

## **CHALLENGES EXPERIENCED BY GRANDPARENTS RAISING GRANDCHILDREN: AN EXPLORATORY STUDY**

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### **BACKGROUND**

Family structures and roles have evolved over time. In South Africa the extended families that characterised the black social structure in the past have been affected by modernisation and urbanisation (Ingstad, Bruun, Sandburg & Tlou, 1992:379; Department of Welfare and Population Development, 1997:58). The typical family, where the older persons were part of the extended family, was replaced with a new kind of family. Modernisation, which led to the migrant labour system, meant that younger men left their parents, wives and children in the rural areas to look for jobs in the mines and factories in towns and cities. Furthermore, people started to rely less on subsistence farming, and young women also joined men in seeking jobs in the cities and on commercial farms. This led to a situation where grandparents and younger children remained in the rural areas, while younger members of the communities sold their labour where job opportunities existed. However, factors such as unemployment and low wages have also resulted in young parents shirking their responsibilities of providing financial care for their children, so that many grandparents have been forced to take over not only the physical care of their grandchildren, but are also expected to provide for all the other needs of the grandchildren. This full-time responsibility for their grandchildren has proven to be strenuous to the elderly care-givers.

In the United States of America the increasing incidence of grandparents raising their grandchildren also caught the attention of the media and policy makers in the 1990s (Glass & Huneycutt, 2002:139-140). As in South Africa, a growing number of grandparents has assumed the responsibility of raising grandchildren in the United States because of a rise in the divorce rate, increasing drug abuse, desertion and death (DeToledo & Brown, as cited by Glass & Huneycutt, 2002:140; Janicki, McCallion, Grant-Griffin & Kolomer, 2000:36; Wallace, 2001:127; Weber & Waldrop, 2000:28; Waldrop & Weber, 2001:461). Sadly, the role of grandparents has not been adequately documented and acknowledged in South Africa. Factors that have significantly affected the family structure and the roles within families are, among others, teenage pregnancies, high divorce rates, alcohol and drug abuse, high levels of unemployment and unnatural deaths such as those related to domestic violence as well as HIV/AIDS (Department of Welfare and Population Development, 1997:58).

South Africans of all race groups and social classes have been affected directly or indirectly by social problems such as unemployment, teenage pregnancy, HIV/AIDS, alcohol and substance abuse, domestic violence and high divorce rates. These problems have been studied to determine how they affect children, women and to a lesser degree the family (Kelly, Yonker, Whitley & Sipe, 2001:28; Makofane, 1999). Because of ageism very little, if any, attention has been paid to how these problems affect the older persons and the contribution that older persons make to address such problems. Adopting a view that sees ageing as a problem does not truly reflect the resilience of grandparents who take up the challenge of "parenting" their grandchildren.

This study was conducted in Mankweng Township, which is situated 25 km east of Polokwane City. In the past decade the township has grown threefold, with three more zones added to the two that had been established in the 1960s and the 1980s. The township was primarily occupied by people who were employed at the University of Limpopo, then known as the University of the North. As the area developed, people from rural areas around GaMamabolo relocated to Mankweng; schools and businesses multiplied, and an academic hospital was established. This led to the current community, which consists of the affluent, the working class and people with strong traditional ties as well as the poor. There is a mix of nuclear as well as extended families from all ethnic groups, especially Sotho-, Venda- and Shangaan-speaking people, hence the name Sovenga, which is the name of the local post office. Although the level of unemployment is not known, most people are employed at the University of Limpopo, in government offices and local businesses, while others are working in town both as professionals and unskilled labourers. The levels of HIV/AIDS are not known, but from the number of graves of people younger than forty years in the last five to ten years, one can assume that the pandemic is reasonably widespread here. Furthermore, the organisation People Living with AIDS (PLWA) as well as home-based care is active in the community. However, one does not hear people talking openly about AIDS, nor do people talk about their HIV status. It is not known why this is the case, even though there are programmes to educate and offer services to infected and affected persons.

