



## TIMESCAPES FINAL REPORT PROJECT 6: *Intergenerational Exchange: Grandparenting and the texture of poverty*

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The *Grandparenting and Poverty* project (Timescapes Project 6) looks at the meanings, experiences and relational dynamics of the lives of grandparents experiencing poverty, and captured insights their role as carers in mentoring, supervising, and managing their grandchildren, understanding how these roles have changed or stayed the same over the course of our study. We have also sought to explore how participants' experiences shapes their understanding of possibilities for change within their present lives, and also their conceptions of their and their grandchildren's future.

We have been researching with a sample of eleven mid-life grandparents (35-60 years) from eight families. Through the use of casing methods, we have been tracking 319 significant others of our core participant sample. The richly descriptive data generated during this project provides qualitative longitudinal insight into the unfolding of our participants' lives over time, in place, and within a broader policy context.

### Aims and Objectives

Within the broad overall aim of investigating how grandparents seek to address the processes through which poverty is perpetuated intergenerationally on behalf of their grandchildren, the *Grandparenting and Poverty* project addresses a number of research questions:

- How are intergenerational dependencies and responsibilities worked out over time?
- How do fluid patterns of intimacy and family life influence the long term resourcing of families and the wellbeing of individuals both materially and emotionally?
- What is the dynamic interplay between formal and informal care and support over the life course?
- How do particular policy developments relate to individual biographical change? How do diverse social policies intersect in the lives of individuals and families through time, and what is their long term impact?

### Sample

The project builds out of research that started in 1999 in a low income estate in a city in the North of England. These studies increasingly accessed and reported on the experiences of poverty, social exclusion, intergenerational exchange, and inequalities in health amongst marginalised and vulnerable core poor families and individuals in a changing policy landscape, and our current sample includes two families from this earlier research. Using gatekeeper access methods developed this earlier research, we have been researching with a further six families in these and similar localities. The social context of our participants is a low income locality in a northern city in England. While across the extended families of our participants (319 close family members) there is high involvement in low-income blue collar work, there are also numerous accounts of redundancy, failure of job training schemes, and the constraint women in particular experience in returning to work after having children. Our sample are characterized by high rates



of intergenerational teenage births, are all white (except the grand/children and significant others in two families); and often live close together, frequently in the same neighbourhood. All are resident in social housing. Health data provides a useful insight into the context of our study area. The locality is characterized by high rates of infant mortality, reduced life expectancy for both men and women, and above average rates of heart disease, stroke, and long-term illness relative to the city as a whole.

Broadly, the types of care these grandparents provide for their grandchildren can be placed on a continuum from ‘supplemental’ care, where grandparents intervene and support the care of grandchildren whilst they remain resident with their own parents, to ‘parental’ care, where grandchildren reside full-time with their grandparents.

We used a range of tools to foster long term engagement in our research, including Christmas cards, mobile phone texts, phone calls, and occasional quick visits, in addition to four rounds of interviews with participants. We also maintained ongoing contact with the gatekeeper organizations through which we accessed participants in this, and earlier, research. Such contact was often reciprocal in that we provided support and advice for third sector organizations in funding applications, and formal service providers in the form of briefing papers and feedback meetings. We also participated in local activities, such as appearing on local radio to discuss our research.

## Data Generated and Archived

The data generated for the *Grandparenting and Poverty* project includes four rounds of in-depth and life history interviews with grandparents and other family members carried out in their homes. The interview schedule for each round of interviews shifted to capture the different dimensions of participants’ lives as set out in our questions. In this way, over the course of the study our interviews explore participants’ biographies, their family lives, their experiences as grandparents, their understanding and use of the places in which they are located, their involvement and integration within particular formal and informal policy landscapes, and their conceptions, management and understanding of times in their lives and the lives of their grandchildren, including their future orientations.

