grandparenting are small and qualitative in nature. Qualitative studies
make important contributions, however, to date empirical studies, which allow one to make generalizations, are non-existent. Surrogate parenting among grandmothers is still relatively new and is open to exploration. In addition to the research issues stated above, the following may also be considered by social scientists: (1) the impact of raising grandchildren on physical and psychological health, (2) the educational needs of African American grandmothers, (3) the impact of incarcerations of adult children on grandmother caregivers, and (4) the impact of HIV/AIDS and drug abuse on caregiving among African American grandmothers. There is an urgent need for social scientists to study the scope, nature and magnitude of the issues included in this paper. If we are to ensure strong and healthy families, we need to know more about the daily lives of African American grandmothers, and the impact of structural factors on their survival.

References


Caliandro, G., & Hughes, C. 1998. *The experience of being a grandmother who is the primary
caregiver for her HIV-positive grandchildren. Nursing Research, 47(2), 107-113.


U.S. Senate, Grandparents as Parents: Raising a second generation. Special Committee on Aging Serial No. 102-24, 1992.

