

## Effects of Grandparenting and Emotional Attachments on the Emotional and Behavioral Disorder Symptoms of Grandchildren

*The effects of grandparenting involvement and emotional attachments on emotional and behavioral development among adolescents were explored through the use of a UK cross-sectional national data of 1,566 adolescents aged eleven to sixteen years old receiving some form of grandparenting. A correlation and logistic regression analyses yielded results that supported the positive effects of grandparenting on the emotional and behavioral disorder symptoms of adolescents. The results indicate that most selected socio-demographic, grandparenting involvement, and the emotional attachment variables of grandchildren influenced the likelihood of increasing or decreasing emotional disorder symptoms among adolescents. However, no support was found for perceiving emotional attachments with grandparents as a predictor of behavioral disorder symptoms among youth, whereas socio-demographic and grandparenting involvement variables showed significant impacts on behavioral disorder symptoms. The findings highlight the importance of a systematic approach about the socio-demographic characteristics, levels of grandparenting, and emotional attachment levels with grandparents to understand youth cared for by grandparents that experience emotional and/or behavioral disorder symptoms, when intervention or prevention programs are considered.*

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With the increase in overall life expectancy due to health and welfare improvements, grandparents experience their roles for longer period. According to U.K. data, there are 14 million grandparents, 82% of children receive some care from grandparents (The Grandparents Association, 2009). Along with the life expectancy of the aged, the consequence of changed family structures from divorce, separation, remarriage, and single parents out of wedlock (Cho & Kang, 2009; Chung, 2008; Lundström, 2005) result in an increased likelihood of more years of shared lives between grandparents and grandchildren. The escalation in the rate of dual income families also makes it difficult for families to rely solely on spouses as care providers. These circumstances require the need for shared engagement by grandparents in parenting roles. Therefore, it is hypothesized that grandparents are becoming one of the most important resources of care for youth whose parents are especially experiencing marital transitions and/or are both employed.

From the traditional viewpoint, family plays an important role for the socialization in childhood, providing the norms or expectations for desirable social behavior. In families where parents rely on grandparents to visit children frequently and to take care of them, grandchildren influence grandchildren in many ways (Ando, 2005; Ross & Aday, 2006). Especially, for adolescent making the transition into

adulthood (involving significant physical, cognitive, and behavioral changes) the levels of grandparenting and emotional attachments could be influential on emotional and/or behavioral development. Campbell and Miles (2008) found that the relationship between grandparents and grandchildren experience various problems when their grandchildren reach in the period of adolescence. It is understandable that if grandparents are in poor health and become less responsive to the needs of adolescents, the relationship context may affect the emotional or behavioral characteristics of adolescents negatively. The development of emotional and behavioral functioning of adolescents remains limited despite the central role of grandparents on the emotional and behavioral development of youth (where grandparenting is involved) and information about how the level of grandparenting and emotional attachments influence children.

Although the number of adolescents cared by grandparents has been gradually growing recently (Lugaila & Overturf, 2004) researchers in Western countries (Dellmann-Jenkins *et al.*, 2002; Douglas & Ferguson, 2003; Drew & Silverstein, 2004; Gerard *et al.*, 2006) and in Korea (Cho, 2006; Jung *et al.*, 2005; Kwon, 2000) have continued to study 'grandparents roles and well-being' or 'the well-being of very young aged grandchildren.' Research examining how grandchildren are influenced by the personal well-being of grandparents, parenting involvement by grandparents, and by emotional attachments to grandparents has been neglected in Korea. Along with the personal situation and levels of grandparents, the emotional attachments of grandchildren from grandparenting may be essential to developing effective programs to help children at increased risk for emotional and behavioral problems. This is because the emotional or behavioral interactions with grandparents could differ according to the emotional attachments of grandchildren, subsequently leading to desirable or undesirable behaviors. This approach distinguishes the factors that contribute to emotional or behavioral problems in the sequence of desirable or undesirable grandparenting behavior. The findings of this study are important for Korean grandparents struggling change the behavior

problems of their grandchildren. Frustrated clinical professionals responding to grandparent's advocacy groups in Korea experience inadequate methods to cope with those practical situations and could benefit from the findings of this study.

Care involvement by grandparents and the emotional attachments of grandchildren about grandparenting as well as the socio-demographic characteristics of grandparents in the changing roles of grandparents within families may impact the emotional and behavioral disorder symptoms of children. It is estimated that the growing numbers of grandparents and the evaluation of grandparenting is one of the social trends that affect the emotional attachments of grandchildren from grandparenting. Although emotional attachments of grandchildren could be another important factor for the successive grandparenting, however there is limited attention about how they perceive grandparenting.

