

## Protect, support, provide

Examining the role of grandparents  
in families at risk of poverty



**Equality and  
Human Rights  
Commission**



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# Executive summary



**The Equality and Human Rights Commission and Grandparents Plus are working in partnership to examine the relationship between older and younger people's poverty through the grandparent-grandchild relationship.**

In this report we have focused on several groups particularly vulnerable to poverty (single parent families, families where a child or parent has a disability, black and minority ethnic families and family and friends carers). We explore the shape and nature of deprivation for those grandparents and grandchildren. In particular we consider the scale of grandparents' childcare contribution and how the childcare they provide may increase the risk of poverty for themselves.

This report starts to fill in the gaps in our knowledge and highlights priority areas for future research and policy making.

7m

**grandparents, half of the grandparent population, are aged under 65**

## **Families are changing**

### **Grandparents may not be the oldest generation**

Increased life expectancy along with falling mortality and fertility rates has resulted in longer, thinner 'beanpole' families, with four or even five generations. This means that there are now also more 'sandwich generation' grandparents who may find themselves caring for older and younger generations.

### **Families are more complex**

There has been a growth in the number of single parent and step families which means that grandparents are facing the challenge of maintaining contact with 'absent' grandchildren, or forming relationships with non-biological ones. In these circumstances grandparents may find they are increasingly becoming the primary source of stability in their grandchildren's lives<sup>1</sup>.

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# 26%

of grandparents  
are living in low  
income households

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## Demand for grandparental childcare has increased

The nuclear male breadwinner family is no longer the norm, and we have seen a growth in mothers' labour market participation. Despite increases in formal childcare provision demand for grandparent childcare to enable mothers to enter and remain in employment has increased. This demand is particularly high among low income groups, for whom formal care is prohibitively expensive.

## Grandparents today

Approximately 7 million grandparents, half of the grandparent population, are aged under 65; 4.8 million under 60 and 1.5 million under 50<sup>2</sup>. However, there are significant age differences by socio-economic group; for example, working class women are more likely to be young grandmothers (under 50) than middle class women (22% compared to 5%)<sup>3</sup>.

## Grandparents are getting poorer and child poverty remains high

Although the UK is not alone in having high rates of income poverty among the over 65s it does stand out from its Western European neighbours with a rate of 30%<sup>4</sup>. 2.9 million<sup>5</sup> children were living in low-income households in 2006, a figure unchanged in 2009<sup>6</sup>.

The proportion of all grandparents with grandchildren aged under 16 who are living on a low household income (less than £10,000 per year in 2007) increased by almost half between 1998 and 2007 (from 18% to 26%)<sup>7</sup>.

## Socio-economic status is the biggest driver of grandparental experiences

Evidence suggests there is a link between the grandparent contribution and managing on a low income; for example, working class mothers are less trusting of formal childcare than others, having a strong preference for family care<sup>8</sup>. They are also more likely to have their children at a younger age.

BSA data indicates that working age, working class grandmothers on low incomes are more likely to be providing childcare than other groups. They are also more likely to have given up work or reduced their paid hours to care for grandchildren<sup>9</sup>. Additionally, although they are not the poorest grandparents (the poorest are those who are dependent on pension income), they are also the group most likely to report that they are finding it difficult to cope financially, suggesting that it may be the struggle of combining work and care which is significant.

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Up to

2  
out of  
3

single parents  
in work rely on  
grandparents for  
childcare

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### Single parent families

Lone parent families are twice as likely as other families to experience hardship<sup>10</sup> and are the most vulnerable to persistent poverty<sup>11</sup>.

Evidence suggests this is linked to employment status. Although 57% of single parents are now in work<sup>12</sup>, this is still significantly lower than the Government's 2010 70% employment target<sup>13</sup>.

### Grandparents' role

Grandparents provide high levels of childcare for single parents<sup>14</sup>, with between one half and two thirds of working lone parents reliant on grandparent provided care<sup>15</sup>. This is because they offer flexibility, reliability and affordability and because lone parents trust them.

More research is needed on the impact of this contribution on grandparents' finances and well-being, particularly given the Government's policy of encouraging more lone parents back into employment. This may increase pressure on grandparents to step in to provide the childcare at a time when they are also expected to be working to contribute towards their own retirement.

### Families with disabled children and/or disabled parents

Families with a disabled child are described as 'the poorest of the poor'<sup>16</sup> with over half (approximately 770,000 children in total<sup>17</sup>), living in or near the margins of poverty<sup>18</sup>.

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Only

16%

of mothers of  
disabled children  
are in paid  
employment

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Families with an adult member experiencing health issues and disabilities are also at a heightened risk of poverty, particularly where both parents are affected<sup>19</sup>, or the disabled parent is raising a child alone.

Disability also impacts on a parent's ability to undertake paid work. This is true of parents with a disability and for those caring for disabled children; for example, over 85% of parents of disabled children want to work, but in practice only 16% of mothers of disabled children are in paid employment compared to 61% of all mothers<sup>20</sup>.

### Grandparents' role

Although the body of evidence relating to the role of the wider family where a child or parent has a disability is relatively small<sup>21</sup>, we do know that many grandparents play an important role, providing considerable emotional, practical and financial support<sup>22</sup>, particularly at times of crisis.

Despite this contribution there is a lack of visibility for grandparents in families with either a disabled parent or a disabled child. Their needs are often overlooked, not least by themselves as they repeatedly put their families first. This can leave them feeling unsupported or that they are failing to cope with the situation.

### Black and minority ethnic families

Children from a Black Caribbean, Black African, Pakistani and Bangladeshi heritage are more likely to spend part of their childhoods living in poverty than white children, and children from BME families are at particular risk of persistent poverty.

Certain ethnic minority groups, particularly Bangladeshi and Pakistani families are more likely to experience high levels of unemployment. Only 49% of young Muslim women have a job despite the fact that most of them want to work and have the educational qualifications to do so<sup>23</sup>. Analysis of the Labour Force Survey between 2001 and 2004 found that just over 25% of Pakistani women and less than 20% of Bangladeshi were economically active, compared with over 70% of white British women, while 15% of Pakistani women and 13% of Bangladeshi were unemployed, compared with just 4% of white British women<sup>24</sup>.

Concerns have been voiced about a lack of 'culturally-sensitive' childcare; indeed working Muslim women are more likely than other ethnic groups to use grandparental childcare as a result of this concern<sup>25</sup>.

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Over

30%

of Indian grandparents live in a multigenerational household

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### Grandparents' role

Dominant cultural norms mean that grandparents are often closely involved in their grandchildren's lives. One key difference between families from different ethnic backgrounds is the increased likelihood of co-residence; that is the grandparent, parent and grandchild living in the same household<sup>26</sup>. For example over 30% of Indian grandparents live in a multi-generational household<sup>27</sup>.

Whilst there can be considerable advantages to this (for example, the pooling of resources), these may be counteracted by excess pressure on grandparents to undertake high levels of childcare, conflict over child rearing and a loss of privacy<sup>28</sup>.



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**family and friends  
carers give up  
work when  
they take on  
full-time care**

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We need further evidence across a wide range of black and minority ethnic families in order to better understand the role of grandparents, the impact they have, the differences between different cultures and how cultural identity interacts with socio-economic status.

### **Family and friends (kinship) carers**

It has been estimated that there are more than 200,000 family and friends carers in the UK, most of whom are grandparents<sup>29</sup>. They are caring for children because parents are no longer able to fulfil that role. This may be because of parental alcohol or substance misuse, abuse or neglect, domestic violence, imprisonment, illness or bereavement or a combination of factors. These factors mean that children living in family and friends care are likely to have special educational needs and/or emotional or behavioural problems<sup>30</sup>. These families are at particular risk of poverty.

### **Grandparents' role**

When a grandparent becomes their grandchild's parent they often experience considerable emotional trauma and stress, retirement savings may be depleted and grandparents' work arrangements disrupted (one study found that one third of family and friends carers give up work when they take on full-time care while another 30% reduce their paid hours<sup>31</sup>). Thus there is also a link between being a kinship carer and financial hardship. In fact three out of four family and friends carers experience financial hardship as a result of taking on care<sup>32</sup>.

Taking on the full-time care of grandchildren may also adversely affect grandparent health<sup>33</sup> with grandparent carers more likely than their peers to report difficulties fulfilling daily activities<sup>34</sup>. This can also impact on a grandparent's ability to undertake paid work.

A lack of visibility for these families at national and local government levels has meant they have not been recognised as a group at risk of poverty. They lack access to the practical and financial support which, in accordance with the Children Act 1989, is only available at the discretion of their local authority rather than determined by their needs or the needs of the child they care for.

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The text '1 in 7' is written in a thick, hand-drawn red font. The numbers '1' and '7' are significantly larger than the word 'in' which is positioned between them.

**children in family  
and friends care  
have a disability**

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### **Poverty - multiple risk factors**

Families can often experience a number of factors which increase their chances of living in poverty. For example, one in seven children cared for by grandparents (14%) have a disability compared to one in 20 (5%) of the wider population<sup>35</sup>. One in three (35%) kinship (family and friends) carers are living without a partner. Single parents in hardship are 1.7 times more likely to experience worsened hardship if they belong to a minority ethnic group<sup>36</sup>. Three in 10 lone parents have a sick or disabled child<sup>37</sup>.

### **Conclusion**

We know from evidence on the intergenerational patterns of poverty (for example, the higher incidence of lone motherhood among those who grew up in low income households<sup>38</sup>) that grandparents in the families we have focused on here are more vulnerable to poverty themselves. Yet despite this we find that they make a significant contribution to the lives of their families, protecting them from the adverse effects of poverty, supporting them through hardship and providing for them both practically and financially.

**This report therefore begins to highlight the role of grandparents in families at risk of poverty, one that is significant but little understood, and points to the need to ensure this role is recognised by policy makers and service providers, highlighting areas for concern as we go forward.**

# 01. Introduction and background



## Family lives are changing<sup>1</sup>. Social and demographic shifts have had a significant impact on family life in Britain.

Over the last half century the UK has witnessed dramatic increases in the number of separations and divorces, lone parent families, cohabiting partnerships and reconstituted (step) families. This has brought a growing diversity and complexity to family life; the nuclear male breadwinner family is no longer the norm and we are increasingly calling upon broader support networks comprised of close friends, parents and step-parents, siblings, half- and step-siblings, ex-sons- and daughters-in-law<sup>2</sup>, grandparents and step-grandparents.

The changes we have seen in mothers' employment, population ageing, solo living and global migration "have altered the contours of family lives and personal relationships"<sup>3</sup>. One of these changes, the growth in mothers' labour market participation, has meant increasing demand for childcare services and has placed growing demands on grandparents to care for grandchildren while their daughters work. There is a body of evidence that suggests grandparents are responding to this expectation and providing significant amounts of childcare<sup>4</sup>, for most part, with little or no remuneration<sup>5</sup>.

While we know that the contribution that Britain's 14 million<sup>6</sup> grandparents are making is growing, we are not yet aware of its full breadth or scale<sup>7</sup>, nor do we fully understand how that contribution varies within the grandparent population, or the implications it has for grandparents' financial well-being. Likewise we know relatively little about how grandparenting and grandparents' economic situation has been, and is being, affected by demographic and social change.

The study reported in these pages represents an important step towards starting to fill these gaps in our knowledge and understanding, as well as identifying those areas most in need of further investigation. Bringing together new British Social Attitudes (BSA) Survey data (including a re-analysis of older BSA data where new data is limited) and existing evidence from a broad body of literature, it begins by using descriptive quantitative analysis to compile a picture of Britain's grandparent population and goes on to consider the circumstances and experiences of those who are most vulnerable among this population. In doing so it lays an important foundation for future research examining the relationship between grandparenting and poverty and points to areas of concern for policy makers and service providers.

