African-American Grandmothers: Rationale for the Support They Give to Their Parenting Adolescents

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THESIS

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This dissertation is dedicated to God, the one which is, which was, and which is to come
(Revelations 1:8). Without God’s grace, mercy, guidance, strength, and provision I would not
have been able to complete this doctoral program. I dedicate this dissertation to my husband,
Hollis Sumo, and my children Chris, Gabrielle, and Benjamin because without their patience and
support this dissertation would never have been completed. I dedicate this dissertation to my
grandfather, Dr. Roland Wesley, who always verbalized and expected that his children and
grandchildren would go as far as or further than him in their education and life pursuits. I am
truly honored and thankful to have had a grandfather who lived his life being a blessing to others.
I hope to continue his legacy of promoting education for underserved populations and living a
purposeful life by which God is glorified.
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<tr>
<td>MG</td>
<td>Maternal Grandmother(s)</td>
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<td>PG</td>
<td>Paternal Grandmother(s)</td>
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<td>PTA</td>
<td>Parent Teacher Association</td>
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<td>WIC</td>
<td>Women, Infants, and Children</td>
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SUMMARY

The purpose of this qualitative descriptive study was to explore low-income African-American grandmothers’ rationales for the support they give to their adolescent sons and daughters who were adolescent parents, specifically the types of support grandmothers provided, grandmothers’ rationales for providing support, and influences to grandmothers’ provision of support. A purposeful sample of 20 grandmothers participated in this study: 10 mothers of adolescent mothers and 10 mothers of adolescent fathers.

The research questions were: a) What kind of support are grandmothers giving to adolescent parents to support adolescent parents as primary caregivers? b) What are grandmothers’ rationales for the support they give to adolescent parents? c) What influences the types of support grandmothers give to their parenting adolescents? d) What are similarities and differences among the types of support given by mothers of adolescent fathers compared to mothers of adolescent mothers?

Bronfenbrenner’s (1989) ecological systems theory was used as the conceptual framework for this study. In-depth interviews were conducted. Measures used were the Sumo Interview Guide, the demographic questionnaire, and field notes. The mean age of the maternal grandmothers in this study was 48.9 (SD=11.6), and the mean age of the paternal grandmothers was 48.3 (SD= 13). The mean age of the adolescent parents for which the grandmothers provided responses was 18.1 (SD=.99) for adolescent mothers and 18.4 (SD=.52) for adolescent fathers. The maternal and paternal grandmothers had similar demographic data in terms of age, marital status, receipt of public assistance, frequency of church attendance, and unemployment status. The maternal and paternal grandmothers differed in their level of education and income.
Babysitting, advice, financial, and shopping were the primary types of support provided by maternal and paternal grandmothers. Love was a major reason grandmothers reported for providing support. Both the paternal and maternal grandmothers reported to receive limited support from their friends and families and identified limited resources within their community. A small number of grandmothers described their work environment as well as supportive environment of the adolescent parents’ school as being influences to the support they provided. A larger number of grandmothers reported that religion, their neighborhood, current life happenings, past experiences, and adolescent parents’ characteristics influenced the support they provided. A total of four randomly selected grandmothers, maternal (n=2) and paternal (n=2), reviewed the study’s findings, and they reported that the summaries represented their thoughts regarding the types of support they provided, their rationale for provision of support, and influences to support they provided to their children who were adolescent parents.

Studies should be directed at evaluating the needs of grandmothers. Health care providers should explore ways to strengthen the support networks for grandmothers with parenting adolescents. Grandmothers’ needs, experiences, and expectations should be included during the development and implementation of intervention programs designed to improve the outcomes of adolescent parents and their children.
I. Introduction

A. Statement of the Problem

Adolescent parenting has cost the United States approximately $9 billion yearly (Hoffman, 2006). Adolescent parenting has presented a substantial social cost in the United States due to negative long-term and short-term outcomes for adolescent parents and their children (Centers for Disease Control and Prevention, 2011).

Literature has revealed that African-American adolescents have a considerably higher risk for having a baby in adolescence compared with Caucasian adolescents (Ashby, Remington, & Katcher, 2005). Fifty percent of African-American adolescent females became pregnant before age 20 compared with 19% of Caucasian adolescent females (National Campaign to Prevent Teen and Unplanned Pregnancy, 2010). African-American adolescent males had a higher prevalence of fathering a child compared with Caucasian adolescent males, 7.6% and 1.7%, respectively (Centers for Disease Control and Prevention, 2004). Additionally, 25% of non-Hispanic black fathers had their first child before age 20 (Martinez, Chandra, Abma, Jones, & Mosher, 2006). Moreover, 97% of births to African-American adolescents were non-marital births (Martin, Hamilton, Sutton, Ventura, Menacker, Kirmeyer, & Matthews, 2009).

Adolescent parents have been at risk for poor transition into the parent role due to economic, social, medical, and academic issues (Blinn-Pike, 2005; Florsheim, Sumida, McCann, Winstanley, Fukui, Seefeldt, & Moore, 2003). Adolescent mothers have voiced challenges in balancing school, jobs, relationships, and childcare (Wayland & Rawlins, 1997). Adolescent fathers have identified challenges to parenthood similar to those voiced by adolescent mothers (Paschal, 2006). However, making the transition to fatherhood was one of the greatest challenges faced by African-American adolescent fathers due to problems with their female partners and
their families, as well as, financial issues, a perceived loss of freedom, experiences of racism, and living in drug prevalent neighborhoods, which contain violence, poor housing conditions, and unemployment and underemployment (Paschal, 2006).

The strongest evidence demonstrating the difficulty adolescent parents have transitioning into parent roles have been found in literature that depicts negative outcomes for adolescent parents and their children. Adolescent mothers were less likely to complete high school, marry, and earn more than minimum wage (Moore & Brooks-Gunn, 2002). Like adolescent mothers, adolescent fathers worked in low-paying jobs and lived in low socioeconomic environments (Paschal, 2006). Adolescent fathers usually have lower incomes, less education, and more children than men who wait until at least the age of 20 to have children (Stengel, 2005). Adolescent fathers’ low-income impacted the amount of financial support they could provide to their children (Bryant, 2006), and lack of money was associated with adolescent fathers’ lack of involvement with their children (Rhein, Ginsburg, Schwarz, Pinto-Martin, Zhao, Morgan, & Slap, 1997).

The children of adolescent parents fared worse than children of adult parents (Hardy, Astone, Brooks-Gunn, Shapiro, & Miller, 1998). Although children born to adolescent mothers were physically and mentally healthy from birth to one year old, by the end of the first year, serious developmental delays were found (Borkowski, Bisconti, Weed, Willard, Keogh, & Whitman, 2002). Children born to adolescent parents were 50% more likely to repeat a grade (National Campaign to Prevent Teen Pregnancy, 2010), and children born to unmarried adolescent mothers were 10 times more likely to live in poverty than children born to married women 20 years old or older (Wertheimer, O’Hare, Croan, Jager, Long, Reynolds, 2002). Children born to adolescent mothers were more likely to live in low-income, disadvantaged environments, have low IQ scores, experience early sexual activity, and get arrested (Hardy, Astone, Brooks-Gunn, Shapiro,
& Miller, 1998). Children born to adolescent parents experienced more internalizing problems, e.g., feelings of frustration, depression, low self-esteem, and externalizing problems, e.g., delinquency, compared with children born to adult parents (Luster & Haddow, 2005). They experienced a higher rate of child abuse (Luster & Haddow; Moore & Florsheim, 2008) and experienced adverse developmental outcomes (O’Callaghan & Willard, 2001) such as: academic deficits, intellectual and socioemotional problems, and slowed development of adaptive behavior (Borkowski, Bisconti, Willard, Keogh, Whitman, & Weed, 2002; Lounds, Borkowski, Whitman, Maxwell, & Weed, 2005; O’Callaghan & Willard, 2001; Sommer, Whitman, Borkowski, Gondoli, Burke, Maxwell, & Weed, 2000).

B. Significance

The Committee on Adolescence and Committee on Early Childhood, Adoption, and Dependent Care has acknowledged the need to identify factors which improve outcomes for parenting adolescents and their children (American Academy of Pediatrics, 2001). Adolescent parenting models have illustrated that an adolescent’s social support network directly influences adolescent parenting (Schellenbach, Whitman, & Borkowski, 1992; Nath, Borkowski, Whitman, & Schellenbach, 1991). Mothers of African-American adolescent parents have provided support to their parenting adolescents during the adolescents’ transition to parenthood (Colletta & Lee, 1983; Oberlander, Shebl, Magder, & Black, 2009; Paskiewicz, 2001; Sadler & Clemmens, 2004). Maternal support for adolescent mothers has influenced adolescents’ parenting behavior and the development of the adolescent mothers’ children (Belsky, 1984; Bentley, Gavin, Black, & Teti, 1999; O’Callaghan, Borkowski, Whitman, Maxwell, & Keogh, 1999).

Voight, Hans, and Bernstein (1996) found that the mothers of adolescent mothers buffered the effect of negative outcomes by providing support to their adolescent daughters and their
grandchildren. Support was in the form of providing tangible, emotional, and instrumental assistance (Stewart, 1993). Tangible support was the provision of money and physical objects (Norbeck & Tilden, 1988). Emotional support was the love and interpersonal acceptance an individual received from another, and instrumental support included provision of information, advice, and assistance with routine tasks (Belsky, 1984). Four conceptual models of support have been identified for inner-city, African-American mothers, who assist their adolescent daughters’ transition into parenthood: parental replacement model, parental supplement model, supported primary parent model, and parental apprentice model (Apfel & Seitz, 1991). In the parental replacement model, the mother assumed all parenting responsibility for her adolescent daughter’s child. In the parental supplement model, shared caregiving occurred among the adolescent mother, her mother, and other relatives. In the supported primary parent model, the adolescent female assumed primary responsibility for caring for her child. The adolescent mother was independent and received occasional family support, such as, financial assistance, baby-sitting, and completion of household tasks. In the parental apprentice model, the mother facilitated her adolescent daughter’s transition to motherhood by mentoring and educating her adolescent daughter without taking over parenting responsibilities.

There has been limited literature depicting the supportive relationship found between an adolescent father and his mother; however, the mothers of adolescent fathers have played an important role in the lives of their adolescent sons as they transition into parenthood (Paschal, 2006). Although the mothers of African-American adolescent parents have been considered important figures in adolescent parents’ social networks, little research has been performed to better understand these grandmothers’ rationale for support that they provide to their parenting
adolescents. Also, little was known about what influenced the types of support grandmothers provide.

Previous literature has addressed the importance of grandmother support for African-American adolescent parents (Carey, Ratliff, & Lyle, 1998; Eshbaugh & Luze, 2007; Gee & Rhodes, 2003; Paschal, 2006). Grandmothers provided support that allowed adolescent mothers to graduate from high school, become employed, and support adolescent mothers’ mental health and parenting satisfaction (Cooley & Unger, 1991; Sadler, Anderson, Sabatelli, 2001). The mothers of the adolescent fathers encouraged their sons to be responsible fathers, discussed fatherhood concerns with their sons, and were the primary source of income for their adolescent sons’ children (Paschal, 2006).

Grandmothers have been adolescent parents’ primary support (Voight, Hans, & Bernstein, 1996); therefore, it was important to better understand grandmothers’ rationale for their provision of support. To date, no study has elicited information from maternal and paternal grandmothers regarding their rationale for the support they provided to their parenting adolescents.

C. Purpose of the Study

The purpose of this qualitative descriptive study was to explore low-income African-American grandmothers’ rationales for the support they give to their adolescent sons and daughters, who are parents. Specifically, the researcher explored the types of support grandmothers provided, their rationales for providing support, and the influences to their provision of support. A purposeful sample of 20 grandmothers was recruited for participation in this study. In-depth interviews were performed with 10 mothers of adolescent parenting sons and 10 mothers of adolescent parenting daughters.
D. Research Questions

1) What kind of support are grandmothers giving to adolescent parents to support adolescent parents as primary caregivers?

2) What are grandmothers’ rationales for the support they give to adolescent parents?

3) What influences the types of support grandmothers give to their parenting adolescents?

4) What are similarities and differences among the types of support given by mothers of adolescent fathers compared to mothers of adolescent mothers?

E. Operational Definitions

African-American: Self-identified as African-American or black.

Grandmother: Self-identified as biological female parent or female surrogate parental figure of the adolescent father or the adolescent mother.

Adolescent parent: Any African-American who was between the ages of 14-19 and has a biological child.

Support: The provision of tangible, instrumental, and emotional assistance (Stewart, 1993).

Tangible support: The provision of money and material items (Norbeck & Tilden, 1988).

Emotional support: Love and interpersonal acceptance an individual receives from another (Belsky, 1984).

Instrumental support: The provision of information, advice, and assistance with routine tasks (Belsky, 1984).

Surrogate grandmother: Any female figure acting in the role of grandmother.
II. Review of Literature

The review of the literature is written in five sections. The first section describes the conceptual framework that guided this study. The second section explores environmental aspects that may influence grandmothers’ provision of support, while the third section identifies personal aspects that may influence support provided. The fourth section explores support within the African-American family. The fifth section examines research studies, which identified experiences of grandmothers, who have parenting adolescents. The literature reviewed presented the grandmothers’ experiences from their own perspectives.

A. Conceptual Framework

An individual’s behavior and development has been found to be context dependent (Bronfenbrenner, 1979; Fisher, 2008), therefore, an ecological perspective was chosen to explore grandmothers’ rationale for their provision of support. Bronfenbrenner’s (1989) ecological systems theory was the conceptual framework utilized in this study. Bronfenbrenner’s ecological perspective was chosen because of the importance placed on context for individual development and the discussion of personal psychological attributes, which were deemed to influence behavior. Bronfenbrenner (1979) presented a theoretical perspective that focused on interactions between a developing person and his/her environment.

The rationale for grandmothers’ provision of support was believed to be context dependent; therefore, it was assumed that grandmothers’ rationales for providing support could not be explored without considering the context in which the grandmothers lived and their personal characteristics. The purpose of this section is to provide an overview of Bronfenbrenner’s ecological perspective, to describe how the ecological theory relates to African-American grandmothers with adolescent parents, and to explore literature for environmental and
psychological attributes that could impact these grandmothers’ provision of support to their parenting adolescents.

**Overview of conceptual framework.** Bronfenbrenner (1989) presented a description of smaller circular structures nested within larger circular structures that surround a developing individual. This circular description represents an ecological environment. Each circular structure depicts a particular ecological system. Bronfenbrenner postulated that interaction within and across these systems influence human development and that the ecological environment has an impact on the developing person. The innermost circular setting contains the child or the developing person (Bronfenbrenner, 1989).

**Microsystem.** The ecological system closest to the developing person is the microsystem (Bronfenbrenner, 1979) and is characterized as a pattern of face-to-face interactions (Bronfenbrenner, 1989). The microsystem includes such settings as: the family, school, peer group, and workplace (Bronfenbrenner, 1994). The developing person is presented within the microsystem settings.

**Mesosystem.** The mesosystem is the ecological system directly following the microsystem. The mesosystem represents the interrelationships among two or more microsystems. For a developing adult, a mesosystem would include family, work, and social life (Bronfenbrenner, 1979).

**Exosystem.** The exosystem is the next system after the mesosystem. The exosystem consists of a larger system of relationships that includes more than one setting, and one of the settings did not include the developing person. An example of the exosystem for a developing adult is the interrelationship between home and their children’s peer group or home and government offices (Bronfenbrenner, 1993).
**Macrosystem.** The macrosystem could be considered the societal blueprint for a particular culture or subculture (Bronfenbrenner, 1994). It includes characteristics of microsystem, mesosystem, and exosystems of a given culture and subculture with particular attention paid to such aspects as belief systems, bodies of knowledge, material resources, customs, and opportunity structures within the environment (Bronfenbrenner, 1979).

**Summary.** Bronfenbrenner (1989) suggested that ecological transitions occur when a person’s position in the environment is altered due to change in roles, and if one member of a dyad experiences developmental change, the other is likely to undergo developmental changes (Bronfenbrenner, 1979). Therefore, when adolescent parents undergo developmental changes, their mothers also undergo developmental changes. Mothers of adolescent parents could experience an ecological transition when their adolescent children become parents. Thus, the various ecological systems could influence development and behavior through their influence on the psychological material of the developing person, i.e. what is thought of, perceived, and feared. Therefore, ecological systems could impact the developing mother as she transitions to the grandmother role, and interactions across ecological systems would impact these grandmothers’ rationale for behaviors. This study endeavored to obtain a better understanding of grandmothers’ rationales for the provision of support given to their children, who are adolescent parents. A person’s psychological material changed due to exposure to and interaction with the environment (Bronfenbrenner, 1979). Thus, aspects of the microsystem, mesosystem, exosystem, and macrosystem would influence grandmothers’ rationales for the support she provided to her parenting adolescent.
Figure 1: Conceptual Framework
B. Environmental Aspects that May Influence Grandmothers’ Provision of Support

Researchers have often failed to explore the context surrounding grandmothers’ transition to grandmotherhood (Dallas, 2007). Grandmothers could be stressed by familial issues and issues from the larger economic environment and community (Sadler & Clemmens, 2004). Although economic stress has been found to be a factor that impacted parenting, limited information existed regarding personal and environmental factors that shaped and impacted parenting practices (Kotchick, Dorsey, & Heller, 2005). Previous research has not revealed the dynamics of grandparent involvement (Apfel & Seitz, 1991). However, context has been found to be important in understanding behavior (Fisher, 2008).

**Microsystem and mesosystem.** Family, work, and church are settings within African-American grandmothers’ microsystem. The mesosystem consists of interrelations across these settings. Grandparents have often made tremendous personal sacrifices to contribute to the well-being of their families (Goodman & Silberstein, 2002). In 2000 approximately, two-thirds of grandparent-headed households, mainly headed by grandmothers, were multigenerational households. Multigenerational households might experience higher rates of poverty and more economic hardship than non-multigenerational families (Pittman & Boswell, 2008). Adolescent motherhood has contributed to incidences of multigenerational households. Although grandmothers have been found to provide support to their parenting adolescent children, there were some inconsistencies in the literature regarding their provision of support. Adolescent motherhood placed great stress on mother-daughter relationships (Kaplan, 1996). Grandmothers might refuse to support their daughters (Kaplan, 1996), because supporting their parenting adolescent daughters may have interfered with the grandmothers’ own goals and aspirations (Sadler & Clemmens, 2004). Teenage parenthood was found to create additional stress for the
mothers of the adolescent parents, because these grandmothers barely made enough money to support their family and feared that they would be responsible for their grandchildren (Paskiewicz, 2004; Kaplan, 1996).