The following framework guides this study to understand the differential effects of the socio-demographics of the involvement of grandparents in parenting and the emotional attachments of grandchildren from grandparenting: the socio-demographic perspective (Ando, 2005; Kemp, 2007; Ross & Aday, 2006; Spence *et al.*, 2004), involvement perspective of grandparents (Landry-Meyer & Newman, 2004; Lever & Wilson, 2005; Orb & Davey, 2005), and the emotional attachment of grandchildren to grandparenting (Fuller-Thomson & Minkler, 2000; Goodman, 2007; Jung & Honig, 2000; Kim *et al.*, 2005; Musil, 2000; Schwarz *et al.*, 2005). The socio-demographic perspective focuses on gender, age, work status, education level, and health condition. Involvement and emotional attachments cover various concepts about parental involvement and emotional attachments, this study will also address the following issues: (a) caring and participation of grandparents with the influence the activities of grandchildren; (b) closeness to grandparents and happiness influences.

#### *The Socio-demographic Characteristics of Grandparents*

Socio-demographic variables of grandparents on the care for grandchildren indicate that grandparenting

is an increasing phenomenon. According to the current study, it is estimated that 95.5% of older people have grandchildren, approximately 52.8% see their grandchildren every 2 weeks and about 23.8% see their grandchildren every day (Table 1) in conducting some form of parenting within families.

Reviews of gender impact studies between grandparents report that grandmothers appear to have dominant opportunities to influence the emotional and behavioral disorder symptoms among grandchildren; grandmothers tend to spend more time in shared parenting activities, while grandfathers are typically involved in child caring (Ando, 2005; Landry-Meyer, 2004; Thomas, 1986). Smith *et al.* (2008) suggest that it is important for professionals to monitor the levels of the situational well-being of grandmothers, because many custodial grandmothers show ineffective parenting when they have depression and anxiety as a result of stressful situations. In relation with this finding, Ross and Aday (2006) also found that grandmothers who serve as caregivers, tend to experience emotional and physical health issues caused by care giving responsibilities or preexisting health problems, leading to the cycle of a deteriorated grandparent-grandchild relationship and a behavioral deterioration of the care for grandchildren. Thomas (1994) suggested that the parenting by grandfathers tended to have a larger impact on the education of grandchildren because a paternal education model better trained children.

It is further reported that the majority of grandparent caregivers are over age 50 and tend to have less formal education when compared to those serving as caregivers such as other relatives and grandparents (Kemp, 2007). The undesirable behavior functioning and stress of grandchild are likely to be linked to inadequate grandparenting (Pruchno & McKenney, 2002). It is assumed (when compared with older aged and less educated people) that younger grandparents are expected to show better responses to the questions of grandchildren through explicit communication, in addition well-educated grandparents may be able to correspond appropriately to the intra-cultural variation of interaction skills in the learning and development of children.

The study by Uhlenberg and Hammill (1998) reported that although there was increasing labor force participation among the elderly, that grandparent caregivers still impact the emotional or behavioral well-being by visiting and taking care of grandchildren.

#### *The Involvement Levels of Grandparents in Parenting*

Korean society has experienced rapid parenting level involvement and family structure changes such as, the increased participation of married women in the labor force, an escalation in the rate of separation and divorce, and the rapid growth of single parents out of wedlock (Amato, 2008). Under these circumstances, grandparents with longer life spans and healthier ageing are more likely to find themselves in the position of full-time caregivers for grandchildren or providing informal care to grandchildren. The amount of time grandparents give grandchildren is an opportunity to establish close emotional relationships (Gerard *et al.*, 2006), leading to increased emotional stability among grandchildren. If grandchildren perceive a sense of inappropriate grandparenting, however, the involvement by grandparents in parenting may influence the increased likelihood of maladaptive emotional and/or behavioral patterns among grandchildren.

It is also important to remember that older grandparents generally, have health related issues, are less physically capable, and are cognitively less active than typical parents. As a result, grandparents may be unable to provide appropriate parenting which subsequently raises negative interactions and relationship difficulties.