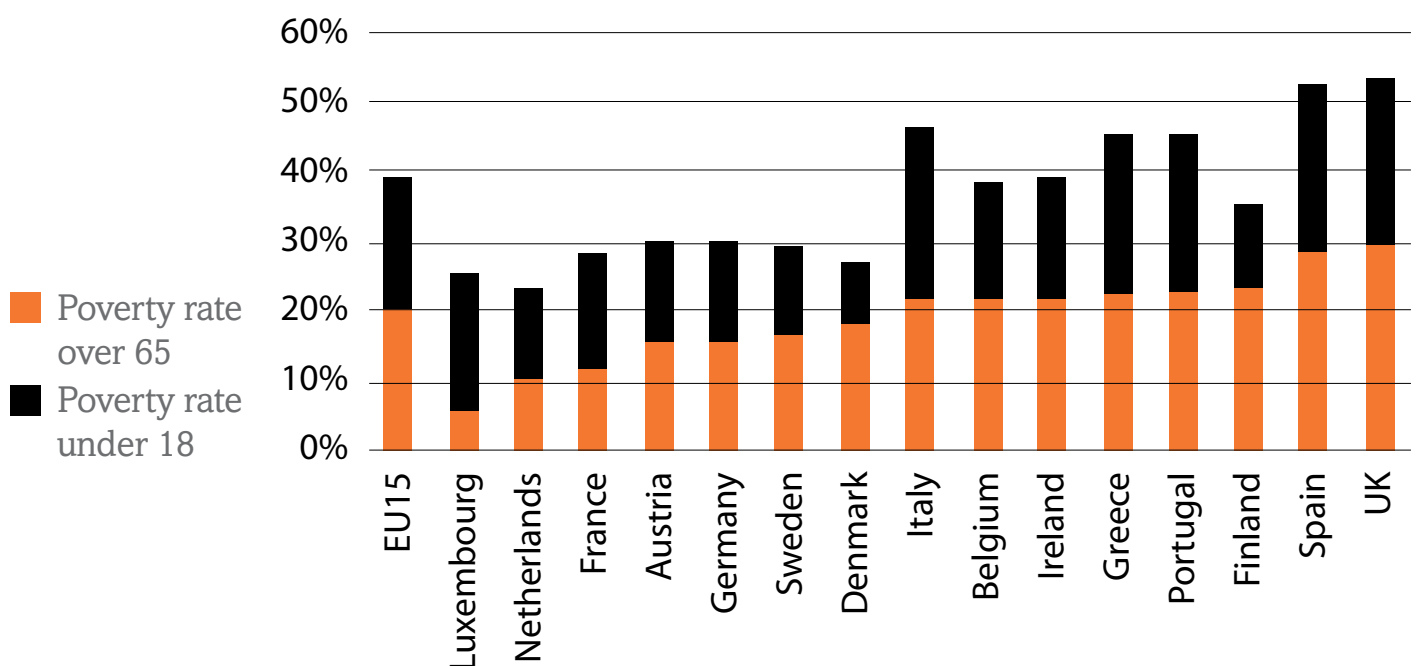
**30%**  
of over 65s are  
at risk of poverty

### Background: Poverty in Britain

Income poverty is a significant problem in today's Britain, with hardship being particularly pronounced for the youngest and oldest members of the population<sup>8</sup>. Although the UK is not alone in having high rates of poverty among the over 65s it does stand out from its Western European neighbours with an 'at-risk-of-poverty' rate<sup>9</sup> of 30% (see figure 1).

Rates of child poverty have fallen since 1997 (600,000 children were lifted out of poverty between 1998 and 2006), but 2.9 million<sup>10</sup> children were still living in low-income households in 2006, a figure unchanged in 2009<sup>11</sup>. Child at-risk-of-poverty rates, while not the lowest in the EU15, also compare unfavourably (see Figure 1).

Figure 1: At-risk-of-poverty rates of those aged over 65 and under 18 (EU15), 2008<sup>12</sup>



Source: Eurostat, EU Community Statistics on Income and Living Conditions, 2009<sup>13</sup>

It is not simply the hardship faced by those currently experiencing poverty that is a cause for concern, but also its ‘permanence’ in some people’s lives. A growing body of evidence now demonstrates the persistence of poverty both across the lifespan (those experiencing hardship as children often going on to be ‘poor’ adults and retired people) and generations of the same family (the ‘cycle of deprivation’)<sup>14</sup>. This serves to ‘trap’ successive generations through disadvantage; the barriers to social mobility, (spatial, educational and health inequalities) meaning that most people remain in the same quarter of the income distribution as their parents<sup>15</sup>. This raises pertinent questions about how we can better understand, and thereby tackle, the intergenerational nature of poverty.

### The study

The dual problems of older people’s and child poverty have proven to be stubborn challenges in the UK. However it is not the purpose of this paper to look specifically at the extent of poverty, but rather to explore the economic implications for grandparents of providing childcare (especially in families who are particularly vulnerable). In particular we consider how grandparents, in reducing experiences of poverty for their grandchildren, might be increasing the risk for themselves.

The first part of our two-staged analysis (the findings of which are overviewed here, but discussed in more detail in the Poor Relation interim report) used new data from the British Social Attitudes Survey to create a picture of grandparents and grandparenting in the UK, and to detail some of the more significant changes that had taken place between 1998 and 2007. Results revealed a number of important trends and inter-population differences relevant to our study of grandparents’ economic well-being; in particular the growing proportion of single grandparents<sup>16</sup> and the relationship between social class, grandparent age and levels of childcare.

This data analysis laid a foundation for the second stage of the study, the literature review. In this second phase we have explored the links between what grandparents do and their propensity for and experiences of economic hardship in greater depth, focusing in particular on a number of grandparent groups for whom these links are especially acute. This evidence has been examined and synthesised to provide a concise overview of what we know about grandparent poverty.

While analysis of BSA data allows us to put together a descriptive account of the UK's grandparent population, and of their broad economic circumstances (identifying those living on very low incomes), it is only through detailed examination of research evidence that we can begin to understand the experiences of those grandparents in groups particularly vulnerable to poverty and the processes that underlie the relationship between grandparent care and economic hardship. It is also an important objective of this study to identify those research areas still under-explored, pointing the way towards priorities for future studies.

### **Vulnerable groups: grandparents at particular risk of poverty**

Historically the contribution grandparents make to their grandchildren's lives has been under-estimated and under-recorded. Yet we know that this contribution can vary widely from occasional childcare support through to substantial periods of regular childcare to enable parents to return to work; from grandparents being an ad-hoc source of advice and counselling to critical interventions to avert or manage family crises; from being a ready source of parental support, to fully taking on the parenting role when parents are no longer able to fulfil that role themselves. The cosy (stereotypical) image of the benevolent, middle class grandparent with the resources and time to 'spoil' their grandchildren is familiar for some but it does not reflect the reality for many.

There are also some grandparents who we know are more likely to be misrepresented by this stereotype than others, who are considerably more likely to be playing a larger role in the lives of their grandchildren, and are more likely to be experiencing financial hardship (sometimes as a direct result of this contribution). In particular we consider grandparent support for:

- 1. Single parents** – lone parent families have been identified as being more vulnerable to persistent poverty than any other household type, with these families being twice as likely as others to experience hardship<sup>17</sup>. We also know from previous research that lone parent families rely more heavily on grandparents for childcare<sup>18</sup> and other forms of support.
- 2. Families with disabled children and/or disabled parents** – there is a considerable body of evidence which demonstrates that families with disabled children or adults are more likely to be living in poverty than other families, and that many grandparents offer families and children (be that as disabled parents or as disabled grandchildren) substantial practical and emotional support<sup>19</sup>.

3. **Black and minority ethnic families** – children from some ethnic minorities, including Black Caribbean, Black African, Pakistani and Bangladeshi families, are more likely to spend part of their childhoods living in poverty than white children<sup>20</sup>, while dominant cultural norms of families mean that grandparents are often closely involved in their grandchildren's lives.
4. **Children who cannot live with their parents** – family and friends (kinship) carers are grandparents (note the term also includes other carers such as aunts, uncles and siblings but we focus on grandparents in this study) who have taken on full-time care of their grandchildren. Research shows that three out of four experience financial hardship<sup>21</sup>.

Although little research has been conducted specifically looking at grandparents and grandparenting within these families, we know enough about their significance to understand why it is important to begin to fill the gaps in our knowledge.

### Methods

This study combines two primary methods, descriptive statistical analysis of British Social Attitudes (BSA) Survey data and literature review.

The BSA is an annual survey of 3,300 randomly selected adults, initiated in 1983, to assess changing values, beliefs and attitudes among the British public. Questions cover a wide array of topics from work, religion and government spending, and in 1998, a major survey of grandparenting activity (questions which have been repeated in 2009)<sup>22</sup>. But data about grandparents' demographic and economic characteristics have been collected in all subsequent waves (with data available up to 2007). We have further explored this activity and demographic data by looking at links between grandparenting and respondents' economic circumstances, which were not examined in the original analysis and have published those results in the 2009 interim report.

Literature explored as part of this study comes from both the UK and from further afield (most frequently the US). Literature was identified through a systematic search of the most comprehensive bibliographic databases such as the Web of Knowledge, supplemented by cross-referencing and consultation with experts.

The paper also includes case studies taken from the literature to illustrate some of the issues under discussion as well as the results of roundtable consultations with stakeholders from voluntary organisations<sup>23</sup>, mostly drawn from the disability sector. This supplements the small body of literature on the role of grandparents in families with disabled parents or disabled children.

### Structure of the report

The report begins by taking a broad look at the UK's grandparent population, considering how this has changed over the last decade, and the implications this has for grandparents' economic well-being. This section draws on analysis of British Social Attitudes Survey data and other existing data. The remainder of the findings section comprises a synthesis of research evidence uncovered during the literature review, dealing with each of the 'vulnerable' grandparent groups in turn: those who provide childcare for their single parent children; those who care for disabled grandchildren or children; black and minority ethnic grandparents and those who have taken on full-time care of their grandchildren. It concludes with a discussion of the implications of findings for policy and practice and possible future research studies needed to further our understanding of grandparent care and hardship.



## 02. Britain's changing families



**Increased life expectancy and lower mortality rates mean we are now more likely to grow up knowing our grandparents and they, in turn, are spending longer in their role.**

Additionally increased healthy life expectancy means that grandparents are now better able to have a more active relationship with grandchildren (and great-grandchildren) than in the past.

At the same time changes in the fertility rate (specifically, a dramatic fall between 1970 and 2000)<sup>1</sup> have meant generally smaller families and fewer grandchildren. These two demographic trends have impacted on the structure of families, making them longer and thinner with fewer family members per generation<sup>2</sup> (a formation known as the 'beanpole family'); resulting in a growing number of four (child, parent, grandparent, great-grandparent) and even five-generation families.

These two trends (declining mortality rates and lower fertility rates) have also resulted in Britain's ageing population (a demographic phenomenon common to industrialised countries)<sup>3</sup>. The resulting shift in the dependency ratio – a growing proportion of the population dependent on working age taxpayers – has highly significant economic consequences<sup>4</sup>.

Over roughly the same period of time another shift has been taking place, also changing the shape of Britain's families. While the ageing population represents a vertical shift (a stretching and narrowing), there has also been a corresponding horizontal one, marked by a growth in single parent and step-families<sup>5</sup> (a breaking and re-formation of families). Increasingly couples are choosing to live together rather than marry. Marriage rates reached a historic

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# 45%

the proportion  
of births outside  
marriage

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low of 270,000 in 2008<sup>6</sup>, cohabitation has grown exponentially (trebling over the last 30 years)<sup>7</sup> and the proportion of births outside marriage now stands at 45% (three times higher than during the mid-1980s)<sup>8</sup>.

These combined trends have considerable implications for family life, and for grandparents' roles within it – bringing added complexity for many and greater demands (particularly for caring) on some. Firstly, people are spending longer as grandparents to a smaller number of grandchildren. Increased healthy life expectancy may mean that grandparents are now better able, and/or perhaps under more pressure, to care for grandchildren. Secondly, growing numbers of four-generation families mean there are now a larger number of 'sandwich generation' grandparents, that is, those with both living parents and grandchildren, some of whom will also have dependent children living with them. These grandparents often find they face heightened caring responsibilities – sometimes for three generations. Lastly, family breakdown and reconstitution mean that now, more than ever, grandparents are facing the difficulties of maintaining contact with 'absent' grandchildren, or forming relationships with non-biological ones. Grandparents may also find they are called upon to be a force of stability in their grandchildren's lives<sup>9</sup>; growing levels of fluidity in our family structures mean that grandparents have become the generation of continuity<sup>10</sup> – the family 'lynchpin'.