African-American grandmother caregivers have been identified as: non-high school graduates, public assistance recipients, living below the poverty level, and caring for one or more grandchildren (Simpson & Lawrence-Webb, 2009). The stress experienced by African-American grandmothers has been moderated by the church. Religiosity has moderated depressive symptoms for African-American grandmothers, who have parenting adolescents (Brown, Caldwell & Antonucci, 2008; Giger, Appel, Davidhizar, & Davis, 2008).

Exosystem. The neighborhood has been described as: “a transactional setting that influences individual behavior and development both directly and indirectly through its influence on several other social contexts that often are nested within the neighborhoods, for example, families, schools, and peer groups” (Elliott, Menard, Rankin, Elliot, Wilson, & Huizinga, 2007, p. 39). A neighborhood shapes family activities and individual development (Kotchick, Dorsey, & Heller, 2005). Inner-city neighborhoods have been characterized by high rates of crime, substance abuse, unemployment, teenage pregnancy, welfare dependency, and mental health problems (Elliott, Menard, Rankin, Elliot, Wilson, & Huizinga, 2007). Childrearing has been undermined by negative social forces, while adults have reported to have little control over their immediate environment (Elliott, Menard, Rankin, Elliot, Wilson, & Huizinga, 2007). Community institutional structures have included church and religious organizations, the presence and quality of health and mental health facilities, educational systems, day care centers, community centers, public transportation, safe playgrounds, profit and non-profit helping organizations, viable businesses, and culturally sensitive human service agencies (Simpson & Lawrence-Webb, 2009).
Neighborhood contexts and poverty have been issues found within the environment that have the potential to influence grandmothers’ provisions of support. Low-income parents have an elevated risk for psychological distress, such as depression (Barnett, 2008). However, mothers, who report higher levels of support, might not experience the negative effect of neighborhood stress (Kotchick, Dorsey, & Heller, 2005), because support has been positively related to optimal parental functioning (Belsky, 1984).

**Macrosystem.** Society’s expectations, material resources, and opportunities might influence support provided to adolescent parents. For example, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 required mothers under the age of 18 to live in adult-supervised households and participate in educational advancement (Personal Responsibility and Work Opportunity Reconciliation Act of 1996). This law required grandmothers to provide the tangible support of housing to adolescent mothers. These grandmothers were compelled by law to provide this form of support even if they did not want to or were not prepared to provide housing to adolescent daughters and their grandchildren (Bee, 2007; Savio & Hollo, 2009).

C. **Personal Aspects that May Influence Grandmothers’ Provision of Support**

Adolescent parenthood might lead to early transition to grandparenthood for the parents of adolescent parents (Brown, Caldwell, & Antonucci, 2008). Limited information has been available regarding how well mothers of adolescent parents have coped with off-time family transitions (Brown, Caldwell, & Antonucci, 2008); therefore, it has been deemed important to explore grandparent caregivers coping skills (Kelch-Oliver, 2008). Increased appreciation of grandmothers’ experiences might contribute to a better understanding of childrearing among African-American grandmothers who have parenting adolescents (Flaherty, 1988).
Caregiving grandmothers were more likely to be characterized as depressed and have more limitations in activities of daily living compared with non-caregiving grandmothers (Fuller-Thomson & Minkler, 2000). Depression might interfere with grandmothers’ ability to provide needed support to their teenage daughters and infant grandchildren (Brown, Caldwell, & Antonucci, 2008). Parental psychological distress might be the most “proximal” influence on parenting behavior (Kotchick, Dorsey, & Heller, 2005).

Younger grandmothers reported that they felt too young to perform grandmother role expectations. Some grandmothers, who have their own children to raise, felt overloaded with responsibilities and found it difficult to be a grandmother and mother at the same time (Sadler & Clemmens, 2004). Smith, Palmieri, Hancock, and Richardson (2008) stated that psychological distress was higher for grandmothers under 55 years old. Older grandmother caregivers were faced with various challenges, such as their own declining health and limited financial resources (Ruiz, 2000).

The majority of grandmother led households were single-parent households. Although these grandmothers were not married, they might still have a social life, and young grandmothers might have felt that carrying out the grandmother role might hinder their time spent in social activities. Burton (1996) found that younger grandmothers often refused to accept the role of surrogate mother due to their own work, childbearing, or romantic relationships. Changes in role expectations for mothers of adolescent parents might have brought about role conflict and role ambiguity (See, Bowles, & Darlington, 1998; Bee, 2007). Bronfenbrenner (1979) suggested that whether or not parents could be effective in family childrearing roles depended on role demands, stress, and supports. Although there was some literature depicting environmental and personal contextual factors that might influence grandmothers’ provision of support to adolescent parents,
much of the literature depicted the position of maternal grandmothers or did not specify whether the grandmother was maternal or paternal.

D. Support in the African-American Family

Historically, the African-American family structure has adapted to meet the needs of the family (Billingsley, 1992). Often, within the African-American family, the matriarchal figure has taken on childrearing responsibility (Burton & Bengston, 1985). There have been high proportions of single-parent led households and grandparents as primary parents within the African-American community (McAdoo, 2002). However, intergenerational and multigenerational family structures have been found to strengthen the African-American family through the sharing of resources (Waites, 2009).

Grandmothers with parenting adolescents have provided various types of support, but grandmothers might not provide a particular type of support. For example, Apfel and Seitz (1996) suggested that a grandmother might provide little support for child care but might offer emotional and financial support, while others only provided shelter for their parenting adolescents and grandchildren. Because adolescents received a substantial amount of help from their parents (Schoeni & Ross, 2004) and African-American families often depended on the extended family to help with the survival of the family (Dallas, 2004), family support has been deemed important for parenting adolescents (Cosey & Bechtel, 2001; Letourneau, Stewart, & Barnfather, 2004; Logsdon, Gagne, Hughes, Patterson, & Rakestraw, 2005).

Grandmothers have become the primary caregiver for their grandchildren for reasons such as: adolescent pregnancy, death of grandchild’s parent, incarceration of parent, drug addiction of parent, and parents’ mental or physical illnesses (Dowdell, 2005; Goodman & Silverstein, 2006). Fuller-Thompson and Minkler (2000) identified mental and physical health concerns for
grandmothers who were the primary caregivers for their grandchildren. African-American
grandmothers, who cared for grandchildren were vulnerable to diminished health, and they
reported more stressful family life events than non-caregiving grandmothers (Carr, 2006; Musil,
Warner, Zauszniewski, Jeanblanc & Kercher, 2006). Due to the negative conditions associated
with primary caregiving grandmothers, it was surprising that there has been limited knowledge
on the experiences of grandmothers, who have unmarried parenting adolescents (Sadler &
Clemmens, 2004). Grandmothers, who reside in multigenerational households have been
expected to continue childrearing for parenting adolescents and providing care to their
grandchildren.

In 2000, 5.8 million grandparents resided with their grandchildren and 62.7% of
grandmothers reported responsibilities for grandchildren (Simmons & Lawler-Dye, 2003).
Although these statistics shed some insight on the numbers of grandmothers residing with their
grandchildren, nationally, the number of grandmothers with adolescent parenting children was
not reported. Many adolescent mothers and their children have resided with the adolescents’ own
mothers after the birth of their children (Oberlander, Shebl, Magder, & Black, 2009). Moore and
Brooks-Gunn (2002) described grandmothers’ involvement in the lives of their adolescent
daughters, and co-residence was viewed as support. Grandmother involvement might include the
following: grandmothers being the primary caregivers of their grandchildren, grandmothers’
involvement with grandchildren, grandmothers as parental role models for adolescent mothers,
and shared caregiving within multigenerational families (Moore & Brooks-Gunn, 2002).

E. Grandmothers’ Perspective

Grandmothers have been the primary support figures for adolescent parents (Dallas & Chen,
1998). Grandmothers’ support has allowed adolescent mothers to fulfill the developmental tasks
within adolescence and transition to adulthood and parenthood (Apfel & Seitz, 1996; Paskiewicz, 1995). Grandmother support could be seen from two different perspectives, the adolescent parents’ perspective and the grandmothers’ perspective (Borcherding, SmithBattle, & Schneider, 2005). When the grandmothers’ perspectives were included in adolescent parenting research, their perspectives were provided to: (1) illustrate the impact of grandmothers on the parenting adolescent and their children (Oberlander, Black, & Starr, 2007, Sadler, Anderson, & Sabatelli, 2001), (2) describe adolescent parenthood from grandmothers perspectives (Dallas & Chen, 1999; Sadler, 1997), (3) describe the mother-adolescent parent relationship (Kaplan, 1996; Oberlander, Shebl, Magder, & Black, 2009; Paskiewicz, 2001; Paskiewicz, 2004), and (4) illustrate grandmothers expected postpartum involvement (Sadler, Anderson, Sabatelli, 2001).

Upon review of the literature, 11 research studies were found which explored grandmother experiences. Eight sources were qualitative studies with sample sizes of 3 to 26 participants. Three studies utilized mixed method approaches (Sadler, & Clemmens, 2004; Sadler, 1997; Voran, & Phillips, 1993). Four of the sources were dissertations (Bee, 2007; Mulder, 2009; Paskiewicz, 1995; Sadler, 1997). Eight of the sources reported perspectives of maternal grandmothers (Sadler & Clemmens, 2004; Flaherty, Facteau, & Garver, 1987; Flaherty, 1988; Paskiewicz, 1995; Paskiewicz, 2001; Bee, 2007; Mulder, 2009; Voran & Phillips, 1993). Two studies investigated the experiences of early mothering on grandmothers and their adolescent daughters (Paskiewicz, 2001; Paskiewicz, 1995; Sadler, 1997). Another study explored the experiences of both maternal and paternal grandmothers as adolescent fathers transitioned into the father role (Dallas, 2004), and two of the studies explored the function and extent of grandmothers’ involvement among maternal grandmothers (Flaherty, Facteau, & Garver 1987; Flaherty, 1988).
Sadler (1997) described adolescent mothers and grandmothers’ transition to parenting. Fifty-three adolescent mother/grandmother dyads participated in this study. The grandmothers and adolescent mothers relied on family support and shared caregiving. Several participants reported limited coping skills during this parenting transition. Sadler and Clemmens (2004) investigated the grandmother role and involvement of grandmothers in families with adolescent mothers, who were in school and also rearing children. The following research questions were examined: “a) What are the perceptions of grandmothers regarding their grandparental roles and their grandchildren? b) What are the perceived stresses and sources of support for grandmothers as they carry out their roles? c) How do grandmothers perceive their relationships with their daughters, and how do those relationships influence grandparental roles? and d) How does grandmothers’ self-esteem relate to grandparental roles and to adolescent daughters parenting?” (p. 215).

Demographic questionnaires, Rosenberg (1979) Self-esteem scale, Revised Issues Checklist (RIC), Beck Depression Inventory II, and open-ended interview questions were used to explore the research questions. Twenty-five grandmothers participated in this study. Many of the grandmothers discussed being unprepared for the grandmother role and believed that they were too young to carry out the grandmother role. Although, the grandmothers acknowledged the importance of grandchildren within the family, the grandmothers reported that they had little coping resources. Grandmothers’ low self-esteem was related to more depression among adolescent mothers.

Flaherty, Facteau, and Garver (1987) examined “the function and extent of involvement of Black grandmother in primary care activities of infants of young adolescent mothers” (p.63). The authors explored questions regarding what happens when adolescent mothers and newborns reside in multigenerational families and to what extent grandmothers influenced decision making
for newborns daily care and health care activities. Nineteen grandmothers participated in this study. A demographic data form, interview, and observational field schedule were utilized within this study. Seven functions related to grandmother role were identified based on the grandmothers’ responses: managing, caretaking, coaching, assessing, nurturing, assigning, and patrolling. These seven functions represented the experiences of grandmothers parenting adolescent parents. The seven functions depicted the responsibilities held by these grandmothers. The grandmothers felt that they had to get used to raising babies again.

Flaherty’s (1988) study provided additional information into the seven caring functions of Black grandmothers in adolescent mothering described in Flaherty, Facteau, and Garver’s (1987) study. In describing the seven grandmother caring functions, the grandmothers expressed their experiences of what it was like being a grandmother and how they helped their daughters care for their grandchildren. In this study, 77% of grandmothers had been teenage mothers, and some grandmothers did not desire to take full control of grandchildren as their mothers did. These grandmothers chose to parent differently from their own mothers. Most grandmothers expected the adolescent mother to provide most of the care to the child and grandmothers would assist as needed. These grandmothers wanted to keep their adolescent daughters in school, sought help from their own mothers, felt they shared mutual responsibility with adolescent daughters, and enjoyed caring for their grandchildren.

Paskiewicz (1995) described the experiences of low-income African-American adolescent mothers and their mothers’ experiences of grandmothering. The author also examined the mother-daughter relationship among adolescent mothers and their own mothers. The primary research question was: How did adolescent mothers and grandmothers describe their experiences and their relationship during the adolescent mothers’ pregnancy and the following year? Fifteen
mother-daughter dyads participated in this study. Intensive, in-depth interviews were conducted. Grandmothers and grandmother figures described feelings of denial and disbelief that ultimately led to passive acceptance of the pregnancy. The grandmothers stated that it was difficult to express the intensity of their feelings to their adolescent daughters. Mother-daughter dyads, who described a high-conflict experience with each other before pregnancy, also described a high-conflict experience between each other after a year of childrearing. Mother-daughter dyads, who described a low-conflict experience before pregnancy, also described a low-conflict experience both before and after a year of childrearing. Mother-daughter dyads that had positive feelings regarding their relationships also had positive feelings about assuming the role as mother and grandmother; while dyads, which described negative feelings regarding their relationships, had negative feelings about assuming the role as mother and grandmother. Both adolescent mothers and their mothers reported the experience of feeling socially isolated, because they were not able to do things they had previously been able to do before the birth of the child. Paskiewicz (2001) also explored the relationship between African-American adolescent mothers and their mothers. She found that grandmothers viewed the grandmother role as providing childcare tasks, e.g., teaching the adolescent mother how to care for the baby, giving practical advice, participating in the birth of the grandchild, meeting safety needs for baby, and comforting the baby. Grandmothers reported to have mixed feelings about being grandmothers.

Bee (2007) explored the transition to the role of grandmother for African-American grandmothers, who co-resided with their parenting adolescent daughter, and examined supports these grandmothers believed were needed to make a successful transition into grandmotherhood. Research questions for this study included the following: a) How did co-residing African-American grandmothers describe their transition to becoming a grandmother? b) How did co-
residing African-American grandmothers perceive their role in helping their daughters become effective mothers? c) How did co-residing African-American grandmothers perceive the challenges of grandmotherhood, while rearing their adolescent daughters and their daughters’ children? And d) Lastly, what support did co-residing African-American grandmothers express as necessary to make a successful transition to grandmotherhood and to help them help their daughters become effective mothers? A purposive sample of 21 African-American grandmothers, who co-resided with an adolescent daughter and grandchild were included in this study. A demographic questionnaire and semi-structured interview were used to obtain information from grandmothers. These grandmothers identified challenges faced due to off-time motherhood, described their transition to grandmotherhood as being unprepared and out of their control, and described needing such support as financial assistance, childrearing classes, information on welfare law, and social support from other grandmothers (Bee, 2007). The grandmothers reported that they needed to help grandchildren and adolescent daughters survive.

Mulder (2009) examined the relationship, communication, support, and shared care giving among adolescent mothers and their mothers. Mulder’s study was not specific to African-Americans. Approximately 31% of the participants were African-American, 35% were Caucasian, 19% were Latina, 4% were Native American, and 11% were bi or multi-racial. The research questions explored the nature of the mother-daughter relationships, mother and grandmother experiences within three generational households, social supports available for mothers and grandmothers, role strain and role enhancement due to multi-generational living, and how grandmothers care giving affected the lives of grandmothers. Participants in Mulder’s study included 26 pairs of adolescent mothers and grandmothers. Mulder (2009) found that mothers and grandmothers within these multigenerational families had an increase in
communication, and the grandmothers desired to prepare the adolescent mothers for independence in parenting role. Mulder also found that mothers and grandmothers utilized formal supports related to parenting, emotional, financial, or material support, and recognized the benefits of residing in three generational households.

Dallas (2004) described the experiences of paternal and maternal grandmothers during the transition to fatherhood for low-income, unmarried, African-American adolescent fathers. This study viewed the transition into fatherhood from the context of the grandmother. Twenty grandmothers participated in this study, 11 maternal grandmothers and nine paternal grandmothers. A structured interview guide was utilized. Dallas found that grandmothers had little time to respond to their changing role and lacked knowledge and skills to parent their adolescent parent and to carry out role expectations of a grandmother. The grandmothers reported that other family members told grandmothers their expectations of how the grandmother should behave and voiced concerns regarding how the family would take care of the baby. The increased responsibilities of grandmothers created distance between the adolescent parent and the grandmother. The lack of access to grandchildren was found to be a concern for paternal grandmothers. Paternal grandmothers were concerned about having access to their grandchildren, because the maternal family might prevent these grandmothers from seeing their grandchildren. Some maternal grandmothers denied the fathers’ access to their children, if they did not financially provide for the children.

Paskiewicz (2004) expanded upon the understanding of paternal grandmothers’ experiences of being grandmothers, described the mother-son relationship within circumstances of adolescent fatherhood, and described grandmother involvement and her relationship to her grandchild. The primary research question was: how did women describe their experiences as a grandmother
when their unmarried adolescent sons become fathers? Data was collected through the use of five open-ended questions. One African-American and two Caucasian grandmothers with grandchildren ranging from eight to 13 months participated in this study. All grandmothers reported financial stress, because they needed to support their adolescent sons and grandchildren. Two of the grandmothers commented that the financial responsibility was interfering with their own personal plans. Two of the grandmothers reported lack of support from family and friends. One grandmother was concerned that her friends did not understand her new role as grandmother. Two of the grandmothers reported disappointment with the adolescent pregnancy, because previous to the pregnancy, they had spoken with their sons regarding birth control. The grandmothers who participated in these two studies explained what it was like to be a grandmother and what they did to help their daughters care for their grandchildren.