#### *The Emotional Attachment Grandchildren with Grandparents*

Grandparents are naturally close to the children they are raising (Goodman, 2007). Close relationships between grandparents and grandchildren are more easily facilitated when grandparents play a clear role that allows them to feel more comfortable. Attachment theory addresses the interactions in emotional and behavioral dynamics (Ainsworth & Bowlby, 1991). The quality of emotional attachment relationships can influence the later social and

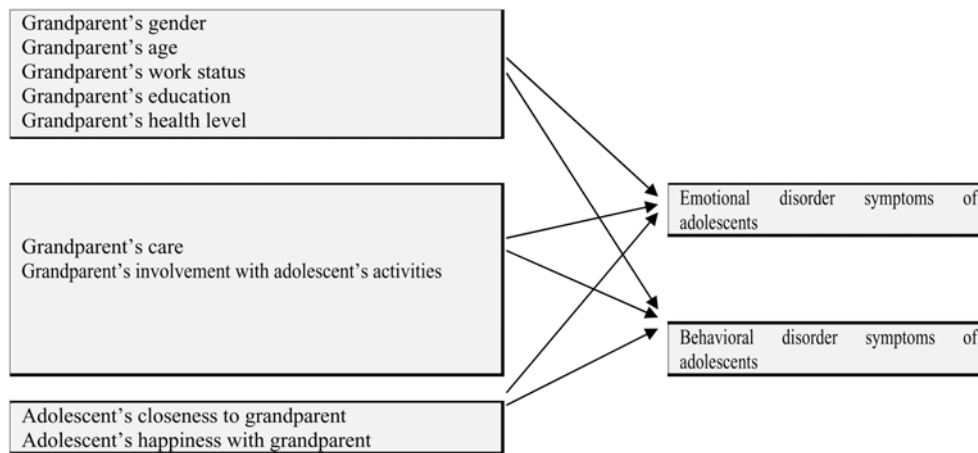


Figure 1. *Effects of Socio-demographic, Parenting Involvement, and Emotional Attachments on Emotional and Behavioral Disorder Symptoms among Adolescents.*

emotional development of individuals (Bohlin *et al.*, 2000).

Grandparents experience unique problems with grandchildren. Research findings (Jung & Honig, 2000; Kim *et al.*, 2005; Schwarz *et al.*, 2005) that explore the relationship between grandparents and grandchildren indicate that relation problems may manifest in various ways and relationships may suffer as grandparents try to force traditional parenting roles on grandchildren. The grandparent-grandchild relationship problems may also arise as grandparents show inadequate responses because of psychological stress (Gerard *et al.*, 2006), poor health (Fuller-Thomson & Minkler, 2000; Musil, 2000), or the behavioral problems of grandchildren (Harrison *et al.*, 2000).

Based on the above literature review, this study investigates the following research objectives as illustrated in Figure 1:

1. Whether the socio-demographic variables of grandparents influence the emotional and behavioral disorder symptoms of grandchildren.
2. Whether the parenting involvement by grandparents such as care and doing things together such as the favorite activities of grandchildren influence the emotional and behavioral disorder symptoms of grandchildren.

3. Whether the perceptions of grandchildren on the emotional attachment with grandparents (such as closeness and feeling happiness with grandparents) influence the emotional and behavioral disorder symptoms of grandchildren.

## RESEARCH METHODS

### *Data and Procedure*

This study used UK national data from the survey 'Involved Grandparenting and Child Well-Being 2007 (Buchanan & Flouri, 2008)'. A total of 1,566 adolescents aged 11 to 16 participated in the study in England and Wales. Participants were recruited from 90 schools and asked to complete a survey organized and supervised by the survey company GfK NOP. With critical views on changing family patterns, growing numbers of dual-worker households, and broken families; the subsequent increased roles of grandparents indicated in 'Involved Grandparenting and Child Well-Being, 2007' initiated the first national representative survey of the views of youth in England and Wales on the relationship with grandparents. This study involved three stages: (1) Stage 1: a survey in 90 schools around England and Wales organized by the survey company (2) Stage 2: analysis of this anonymized data once it has been

Table 1. Characteristics of Research Participants

Variables	N	%	
Grandparent's Gender	Female	1,243	79.4
	Male	323	20.6
Grandparent's Age	Younger than 50	25	1.3
	In their 50's	258	16.5
	In their 60's	720	46.2
	Over 70	563	36.0
Grandparent's Work Status	Yes Part Time	201	12.8
	Yes Full Time	115	7.3
	No	1,250	79.9
Grandparent's Health Status	Very Poor	231	14.8
	Poor	427	27.2
	Good	574	36.7
Numbers of Grandchildren	Very Good	334	21.3
	1	140	8.9
	2 or 3	532	33.9
Frequency of Contact	4 or More	894	57.2
	Never	71	4.5
	Several Times a Year	593	37.9
Student's Gender	Twice a Week	527	52.8
	Daily	375	23.8
	Female	751	49.0
Students' SAT English Results at Age 11	Male	782	51.0
	Grade 1	1	.1
	Grade 3	50	4.9
	Grade 4	435	42.4
	Grade 5	519	50.6
	Grade 6	20	2.0
Students' SAT Math Results at Age 11	Grade 1	2	.2
	Grade 2	3	.3
	Grade 3	66	6.4
	Grade 4	389	37.8
	Grade 5	545	52.9
	Grade 6	25	2.4
Students' SAT English Results at Age 14	Grade 3	2	.3
	Grade 4	20	3.2
	Grade 5	113	18.2
	Grade 6	124	19.9
Students' SAT Math Results at Age 14	Grade 7	62	10.0
	Grade 3	5	.8
	Grade 4	30	4.9
	Grade 5	65	10.5
	Grade 6	117	19.0
	Grade 7	125	20.3
Adolescent's Average Age = 13.38, SD = 1.40			