**Complexity associated with non-traditional family structures is likely to continue into the future, with trends like the rise in extra-marital childbearing and cohabitation expected to persist (it is predicted that the majority of births will be to unmarried women by 2012<sup>11</sup>), and with tomorrow's grandparents being more likely than their own parents to be divorced or remarried.**

## 03. Britain's grandparent population



**Recent estimates indicate that there are 14 million<sup>1</sup> grandparents in the UK.**

However, within this population there is a huge amount of diversity - while some people will become grandparents in their 30s, others might be in their 80s; some will live thousands of miles away from their grandchildren, others will live in the same house; some will see their grandchildren just once a year or less, others will be their grandchildren's sole carer. Therefore it is difficult to talk about 'British grandparents', at least without discussing the inter-population differences.

The Poor Relation, the interim report which preceded this paper in 2009, explored Britain's grandparent population (including these differences) in more depth. Some of the most significant of these findings, as well as those from other studies, are combined here to create a succinct picture of the UK's grandparents.

### **What does the population of grandparents look like?**

- Approximately 7 million grandparents, half of the grandparent population, are aged under 65, 4.8 million under 60 and 1.5 million under 50<sup>2</sup>.
- The average age at which someone becomes a grandparent is shifting and has been variously cited as anything between 47 and 54<sup>3</sup>.
- Approximately three in 20 grandparents were born outside the UK<sup>4</sup>.
- Less than one in 10 grandparents are co-resident with their grandchildren<sup>5</sup>. This proportion rises to three in 10 (30%) for Indian families<sup>6</sup>.

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# 38%

**the proportion  
of working class  
grandparents  
belonging to four  
generation families**

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- 40% of working class women of all ages are grandmothers compared with 22% of middle class women<sup>7</sup>.
- Working class women are more likely to be young grandmothers (under 50) than middle class women (22% compared to 5%)<sup>8</sup>.
- Working class grandparents are more than twice as likely to belong to four-generation families as middle class grandparents (38% compared to 16%)<sup>9</sup>.
- Approximately a third of grandparents report earnings from paid work as their main source of income. A similar (if marginally lower) proportion relies on a state pension<sup>10</sup>.

### **How has this population changed over time?**

- The proportion of the population who are grandparents has been increasing; from 27.6% in 1998 to 28.4% in 2007<sup>11</sup>.
- Like the wider population, grandparents are getting older; the proportions in the oldest age categories (70-79 and 80-97) continued to expand between 1998 and 2007 (from approximately 70% in 1998 to 76% in 2007)<sup>12</sup>.
- The proportion of women aged under 40 who were grandmothers rose from 2.3% in 2001 to 5.1% in 2007 for working class women, but fell for middle class women from 4.5% to 0% over the same period<sup>13</sup>.
- Grandparents are now more likely to be living without a partner; the number of single grandparents (a group that does not include widows) doubled between 1998 and 2007 (from 8% to 15%)<sup>14</sup>.

### **What do grandparents do?**

- Grandparents facilitate family life, providing financial, emotional and practical support<sup>15</sup> and fulfilling a multitude of tasks.
- Grandparents can be influencers – shaping family behaviour. This is partly the result of direct behaviours and partly their influence on what kind of parents their children become<sup>16</sup>. Attachment security, for example, appears replicated across the generations (65% concordance across three generations<sup>17</sup>). Research with parents has shown that they see grandparents as an important source of advice and support<sup>18</sup>.
- Grandparents can act as a living heritage for families and communities, providing a sense of history and identity (personal

and collective)<sup>19</sup>. This can be particularly prevalent in immigrant families, where a grandparent's role may be to educate children in the language and heritage of the country of origin<sup>20</sup>.

- Most grandparents have regular contact with their grandchildren (approximately a third see their grandchildren several times a week<sup>21</sup>). Yet it is estimated that 1 million children have lost contact with their grandparents through separation or divorce<sup>22</sup>.
- One in three families use grandparental childcare each week<sup>23</sup>, one in two single parents<sup>24</sup>.
- Estimates indicate that grandparents provide £3.9 billion of childcare<sup>25</sup>, yet only one in 10 receive any payment<sup>26</sup>.
- In a minority of cases grandparents take on a much larger role - some with full-time responsibility of their grandchildren, others adopting a type of 'co-parenting' role alongside lone parents, something more common among very young parents<sup>27</sup>.

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**grandparents have  
a living parent**

- Many grandparents combine childcare duties with other responsibilities, some with paid work, others with the care of elderly parents/relatives (one in four grandparents have a living parent)<sup>28</sup>; others still raising dependent children (a product of delayed childbearing / extended periods of fertility). As a result of their position in four-generation families, these grandparents are sometimes referred to as the 'sandwich' generation.
- Working age, working class grandmothers on low incomes are more likely to be providing childcare and to have given up work or reduced their hours to care for grandchildren<sup>29</sup>.
- A large proportion of grandparents contribute financially to their grandchildren's upkeep<sup>30</sup>. Nine out of 10 couple families and eight out of 10 lone parents receive some financial help from grandparents (gifts, extras or essentials for the child, or household costs)<sup>31</sup>. Often financial assistance means help with childcare expenses or the costs of education, paying off debt<sup>32</sup> or for one-offs like holidays<sup>33</sup>. However, there are high levels of variability according to the values and income of grandparents and also the circumstances of the grandchild<sup>34</sup>.

### **How are grandparents managing financially?**

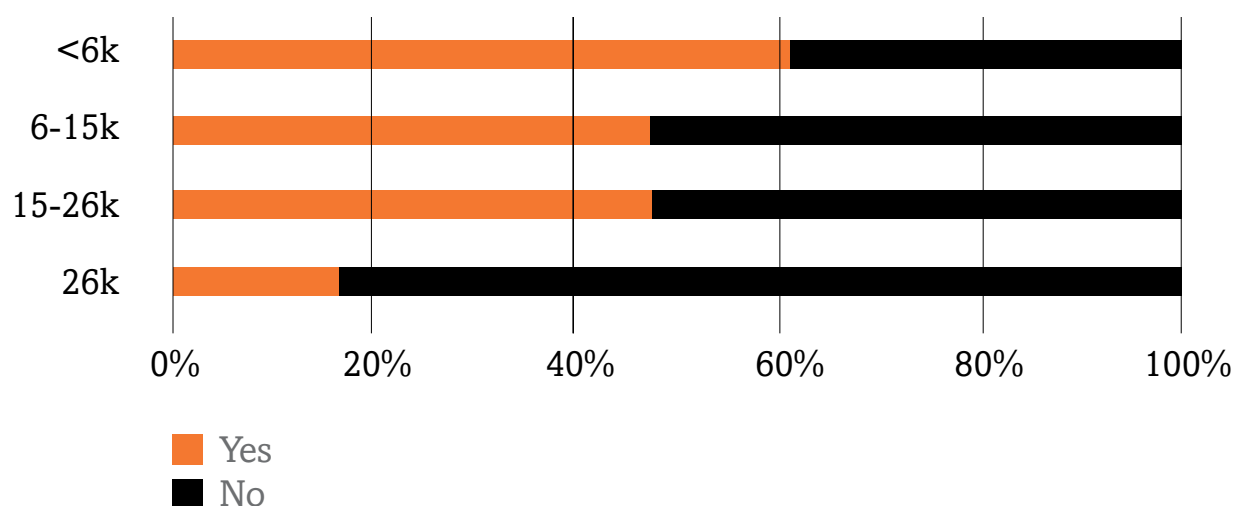
- 30% of those aged over 65 are income poor, the highest rate in the EU15<sup>35</sup>.

- In 2007 26% of the BSA grandparent population had an annual household income of less than £10,000. This proportion had increased by more than a third (8 percentage points) since 1998 when 18% of grandparents fell into this lowest household income band (then £6,000)<sup>36</sup>.
- Grandparents who are members of four-generation families are twice as likely to be managing on a very low income as those in three-generation families<sup>37</sup>. The fact that they are four-generation families is likely to be driven by the lower average childbearing age of lower income families.
- In 2007 lone grandparents were nearly three times more likely to be living on a very low household income (less than £10,000 a year) than partnered grandparents<sup>38</sup>.

### What impact do relationships have on hardship / does hardship have on relationships?

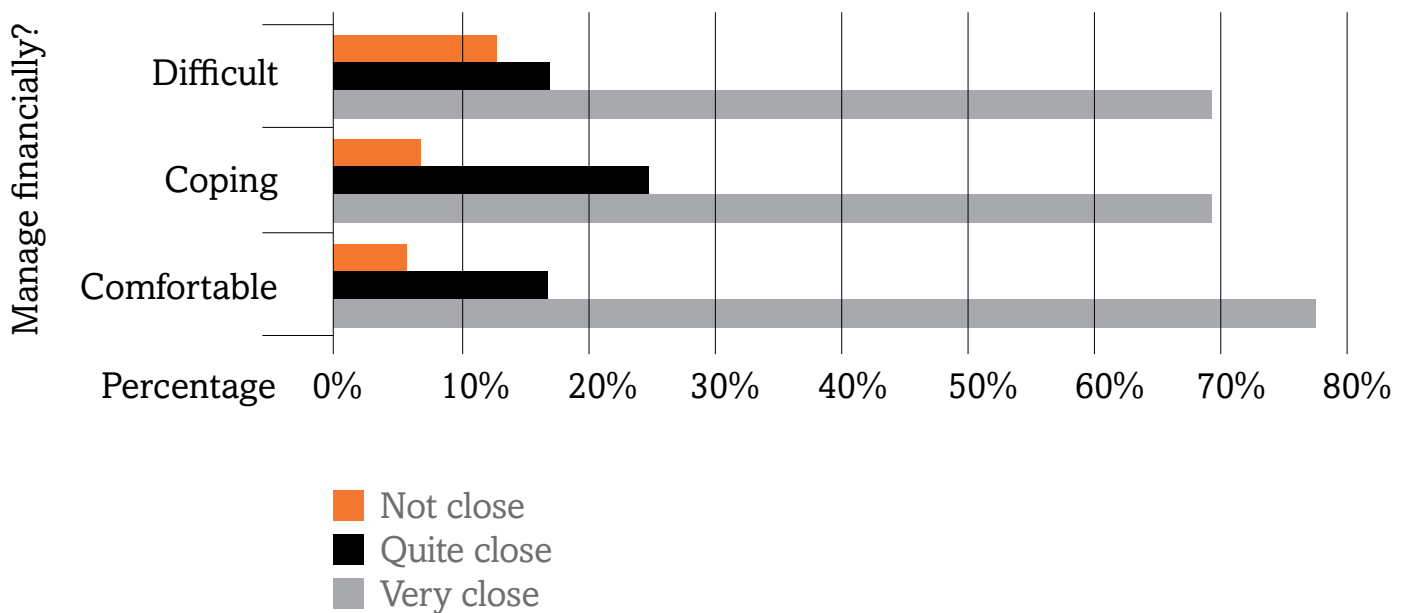
- Grandparents with the lowest household income are those most likely to be providing regular care for their grandchildren (38% of those with an annual income of £6,000 compared to 18% of those with an income of more than £26,000 a year in 1998)<sup>39</sup>. This is, of course, connected to employment.
- Nearly two thirds of grandmothers who had given up work or reduced their hours to care for their grandchildren were managing on a very low household income (£6,000 a year in 1998). These grandmothers were considerably more likely to report that they have experienced economic hardship than those who hadn't given up work<sup>40</sup>.

Figure 2: Grandmothers (of any age) who have given up or reduced work to do grandchild care by household income, BSA data 1998 (rounded percentages)



- Living on a low income is likely to impact on what grandparents are able to do for their families; for instance, they may be less able to provide financial assistance to their children and grandchildren. However, employed but low earning grandparents are more likely to give up work, or reduce hours, to care for grandchildren<sup>41</sup>.
- BSA data suggests grandparents experiencing financial hardship are less likely to feel close to their grandchildren (13% 'not close' compared to 8% for those who are 'coping' and 6% for those who are 'comfortable')<sup>42</sup> (see figure 3). However financial well-being is just one area which appears to influence 'closeness'. Other important factors cited in the literature include the gender and lineage of the grandparent (with maternal grandmothers typically the closest grandparent)<sup>43</sup>, the grandparent-parent relationship and the age of the child<sup>44</sup> – these factors are also associated with the amount of grandparent-child contact.