A significant output from the *Grandparenting and Poverty* qualitative longitudinal project – and a key achievement of the study – is the quality and range of material that has been deposited in the Timescapes Archive. We have archived historical data from an earlier study, funded under the ESRC Research Methods Programme, and in doing so extend the longitudinal reach of the archive. Materials archived for this current project include:

- key informant interviews, generated through our ongoing meetings with local experts and key workers in public and third-sector service provision, generating rich descriptions of service delivery and service needs in the area.
- secondary quantitative data, including publicly accessible census, health, socio-economic and demographic data at various aggregations down to super-output areas.
- Visual material, such as family trees and timelines of significant events, also photographs of the area
- Pen portraits of participants and their contexts



- Extensive fieldnotes, including ethnographic observation of the areas,
- access process materials including notes on meetings and phone calls with gatekeepers, notes on access processes and negotiations with participants;
- Research process materials including tape recordings of team meetings; visual mapping of thematic content analysis; visual mapping of the sample along a range of different continuums (powerlessness/powerfulness; caring continuum; geographical; relational networks) interview schedules, research team logs; field notes from interviews with participants; field notes from casual and ad hoc contact with participants, and information about our participants that we gathered through gatekeepers and other participants who knew them.
- Briefing papers, a mini research team film; and mini radio broadcast

## Findings

As well as the archived outputs from the *Grandparenting and Poverty* qualitative longitudinal project, findings are both substantive, but also methodological, extending and refining analysis of gatekeeper access methods and casing methods developed in earlier research but also concerning methodological insights into sampling. Further, the project engaged extensively with time both as a substantive category, but also as a methodological dimension throughout the research.

Emergent **substantive** findings from ongoing analysis include:

### Mid-life Grandparents' roles: Supplementary Care

- Rather than the 'leisure and pleasure' ideal of grandparenting, our participant sample were more likely to be involved in 'rescue and repair'. The grandparents we interviewed provide supplemental care and often see themselves as fire-fighting crises on a regular basis. The reason that these families experience crisis points, or tipping points, so often, is that these families experience high rates of uncertainty in their lives associated with extremely limited resources across families and in place. Planning for the future is difficult because of these constraints.
- Nevertheless, grandparents are actively involved in supporting their grandchildren, including bringing them into their homes; ensuring they attend school regularly; keeping them off the streets and away from risky places; teaching them right from wrong; disciplining them where possible; and supporting the parents of their grandchildren. They also manage complex relationships with health and social care providers and procedures to keep their grandchildren in their homes, and access benefits and services for their well-being. Crucially, a number of grandparents talk about 'stepping in' in order to keep their grandchildren away from the attention of 'the social', or Social Services. Several grandparents talked about not wanting 'the kids taken off' off their adult children by Social Services. In this way, it might be that at times of greatest need, these families are invisible to service providers who may be able to help them.
- Grandparents providing supplemental care contribute significantly at a multi-household level through provision of a wide range of resources (time, money, food, and so on). This provision is also invisible beyond the family.



- However, at the same time, young grandmothers in particular are trying to support their adult children in gaining independence to look after their children. In doing so, they are confronted by significant emotional difficulties including feeling they are abandoning and avoiding their children and grandchildren in an attempt to promote independence;
- Additionally, while they put considerable effort into caring for their grandchildren and supporting their children, particularly their daughters, their ability to change the life-circumstances of their grandchildren is constrained by other responsibilities, early-life disability and ill-health, and behaviors borne of repeated experiences of lack of control.

#### Implications for policy of these findings:

- A great deal of the support, care and nurturing provided by grandparents is hidden from view. Service providers are often unaware of the wide-ranging needs of these families.
- It is crucial that trusting relationships can be established so that, at times of vulnerability, these families feel they can trust the relationships through which they may gain access to particular services and resources without the risk of these relationships becoming punitive.

#### Mid-life Grandparents' roles: Parental Care

- Young grandparents can often find themselves in conflicting situations when formal health and social care services become involved in their grandchildren's lives. They can be acting as mother to two generations within the family, but are not seen as having parental responsibility for their grandchildren by service providers.
- Although formal health and social care providers call upon grandparents in emergency situations to take charge of children deemed at risk, more generally the extent of care and other resources that grandparents provide for their grandchildren is usually known only within families. It is likely to be invisible to health and social care planners and providers in these areas
- Where service providers provide comprehensive support, and are able to develop trustful relations, these relationships are invaluable and crucial in meeting a wide range of everyday needs. Often these needs are beyond the remit of service providers, they are fringe services that are, nonetheless, invaluable to these families.