processed by the survey company and submitted to Oxford, and (3) Stage 3: 40 minutes in depth interviews undertaken by researchers at Oxford University. 'Involved Grandparenting and Child Well-Being, 2007' was used for this study, because it was a nationally representative survey and included appropriate information about grandparenting and the well-being of grandchildren; these factors have potential implications for Korean society.

Out of the total 1,566 grandparents, 323 were male caregivers and 1,243 were female caregivers (grandparents over 70 were 563, grandparents in their 60's were 720, and grandparents in their 50's were 258). The mean age of adolescents was 13.38 years (SD = 1.40) (Table 1). Table 1 indicates that more than 23.8% of the grandparents have daily contact with grandchildren, 52.8% twice a week, and more than 37.9% have contact with grandchildren several times a year. Of the adolescents, 49% were female, and 51% were male. It was reported that most students had grade 4 or 5 on SAT English and Mathematics scores at age 11 and similar results were found on SAT English or Mathematics scores at age 14.

#### Measurement

*Emotional and behavioral disorder symptoms*<sup>2</sup> Emotional and behavioral disorder symptoms were assessed using the Strengths and Difficulties Questionnaire (SDQ) developed by Goodman (1997). The SDQ is a validated and reliable instrument used nationally in Child and Adolescent Mental Health Services (CAMHS) in the United Kingdom. The SDQ is a brief behavior screening questionnaire for self-completion by adolescents between 11 and 16 years of age. The SDQ contains 25 items and 5 clinical subscales: emotional disorder symptoms (5 items), behavioral problems (5 items), hyperactivity/inattention (5 items), peer relationship problems (5 items), and pro-social behavior (5 items) generating problematic scores. The items on overall emotional and behavioral impairments are summarized to generate an impact score that range from 0 to 10.

<sup>2</sup>Symptoms mean indications that a person has a condition of emotional or behavioral problems that require clinical help.

Table 2. Variables Used in this Study and Measurement Methods

Category	Variable	Measurement
Socio-demographic Variables	Grandparent's Gender	Female = 0, Male = 1
	Grandparent's Age	
	Grandparent's Work Status	0 = Not Working, 1 = Part Time, 2 = Full Time
Care, Involvement Variables	Grandparent's Health Level	0 = Very Poor, 1 = Poor, 2 = Good, 3 = Very Good
	Looking after Children	0 = Never, 1 = Several Times A Year, 2 = Once A Week, 3 = Every Day
Emotional Attachment Variables	Involvement with Things that Grandchildren Like	0 = Never, 1 = Occasionally, 2 = Usually
	Closeness to Grandparents Compared Other Grandchildren	Compared to Other Grandchildren, (Including Your Brother And Sister), How Close are You to Your Grandparent?: 0 = Less Close than Some or Most, 1 = About the Same, 2 = Closer than Some, 3 = Close than Most
	Happiness with Grandparents	How Happy are You with Your Relationship with your Grandparent? 0 = Very Unhappy, 1 = Fairly Unhappy, 2 = Fairly Happy, 3 = Very Happy

Scoring 5 and higher in an emotional symptoms subscale (4 and higher in conduct problems) is considered in the clinical abnormal range. The range of Test-retest value was 0.70 to 0.85. Cronbach's alpha values were 0.67-0.78 in emotional symptoms and behavioral problem subscales.

Other measures (Socio-demographic, care/involvement, and emotional attachment variables) included in the 'Involved Grandparenting and Child Well-Being 2007' were relevant to this study and were operationalized as described in Table 2.

#### Analysis

To test all the hypotheses, using SPSS 12.0, the current study first computed a Spearman correlation coefficient to explore the correlation between the selected variables and emotional or behavioral disorder symptoms. The logistic regression analysis was conducted to examine the effect of the selected variables on the emotional and behavioral disorder symptoms among adolescents because the dependent variables have dichotomous variables.

## RESULTS

### Correlations among Study Variables

Co-relational analyses were conducted and the results summarized in Table 3. The correlation between selected variables was significant for emotional and behavioral disorder symptoms

among adolescents that support the essential hypothesis and indicate that further tests of this effect could proceed.