### **FAMILY STRUCTURE AND THE CHALLENGES OF GRANDPARENTING**

Family structures differ significantly from society to society. Of the various types of families, the nuclear and extended families are the most cited types. For example, the nuclear family which consists of a mother, father and their children is viewed as the ideal South African family among upper socioeconomic classes. Extended families consist of three and more generations (Popenoe, Cunningham & Boulton, 1998:274). From a life-span perspective, which upholds the existence of the nuclear family, it is expected that when children become adults they should establish their own homes and become independent. However, as a result of divorce, deaths (Popenoe *et al.*, 1998:274), teenage pregnancy and cultural practices, extended families are typical among Africans.

Armour (1995:37) acknowledges that families in later life are required to make shifts in generational roles, which are brought about by loss through death or ill health. Although roles shift because of changes that affect individuals in later life, such as retirement, death or ill health, older persons do not expect to assume parenting roles in their old age. Although the life-span perspective assumes that individuals are presented with a predictable set of new social expectations and a new set of problems that accompany them, social problems such as divorce and HIV/AIDS are affecting an increasing number of people and thrust older persons into situations that they are ill prepared to assume.

Whereas Carter and McGoldrick (1989:20) maintain in their model of a Family Life Cycle that grandparenthood can offer a new lease on life and opportunities for special relationships without the responsibilities of parenthood, when teenage mothers and adult children are unable or unwilling to raise their own children, grandparents may have to parent their grandchildren out of necessity. In such situations they are deprived of a chance to choose the type of grandparenting role they want to play. Neugarten and Weinstein (as cited by Louw, 1991:556) describe the styles of grandparenting that

grandparents assume, namely *fun-seeking*, *formal*, *the substitute*, *the family wisdom* and *the distant* styles. Grandparents who are raising grandchildren, particularly if they are forced by circumstances to do so, will automatically become substitute parents.

Assuming a parenting role in old age presents challenges for older persons as they are expected to deal with the physiological changes associated with growing old such as menopause, physical deterioration and reduced income, which are usually associated with retirement and old age. These changes can be taxing and challenging for the older person as an individual without the added responsibility of caring for others. Furthermore, the generation gap is more profound between grandparents and grandchildren than between parents and children. Thus older persons cannot rely on past parenting experiences to be able to raise their grandchildren. It is against this background that it is imperative to study problems that grandparents, especially those who are aged, face in raising grandchildren.

The aims of this exploratory study were:

- to determine factors which lead grandparents to assume parenting roles;
- to explore the challenges that grandparents raising grandchildren face;
- to analyse support systems these grandparents utilise to cope with the challenges; and
- to yield seminal information to guide future research.

## **METHODOLOGY**

### **Design**

The reasons why grandparents assume the primary responsibility of raising grandchildren are emotionally charged and potentially difficult to understand. This fact required the researcher to gain the trust of the respondents. For the purpose of this study the exploratory design was selected in order to gain an insight into the phenomenon as well as to provide an initial familiarity with the issue of grandparents raising grandchildren (Babbie, 1998:90). The study involved qualitative research methods, which encourage the meaningful expression of difficult and personal experiences by the participants (Weber & Waldrop, 2000:31).

### **Sample**

In this study a purposive sample was selected through contacts that the researcher made with the respondents and key people who knew them. All the respondents were selected from Mankweng Township. In a number of instances the researcher approached older persons whom she knew were primary caregivers for their grandchildren. In other instances she approached relatives and friends of the older persons with whom she first discussed the intended study. The respondents were also recruited in churches and at the pension pay-points. If the older person was willing to be interviewed, the researcher conducted the interview. The purpose of the study was explained to the respondents, while they were also informed that they were free to stop the interview or discontinue with the interviews should they feel uncomfortable about proceeding. The researcher recruited participants from the community and not from welfare agencies. This decision was taken in order to reach those members of the community who might not have been

aware of the services around them or those who had chosen not to seek help from social workers.