#### Implications for policy of these findings

- It is crucial that the competing perspectives from the service provider's organization (e.g., social services) do not create additional problems for the families they are there to help. Participants' experiences of service provision is frequently punitive or demanding in terms of monitoring and assessments. This leads to a general distrust of helping professionals. They see these interventions as highly problematic because they reinforce their feelings of powerlessness, and consequently are fearful of many of the attempts to intervene in the private heart of their family. This response is particularly pronounced when the family do not perceive there to be a problem within their family that additional resources would not address.



- Trustful relationships with service providers emerge as absolutely key for these families in managing on a day-to-day basis, and for facilitating even modest future orientations (e.g., planning for the future)
- Regular and intensive contact with these families is essential to identify their wide-ranging needs.
- Effective provision must be able to respond quickly and be flexible enough to address wider needs. This includes being able to refer to other service providers and support these grandparents with innovative approaches to service delivery.
- Our experience suggests that service providers who have regular contact, deliver particular services and also have the flexibility to deliver comprehensive service delivery fringe working, build relationships of trust that are essential to address the wellbeing of these families.
- Findings from interviews with public and third-sector organisations working in these localities, suggest increasing pressure to provide audited services is undermining their ability to deliver comprehensive services that address the worst effects of poverty.

### The timing of families:

- Providing parental care often means grandparents are unable to make plans for their own futures; there is often little or no gap between the last of their children and the first of their grandchildren. Grandparents often say, ‘there is no ‘me’ time’.
- Nevertheless, ideas of timing and spacing of children and grandchildren make particular reference to high rates of mid-life disability, mid-to later life illness, and early mortality rates in these areas. Therefore, becoming mid-life grandparents (from 38 years onwards) may be seen as the ‘right time’ because the grandparent is still able to physically play and go out and about with their grandchildren.

### Implications for policy of these findings

- Policies which seek to discourage teenage pregnancy will find it difficult to gain purchase in families where mid-life morbidity and early mortality is a common occurrence.
- Service provision around teenage pregnancy and parenthood need to engage with mid-life grandparents where the teenage parent is still living at home as it is likely they will be assuming parental care for all their grandchild as well as their child.

### Grandparenting and the experience of poverty:

- To understand how these families are shaped, both in terms of the spacing between generations, and lived experiences of deprivation, it is necessary also to consider the broader social contexts and processes in which they are situated.
- Further, longitudinal tracking of these families is essential if we wish to understand the perpetuated gap between the efforts and aspirations of grandparents for their grandchildren, and the broader contexts of their lives which constrain or negate such efforts.

### Implications for policy of these findings



- It is important to move away from ideas of intergenerational poverty that blame individuals, and instead consider the public and third sector services and relationships that might best support those who experience long-term poverty in effecting change in their lives.
- Our research shows that grandparents play a very important role in supporting their grandchildren in low-income households. Policy should broaden its scope and consider the role these grandparents play in giving their grandchildren the best start in life. There is a need for new thinking around how services can support grandparents to provide physical, social, and emotional support to their grandchildren.
- Support for parents needs to recognize the vital practical role and powerful influence these grandparents have in their families. If early interventions are designed to enable parents to achieve their aspirations for their children, then these interventions need to engage with the structural reasons for limited aspirations across the generations. The most effective way in which this can be done is through delivering services that are trusted. We have observed over the past eleven years, that service providers who collaborate with families on creating a sense of control are most effective in raising aspirations.

### Future orientations

- Across our study participants considered education and unemployment were key life chance factors, and these were repeatedly identified as areas in which grandparents sought to intervene. Grandparents' interventions, however, differed according to the particular future-orientation of each participant/s. Analyses identified distinct types of future-orientations of our participants, reflecting whether and how grandparents intervened in producing futures for their grandchildren. These included:
  - 'no point in planning', as the participant had no ability to control their present circumstances and therefore had no capacity to exert influence over a prospective future through actions in the present.
  - There was also 'no time to plan', where some participants felt so overstretched in actually producing and managing a present for themselves and their grandchildren, that this was all they could encompass.
  - A further distinct future-orientation was 'creating a future in the present', particularly through norms of independence. This future-orientation was expressed by participants in our research who felt capable of shaping current circumstances in order to maximise future opportunities for their grandchildren. For one participant, this meant moving away from family support networks in order to put her grandchild into a high performing school.
- These vulnerable grandparents talk about how they don't want their children and grandchildren to have the same experiences they have had, but, nevertheless, their own experiences constrain their aspirations. Their limited aspirations arise from their lack of power, control, and autonomy to address many needs in their lives.