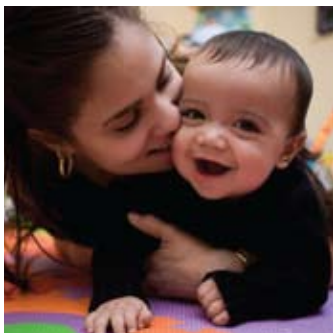
Figure 3: Grandparent closeness to their grandchild by experience of financial hardship, BSA data 1998 (rounded percentages)



Grandparents are an essential part of the modern family, a source of stability and continuity and the providers of both practical and financial support for their children and grandchildren. Increased healthy life expectancies and growing pressures created by female employment and four-generation families mean that grandparents may be doing more today than in the past. Their circumstances appear to be changing too, with a widening gap between those grandparents managing on a very low income and others. While we can establish fairly little about this lowest income group from our statistical analyses, there is a body of literature that considers those groups most likely to experience economic hardship. It is this literature that we turn to now.



## 04. Single parent families



**There are well-established links between single parenthood and poverty; the 3.1 million children belonging to single parent families (24% of those growing up in the UK<sup>1</sup>) are nearly twice as likely to experience economic hardship (48%) as the wider population of children (27%)<sup>2</sup>.**

Furthermore this poverty is more likely to persist over time than in other types of household: “of all households, those headed by lone mothers with dependent children are most vulnerable to persistent poverty and deprivation”<sup>3</sup>. Also significant are the links identified between the experience of childhood poverty and lone parenthood – those who have grown up in poverty being more than twice as likely to become lone parents<sup>4</sup> as those with no experience of childhood poverty. This implies, albeit very tentatively, that the grandparents supporting lone parent families are more likely to have experienced poverty themselves while raising their children.

The lone parent poverty rate is associated with lower levels of employment. Whilst over half of lone parents (56.7%<sup>5</sup>) are now in work, the employment rate for the group is still significantly lower than the Government’s target of 70%<sup>6</sup>. Although the relationship between work and poverty is not always a straightforward one, evidence shows that employment is one of the key triggers for leaving poverty<sup>7</sup>; indeed, “over 70% of poverty exits among those in lone-parent families were related to employment changes”<sup>8</sup>. Similarly lone parents in employment are less likely to enter poverty<sup>9</sup>. The lack of affordable, flexible childcare is often cited as one of major barriers to employment, but the Government’s own research also shows that the single parent’s choice of childcare is a particularly complex one, driven by their own vulnerability in the labour market and a heightened sense of responsibility as a lone parent<sup>10</sup>.

## The evidence base

### Grandparents in lone parent families

There is very little research which directly examines the impact of grandparent involvement in lone parent families, even less, the economic impact of that support. What evidence there is tends to focus on the provision of childcare by grandparents for working lone parents, including the effect of this provision on the parent's emotional well-being and the grandparent-parent relationship. While it is possible to draw broad inference about grandparents' economic circumstances from this wider literature there are considerable limitations to generalisations we are able to make on the basis of this evidence.

### Grandparental childcare

Today eight in 10 grandchildren receive some care from their grandparents compared with three in 10 in the 1970s, and almost five million grandparents (mostly grandmothers) spend the equivalent of three days a week<sup>11</sup> providing childcare – comparable to a part-time job. Figures from the Institute of Education indicate that grandparents now provide more than 40% of childcare for working or studying parents and over 70% of childcare at other times<sup>12</sup>. While the caring contribution they make is certainly substantial – estimates indicate that grandparents provide £3.9 billion worth of childcare<sup>13</sup> – nine out of 10 (92%) are not paid for the care they provide<sup>14</sup>.

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8  
in  
10

grandchildren  
receive some  
care from their  
grandparents

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### Grandparents in single parent families: what they do

Perhaps not surprisingly grandparents (more often maternal grandmothers) with single parent children provide even higher levels of childcare<sup>15</sup>; between one half and two thirds of working lone parents are reliant on grandparents<sup>16</sup>. Often this is 'complementary' childcare – being combined with part-time nursery places or for parents who work irregular and/or unsocial hours<sup>17</sup>. In some cases this care enables single mothers to go out to work ("a vital resource... [which] often ensured employment was viable and manageable"<sup>18</sup>), to work more hours and to earn more<sup>19</sup>. If however a grandmother reduces her capacity to engage in paid employment then there could be significant negative consequences for her long and short-term income.

Research conducted by Ridge and Millar (2008) with employed lone mothers found grandparents to be the mainstay of mothers' work and care strategies. This study tells us that lone mothers particularly value grandparent care because it offers them more flexibility and reliability than formal provision (as well as being affordable). Unlike formal providers grandparents are often willing to care for children

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# 15%

the proportion  
of single parent  
grandparents

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when they are ill or to take them overnight<sup>20</sup>, thus allowing lone parents to overcome some of the vulnerability they feel when reliant on formal provision. Other evidence indicates that lone parents who choose grandparent care above other forms of provision do so because of a sense of shared values, especially in terms of how to bring up and discipline children, a preference for the children to be in familiar surroundings with someone emotionally attached to them and a belief that a child should be cared for by someone who has personal experience of raising children<sup>21</sup>. In fact, many parents regard grandparent childcare as the “next best thing” to their own care, valuing the sense of security, leaving children with someone they trust affords them<sup>22</sup>. It is also important to recognise that “childcare preferences among lone parents are complicated by certain characteristics such as class”<sup>23</sup>; research indicates, for instance, that working class mothers are less trusting of formal childcare than others, having a strong preference for family care<sup>24</sup>.

### Grandfathers providing childcare

**“Grandfathers can also play a key role in helping out with care and support. In one case, where the mother was working mornings and afternoons and starting at 5.30 in the morning, the grandfather had played an ongoing role in childcare. When the mother leaves in the morning she leaves the children asleep in bed until the grandfather comes to wake them. This has been a sustained commitment over many years; making breakfast for them and seeing them off to school every morning; being there and giving them tea when they come home in the evening.”**

Source: Ridge and Millar (2008) *Work and well-being over time: lone mothers and their children*, p. 41.

Although these arrangements, once made, tend to be enduring, with some grandparents relied upon very heavily for ongoing support, they can be vulnerable to changes in the personal relationship, or changes in the grandparent’s circumstances<sup>25</sup>. Arrangements may place emotional strain on parents, creating concerns about overburdening grandparents<sup>26</sup>, ‘guilt’ about relying on them, and worry that the childcare role is superseding a more usual (and preferable) grandparent-child relationship<sup>27</sup>.

Evidence from the BSA analysis also suggests that as the percentage of single parent grandparents grows (from 8% in 1998 to 15% in 2007) they in turn may be less able to provide the kind of practical and childcare support for their children. Where single parent grandparents also have children who are single parents there may be a support deficit for those families who will be even more disadvantaged.

### Grandparent care and changing circumstances

**“In one family, changes in the life of the grandmother had a knock-on effect for the mother and her son. In the past, the younger son had stayed with his grandmother every weeknight while his mother was working because she had to start work at 3am. The grandmother lived nearby and there was a strong connection between them. However, when the grandmother separated from her partner, she also had to find work to support herself and this meant that she was unable to continue with the care arrangement for her daughter and grandson.”**

Source: Ridge and Millar (2008) *Work and well-being over time: lone mothers and their children*, p. 41.

There is a small body of evidence from the US, which suggests some grandparents with divorced children do feel ‘put upon’, and resent the loss of personal freedom the commitment to childcare brings<sup>28</sup>. Other sources suggest there may be serious negative health outcomes for grandparents providing childcare; for example, Lee and colleagues (2003) found that “high levels” of grandchild care (nine hours a week or more) increased women’s risk of coronary heart disease over time<sup>29</sup>.

While there is very little available evidence relating to the financial difficulties grandmothers face when ‘choosing’ grandchild care over work, logic dictates that those leaving the workforce or reducing hours to care will face income reductions both in the immediate (earnings) and longer-term (savings and pension credits).

### Expectations of grandparent care

**“One parent we spoke to... seemed to expect the grandparent to continue to provide free childcare, even though she was caring for a sick relative and working herself. In a similar case, the lone mother expressed the view that her parents should look after her children, but described how she had been having lots of rows with them because they were now finding it ‘too much’ to look after her three children (they had provided childcare for nine years). They had asked her to give up work and look after the children herself; she refused to do this and did not seriously look for alternative formal childcare as she felt it was too expensive. Consequently, family relations had become strained. Clearly, this lone parent expected the grandparents to provide childcare irrespective of their own needs, although her ability to relieve them of this task was also restricted by the cost of formal childcare.”**

Source: Bell et al. (2005) *A question of balance: Lone parents, childcare and work*, p. 101.

In addition to the childcare literature there is a smaller body of evidence demonstrating that grandparents provide emotional, financial and other kinds of practical support to their lone parent children<sup>30</sup>; in some cases filling a ‘parenting gap’ for adolescent grandchildren<sup>31</sup>. It is important to note at this point that while this support may come from both maternal and paternal grandparents, where the grandchildren live with their mother it is common for paternal grandparents to play a reduced role in family life and maternal grandparents a larger one<sup>32</sup>. (Before separation six out of 10 paternal grandparents report feeling very close to their grandchildren but this drops to three out of 10 after separation)<sup>33</sup>.

This same body of evidence also suggests that grandparents can create a ‘buffer’ against the particular financial strains resident parents (more often mothers) encounter immediately following a separation<sup>34</sup>. Studies contain examples of grandparents paying mortgages, helping their newly single children to buy houses, and assisting with general day-to-day living expenses<sup>35</sup>. Other occasions requiring particular support from grandparents discussed in the literature include illness or the onset of disability for the parent<sup>36</sup> or child, moving into a new home and dealing with changes to routines or custody arrangements.

### Grandparents in lone parent families: future policy tensions?

The Welfare Reform Act 2009 sets out new work-related requirements for lone parents in receipt of out-of-work benefits (Jobseekers’ Allowance (JSA) and Employment and Support Allowance (ESA), which replaces Income Support for those unable to work). Changes mean that single parents will be required to be “work ready” (to undertake training and other preparatory activities) when their youngest child is three years old<sup>37</sup>. Although enforcement of conditions is dependent on the availability of childcare<sup>38</sup> these changes may mean increasing pressure on grandparents to step in to provide for a growing group of single parents. The flexibility of grandparent care may also be more appealing to parents whilst they are undertaking these “work-related activities”, but prior to a return to work, as although they require childcare this will not be on the regular and continuous basis that most formal childcare options anticipate. It is also worth noting that given the age of the children in question grandparents affected by these changes are more likely to be younger and working themselves. They may also still have their own children living at home with them.

It is important to consider these informal carers in particular, because grandmothers may face poverty themselves as they reduce their working hours to provide childcare (with the additional costs this brings), or as they near retirement age with limited pension savings and/or an incomplete National Insurance contribution record<sup>39</sup>. This is also a group who warrant further attention by policy makers, with particular consideration being given to the potential impact of greater work-related conditionality on the wider family, as well as raised employment rates among one group (lone parents) on another (older women).

### NI pension credit for grandparent carers

**In the 2009 budget positive steps were taken towards recognising the caring contribution made by Britain's grandparents. From April 2011 those who care for a grandchild (aged under 12) for more than 20 hours per week will be able to claim weekly National Insurance credits towards their basic state pension.**

### Relationship with other poverty risks

Single teenage parents constitute a comparatively small group (just 2%<sup>40</sup> of lone mothers are aged under 20) but nevertheless one that warrants particular attention. Although many young mothers are partnered, in general they are less likely to be in a marital or cohabiting relationship<sup>41</sup> and more often share the parental home than their older counterparts<sup>42</sup>. While many young parents, single and coupled, rely heavily on practical and emotional support from the child's grandparents (more frequently maternal grandmothers')<sup>43</sup> evidence shows that needs are often more pronounced for parents raising their child without a partner<sup>44</sup> particularly those belonging to the youngest age groups.