The sample was drawn from families where grandparents were the primary caregivers. Only older persons who were not gainfully employed were recruited for the study. Grandparents whose adult children were uninvolved or had been absent for more than three months and were irregular in their contacts with their children, thus making the grandparent the primary caregiver, were also included in the sample. Of the grandparents who were recruited, only 14 agreed to participate in the study. A total of 12 grandmothers were used as respondents, as two grandparents were used to pilot the interview schedule and were thus not included in the main study. Most of the respondents were widowed; only two of the respondents were living with a spouse, but the spouses were not interviewed. Only the grandmothers were interviewed, as they were providing the majority of care and were more involved than their spouses.

### **Data Collection**

Semi-structured, face-to-face interviews were conducted by the researcher at the homes of the respondents. The researcher visited prospective respondents to recruit them as well as to explain the purpose of the research and to make arrangements for conducting the interviews. The interviews were conducted at a time that was convenient for the interviewee and lasted 60-90 minutes each. The interviews took place from May to June 2003. The researcher used the interview technique in which the stem "I would like to learn about..." was used to allow the respondent to tell the story in her own way. The researcher guided the interview at certain times where lead questions were asked. The respondents were asked to explain what had led them to assume the responsibility of raising their grandchildren. They were also asked to explain challenges they faced as a result of raising their grandchildren, the support systems that were available to them to minimise the strain of raising their grandchildren as well as to share with the researcher what they thought should be done to minimise the strain of raising grandchildren. However, the questions were limited to encourage the giving of more details or to seek clarification.

Ten respondents allowed the interviews to be audio-taped, while two declined to have the interviews recorded. The researcher respected their choices and relied on note taking. The researcher kept note taking to the minimum during the interviews and compiled detailed notes immediately after the interview. The interviews that had been recorded were transcribed as soon as possible after each interview, while the data were analysed manually.

### **Instrumentation**

An interview schedule was constructed consisting of closed questions to capture demographics as well as open-ended questions to capture events that had led to the respondents' assuming a parenting role; discussions of how parenting had affected their life styles; and the challenges they were facing. The instrument was piloted with two prospective respondents, who shared the characteristics of people who finally served as respondents. This was done to determine the clarity of the questions and the validity of the instrument. The respondents who were used for piloting were excluded from the sample of the actual study. The purpose of testing the validity was to ensure content and face validity. The types of questions seek to determine if the instrument really measures the concept we assume it is, and also appears to be a relevant measure of

those attributes (De Vos, Strydom, Fouché & Delpont, 2002:166). The interviews were conducted in Sepedi to enable the interviewees to express themselves freely.

### **Verification steps**

According to Cuba and Lincoln (as cited by Babbie & Mouton, 2001:276), trustworthiness is a method of establishing or ensuring rigour in qualitative research without sacrificing relevance. Due to the sensitive nature of the issue under investigation, it was important for the researcher to spend some time with the respondents to build rapport. The researcher initially met all the respondents to recruit and explain the purpose and process of the study. Once the respondents agreed to be interviewed, the interviews were recorded or notes were taken. An independent researcher was involved in reading the field notes and audiotapes to check the accuracy of the transcripts. Half of the respondents were involved in “member checks” (Babbie & Mouton, 2001:277; Creswell, 1994:158), where the categories and themes were taken to them to ask if the conclusions were accurate.

### **Data analysis**

Each audio-taped interview was transcribed verbatim into a word processor document. The two interviews which were not recorded were also transcribed immediately after the interviews. Field notes, observations, the researcher’s comments and a summary of the respondents’ stories were all added to the document. The researcher identified themes and categories for analysis. Once the researcher had completed the coding, she enlisted an independent researcher to verify the notes and information in the audiotapes. A few differences in coding interpretations were discussed before the researcher and the independent researcher reached consensus. Demographic details of the sample are presented in Table 1.

The data indicate that the majority of the respondents were very old, as they fell into the “middle-old” and “old-old” categories as developed by Neugarten (as cited by Louw, 1991:529). Furthermore, more than half of the respondents were caring for more than three grandchildren each. Most of the grandchildren were also in developmental stages that made them physically and emotionally dependent, as they were either adolescents or younger. This could be emotionally and physically taxing for the grandparents as they were likely to be expected to assist their grandchildren with activities of daily living such as bathing and cooking for them.

