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'Looking after grandchildren: unfair and differential impacts?'

Many grandparents are busy people and, for some, that it is because of their 'grandparent duties'. These 'duties' may be undertaken full time, as a regular weekly commitment or on particular days such as school holidays or when a grandchild or her parent is ill. And while caring for grandchildren is for many a source of pleasure, they may also speak of a sense of moral obligation and, in some cases, feelings of being 'put upon' and being 'too old for all this'.

You may hear it remarked that it is because there are more families with both parents working full-time or more parents divorcing and living apart that grandparents now have more of these 'grandparent duties'. Such anecdotal evidence raises important questions. Has there been an increase in the use of grandparent care, whether full-time or part-time? If so, what are the reasons? Are there similar trends in other countries? Do grandparents feel they have a choice? And, importantly, are there any problematic issues relating to gender and to the age of the grandparents?

This chapter will first consider the research evidence for any significant trends in care-giving by grandparents - placing this in the context of what is known about grand-parenting in the recent and more distant past — and evaluating the reasons. It will then focus on any differential effects in terms of gender and age before analysing the development — within the context of law and policy - of what emerges as the most important issue, that of grandparent care for those children who would otherwise be in the care of the state.

# A growing trend?

One might assume that the trend would be towards less involvement by informal carers such as grandparents because of the increase in formal care:

'Since the late 1990s formal childcare has become both more available and more affordable across the UK as a consequence of initiatives such as free entitlement to part-time early education for all three and four year olds, the development of children's centres and subsidies for childcare costs through Working Tax Credits' (Rutter and Evans 2012, p. 8).

However, in 2013 the Grandparent Plus charity reported that 'the amount of childcare provided by grandparents is increasing' (Grandparent Plus 2013). Mooney and Statham noted that surveys of mothers' use of childcare showed that, by the end of the 20<sup>th</sup> century, care by relatives, but particularly by grandparents, was the most common (2002, p. 2). Research 'investigating grandparents who provide regular informal child care is still within

its infancy' (Kirby and Sanders 2012) but, in the UK, it has identified a range of levels of involvement 'from occasional babysitting through regular help with child care to being the sole or main provider of childcare while parents work' as well as full time care 'for grandchildren whose parents are unable or unwilling' to provide care (Statham 2011, p. 4).

## *Informal/part-time care*

In the UK, a survey of 7,100 parents receiving child benefit in 2008 concluded that, although 2008 saw an increase in the take-up of out-of-school services (such as breakfast and afterschool clubs), '[t]he take-up of informal childcare (such as grandparents) has remained stable over the period 2004-2008'. The average time spent by grandparents on childcare was found to be 6.5 hours per week (Speight et al 2009, pp. 1-2). The percentage of working lone parents who used informal care provided by grandparents was 29%, exceeding the use of ex-partners (23%); similarly 27% of couples with both parents working used grandparent care (Speight et al 2009, p. 165, Table C2.2). This study therefore concluded that 'informal carers such as grandparents continue to play a prominent role in providing childcare' and that 'Pre-school age children were particularly likely to receive care from grandparents, which was for relatively large amounts of time and often for economic reasons (i.e. so that parents could work or study)' (ibid, p. 137). Further, a review of research data on grandparents in the UK providing childcare (excluding sole carers) found that 'Grandparents were the main child care arrangement for 35 per cent of families where the mother was working or studying when the child was nine months old, ahead of all other types of care' (Statham 2011, p. 2). And it seems that is grandmothers, in particular, who are the main carers:

Younger grandmothers (eg aged 50 to 64) who are fit, healthy and with younger grandchildren are the most likely to be providing care for their grandchildren, often to enable parents, and especially mothers, to work (GrandparentPlus 2013, p. 1).

Research indicating that grandparent part-time care is increasing can be found in other jurisdictions too. For example, in Australia:

A significant change in recent years is the increasing numbers of grandparents who are providing child care for their grandchildren. Australian grandparents are the biggest providers of informal child care for children between birth and 12 years, but particularly for babies and toddlers while their parents are in the workforce or studying (ABS 2006).

Similarly, in the USA, 'One-fifth of children aged below five with employed mothers benefit from grandparent provided child care as their main source of daycare' (Ho 2015, p. 359) and Mauk (2016), summarising recent research in relation to grandparents engaging in part-time or full-time care of grandchildren, concludes, 'These statistics represent a growing trend in American culture'. Dutch research also found an increase in care by grandparents aged 58-68 (Guerts *et al* 2015).

Full-time care

In the UK, it is in relation to full-time care that research has revealed the most significant change. An analysis of the 2001 census data showed that 173,200 children were being raised by relatives (Nandy et al 2011), a significant increase from 1991 (Aziz et al 2012, p. 4), and research indicates that it is primarily grandparents who are kinship carers (Aziz et al 2012, para 4.8; Ashley et al 2015, pp. 6, 7; Hunt and Waterhouse 2012, p. 7). Aziz et al found that 70% of their research sample of 493 family and friends carers were grandparents and that most were caring for one or two children, while some were raising 3 or more (2012, p. 3). In the Bristol University sample of 80 children and their carers 61.25% of kinship carers were grandparents (Selwyn et al 2013, pp. 5, 6). Forty-five percent of all the kinship carers had other caring responsibilities too - 40% had responsibilities outside the home for another adult and 5% were caring for their spouse or partner at home (ibid, p. 7). A research sample of 32 grandparents aged 65 and over who were raising their grandchildren had the following characteristics: 74% were women and 26% were men, 58% were living with a partner, while 22% were single carers (separated or divorced), 19% were widowed, and four were still working (Wellard 2011, p. 10). Again, the evidence is that it is grandmothers who are most involved.

The trend towards more 'skipped generation' families (see Herlofson and Hagestad 2012) or 'Grand Families' (AARP 2010) can also be found in the USA. In 1999 Bryson and Casper wrote that, 'In 1970 a little over 3% of all children aged under 18 were living in a home maintained by their grandparents. By 1992 this percentage had increased to nearly 5% ... In 1997 [to] ... 5.5 percent' (Bryson and Casper 1999, p. 23). In 2010, AARP reported, 'The number of children living in a grandparent's home has increased significantly over the past decade, according to ... the U.S. Census Bureau'. The Department of Health and Human Services in the USA also reported that, out of the 44.7 million people who were over 65 in 2013, 'a total of about 2.2 million ... lived in a household with a grandchild present. About 536,000 of these grandparents over 65 years old were the persons with primary responsibility for their grandchildren who lived with them' (AOA 2014, pp. 2, 5). Livingston and Parker (2010) cite research showing that, 'One child in 10 in the United States lives with a grandparent', and that 41% of those children were being cared for primarily by the grandparent.