Early childbearing is strongly correlated with the experience of poverty<sup>45</sup> and social exclusion; young parents are 10 times more likely to come from an unskilled manual social class than from a professional class background<sup>46</sup>, and are more likely to live in a deprived area. It is also correlated with high levels of familial support, the child's grandparents (particularly maternal grandparents) providing housing, financial and practical support for young women and their children<sup>47</sup>. This support, which often includes high levels of childcare, allows the parent to retain a level of social independence they might otherwise not have been able to achieve; for some it means being able to complete their education.

We have already noted above that the proportion of single grandparents has doubled from 8% to 15% between 1998 and

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36%

of single  
grandmothers are  
aged under 55

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2007<sup>48</sup> and that 36% of single grandmothers are aged under 55<sup>49</sup>. Single parenthood is intensifying for some families. A growing proportion of single grandparents have children who are single parents themselves (31% in 1998 rising to 38% in 2007)<sup>50</sup>. These families are particularly at risk of financial hardship.

There is much in the small body of literature on young fatherhood about the importance of the paternal grandparents' (particularly grandmothers') support, both emotional and practical, for continued contact between a young father and his child<sup>51</sup>. Research by Speak et al. (1997) demonstrates that contact between an (absent) young father and his child is often initiated by a paternal grandmother.

**Leave for grandparents with teenage parent children in Germany**

**“German grandparents are being offered the opportunity to take paid time off work to care for grandchildren under new legislation which came into force in January 2009. Grandparents will be allowed to request leave from work if they can prove their support is needed to raise the children because the child’s parent is studying or in training. Teenage pregnancy is a growing problem in Germany with over 6,100 children born to under 18s in 2006.”**

Source: Grandparents Plus, Rethinking Family Life (2009) p. 9.

In addition to the associations between young single parenthood and poverty, the wider literature highlights notable associations between ethnicity and hardship among single parent families. Smith and Middleton, for example, found that “lone parents in hardship were 1.7 times more likely to experience worsened hardship if they were not white”<sup>52</sup>.

Furthermore, evidence demonstrates links between lone parenthood and disability; 27% of single parents have a longstanding health condition, and three in 10 lone parents have a disabled child<sup>53</sup>. There are reportedly more than a quarter of a million disabled lone parents and their children living in poverty<sup>54</sup>.

## **Causes of concern**

- The lack of recognition afforded to grandparents', especially grandmothers', contribution towards filling the 'childcare gap'. In particular the lesser value placed upon unpaid caring work compared with paid work.**
- Low levels of awareness around the significance of policy changes such as the movement of lone parents from Income Support to Jobseekers' Allowance and the likely implications for grandparents and other members of the wider family.**
- Problems with, and gaps in, formal childcare provision: grandparents often offer what formal childcare cannot – flexibility, reliability and affordability. These deficits in formal childcare result in additional pressure on grandparents and other informal carers.**
- Lack of flexibility for employed grandparents, making combining work and care more difficult.**
- Lack of support and flexibility for working lone parents who cannot, or prefer not to use formal childcare.**
- Particular difficulties for grandparents helping to care for the children of their teenage offspring – this can prove a substantial commitment for some, and can create further problems for those combining work and parenting support.**
- A lack of formal financial and practical support for families going through a separation or divorce.**
- The intensification of single parenthood and in particular the increase in single parent grandparents who in turn have single parent children themselves.**



## 05. Families with disabled children and/or disabled parents



**Like lone parent families those affected by disability are substantially more likely to experience poverty and disadvantage<sup>1</sup>.**

Over half (55%) of families with a disabled child or children (that is approximately 770,000 children in total<sup>2</sup>) are living in or near the margins of poverty<sup>3</sup> and 84% are in debt<sup>4</sup>. They have been described as ‘the poorest of the poor’<sup>5</sup> with evidence suggesting that their financial situation has deteriorated over time, and may continue to deteriorate in the future<sup>6</sup>. This poverty impacts significantly on the quality of family life; families with disabled children being 50% less likely to afford holidays, new clothes, school outings or ‘treats’<sup>7</sup>.

**55%**

**of families with a disabled child or children are living in or near the margins of poverty**

Such a disproportionate level of financial hardship and debt reportedly results from the combination of the higher cost of raising a disabled child (the cost of care)<sup>8</sup>, on average three times that of a non-disabled child<sup>9</sup> (£7,355 per year compared to £2,100<sup>10</sup>), and barriers parents face entering and sustaining employment<sup>11</sup> (the income penalty)<sup>12</sup>. While over 85% of parents of disabled children want to work either full-time or part-time, in practice only 16% of mothers of disabled children are in paid employment compared to 61% of all mothers<sup>13</sup>. This problem is exacerbated by a lack of appropriate formal childcare<sup>14</sup>.

### **The evidence base**

#### **Grandparents’ role in families with a disabled child**

Despite the importance of grandparent support in families facing difficulties or adversity the body of evidence relating to the role of the wider family where a child has a disability is relatively small<sup>15</sup>. Much of the evidence we do have is partial and based on small-scale studies, often conducted in the US and focusing on parents’ (mostly mothers’) assessments of grandparental involvement and support<sup>16</sup>. While what there is does shed valuable light on the specific experiences of grandparents with disabled grandchildren and the

supportive role they play, we need to remain aware of its limitations. This means that care must be taken when drawing conclusions, when ‘unpacking’ the needs of grandparents supporting a disabled grandchild from that of other family members and when addressing appropriate policy responses to these needs. However, it does offer the opportunity to start thinking about a new research agenda – one that begins to fill identified gaps in our knowledge.

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**39%**  
**of grandparents  
with a disabled  
grandchild see them  
at least once a week**

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### **Grandparents’ role in families with a disabled child: what they do**

Evidence tells us that grandparents are an important source of care and support for children with disabilities and their families<sup>17</sup>; grandparents typically engaging in a range of supportive activities, providing parents with emotional (empathy, friendship making themselves available to discuss problems), practical<sup>18</sup> (caregiving, transportation) and financial<sup>19</sup> assistance. Empirical evidence based on research with grandparents<sup>20</sup> and parents<sup>21</sup> demonstrates that many grandparents have regular contact with disabled grandchildren (39% see them at least once a week)<sup>22</sup>. Some take on household chores such as shopping, cooking and cleaning<sup>23</sup>; a large number undertake childcare<sup>24</sup> (baby-sitting/childminding); some assist with therapeutic and educational tasks<sup>25</sup>, and a small proportion (6%) provide respite care, taking grandchildren for occasional (once a month or more) overnight stays<sup>26</sup>. This may also involve ‘stepping in’ during times of crisis (perhaps in addition to formal services) to provide temporary full-time care for grandchildren. The greater likelihood that those caring for disabled children will be single parents, suffering depression and social isolation, as well as financial hardship<sup>27</sup> all serve to increase average support needs.

Grandmothers more often provide this support than grandfathers<sup>28</sup>, maternal more than paternal and those living closer to the disabled child than those who live further afield<sup>29</sup>.

### **Pressures on families**

**Grandparents provide an extra pair of hands and breathing space for families who need day-to-day support (for example, babysitting other children while parents take a disabled child to a hospital appointment).**

### **Gaps in services**

**Grandparents are filling the gaps in services because families need the support. They often provide respite care – a problematic area for parents, who find formal respite services create disruption for, and have a negative impact on, disabled children.**

### Parents' psychological well-being

**The higher incidence of mental health problems among parents caring for disabled grandchildren may create additional pressures on grandparents.**

Source: Grandparents Plus, Disability Roundtable participants, 16<sup>th</sup> September 2009.

It is important to note, as Hastings (1997) reminds us, that grandparents are not always helpful and supportive, and may present an additional burden to the parents of disabled children. These difficulties, when they arise, often stem from the problems grandparents have in coming to terms with the child's condition, understanding the 'symptoms', and how to negotiate their role in light of the disability<sup>30</sup>.

### Sometimes grandparents can cause problems or put pressure on families

**Maternal and paternal grandparents may put additional pressure on parents through a lack of understanding of the condition and/or treatment, or by 'blaming' the other side of the child's family for the disability; a consequence of additional pressure that the disability brings.**

Source: Grandparents Plus, Disability Roundtable participant, 16<sup>th</sup> September 2009.

Likewise, it is important to note that the small number of studies concerned with the implications of care for grandparents also contain reports that suggest providing support (particularly childcare) results in a reduction in paid work and therefore in lost (earned) income and personal freedom<sup>31</sup>. Although grandparents are often willing to go to great lengths to provide practical help and support for their children and grandchildren this often has significant implications for their own lives.

### Grandchildren with disabled parents

It is not just a disabled grandchild that may provoke additional childcare involvement by grandparents, but health issues and disabilities experienced by adult family members (the child's parents). Such families are also at heightened risk of experiencing poverty, particularly where both parents have a disability<sup>32</sup>, or the disabled parent is raising a child alone. Like other vulnerable groups families in which the parent has a disability are also more likely to experience persistent poverty; Adelman et al. (BHPS, 1991–99; 82.3) observed that "more than half of children in persistent poverty had lived with an adult in poor health for at least one year during

a five-year period, compared with a quarter of children who had experienced no poverty”<sup>33</sup>.

It is important to distinguish here between a long-term disability/health condition and one that has been diagnosed during adulthood. In the case of the former, grandparents may have spent many years caring for their disabled child (i.e. the parent) before the birth of grandchildren; in some cases care may simply be part of a continuing regime, in others, grandchildren may represent new and unwelcome additional caring responsibility. For those who have been diagnosed with a health condition or who become disabled in an accident after the birth of their children, grandparents may find a very sudden change of role. One example, cited in the US literature, involved a grandmother who began caring for her daughter when she was paralysed in a car accident, and was providing childcare for her young grandson as well as working<sup>34</sup>.

The initial period following diagnosis/disablement is likely to be difficult for the whole family. In both situations there are liable to be times of crisis, when grandparents may find themselves called upon to care for grandchildren<sup>35</sup> (for example, while the parent undergoes treatment in hospital). Crises may come with little warning and require full-time care of grandchildren, bringing considerable disruption to work and family life, and impacting on financial stability.

#### **It's a balancing act**

**Grandparents are trying to get the balance right between supporting their disabled children and acting in the best interests of their grandchildren. There is a need to empower the parent without 'taking over'.**

#### **The grandparents still see their disabled child, not the disabled parent**

**It can be hard for grandparents to let go of a disabled child that they have cared for all their lives and accept that this disabled child is now a parent.**

Source: Grandparents Plus, Disability Roundtable participants, 17<sup>th</sup> September 2009.

### Relationship with other poverty risks

Important links between disability and other poverty risk factors have been established in a number of studies; for example, there is evidence to suggest that diagnosis can act as a ‘trigger event’ for family breakdown and for unemployment<sup>36</sup>. Increased rates of family breakdown in families with a disabled child mean that disabled children are more likely to be living with a single parent (most often their mother) or carer<sup>37</sup>.

Grandparents’ role in families where the child or parent is disabled may also be influenced by ethnicity (there being clear expectations about the support grandparents provide amongst some ethnic/cultural groups)<sup>38</sup>. In such instances (where the grandparents are also geographically closer) parents may feel more supported and less emotionally distressed<sup>39</sup>. Minority ethnic families can face disproportionate barriers to the formal support they require, as services are not always designed to meet their needs, which means an increased risk of poverty. This acts cumulatively with the generally higher risk of material hardship minority ethnic groups face.

Connections have also been established between disability and family and friends care. In some cases grandchildren have disabilities associated with maternal alcohol or drug misuse during the antenatal period; or a kinship care arrangement may be the result of the parents’ (deteriorating) health status. Whatever the reason, the implications of caring for a disabled child full-time can be significant. For example, a study of 164 grandparents caring for a child with developmental disabilities conducted by Janicki and colleagues (2000) in the US found that most grandparents (a sample comprised primarily of African American grandmothers) felt overwhelmed by the caregiving challenges they faced<sup>40</sup>. In practical terms (like the parents of disabled children) many grandparents have only very limited periods of respite from care; they experience less sleep and face increased physical challenges<sup>41</sup>.