**TABLE 1**  
**DEMOGRAPHIC CHARACTERISTICS OF THE SAMPLE**

<b>Categories</b>	<b>Number</b>
<b>Gender of the grandparents</b>	
Male	-
Female	12
<b>Age of the grandparents</b>	
60-69	4
70-79	8
<b>Current family type</b>	
Single female-headed family	10
Two-parent family (original marriage)	2
<b>Number of grandchildren cared for</b>	
1-2	4
3-4	5
5-6	3
<b>Ages of grandchildren</b>	
<1 year	-
1-6 years	13
7-12 years	9
13-18 year	7
>19 years	5
<b>Length of time living with grandchildren</b>	
≤ 1 year	
1-5	11
6-10	9
11-15	6
>15	6

### **Results of the study**

The qualitative data were analysed in the following two parts:

- factors that had led the grandparents to assume the primary responsibility for raising grandchildren; and

- challenges they were encountering as a result of being primary caregivers. The results of this study suggest that there are eight themes related to the challenges the respondents' were experiencing, as will be discussed later.

### **Factors that had led the respondents to assume parenting roles to their grandchildren**

Initially some of the respondents assumed parenting responsibility for their grandchildren because of teenage pregnancies. However, their children who had become adults continued to have more children despite the fact that they were unemployed. This forced the grandparents to continue raising their grandchildren. Only one respondent became a surrogate parent to her grandchildren because the parents had died, while another was raising her grandchildren because the mother had left home three years before to look for a job and had infrequent contacts with the family. Teenage pregnancy was thus the biggest cause that leads grandparents to raise their grandchildren. In this study none of the respondents mentioned HIV/AIDS as the cause for their assuming the parenting role. Furthermore, since the majority of the respondents' children are alive, one could rule out HIV/AIDS as a contributing factor to the respondents' raising their grandchildren.

### **Challenges of parenting**

The respondents highlighted various challenges ranging from personal limitations that negatively affected their ability to care for their grandchildren to societal constraints. These included physical, financial and social problems. Other factors that were mentioned were the respondents' feelings about raising their grandchildren. These included the meaning they attached to the parenting role, lifestyle changes and the availability or lack of support systems.

#### **Physical problems**

Only one respondent attributed her poor health to her worries as caused by a daughter who was not always responsible. Almost all the respondents attributed their ill health to old age. They mentioned problems emanating from hypertension, diabetes or both, and complained about general body aches. As a result of their poor health, some of the respondents stated that they could not cope with the physical demands associated with raising a small child. Some respondents mentioned stress associated with their disappointment and worry about their adult children's behaviour as contributing to their deteriorating health status. Wallace (2001:128) maintains that grandparents raising grandchildren are stressed because of feelings of grief, guilt or anger towards their sons and daughters who are not parenting their own children.

#### **Financial problems**

Almost all the respondents complained about the financial strain they were experiencing as they were trying to provide for themselves and their grandchildren. Costs incurred in providing for their grandchildren's health and personal health were expressed as a concern for the majority of the respondents. There were four respondents who had been professionals in their productive years. They experienced less financial strain than those who had never been employed (3) or those who had worked as domestic workers (5). Some of the respondents felt that they were making huge sacrifices for their grandchildren, as they had to forego things that they wanted in order to meet the needs of their grandchildren. Some respondents, for instance, mentioned that they had to employ domestic workers on a full-time basis in order to alleviate the strain of caring for their grandchildren and doing the household chores. This reduced the disposable money that they could have used for their own needs. While they were aware of free health services for older persons and young children, all the respondents indicated that at a certain point they had taken their grandchildren to private doctors as these provide better services than the services provided at the

public clinics. Table 2 below indicates the needs that the respondents had to cater for that put a strain on their finances.