## Ethnic group variations

There are clearly variations among ethnic groups in the amount and type of grandparent care. For example, researchers at the University of Bristol found that, "Children from Asian, black, mixed, Chinese and other ethnicities were all over-represented in the kinship population" and the prevalence rates were particularly high for black African and Pakistani children (Nandy and Selwyn 2013, p.1657). The researchers speculate that varying 'expectations of a "duty" to care for members of the extended family are likely to be a factor' (ibid). Similarly, in the USA, 'The phenomenon of grandparents serving as primary caregivers is more common among blacks and Hispanics than among whites' (Livingston and Parker 2010). Reasons of space preclude a focus in this chapter on these ethnic variations but there is some suggestion that the sharpest recent rise in grandparent care has been among the white population: 'The number of white grandparents primarily

responsible for their grandchildren rose by 9% from 2007 to 2008, compared with an increase of just 2% among black grandparents and no change among Hispanic grandparents' (Livingstone and Parker 2010).

## **Explanations**

Research suggests that parents tend to use informal childcare in six different ways. It may be used as the main type of care for babies and toddlers; as an affordable supplement to nursery; as regular after-school and holiday childcare; and as emergency cover or when a child is ill. It may also be used as short term childcare for parents who are studying or looking for work. Finally, parents who work outside normal office hours may use informal childcare as their main form of childcare (Rutter and Evans 2012, p. 9).

Research also suggests that the increase in the use of part-time care can be attributed to a combination of parental separation and more mothers working or studying. Grandparents offer support to children and grandchildren after marriage or relationship breakdown (FMI/University of Hertfordshire 2009, p. 3; Timonen *et al* 2009, p. 31). They also step in when mothers are working or to give parents 'parental time', enabling parents to do domestic activities, go shopping or to socialise (Speight *et al*, p. 3, Table C4.1 on p. 171). In addition there are many grandparents providing care simply because the adult child – the parent – is not able/no longer able to find affordable housing or maintain mortgage payments and so moves back 'home'.<sup>2</sup>

For many years one reason for full-time grandparent care in countries across the globe has been that grandparents have taken over when parents have migrated to find work but have not been able or willing to take their children with them. Herlofson and Hagestad reference research on rural Asian and African areas (2012, 28); Baker and Silverstein (2012) discuss similar migration of the middle generation in skipped generation families in China and the USA; Ingersoll-Dayton *et al* (2015) examine this phenomenon in Thailand. In South Africa grandparents have long played such a role, but one on which HIV/AIDs has impacted: grandmothers now have a crucial role in looking after grandchildren when their adult child is ill or dies of AIDs (Chazan 2008; see also Raniga and Simpson 2010).<sup>3</sup> However migration does not feature among the most common reasons identified in the UK for grandparent care when the parent is 'absent'. Rather, the reasons often attest to complex and troubled family circumstances.

Aziz et al, in their survey of full-time kinship carers (70% of whom were grandparents) found four main reasons: parental drug abuse (41%); neglect (51%); parental mental illness (21%);

<sup>&</sup>lt;sup>1</sup> See, for statistics, Speight et al (2009) p. 198 Table C9.1.

<sup>&</sup>lt;sup>2</sup> See, for example, <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children">https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children">https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children">https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children">https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children">https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children">https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://www.caba.org.uk/help-and-guides/information/keeping-peace-live-adult-children</a> <a href="https://

<sup>&</sup>lt;sup>3</sup> It is also worth noting that in South Africa 'Coloured workers often paid their parents to care for their children' (Burman 1996, p. 585).

and domestic violence (21%) (2012, p. 21).<sup>4</sup> The researchers comment that these figures corroborate findings in other studies: 'children living with family and friends carers had usually suffered multiple adversities before being placed with their carers, ... the level of adversities suffered was equal to if not greater than the level of adversities suffered by children entering the care system' (ibid, referencing Hunt *et al* 2008 and Farmer and Moyers 2008).

Also, often overlooked in the general statistics, is the fact that children are in grandparent care because their mother is in prison. This is not an insignificant sub-group. Research exploring the experiences of children in Scotland who had a family member in prison noted that, 'Each year in Scotland, more children will experience a parent's imprisonment than a parent's divorce' (Loureiro 2010, p. 5).

'Research from the UK and US suggests that around half of imprisoned mothers and fathers lived with their children before imprisonment' (Williams *et al* 2012, p. 19) but, in a Ministry of Justice survey, 77% of mothers in prison reported that their children were living with a family member who was not the other parent, compared with 10% of fathers in prison (Ministry of Justice 2004; see also Dodd and Hunter 1992). Studies in 2007 similarly reported that over three-quarters of male prisoners' children lived with their (the child's) mother but that during maternal imprisonment, the alternative primary caregivers were often the grandparents or other female relatives (see Williams *et al* 2012, 19).

In 2011 it was estimated that 6,000 of the 17,000 children separated from their mothers by imprisonment were in kinship care (Prison Advice & Care Trust 2011). Galloway *et al* (2014) point out that this is in line with earlier findings that a majority of children affected by maternal imprisonment were in kinship care, 'looked after either by grandparents (25%) or other family members or family friends (29%)', compared with 2% of children of male prisoners' (2014, 19, referencing HMIP 1997). Often grandmothers had also been responsible for grandchildren before their adult child was imprisoned because of issues such as drug abuse (Galloway *et al* 2014, p. 19). It is maternal grandparents, particularly grandmothers, who bear the burden, leading academics in the USA to refer to grandmothers with daughters in prison 20 years ago as 'some of the nation's neediest older persons' (Dressell and Barnhill 1994, 685).

## How different from the past?

The accepted truth appears to be that, 'The 20th century modern period of social change largely destroyed the extended family in Britain replacing it with the nuclear family living in geographical and social isolation' (FMI/University of Hertfordshire 2009, 28). Certainly, the growth of university education in the second half of the 20<sup>th</sup> century led to relationships being established between partners from different parts of the country whilst the growth of larger and often global businesses has entailed employment moves to other parts of the country or abroad. Social mobility has, then, meant that extended households are less common.

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<sup>&</sup>lt;sup>4</sup> In the USA the increase in full-time care by grandparents has been attributed to 'the growth in drug use among parents, teen pregnancy, divorce, the rapid rise of single parent households, mental and physical illness, AIDS, crime, child abuse and neglect, and incarceration of parents' (Bryson and Casper 1999: 23).