### **Causes of concern**

- A lack of good quality formal ‘respite care’ for those caring for disabled children.
- An absence of advocacy services for grandparents and parents – something those working with families feel is necessary to help them fight for what they need.
- A lack of accessible, ‘plain-English’ information about disabilities, medical conditions and services. This is needed to address problems some grandparents have understanding a child’s condition and treatments, and also to tackle low levels of awareness about available (practical and financial) support.
- Limited understanding of/confusion around the benefits system and how different allowances interact with one other.
- A lack of financial support for grandparents providing substantial amounts of care for disabled parents and grandchildren.
- Problems finding consistent and well-informed advice from service providers and support workers; at present some families are being misinformed due to a lack of understanding amongst service providers of what support should be offered, and to whom.
- At present many health, educational, and other professionals see grandparents as being outside their remit rather than facilitating the grandparent’s role as a resource for families of children with disabilities<sup>42</sup>.
- A deficit of good quality formal childcare for disabled children, with facilities that are adequately and appropriately staffed.

## 06. Black and minority ethnic families



**People belonging to black and minority ethnic (BME) families are at greater risk of poverty<sup>1</sup>; evidence suggests this is particularly acute for older women<sup>2</sup>.**

One study found children from BME families to be at particular risk of persistent poverty; this group “were more than twice as likely to have been in ‘non-white’ households” than children not experiencing hardship<sup>3</sup>. Research looking in more depth at these differences<sup>4</sup> found rates of poverty to be most severe for people from Bangladeshi (for whom child poverty rates reach nearly 75% after housing costs<sup>5</sup>), Pakistani and Black African backgrounds. These same patterns were broadly reproduced amongst the retired population<sup>6</sup>.

9  
out of

10

**young Pakistani and Bangladeshi women’s parents support their choice to work**

Higher rates of poverty have been linked to worklessness; for example, the Equalities Review found that certain BME groups, particularly Pakistani and Bangladeshi families, are more likely to experience higher levels of unemployment, and that employment penalty faced by Pakistani and Bangladeshi women is so entrenched that it will probably never disappear<sup>7</sup>. A recent Young Foundation report found that only 49% of young Muslim women have a job despite the fact that most of them want to work and have the educational qualifications to do so<sup>8</sup>. Analysis of the Labour Force Survey between 2001 and 2004 found that just over 25% of Pakistani women and less than 20% of Bangladeshi were economically active, compared with over 70% of white British women, while 15% of Pakistani women and 13% of Bangladeshi were unemployed, compared with just 4% of white British women<sup>9</sup>. Furthermore, Equal Opportunities Commission (EOC) research found that nine out of 10 young Pakistani and Bangladeshi women’s parents support their choice to work<sup>10</sup>.

Employment, however, often necessitates childcare (particularly in lone parent households or those with a more traditional, ‘gendered’

division of labour); here concerns have been voiced about a lack of ‘culturally-sensitive’ provision<sup>11</sup>; indeed working Muslim women are more likely than other ethnic groups to use grandparental childcare as a result of this concern<sup>12</sup>.

### The evidence base

#### Grandparenting in BME families

There is little UK evidence specifically relating to black and minority ethnic grandparents’ financial well-being. The majority of direct evidence comes from the US, where ethnicity has been a much more prominent issue in research, and where race, family and friends (kinship) care and financial hardship are inter-connected and represent a pertinent policy concern. While it is useful to consider this evidence alongside findings of broader UK studies (which typically consider the role of grandparents in BME families, or the relationship between ethnicity and poverty) significant differences in the two countries’ ethnic profiles mean there is little scope to generalise US findings to a UK context.

Over

30%

of Indian grandparents live in a multigenerational household

#### Grandparenting in BME families: what grandparents do

One key difference between families from different ethnic backgrounds is the likelihood of co-residence; that is the grandparent, parent and grandchild living in the same household<sup>13</sup>. While less than 5% of white grandparents and 7.5% of black grandparents live with one of their children and grandchildren, more than 30% of Indian grandparents live in a multigenerational household. This proportion is similar to that of other South Asian nationalities, 25.4% for Pakistani grandparents and 28.8% of Bangladeshi grandparents<sup>14</sup>. Such multi-generational living partially reflects South Asian cultural norms, but may also result from economic necessity, the need to provide for disabled family members and language difficulties in either of the adult generations<sup>15</sup>. Intergenerational households facilitate the ‘pooling’ of household income whilst reducing housing costs; the provision of childcare by the older generation means that parents are better able to work outside the home<sup>16</sup>. Whilst there can be considerable advantages to living in a multigenerational household, these may be counteracted by excess pressure on grandparents to undertake very high levels of childcare, conflict over child rearing and a loss of privacy<sup>17</sup>.

Research suggests that cultural norms common to African-Caribbean and South Asian cultures emphasise family unity and place expectations of emotional, practical and financial support on all generations, including grandparents<sup>18</sup>. US research indicates that among African-American families maternal grandmothers hold



a particularly influential role. As Pittman, (2007) argues, “among low-income, minority families, extended kin are traditionally viewed as more integral to the family’s functioning than in Caucasian families”<sup>19</sup>. Grandparent care reflects the values of familism – where members strongly identify with, and feel loyalty towards wider family – an emphasis on intergenerational ties and filial responsibility. There is a sense in which in South Asian cultures there is a moral obligation to assist members of their wider family when they experience difficulties (e.g. with money or their health). There is also a sense in which support from grandparents comes with the expectation of reciprocal care during old age and infirmity<sup>20</sup>.

A study by Nazroo (2004) found very high levels of contact with family amongst older people from South Asian ethnic groups, reinforcing more anecdotal evidence. This same study found that older Pakistani respondents were more likely than others to be living in a deprived area, with limited access to services<sup>21</sup>. One final factor, potentially significant for the experience of poverty, is that black and minority ethnic grandparents tend to be younger than those from the majority population<sup>22</sup>, reflecting the generally lower average age at childbirth. Dench and Ogg’s (2002) BSA analysis showed the average age for Asian/British Asian grandmothers to be substantially lower (56) than that for white British grandmothers (64)<sup>23</sup>.

### Grandparents, ethnicity and the experience of poverty

Literature in this field tends to come from the US and therefore tends not to focus on minority ethnic groups of particular interest within a UK context (for example, Black Caribbean, Black African, Pakistani and Bangladeshi), but on African-American, Hispanic and Native American grandparents. There are clear limitations to the lessons that can be drawn from this body of evidence; nevertheless some of the associations identified in this literature may of wider relevance to this review.

In her highly influential 1999 study of poor inner-city Puerto Rican grandparents providing high levels of childcare support Burnette concluded that these caregivers had higher rates of poverty, poor health, and depression. She also found that a third had left their jobs to care for a grandchild, and that this often had serious negative implications for later financial well-being – particularly the accumulation of savings for retirement. Similar findings are reported in Cox et al. (2000) with Hispanic grandparent caregivers displaying higher levels of stress, poverty and unemployment and experiencing significant linguistic barriers to accessing services.

Indeed, ‘linguistic isolation’ was a problem reported in a number of studies looking at the experiences of minority grandparents. Earlier research found that minority ethnic grandparents caring for grandchildren were likely to delay seeking help and care for themselves, choosing to focus instead on the needs of the children<sup>24</sup>.

Other studies have demonstrated a link between ethnicity and the provision of grandchild care; for example, Latino grandmothers are more likely to be providing regular daycare and African-American children are more likely than others to live with their grandparents<sup>25</sup>. There is some suggestion that co-residence with a grandparent in African-American families reflects a cultural (West African) tradition of surrogate parenting<sup>26</sup>. Here we find reference to ‘kinkeeping’ – a tradition originally rooted in West Africa, an aspect of family survival during slavery and during periods of parental migration<sup>27</sup>. Contemporarily grandparent co-parenting has, however, been more about supporting young, single parent daughters<sup>28</sup>.

The nature of grandparent involvement in childrearing is also reported to differ according to ethnicity; while white grandmothers take on a companionate role with their daughter, distancing themselves from the more formal aspects of parenting, African-American mothers are more likely to adopt a more traditional parenting role, disciplining and correcting their grandchildren<sup>29</sup>.

### Relationship with other poverty risks

As discussed above, evidence (particularly from the US) suggests a relationship between ethnicity and the likelihood of becoming a kinship carer. Research exploring this relationship in more depth also indicates that kinship carers from non-white groups are more likely than white carers to experience poverty and receive less formal and financial support. In the US Hispanic grandmothers caring for their grandchildren full-time have an 81% poverty rate, which far exceeds the US national estimates of between 20 and 30%<sup>30</sup>.

Income and poverty status are also associated with higher service use by non-white groups. Formal health and social services were persistently under-used, a product of personal, social, cultural and environmental barriers – use went up with levels of education, income, social support and knowledge of services<sup>31</sup>.

### Disability and ethnicity

There is a distrust of service providers and an expectation that they will cope alone or with the support of their families or community rather than seek help from services. BME families don't access services in a routine or uniform way. There are different experiences for different minority groups. There may also be language barriers, with translations or translators not always available.

Source: Grandparents Plus, Disability Roundtable participant, 16<sup>th</sup> September 2009.

### Causes of concern

- We have a very limited understanding and evidence base on cultural differences in terms of the role of grandparents and attitudes towards formal and informal childcare. This undermines the ability to shape effective, inclusive policy and practice.
- Black and minority ethnic grandparents are likely to be particularly isolated and face barriers accessing services and finding services which are designed to meet their needs.
- There appear to be lower levels of knowledge and awareness regarding available services among black and minority ethnic families, as well as difficulties with the accessibility and exclusivity of services.
- Provision of translation and interpreting services is inadequate; this creates a barrier to claiming support to which grandparents may be entitled.
- There is a deficit in the provision of culturally-sensitive childcare; formal services can be inaccessible to BME groups and prohibitively expensive. There may also be problems around the accessibility and cultural sensitivity of early years services such as children's centres.

## 07. Family and friends (kinship) carers



It has been estimated that there are more than 200,000 family and friends carers in the UK, most of whom are grandparents<sup>1</sup>, bringing up their grandchildren under formal (i.e. fostering) or informal (private) arrangements, because the parents are no longer able to fulfil that role<sup>2</sup>.

Only

16%

of local authority foster placements are with family and friends carers

This could be because of parental substance or alcohol misuse<sup>3</sup>, imprisonment, physical or mental illness, child abuse or neglect or because of bereavement<sup>4</sup>; in some cases these reasons are multiple and interlinked, e.g. substance misuse led the parent to neglect the child. Three main routes to a kinship care arrangement have been identified in the literature: the first, an emergency ‘intervention’ by carers concerned for their grandchildren’s well-being, the second, a mutual agreement between the carer, the parent and sometimes also the social worker, and the third following a request by social workers (usually during a crisis)<sup>5</sup>. This results in an array of different formal and informal care arrangements.

There is evidence to suggest that while most grandparents want to support grandchildren, a kinship care arrangement is rarely entered into without some reservations<sup>6</sup>; often “it is not a role they would have chosen, rather one which they have accepted out of a complex mix of love, obligation and a desire to keep the child within the family”<sup>7</sup> (this appears to be particularly true of those approached by social workers).

The 1989 Children’s Act specified that family and friends carers should be the first option for children who can no longer live with their parents. Despite this only 16% of local authority foster placements are with family and friends carers<sup>8</sup>; although statistics suggest this proportion is growing<sup>9</sup>.

### Grandparent carers – starting over

“As a grandparent of two children, a boy and a girl, and the mother of a drug user my life is hard. Starting over, as it were, with another family at an age when most people are thinking of retirement to some people may seem crazy...but I would do it all again rather than see my grandchildren lost to us in an often uncaring organisation. The financial hardship, the doing without, all that takes second place when it comes to the love I feel, a love that is reciprocated... I am as proud as any parent whenever the children are recognised at school for some achievement... I may not see them grow into adulthood... but I know the seeds I have planted will help them become kind human beings and because of their mum’s past will help them learn tolerance for those who are weaker and more vulnerable than they”.

Source: Adfam and Grandparents Plus, *Forgotten Families* (2006) p. 2.