**TABLE 2  
NEEDS THAT THE RESPONDENTS HAD TO CATER FOR WHICH CAUSED  
FINANCIAL STRAIN ON THEM**

Need	Number of respondents
Food, including milk formula	9
Grandchild's education	8
Grandchild's health care needs	5
Own health care needs	3
Child care	2

The following statements indicate the financial strains that were experienced by respondents: "I never had dogs in the house as I could not afford feeding them, but now I have had to acquire one for the sake of my grandson. I also would not have employed a full-time domestic worker, but because of the children I had to. I am unable to attend certain occasions because I have to cater for the needs of my grandchildren." The respondents had to cater for themselves and for grandchildren on a reduced income, especially since they all depended on social grants and pensions. The social grants are supposed to cater for an individual and, when these are shared with others, the individual will invariably experience financial strain (Department of Welfare and Population Development, 1997:72).

**TABLE 3  
SOURCE OF INCOME**

Source of income	Number of respondents
Pension	4
Old-age pension	3
Old-age pension and child-support grant	3
Old-age pension and hawking	2

The investigation revealed that the majority of the respondents were relying on government old-age grants. These respondents were experiencing more financial constraints than those who had made provision for their retirement. Some of the respondents were selling fruit and vegetables to supplement their income, while others were receiving child-support grants. However, some of the respondents had tried unsuccessfully to apply for a child-support grant. One respondent indicated that she had told her daughter to apply for a child-support grant. She, however, indicated that she was not sure if her daughter had applied for the grant, or if she was receiving it and using it for her own needs. "I have been to the government offices to seek help and they told me my grandchildren were too old to receive a child-support grant. I struggle to feed them and they need stuff for school. It is tough." An insignificant number of respondents indicated that their other adult children were providing them with financial



support, although this was not regular and the amounts varied. These respondents indicated appreciation for any assistance they were receiving, particularly from their other adult children who had their own families to provide for.

Only one respondent did not have financial problems, as her children's estate was adequate to cater for the family needs. This was despite the fact that she had worked as a domestic worker and was receiving a pension grant. In addition, one grandchild was working, while only one was attending school.

### **Social problems**

The grandparents who were able to employ a domestic worker indicated that they were able to interact with their peers as they were members of the Prayer Women's League in their churches or members of a luncheon club. The respondents who were involved in small businesses indicated that they were not involved in community activities as they did not have time to do so. Except for the respondent whose children had died, the respondents in general blamed themselves for the daughters and sons who were not maintaining their own children. They mentioned the stigma associated with having raised irresponsible children.

Furthermore, the respondents felt that they were alone in their situation and that they lacked support from other family members and the community at large. Some of the respondents indicated that their other adult children were providing limited financial support but very little emotional support. The sentiment expressed was captured in the following statement: "*My other children feel that I should teach my daughter to be responsible and they blame me for spoiling her. I am not doing this for her, but I'm doing it for my grandchildren.*" All the respondents indicated that they had never discussed the problems they were experiencing with other people, because they felt that they had to provide care for their grandchildren who were their own flesh and blood and, as the following statement indicates: "*I do not discuss my problems with other people as they will only gossip about me. It is a family matter and I should be able to deal with it.*" The respondents do not discuss their family matters with others either because they do not want people gossiping about them or out of a sense of responsibility.

### **Meaning of the parenting role**

The respondents expressed both positive and negative feelings about raising their grandchildren. Some respondents welcomed the responsibility and felt that their grandchildren were a blessing as they kept them company. They expressed sentiments such as:

*"Raising my grandchildren has been a continuation of my adult responsibility. The first grandchild that I raised is married and has her family. Although I did not plan raising my grandchildren, it has been a wonderful experience. I am able to do things with my grandchildren that I did not do for and with my children. I am not as strict as I was with my children and am able to discuss issues with my grandchildren. You see, when you are younger you have to go to work, attend to community matters as well as do household chores. These leave you exhausted and you are too tired to chat with your children."*

*"I started living with my son's family in 1979 because he was concerned that he could not let any of his children come and live with me. You see, I had two*

*sons. The youngest was supposed to live with me, but he passed away. Shortly after I had moved to live with my son's family, they had their second child. When she was a month old, I shared a bed with her. My grandchildren have always been closer to me than their parents. I took them to school and carried them on my back when I attended women's prayer meetings."*

All the respondents indicated that they would have been lonely if they did not have their grandchildren in their lives. Some of the respondents regarded the situation as a second chance at parenting. The parenting responsibilities were thus welcomed by some respondents and accepted as necessary by others.