### Implications for policy of these findings



- Support for parents needs to recognise the vital practical role and powerful influence these grandparents have in their families. If early interventions are designed to enable parents to achieve their aspirations for their children, then these interventions need to engage with the structural reasons for limited aspirations across the generations. The most effective way in which this can be done is through delivering services that are trusted. We have observed over the past eleven years, that service providers who collaborate with families on creating a sense of control are most effective in raising aspirations.

## Early/Anticipated Impacts

### *Engaging and enhancing public knowledge:*

Our model of impact from this qualitative longitudinal research is interactive (Weiss, 1979). As is widely recognised, given the complex social problems we are addressing in this research, our insights are one part in a complicated process that bring about change in policy and practice. Nonetheless, impact from the research can be clearly identified at the two scales at which we have worked alongside service providers and policy makers, locally and nationally. At a **local** level , where on-going collaborations have been key, impact has included:

1. Instrumental in policy decisions for the delivery of primary care in the low-income estate through new approaches to service delivery of GP, health visitor, and other community health services by the Primary Care Group and, later, Primary Care Trust.
2. Contributing directly to the design of local initiatives to address inequalities in health across the city as part of Neighbourhood Intensive Management Programmes and Teenage Pregnancy Services.
3. Providing evidence and support to third sector organisations in applications for funding to the local authority Small Grants Funding Scheme and National Lottery Fund to support services to 1) isolated elderly community support initiatives; 2) service provision for young homeless people; 3) providing support for grandparent carers.

At a **national** level dissemination has been through briefing papers (4), meetings with government departments (3), health observatories (2), strategic health authorities (2), and Primary Care Trusts and local authorities (8); presentations including the Innovative Research Methods Series at the Scottish Executive, and Government Seminar Series. Her Majesty's Treasury London and direct contributions to policy consultation. Evidence in this interactive approach to impact can be demonstrated through the following collaborations:

4. Consultation in the development of The Department of Children, Schools and Families Green Paper (2009),
5. Consultation in the Department of Health, Health Visitors Implementation Plan (2010).
6. Consultation with Manchester City Council in planning interventions to support grandparent carers.
7. Providing evidence to the Grandparents Association, a national voluntary organisations as part of lobbying material for policy change.
8. Providing evidence to support reports by Graham Allen MP (2011) Early Interventions: the Next Steps; and Frank Field MP (2011) The Foundation Years: preventing poor children becoming poor adults



### *Enhancing and extending academic knowledge:*

The *Grandparenting and Poverty* project has made contributions to substantive, theoretical and methodological debates, drawing on the emergent findings outlined above, and disseminated through publications and presentations. In particular, these relate to:

- life course research, especially that focusing on trajectories through poverty;
- understandings of how policy processes may shape and configure families over time;
- understandings of how methodological engagement with investigating and understanding time in our research produces particular substantive contributions, such as facilitating analysis of how participants' present circumstances shape and (dis)allow for particular future orientations
- ethics of qualitative longitudinal research and repeated engagement in the lives of those already described as vulnerable.

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## Future Plans

There are two key elements of future plans for the *Grandparenting and Poverty* project.

### 1. Gaining funding to collect another round of data

We are currently exploring the possibilities for collaboration with other members of the Timescapes team, looking to bring together substantive and methodological developments from this and previous research. We are particularly keen to retain the relationships with participants and gatekeepers we have established over the past eleven years.

### 2. Exploiting the analytical potential of the current data set

We are currently developing an application to be submitted under the ESRC Knowledge Exchange Scheme. We are particularly keen to continue to liaise and collaborate with formal and third sector organizations in the continued dissemination of our data. Additionally, we are revisiting our data in our ongoing analyses of time both as a substantive category, and as a methodological dimension.