

An Exploration of Subsidized Grandfamily Housing in the United States:  
What Works

A Dissertation

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## Abstract

Approximately 3 million U.S. children live with a grandparent who is their primary caregiver. Subsidized housing intended to serve grandfamilies has been developed in at least 14 states, however the evidence base for this type of housing is limited. Drawing on Morris and Winter's 1996 Housing Adjustment Theory, this study examined how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. Interviews with 15 grandfamily housing staff members and key partners and focus groups and surveys with 29 grandparent residents were conducted at three sites: Kansas City, MO; Bronx, NY; and Phoenix, AZ. Results indicate that subsidized grandfamily housing programs aid households in meeting housing norms, but some families still struggle to make ends meet; that grandfamilies appear to benefit from living with like households; that lack of child custody and very-low income may present barriers to participation in subsidized grandfamily housing; that neighborhoods appear to play an important role in the success of subsidized grandfamily housing; that several challenges associated with supportive service delivery exist; that changes to security, accessibility features, building policies and utilization of outdoor space may improve residential satisfaction; and that grandchildren may continue to live with grandparent caregivers into adulthood. Study findings hold important implications for the design of future subsidized grandfamily housing, including management policies and supportive services. Recommendations for practice and suggestions for future research, including measurement of long-term housing needs and outcomes for grandfamilies, are discussed.

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## **CHAPTER 1: INTRODUCTION**

This purpose of this study was to examine how subsidized grandfamily housing works for residents. Specifically, this study looked at how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. It was anticipated that through an understanding of "what works" for subsidized grandfamily housing, better informed decisions can be made by housing developers and managers, investors, policymakers, and service providers, with regard to the design of subsidized grandfamily housing. A mixed-methods research design was employed to answer the study's central research questions. Study participants included 29 grandparents living in subsidized grandfamily housing and 15 grandfamily housing site staff who participated in interviews at a single point in time, offering a snapshot view. This chapter provides a detailed picture of grandfamily households in the United States, including current statistics on household characteristics and geographic distribution; a description of the specific housing challenges that grandfamilies face; and a summary of planned and completed subsidized grandfamily housing developments in the United States. This chapter also includes a description of the research problem, the statement of purpose and proposed research questions for this study, and a discussion of the rationale for conducting this research, including its potential significance. This chapter concludes with the definitions of key terms that are important for understanding and evaluating this completed study.

## **Background and Context**

In the last 15 years, there has been more than a 30% increase in the number of children living in households headed by grandparents in the United States (Fuller-Thompson & Minkler, 2001). The number of children cared for primarily by a grandparent rose in the years immediately following the onset of the Great Recession in 2008 (Livingston, 2013). In addition to unfavorable economic conditions, experts claim that the recent opioid epidemic has also been a contributing factor to the rise in children living with grandparents or other relative caregivers (Generations United, 2016). Today, approximately 2.7 million grandparents serve as caregivers for 2.9 million U.S. children under age 18, representing 1.9 million households and accounting for about 4% of children in the United States (American Community Survey, 2014.) In the policy arena, these households are commonly referred to as “grandfamilies.”

Grandparents raising grandchildren is a social phenomenon that exists across all racial groups. In the United States, an estimated 52% of grandparent caregivers are white non-Hispanic, and 48% of grandparent caregivers are persons of color; primarily blacks and Latinos (American Community Survey, 2014). However, the share of children living in grandfamilies and the age of grandparent caregivers both differ by race. Black children are twice as likely to be living with a grandparent who is their primary caregiver than children of other races (Ellis & Simmons, 2014 and Livingston, 2013). The majority of grandparent caregivers are under the age of 60. But, on average, grandparents of color caring for grandchildren tend to be younger than their white counterparts. Nearly three-quarters (73%) of Latino grandparent caregivers and two-thirds (66%) of black grandparent caregivers are under age 60. In comparison, 61% of white non-Hispanic

grandparent caregivers are under the age of 60 (American Community Survey, 2014).

About two-thirds (63%) of all grandparent caregivers are female (American Community Survey, 2014.) Figure 1 provides a detailed race and age break-down of grandparent caregivers.