Gender, grandparent's work status, grandparent's health, looking after grandchildren, involvement with grandchildren's things, and happiness were related to the emotional disorder symptoms of adolescents. The work status of grandparents had the strongest association with emotional disorder symptoms, followed by, involvement with things, gender, happiness with grandparents, the health of grandparents, and looking after grandchildren.

For behavioral disorder symptoms, gender, the college qualification of grandparents, involvement with things that grandchildren like, and satisfaction with grandparents were significant. Happiness with grandparents had the strongest association with behavioral disorder symptoms, followed by gender, involvement with things grandchildren like, and the college qualifications of parents and grandparents.

### Regression Analysis Predicting Emotional and Behavioral Disorder Symptoms among Adolescents

A regression analysis was first performed to examine the relative importance of each of the variables and to determine the amount of explained variance associated emotional disorder symptoms among adolescents. As shown in Table 4, the two variables accounted for a significant amount of the variance associated with emotional disorder symptoms among adolescents,  $R^2 = .128$ ,  $F = 5.583$ ,  $p < .001$ .

Table 3. Means and Correlations between Study Variables and Emotional Behavioral Disorder Symptoms (N = 1,566)

Variables	M	SD	Emotional Disorder Symptoms	Behavioral Disorder Symptoms
Gender	.51	.50	-.16**	.17**
Age	13.97	1.4	.04	-.05
Grandparent's Work Status	.34	.64	.21**	.05
Grandparent's College Qualifications	.38	.48	.07	.13**
Grandparent's Health	3.15	.72	-.14**	-.04
Looking after Grandchildren	1.06	.89	.13*	.035
Involvement with Things that Grandchildren Like	1.92	.74	-.18**	-.14*
Closeness to Grandparents Compared to other Grandchildren	2.59	1.00	.19	-.02
Satisfaction with Grandparents	3.57	.75	-.14**	-.19**

\* $p < .05$ , \*\* $p < .01$ 

Table 4. Regression Analysis Predicting Emotional Disorder Symptoms among Adolescents (N = 1,566)

Category	Variables	B	S. E	$\beta$	$t$	$P$
Socio-demographic Variables	Grandparent's Gender	-1.344	.248	-.276	-5.419	.000
	Grandparent's Age	-.012	.088	-.007	-.138	.890
	Grandparent's Work Status	.115	.160	.038	.717	.474
	Grandparent's College Qualifications	.262	.268	.052	.979	.328
	Grandparent's Health	-.213	.179	-.066	-1.190	.235
Care, Involvement Variables	Looking after Grandchildren	-.257	.153	-.094	-1.680	.094
	Involvement with Things that Grandchildren Like	-.199	.197	-.060	-1.011	.313
Emotional Attachment Variables	Closeness to Grandparents Compared to other Grandchildren	.252	.134	.107	1.889	.060
	Satisfaction with Grandparents	-.671	.207	-.187	-3.238	.001

\*\* $p < .01$ , \*\*\* $p < .001$ 

Table 5. Regression Analysis Predicting Behavioral Disorder Symptoms among Adolescents (N = 1,566)

		B	S. E	$\beta$	$t$	$P$
Socio-demographic Variables	Grandparent's Gender	.615	.208	.153	2.949	.003
	Grandparent's Age	-.010	.074	-.007	-.130	.896
	Grandparent's Work Status	.014	.134	.006	.104	.917
	Grandparent's College Qualifications	.556	.225	.134	2.470	.014
	Grandparent's Health	.045	.150	.017	.297	.767
Care, Involvement Variables	Looking after Grandchildren	-.338	.128	-.150	-2.631	.009
	Involvement with Things that Grandchildren Like	-.443	.166	-.162	-2.673	.008
Emotional Attachment Variables	Closeness to Grandparents Compared to other Grandchildren	.023	.112	.012	.202	.840
	Satisfaction with Grandparents	-.385	.174	-.130	-2.213	.028

\* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$ 

Only gender approached significance in the three measures of socio-demographic variables,  $\beta = -.276$ ,

$p < .001$ . The perceived happiness with grandparents contributed a unique variance associated with

emotional disorder symptoms,  $\beta = -.187, p < .001$ .

Additional regression analysis was conducted to investigate the effects of grandparenting on behavioral disorder symptoms among adolescents as presented in Table 5. The five variables accounted for a significant amount of variance associated with behavioral disorder symptoms,  $R^2 = .096, F = 4.027, p < .001$ . Of the socio-demographic variables, the gender of grandparents ( $\beta = .153, p < .001$ ) and the college qualifications of grandparents ( $\beta = -.134, p < .01$ ) were predictive of behavior disorders. Both factors approached significance in the involvement variables; looking after grandchildren,  $\beta = -.150, p < .01$  and involvement with things that grandchildren like,  $\beta = -.162, p < .01$ . From emotional attachment related variables, only perceived happiness with grandparents approached significance,  $\beta = -.130, p < .05$ .