Some of the respondents whose children were alive indicated that their adult children were not involved in their children's upbringing as they came and went as they pleased, with little consideration for their children. Some indicated that their daughters left home under the pretence that they were going to look for jobs in Johannesburg and never came back. These respondents expressed frustration with their adult children and indicated that they would not want their grandchildren to feel different from other children, hence their willingness to assume a parenting role to their grandchildren: "*You have to be there for the children as they are innocent.*"

### **Parenting as doing one's duty**

Some of the respondents indicated ambivalence regarding having had to assume a parenting role to their grandchildren. Some reflected resentment at their children for being unable to provide for their children. The following sentiments were expressed: "*When my daughter had the first child I was upset but I forgave her, because she said it was a mistake. When she had another child I was heartbroken; however, I cannot ignore these children as they did not choose to be born. I must provide for them and make sure they have a future.*" All the respondents seemed to have accepted the role of being a primary care-giver. However, they complained about the behaviour of the children as expressed in the following sentiment: "*Today's children are lazy and disrespectful as they do not want to help out with household chores*". The respondents in general felt that they had to provide for their grandchildren to ensure that they had a brighter future than their parents. Some of the respondents felt that they would probably have been lonely if they were not raising their grandchildren, as all their children were adults. They also focused on the positive side of parenting their grandchildren as a chance to contribute towards a better future for the grandchildren.

### **Lifestyle changes**

The majority of the respondents mentioned that they had raised grandchildren even at the time their own children were growing up and they indicated that they did not experience any lifestyle changes. These respondents, however, complained about their diminished strength, which was affecting their ability to enjoy raising their grandchildren. Generally the respondents were content with their care-giving role. This is contradictory to Glass and Huneycutt's (2002:146) assertion that, because of their advanced age, grandparents may be at an age where their bodies betray them and their health is questionable. Furthermore, grandparents' routine, finances, social life and emotional state will be radically affected. All the respondents expressed concern about providing for their grandchildren and making sure that their needs were met adequately and that the grandchildren did not feel that they were different from other children. The respondents expressed anger, frustration and disappointment toward their children who

were not involved with their own children. However, the respondent who was caring for her deceased child's children indicated that she had been involved with her grandchildren even when their parents were alive; thus she had not experienced any lifestyle changes since becoming the primary caregiver.

### **Support systems**

In this study the respondents who had more sources of support presented fewer concerns and challenges than those who had fewer sources of support. The following categories of support systems were identified:

- **Financial and material support:** Some of the respondents were receiving financial or material support from their other children, who were not necessarily the biological parents of the grandchildren who were being cared for. One respondent indicated that her adult child who was living with them had been very supportive: *"I don't know how we could have managed without her; she is like a second mother to them. I would have been lost without her. She helps us pay their school fees and buy clothes for them. She really provides for them like they were her own and we have to help because their mother is not earning much."*
- **Physical assistance:** Three respondents who have employed domestic workers mentioned the workers were their support system as the latter were providing respite for them. Domestic workers were mentioned as a support system, despite the fact that employing them caused financial strain to the respondents. They were viewed as a resource, as they lightened the burden of caring and providing for younger children, especially in helping with household chores.
- **Clubs for the elderly:** Two of the respondents who were members of a club for the elderly indicated that, although they never talked about their problems with members of the clubs, being able to get out of the house and do fun things such as exercising and singing gave them time to forget about their troubles.
- **Spirituality:** The majority of the respondents intuitively referred to God as their life line. Reference was made to the power of God several times during the interviews. For them faith provided inner strength and direction in times of trouble. Phrases such as *"These children are a gift from God"* and *"God has helped me raise them"* were mentioned repeatedly in some interviews.