However, another prevalent 'truth' is that the industrial revolution of the late 18<sup>th</sup> and early 19<sup>th</sup> centuries was responsible for the break-up of extended families:

Family and kinship relations were perceived as the primary structuring features of small scale, pre-industrial society, producing basic goods and services and ordering roles and obligations. ... Industrialisation was identified by many as having sounded the death knell for this way of life, destroying extended families and undermining communities (Gillies 2003, 3).

From the mid-18<sup>th</sup> century many adult workers moved to the growing towns either because the agricultural revolution led to a shortage of employment in rural areas or because of the increasing need for labour in the new mills.<sup>5</sup> Normally the migration was to a town nearby: the 1851 census showed that most of the emigrants to Liverpool, Manchester and Bolton came from Lancashire, Cheshire or Ireland (Deane 1965: 145-6). Nevertheless that could well be a sufficient distance to make close links with extended families difficult. And many moved further afield to find work. The entrepreneurs in the first cotton mills advertised for labour over a wide geographic area. For instance, in 1771 Richard Arkwright advertised in Derby, Nottingham and Manchester for his new mill in Cromford, Derbyshire (Fitton 1989, 30). But while mill owners employed whole families—men, women and children (Fitton and Wadsworth 1968)<sup>6</sup> - three-generational groups were not the norm. Research on the industrial revolution based on 600 working class autobiographies shows 34 families - a minority - where there were representatives of three generations for part of the autobiographer's childhood (Humphries 2010: 157).

Further, it is now clear that the early textile mills relied very heavily on child labour (Humphries 2010, 2015) and that many of those children were orphans, often sent to the Midlands and further north, and apprenticed to mill owners who provided board and lodging (Honeyman 2007; Humphries 2015). Even after the Poor Law Amendment Act 1834 and the establishment of workhouses, this practice continued. Not all these pauper apprentices were orphans but, even if there was a parent or grandparent still living they clearly could not care for the children because they were working, or could not financially support them because they themselves were in the workhouse. The sheer numbers of apprentices involved – over 300 at Cressbrook Mill for example (Chapman 1992) – attests to an acute lack of available grandparent care.

However, the view that extended families were prevalent until they were destroyed as a result of industrialisation is contentious. Research based in several disciplines has undermined the idea of an earlier golden age of extended family living and provided evidence that the extended family as a household disappeared - if it ever existed – long before industrialisation. Laslett showed that family households of four or five persons (average of 4.75) were the norm in England by the 1540s when parish records began (Laslett 1965; Wrigley and Schofield 1989) and that it was 'not true that industrialization brought

<sup>6</sup> Indeed, women and children dominated the labour force: at Arkwright's Cromford mills in 1789: 150 men were employed out of a total labour force of 1150 (Humphries 2015, 49).

<sup>&</sup>lt;sup>5</sup> Although 'The true exodus from the land did not develop until the second half of the nineteenth century' (Deane, 1965, p. 139).

the simple nuclear family with it' (Laslett 2015, p. 91). In any case, as he pointed out, 'You could not with any confidence expect to see your grandchildren' (Laslett 1971, p. 103; see also Ward 1990): average life expectancy at birth was 35-40 in the 18<sup>th</sup> century (Mercer 2014, referencing Wrigley and Schofield 1989). Rosenthal's research (1996), <sup>7</sup> using Inquisitions Post Mortem in the late medieval period, found that only one-third of the families in his sample extended into three generations.

More recent research suggests that there were diverse - but remarkably stable - regional variations in family patterns (Todd 1990 referenced in Duranton et al 2008, p. 6 et seq) and that, in the UK, the nuclear family was dominant in southern and eastern England and eastern Scotland, with the multi-generational family type prevalent in the west of the British Isles' (Duranton et al 2008, p.13).8 The suggestion, then, is that the nuclear family form long preceded industrialisation in much of the UK. Things started to change, Laslett argues, in the 1850s and 1860s when registers show that the poor had more kin living with them (Laslett 2015: 96). Indeed Ruggles asserts that 'the frequency of extended families roughly doubled between about 1750 and 1900' (1987, p. xvii). In this later stage of industrialisation, the next generation had kin nearby or even sharing their rooms but, given continuing high early death rates, other (younger) extended family members might more often provide substitute care than did grandparents (Anderson 1995; Humphries 2010, pp. 156-58). In any event, until the various 19th century factory and mines Acts reduced the hours of work for children, or made such work illegal, only the very youngest children in industrial areas would have needed informal child care, a situation which continued with the introduction of universal free primary education in the last decade of the 19th century.9

By the early 20<sup>th</sup> century, however, because of improvements in living standards and public health, the median age at death had risen: in 1910 it was 63.<sup>10</sup> So more grandparents were alive - and well enough - to care for grandchildren. Working class mothers often still needed to work and evidence in biographies suggests grandmothers provided part or full-time care.<sup>11</sup> Indeed, one historian asserts that the period between the late 19<sup>th</sup> century and the mid 20<sup>th</sup> century was 'a kind of "golden age" of working class kinship' (Lynch 2010, p. 189) but there is a dearth of research with regard to care by grandparents. The focus of much of the analysis of trends in the 20<sup>th</sup> century is on care for, not care by, the older generation (see, for example, Wall 2010).

The situation was different for the middle classes where the professional or industry owning grandparents might have had considerable social and economic power and little time for grandparenting; care would have been provided by servants. Later, middle class women fought for the right to work and increasingly did work although immediately after the

<sup>&</sup>lt;sup>7</sup> See the review of this book by Bennett, J, in *The Medieval Review* @ <a href="https://scholarworks.iu.edu/journals/index.php/tmr/article/view/14467/20585">https://scholarworks.iu.edu/journals/index.php/tmr/article/view/14467/20585</a> accessed 28.6.2016.

<sup>&</sup>lt;sup>8</sup> See, also, Nash (1982, p. 135) for research on Denbighshire in Wales where grandchildren were boarded out to help grandparents.

<sup>&</sup>lt;sup>9</sup> The Elementary Education Act 1880 made attendance at school compulsory only for 5-10 year olds, raised to 11 in 1893, 12 in 1899 and 14 in 1918 but education was not free until the 1890s.

 $<sup>\</sup>frac{http://www.ons.gov.uk/people population and community/births deaths and marriages/deaths/articles/mortality}{in england and wales/2012-12-17}\ accessed 28.7.2016.$ 

<sup>&</sup>lt;sup>11</sup> See, for example, the biography of Catherine Cookson by Kathleen Jones (1999).