Voran and Phillips (1993) is the only research study found that examined the correlates to grandmother support. Twenty African-American grandmothers and their adolescent daughters who were mothers were included in this study. The researchers explored the amount of childcare support grandmothers provided and the impact of the childcare support on the adolescent mothers. The researchers examined factors related to grandmother childcare support, factors related to grandmother satisfaction, and the relationship between grandmother support and adolescent mothers’ characteristics (i.e., self-esteem, depressive symptoms, and school attendance). The amount of grandmother provided childcare support was related to the grandchild’s father involvement and the age of the adolescent mother. Grandmother satisfaction was related to aspects within the grandmothers’ lives, and the quality of the grandmother and adolescent mother relationship. Grandmother satisfaction with support was related to aspects of the grandmothers’ lives. The grandmothers’ provision of childcare support was found not to be
related to the adolescent mothers’ depressive symptoms or school attendance. Voran and Phillips provided results for the correlational portion of their study, but did not provide information related to the semi-structured interviews given to grandmothers and adolescent mothers.

F. Summary

Environmental, developmental, and personal aspects could influence the types of support grandmothers provide to adolescent parents. The neighborhood context, co-residence with adolescent parent, financial concerns, perception of off-time grandmotherhood, mental health issues, loss of personal time, lack of preparation for grandmother role, the involvement of the grandchild’s father involvement, and the age of the adolescent mother were found to be factors that might influence grandmothers’ provision of support. Although these factors have been identified, there remained limited information regarding grandmothers’ rationale for provision of support. The majority of the sources within this literature review depicted the perspective from maternal grandmothers’ point of view. Maternal grandmothers, in most instances, felt responsible for assisting with adolescent parenting. However, information on paternal grandmothers’ experiences of grandmotherhood and provision of support to the adolescent father was lacking in the literature. Also, more information was needed regarding what impact the adolescent mother or adolescent father has on the support grandmothers provide. None of the literature reviewed investigated grandmothers’ rationales for providing support to their adolescent parent. This research study differed from past research. Within this study, maternal and paternal grandmothers’ perspectives regarding their rationales for supporting their parenting adolescent was explored.
III. Methodology

A. Research Design

Qualitative methods are appropriate when there is limited information regarding a phenomenon of interest (Hupcey, 2005). Qualitative research is concerned with the whole human experience and the meaning ascribed to those living within that experience (Liehr & Lobiondo-Wood, 2006). Qualitative research methods explore a phenomenon from the participants’ perspective and are conducted within the participants’ natural environment (Creswell, 2003). Qualitative descriptive studies provide a comprehensive summary in everyday language of a phenomenon (Sandelowski, 2000), and the outcome of qualitative descriptive studies is a descriptive summary (Graneheim & Lundman, 2004; Sandelowski, 2000).

A qualitative descriptive study design was used for this study. The researcher explored the types of support low-income African-American grandmothers’ provided to their sons and daughters, who were adolescent parents, explored grandmothers’ rationales for the support provided, and examined influences to the types of support grandmothers provided to their parenting adolescents. Through in-depth interviews, the grandmothers gave their perceptions of their provision of support.

B. Setting

The participants for this study were recruited from the Austin community in Chicago, Illinois. The Austin community was the most densely populated community within Chicago with 117,527 individuals residing within the community’s borders (Westside Health Authority, 2009). There are five zip codes within the Austin community: 60644, in its entirety, and portions of 60651, 60635, 60639, and 60707 (Greater Austin Neighborhood Association, 2011). According to the 2010 United States Census, within the Austin community, 94.3% of the individuals within
the 60644 zip code and 63.7% of the individuals within the 60651 zip code were identified as Black or African-American; while, approximately 17% of the individuals in 60639 zip code and 8% of the individuals in 60707 zip code were identified as Black or African American. The percentage of families in poverty within the Austin community, 27%, exceeds that of both Chicago and Illinois percentages, 18% and 11% respectively, (City of Chicago, 2011; U.S. Census Bureau, 2010). In Illinois, 36.1% of children less than 18 years old were living below the poverty level (U.S. Census Bureau, 2010); while, 45% of children between the ages of 0-17 years old were living in poverty, within the Austin community (George, Dilts, Yang, Wasserman, & Clary, 2007). The Austin community has been found to be predominately Black or African-American and has an elevated rate of poverty.

C. Sample

Participants were recruited through purposeful sampling. The goal of purposeful sampling is to obtain participants or cases that might provide rich information to support the purpose of the study (Sandelowski, 2000). Participants for this study were recruited from such sites as: churches, salons, daycares, Early Head Start programs, and organizations serving the Austin community. The inclusion criteria were:

a) Being a grandmother or surrogate grandmother of a child born to an African-American adolescent mother or father;

b) Having an adolescent son or daughter, 14 to 19 years old, with a child, who was a newborn to 23 months old;

c) Being low-income as demonstrated by making less than $25,000 a year;

d) Self-identifying as Black or African American;

e) Living in zip codes 60635, 60639, 60644, 60651, and 60707;
Exclusion criteria were as follows:

a) Being non-English speaking;

b) Being a grandmother or surrogate mother, who has an adolescent parent, who was currently pregnant;

c) Having an adolescent, who was parenting and older than 19 years old;

d) Having adolescent, who was not a parent.

D. Recruitment Procedure

The researcher obtained approval from the University of Illinois at Chicago’s Institutional Review Board before recruitment procedures began. Upon IRB approval, flyers about the study were placed in churches, salons, daycares, Early Head Start programs, and other organizations serving the Austin community. The researcher recruited participants through face-to-face contact with community members and through flyers. The participants, who contacted the researcher via telephone, answered questions from a telephone script. The telephone script was used to evaluate potential participants’ eligibility for the study.

During the initial telephone or in-person contact, potential participants were screened to determine eligibility. The following questions were asked:

1) What race are you?

2) Do you have a daughter or son who is an adolescent parent?

3) How old is your daughter or son who is an adolescent parent?

4) How old is your grandchild born to this adolescent daughter or son?

5) Do you make less than $25,000 a year?

6) What zip code do you live in?
E. Data Collection

Once the participant’s eligibility was confirmed, the date, time, and location of the interview was scheduled. The interviews took place on days and times that were convenient for the participants. The interviews took place in the participants’ homes or in a mutually agreed-upon location, where the participants felt comfortable (e.g., room reserved at public library).

Once the informed consent to participate in the study was signed by the participants, the participants were asked to complete the demographic questionnaire. After the completion of the demographic questionnaire, the researcher conducted an audio-taped semi-structured interview with field notes. After the interview, the participants were given a $20 VISA gift card.

Descriptive summaries were the end-product of this qualitative descriptive study. Two maternal grandmothers and two paternal grandmothers were randomly selected to review the descriptive summaries. The descriptive summaries included a synopsis of the study’s results. The four participants were given an additional $15 gift card for reviewing and providing feedback about the summaries.

F. Instrumentation

Demographic questionnaire. To obtain background information from the participants, the participants were asked to complete a demographic questionnaire. The demographic questionnaire used was a modification of the Heroic Project Questionnaire (Dancy, Hsieh, Crittenden, Kennedy, Spencer, & Ashford, 2009). The demographic information elicited were: age, marital status, race, number of children, number of people in household, age of adolescent child when he/she became pregnant, current age of adolescent child who was a parent, education, religion, employment status, and income were evaluated within this demographic questionnaire (see Appendix A).
Sumo Interview Guide. The Sumo Interview Guide, a semi-structured interview guide, was developed by the researcher to elicit information about the types of support, rationale for support, and influences to support. The development of the interview guide was based upon Bronfenbrenner’s ecological systems theory and consists of 26 questions. The interviews took approximately 20 to 90 minutes to complete.
Table 1: Sumo Interview Guide

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Related Interview Questions</th>
<th>Ecological Systems Theory Concepts</th>
</tr>
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</table>
| 1) What kind of support are grandmothers giving to adolescent parents to support adolescent parents as primary caregivers? | 1. Often grandmothers give their children who have babies as adolescents different kinds help. Grandmothers may give more than one kind of help, what kinds of help do you give?  
2. For each kind of help mentioned ask:  
a. How did you come to the decision that ____________ should be given?  
b. Describe in detail how often you provide ____________?  
c. What is your reason for giving ____________ to your child who is an adolescent parent?  
d. What motivates you to give ____________ to your child who is an adolescent parent?  
e. How does your adolescent son/daughter influence your decision ____________?  
f. How did you decide on the amount help to give?  
g. What is your reason for giving that amount of help to your child who is an adolescent parent?  
h. What motivates you to give that amount of help to your child who is an adolescent parent?  
i. How does your adolescent son/daughter influence your decision to give that amount of help? |                                                  |
| 2) What are grandmothers’ rationales for the support they give to adolescent parents? |                                                                                                                                                                                                                                  |                                                  |

* Questions that include that kind will be asked about a particular kind of support.
Table 1: Sumo Interview Guide cont.

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<thead>
<tr>
<th>Research Question</th>
<th>Related Interview Questions</th>
<th>Ecological Systems Theory Concepts</th>
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<tr>
<td>2) What are grandmothers’ rationales for the support they give to adolescent parents?</td>
<td>3. What prevents you from giving the kinds and amounts of help to your child who is an adolescent parent?</td>
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<td></td>
<td>4. What types of help are easy to provide, and what types of help are difficult to provide?</td>
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<td></td>
<td>5. What kinds of help would you rather not give to your child who is an adolescent parent?</td>
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<tr>
<td></td>
<td>a. Please explain your reason for not wanting to give that kind of help.</td>
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<td></td>
<td>b. What really stops you from giving that kind of help to your child who is an adolescent parent?</td>
<td></td>
</tr>
</tbody>
</table>

* Questions that include that kind will be asked about a particular kind of support.
<table>
<thead>
<tr>
<th>Research Question</th>
<th>Related Interview Questions</th>
<th>Ecological Systems Theory Concepts</th>
</tr>
</thead>
</table>
| 2) What are grandmothers’ rationales for the support they give to adolescent parents? | 6. Describe what influences the help you give to your child who is an adolescent parent?  
   a. Who gives you advice about what kind of help to give to your child who is an adolescent parent?  
   b. What kind of advice do you receive from them (i.e., each person mentioned)?  
   c. Describe how your friend(s) influence the help you give to your child who is an adolescent parent?  
   d. How do the church and your religion influence the help you provide to your child who is an adolescent parent?  
   e. How does your work influence the help you give to your child who is an adolescent parent?  
   f. How does your neighborhood affect the kind of help you give?  
   g. How does your child’s school affect the kind of help you give?  
   h. What resources within your community help you help your child who is an adolescent parent?                                                                 | Microsystem                      |
| 3) What influences the type and amount of support grandmothers give to their parenting adolescents? |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Microsystem                      |

* Questions that include that kind will be asked about a particular kind of support.
Table 1: Sumo Interview Guide cont.

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Related Interview Questions</th>
<th>Ecological Systems Theory Concepts</th>
</tr>
</thead>
</table>
| 3) What influences the type and amount of support grandmothers give to their parenting adolescents? | 7. Who gives you advice about what amount of help to give to your child who is an adolescent parent?  
   a. Probe: What kind of advice do you receive from them (i.e., each person mentioned)?  
   b. How does your family, family members, and kin affect the amount of help you provide to your child who is an adolescent parent?  
   c. How does your neighborhood affect the amount of help you give?  
   d. How does your child’s school affect the amount of help you give?  
  8. How do your past experiences influence the kind and amount of help you give to your child who is an adolescent parent?  
  9. What is currently going in your life that influences the kind and amount of help you give to your child who is an adolescent parent?  
  10. How does the current economy and public assistance influence the help you provide to your child who is an adolescent parent?  
  11. Is there anything else that influences the kind of help you give to your child who is an adolescent parent?  
  12. Is there anything else that influences the amount of help you give to your child who is an adolescent parent? | Microsystem  
|                   |                                                                                              | Microsystem  
|                   |                                                                                              | Microsystem  
|                   |                                                                                              | Microsystem  
|                   |                                                                                              | Microsystem  
|                   |                                                                                              | Microsystem  
|                   |                                                                                              | Individual  
|                   |                                                                                              | Individual  
|                   |                                                                                              | Exosystem  

* Questions that include that kind will be asked about a particular kind of support.
**Field notes.** Field notes were recorded that included a description of the interview setting and the activities and behavior of the participants. The field notes provided the contextual background data of the interviews and serve as contextual basis during data analysis (Rogers & Cowles, 1993) (see Appendix B).

G. **Data Management and Analysis**

The audio-taped interviews were transcribed by a professional transcriptionist. When not being used by the researcher, all data (field notes, transcribed interviews, audio-tapes, demographic questionnaire, and signed consent forms) were kept in a locked file cabinet. Content analysis was used to analyze the data. Content analysis may be used to determine psychological states of a group, to reflect on cultural beliefs and patterns, and to describe themes and attributes of senders of communication (Downe-Wamboldt, 1992). Therefore, qualitative content analysis was an appropriate data analysis method to explore grandmothers’ rationale for supporting their parenting adolescent sons and daughters.

An initial step to content analysis was reading and re-reading data until one obtains a general sense of the data (Creswell, 2003; Graneheim & Lundman, 2004; Sandelowski, 1995). The following steps, extracted from Downe-Wamboldt (1992), were used to analyze data for this study:

a) Selected the unit of analysis. The unit of analysis were words and phrases of the interview.

b) Created categories based on the research question, established definitions for each category, and developed rules for coding.

c) Pretested category definitions and rules by using a sample of the transcribed interviews to determine whether category schemes were clear.
d) Assessed reliability and validity. Reliability will be assessed through checking for accuracy within coding. The researcher and a second person coded a sample of the transcripts to confirm consistency in coding. With any disagreements identified, the researcher and the additional coder discussed the disagreements and added additional codes.

e) Revised the coding rules if necessary. The researcher moved back and forth between text and the output of content analysis to allow for progressive refining and validating of categories and coding rules. With any inconsistencies for categories identified, the researcher would add or delete categories to eliminate inconsistency.

f) Pretested the revised category scheme to confirm clarity of a new category scheme.

g) Coded all the data. All transcribed interviews were thoroughly read. The researcher and another person coded data. They came together, compared, coding, and discussed disagreements until there was a consistency between the researcher and the additional coder.

H. Trustworthiness of Study

Rigorous research demonstrates integrity, competence, and legitimacy of the research process (Tobin & Begley, 2004). Rigour is necessary for research to be deemed valid (Lincoln & Guba, 1985). Within qualitative research, the term trustworthiness is used in place of validity (Hupcey, 2005). Lincoln and Guba (1985) illustrated four techniques for establishing trustworthiness within qualitative research: credibility, transferability, dependability, and confirmability. Hupcey (2005) suggested that methodological and analytic issues (validity, reliability, and generalizability) must be addressed during initial development of research study to advance nursing science.
Credibility was established as study participants were given an opportunity to critique study findings (Lincoln & Guba, 1985). Four grandmothers, who participated in the study, were given an opportunity to participate in member checking. In member checking the participants are included in analysis or given an opportunity to corroborate a study’s findings (Lietz & Zayas, 2010). Member checking may result in participants disapproving of transcribed interviews, data analysis, or not supporting a study’s findings. The grandmothers, in this study, supported the findings within the descriptive summary. Transferability was achieved through the provision of thick descriptions that supported the possibility that a reader might be able to conclude whether findings could be transferred to different contexts (Lincoln & Guba, 1985).

Dependability was the ability to account for the process of research and changes within the process of research. Dependability occurred through auditing (Tobin & Begley, 2004). An audit trail was used to provide rationale for methodological and analytical decisions and provide the researcher’s personal reflections during the study (Rogers & Cowles, 1993). The audit trail supported both dependability and confirmability within this study.

I. Protection of Human Subjects

The University of Illinois at Chicago’s Institutional Review Board approved this study. Participants were given informed consents and participants were informed that they could withdraw from the study at anytime. Participants were informed about the study’s confidentiality practices such as: all data being reported in aggregate form. Only the primary researcher had access to personal information, such as participants’ names and telephone numbers. The participants’ names were not connected to interviews conducted. The telephone numbers were used to schedule meetings, and the list of telephone numbers were destroyed once member checking was completed.
IV. Results

A. Demographic Characteristics

A total of 20 African-American grandmothers participated in this study: 10 maternal grandmothers and 10 paternal grandmothers. Six maternal grandmothers were the biological mothers of the adolescent mothers, three were biological grandmothers of the adolescent mothers, and one was the aunt of an adolescent mother. Seven paternal grandmothers were the biological mothers of the adolescent fathers and three were biological grandmothers of the adolescent fathers. The ages of the maternal grandmothers ranged from 35-69 years old and the paternal grandmothers’ ages ranged from 34-74 years old. While 40% of both maternal and paternal grandmothers reported to have never married, 20% of the maternal and paternal grandmothers reported to be married. Thirty percent of maternal grandmothers and 20% of paternal grandmothers were divorced or separated, while 10% of the maternal grandmothers and 20% of the paternal grandmothers reported to be widowed.