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2.5m

children in the US were being cared for solely by their grandparents in the early 2000s

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### The evidence base

#### Grandparent kinship care

Alongside a small amount of UK-based literature looking at the experiences of grandparent-headed families is a large body of evidence from the US<sup>10</sup>. The prominence of these studies is in part due to a notable rise in the number of children being cared for by their grandparents (more often grandmothers) on a full-time basis in the US; between 1990 and 2005 numbers increased by 30%, and in the early 2000s approximately two and a half million children were being cared for solely by their grandparents<sup>11</sup>. As is the case in the UK children entering these ‘skipped generation’ households do so for a variety of reasons, the key ones being: drug use, crime and incarceration, child abuse and neglect and ill-health<sup>12</sup>. This research highlights, though generally does not explore, financial hardship among grandparent carers.

While it is important to recognise the “inherent limitations to the lessons which can be drawn from research in other jurisdictions”<sup>13</sup>, the lack of UK evidence in this area and the need for policy development leave “little option but to draw on the experience of other countries”<sup>14</sup>. Thus while we prioritise UK-based studies this section necessarily draws on US evidence.

### Grandparent kinship carers: what they do

Grandparent carers with full-time care of their grandchildren typically adopt the role of a parent. This means providing for all that child's needs: emotional, practical and financial. In terms of the latter the (often unexpected) arrival of children in the household creates immediate needs that grandparents must meet – for example, beds, bedding, stair gates and clothing<sup>15</sup>. There are also ongoing expenses in terms of food and utility bills, material goods and school-related expenses, and for some working grandparents, childcare bills. Research shows that it costs 50% more to care for a child away from home<sup>16</sup>. This is partly due to the child's own additional needs and the fact that the carer will face additional costs in order to accommodate them.

In more general terms grandparents (many of whom do not have full parental responsibility for their grandchildren) must care for, supervise and engage with their grandchildren. For those of school age there are additional responsibilities, not just in ensuring attendance, but playing an active role in their grandchild's education. For many, care has to take place under extremely difficult circumstances, involving a child suffering from the adverse effects of loss of a parent. Prior to entering family and friends care children living under these arrangements have very similar multiple adversity experiences to those living in the care system<sup>17</sup>. One study found that 37% have special educational needs and half have serious emotional or behavioural difficulties<sup>18</sup>.

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out of



**family and friends carers had experienced financial hardship when they took on care**

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### Grandparent kinship care, poverty and employment

Although most grandparent carers find their role rewarding, there are strong and well-established links between caring for grandchildren full-time and economic hardship<sup>19</sup>. In the UK, several studies have found finance to be a key issue for grandparent carers, constituting a serious problem for many families<sup>20</sup>. One such study found that three out of four had experienced financial hardship as a result of taking on care<sup>21</sup>, another that two thirds of grandparent carers have a net income of less than £15,000 a year, with four in 10 managing on less than £10,000<sup>22</sup>. Difficulties are most pronounced for low-income grandparents, where assuming parental responsibility (literally or effectively) of grandchildren aggravates existing difficulties with material hardship, inadequate housing, health problems<sup>23</sup>, isolation and debt<sup>24</sup>. US evidence also suggests that problems may be more marked for informal grandparent caregivers (who tend to be older, less well-educated and in poorer health)<sup>25</sup>.

Much of the existing literature highlights the strain placed on household resources by the often unexpected and unprepared for financial cost of dependent children<sup>26</sup>. Children may arrive at their grandparents' house with little more than the clothes they are dressed in<sup>27</sup>, leaving them to provide for their immediate (and often longer-term) needs. These significant outlays can be particularly difficult for those managing on a pension, benefit or low earned income and can lead to debt<sup>28</sup>. Furthermore they often increase as children age into adolescence<sup>29</sup>, with pressures for branded clothing and social activities with peers<sup>30</sup>.

Change can be extremely significant even when anticipated. Raising children, whatever their age, brings considerable upheaval to grandparents' lives, work, leisure, health, relationships and finances<sup>31</sup>. The arrival of a young child in their household may interfere with grandparents' work arrangements, in some cases leading to the grandparent leaving the paid labour market, or if retired, to the depletion of any capital set aside for retirement<sup>32</sup>. Indeed, evidence indicates that around a third of grandparents give up work when they taking on full-time care<sup>33</sup>; and that another 30% reduce their hours<sup>34</sup>. Leaving paid employment impacts on household income, but the less tangible benefits of work such as better health, less parenting stress and social networks are also significant<sup>35</sup>. It may also impact on a grandparent's pension rights<sup>36</sup>.

Organisations working in this field (Family Rights Group, Grandparents Association and Grandparents Plus), also report that in some cases family and friends carers are encouraged by social workers to give up work when they take on the care of the child, leaving them with the impression that their readiness to do so may be a material factor in any decision about whether or not they will be able to care for the child full-time.

While some grandparents manage to maintain employment this is often not without difficulty; evidence indicates that for around 15% of grandparents combining work and care was highly problematic<sup>37</sup>.

#### **Grandparent care and financial difficulties**

**“Financially it is a nightmare, I am constantly in the red at the bank. My credit cards... are a double-edged sword, I would like to clear them but they are a necessary evil, I cannot manage without them. I have a loan for my car, which is also necessary as with two children I have to get to the supermarket and I live where there are few shops”.**

Source: Adfam and Grandparents Plus, *Forgotten Families*, (2006) p. 11.

## Housing

Housing can be a particular problem for some grandparent carers<sup>38</sup>, especially those living in a retirement property or those who have ‘downsized’ when their children left home. Overcrowding and a lack of privacy are thus commonly reported difficulties for grandparent-headed families<sup>39</sup>, with some finding it necessary to relocate. As a result many grandparents find their housing costs increase when grandchildren come to live with them, and that a considerable proportion of their income needs to be earmarked for this purpose<sup>40</sup>. Charities working in this field (Family Rights Group, Grandparents Association and Grandparents Plus) report that for those in social housing it is not uncommon for them to have to wait several years to be re-housed, despite the sudden and unexpected arrival of the children they are caring for, often in crisis situations.

### Grandparent care and material hardship

**“Strain on our other children still at home due to lack of space, huge changes in family life, loss of holidays. Strain and stress on everyone due to shortage of money and worry about future finances”.**

Source: Adfam and Grandparents Plus, *Forgotten Families* (2006) p. 9.

### Emotional, psychological and physiological well-being

As well as impacting on their economic well-being, taking on care of grandchildren may also have an effect on grandparent health<sup>41</sup>, (lack of sleep, isolation, stress<sup>42</sup> and depression have all been linked to new full-time carer status in the literature<sup>43</sup>), with grandparent carers more likely than their peers to report difficulties fulfilling daily activities<sup>44</sup>; this can also impact on a grandparent’s ability to undertake paid work. The event or circumstance that led to the child moving into grandparent care may also have emotional repercussions for grandparents – a source of grief, shame or guilt<sup>45</sup>. It may well be the grandparent’s own child (i.e. the parent) who has the drug problem or who has neglected their children. The grandparent is faced with confusing emotions and conflicting loyalties. Should they help their own child or their grandchild? They often choose their grandchild at great pain and personal cost to themselves. Both the grandparent and the child share a sense of loss and so are often grieving as a result.

Moreover, health problems may lead to further concerns about the grandchild’s future – for example, what would happen to them in the event of the grandparent’s disability or death (something that may also be an issue for other members of the family)<sup>46</sup>.



The children involved in kinship care arrangements are also more vulnerable to emotional, psychological<sup>47</sup> and behavioural difficulties<sup>48</sup>, resulting in higher than average (professional) support needs. These problems are the likely result of separation from parents as well as time spent in a difficult home environment prior to joining their grandparents' household (some in situations of neglect and violence)<sup>49</sup>. Those born to mothers with substance problems may also experience neurological damage as a direct result, for instance, foetal alcohol syndrome (these children may experience developmental delay and behaviour problems such as hyperactivity<sup>50</sup>).

In addition, hardship experienced upon joining the grandparents' household can serve to aggravate existing problems<sup>51</sup>; poverty impacts on both child well-being and (grand)parenting in much the same way as it does in other family types<sup>52</sup>. Moreover, children may be aware of, and concerned about, the 'burden' they are placing on their grandparents<sup>53</sup>. This change in family arrangements is also likely to have a destabilising impact on other family relationships.

#### Children's additional support needs

**"My grandchildren suffer from low self-esteem, lack of confidence, lack of concentration, hyperactivity. [They are] unable to sustain lasting friendships, need constant reassurance, over-eat [and are] emotionally disturbed".**

Source: Adfam and Grandparents Plus, *Forgotten Families* (2006) p. 4.

Only

4%

of family and friends carers received help with the costs of essential items

#### Services and support

This is an area of some complexity thanks to the variety of different caring arrangements. Those grandparents with a Residence Order (RO) or a Special Guardianship Order (SGO) are eligible to be considered for a discretionary payment from their local authority towards the 'accommodation and maintenance' of the child. But a survey conducted by Grandparents Plus found that just one in four of those with Residence Orders received a Residence Order Allowance while half of those with Special Guardianship Orders received a Special Guardianship Order Allowance<sup>54</sup>. "The Children Act 1989 also allows local authorities to make cash payments in exceptional circumstances and assistance in kind (Section 17 payments)"<sup>55</sup>, but again the 2009 Grandparents Plus survey found that just 4% of family and friends carers reported receiving any such payments<sup>56</sup>.

### Difficulties with formal support

“Families were sometimes at the mercy of decisions made by individuals in agencies. One family, for example, had been told by an official at the social security office that they were eligible for a grant to renovate their house. As a result, the carer had rolled up the carpets and stripped off the wallpaper. When she pursued the grant application further, she was told this had been a mistake. She was left with a chaotic house and no money to proceed with the renovation”

Source: Aldgate and McIntosh, Looking after the family: a study of children looked after in kinship in Scotland (2006) p. 29.

Only

64%

reported to have  
been receiving  
child benefit

Even access to child benefit can be problematic with just 64% in one survey reporting that they were receiving it<sup>57</sup>. This can sometimes be because they do not want to provoke conflict with the child’s mother, who will usually be the person claiming it. Or it may be because they have reached an agreement with the mother that she will continue to claim it (possibly in return for her providing some financial support for the child). Anecdotal evidence from organisations working with family and friends carers (Family Rights Group, Grandparents Association and Grandparents Plus) suggests that transferring child benefit from parent to grandparent can be problematic in some cases, especially where there are disputes and this may result in delays. This in turn can mean the grandparent may have difficulty accessing other benefits such as Housing Benefit or Child Tax Credits.

Access to services and support is often the biggest problem for grandparent carers. The majority are not foster carers (one survey found just 7% were foster carers)<sup>58</sup>, so do not get the training and practical advice that foster carers receive; nor are they parents, so tend not to be targeted by parenting classes. Respite care is not systematically provided nor are specialised (health, counselling and educational) services for children, which means that some grandparents shoulder the financial burden themselves<sup>59</sup>.

However, the type of arrangement is not the only source of difference; there is often also considerable geographical variation in terms of services and levels of financial support<sup>60</sup>. A 2003 report published by the Department of Health highlights the complex and unco-ordinated nature of the current system; one that grandparents often find confusing and difficult to negotiate<sup>61</sup>.

Access to services is complicated by low levels of awareness and lack of targeted information on the support available to kinship carers, which also leads to low rates of benefit take-up. This may be because grandparents are unaware of benefits they can claim or because they cannot, or choose not, to claim it. It may also be because of the confusion that surrounds whether Residence Order and Special Guardianship Order allowances should count as income for the purposes of housing benefit and council tax benefit calculations. For some carers they are only marginally better off once benefit calculations and deductions have been made.

### Financial support in New Zealand

**“An alternative model [for financial support] is found in New Zealand. Here the voluntary sector undertakes family support (including kinship care) work, rather than the statutory social services departments, which focus more on child protection duties. Thus kinship care support services are delivered by voluntary organisations funded by the state. Additionally there is an entitlement to an allowance for any child living in kinship care. This is called the ‘unattached child allowance’ and is payable by the Department of Social Security (not social services). This allowance is attached to the child rather than the carer and is at foster care allowance levels”**

Source: Broad, Hayes and Rushforth, *Kinship Care for Vulnerable Young People*, (2001) p. 4.