Second World War mothers in the middle and working classes were encouraged to be full-time mothers and housewives (Donnelly 1999, p. 43). As the 20<sup>th</sup> century progressed more mothers chose employment outside the home (Social Issues Research Centre 2011, pp. 5-6) but, at the same time, there was increasing provision of child care by the state, as well as Third Sector and for-profit companies. The researchers note that, whilst research has been published in the last decade or so in relation to grandparent care, 'we are a little more in the dark about ... the trends that have occurred over previous decades' (ibid, p. 7). One development was that grandparents were increasingly discussed as an emotional rather than practical or financial resource for grandchildren with a corresponding focus on opportunities for contact with them (Kaganas and Piper 1990, especially pp. 32-33).

It is not, therefore, possible to see an overall progression in the 20<sup>th</sup> century either towards or from part-time grandparent care. It has been important to a lesser or greater extent in various decades. In relation to full-time care, however, there is no evidence of a trend towards greater use of such care until relatively recently. In the last decade or so, however, the greater use of grandparents for full time care has been a significant development.

## The effects on grandparent carers of the recent trend

This generation of grandparents has been referred to as the 'pivot generation' because not only might they be juggling care of grandchildren with employment but - because of increased longevity - they might also have care-giving responsibilities towards their own parents (Mooney and Statham 2002). The difficulties for full-time carers - especially those who are caring for grandchildren who would otherwise be in local authority care - are particularly acute.

#### The Children

Aziz *et al* found that the children in their study had, in most cases, experienced traumatic events or neglect in the past:

51% of the children came to live with the carers as the result of experiencing neglect, 30% because of emotional abuse and 21% physical abuse. Some children had suffered multiple abuse. Most cases featured parental drug and/or alcohol abuse, parental mental ill health or parental death (2012 p. 3).

The children tended to be particularly needy or vulnerable with nearly half having a 'disability or special need such as emotional and behavioural problems' (Aziz et al 2012, p. 3; Ashley et al 2015, p. 6; Hunt and Waterhouse 2012, pp. 12, 15). Ashley et al report that half the children in their study had a long term illness or special needs. Forty three percent were judged by carers to have emotional and behavioural problems (2015, para 3.1). Similarly, Aziz et al found that 38% of the carers asked said the child in question had behavioural and emotional problems. Twenty one percent referred to special educational needs. Carers also reported that children had learning disabilities, physical disabilities and chronic illness (2012, para 4.7) Mercer et al's review found that children cared for by family and friends had suffered similar 'adverse experiences' to those experienced by children cared for by local authority foster parents in the care system. They also observe that there is research

showing that those with the most challenging children to raise receive little help (2015, para 1.3)<sup>12</sup>

## Age and vulnerability

In the study by Aziz *et al*, 29% of the children were living with at least one carer over the age of 60. Twenty six percent of all the carers had a long-term illness or disability and 24% had a partner with a long-term illness or disability (Aziz *et al* 2012 para 4.8).

In Wellard's sample of 32 grandparents aged 65 or over, 24 of the carers had a long term health condition or disability, of which arthritis was the most common, followed by heart disease and high blood pressure.

57% of those with a health condition, or 13 individuals, describe the impact of the health condition as "moderate or severe", 13 (50% of those who answered the question) describe themselves as "stressed", with 10 rating their personal wellbeing as "good". Just one respondent receives help with their condition from adult social services. Eight respondents say their partners have a long term health condition, for whom four are providing care and support. Four are providing care and support for an elderly relative or neighbour' (Wellard 2011, p. 10).<sup>13</sup>

Wellard also found that older grandparents had less support: 'It was striking that the [older] grandparents who felt they were coping least well were less likely to have strong support networks and that having someone who understands their situation and can offer emotional support is vital for their wellbeing' (ibid, p. 33).

## Poverty and Employment

There are also serious financial consequences. In 2005 Gray pointed out that, 'Raising employment rates amongst the over 50s is an established objective of government policy, yet it may conflict with the role of younger grandparents in childcare' (2005, p. 557) and that has proved to be so. In one survey it was found that, 'Almost half (49%) of kinship carers have had to give up work permanently to care for the kin child, and a further 18% had to give up work temporarily' (Ashley *et al* 2015, p. 2). <sup>14</sup> Others reduced their hours or took a lower grade job. Some reported that their partners had increased their hours or delayed retirement (Aziz *et al* 2012, para 6.2). The authors observe:

The income data partly explains why so many family and friends carers who completed the survey feel that life is a continual financial struggle. This is made harder for many who cannot increase their income by working extra hours or taking

<sup>&</sup>lt;sup>12</sup> See also Selwyn *et al* (2013) p 17.

<sup>&</sup>lt;sup>13</sup> In the USA: 'Overall grandparent primary caregivers are relatively young — more than two-thirds (67%) are younger than age 60, with 13% younger than age 45' (Livingston and Parker 2010).

<sup>&</sup>lt;sup>14</sup> See also Aziz *et al* (2012) para 6.2.

on a job because of the responsibilities of caring for the kin child/ren, and yet many are also having to pay out significant sums to cover the extra costs of the children' (para 6.7). 15

The impact was only slightly less in the sample interviewed by Mooney and Statham: 'Three in five of those who had not already retired when they took on the role of caregiver had not had to make any changes to their work. That still left two out of five employees who had needed to make specific changes' (2002, p. 17). So it is at least partly because of their caring responsibilities that 'Family and friends carers emerge ahead of the general population in many of the indicators of poverty or low income' (Aziz and Roth 2012, p. 3).

#### Contact

There are also implications for grandparent carers arising from the fact that not all siblings live with the same relatives when their parents are unable or unwilling to care for them. Aziz *et al* found that 56% of family and friends carers were raising children who had at least one sibling living elsewhere (2012, p. 16; see also Hunt *et al* 2008). Often siblings in these families were placed with other members of the extended family (Farmer and Moyers 2008; Hunt *et al* 2008) and this allowed for a 'high level of contact' (see Aziz *et al* 2012, p. 16). However, Aziz *et al* found that 'only one in nine of the siblings living elsewhere are living with other relatives. Almost three times as many children had siblings who had either been adopted or were living in unrelated foster care' (2012, p. 16). This may make contact more difficult to negotiate. Research also provides a less than rosy picture of contact between children and their parents:

Two of the grandparents had to return to court repeatedly because parents of the children they are looking after were seeking greater contact. One grandmother felt that her grandson's father, who is unemployed and able to get legal aid, uses court proceedings as a weapon against her (Wellard 2011, p. 32).

These kinds of difficulties emerged also in a small qualitative Australian study:

Grandparents reported that arguments, tension, and communication difficulties were common problems that would arise between themselves and the parents. This result highlighted that although parenting may prepare you for caring for your grandchildren it does not prepare you for working in a co-parenting team with adult children (the parents) (Kirby and Saunders 2012, Discussion section).