Fifty percent of the maternal grandmothers and 40% of the paternal grandmothers reported that they were not working, whereas, 60% of the maternal grandmothers and 70% of the paternal grandmothers reported receiving food stamps. Seventy percent of the maternal grandmothers reported having attended college, while 40% of the paternal grandmothers graduated from high school and 40% obtained less than a 12th grade education. Fifty percent of maternal grandmothers and 60% of paternal grandmothers reported to earn less than $1,299 a month. See Table 2.
Table 2  
Grandmother Demographic Information

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Maternal Grandmother (MG)</th>
<th>Paternal Grandmother (PG)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td>48.9 (11.6)</td>
<td>48.3 (13.0)</td>
</tr>
<tr>
<td><strong># of children</strong></td>
<td>5.4 (2.6)</td>
<td>5.5 (1.7)</td>
</tr>
<tr>
<td><strong># of children residing with grandmother</strong></td>
<td>2.6 (2.1)</td>
<td>2.6 (1.8)</td>
</tr>
<tr>
<td><strong>Age of adolescent parent</strong></td>
<td>18.1 (.99)</td>
<td>18.4 (.52)</td>
</tr>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than $499</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>$500 to $899</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>$900 to $1299</td>
<td>3</td>
<td>30%</td>
</tr>
<tr>
<td>$1300 to $1699</td>
<td>3</td>
<td>30%</td>
</tr>
<tr>
<td>$1700 to $2099</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>Never Married</td>
<td>4</td>
<td>40%</td>
</tr>
<tr>
<td>Separated/Divorced</td>
<td>3</td>
<td>30%</td>
</tr>
<tr>
<td>Widowed</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 12th grade</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>H.S. Graduate</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Completed GED</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Some College</td>
<td>7</td>
<td>70%</td>
</tr>
<tr>
<td>Associate’s Degree</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Less than 12th grade/贸易</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Religion</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Apostolic</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>Baptist</td>
<td>3</td>
<td>30%</td>
</tr>
<tr>
<td>Christian</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>Pentecostal</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>Evangelical</td>
<td>1</td>
<td>10%</td>
</tr>
</tbody>
</table>
Church Frequency

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Frequently</td>
<td>4</td>
<td>40%</td>
</tr>
<tr>
<td>Frequently</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Occasionally</td>
<td>4</td>
<td>40%</td>
</tr>
<tr>
<td>Rarely</td>
<td>1</td>
<td>10%</td>
</tr>
</tbody>
</table>

Employment

<table>
<thead>
<tr>
<th>Employment Type</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-Time</td>
<td>2</td>
<td>20%</td>
</tr>
<tr>
<td>Part-Time</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>School/Training</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Not Working</td>
<td>5</td>
<td>50%</td>
</tr>
<tr>
<td>Disabled Not Working</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Retired</td>
<td>1</td>
<td>10%</td>
</tr>
</tbody>
</table>

Assistance

<table>
<thead>
<tr>
<th>Assistance Type</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Stamps</td>
<td>6</td>
<td>60%</td>
</tr>
<tr>
<td>Social Security</td>
<td>4</td>
<td>40%</td>
</tr>
<tr>
<td>Public Aid</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Unemployment</td>
<td>1</td>
<td>10%</td>
</tr>
</tbody>
</table>

*One maternal grandmother did not complete the question about income.

B. Support

The maternal and paternal grandmothers reported providing 16 types of support to their adolescent children, who were parents. Table 3 depicts the types of support provided by the grandmothers and illustrates the percentages of each support provided by all 20 grandmothers collectively and percentages of supports provided by maternal and paternal grandmothers separately. Table 4 provides definitions for the types of support the grandmothers’ identified.
<table>
<thead>
<tr>
<th>Support</th>
<th>MG Support %</th>
<th>PG Support %</th>
<th>Combined MG &amp; PG Support %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Babysitting</td>
<td>4(10)= 40%</td>
<td>6(10)= 60%</td>
<td>10(20)= 50%</td>
</tr>
<tr>
<td>Advice</td>
<td>4(10)= 40%</td>
<td>3(10)= 30%</td>
<td>7(20)= 35%</td>
</tr>
<tr>
<td>Financial</td>
<td>5(10)= 50%</td>
<td>2(10)= 20%</td>
<td>7(20)= 35%</td>
</tr>
<tr>
<td>Shopping</td>
<td>1(10)= 10%</td>
<td>6(10)= 60%</td>
<td>7(20)= 35%</td>
</tr>
<tr>
<td>Transportation</td>
<td>2(10)= 20%</td>
<td>3(10)= 30%</td>
<td>5(20)= 25%</td>
</tr>
<tr>
<td>Emotional</td>
<td>3(10)= 30%</td>
<td>1(10)= 10%</td>
<td>4(20)= 20%</td>
</tr>
<tr>
<td>Shelter</td>
<td>3(10)= 30%</td>
<td>1(10)= 10%</td>
<td>4(20)= 20%</td>
</tr>
<tr>
<td>Food</td>
<td>2(10)= 20%</td>
<td>1(10)= 10%</td>
<td>3(20)= 15%</td>
</tr>
<tr>
<td>Bathing</td>
<td>2(10)= 20%</td>
<td></td>
<td>2(20)= 10%</td>
</tr>
<tr>
<td>Feeding</td>
<td>2(10)= 10%</td>
<td></td>
<td>2(20)= 10%</td>
</tr>
<tr>
<td>Discipline</td>
<td>1(10)= 10%</td>
<td></td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Laundry</td>
<td>1(10)= 10%</td>
<td></td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Mentoring</td>
<td>1(10)= 10%</td>
<td></td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Physical Guidance</td>
<td>1(10)= 10%</td>
<td></td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Schooling</td>
<td>1(10)= 10%</td>
<td></td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Spiritual</td>
<td>1(10)= 10%</td>
<td></td>
<td>1(20)= 5%</td>
</tr>
</tbody>
</table>

*MG (Maternal Grandmother); PG (Paternal Grandmother)
<table>
<thead>
<tr>
<th>Support</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advice</td>
<td>Verbal communication given to the adolescent parent to support the adolescent’s individual growth or enhance the adolescent’s parenting</td>
</tr>
<tr>
<td>Babysitting</td>
<td>Time the grandmother spends watching and caring for the adolescent parent’s child</td>
</tr>
<tr>
<td>Bathing</td>
<td>Process of washing/cleansing the outer body of the adolescent parent’s child</td>
</tr>
<tr>
<td>Discipline</td>
<td>Rules the grandmother endorses to promote the adolescent parent’s responsibility</td>
</tr>
<tr>
<td>Emotional</td>
<td>Encouragement given to the adolescent parent to assist him or her to become psychologically prepared to be a parent and expand the adolescent’s confidence as he or she carries out their parenting role</td>
</tr>
<tr>
<td>Feeding</td>
<td>The physical act of assisting the adolescent parent’s child consume food or beverages</td>
</tr>
<tr>
<td>Financial</td>
<td>Monetary assistance given to the adolescent parent to support the adolescent parent and the adolescent parent’s child</td>
</tr>
<tr>
<td>Food</td>
<td>The purchase of food products and/or the preparation of food for the adolescent parent and/or adolescent parent’s child</td>
</tr>
<tr>
<td>Laundry</td>
<td>The physical act of washing clothes for the adolescent parent or the adolescent parent’s child</td>
</tr>
<tr>
<td>Mentoring</td>
<td>The act of exposing the adolescent parent to different experiences to provide opportunities for the adolescent parent to gain insight from experiences outside the adolescent’s immediate community.</td>
</tr>
<tr>
<td>Physical Guidance</td>
<td>The act of assisting the adolescent parent with the day-to-day required activities necessary to care for the adolescent parent’s child</td>
</tr>
<tr>
<td>Schooling</td>
<td>The payment of fees related to the adolescent parent attending school</td>
</tr>
<tr>
<td>Shelter</td>
<td>The provision of a place for the adolescent parent to reside or the provision of a place for the adolescent parent and the adolescent parent’s child to reside</td>
</tr>
<tr>
<td>Shopping</td>
<td>The physical act of going to a store and purchasing merchandise for adolescent parent and/or the adolescent parent’s child</td>
</tr>
<tr>
<td>Spiritual</td>
<td>The provision of guidance related to the adolescent parent developing a personal relationship with God and sharing spirit filled insight with the adolescent parent</td>
</tr>
<tr>
<td>Transportation</td>
<td>The physical transport or provision of bus fare for the adolescent parent and/or his or her child</td>
</tr>
</tbody>
</table>
C. Rationale for Support

Love for the adolescent parent and/or their grandchild was a typical response given by grandmothers when they were asked questions related to their rationale for the type of support they provided. Sixty percent of the grandmothers (maternal and paternal) reported that love for the adolescent parent and/or their grandchild was their reason for providing babysitting, bathing, discipline, emotional, feeding, shelter, shopping, and transportation support. Fifty percent of the maternal grandmothers reported that love was their reason for providing one or more of the following supports: advice, bathing, discipline, emotional, feeding, and shopping. Seventy percent of the paternal grandmothers reported that love was the reason for one or more of the following supports: advice, babysitting, emotional, shelter, shopping, and transportation support. Regarding love, one maternal grandmother said:

Because I love her. And love is an action. I can’t sit back and see somebody that I love struggle or hurt unnecessarily. I love her enough to help her in any way that I possibly can... I love her. I love her in spite of her. She don’t always do what I want her to do. She don’t always say what I want her to say. She don’t always act the way I would want her to act but in spite of all of that, at the end of the day, I love her. That’s my niece, that’s my sister’s granddaughter and whatever I can do for her, as long as I’m breathing and in my right mind, I’m gonna do for her because I love her.

**Babysitting.** Sixty percent of the paternal grandmothers and 40% of maternal grandmothers reported providing babysitting support to their adolescent children, who were parents. Paternal grandmothers reported that they provided babysitting support, because they wanted to spend time with their grandchild and to develop and maintain a connection with their grandchildren. One
paternal grandmother said:

I just want to see him and I want him to be able to know me. I want him to know me, not just you know that’s my grandma, you know. Cause I think that’s important. So many kids that have parents and grandparents that’s not in their life and I don’t want to be one of them grandparents. I want to be there for mine.

Additionally, the paternal grandmothers reported that they babysat, because they wanted to encourage and help guide their sons. One paternal grandmother said:

So he won’t be like feeling bad, you know that he had a baby and he feel like his life is being taken away from him cause we all go through that at times like, man if I wouldn’t have had this baby, I would have been able to do this, I would, it would have been like, then I could have did this, so it motivates me because I see something in him that I don’t see in a lot of men, you know. And I love him for everything that he try to do…he motivates me to give him help.

Personal experience of not receiving help as an adolescent parent and observing the lack of parental and grandparental support in the community were additional reasons paternal grandmothers gave for providing babysitting support. One paternal grandmother said:

Because I didn’t have help so I don’t want him to have the same thing, I don’t want the same thing to happen to him that happened to me, so I’m trying to do better than I was done.

One of the paternal grandmothers considered the needs of the adolescent mother while making the decision to provide babysitting support. She said:
Because they young and they have a lot to do, you know. They gotta take care of their children, so somebody got to take care of their children while they try to support their children.

Both paternal and maternal grandmothers reported that they acquired energy from their grandchildren. One paternal grandmother said:

I look at some people mothers and I’m 61… I’m not one to sit around immobile or anything like that because that makes me stronger when I’m still helping. And long as I can help, I don’t care if I’m 90, if I can get around and still help I’m there… So I’m 60 where do I go, to the doctor, grocery store, and church… and have them little kids that run around that give you energy… To give me energy.

Seeing their children put forth effort was a reason maternal and paternal grandmothers gave for the provision of babysitting support. One maternal grandmother said:

She’s a young mother and even though she’s a young mother…she’s still trying to do stuff so I’m gonna try to motivate her and encourage her the best way I can… that’s when I’ll step in, I’ll watch your baby, you go ahead and go to school, you make something, you do something.

One paternal grandmother said:

Well, it’s like, I don’t want to take away his freedom, even though he did it his self, alone, at the same time, I feel like he still trying, he haven’t gave up and so if he want to go to a party, I’ll babysit if I’m not doing nothing.

Also maternal grandmothers reported babysitting, because they did not trust others to care for their grandchildren. One maternal grandmother said:
I’d rather watch my grandkids because I know that they’re gonna be taken care of correctly, you know and fed and everything because there’s so much stuff that’s happening nowadays you know you really can’t really trust many people with your kids so I figure that since my child is trying to do something with her life that I don’t mind helping out, doing my part as a grandmother because my mother helped me.

Another maternal grandmother said:

Because I’d rather have him than somebody else. I know if anything wrong happens, at least I will be here to take full responsibility and be able to tell her…some sitters out there. Something happen to your baby and they don’t know nothing.

Advice. Forty percent of the maternal grandmothers and 30% of the paternal grandmothers reported providing advice to their children, who were adolescent parents. The maternal grandmothers reported that without their advice, the adolescent parent, because of their age and inexperience, would not have necessary information. One maternal grandmother said:

If you don’t give them advice, they’ll never know. I want them to have a working knowledge of…what life has to offer them out there. I want them to be able to learn how to ask questions, be able to learn to listen.

Another maternal grandmother said:

Well because she really, she really don’t understand a lot, especially being young and then first time having a child, she really don’t know too much about that so I’m helping her learn step by step by telling her… some things she does not know. So that’s where I step in, help her with whatever she needs help with.
One paternal grandmother said:

Because I want him to know how important it is to a lot of stuff he don’t know.

So by me being his mother, and when he was little, I wasn’t there for him and now that’s he’s older with a child, he needs to know all these things, so when his son get old, 19, he should be able to go to him and relate the same thing I came to him and said.

Concern for the welfare of the adolescent parent was another reason for providing advice. One maternal grandmother said:

And I don’t feel that a lot of things that she’s headed for, that she really don’t have to go through. I feel that there could be a fork in the road; I feel that there could be a detour that will cause her to go down a different path. If she hears that at the end of the road, this is what happens in the long run—looking at the big picture, because sometimes she only has tunnel vision and she only see what’s there in front of her because that’s what’s tangible. So she only will reach for the short-term goal, not knowing that the short-term goal can bring a lot of pain, heartache, chaos, and confusion and wreak havoc in her life because nobody actually really showed her the big picture. And it’s important that she know it, that there is a big picture.

One paternal grandmother was concerned about the adolescent mother. She said:

And I talk to his mom, she’s going through a lot of stuff, too. She’s staying with her mama and she’s in a bad situation you know that’s why she always want to come over here a lot, because a lot of stuff is going on financially and she’s not stable you know like she social security her mom takes all the money and then
you have to wait on her mother to go buy for the baby and stuff like that and I, I don’t think that’s right. You know and I try to talk to her and tell her maybe you need to you know leave or you know she will go like she get social security and her mama keeps threatening her if she go and get the social security out of her name, she gonna make her move…she’s 19…she has a lot of issues and stuff so I try to just be there for her, talk to her and try to give advice and tell her things that I think she should do… So I try to you know help out with little things, she calling me and ask me for advice and I just tell her, you know what I think she should do but that’s the big issue that she’s having, she’s afraid if she do this, then her mom gonna put her out. And she don’t have, she’s not equipped to go out and do, get a place of her own, this and that, cause she, like I said she’s only, she uh, she don’t really know too much, either, so…she comes over here just to get away from there…

The maternal and paternal grandmothers’ past experiences were reported to contribute to the provision of advice. One maternal grandmother said:

You know me being a single parent myself, that motivates me because I know what it’s like and I know how hard it can be sometimes because it’s not easy.

One paternal grandmother said:

Cause I didn’t have it with my parents. I didn’t, my parents didn’t, wasn’t there, wasn’t even there for me, not just talking. And that’s something that I really missed, you know -I’m 35. My mama wasn’t there for me.
Financial. Fifty percent of the maternal grandmothers and 20% of the paternal grandmothers reported providing financial support for their children, who were adolescent parents. The maternal and paternal grandmothers provided financial support, because the adolescent parents had no other means of support due to unemployment and because the adolescent parent did not have any other person or mechanism available to support the adolescent parents and their children. One paternal grandmother said:

Because he was young and he wasn’t working and he still in school and, and he was, and I knew that he needed, he didn’t, he didn’t have the means to provide.

One maternal grandmother said:

She was having a baby. What other way is there to do that? I mean, there’s nothing out here that we can lean on or count on to take financial responsibility for her and the baby. So again, when she got pregnant, that was our responsibility.

The fear of the adolescent finding other means of gaining financial assistance was also reported as a reason for the provision of financial support. One paternal grandmother reported that without her financial support her son could resort to illegal activities. She said:

Because I know what it is, you know how it is. I see young boys out there struggling everyday and throwing bricks at the penitentiary.

One maternal grandmother said:

Well, I don’t want her to go out and find other means of getting finances when she’s unable to get them. I don’t want her to think that just because she’s receiving public assistance that she has to remain on public assistance because it’s a stepping stone and once she’s able to stand on her own, then she step aside and allow somebody else to step forward and receive the same services that she was
able to receive so in times when she need to make ends meet, if I’m able to assist
her in doing it, then I’ll do that.

**Shopping.** Shopping was a support that was reported mainly by the paternal grandmothers. Sixty percent of the paternal grandmothers reported shopping, whereas, only 10% of the maternal grandmothers reported shopping. The paternal grandmothers reported providing this support to help the adolescent parent. One paternal grandmother said:

Helping the child’s mother…they still in school so if I had extra money or
whatever, I go get them a couple of outfits you know and help them out… They
need it.

Another paternal grandmother said:

Because there is no one else supporting him. Buying his clothes…there was
nobody else providing that kind of help for him… he has to go to school in his
uniform and stuff so he has to have that provided for him… I don’t want to see
him go lacking so I feel that if it don’t come from nobody else it [will] come from
me.

Paternal grandmothers also thought that shopping was an expected function of grandmothers.

One paternal grandmother said:

Just being a grandmother, grandmothers do that. Be birthday, holidays come
around, …kids they, they look forward to stuff like that, even though he’s still too
young or whatever to know what Nana bought you this but you know I feel good
when I know I have done something, I have bought him something. That makes
me feel good…Just being a grandmother.

Another paternal grandmother said:
Well I just felt that it was my son’s baby you know, and contributed, had it been a daughter then I would have been contributing more. The daughters are always able to bring the babies home. The son, the baby stays with the mother if they not married you know... Just to show the care and concern about the baby.

The maternal grandmother reported shopping, because of the adolescent mother’s lack of income and love she had for her grandchild. She said:

Because I know that she’s not working or anything and I have some kind of income so I mean I know that’s why… to help out my grandbaby. Because that’s my grandbaby. And I love my grandbaby.

**D. Influences to Types of Support**

**Friends.** When the grandmothers were asked questions regarding their friends’ influence on the support they provided to their adolescent children, who were parents, four out of 20 grandmothers (one maternal and three paternal) reported that they did not have friends. Eight (four maternal and four paternal) reported that their friends did not influence the support they provided to their children, who were adolescent parents.

Of the remaining eight grandmothers, who reported that their friends influenced the support they provided, six grandmothers (four maternal and two paternal) reported that their friends gave them advice and encouragement. One maternal grandmother said:

I was trying to figure out how are we going to get everything this little baby needs so that, when he comes here, he’s comfortable. It was a friend who said give her a shower.
The other grandmothers did not explicitly describe how their friends influenced specific types of support they provided to their adolescent children, who were parents. Instead, they talked about character development and lessons gained from their friendships.

