NAPNAP Position Statement on Supporting Grandparents Raising Grandchildren

The National Association of Pediatric Nurse Practitioners (NAPNAP) supports and commends the role that many grandparents have taken as primary caregivers for their grandchildren, thereby strengthening family values, developing intergenerational sensitivities, and encouraging continuance of cultural and ethnic heritage.

According to the U.S. Census Bureau (2005), more than 5.8 million children and adolescents live in households headed by grandparents. In more than 2.4 million homes, grandparents are the sole caregivers for these youth. Grandparent involvement in raising grandchildren has become increasingly prevalent in our society and may be attributed to many factors, including parental military service, educational needs, or unemployment, spiraling child care costs, divorce, poverty, death of a parent, child abuse and/or neglect, teenage pregnancy, drug or alcohol abuse, HIV/AIDS, incarceration, mental health problems, or family violence (Butler & Zakari, 2005; Kinship Caregiver Support Act; Pincus et al., 2005).

The ethnic diversity in these families and cultural perceptions markedly affect the adaptation to the custodial grandparent role (Goodman & Silverstein, 2002). In many cases, a two-generation gap may create cultural differences and wide disparity in social values (Goodman, 2005). Despite these potential problems, grandparents who raise grandchildren are experienced parents who provide unconditional love and afford stability in family life for these children. What’s more, the role of primary caregiver can enhance the lives of elders who feel a renewed reason to live life fully.

Unfortunately, the legal status of children raised by grandparents can be tenuous. Although grandparent involvement keeps the family together and out of the formal foster care system (Kinship Caregiver Support Act, 2007), public policies often do not take these families into consideration (Copen, 2006). Grandparents raising grandchildren may experience unique challenges, including financial strain, legal custody issues, and limited access to medical care for their grandchildren (Butler & Zakari, 2005). Additionally, grandparents who raise grandchildren may be at risk for parental stress, disruption of social activities, physical ailments (Hughes, Waite, LaPierre, & Luo, 2007), and alterations in family relationships (Butler & Zakari, 2005; Sands, Goldberg-Glen, & Thornton, 2005). For these reasons, NAPNAP acknowledges the critical need for social support of custodial grandparents and of their grandchildren who also may have challenges of their own, including feelings of abandonment, behavioral issues, anxiety, depression, criminal involvement, and school difficulties (Campbell, Hu, & Oberle, 2006; Goodman, 2005; Hayslip & Kaminski, 2005; Smith, Savage-Stevens, & Fabian, 2002).

To advocate for improved health care for children being raised by grandparents and for support and respect for grandparent caregivers, NAPNAP encourages...
pediatric health care providers and educators to:
1. Recognize the uniqueness of each family headed by grandparents and be culturally sensitive to intergenerational gaps and family values when performing assessments and providing interventions.
2. Assess grandparents and grandchildren for unique strengths, strong familial bonds, religious or cultural beliefs, and value systems that can be encouraged to further reinforce a cohesive family.
3. Support legislative efforts, such as the Kinship Caregiver Support Act, that aim to provide services and funding for programs that assist grandparent-headed households, particularly those that address health care, school enrollment, and housing policies.
4. Screen grandparents raising grandchildren for potential stressors or depression, using a culturally competent approach, and provide referrals as needed.
5. Screen children being raised by grandparents for potential mental health issues, including attention deficit disorder, post-traumatic stress disorder, anxiety, and depression, using a culturally competent approach, and provide referrals as needed.
6. Assess the psychosocial status of families headed by grandparents and make appropriate referrals for behavioral health, parenting skills, and support groups for both grandparents and grandchildren.
7. Become familiar with community resources for families headed by grandparents and provide referrals to these resources as appropriate.
8. Coordinate services with the child’s school and grandparents, involving biological parents, if possible, if the parents plan to return as head of the family.
9. Include content related to families headed by grandparents in the curriculum of pediatric nurse practitioner programs.

In summary, NAPNAP, an organization that promotes optimal health for children, commends and supports the role of grandparents as primary caregivers of grandchildren. Realizing that this unique family structure may place stress on grandparents and children, NAPNAP calls on health care providers to screen for stressors and coping skills, providing culturally competent interventions as warranted, and to encourage strengths and bonds as building blocks for a stronger family unit. Furthermore, NAPNAP acknowledges the instrumental role PNP’s have in incorporating family values and cultural sensitivity when assessing health and psychosocial needs, providing education and support, building family strength and cohesiveness, and offering appropriate referrals to meet these needs.

NAPNAP is an organization whose mission is to promote optimal health for children through leadership, practice, advocacy, education and research.

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REFERENCES

Kinship Caregiver Support Act, H.R. 2188 (introduced May 7, 2007; referred to the Subcommittee on Healthy Families and Communities September 19, 2007).

RESOURCES