#### Gender

The American research of Wang and Marcotte (2007), using a nationally representative sample of 3,240 grandparents who were heads of households, found that grandparents in 'skipped-generation families' – looking after grandchildren without the children's parents in the household – were 'older and frailer, limiting opportunities in the labor market'. They relied 'less on the earnings of the grandchildren's parents to pay for expenses' but needed

<sup>&</sup>lt;sup>15</sup> The position of carers is likely to be exacerbated by the provisions of the Welfare Reform and Work Act 2016 (Ashley *et al* 2015, p.14).

to work to finance caring (2007, p. 21). The authors comment, in relation to such grandparents, 'The families with the least power and fewest resources are most often put in this position. And within these families, women appear to make the most substantial accommodation and sacrifice' (ibid, p. 22). Similarly, Livingston and Parker, writing in the USA, found that, 'Some 62% of grandparent caregivers are female, and 38% are men' (Livingston and Parker 2010).

In the UK, ninety percent of those responding to the survey of friends and family carers undertaken by Aziz *et al* were women. More than a third of them were raising the child(ren) alone, compared to 4% of men (2012, para 4.8). In Gautier and Willard's study, nine out of 10 kinship carers responding to the researchers' questions were grandparents and 92% of these were women (2014, p. 6). Selwyn *et al* found that the majority of kinship carers were grandparents and most of them were single women (2013, p. 3). Selwyn and Nandy report that '[a]mong grandparent kinship carers, 86% of grandfathers lived in a couple, compared to only 24% of grandmothers' (2014, p. 44). Broad's research revealed that 42% of kinship carers were grandparents and 68% of kinship carers were female (2004, p. 216). The picture painted by these findings confirms prevailing assumptions that it is women who are responsible for caring and, more particularly, caring for children.

What emerges from the evidence above is that, not only is there a relatively recent clear trend to more full-time grandparent care in the UK, but that this is also not a return to the 'normal' situation of earlier times. As we will explain, there are also very specific legal reasons for this development which themselves create further problems for grandparent carers.

## Kinship care, Local Authorities and the Law

Legislation has now been enacted requiring local authorities to prioritise kinship/ family and friends care over fostering by unrelated carers and institutional care. Section 22C, introduced into the Children Act 1989 in 2008, creates a hierarchy of placements for children who are looked after by local authorities, whether under a care order or a consensual arrangement. Near the top of this hierarchy are family members and friends.

First preference is given to arrangements whereby the child lives with parents, someone with parental responsibility or, where a child arrangements order specifying with whom a child should live subsisted in respect of a child subsequently made the subject of a care order, the person in whose favour that s8 order was made. The duty to comply with these provisions is removed where to do so would not be consistent with the child's best interests or would not be reasonably practicable. In such cases the local authority must place the child in a placement they consider to be the most appropriate. In making this judgement, the local authority should give preference to a 'placement with an individual who is a relative, friend or other person connected with [the child] and who is also a local authority

<sup>&</sup>lt;sup>16</sup> S22C(2) and (3).

<sup>&</sup>lt;sup>17</sup> S22C(4)

<sup>18</sup> S22C(5)

foster parent'. <sup>19</sup> It is also possible to place a child with a grandparent who is not a foster parent. <sup>20</sup>

Government policy that led to the enactment of s22C was clearly informed by the view that kinship care is best for most children who cannot remain with their parents: it is 'much better for most children than entering care, and children have told us they believe the same' (HM Govt 2006, para 2.29). Kinship placements enable children to stay with people they know and trust and provide a 'stable, safe and nurturing' environment (DfES 2007, para 2.34). During the parliamentary debate concerning what would become s22C, MP Tim Loughton observed that, 'Most people acknowledge that there are clear advantages to kinship caring and placements with family members'. <sup>21</sup>

However, there may be other reasons for the increased reliance on kinship care, including a move to reduce cost and to shrink the role of the state (Broad 2004, p. 212; Hunt 2003). O'Brien suggests that one explanation lies in necessity; it is:

the demise of institutional care; a preference for fostering and simultaneously a shortage of such carers; and - perhaps most importantly - a better understanding of what extended families can provide to children in need of care. However, the increase in the kinship care placement rate reflects a development evolving more out of a scarcity of alternative care options than a coherent, childcentred policy that prioritised or aimed at developing this care option (2012, p. 128).

The increased emphasis on kinship care means that more grandparents are approached by local authorities to take on the care of their grandchildren. They play a pivotal role in the privatisation of child care represented by s22C. This has implications for the autonomy of those grandparents; their autonomy is curtailed by their new childcare responsibilities, particularly if they have no financial or practical help.<sup>22</sup> Grandparents may give up work and pension prospects, leaving themselves financially vulnerable in old age. Finances generally, social lives and relationships with partners can be affected. Holidays may no longer be an option and space can be a problem (Roth *et al* undated, para 2.8).

As Aziz *et al* observe, typically relatives and friends who take on the care of children need to be able to make decisions about how the child is raised and they need financial and other support (Aziz *et al* 2012, para 3.1). However these needs are often not met. Grandparents who take on care of their grandchildren as a result of a private arrangement without any involvement of the local authority, or where the local authority simply facilitates a private arrangement, are particularly ill-served; the local authority has financial and other obligations only to 'looked after' children. These are children who are in care under a care order or accommodated by the local authority under s 20 Children Act 1989 with the consent of those with parental responsibility.<sup>23</sup>

<sup>20</sup> S22C(6)(d).

<sup>&</sup>lt;sup>19</sup> S22C(7).

<sup>&</sup>lt;sup>21</sup> Hansard 2008 col 769; Public Bill Committee Debates, Children and young Persons Bill [Lords] Col 49 <a href="http://www.publications.parliament.uk/pa/cm200708/cmpublic/children/080624/pm/80624s02.htm">http://www.publications.parliament.uk/pa/cm200708/cmpublic/children/080624/pm/80624s02.htm</a> (accessed 20 July 2016)

<sup>&</sup>lt;sup>22</sup>See also Selwyn et al (2013) pp. 52-4, 67.

<sup>&</sup>lt;sup>23</sup> But see London Borough of Hackney v John Williams and Adenike Williams [2017] EWCA Civ 26.

Research studies mentioned by Hunt and Waterhouse observed that local authority support appeared to be determined by the child's legal status rather than need. Also, it is the local authority that assesses whether the child has been placed with the carer under s20 or not and the designation of arrangements as private, or as giving rise to looked after status, and so necessitating local authority support, seemed arbitrary. Finally, kinship carers were often not aware of the alternatives available to them or were in a weak position to challenge local authority decisions (2012 p. 5).