**Family.** Of the fifteen grandmothers, who reported on family influence, nine grandmothers (four maternal and five paternal) reported that their families did not influence the types of support they gave to their adolescent child, who was a parent. Of the remaining six grandmothers, four grandmothers (two maternal and two paternal) did not provide specific examples on how their family influenced the types of support they provided. They reported that their families assisted them with tangible support in the form of shopping for their adolescent daughters or their grandchildren. One paternal grandmother reported that her husband’s family assisted her family with the provision of shelter; whereas, two maternal grandmothers reported that their family members provided advice about the type of support to provide to their adolescent daughters, who were mothers. One maternal grandmother reported:

> I mean basically like I said I talk to my sister and stuff and then she tells me you know well, this was what she did with her girls, you know what I’m saying because you know I’m the baby of the family and you know all my sisters they had girls and stuff and they you know older in 20s and 30s and they say well this is what I did for such and such you -know maybe you need to try this one here, you know like that…”
Work. Eleven grandmothers (six maternal and five paternal) reported to be retired or not working at the time of the interview. Of the remaining nine grandmothers, three grandmothers (one maternal and two paternal) reported that their work did not influence the type of support they provided to their children, who were adolescent parents. Three grandmothers (one maternal and two paternal) reported that their work influenced the financial support they provided to their children, who were adolescent parents by providing them a salary to buy for their children, and three grandmothers (two maternal and one paternal) reported that their work in the community with underserved populations motivated them to support the adolescent parents. These grandmothers did not explicitly describe how their work in the community influenced the type of support that they provided to their children.

Religion. Of the 18 grandmothers, who responded to the question regarding how their church or religion influenced the type of support they provided, three grandmothers (one maternal and two paternal) reported that the church did not influence the type of support they provided to the adolescent parents. Of the remaining 15 grandmothers, eight (four maternal and four paternal) reported that God and Christian counsel impacted the type of support they gave by providing guidance and helping them to respond as Christ would respond. They did not explicitly describe how God and Christian counsel influenced the specific type of support they provided to their children; instead, they spoke about how God and Christian counsel motivated them to provide overall support to the adolescent parents. One paternal grandmother said:
I do believe in God and you know and I know I be doing the right thing by keeping you know taking them shopping or whatever. You know everything like that is the right thing to do you know in God’s eyes.

The remaining seven grandmothers (five maternal and two paternal) reported that their church or church families were supportive, helped them maintain stability, and helped to encourage the adolescent parent. They did not explicitly describe how receiving support from their church influenced the type of support they gave to their children, who were adolescent parents.

**Neighborhood.** Three paternal grandmothers reported that the neighborhood did not influence the support they gave to their sons, who were adolescent fathers, and nine grandmothers (five maternal and four paternal) did not explicitly identify how their neighborhood influenced the type of support they provided to the adolescent parents. Instead, they elaborated on the need for adolescent parents to be exposed to other environments and on the need for the community to provide resources for adolescent parents. The other eight grandmothers (five maternal and three paternal) reported that the environment influenced the type of support that they provided to the adolescent parents, because they did not want the adolescent parents to be in the streets or be subject to negative factors within the environment. One paternal grandmother said:

When I look down the street, down at the store, and I see all these young people standing out there selling drugs. That neighbor, that right there push me more to help him, to keep him from on that corner… This neighborhood will do for me because I hate to see those babies out there selling drugs… I know he got a job right now, but don’t say that job gonna be there all the time. He might lose that
job. But I’d rather take my time and my energy to help him to keep him off that street. To keep him off that street.

A maternal grandmother said:

Actually, it affects the kind of help I give because I do not want my child to become a statistic of the community. I didn’t want her to…you tell me if I’m heading in the right way with this…but because she’s a young woman, I know that a lot of peer pressure is out there, and a lot of negative influences are in the community, and I don’t want her to glorify those. I want her to learn from this. So the community fits in the sense that I don’t want her to become another baby momma. I want her to become a young woman that had a baby young but is still growing. That’s how the community…when I look at the community, I want her to be a productive part of it and not another burden, you know, another financial [grip] on the community. That’s what influences me.

**School.** Of the fifteen grandmothers, who commented on how the adolescents’ schools influenced the type of support they provided, four grandmothers (one maternal and three paternal) reported that their children, who were adolescent parents were not in school. These grandmothers reported that the adolescents were working or trying to return to school. Eight of the grandmothers (five maternal and three paternal) reported that the adolescent parents’ school did not influence the type of support they provided to the adolescent parents.

The remaining three grandmothers (two maternal and one paternal) reported that the adolescent parent’s school influenced the type of support they provided. One maternal grandmother reported that the school influenced the type of support she provided, because the school helped her daughter. She said:
I mean yeah, I mean it's because they help her. As long as they help her, that helps me because I'm saying,…if somebody else helps too, that's even better…It does because if she can talk to, you know she can talk to the counselor because when you can talk to the counselor I mean they know people and they, it gets back to me because now I'm learning some things that I didn't know.

A paternal grandmother reported that the supportiveness of the school influenced the support she gave to her son, who was an adolescent parent. She said:

Well, his school, his school have worked with me. I have to give the school credit, this one time because … Sometimes he be late, they understand the situation so they pretty much like, they help motivates me. They not giving up on him, and I guess that, that’s another motivation for me.

Community Resources. The grandmothers were asked to identify resources within their community that helped them support their children, who were adolescent parents. Of the 19 grandmothers who responded, 11 grandmothers (three maternal and eight paternal) reported a lack of resources in the community or that they had not yet identified any resources in their community. Eight grandmothers (six maternal and two paternal) identified specific resources within their community. Some grandmothers gave more than one response. The specific resources identified by the grandmothers were illustrated on Table 5.
Table 5
Community Resources Identified

<table>
<thead>
<tr>
<th>Resource</th>
<th>MG%</th>
<th>PG%</th>
<th>Combined MG &amp; PG%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Career Center</td>
<td>0(10)= 0%</td>
<td>1(10)=10%</td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Church</td>
<td>2(10)=20%</td>
<td>1(10)=10%</td>
<td>3(20)=15%</td>
</tr>
<tr>
<td>Clinic/ Hospital</td>
<td>3(10)=30%</td>
<td>0(10)= 0%</td>
<td>3(20)=15%</td>
</tr>
<tr>
<td>Food Pantry</td>
<td>1(10)=10%</td>
<td>0(10)= 0%</td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Internet</td>
<td>1(10)=10%</td>
<td>1(10)=10%</td>
<td>2(20)=10%</td>
</tr>
<tr>
<td>Karate Class</td>
<td>0(10)= 0%</td>
<td>1(10)=10%</td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>PTA</td>
<td>1(10)=10%</td>
<td>0(10)= 0%</td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Private Organization</td>
<td>1(10)=10%</td>
<td>0(10)= 0%</td>
<td>1(20)= 5%</td>
</tr>
<tr>
<td>Public Aid</td>
<td>2(10)=20%</td>
<td>0(10)= 0%</td>
<td>2(20)=10%</td>
</tr>
<tr>
<td>WIC</td>
<td>2(10)=20%</td>
<td>0(10)= 0%</td>
<td>2(20)=10%</td>
</tr>
</tbody>
</table>

*PTA- Parent Teacher Association; WIC- Women, Infants, and Children nutrition and food program.

Past Experiences. The grandmothers were asked to discuss the influence of their past experiences on the type of support they gave to their children, who were adolescent parents. Of the 18 grandmothers, who responded to this question, two grandmothers (one maternal and one paternal) said that their past experience did not influence the type of support they provided to their children, who were adolescent parents. Sixteen grandmothers (seven maternal and nine paternal) reported a variety of past experiences, but did not give specific information regarding how these experiences influenced the type of support they provided. See Table 6.
Table 6
Past Experiences Identified

<table>
<thead>
<tr>
<th>Past Experience</th>
<th>MG %</th>
<th>PG %</th>
<th>Combined MG &amp; PG %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not feeling loved by her mother</td>
<td>1(10)=10%</td>
<td>0(10)=0%</td>
<td>1(20)=5%</td>
</tr>
<tr>
<td>Her mother made parenting decisions or overruled her decisions</td>
<td>1(10)=10%</td>
<td>1(10)=10%</td>
<td>2(20)=10%</td>
</tr>
<tr>
<td>Positive relationships or events in her life</td>
<td>2(10)=10%</td>
<td>0(10)=0%</td>
<td>2(20)=10%</td>
</tr>
<tr>
<td>Not receiving help during her youth</td>
<td>1(10)=10%</td>
<td>3(10)=30%</td>
<td>4(20)=20%</td>
</tr>
<tr>
<td>Her own difficulties being an adolescent parent</td>
<td>1(10)=10%</td>
<td>3(10)=30%</td>
<td>4(20)=20%</td>
</tr>
<tr>
<td>Her deceased child is not able to take care of his child (her grandchild)</td>
<td>0(10)=0%</td>
<td>1(10)=10%</td>
<td>1(20)=5%</td>
</tr>
<tr>
<td>Learnings from past experiences</td>
<td>3(10)=30%</td>
<td>1(10)=10%</td>
<td>4(20)=20%</td>
</tr>
</tbody>
</table>

**Current Life Happenings.** The grandmothers were asked to discuss the things that were currently going on in their lives that influence the type of support they gave to their children, who were adolescent parents. Of the sixteen grandmothers, who responded to this question, two paternal grandmothers reported that no current life happenings influenced the type of support they provided. The remaining 14 grandmothers (eight maternal and six paternal) reported a variety of current life happenings. Ten grandmothers (six maternal and four paternal) reported other responsibilities such as: attending school and caring for a sick parent. The grandmothers, who identified current life happenings, did not provide specific information regarding how these experiences influenced the type of support they provided. See Table 7.
Table 7
Current Life Happenings Identified

<table>
<thead>
<tr>
<th>Current Life Happenings</th>
<th>MG %</th>
<th>PG %</th>
<th>Combined MG &amp; PG%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to assume the role of parent</td>
<td>1(10) = 10%</td>
<td>1(10) = 10%</td>
<td>2(20) = 10%</td>
</tr>
<tr>
<td>Negative influences in the community</td>
<td>0(10) = 0%</td>
<td>1(10) = 10%</td>
<td>1(20) = 5%</td>
</tr>
<tr>
<td>Current life issues related to instability due to not completing school or lack of life fulfillment</td>
<td>1(10) = 0%</td>
<td>2(10) = 20%</td>
<td>3(20) = 15%</td>
</tr>
<tr>
<td>Other Responsibilities</td>
<td>6(10) = 60%</td>
<td>4(10) = 40%</td>
<td>10(20) = 50%</td>
</tr>
<tr>
<td>Challenges related to being a single mother</td>
<td>1(10) = 10%</td>
<td>0(10) = 0%</td>
<td>1(20) = 5%</td>
</tr>
</tbody>
</table>

**Economy/Public Assistance.** The grandmothers were asked to discuss how the current economy and public assistance impacted the type of support they gave to their children, who were adolescent parents. Eighteen grandmothers responded to this question. Three paternal grandmothers reported that the current economy and public assistance did not influence the support they provided to their sons, who were adolescent fathers. Four grandmothers (one maternal and three paternal) reported that assistance from WIC, Public Aid, food stamps, and child support were big influences to their assisting the adolescent parents. One paternal grandmother said:

Oh without the food stamps? We wouldn’t be eating for real because that, well that helps… the support I get from the food stamp program that helps me out a lot yeah. It helps him to have food on the table. It helps me to go buy [food].

The remaining 11 grandmothers (seven maternal and four paternal) did not explicitly report how the economy or public assistance influenced the type of support they provided to the adolescent parents. Instead they reported on their receipt of public assistance or their thoughts about public aid and the current economy.
Adolescents’ Influence. Both maternal and paternal grandmothers reported on how their children, who were adolescent parents, influenced the type of support they gave to the adolescent parents. Ten grandmothers (four maternal and six paternal) reported that the provision of babysitting was influenced by the adolescent parents’ personalities, behaviors, and decision making ability.

In regards to personality, one maternal grandmother said:

I mean yeah, she will, she will, you know she’ll make a mistake like that getting pregnant as a teenager but she’s a good person. She’s a good mom, she’s a good daughter and I mean just because she made that one mistake, I’m not the type of mother that kick her out or turn my back on her or anything so I’m gonna support her uh as much as I could so that means babysitting, washing clothes and cooking, whatever I’m gonna be there for her…I mean she just uh you know a good person, as long as I see her trying to uhm do right, I will just I will be there to help her.

Another maternal grandmother said:

Because well whatever she goes out to for a thing, she go for it you know I’m saying, so I want to be right there for her so she can fulfill her dreams, you know. When she go towards her dreams, she go forward, you know I’m saying. She go all the way…she’s a caring person you know and uh, and when she set out to do, like I said when she set out to do something she just do it, you know.

A paternal grandmother said:

They rarely ask…I love the fact that he is not one of those teenage kids who feel like I have to do it because I’m the baby’s grandmother. He’s not, I don’t know if
it’s selfish I’m looking for or, he’s not selfish anyway…Push the issue, yeah, because he doesn’t press me to babysit or watch the baby or you know just be involved as much as he would want. It makes me you now say okay, when they do come, no problem.

Another paternal grandmother said:

Yeah, cause I, I, I raised a bright, young man. I really think so and a lot of people that meet my son be like, he’s, he’s very respectful, you know cause you know how some times a lot of people say it’s what you do in the house. It, it is, it is a lot but it’s also the things that they watch on the TV, the things that they see outside and he could have been a disrespectful type of young man. But he’s not. So that’s, that’s what got me feeling the way I feel about him.

In regards to the adolescent parents’ behavior, one paternal grandmother said:

Yeah because I well, all I can say about that is that the way he care for his child you know the way he love his child… so you know I’m really proud of that so that makes me want to you know, keep him and get more involved with the child.

Another paternal grandmother said:

Cause he’s striving. He never asks me to babysit just so he can go out and mess off, you know it’s always business so I, you know. That’ the keep him motivated, you know you do what you need to do, I babysit.

Lastly, in regards to decision making ability, one maternal grandmother said:

She has a lack of knowing how to pick babysitters. She just leave them with anybody, like she has one friend, she leave him with and like to run just like she do… she does not know how to pick help in babysitting her baby, she just put her
baby off on whoever. That’s what that is, you have to pick the right people to babysit your kids.

Seven grandmothers (four maternal and three paternal) reported that giving advice to their adolescent was influenced by the adolescent parents’ personalities, behaviors, and attitudes. Both maternal and paternal grandmothers commented on personality as influence to the provision of advice support. One maternal grandmother said:

Well, I mean, okay because she's a very bright girl. So this is not that there's anything wrong. Yes, she's a very bright girl and I’m just there to give her that push whenever. Just so she don't back out. I mean, the reason I say back out because sometimes, you can get frustrated, you can be dealing with a certain situation and you want to just run, you know? And that's what I feel I come in and say-You can do it, you can do it.

One paternal grandmother said:

He’s like a sponge. He takes it all in with stride. He doesn’t complain, he uhm he may question why I said what I said about whatever it was I gave him advice about because he may not understand it, you know I may, it depends on what I give him advice about. He may not understand the way I said it so I have to…explain to him why we did it, why I did it and then he’ll be like, oh okay, okay. He wants to learn. He wants to learn anything he doesn’t know. He’s more than willing to accept advice... like I said he accepts it. By him accepting advice and not being one of the mouthy kids who, I don’t need you to tell me what to do or suggest what I should do. I’ve got this, he accepts it willingly and with no problem. So that makes me, I mean if he does get tired I’m sure he’ll tell me but
that makes me just you now, just want to keep giving advice whenever I can. For anything that I see or know or if you know sales come on somewhere I tell him. You know they got something on sale that’s such and such, you know you all should go swing by and get that or whatever.

One maternal grandmother commented that the adolescent mother’s attitude influenced the advice she provided. She said:

I see that she’s struggling but I see that she’s determined. I see that she wants something out of life. I see that she want her sons to look at her as a positive role model. I see that she has a lot to offer the world... Because she wants guidance. She wants structure, she wants manageability in her life. She wants it… If she didn’t want it, I think I’d still try to give it to her because I love her and I don’t want to see her hurt, and I don’t want to see her suffer. But I can’t force it on her, so therefore I would go just as far as I could go and then I’ll have to turn it over to God.

Both maternal and paternal grandmothers identified the adolescent parents’ behavior as an influence to advice support. One maternal grandmother said:

…because she’s not, she doesn’t have nothing going on, no schooling yet, none of that. And I … give her advice, and then not only that, it’s the way she keep up with that little baby at times, too. That’s another reason why I be giving her advice. She has lack of responsibility. It is just that. She has very lack of responsibility for herself and for that kid.

One paternal grandmother commented on the adolescent father’s willingness to listen as an influence to her provision of advice. She said:

...
I know he listens because I could tell him something and he could get mad at me, and then he’ll come back and say, “Mom, you know what, you was right. What you said to me, you was right”.

Of the six grandmothers (five maternal and one paternal) who reported that the adolescent parents’ characteristics influenced the financial support they provided, five maternal grandmothers reported providing financial support based on the adolescents’ need for monetary assistance or behavior. One maternal grandmother said:

I know she don’t have it so I feel that it’s my responsibility as a grandmother to help her in whatever way I can. No, it’s not nothing specific. I know she need help, so that’s why I will do it.

Another maternal grandmother said:

…Instead of her raising them, I’m doing it … “She’s not going to do it.”

The paternal grandmother reported providing financial support because of the adolescent father’s attitude. A paternal grandmother said:

Because I know he can do better you know and he’s very intelligent and he’s a good father, too … as long as he go to school you know what I mean, he’s doing something positive, I’m behind him. 100. That’s why.

Seven grandmothers (one maternal and six paternal) reported that the provision of shopping was influenced by the adolescent parents’ attitudes and behaviors. The maternal grandmother identified the adolescent mother’s attitude as an influence to the shopping support she provided. She said:

It’s her attitude. Because she has attitude. It’s her attitude, ____ it depends on the way how she responds, means say things and everything else. And sometimes
I make her suffer through that too sometimes so it depends on her. Uh huh sometimes I don’t because the way how she is I don’t know. Nuh uh. I make her wait. don’t get me wrong. Not that I won’t do it but I’ll make her wait to let her know that you can’t just come to nobody any kind of way just because I’m a grandmamma, don’t be expecting that I have to do this and I have to do that because that is not the case.

One paternal grandmother reported that she provided shopping in spite of her adolescent son’s attitude. She said:

No… cause he got a nasty attitude, God forgive him but you know, I just, I have to bite my tongue to do it but you know instead of him going there and you know trying to get it from someplace else, I have to give it to him, you know cause yeah, well sometimes he’s sweet sometime he, you know. He really don’t know how to go about asking, you know. He just one day say, I need this. You know it will take me a while but I had to go through it and look and see do you really need it you know in order for me to give it to you?