### Legal issues

While there are problems associated with informal kinship care arrangements (barriers to financial support and instability for the child), formalising them can be arduous, time-consuming, stressful and expensive (simply entering into legal proceedings can cause hardship<sup>62</sup>). A lack of targeted information can be a problem for grandparents trying to navigate the legal system; the often unprepared for arrival of the grandchild means that many grandparents have to learn about and cope with its complexities in a rather haphazard way and at a time of emotional crisis for themselves<sup>63</sup>. Furthermore, grandparents may be deterred from seeking formal help and support or legalising informal arrangements by fear of involvement with the child welfare system<sup>64</sup> (that the child may be taken into care), or of (further) damaging relationships within the family, particularly with the child’s parents<sup>65</sup>.

“Even when registered as foster carers, kinship carers find they may be treated as ‘family’ rather than as foster carers and so do not get the support, training or financial help given to other foster carers – despite evidence showing that they need more, rather than less help”<sup>66</sup>. The law dictates that kinship carers who are fostering the child in their care should be receiving the same allowances and support as non-relative foster carers but evidence from a recent freedom of information survey suggests that 9% of local authorities may be breaking the law<sup>67</sup>.

### Relationship with other poverty risks

There are also clear and important links identified in existing literature between the demographic characteristics of those most likely to become kin carers and poverty. For example, associations between being called on to take on full-time care of grandchildren and belonging to a group already at greater risk of poverty (i.e. lone and BME grandparents)<sup>68</sup>. There is also some evidence that taking on full-time care of grandchildren places strain on grandparents’ personal relationships and can contribute to marital breakdown<sup>69</sup>. Research conducted in the UK shows more than a third of kinship carers are living without a partner<sup>70</sup>, and that black children are over-represented in kinship placements<sup>71</sup>.

Links have also been identified between kinship care and disability. A new survey of kinship carers in England and Wales showed that one in seven children cared for by grandparents (14%) had a disability compared to one in 20 (5%) of the wider population<sup>72</sup>.

### Grandparents caring for disabled children full-time

**“I have not had respite for nearly ten years. I try my best but I am on my own and it has been very hard. I do everything for him. His future is different to other 18 year old lads – he won’t be employed or go onto further education, and I worry about what will happen when I am no longer here” [a single parent grandparent who has full-time care for her autistic grandson].**  
Source: Grandparents Plus, Recognition, Respect, Reward (2009) p. 4

## **Causes of concern**

- An absence of official data on family and friends carers undermines the policy making process and reduces their visibility at national and local government levels.
- Most significantly, grandparents raising their grandchildren tend to receive far less support than other carer groups (i.e. non-kin foster carers), regardless of need. Additionally and importantly, “Information, practice guidance, support structures and social work training in kinship care lag behind the legislative requirements”<sup>73</sup>.
- A lack of financial support: “financial assistance is the service most wanted, and if provided, most appreciated” by family and friends carers<sup>74</sup>.
- Lack of respite services: research with grandparent carers shows that the absence of these services makes life harder for them.
- An absence of advocacy and support for kinship carers. Someone who understands their needs and who is acting on their behalf within children’s services.
- Lack of recognition and support for informal kin carers: in many cases informal carers need as much financial and non-financial support as other kinship carers or foster carers.
- Inadequate and uneven provision of (subsidised) support services for children living in kinship care arrangements. Additional services often required by children (educational/ psychological), where available, can be expensive and their provision often falls to the grandparents. There is considerable geographic variation in the availability of services.
- Housing: this can be a considerable problem for grandparents caring for their grandchildren full-time, with overcrowding/ problems meeting housing expenses being commonly reported difficulties.
- Low levels of support during the transition from grandparent to grandparent carer. A large proportion of kin carers find it necessary to leave work or reduce their hours when grandchildren join the household, often to cope with a child with high levels of need.

- **Lack of flexibility for employed grandparent carers:** maintaining involvement in a grandchild’s education and being available to care for the child during school holidays and periods of illness may require ongoing employment flexibility.
- **Inadequate/poor quality information and advice:** evidence suggests that carers want and need improved information and advice on the law, benefits and services<sup>75</sup> (especially during times of crisis, and at transition points). There are also problems with the consistency and transparency of the advice given to grandparent carers.
- **Complexity and ‘red tape’:** this is a particular problem for grandparents taking on care of their children in a crisis. Organising support, benefits and formalising arrangements can be a a very complex process, particularly when grandparents are not provided with clear and consistent information and advice. Even transferring child benefit from the parent to the grandparent’s name has been highlighted as an issue in qualitative studies with grandparent carers. Where there are disputes access to child benefit can be delayed.

## 08. Priorities for future research



**While this review has focused on what we know about families who are particularly vulnerable to poverty, it has also highlighted where we are lacking potentially very valuable research evidence.**

It reveals a clear divide between what we know about the relationship between parenting and poverty and the experiences of the wider family, in particular the association between what grandparents do and their financial well-being. This is an omission that needs to be addressed.

### **Single parent families**

This is an area where much of the research conducted centres on the experiences of lone parents and their use of informal childcare, although there is also a small but growing body of work looking at the role of grandparents following separation and divorce. This leaves us, however, with a very distinct gap in research evidence concerned with the experiences of those grandparents caring for grandchildren who belong to lone parent families and the impact this care has on their economic well-being.

### **There is a need for:**

- Research examining inter-generational patterns of lone parenting and income levels;**
- Research building on what we have found in this study by examining the impact of providing childcare and other forms of support for lone parent families on grandparents' wellbeing, such as their financial, health and psychological wellbeing.**

### Families with disabled children and/or disabled parents

Despite a considerable body of evidence on the relationship between disability and poverty, little of this looks beyond the nuclear family to grandparents and other wider family support networks. What literature there is on grandparenting in families where a parent or child is disabled tends to come from small-scale, partial US-based studies, written from the perspective of parents, rather than grandparents. There appears to be considerably more known about grandparents' role in families with disabled children when compared to families with disabled parents.

#### There is a need for:

- **More research from the perspective of grandparents with disabled grandchildren. (To date much of the qualitative research has focused on parents' views of grandparent involvement and support).**
- **Greater exploration of the different roles grandparents play in families where the parent has a disability. This might include how they negotiate the change in role from the parents of a disabled child to grandparents supporting a disabled parent, or how relationships change and/or their contribution changes when an adult child's health condition is newly diagnosed or they become disabled.**
- **Additional work to consider the needs and experiences of disabled grandparents and the contribution they make to their family's lives.**

### Black and minority ethnic families

There is a real dearth of UK research looking at the experiences of different black and minority ethnic grandparents, the role they play in their grandchildren's lives and the effect this has on their financial well-being. There are two key reasons why research should be a particular priority: firstly because this is an area where it is especially difficult to extrapolate from US evidence (as a result of significant differences in the ethnic profile and social context); secondly, there may be a temptation to assume knowledge on the basis of stereotypical presentations of grandparenting in BME families or to assume that what is true for one culture is true for another.



**There is a need to:**

- **Develop our knowledge of the relationship between ethnicity and hardship at different stages in the life-cycle;**
- **Explore the role of grandparents in Pakistani and Bangladeshi households where the mother is employed; and**
- **Develop a better understanding of the role that black and minority ethnic grandmothers play in their grandchildren’s lives (‘testing’ the stereotypical image of multigenerational living).**

### **Family and friends (kinship) carers**

Although there is a considerable body of literature on the (hardship) experiences of US grandparent carers<sup>1</sup>, the UK can offer relatively little by comparison<sup>2</sup>. To date British evidence on the first-hand experiences of grandparent carers has tended to come from small-scale studies using convenience samples.

**There is a need for:**

- **Longer-term studies looking at how families manage over time – ideally tracking children from placement into adulthood and comparing outcomes of children in family and friends care to those in non-relative foster care;**
- **Evaluative outcome studies – including sub-group analysis (by broad child and grandparent characteristics);**
- **More research with others involved in (or with) these families; so as well as grandparents: children, parents, other members of the carers’ family and also practitioners and service providers;**
- **More evidence on those families who receive discretionary payments and those who do not, together with information about what they receive; and**
- **Official data on the children living in family and friends care and their carers.**

## 09. Implications for policy and practice



**Demographic and social shifts such as population ageing, increased female employment rates and the growing period of dependency of young adults have given rise to a situation in which grandparents are facing growing demands on both their finances and their time<sup>1</sup>.**

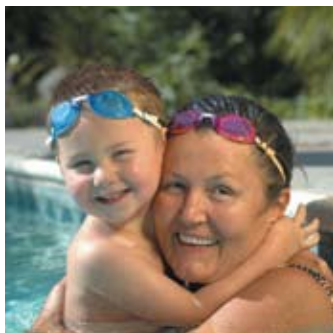
Those in late middle age (particularly women) are increasingly being called upon to care for one or more generation of dependents – grandchildren, children and elders. Evidence demonstrates that this pressure to care is particularly acute for some groups of grandparents, for example, those supporting lone parent families or families where the parent or child has a disability.

As retirement ages and employment rates for over 50s increase (in some respect the result of active encouragement to delay labour market exit) more grandparents, particularly grandmothers, are also facing growing pressure either to combine paid work and care, or to choose between them. There are a number of factors driving this kind of decision, for example, the urgency of care needs, job status and wage levels, and two possible outcomes: to give up, or cut back on paid work (something that appears to be more common among younger, low income women in low status employment<sup>2</sup>), or alternatively, to refuse to provide, give up or cut back on providing childcare. The first of these two decisions is likely to impact negatively the grandparents' economic circumstances (short and long-term), the second, on the employment decisions and incomes of younger generations, particularly those less able to afford formal care provision.

Thus we are in a situation where two significant policy goals – raising the employment rate of mothers and of older people – are effectively working in conflict with one another (a situation that is worsened by problems with the coverage, quality and affordability of formal childcare)<sup>3</sup>. This conflict, in turn, has implications for the Government's own policy objectives of reducing child poverty and also reducing the risk of poverty for those in retirement.

**It is only by focussing on the grandparent life-stage and its intersection with families at risk of poverty that we can begin to understand and identify what the challenges are for policy and practice.**

## 10. Conclusion



**Family life has changed dramatically over the last 40 years and as we enter the new decade it continues to do so. Growing family diversification, as well as the ageing into grandparenthood of those who were part of the earliest shifts (such as the growth in divorce), presents new challenges for Britain's families.**

The evidence presented here tells a new, yet all too familiar story about the significant role Britain's grandparents play in family life today, providing support for their children and care for their grandchildren (this being particularly pronounced among some family types). Yet in some respects their role is becoming increasingly pivotal – grandparents are providing consistency for children who are more likely than at any other time since before the 1950s to face disruption in their 'nuclear' family. Likewise the growth in mother's employment, and improvements in healthy life expectancy have meant that grandparents are playing an increasingly significant role as providers of informal childcare and supporting family life in a range of ways.

As this review has indicated it is the families who are most vulnerable to poverty in which grandparents are making the most significant contributions. In particular single parent families, those with disabled parents and/or disabled children, black and minority ethnic families and those where parents are no longer able to care for their children. Grandparents in these families are also the ones who are most likely to face trade-offs in terms of work and care. Evidence on the intergenerational patterns of poverty (for example, the higher incidence of lone parenthood among those who grow up in low income households<sup>1</sup>) suggests that these grandparents are more vulnerable to poverty themselves, regardless of the contribution they make. But that that contribution can often also create additional financial strain.

If work really is the 'best route out of poverty', more needs to be done to ensure that members of all generations are able to work (and be better-off in work), but without compromising the care of the youngest and oldest members of our population. However, emphasis on paid work should not overshadow steps being taken towards achieving greater recognition and value for different types of work, particularly unpaid care. Indeed, despite positive moves forward (for example, with improved NI credits for those undertaking substantial care work) there is need for more (financial) recognition for those who care, whether by necessity or by choice.

Thus it is important to find a balance between supporting employment (e.g. more childcare places, suitable and appropriate for all children and more flexibility in work), and providing adequate financial and practical support for carers (including financial recognition of the childcare grandparents provide that enables parents to work). This may mean adopting a life-stage approach that recognises grandparenthood (like parenthood) as a distinct life-stage (one that can impact at very different ages) and one that brings accompanying responsibilities. It is important to recognise that many people, particularly women, will adopt different caring roles at different times throughout their lives.

**This report demonstrates the scale of the under-recognised grandparental contribution for families at risk of poverty.**

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## 08. Priorities for future research

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## 10. Conclusion

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