## 'Looked after' grandchildren

Since local authorities have a duty to maintain only 'looked after' children, whether or not grandparents become entitled to any assistance from the state and also what kind of assistance they get depends on the circumstances in which they undertake the care of their grandchildren and on the nature of their legal relationship with them.

Local Authorities have a duty in terms of s17 of the Children Act 1989 to provide services for children in need within their areas. There is also a duty on local authorities under s20 to provide accommodation for children in need in their area who require it because there is no-one who has parental responsibility for the child; the child has been lost or abandoned; or the person caring for the child has been prevented, whether temporarily or permanently, and for whatever reason, from providing suitable accommodation or care. Section 22(3) provides that local authorities have a duty to 'safeguard and promote' the welfare of any child being looked after by that local authority. Section 22A re-enacts the duty of local authorities to provide accommodation for children in their care. Section 22B places a duty on local authorities 'to maintain a child they are looking after in other respects apart from the provision of accommodation'. Section 22(1) of the Children Act 1989 defines a looked after child to include a child who is in care or one who has been accommodated under s20, but the definition expressly excludes a child receiving services under s17. The effect of these provisions is that if a child is in care or if a child in need is accommodated in terms of s20, the local authority has a duty to maintain that child. That duty may persist in some instances: 'A child who is looked after and is placed with a relative, friend or other person connected with the child in accordance with section 22C(5) continues to be looked after' (DfE 2011, para 3.15).

In the case of looked after children, the local authority is required to support the arrangement and the placement is treated like any other foster placement. This includes payment of a non-means tested foster allowance which meets the national minimum. If a child is accommodated under s20, the child qualifies as a looked after child and is visited by a social worker who oversees his or her welfare. A weekly fostering allowance is paid but there is no entitlement to Child Benefit or Child Tax Credit. The foster carers must be offered training and support. The local authority must provide support to meet the child's needs including an education plan, a health plan and training as well as support for the foster carers (Hunt and Waterhouse 2012 p. 4). Support, including financial support for carers may continue until the young person is 21 and the young person may receive support for educational and training purposes until the age of 25 (ibid).

In all other cases local authority support is discretionary.

Grandchildren who are not 'looked after' - discretionary payments

In the case of private arrangements where the local authority is not involved, <sup>24</sup> or merely facilitates the private arrangement, financial support is restricted to state benefits, including child benefit and, where appropriate, means tested benefits and tax credits. If the child is a child in need, there may also be support from the local authority under s 17(6) of the Children Act 1989. <sup>25</sup> If a child in need is supported under s17, the child is not classified as a looked after child and there is no entitlement to financial assistance; the local authority has a discretion. Family income may be taken into account since the local authority must have regard to the means of the child and parents under s17(8) CA 1989 (DfE 2011, Table 1). Support under s17 may take the form of advice, guidance and counselling and s17(6) provides that assistance may be given in kind or in the form of financial help. <sup>26</sup> Discretionary support may take the form of regular payments but these cease when the child reaches the age of 18 (ibid).

According to the statutory guidance for local authorities dealing with family and friends care, the majority of family and friends arrangements are informally agreed between those with parental responsibility and the carers:<sup>27</sup>

Most such arrangements remain entirely private without the need for the involvement of children's social care services, although where a child is assessed as being in need support may be provided under section 17 of the 1989 Act (DfE 2011, para 3.1)

In cases where the local authority is involved, whether or not the child falls into the category of looked after children depends on whether the local authority placed the child or simply assisted with a private arrangement. In *Southwark LBC v D*, <sup>28</sup> the court said that, while there may be cases where the local authority facilitates a private arrangement, in cases where a local authority plays a major role, it is likely to be seen as fulfilling its statutory duty under s 20 and the child is a looked after child.

[49].... If the local authority is facilitating a private arrangement, it must make it plain to the proposed foster parent that she or he must look to the parents or person with parental responsibility for financial support. The local authority must explain that any financial assistance from public funds would be entirely a matter for the discretion of the local authority for the area in which the foster parent is living. Only on receipt of such information could the foster parent give informed consent to acceptance of the child under a private fostering agreement. If such matters are left unclear, there is a danger that the foster parent (and subsequently the court) will conclude that the local authority was acting under its statutory powers and duties and that the arrangement was not a private one at all.

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<sup>&</sup>lt;sup>24</sup> See *R* (on the application of Cunningham) v Hertfordshire County Council & Anor [2016] EWCA Civ 1108.

<sup>&</sup>lt;sup>25</sup> See Aziz *et al* (2012) para 3.2.

<sup>&</sup>lt;sup>26</sup> See DfE (2011) para 3.6.

<sup>&</sup>lt;sup>27</sup> Provided they are relatives in terms of s105 CA 1989, there is no need to notify the local authority

<sup>&</sup>lt;sup>28</sup> [2007] 1 FLR 2181

### The Guidance states that:

It may not always be easy to determine whether a child who is cared for by family or friends requires accommodation for the purposes of section 20(1) or whether that child's needs should be met by providing support under section 17 of the 1989 Act. In any event, where the local authority has instigated the arrangement for a child to live with a friend or relative, the local authority should provide an appropriate range and level of support for those arrangements' (DfE 2011 para 3.16).

If a child is a looked after child, it is unlawful to discriminate against family or friends foster carers; they are entitled to be paid in the same way as and those who are unrelated.<sup>29</sup> However this is not so if the arrangement is a private one and government has expressed concerns that support should be adequate:

No child or young person should have to become a looked after child ... for the sole purpose of enabling financial, practical or other support to be provided to the child's carer. Authorities must seek to provide any necessary support services without the child becoming looked after unless the child meets the criteria at section 20(1) of the 1989 Act and requires accommodation. Neither should the fear of losing support be allowed to become an obstacle to family and friends carers taking over responsibility for the long term care of a looked after child through applying for a residence order<sup>30</sup> or special guardianship order. Decisions by a local authority that a child should become looked after, or cease to be looked after, must be based on an assessment of the child's needs and circumstances (DfE 2011, para 2.19).