Two paternal grandmothers attributed their adolescent son’s behavior as an influence to their provision of shopping support. One paternal grandmother reported that her son’s persistence in trying to provide for his child and his persistence asking for help were contributing factors to her provision of shopping. She said:

He’s determined, he’s willing to finish school, he willing to do the things that he know he have to do, and he got to learn first and the reason why I support him is because he didn’t, he didn’t uhm just say go bad, far as going to the corner to make a living for the baby. He still get up every morning and go to school, you
know, he job hunting, he, he searching for a job. I told him you got to do part-time if he find one but his… He’s willing to try… He begs, oh my God, you can’t tell him, well I don’t have it right now and all you could is say I’m gonna try to get it.

The other paternal grandmother commented on her son’s persistence to provide for his child and her son’s appreciation for the things she did for him and his child. This paternal grandmother said:

He tell me too much, I’m doing too much but he’s not working, he’s in college, he’s 19, he doesn’t have a job so a lot of times he might say well [baby] needs such and such and I get it for him. You know even though he’s not working, he’s still try to, like for Christmas he you know he got this little money from school whatever and he went and bought him…gym shoes and stuff for Christmas, and that was good cause boys normally his age they, they wouldn’t, which they should, because they showing responsibility. But a lot of them wouldn’t and I told him, you have a son now, it’s not all about you now, like I told him, you grown now, when you had this baby, the money you was getting supposed to stop and money goes to the baby. I still do for him and the baby, you know what I’m saying? Cause he needs it… he just tell me when I do something for [him], he appreciates [it], he lets me know he appreciate it and that’s more than anything.

E. Similarities and Differences Between Maternal and Paternal Grandmothers

Similarities and differences existed within the maternal and paternal grandmothers’ demographic characteristics, types of support provided to the adolescent parents, rationale for the
types of support provided, influences to the provision of support, and adolescent parents’ personal characteristics that were reported to influence the provision of support.

**Demographic Characteristics.** The maternal and paternal grandmothers had similar demographic data in terms of age, marital status, receipt of public assistance, frequency of church attendance, and unemployment status. Also, all maternal and paternal grandmothers reported a church denomination from the Christian faith. However, the maternal and paternal grandmothers reported differing demographic data in terms of education and income. The maternal and paternal grandmothers differed in their level of education; a larger percentage of paternal grandmothers had less than a 12th grade education; whereas, a larger percentage of maternal grandmothers had attended college. In regards to income, more paternal grandmothers earned less than $899 compared to maternal grandmothers, and more maternal grandmothers earned more than $900 compared to paternal grandmothers.

**Types of Support Provided.** The primary types of support provided by both groups of grandmothers were babysitting, advice, financial, and shopping. Both maternal and paternal grandmothers reported providing advice to their adolescent children, who were parents. More maternal grandmothers reported providing financial support to the adolescent parents than paternal grandmothers, while more paternal grandmothers reported providing babysitting and shopping than maternal grandmothers.

**Rationale for Support Provided.** Both maternal and paternal grandmothers reported that babysitting their grandchildren gave them energy, and the adolescent parents putting forth an effort to continue school and to fulfill the parenting role motivated them to support the adolescent parents. While the maternal grandmothers reported to babysit, because they did not trust others to care for their grandchildren, the paternal grandmothers reported a desire to spend
time with their grandchildren, a desire to encourage and to guide adolescent father, a previous lack of personal help, a limited availability of parental and grandparental support for the adolescent parent, and the needs of their grandchild’s mother as reasons for providing babysitting.

Both maternal and paternal grandmothers reported to provide advice, because the provision of advice gave the adolescent parents necessary information. The grandmothers also reported providing advice, because of their own memories of difficult times as a single mother or not having assistance from parents. Both grandmothers reported to provide advice due to being concerned for the adolescent parent. The maternal grandmothers reported a concern only for their adolescent daughters; whereas, the paternal grandmothers voiced concern for both the adolescent father and the mother of the child.

Both maternal and paternal grandmothers reported providing financial support, because the adolescent parents have no other means of income and of fear that the adolescent parent might seek out prohibited avenues to obtain income. The adolescent father’s positive life choices and verbalized need from the grandchild’s mother were influences for financial support for paternal grandmothers; whereas, need and availability of resources influenced the provision of financial support for maternal grandmothers.

The maternal and paternal grandmothers did not report similarities in their rationale for the provision of shopping. The paternal grandmothers reported shopping, because they desired to help the adolescent fathers and shopping was an expected function of a grandmother. A maternal grandmother reported to provide shopping to show concern and care for her grandchild.

**Influences for Types of Support Provided.** Both maternal and paternal grandmothers reported similarities related to the influence their work, religion, neighborhood, economy, and
public assistance had on the support they provided to the adolescent parent. The grandmothers’ employment influenced the financial support they were able to provide to the adolescent parents and motivated them to support the adolescent parents. The maternal and paternal grandmothers both reported that their churches and church families were supportive and helped them respond to the adolescent parent as Christ would respond. Both groups of grandmothers reported concern for safety of the adolescent parents within the community. These grandmothers commented on their desire for the community to make efforts to provide resources for the adolescent parents and commented on the importance of adolescents being exposed to opportunities in other environments.

The maternal and paternal grandmothers both identified church and internet access as a resource in their community. The maternal grandmothers identified more resources in the community than the paternal grandmothers. The career center and karate class were identified as resources by paternal grandmothers, but not identified as resources by maternal grandmothers.

There were also similarities related to the past experiences reported by maternal and paternal grandmothers. The maternal and paternal grandmothers reported that past experiences influenced the support they provided to the adolescent parents: their own mothers’ behavior, while they raised their children, lack of help received during their youth, learnings from past experiences, and their own difficulties being adolescent parents. The maternal grandmothers also reported past experiences of not feeling loved by their mothers and positive influences in their lives as influences to the support they provided to the adolescent mothers; whereas, one paternal grandmother reported that the death of her son influenced the support she provided to the adolescent father.
Both groups of grandmothers reported that being able to be there for their children, current life issues, and other responsibilities were current life happenings that influenced the support they provided to the adolescent parent. Both maternal and paternal grandmothers reported these current life happenings: attending school and caring for a sick parent; however, the maternal grandmother identified challenges related to being a single mother and the paternal grandmother identified negative influences within her community as current events within their lives.

**Adolescent Parents’ Characteristics.** The adolescent parents’ personal characteristics were found to influence the type of support both maternal and paternal grandmothers provided. Both maternal and paternal grandmothers reported that the adolescent parents’ personality influenced their provision of babysitting and advice to the adolescent parents. Both maternal and paternal grandmothers reported that adolescent parents’ financial need was a reason for the provision of financial support. The maternal grandmothers did not identify any adolescent parent characteristics that influenced the provision of financial help, but one paternal grandmother commented that aspects of the adolescent father’s personality influenced the provision of financial support.

The paternal grandmothers reported that the adolescent fathers’ attitude or behavior influenced their provision of babysitting, financial, and shopping support. Both maternal and paternal grandmothers reported that the adolescent parents’ behavior influenced their provision of advice. The willingness of adolescent fathers to listen to the paternal grandmothers’ advice influenced the provision of advice support for paternal grandmothers.

Although the adolescent parents’ attitudes impacted the provision of shopping support provided by maternal and paternal grandmothers, only a maternal grandmother reported that the adolescent mother’s attitude influenced her provision of advice. Only one maternal grandmother
reported that the adolescent mother’s decision making ability influenced her provision of babysitting.

**Member Check.** Descriptive summaries of this study’s results were reviewed by two maternal grandmothers and two paternal grandmothers (see Appendix I). In regards to babysitting, one of the two maternal grandmothers supported each rationale presented. For paternal grandmothers, one paternal grandmother did not report providing babysitting support and the other paternal grandmother supported the five of the seven rationales.

In regards to advice, one maternal grandmother reported that her adolescent daughter’s age did not influence her provision of advice. This grandmother supported the other rationales identified in this study. The other maternal grandmother interviewed supported all rationales identified in this study.

Findings from this study identified two rationales for grandmother’s provision of financial support: the adolescent mother had no income and the grandmothers feared that the adolescent mothers would seek alternative means for income. One maternal grandmother did not identify that fear of her adolescent seeking alternative income methods was a reason she provided financial support, but the other grandmother interviewed supported both rationales identified in the study. In regards to shopping, both paternal grandmothers reported that their desire to help the adolescent fathers and their belief that shopping was an expected function for a grandmother motivated them to provide shopping to their adolescent sons, who were fathers.

Both maternal and paternal grandmothers agreed that past experiences, current life happenings, neighborhood, and religion influenced the support they provided to the parenting adolescents. Both maternal grandmothers supported the findings that adolescent mothers’ personalities, behavior, attitude, and decision making ability influenced the support they
provided to their parenting adolescent daughters. Both paternal grandmothers also agreed that the adolescent father’s personalities, behaviors, and attitudes influenced the support they provided to their adolescent sons, who were fathers. The maternal grandmothers differed from the paternal grandmothers in their responses related to available community resources. The maternal grandmothers recognized the church, clinic/hospital, food pantry, internet, Parent-Teacher Association, Public Aid, and WIC as resources within their communities. The paternal grandmothers did not mention all the resources identified in the study. One paternal grandmother only identified the church as a resource in the community. This grandmother added three additional resources: library, boy scouts, and cub scouts. The other maternal grandmother did not acknowledge the community resources identified in the study, but simply reported that not many resources were available in her community.
V. Discussion

This study of 10 African-American maternal grandmothers and 10 African-American paternal grandmothers explored the supports these grandmothers provided to their parenting adolescents. While numerous studies have examined the support provided to adolescent mothers (Logsdon, Birkimer, Ratterman, Cahill, & Cahill, 2002; Logsdon & Koniak-Griffin; Honig, & Morin, 2001; Thompson, & Peebles-Wilkins, 1992; Jacobson, & Frye, 1991; Nath, Borkowski, Whitman, & Schellenbach), limited studies have examined supports provided to adolescent fathers. The most frequently identified supports these grandmothers reported providing to their parenting adolescents were: babysitting, advice, financial, and shopping. Paternal grandmothers were more likely to report babysitting and shopping; whereas, the maternal grandmothers reported babysitting, advice, and financial.

Literature has characterized supports provided to adolescent mothers as tangible, instrumental, and emotional (Bentley, Gavin, Black, & Teti, 1999; DeVito, 2007). Tangible support was the provision of money and physical objects (Norbeck & Tilden, 1988). Instrumental support was the provision of information, advice, and assistance with routine tasks (Belsky, 1984). Emotional support was love and interpersonal acceptance an individual received from another (Belsky, 1984). The results of this study were consistent with these definitions, because babysitting and advice were consistent with instrumental support and financial and shopping were consistent with tangible support.

Paschal (2006) and Dallas and Chen (1999) identified emotional and financial support as support adolescent fathers received from their mothers. In this study, a small number of paternal grandmothers reported providing emotional and financial support, but they and the maternal grandmothers overwhelmingly reported that they provided support to the adolescent parents.
because they loved the adolescent parents. Emotional support from paternal grandmothers was important to adolescent fathers (Paskiewicz, 2004), and as such, it was important to examine ways to promote paternal grandmothers’ provision of love and emotional support.

This study was unique, because it allowed the researcher to look across responses to identify supports that are similar and different for maternal and paternal grandmothers, unlike prior studies of maternal and paternal grandmothers that focused on describing the experience of maternal and paternal grandmothers and identifying barriers to and recommendations for adolescent fathers’ participation in childrearing (Dallas, 2004; Rhein, Ginsburg, Schwarz, Pinto-Martin, Zhao, Morgan, & Slap, 1997). The study’s findings suggested that maternal grandmothers reported a wider variety of instrumental support compared to paternal grandmothers. Paternal grandmothers might have identified less instrumental supports than maternal grandmothers because they spent less time with their grandchildren than maternal grandmothers.

This study explored both maternal and paternal grandmothers’ rationales for providing support to their parenting adolescents. Unlike Paskiewicz’s (2001) finding that maternal grandmothers provided babysitting support to facilitate the adolescent mothers’ school attendance, this study revealed that both maternal and paternal grandmothers babysat because babysitting their grandchildren energized them. Maternal grandmothers babysat because they felt the adolescent mothers were putting forth an effort to parent, and they did not trust others to babysit their grandchildren. Paternal grandmothers babysat because they desired to spend time with their grandchildren and to help their sons. In addition, paternal grandmothers’ babysat to help the mother of the child born to the adolescent father.
The grandmothers reported factors influencing the support they provided to their parenting adolescents: friends, family, employment, religion, neighborhood, adolescent parents’ schools, community resources, current life happenings, past experiences, and adolescent parents’ characteristics. These grandmothers reported limited influence from family and friends. The few grandmothers, who reported that their friends influenced the support they provided, stated that their friends provided advice and encouragement. Maternal grandmothers reported more advice and encouragement from friends compared to paternal grandmothers. The few grandmothers reporting receiving family assistance said that their families assisted them by providing shopping, shelter, and advice. Mudler (2009) found that support from family positively impacted the well-being of grandmothers, who have children that are adolescent parents. The grandmothers, in this study, were functioning without support from groups of individuals, who have the potential to positively impact their lives and the lives of adolescent parents. Because of this research finding, health professionals need to explore ways to increase family and friend support for grandmothers with children, who were adolescent parents.

Limited information was available regarding the influence grandmothers’ employment had on the support grandmothers provided to parenting adolescents. The few grandmothers, who reported that their work influenced the support they provided, stated that their work assisted them to provide tangible support and that the type of work they performed motivated them to assist the adolescent parent. Although grandmothers’ work had the potential to positively influence the support grandmothers provided to parenting adolescents, several participants in this study reported to be unemployed or that their work did not influence the support they provided to their children who were adolescent parents. Due to the positive impact employment might have on grandmothers’ ability to support adolescent parents and to the large number of unemployed
grandmothers found among the study’s participants, more opportunities are needed to support these grandmothers’ ability to obtain and maintain employment.

Religion has played an important role in African-Americans rearing their children (McAdoo, 2007), and churches have an opportunity to support these grandmothers (Brown, Caldwell, & Antonucci, 2008). All grandmothers in this study reported being Christian, and 45% of the grandmothers reported to attend church frequently to very frequently. Additionally, they reported that their churches and their church families were supportive to them as they cared for their adolescent children who were parents.

The influence of neighborhoods and families on developmental outcomes for children has been explored (Burton, Price-Spratlen, & Beale Spencer, 1997; Burton & Jarrett, 2000). Youth, who grow up in neighborhoods with concentrated poverty, were at risk for negative life outcomes (Popkin, Acs, & Smith, 2009). The grandmothers in this study recognized the need to reduce the negative impact of the community on their adolescents.

Only a few grandmothers reported that their parenting adolescents’ school influenced the support they provided. Adolescent parents’ schools have the potential to be a positive influence for grandmothers’ provision of support. Twenty-five percent of the adolescent parents were not in school at the time of the study. Researchers, educators, and others concerned about the welfare of parenting adolescents and their children must explore additional opportunities to assist intergenerational families, where adolescent parents were absent from the school environment. Grandmothers, within this study, reported that their adolescent children, who were parents, were attempting to return to school; therefore, grandmothers might benefit from more opportunities to assist adolescent parents return to educational environments.
Billingsley (1992) suggested that the ability for families to care for children was dependent on resources within the community and social policies originating from the larger society. Although community resources were an overarching part of society and essential to the well-being of African-American families, difficulty of accessing potential resources limited grandmothers’ abilities to use the resources (Simpson & Lawrence-Webb, 2009). Many African-American grandmothers lived in low-income communities, where resource availability (i.e., human capital, services and information, social status, and quality healthcare) was a major concern (Carr, 2006). This resource shortage has been prominent within urban communities because of the lack of economic, institutional, and social resources for families within these communities (Jarrett, 2006). The grandmothers, in this study, identified community resources such as: healthcare agencies, insurance subsidy services, food provision services, and religious organizations. About 84% of the grandmothers were not aware of community resources. The grandmothers did not identify any programs that were specific to adolescent parenting or programs for grandmothers with parenting adolescents. Paternal grandmothers might be at a greater disadvantage regarding knowledge of resources than maternal grandmothers. In this study, paternal grandmothers identified fewer resources available in the community than maternal grandmothers.

Within Belsky’s (1984) model, the parent’s developmental history defined as: the experiences the parent had during childhood to adulthood, directly influenced the parent’s personality or psychological attributes. In turn, the parent’s personality and psychological attributes indirectly influenced parenting functioning. Grandmothers, within this study, identified past experiences as contributors to provision of support they gave to adolescent parents, but more needed to be known about how these past experiences influenced the support they provided. This
study supported past findings regarding grandmother role overload. Consistent with past findings of grandmother role overload (Burton & Bengston, 1995), this study’s findings illustrated that grandmothers, who have adolescents that were parenting, have life happenings that can hinder the provision of support these grandmothers could provide. This study differed from previous literature, which suggested that grandmother support was not related to factors in the grandmother’s life (Voran, & Phillips, 1993). The grandmothers identified caring for their own sick parents and dealing with other responsibilities as hindrances. The grandmothers, in this study, also identified challenges related to being a single mother, negative community influences, and life issues related to their own personal instability as hindrances to the provision of support to adolescent parents. More information is needed to explore ways to reduce hindrances of support due to grandmothers’ current life happenings, and more efforts are needed to support grandmothers.

A child’s individual characteristics directly influenced a parent’s parenting (Belsky, 1984). Therefore, the adolescent parents’ individual characteristics have the potential to influence the parenting practices of grandmothers. Paternal grandmothers have sought to build relationships with their parenting sons and grandchildren, and maternal grandmothers and adolescent mothers’ relationships have played a prominent role in adolescent childbearing (Paskiewicz, 2004; Musick, 1994; Wakschlag, Chase-Landsdale, & Brooks-Gunn, 1996; Sellers, Boris, Black, Oberlander, & Myers, 2011). Adolescent parents’ attitudes, behaviors, decision making abilities, and personalities were found to influence the support grandmothers provided to the adolescent parents. Findings, from this study, suggested that adolescent parents’ individual characteristics might enhance or reduce the support they received from the grandmothers. Little information was available regarding how adolescent fathers and the paternal grandmothers’ relationships
were impacted by childbearing. Since building and maintaining relationships were important for adolescent mothers, adolescent fathers, and grandmothers (Paskiewicz, 2004; Musick, 1994), more information is needed to examine how adolescent parents and grandmothers’ relationships influence the support grandmothers provided to their parenting adolescents.