## DISCUSSION

The current study highlights the crucial role of grandparenting in the development of emotional and behavioral symptoms among adolescents. The results illustrate the positive impacts on the likelihood of decreasing emotional and behavioral problems among youth. However, the findings emphasize the importance of a systematic approach to socio-demographic characteristics and the level of the emotional attachment with grandparents to understand youth who are being cared for by grandparents and experience emotional and/or behavioral disorder symptoms, when intervention or prevention programs are considered.

The findings provide an important preliminary understanding of the personal situations of grandparents, parental involvement, and the emotional attachments of grandchild for the intervention or preventive service development for youth who experience emotional and behavioral disorder symptoms and insight into how to better support their needs.

First, it is important that support services and resources information appropriate to the personal socio-demographic characteristics of grandparents,

grandparenting involvement levels, and the emotional attachment of grandchild with care giving. Grandparents can facilitate the parenting roles of grandparents for youth who are experience emotional and/or behavioral disorder symptoms.

The regression analysis indicates that gender is directly linked to emotional or behavioral development among youth. Grandmothers influence positive emotional adaptation, whereas grandfathers influence positive behavioral adaptation among youth. Although Dubas (2001) found that there were no other interactions between kinship status and the gender of grandparents or grandchildren, the current study suggests that grandmothers play an important role in the positive emotional adaptation of youth and grandfathers contribute to the positive behavioral adaption of youth. This may be because grandmothers usually spend more time and have more opportunities to have close relationships that help the emotional well-being among grandchildren than grandfathers do. On the other hand, grandfathers show a better ability to control the behavioral disorder symptoms of youth than grandmothers do, even though they invest less time in their grandchildren than grandmothers. Different effects on the emotional and behavioral disorder symptoms of youth are produced according to the ability and engagement types because gender influences the ability to influence the behavioral disorder symptoms of youth and in the commitment to grandchildren.

Second, the results found that the emotional attachments of grandparents like perceiving happiness with grandparents also mitigated emotional or behavioral disorder symptoms among youth and were similar to the Swedish findings in the relationship between grandparents and grandchildren (Bohlin *et al.*, 2000). The level of parenting and emotional attachment for the grandchild can influence the emotional or behavioral levels and has a role to play in the emotional and behavioral well-being of grandchildren. The finding suggests that effective intervention strategies may need to explore if grandchildren want grandparents to be more or less involved and to help grandparents develop adequate parenting skills when the emotions of grandchildren to grandparents are found to be in a



poor emotional condition.

Third, although there was no evidence for youth on the predictive influence of care involvement on emotional disorder symptoms, the involvement of grandparents in looking after grandchildren demonstrated the impact of decreasing the likelihood of exhibiting behavioral problems among youth. The importance of the involvement by grandparents in helping youth exhibit desirable behaviors (relative to emotional attachment variables) implies that the level of the emotional attachment for behavioral problems is less important in the increase or decrease of the likelihood of behavioral problems. The non-significant relationship between emotional attachments and behavioral disorder symptoms suggest that the development of more positive behaviors through emotional attachments (relative to positive involvement in taking care of youth) is to be a slower process. These findings are in line with the study by Nyland *et al.* (2009) that explains positive involvement as a function of supervision that shapes the behavior of youth. The externalizing behaviors of youth were more sensitive to the availability of supervision, and were influenced by the actual evaluation of adolescents of adequate care involvement. The involvement grandparents may directly contribute to child behavior by serving as a parental role model during the parental involvement time. Grandparenting that included the involvement in care may contribute to positive changes in the problematic behavior of adolescents.

The present findings suggest the need to carefully consider the involvement of grandparents and the relationship between grandparents and adolescents in relation to the emotional and behavior change intervention studies on youth who receive some form of care from grandparents. An opportunity may arise for early and effective interventions when grandparents take responsibility for grandparenting roles with grandchildren, as an intervention focus provides grand-caregivers with practical services to improve personal situations and parenting skills. In practice, Korean professionals who are helping grandparents could also use an understanding of the combination of the level of grandparenting skills and the relationship between

grandparents and adolescents to understand the process of emotional and behavioral disorder symptoms.