Some relatives choose to apply for special guardianship or a child arrangements order.<sup>31</sup> These orders offer the only means by which carers gain the status to operate as autonomous decision-makers. Either of these orders will confer parental responsibility on the carer and a special guardian may exercise parental responsibility to the exclusion of all others.<sup>32</sup> However while some grandparents appreciate the freedom from local authority supervision<sup>33</sup> that these orders provide, others are encouraged or pressured<sup>34</sup> into applying for them in order to relieve the local authority from paying foster allowances. Hunt and Waterhouse quote one grandparent:

Foster allowances are paid only for a short term period; authorities are not prepared to pay grandparents a foster allowance until the children reach the age of 16 years old. Once the short term period has expired grandparents are expected to sign a

<sup>&</sup>lt;sup>29</sup> The Queen on the Application of L and Others v Manchester City Council; The Queen on the Application of R and Another v Manchester City Council [2001] EWHC Admin 707; R (on the application of X) v London Borough of Tower Hamlets [2013] EWHC 480 (Admin).

<sup>&</sup>lt;sup>30</sup> Now a child arrangements order.

<sup>&</sup>lt;sup>31</sup> See Aziz et al (2012) para 3.3.

<sup>32</sup> See DfE 2011 para 3.23

<sup>&</sup>lt;sup>33</sup> Without these orders and where children are not subject to care orders, carers need to get permission from those with parental authority, usually the parents, in making any decisions other than those relatively minor ones covered by s3(5) of the Children Act 1989.

<sup>&</sup>lt;sup>34</sup> See Bowyer et al (2015) p. 26; Selwyn et al (2013) pp 9, 13, 58.

binding contract to either accept residency/special guardianship. This is so unjust .... You love and adore the children and want to keep them part of the family unit. The authorities involved, knowing these bonds, ties and attachments have been cemented, make available one get out option 'give the children up to be fostered out to strangers'....I consider this to be emotional blackmail (2012, p 75).

The government has extended the Adoption Support Fund to special guardians in cases where children were previously looked after (DfE 2016b p. 41; DfE 2016c). In addition, in the case of a child who was being looked after immediately prior to the making of a special guardianship order, the child, special guardian or parent has the right to be assessed for support services such as counselling or financial assistance.<sup>35</sup> Financial support is payable to a special guardian or prospective special guardian to facilitate arrangements for special guardianship where the local authority considers such arrangements to be in the child's best interests and to support the continuation of such arrangements. 36 However the requirement to provide support is qualified in Regulation 6(2). Support is payable only where the local authority consider it 'necessary to ensure that the special guardian or prospective special guardian can look after the child'; where the local authority 'consider that the child needs special care... because of his illness, disability, emotional or behavioural difficulties or the consequences of his past abuse or neglect'; where the local authority consider that it is appropriate to contribute to legal costs; and where the local authority consider it 'appropriate to contribute to the expenditure necessary for the purposes of accommodating and maintaining the child' which might include paying for 'furniture and domestic equipment, alterations to and adaptations of the home,' transport, clothing, toys and other necessary items.

#### The Guidance states that

49. It is important that children who are not (or were not) looked after are not unfairly disadvantaged by this approach. In many cases the only reason that the child is not looked after is that relatives stepped in quickly to take on the responsibility for the child when a parent could no longer do so (DfE 2016a).

However, although Regulation 11 confers a discretion on local authorities to offer assessments to the child, special guardian or prospective special guardian or parent, among others, even where the child has not been a looked after child, there is no right to be assessed in these cases.<sup>37</sup>

Assessments for support follow the Assessment Framework and so take into account the child's developmental needs as well as the parenting capacity of the special guardian (DfE 2016, para 56). When assessing financial support, the means of the special guardian will normally be taken into consideration. Regulation 13 requires the local authority to take account of:

<sup>&</sup>lt;sup>35</sup> Regulations 3 and 11 Special Guardianship Regulations 2005; s14F Children Act 1989. See also DfE (2016) para 22.

<sup>36</sup> Regulation 6(1)

<sup>&</sup>lt;sup>37</sup> See also s14F Children Act 1989.

- (a) the person's financial resources, including any tax credit or benefit, which would be available to him if the child lived with him;
- (b) the amount required by the person in respect of his reasonable outgoings and commitments (excluding outgoings in respect of the child);
- (c) the financial needs and resources of the child.

There is also no right to assessment where a relative is caring for a child in terms of a child arrangements order. The local authority has a discretion to make contributions to the child's accommodation and maintenance.<sup>38</sup>

Hunt and Waterhouse sum up the position:

Looked after status, the only one which provides entitlement to support, is an increasingly reliable passport to a comprehensive package of services for both carers and children. The statutory framework for special guardianship means that it is usually a better option than a residence<sup>39</sup> order, but since support is discretionary, very much inferior to kinship foster care. Informal arrangements are the least well supported. Carers who act on their own initiative to protect children are often discriminated against in terms of accessing support (2013, p. 3).

In short, most grandparent carers are left out in the cold. The position of grandparents caring full-time for children who are not looked after is exacerbated by the Welfare Reform and Work Act 2016; this introduces a benefit cap and limits child tax credit to two children.<sup>40</sup>

## Choice and autonomy

While there is little historical evidence that grandparents have traditionally acted as substitute full-time carers in this country, it is clear that, despite the hardships that ensue, this is a role they, and more particularly grandmothers, are now expected, and see themselves as duty-bound, to play. As one grandparent quoted by Wellard said:

People say to me, 'I don't know how you do it' and I say 'but if you're in the situation you've got to, what choice have you got. If the situation comes to you and it's your own, what choice have you got?' You don't have any choice, do you, you do it' (Wellard 2011, p. 36).

This perception of inevitability and lack of choice can be contrasted with the contemporary emphasis on choice and control in the decision to become a parent; with the availability of contraception and abortion, parenthood is a status that is now, more than ever, one that is assumed voluntarily. Boyd *et al* (2015, p. 8) have written about the increased reproductive choices that have become available to women since the 1970s, and they go on to focus on perhaps one of the most deliberate and carefully planned types of parenthood. They coin

<sup>&</sup>lt;sup>38</sup> Children Act 1989, sched 1 para 15.

<sup>&</sup>lt;sup>39</sup> Now Child Arrangements Order

<sup>&</sup>lt;sup>40</sup> See Ashley *et al* (2015) pp 14ff.

the phrase 'autonomous motherhood' to describe the situation of women who choose to raise a child alone (p. 14). The researchers deploy a relational conception of autonomy rather than one rooted in liberal individualism (p. 15). While acknowledging the agency of the individual, they highlight the importance of relationships with others in enhancing and facilitating autonomy; supportive relationships and networks are what enable these mothers to parent alone (pp. 15, 28, 173, 175).