A. Limitations

This study utilized purposive sampling, a nonrandom selection sampling method. Therefore, there are limits to the transferability of the findings. Only grandmothers, who self-identified as providing some form of support, were included in this study. The results could not be generalized to all African-American grandmothers or grandmothers who report to not support their parenting adolescents. The grandmothers reported that their children, who were adolescent parents, ranged in age from 16 to 19 years. The results of this study might not be transferable to maternal or paternal grandmothers, who have parenting adolescents under 16 years old. The transferability of the results of this study was also limited due to participants being recruited from only one neighborhood within Chicago. The results of this study might not be transferable to other Chicago neighborhoods.

B. Implications for Practice

This study’s findings have demonstrated that adolescent parents’ personal characteristics influenced the support grandmothers provided to adolescent parents. Health care providers participating in the development and implementation of intervention programs to assist adolescent parents should include information identifying ways to encourage positive adolescent parent-grandmother relationships (e.g., adolescent parent-grandmother counseling). Adolescent parents and grandmothers might benefit from meeting in groups with other adolescent parents and grandmothers.
Grandmothers and adolescent parents should be included in the development and implementation of comprehensive intervention programs that focus on the enhancement of parenting capacity among adolescent parents. The grandmothers’ experiences and expectations should be included; whereby, grandmothers will be provided opportunity to voice suggestions and provided support to parenting adolescents. The adolescent parents should be afforded an opportunity to glean knowledge from various grandmothers to gain a greater understanding regarding grandmothers’ perspectives. Thus, health care providers should equip grandmothers and adolescent parents with tools to assist in building relationship and social support between adolescent parents and grandmothers. The grandmothers should also be included in the development and implementation of programs designed to support grandmothers in their mother and grandmother roles.

Little information was available regarding the needs of adolescent fathers or the needs of mothers of adolescent fathers during childrearing. Health care providers could be proactive about assessing the needs of adolescent fathers and grandmothers during the various stages of childbirth and postpartum. Health care providers should consider working with adolescent parents within intergenerational families by assessing the needs of paternal grandmothers and adolescent fathers. Health care providers should assess the adequacy of social support and barriers of social support during each encounter with grandmothers and adolescent fathers.

Health care providers should conduct continual assessment of support provided by grandmothers and work to enhance grandmothers’ awareness of formal support networks. Community organizations in Chicago have parenting groups for grandparents raising grandchildren and parenting groups for adolescent parents. However, there was no group specific for grandmothers, who were caring for adolescents that were parents. Since few studies included
this group of grandmothers (Dallas, & Chen, 1996), the lack of attention to this group of
grandmothers might impact the services provided. A parenting program for maternal and
paternal grandmothers could provide an opportunity for these grandmothers to network and gain
insight from groups of women who are in similar situations. Also, this program could provide a
setting for formal support networks to offer essential information related to the needs of
parenting adolescents, information that could assist grandmothers with their own personal needs,
and information that might assist grandmothers to improve or strengthen the support provided to
adolescent parents to help them continue school and avoid additional unwanted pregnancies.

Smith, Buzi, and Weinman (2002) suggested that intervention programs include the unique
needs of adolescent fathers, such as: legal aspects related to fatherhood, self-sufficiency,
effective parenting skills, and behavioral issues. In regards to adolescent motherhood,
Montgomery (2003) suggested that adolescent mothers have emotional, educational, and
physical needs during pregnancy and postpartum. The mothers of adolescent mothers also have
postpartum learning needs after their adolescent daughters have children (Bowman, & Ruchala,
2006).

Logsdon and Koniak-Griffin (2005) presented a conceptual model for social support for
postpartum adolescent mothers. The model included components of adequate social support and
factors that contributed to barriers of social support. Satisfaction with social support, expectation
of social support, support network, perceived support, and importance of support were used to
assess adequate social support (Logsdon & Koniak-Griffin). Stigma, environment, conflict with
support providers, social skills, and expectations of reciprocity were barriers to social support
(Logsdon & Koniak-Griffin). The authors suggested that professional support interventions were
required when an adolescent mother was deemed to have inadequate social support. This model
could be adapted and used to assess social support of grandmothers, who have parenting adolescents, and to examine the barriers of support for adolescent fathers. However, since limited information is available regarding support needs of these grandmothers and of adolescent fathers, additional research is needed to examine their support needs and to refine the model to reflect these needs.

Although school was not found to be a large influence on support grandmothers provided, the school environment might be an effective setting to reach grandmothers and their adolescent parents. Stephens, Wolf, and Batten (1999) presented a summary of policy implications for strategies to improve outcomes for adolescent parents and their children through supporting school based programs. They suggested that the implementation of effective programs for adolescent parents and their children require a coordinated effort where school based programs and community based services and programs are coordinated to provide a comprehensive system (Stephens, Wolf, & Batten). There is an opportunity for the Parent Teacher Association (PTA) to take a large part in spearheading such collaborations. The PTA could collaborate with community organizations to provide support, information, and resources to grandmothers with parenting adolescents.

C. Implications for Research

Findings from this study have several research implications for grandmothers. Additional research is needed relating to factors that contribute to adequate social support for grandmothers and barriers to the provision of adequate social support. Although support received from family and friends was deemed important by some grandmothers, the majority of grandmothers reported limited support from their friends and family. Researchers could explore dynamics of these
grandmothers’ friend and family networks, uncover barriers to friend and family support, and explore techniques, which could aid in the development or strengthen these networks.

It is important to explore rationale for non-supportive grandmothers. Because support from grandmothers has been found to benefit adolescent parents, it is necessary to explore barriers to support for grandmothers, who do not report providing support to their children who are adolescent parents. Information is also needed regarding how current life happenings are deemed to be hindrances and to identify opportunities to bypass or lessen these hindering factors. More research is needed to explore the daily lives and structural factors influencing the survival of these African-American grandmothers (Ruiz, 2000).

Because grandmothers have played a pivotal role in the lives of adolescent parents and their children, research is needed to fully explore how grandmothers’ past relationships and experiences with their own mothers, experiences during their youth, and other life experiences influence the support they give to adolescent parents. The data from this research could provide useful information to develop services to reduce barriers related to developmental history and encouraged efforts of grandmothers to support their parenting adolescents. The quality of grandmothers and adolescent parents’ relationships might be a contributing factor to support grandmothers provide. More information is needed to describe how the quality of the grandmother-adolescent parent relationship influences the support provided to parenting adolescents. Additional research should be conducted examining the usefulness of relationship counseling and barriers to relationship building among adolescent parents and grandmothers.

Grandmothers also identified limited resources in their communities to assist them as they supported the adolescent parents. Future research could utilize Carr’s (2006) vulnerability model to examine resource availability for grandmothers. Carr’s vulnerability model depicted
antecedents to vulnerability for African-American grandmother caregivers. Concepts within the vulnerability model included: resource availability, social connectedness, social status, environmental resources, health status, and delayed healthcare. Future research could explore what resource availability means to grandmothers, who have parenting adolescents, examine what supports and resources grandmothers perceived to be most influential, and examine ways to improve supports and resources provided to grandmothers. Additional research is also needed to fully evaluate the impact the microsystem, mesosystem, exosystem, and macrosystem have on grandmothers, who care for parenting adolescents, specifically, how the microsystem, mesosystem, exosystem, and macrosystem impact intergenerational families including, grandmothers, adolescent parents, and the children born to adolescent parents.

Since the connections between grandmother support and adolescent parents’ characteristics have not been extensively explored (Voran, & Phillips, 1993), there is a need to examine the impact of adolescent parents’ characteristics on grandmother support. Voran and Phillips (1993) suggested that the quality of the adolescent mother-grandmother relationship did not influence the child care support grandmothers provide. Voran and Phillips examined these parent characteristics: self-esteem, depressive symptoms, and adolescents’ report of absences from school. In this current study, the adolescent parents’ personal characteristics: personality, behavior, and decision making ability, were found to influence the babysitting support grandmothers provided. Additional research can further explore the adolescent parents’ characteristics found in this study and the relationship between these characteristics and grandmother support. Additional research could also explore the relationship between adolescent parents’ characteristics and the quality of adolescent parent-grandmother relationships. Future
intervention research should be developed to strengthen adolescent parent-grandmother relationships.

**D. Conclusion**

Grandmothers provided support to parenting adolescents because of love. They provided support in spite of limited support from family, friends, neighborhood, and community resources. Because these grandmothers are the primary support persons for adolescent parents, researchers, clinicians, and policy makers must make concerted efforts to support these grandmothers. More attention is needed to identify supportive resources for grandmother caregivers and to develop and implement intergenerational programs aimed at strengthening family units with grandparent-headed households (Simpson, 2008). Grandmothers’ social networks, work, religion, adolescent parents’ schools, neighborhood, current life happenings, past experiences, and community resources have the potential to influence grandmothers’ provision of support to adolescent parents. Researchers should further explore these factors to better understand their influence to the provision of support and to develop interventions that might improve outcomes and the lives of grandmothers, parenting adolescents, and the grandmothers’ grandchildren. It is imperative that grandmother support groups be developed and grandmothers’ perspectives be utilized when intervening with adolescent parents. Studies should be continuously directed at evaluating the needs of grandmothers with parenting adolescents by identifying adequate social support and barriers to social support for these grandmothers.
Cited Literature


http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?prodType=table

U.S. Census Bureau (2010). Percent of children under 18 years below poverty level in the past 12 months. Retrieved from

http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?prodType=table


Appendix A: Demographic Questionnaire

Demographic Questionnaire

Today’s date: __/__/ 

Mo. Day Year

Directions: Please answer the following questions. All of your answers are very important to us. Please answer all the questions. Do not write your name on the questionnaire.

1. How old are you? _______ years old.

2. What is your birth date? __/__19___.

Mo. Day Year

3. What is your marital status? (Circle one answer.)

1. Never Married
2. Married
3. Separated/Divorced
4. Widowed

4. What is your race? (Circle one answer.)

1. African-American/Black
2. Caucasian/White

3. American Indian

4. Hispanic/Latino

5. How many children do you have? ______________

6. Please list the first names and ages of each of your children.

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<th>First Name</th>
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7. How many of your children live with you? ______________

8. How many people, including all children and all adults, live in your house? _____

9. Do any of your daughters or sons have children? (Circle one answer.) Yes No

9a. If yes, how old were your daughters or sons when their first child was born?

1. Daughter: Age __________

1. Son: Age __________
2. Daughter: Age ________  2. Son: Age ________

9b. What is the current age of your grandchild(ren) born to your daughters or sons who are 19 years old or younger?

1. Granddaughter: Age ________  1. Grandson: Age ________
2. Granddaughter: Age ________  2. Grandson: Age ________

10. How many times have you moved in the past year? _______________

11. What is your occupation? _______________________________________

12. What is the highest level of education you have completed? (Circle one answer.)

1. Less than a 12th grade education
2. Did not graduate from high school but completed a trade school program
3. Completed 12th grade or obtained a G.E.D.
4. Graduated from high school and completed a trade school program
5. Some college education
6. Graduated from 2-year college (Which major? ___________________________)
7. Graduated from 4-year college (Which major? ___________________________)
8. Some graduate school after college graduation

9. Masters Degree or Doctoral Degree (Which degree? ______________________)

13. What is your religion? (Circle **one** answer.)

   1. Roman Catholic
   2. Baptist
   3. Methodist
   4. Apostolic Church of God
   5. Other (What? ________________________________)
   6. None

14. How often do you go to church? (Circle **one** answer.)

   1. Very frequently
   2. Frequently
   3. Occasionally
   4. Rarely
   5. Never

15. Are you currently: (Circle **all** that apply.)

   1. Working full-time for pay
   2. Working part-time for pay
   3. Not working
   4. Disabled, not working
   5. Disabled, working part time
   6. Retired
   7. In school or a training program
   8. Other (What? ________________________)
16. Are you currently receiving: (Circle all that apply to you.)

1. Public Aid
2. Food Stamps
3. Disability
4. Social Security
5. Unemployment benefits

17. What is the total income of your household per month? Please include all monies coming in per month. (Circle one answer.)

1. $299 or less
2. $300 to $499
3. $500 to $699
4. $700 to $899
5. $900 to $1,099
6. $1,100 to $1,299
7. $1,300 to $1,499
8. $1,500 to $1,699
9. $1,700 to $1,899
10. $1,900 to $2,099
11. $2,100 or more
Appendix B: Field Notes

<table>
<thead>
<tr>
<th>Description of Environment:</th>
<th>Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of interviewee:</td>
<td>(including behavior)</td>
</tr>
<tr>
<td>Comments</td>
<td></td>
</tr>
</tbody>
</table>
Appendix C: Sumo Interview Guide

SUMO INTERVIEW GUIDE

1. Often grandmothers give their children who have babies as adolescents different kinds of help. Grandmothers may give more than one kind of help, what kinds of help do you give?

2. For each kind of help mentioned ask:
   a. How did you come to the decision that ____________ should be given?
   b. Describe in detail how often you provide ____________?
   c. What is your reason for giving ____________ to your child who is an adolescent parent?
   d. What motivates you to give ____________ to your child who is an adolescent parent?
   e. How does your adolescent son/daughter influence your decision ____________?
   f. How did you decide on the amount of help to give?
   g. What is your reason for giving that amount of help to your child who is an adolescent parent?
   h. What motivates you to give that amount of help to your child who is an adolescent parent?
   i. How does your adolescent son/daughter influence your decision to give that amount of help?

3. What prevents you from giving the kinds and amounts of help to your child who is an adolescent parent?

4. What types of help are easy to provide, and what types of help are difficult to provide?

5. What kinds of help would you rather not give to your child who is an adolescent parent?
   a. Please explain your reason for not wanting to give that kind of help.
   b. What really stops you from giving that kind of help to your child who is an adolescent parent?
6. Describe what influences the help you give to your child who is an adolescent parent?
   a. Who gives you advice about what kind of help to give to your child who is an adolescent parent?
   b. What kind of advice do you receive from them (i.e., each person mentioned)?
   c. Describe how your friend(s) influence the help you give to your child who is an adolescent parent?
   d. How do the church and your religion influence the help you provide to your child who is an adolescent parent?
   e. How does your work influence the help you give to your child who is an adolescent parent?
   f. How does your neighborhood affect the kind of help you give?
   g. How does your child’s school affect the kind of help you give?
   h. What resources within your community help you help your child who is an adolescent parent?

7. Who gives you advice about what amount of help to give to your child who is an adolescent parent?
   a. Probe: What kind of advice do you receive from them (i.e., each person mentioned)?
   b. How does your family, family members, and kin affect the amount of help you provide to your child who is an adolescent parent?
   c. How does your neighborhood affect the amount of help you give?
   d. How does your child’s school affect the amount of help you give?

8. How do your past experiences influence the kind and amount of help you give to your child who is an adolescent parent?

9. What is currently going in your life that influences the kind and amount of help you give to your child who is an adolescent parent?

10. How does the current economy and public assistance influence the help you provide to your child who is an adolescent parent?

11. Is there anything else that influences the kind of help you give to your child who is an adolescent parent?

12. Is there anything else that influences the amount of help you give to your child who is an adolescent parent?
Appendix D: Telephone script

Telephone Script

Introduction:

Hello, my name is Jen’nea Sumo. I am a PhD student at the University of Illinois at Chicago in the College of Nursing. I am conducting a study with African American mothers who have an adolescent child who is a parent.

I am trying to learn more about the support grandmothers provide to their adolescent children who are parents. Specifically, I want to learn more about grandmothers’ reasoning for the type and amount of support they provide to their child who is an adolescent parent. Thank you for taking time to find out if you are eligible for participation in this study.

A. Please answer the following seven questions to determine your eligibility for this study.

1) What race are you? If the respondent answers African American or Black, go to question 2. If yes, then go to section C.

2) Do you have a daughter or son who is an adolescent parent? If yes, then go to question 3. If no then go to section C.

3) How old is your daughter/son who is an adolescent parent? If the respondent answers 14, 15, 16, 17, 18, or 19, go to question 4. If the respondent answers with different age than 14-19, go to section C.

4) How old is your grandchild born to your adolescent daughter or son? If the respondent answers newborn to 1 year old go to question 5. If the respondent answers with different age than newborn to 1 year old, go to section C.

5) Is your income less than $25,000 a year? If yes, then go to question 6. If no, then go to section C.

6) What zip code do you reside in? If answer 60644, 60651, 60635, 60639, or 60707 go to section B. If answer with zip code other than 60644, 60651, 60635, 60639, or 60707 go to section C.

If respondent is eligible for participation, go to section B.

If respondent is not eligible for participation, skip to section C.
B. Eligible Respondent

You are eligible to participate in this study. If you choose to participate in this study, you will be asked to complete a demographic questionnaire that asks questions such as: what is your marital status, how many children do you have, and what is the age of your children who are adolescent parents. After you complete the demographic questionnaire, you will be asked questions to explore what type and amount of support you give to your child who is an adolescent parent and your rationale for providing such support.

To the best of our knowledge, participating in this research has no more risk of harm than you would experience in everyday life. You may not directly benefit from participation in this research. This study is designed to learn more about rationale behind support given to parenting adolescents. The study results may be used to help others in the future.

Every grandmother who participates in this study is being asked to meet with researcher one time. Four grandmothers will be asked to meet with the researcher a second time. The first meeting will take about 1 hour. The second meeting will take about 30 minutes.

Are you willing to participate in this research study?

If Yes: Schedule meeting.

If No: Thank you for contacting me regarding this study. I apologize for any inconvenience you may have experienced due to the time you have spent on the phone today.

C. Ineligible Respondent

Thank you for your time. Unfortunately, based on your responses to the previous questions, you are not eligible to take part in this study. Thank you again, and I apologize for any inconvenience you may have experienced due to the time spent on the phone today.
Appendix E: Informed Consent

University of Illinois at Chicago

Research Information and Consent for Participation in Social Behavioral Research

African-American Grandmothers: Rationale for the Support They Give to Their Parenting Adolescents

You are being asked to participate in a research study. Researchers are required to provide a consent form such as this one to tell you about the research, to explain that taking part is voluntary, to describe the risks and benefits of participation, and to help you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Principal Investigator Name and Title: Jen’nea Sumo, MS, RN

Department and Institution: Health System Sciences

Address and Contact Information: 845 S. Damen Ave. MC 802 Chicago, IL. 60612

Phone: 312-206-6946

Sponsor: Graduate Assistance in Areas of National Need Fellowship

Why am I being asked?