Significant research on preventive or intervention programs was based on a context in which parents could be part of intervention or preventive efforts to help youth who have emotional or behavioral disorder symptoms. There are contexts where this theory may not be applicable, such as in working families or single parents who are not available to participate. The issue of whether parents can be regarded as part of those programs is crucial to the development of effective preventive or intervention programs. The possibility of the crucial role of grandparenting on emotional or behavioral disorder symptoms among youth that this study has investigated could be a method for developing an alternative service available for youth with problematic behavior. There is a need to find a more developed pathway to offer specific targets for intervention to decrease emotional or behavioral disorder symptoms and increase the probability that adolescents will engage in desirable health behavior. Future work on the development of preventive and intervention programs should be on the efforts to determine whether grandparenting still works as a significant predictor of emotional and behavioral problems among youth; even when other parenting variables are endorsed. It is also important to clarify the pathways towards the desirable behaviors of adolescents derived from grandparenting.

There are some limitations to this study that require careful considerations in the interpretation of the findings. First, it should be noted that the sample size of grandfathers and grandmothers is different, therefore the gender effects are presumed to reflect the larger sample of grandmothers. Second, two-item indicators of involvement and emotional attachment variables for grandparents were used. Whereas these items have been used in the original study (Buchanan & Flouri, 2008) and approached a clear conceptualization of the constructs of grandparenting, there may be still possibility to prevent the assessment of internal consistency. Third, it should be also noted that available information for more detailed and advanced studies was limited through the use of secondary data.

Lastly, the current study the nature of cross-sectional data may preclude definitive conclusions with regard to causality between the variables. Longitudinal data would be required to examine more substantial inferences concerning the causal relationships between variables in a future study. Fourth, the current study is restricted to student samples in the UK, which might limit generalizability to student populations in other countries. Despite these limitations, the present research indicates that grandparenting can have a significant impact on strengthening the buffering power of youth to decrease of emotional disorder symptoms and preventive roles that help them exhibit desirable behavior in Korea. These findings support the practice to consider of the importance of grandparenting skills and positive relationships between grand caregivers and grandchildren in terms of adolescent emotional and behavioral adjustments in both the UK and Korea. It may be beneficial to target interventions designed to improve emotional and behavioral outcomes among adolescents with grandparents, by engaging grandparents in positive interactions with grandchildren in addition to improvements in positive parenting.

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#### REFERENCES

- Ainsworth, M. D. S., & Bowlby, J. (1991). An ethological approach to personality development. *American Psychologist*, 46, 333-341.
- Amato, P. R. (2008). *Recent Changes in Family Structure: Implications for Children, Adults, and Society*. National Healthy Marriage Resource Center. From [http://www.healthymarriageinfo.org/docs/May08change\\_family\\_structure.pdf](http://www.healthymarriageinfo.org/docs/May08change_family_structure.pdf)
- Ando, K. (2005). Grandparenthood: Crossroads between gender and aging. *International Journal of Japanese Sociology* 14, 32-51.
- Bohlin, G., Hagekull, B., & Rydell, A. M. (2000). Attachment and social functioning: A longitudinal study from infancy to middle childhood. *Social Development*, 9, 24-39.
- Buchanan, A., & Flouri, E. (2008). *Involved Grandparenting and Child Well-Being, 2007* [computer file]. Colchester, Esgender: UK Data Archive [distributor], December 2008. SN: 6075.
- Cho, S., & Kang, K. (2009). Characteristics of living and preferred home environment of dual-income housewives in apartment complexes. *Architecture Institute of Korea*, 25(5), 113-122.
- Choi, H. K. (2006). Social support for grandparent-headed families and its effects on grandparent caregivers' physical and mental health. *Journal of Population Association of Korea*, 29(2), 115-142, 245-246.
- Chung, H. (2008). The relationship between divorce rates and socioeconomic and demographical factor. *Korea Home Economics Association*. 26(1), 51-67.
- Dellmann-Jenkins, M., Blankemeyer, M., & Olesh, M. (2002). Adults in expanded grandparent roles: Considerations for practice, policy, and research. *Educational Gerontology*, 28(3), 219-235.
- Douglas, G., & Ferguson, N. (2003). The role of grandparents in divorced families. *International Journal of Law, Policy and the Family*, 7(1), 41-67.
- Drew, L. M., & Silverstein, M. (2004). Inter-generational role investments of great-grandparents: Consequences for psychological well-being. *Ageing and Society*, 24, 95-111.
- Dubas, J. S. (2001). How gender moderates the grandparent-grandchild relationship. *Journal of Family Issues*, 22(1), 478-492.
- Fuller-Thomson, E., & Minkler, M. (2000). The mental and physical health of grandmothers who are raising their grandchildren. *Journal of Mental Health and Aging*, 6, 311-323.
- Gerard, J. M., Landry-Meyer, L., & Roe, J. G. (2006). Grandparents raising grandchildren: The role of social support in coping with care giving chal-