### **Advice that the respondents could give to other grandparents raising grandchildren**

Most of the respondents hesitated to respond to this question and the researcher had to probe in order to get some responses. The respondents felt that they were not in a position to advise others, when they could not solve their own problems. The responses given did not address relationships with their adult children or what others could do to help their adult children become involved in their children's lives. The advice given seemed to suggest that it is acceptable for grandparents to raise their grandchildren. For example, some of the respondents suggested that:

- "Grandparents must save money and make provision for themselves and family members in case they have to step in and raise grandchildren";
- "Grandparents should step in and raise grandchildren so that they can have a better future";

- “Grandparents must attend workshops, participate in group discussions, and listen to the radio and TV in order to be knowledgeable and able to help the younger generations”;
- “Income-generating projects must be established for young adults who are unemployed.”

### **Discussion**

The findings of this study reveal that grandparents derived high levels of satisfaction from their parenting role. The respondents felt that raising their grandchildren gave them a second chance, as they were more involved in the lives of their grandchildren than they had been in the case of their own children. Grandparent-grandchild relationships were thus regarded as being more positive than parent-child relationships. In addition, the life-span perspective provided a promising framework in research in later life, particularly its emphasis on the importance of late-life social relationships in the maintenance of a strong sense of self. Regardless of the financial hardships that most of the respondents were experiencing as a result of raising their grandchildren, all the respondents appreciated having their grandchildren in their lives. Despite the fact that almost all of the respondents were experiencing financial burdens, low-income families were more affected than high-income families. The findings in the SA research were similar to earlier findings by Waldrop and Weber (2001:467) in the US.

Grandparents also have to deal with social and health problems that affect them and their grandchildren. This necessitated a review of the access to resources for older persons caring for their grandchildren.

Grandparents are the first to step in when parents are unable or unwilling to care for their children. This important resource should be assisted and supported to assume caregiving responsibility to minimise the impact of children growing up without parents. However, the findings of this study cannot be generalised to a larger population because of the size of the sample. Further research is needed to determine the challenges and problems that grandparents experience, especially in this era of HIV/AIDS and the high unemployment rate of young parents. Given the positive responses from this study, it would be necessary to test strength-based interventions. Rather than trying to discourage grandparents from becoming surrogate parents, efforts should be made to support and enable grandparents to raise their grandchildren. By reducing the stress related to the parenting role, grandparents will be able to continue making a contribution in life. This will also minimise abuse and neglect of older persons by promoting healthy intergenerational relations.

The Department of Social Development recognizes older persons' role in lending a hand in the fight against HIV/AIDS (*The Department of Social Development brochure*). While it is encouraging to see government acknowledging the contribution of older persons, services and programmes need to be developed to strengthen kinship foster care. Janicki *et al.* (2000:61) suggest that services geared towards promoting kinship foster care must be grandparent-sensitive.

### **CONCLUSION**

Despite the limitations of this study, namely that the findings cannot be generalised to a larger population because of the small size of the sample, the use of a non-probability sampling method and the lack of a control group which would be essential to determine problems associated with being a surrogate parent, valuable insights were developed. Although almost all the respondents in this study indicated that they were experiencing

financial strain, which was aggravated by the responsibility of raising grandchildren, the respondents also expressed satisfaction at being able to provide for their grandchildren. The involvement of grandparents as surrogate parents can be beneficial to both the caregiver and the child. Grandparents are offered an opportunity to make a contribution as well as having companionship, while the grandchildren are raised by their families instead of ending up in foster homes or institutions.

Although the respondents in this study did not assume the responsibility of raising their grandchildren because they were orphaned, this would suggest that older persons could be a resource in addressing the problem of child-headed families as a result of HIV/AIDS. Further research on a larger population should thus be conducted to help understand the challenges experienced by grandparents raising grandchildren. It is essential too to understand the role of grandparents as caregivers, because from the life-span perspective care giving, especially in a parenting role, is not an anticipated role for older persons. Research on the role of grandparents would invariably influence the kinds of programmes that are developed to support this population group to continue to make a positive contribution to their families and society. Instead of having mothers who draw child-support grants that are often not used for the benefit of the child, grandmothers may be provided financial and other essential resources that would minimise the strains of "parenting" their grandchildren. For instance, if the mother's whereabouts are unknown, grandparents could be assisted to access child-support grants on behalf of the children they are raising. This will ensure that appropriate interventions and programmes will be developed.

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