These networks are particularly important because of the expectation that single mothers should be economically self-sufficient and should eschew dependency; neo-liberal ideology demands that responsibility for raising children be privatised (pp. 11, 21 and 178). Prior to embarking on autonomous motherhood, women set about establishing networks, saving money and also gauging the extent of potential help from family (p. 186). For these women, then, becoming a parent is a choice. While their autonomy is constrained by childcare responsibilities and while economic factors may shape decisions, they are able to make preparations for taking on the responsibility and exercise it autonomously (p. 19).

For grandparents who take on the full-time care of their grandchildren, things are very different: 'Whatever the circumstances that brought grandchildren into the home of their grandparents to be raised, it can come as a shock to the older adults who find themselves in this situation' (Mauk 2016). The transition to kinship care is 'often sudden and crisis-driven' (Selwyn *et al* 2013, p. 10). Hunt and Waterhouse (2012, p. 8) report that, in their study, fewer than a third of the carers said that responsibility for children was assumed as part of a planned move; most said it had 'all happened suddenly, in a crisis'. Most said that, had they not stepped in, the child would have gone into local authority care. Others said they did not know what would have happened (pp. 8, 28). Selwyn *et al* report that some carers felt they had little choice. Most said they did not want the child to go into care and that they felt a sense of obligation (2013, p. 13).

The decision is typically one taken in haste and without good advice or sufficient preparation. In one study, over 75% of carers said that, at the time of taking on the responsibility of full-time childcare, they did not have enough understanding of the legal position to make an informed decision (Aziz *et al* 2012, para 5.6). <sup>41</sup> Carers wanted to 'do the right thing' by taking in the child but were 'largely unaware of the legal options and consequences of what they were doing' (ibid). It seems that social workers did not give them information. Moreover the potentially helpful role of family justice professionals in redressing the imbalance of power between the local authority and the carers is reduced. This is because carers cannot afford legal advice or representation, because of the variability of expertise among solicitors and because there are no guardians in private law proceedings (Hunt and Waterhouse 2013, p. 7). Restrictions on Legal Aid imposed by the Legal Aid, Sentencing and Punishment of Offenders Act 2012 exacerbate the problem.

In addition, once the decision is made, carers often are left to their own devices without help. Carers participating in research studies reported an unmet need for emotional support (Aziz et al 2012 p. 3; Ashley et al 2015, p. 16). They also needed, but did not get, respite care, counselling and help with managing children's behavioural and emotional difficulties (Roth et al undated, para 2.7; Selwyn et al 2013, p. 61) Carers felt they would have

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<sup>&</sup>lt;sup>41</sup> See also Ashley *et al* (2015) pp 2, 20; Hunt and Waterhouse (2012) p.41.

benefited from meeting other kinship carers and this, say Ashley *et al*, highlights 'the isolation and struggle many face alone' (2015 p. 16). <sup>42</sup> Carers may have to contend with interference from troubled parents and even applications for specific issue or prohibited steps orders. They may also be faced with having to manage, alone, contact, and even risky contact, between the child and his or her parents (Selwyn *et al* 2013 p. 38). <sup>43</sup>

So, while the adult children of these grandparents may differ from Boyd's autonomous mothers in that their parenthood may not be planned or supported, 44 grandparents who step in to take on care of their grandchildren are also far removed from that situation. They do so with little choice, with no chance to build networks and they are expected to be financially and emotionally self-sufficient.

## Conclusion

A significant number of grandparents, and more specifically grandmothers, are engaged in the care of their grandchildren, whether full-time or part-time. This they do at considerable cost to themselves in many instances, although many report very positive experiences of watching their grandchildren grow and thrive. Grandparents who become full-time carers perhaps gain the most satisfaction and also sacrifice the most.

Yet grandparents are not autonomous agents when deciding to take on the responsibility of parenting their grandchildren; they are left with little choice if they do not want their grandchildren to go into care. Many care for their grandchildren, not only because they love them, but because they feel they have a duty to do so. Indeed that they should feel this way is now an expectation held by social workers and endorsed by the law. In particular, it is grandmothers who consider themselves responsible for caring for grandchildren. Local Authority social workers implementing the preference in policy and legislation for kinship care also appear to see grandmothers as the prime candidates. And since social workers do not appear to inform grandparents of their options and entitlements, grandparents are not in a position to choose the terms on which they assume responsibility; many do not have access to reliable legal advice. They do not have the time and space to prepare for parenthood and they do not have access to support, whether practical, financial or emotional. In taking on childcare full-time, they sacrifice their autonomy in terms of financial self-sufficiency, lifestyle, social relationships, activities and even in terms of their intimate relationships. They are expected to cope alone with troubled children as well as the troubled parents of those children. Many are not in good health and many are forced to face poverty.

Calasanti has observed the extent to which poverty is exacerbated by 'structural adjustment policies that assume that "families" can absorb the costs' (2010, p. 146). While this observation was made in the context of the global south, it is relevant to grandparent care in Britain. That financial and other support for most grandparent and other family and friends carers is discretionary and often not forthcoming might be attributable to an

<sup>&</sup>lt;sup>42</sup> See also Selwyn *et al* (2013) pp. 51, 67.

<sup>&</sup>lt;sup>43</sup> See Bowyer *et al* (2015) pp. 35-36.

<sup>&</sup>lt;sup>44</sup> We are indebted to Daniel Monk for this observation.

assumption that these carers should be acting out of altruistic motives, out of a sense of duty or a combination of both. It is perhaps an assumption that grandparents ought to be responsible for their grandchildren that sets them apart, even in the eyes of some grandparents themselves, from stranger foster parents. As Beverly Hughes, the then Minister of State for Children, Young People and Families, said in the debate on the 2008 amendments to the Children Act:

We want to see more relative carers receiving financial and other support from local authorities when it is needed. The serious problem with the amendment is that it would, in effect, remove the discretionary aspect of section 17 for this category of children and family carers and effectively give family carers an entitlement in law that birth parents, who may have similar difficulties, currently do not have.

We have to be very clear that it is not the role of local authorities to provide general income maintenance for families, and nor are they resourced to do so. <sup>45</sup>

Friends and family, then, are regarded as being in a similar category to parents. Yet they, and more specifically, grandparents, have not been seen in this light in the past. There is no historically established expectation - in the UK or, indeed in many other western countries - that grandparents care full time for grandchildren. Moreover, there is a difference between the children whose grandparents cared for them in the past and the children put in friends and family care today; the children that modern grandparents are raising are often challenging and with special needs. We are not returning to an age of close extended families. This is new and the burden borne by contemporary grandparents is heavier.

Grandparents, particularly grandmothers, are a significant resource in the neo-liberal climate of privatisation of childcare responsibility. And this resource is exploited by local authorities as cheaply as possible.

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