- lenges. *International Journal of Aging and Human Development*, 62, 359-383.
- Goodman, R. (1997). The strengths and difficulties questionnaire: A research note. *Journal of Child Psychology and Psychiatry*, 38, 581-586.
- Goodman, C. C. (2007). Intergenerational triads in skipped-generation grandfamilies. *International Journal of Aging and Human Development*, 65, 231-258.
- Harrison, K. A., Richman, G. S., & Vittimberga, G. L. (2000). Parental stress in grandparents versus parents raising children with behavior problems. *Journal of Family Issues*, 21, 262-270.
- Jung, K., & Honig, A. S. (2000). Intergenerational Comparisons of Paternal Korean Childrearing Practices and Attitudes. *Early Child Development and Care* 165, 59-84.
- Jung, J. S., Lee, H. K., & Park, H. S. (2005). A study on the grand parenting role with low income skipped-generation families. *Journal of Korea Open Association for Early Childhood Education*, 10(3), 317-337.
- Kemp, C. L. (2007). Grandparent-grandchild ties reflections on continuity and change across three generations. *Journal of Family Issues*, 28(7), 855-881.
- Kim, U., Park, Y. S., Kwon, Y. E., & Koo, J. S. (2005) Values of children, parent-child relationship, and social change in Korea: Indigenous, psychological, and cultural analyses. *Applied Psychology: An International Review*, 54, 338-54.
- Kwon, I. S. (2000). The relationship between the burden and the social support of grandmothers caring their grandchildren. *Journal of Korean Academy of Child Health Nursing*, 6(2), 212-223.
- Landry-Meyer, L., & Newman, B. M. (2004). An exploration of the grandparent caregiver role. *Journal of Family Issues*, 25(8), 1005-1025.
- Lever, K., & Wilson, J. J. (2005). Encore parenting: When grandparents fill the role of primary caregiver. *The Family Journal*, 13(2), 167-171.
- Lundström, F. (2005). *Supporting grandparents caring for their grandchildren*. Citizens Information Centres. Retrieved from [www.oasis.gov.ie](http://www.oasis.gov.ie)
- Musil, C. M. (2000). Health of grandmothers as caregivers: A ten month follow-up. *Journal of Women and Aging*, 129-145.
- Nyland, B., Zeng, X., Nyland, C., & Tran, L. (2009). Grandparents as educators and carers in China. *Journal of Early Childhood Research*, 7(1) 46-57.
- Orb, A., & Davey, M. (2005). Grandparents parenting their grandchildren. *Australasian Journal on Ageing*, 24(3), 162-168.
- Pruchno, R., & McKenney, D. (2002). Psychological well-being of Black and White grandparents raising grandchildren: Examination of a two-factor model. *Journals of Gerontology: Psychological Sciences and Social Sciences*, 57B, 444-452.
- Ross, M. E., T., & Aday, L. A. (2006). Stress and coping in african american grandparents who are raising their grandchildren. *Journal of Family Issues*, 27(7), 912-932.
- Schwarz, B., Trommsdorff, G., Kim, U., & Park, Y. (2005). Intergenerational support psychological and cultural analyses of korean and german women. *Current Sociology*, 54(2), 315-340.
- Smith, G. C., Palmieri, P. A., Hancock, G. R., & Richardson, R. A. (2008). Custodial grandmother's psychological distress, dysfunctional parenting, and grandchildren's adjustment. *Int'l. J. Aging and Human Development*, 67(4), 327-357.
- Spence, S. A., Black, S. R., & Crowther, M. R. (2004). Grandparents and grandparenting in a rural southern state: A study of demographic characteristics, roles, and relationships. *Journal of Family Issues*, 22(4), 523-534.
- The Grandparents Association. (2009). *Factsheets*. Retrieved from <http://www.grandparents-association.org.uk/index.php>
- Thomas, Duncan, (1994). Like father, like son, like mother, like daughter: Parental. Resources and Child Height. *Journal of Human Resources*, 29(4), 950-989.
- Thomas, J. L. (1986). Gender differences in satisfaction with grandparenting. *Psychology and Aging*. 1(3), 215-219.
- Uhlenberg, P., & Hammill, G. (1998). Frequency of grandparent contact with grandchild sets: Six fac-

tors that make a difference. *The Gerontologist*, 38, 276-285.

Vandell, D. L., McCartney, K., Owen, M. T., Booth, C., & Clarke-Stewart, A. (2003). Variations in child care by grandparents during the first three years. *Jour-*

*nal of Marriage and Family*, 65, 375-381.

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