You are being asked to be a participant in a research study about support grandmothers provide to their children who are adolescent parents. The researchers hope to better understand grandmothers’ reasoning for supporting their children who are adolescent parents.
You have been asked to participate in this research because you:

- Are a grandmother or surrogate grandmother of a child born to an African American adolescent mother or father;
- Have an adolescent son or daughter (14 to 19 years old) with a child that is a new born to 1 year-old;
- Have income that is less than $25,000 a year;
- Self-identify as Black or African American;
- Live in 60644, 60651, 60635, 60639, or 60707 zip codes.

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future dealings with the University of Illinois at Chicago. **If you decide to participate, you are free to withdraw at any time without affecting that relationship.**

**What is the purpose of this research?**

Researchers are trying to learn more about mothers of adolescent parents. Specifically, why these grandmothers provide the type and amount of support they provide to their child who is an adolescent parent. The researchers will explore what kind of supports grandmothers provide, the grandmothers reasoning for providing support, and what factors influence the type and amount of support grandmothers provide to their child who is an adolescent parent.

**What procedures are involved?**

This research will be performed either at the University of Illinois at Chicago College of Nursing or in a mutually agreed upon location.

Every grandmother in this study is being asked to meet with the researcher one time. Four grandmothers will be asked to meet with the researcher a second time to review and critique a summary of the research findings. The first meeting will take approximately 90 minutes. The second meeting will take anywhere from 30 minutes to 1 hour.

Each grandmother will be asked to complete a demographic questionnaire which asks questions related to marital status, number of children, age of children who are adolescent parents, education, religion, and your economic status. The demographic questionnaire will take approximately 30 minutes. After completion of the questionnaire, you will participate in an interview that will take approximately 1 hour.

**What are the potential risks and discomforts?**

A risk of this research is a loss of privacy (revealing to others that you are taking part in this study) or confidentiality (revealing information about you to others to whom you have not given
permission to see this information). Another risk is risk of emotional discomfort related to specific topic of the study. However, to the best of our knowledge, participating in this research has no more risk of harm than you would experience in everyday life.

**Are there benefits to taking part in the research?**

You may not directly benefit from participation in this research. This study is designed to learn more about grandmothers’ reasoning behind the support they give to their adolescent children who parents. The study results may be used to help other people in the future.

**What other options are there?**

You have the option to not participate in this study.

**What about privacy and confidentiality?**

Only the primary researcher for this study will know that you are a research subject. Otherwise information about you will only be disclosed to others with your written permission, or if necessary to protect your rights or welfare or if required by law.

When the results of the research are published or discussed in conferences, no information will be included that would reveal your identity.

Several steps are being taken to ensure your privacy and confidentiality of the information you provide.

- Although the interviews will be audio-taped, only the researchers and the person who transcribes the audio recording will have access to the recording.
- Your name will not be connected to the interview. Only the primary researcher will have access to personal information such as your name, telephone number, and your address.
- No identifiable information will be included in any report developed from your individual interview.
- All interview information and audio recordings will be stored in locked file cabinet up to 5 months after the last interview.
- All computerized information will be stored on a password protected desktop computer.
- Grandmothers have the right to not answer a question and the right to withdrawal from the study.
- Audio recordings will be destroyed once the researchers have checked the accuracy of the transcribed interviews.

**Will I be reimbursed for any of my expenses or paid for my participation in this research?**

At the end of the first meeting, you will receive one $20 VISA gift card. Four grandmothers will be randomly selected to review the study findings. The four randomly selected grandmothers will receive an additional $15 VISA gift card.
Can I withdraw or be removed from the study?

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time.

The researchers also have the right to stop your participation in this study without your consent if they believe it is in your best interests.

In the event you withdraw or are asked to leave the study, you will still be compensated as described above.

Who should I contact if I have questions?

Contact the researchers Jen’nea Sumo, MS, RN at 312-206-6946 or jsumo2@uic.edu

Barbara Dancy, PhD, RN, FAAN at 312-996-9168 or bdancy@uic.edu

- if you have any questions about this study or your part in it,
- if you have questions, concerns or complaints about the research.

What are my rights as a research subject?

If you feel you have not been treated according to the descriptions in this form, or if you have any questions about your rights as a research subject, including questions, concerns, complaints, or to offer input, you may call the Office for the Protection of Research Subjects (OPRS) at 312-996-1711 or 1-866-789-6215 (toll-free) or e-mail OPRS at uicirb@uic.edu.

Remember:

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University. If you decide to participate, you are free to withdraw at any time without affecting that relationship.
**Signature of Subject**

I have read (or someone has read to me) the above information. I have been given an opportunity to ask questions and my questions have been answered to my satisfaction. I agree to participate in this research. I was given a copy of this signed and dated form.

_____________________________  __________
Signature                  Date

_____________________________
Printed Name

_____________________________  __________
Signature of Person Obtaining Consent  Date (must be same as subject’s)

_____________________________
Printed Name of Person Obtaining Consent
Appendix F: Flyer

African American Grandmothers: Rationale for Support They Give to Their Parenting Adolescents

Study Participants Needed!!!

The purpose of this study is to learn from grandmothers’ their reasons for the support they give to their parenting adolescents.

Eligibility criteria:

- Must be African American/Black
- Must be mother or mother figure of adolescent mother or adolescent father
- Adolescent parent must be between the ages of 14 and 19.
- Child born to adolescent parent is between the ages of newborn to 1 year
- Income is less than $25,000 per year
- Reside within Austin Community (zip codes: 60644, 60651, 60635, 60639, or 60707)

Grandmothers will be asked to meet with the researcher one time to complete questionnaire about themselves and participate in an interview lasting approximately 60 minutes. The first meeting should last approximately 90 minutes. Four grandmothers will be randomly selected to meet with the researcher a second time. The second meeting should last about 30 minutes. Grandmothers will receive a $20 VISA gift card for the first interview and $15 VISA gift card for the second interview.

To learn more about this study contact:

Jen’nea Sumo, MS, RN
University of Illinois at Chicago
312-206-6946
jsumo2@uic.edu
Appendix G

Paternal Grandmother Flyer

We Want to Hear From You

- Are you African American/Black
- Is your son a teenage father (14-19 years old)?
- Do you live in the Austin Community?
  (zip codes: 60644, 60651, 60639, 60635, 60607)

Call Jen’nea Sumo at (312) 206-6946, to see if you qualify to participate in this research study.

Participants are eligible for cash reimbursements.

Principal Investigator: Jen’nea Sumo
University of Illinois at Chicago
312-206-6946
Appendix H

Face-to-Face Recruitment Script

Hello, my name is Jen’nea Sumo. I am a PhD student at the University of Illinois at Chicago. I lived in the Austin Community, and now I currently work in the Austin Community. I am recruiting research participants for my dissertation. I am conducting a study with African American mothers who have an adolescent child who is a parent.

I am trying to learn more about the support grandmothers give to their adolescent children who are parents. Specifically, I want to learn more about grandmothers’ reasoning for the kind and amount of support they give to their child who is an adolescent parent. Thank you for taking the time to speak with me. Can I ask you a few questions?

If yes, go to section 1. If no, go to section 2.

- Are you a mother of an adolescent parent? IF yes go to section 1. If no go to section the next question.
- Do you know anyone who is a mother of an adolescent parent? If yes go to section 2. If no go to section 2.

Section 1:

A. Please answer the following seven questions to determine your eligibility for this study.

1) What race are you? If the respondent answers African American or Black, go to question 2. If yes, then go to section C.

2) Do you have a daughter or son who is an adolescent parent? If yes, then go to question 3. If no then go to section C.

3) How old is your daughter/son who is an adolescent parent? If the respondent answers 14, 15, 16, 17, 18, or 19, go to question 4. If the respondent answers with different age than 14-19, go to section C.

4) How old is your grandchild born to your adolescent daughter or son? If the respondent answers newborn to 1 year old go to question 5. If the respondent answers with different age than newborn to 1 year old, go to section C.

5) Is your income less than $25,000 a year? If yes, then go to question 6. If no, then go to section C.
6) What zip code do you reside in? If answer with zip code 60644, 60651, 60635, 60639, or 60707 go to section B. If answer with zip code other than 60644, 60651, 60635, 60639, or 60707 go to section C.

If respondent is eligible for participation, go to section B.

If respondent is not eligible for participation, skip to section C.

**B. Eligible Respondent**

You are eligible to participate in this study. If you choose to participate in this study, you will be asked to complete a demographic questionnaire that asks questions such as: what is your marital status, how many children do you have, and what is the age of your children who are adolescent parents. After you complete the demographic questionnaire, you will be asked questions to explore what kind and amount of support you give to your child who is an adolescent parent and your rationale for providing such support.

To the best of our knowledge, participating in this research has no more risk of harm than you would experience in everyday life. You may not directly benefit from participation in this research. This study is designed to learn more about reasoning behind support grandmothers give to parenting adolescents. The study results may be used to help others in the future.

Every grandmother who participates in this study is being asked to meet with researcher one time. Four grandmothers will be asked to meet with the researcher a second time. The first meeting will take about 1 hour. The second meeting will take about 30 minutes.

Are you willing to participate in this research study?

If Yes: Schedule meeting.

If No: Go to section 2.

**C. Ineligible Respondent**

Thank you for your time. Unfortunately, based on your responses to the previous questions, you are not eligible to take part in this study. Thank you again, and I apologize for any inconvenience you may have experienced due to the time spent on the phone today.

**Section 2:**

Thank you. Here is a copy of my flyer. It contains information about my study. Please feel free to share information about this study with others. Thank you so much for your time.
Appendix I

Descriptive Summaries

Maternal Grandmother Summary

Most maternal grandmothers provided babysitting, advice, and financial support.

- Babysitting was provided for the following reasons:
  - grandmothers received energy from their grandchildren,
  - grandmothers believed the adolescent mother was putting forth an effort, and
  - grandmothers did not trust others to care for their grandchildren.

- Advice was provided for the following reasons:
  - adolescent mothers were young;
  - grandmothers believed that without their provision of advice, the adolescent mothers would not have the necessary information to be a parent;
  - grandmothers own personal past experiences; and
  - grandmothers were concerned about the welfare of the adolescent mothers.

- Financial support was provided for the following reasons:
  - the adolescent mothers had no other means of income, and
  - grandmothers feared that the adolescent mothers would seek prohibited means for obtaining financial support.

- Some maternal grandmothers reported that their past experiences, current life happenings, neighborhood, and religion influenced the support they provided to the adolescent mothers.

- Some maternal grandmothers reported that the adolescent mothers’ personalities, behavior, attitude, and decision making ability influenced the support they provided to the adolescent mothers.

- Some maternal grandmothers identified the church, clinic/hospital, food pantry, internet, Parent-Teacher Association, Public Aid, and WIC as community resources.
Paternal Grandmother Summary

Most paternal grandmothers provided the following support: babysitting and shopping.

- The paternal grandmothers babysat for the following reasons:
  - babysitting their grandchildren gave them energy,
  - the adolescent parents were putting forth an effort to continue school and to be a parent,
  - a desire to spend time with their grandchildren,
  - a desired to encourage and guide the adolescent father,
  - personal experience of lack of help in the past,
  - a belief that there is limited availability of parental and grandparental support for the adolescent father, and
  - acknowledge the needs of their grandchild’s mother.

- The paternal grandmothers reported shopping for the following reasons:
  - desired to help the adolescent fathers, and
  - believe shopping is an expected function of a grandmother.

- Some paternal grandmothers reported that their past experiences, current life happenings, neighborhood, and religion influenced the support they provided to the adolescent father.

- Some paternal grandmothers reported that the adolescent father’s personalities, behaviors, and attitudes influenced the support they provided to the adolescent father.

- Some paternal grandmothers identified church, internet access, career center, and karate class as a resource in their community.
VITA

Jen’nea Sumo

EDUCATION

UNIVERSITY OF ILLINOIS AT CHICAGO, Chicago, Illinois

Doctorate of Philosophy in Nursing, Dissertation defended November 2012, Conferred Spring 2013

DEPAUL UNIVERSITY, Chicago, Illinois

Master of Science in Nursing, 2006

LANGSTON UNIVERSITY, Langston, Oklahoma

Bachelor of Arts in Psychology, 2003

JOLIET JUNIOR COLLEGE, Romeoville, Illinois

Associates of Arts in Liberal Arts and Sciences, 2000

LICENSURE & CERTIFICATION

- Registered Nurse, State of Illinois, Active
- Certified in Basic Life Support, Current
- Qualified Support Professional, Current
PROFESSIONAL ACADEMIC EXPERIENCE

DAE YANG COLLEGE OF NURSING, Kamazu, Malawi 2012

Seminar Instructor
  • Presented lecture on global health

KAMUZU COLLEGE OF NURSING, Kamazu, Malawi 2012

Seminar Instructor
  • Presented lecture on global health
  • Advised undergraduate students on individual research projects

DEPAUL UNIVERSITY, Chicago, Illinois 2011

Adjunct Instructor
  • Provided clinical and lab instruction to Master’s Entry to RN students

BENEDICTINE UNIVERSITY, Lisle, Illinois 2010 - 2011

Adjunct Instructor
  • Provided instruction to RN/BSN completion students in Nursing Research

WORK EXPERIENCE

Community Mental Health Nurse/Administrator, Chicago, IL
2007 - Present
  • Direct and manage Nursing Department
  • Provide orientation and continual training to Direct Support Persons
  • Development and implementation of quality assurance practices
  • Perform comprehensive nursing assessments (including mental status examinations)
  • Monitor clienteles’ treatment regime
  • Assist with day to day operations of Nursing Department
  • Prepare documents to maintain compliance with the Illinois Department of Human Services regulations
  • Effectively communicate with other members of healthcare team, families, and communities to provide optimal care for clientele.
Medical Detox Nurse, HayMarket Center, Chicago, IL.
2007-2008
- In-depth assessment of medical, emotional, and social needs of Haymarket Center’s clientele.
- Utilized substance withdrawal assessment tools to evaluate medical condition
- Administered and monitored clients’ treatment regime
- Coordinated clients’ discharge continuum of care

RN Nurse Trainer, Chicago, IL
2008 - Present
- Instruction and evaluation of Direct Support Persons regarding interventional competencies related to: Medication Concepts; Classifications and Body Systems; Administration Techniques; Medication Errors

Home Health Nurse, Professional Home Health Care, River Forest, IL.
2009
- Provided in-depth assessment of environment and health status of clientele
- Provided medical and mental health education to clientele
- Utilized interpersonal skills to collaborate with health care team and clients’ families to provide optimal care for each client

Unit Secretary, Children’s Memorial Hospital, Chicago, IL.
2004-2007
- Assisted in maintaining unit statistics and patient charges within the Pulmonary/Allergy Transitional Care Unit.
- Served as a concierge for the unit: greeting all individuals in a courteous and professional manner, answering telephone calls, taking messages and routing calls to the appropriate individual/department, and receiving patient/family requests and directing requests to appropriate person for follow up.
UNIVERSITY SERVICE

- Co-Chair, Urban Health Program CAC student advisory council, University of Illinois at Chicago, IL. 2011
- Co-Founder/Interim President, Urban Health Program College of Nursing Student Association (UCONSA), University of Illinois at Chicago, IL. 2010-present
- College of Nursing Graduate Student Representative, Urban Health Program CAC student advisory council, University of Illinois at Chicago, Chicago, IL. 2009-2010
- Graduate Student Representative, Diversity Strategic Thinking Planning Committee, University of Illinois at Chicago, Chicago, IL. 2009-present

RECOGNITION, AWARDS, & HONORS

- Urban Health Program’s College of Nursing Student Leadership Award, 2012
- Chancellor’s Student Service Award, 2012
- Dr. Beverly McElmurry Scholarship, 2011
- Van Doren Family Scholarship, 2010-2011
- Helen Grace Diversity Award, 2009
- Sigma Theta Tau International Honor Society for Nursing, 2006
- Summa Cum Laude, Langston University, 2003
- Alpha Chi National Honor Society, 2003
- Beta Kappa Chi National Science Honor Society, 2003
- President’s Honor Roll, Langston University, 2003
- Ranked Highest in Major, Langston University, 2003
- Who’s Who Among Colleges and Universities Academic Excellent Award, 2003
- Phi Theta Kappa Junior College Honor Society, 2000

GRANTS & FELLOWSHIPS

- U.S. Department of Education Graduate Assistance in Areas of National Need (GAANN), 2007-2012

PROFESSIONAL MEMBERSHIPS

- National Black Nurses Association, 2011
- National League of Nursing, 2011
- Sigma Theta Tau Nursing Honor Society, 2010
- Midwest Nursing Research Society, 2010
- Society of Research on Adolescence, 2010
PRESENTATIONS

2011 African American Grandmothers: Rationale for Type and Amount of Support: Preliminary Findings (Advisor: Dr. Barbara Dancy)

Poster Presentation

Annual Biomedical Research Conference for Minority Students

St. Louis, Missouri

2009 Factors Affecting Parenting Quality of African American Adolescent Mothers: A Literature Review (Advisor: Dr. Constance Dallas)

Poster Presentation

Midwest Nursing Research Society Conference

Minneapolis, Minnesota

2007 Perception and Experience of Social Support for Pediatric Nurses who are Mothers (Advisor: Dr. Julie Donalek)

Oral Presentation

Children’s Memorial Hospital (Research Committee)

Chicago, Illinois

2006 Perception and Experience of Social Support for Pediatric Nurses who are Mothers (Advisor: Dr. Julie Donalek)

Oral and Power Point Presentation

DePaul University (Research Day)

Chicago, Illinois
2002 Bacillus subtilis and its Interaction with Celebrex, Ibuprofen, and Aspirin

Biomedical Research Infrastructure Network (BRIN) Project
Poster Presentation
University of Central Oklahoma Research Day
Edmond, Oklahoma

PANEL PARTICIPATION

2011 Annual Urban Health Program Cross College Orientation
College of Nursing Panelist

University of Illinois at Chicago
Chicago, Illinois

2011 Round Table Discussion with U.S. Secretary of Health and Human Services
College of Nursing Panelist

University of Illinois at Chicago
Chicago, Illinois