Table 1. U.S. Grandparents Who Are Primary Caregivers of Grandchildren Under Age 18 By Race and Age

Race	Number of grandparents serving as primary caregivers for grandchildren	Percent Age 30 to 59	Percent Age 60 and over	Share of TOTAL
White	1,762,612	63.5%	36.5%	64.9%
Black	593,974	65.7%	34.3%	21.9%
American Indian	53,253	65.8%	34.2%	2.0%
Asian or Pacific Islander	92,475	46.3%	53.7%	3.4%
Some other race	158,956	75.57%	24.43%	5.9%
Two or more races	54,609	65.1%	34.9%	2.0%
<i>Hispanic or Latino</i>	548,592	72.8%	27.2%	20.2%
<b>TOTAL</b>	2,715,879	64.2%	35.8%	--
Source: U.S. Census Bureau, 2014 American Community Survey 5-Year estimates				

American Community Survey data show that the number of grandfamily households across the United States is not evenly distributed. The southern region of the country has the highest number of grandparents serving as primary caregivers for grandchildren— 2 to 2.5 times that of other regions in the U.S. The states of Texas and California have the greatest shares, accounting for more than half a million grandparent caregivers, and about half of all grandparent caregivers are concentrated in just 10 states. Tables 2 and 3 show the geographic distribution of grandparent caregivers by region and rankings by state.

Table 2. U.S. Grandparents Who Are Primary Caregivers of Grandchildren Under Age 18  
By Region

Region	Number of grandparents serving as primary caregivers for grandchildren
Midwest	488,113
North Atlantic	410,213
South	1,236,682
West	580,871
<b>TOTAL</b>	<b>2,715,879</b>

Source: U.S. Census Bureau, 2014 American Community Survey 5-Year estimates

Table 3: U.S. Grandparents Who Are Primary Caregivers of Grandchildren Under Age 18  
By State

Rank	State	Number of grandparents serving as primary caregivers for grandchildren	Percent share (of all grandparents serving as primary caregivers for grandchildren)
1	Texas	315,330	11.6%
2	California	298,964	11.0%
3	Florida	162,198	6.0%
4	New York	129,948	4.8%
5	Georgia	115,898	4.3%
6	Ohio	100,667	3.7%
7	North Carolina	100,472	3.7%
8	Illinois	97,103	3.6%
9	Pennsylvania	89,251	3.3%
10	Tennessee	75,316	2.8%
11	Michigan	68,151	2.5%
12	Louisiana	66,780	2.5%
13	Virginia	66,770	2.5%
14	Alabama	65,853	2.4%
15	Arizona	64,290	2.4%
16	Indiana	60,948	2.2%
17	South Carolina	58,484	2.2%
18	Kentucky	54,334	2.0%
19	Mississippi	51,708	1.9%
20	Missouri	50,980	1.9%
21	New Jersey	49,355	1.8%
22	Maryland	48,301	1.8%
23	Oklahoma	44,211	1.6%
24	Washington	43,331	1.6%
25	Arkansas	38,342	1.4%
26	Colorado	35,716	1.3%
27	Massachusetts	34,877	1.3%
28	Wisconsin	27,660	1.0%
29	New Mexico	26,375	1.0%
30	Nevada	25,808	1.0%
31	Oregon	24,571	0.9%
32	Minnesota	23,826	0.9%
33	Kansas	21,710	0.8%
34	Connecticut	20,986	0.8%
35	West Virginia	20,986	0.8%
36	Utah	18,703	0.7%
37	Iowa	16,159	0.6%
38	Hawaii	13,139	0.5%
39	Idaho	11,480	0.4%
40	Nebraska	11,179	0.4%
41	Delaware	9,191	0.3%
42	Maine	7,496	0.3%
43	Montana	7,318	0.3%
44	New Hampshire	7,165	0.3%
45	Alaska	6,668	0.2%
46	South Dakota	6,505	0.2%
47	Rhode Island	6,039	0.2%
48	Wyoming	4,508	0.2%
49	District of Columbia	4,133	0.2%
50	Vermont	3,471	0.1%
51	North Dakota	3,225	0.1%

Source: U.S. Census Bureau, 2014 American Community Survey, 5-Year estimates

The majority of children living in grandfamily households are young children. Nearly half (45%) of children being primarily cared for by a grandparent are under age six; about one-third (35%) are between the ages of 6 and 12. Just one-fifth (20%) of children living with grandparent caregivers are between the ages of 13 and 17 (Livingston, 2013).

Data indicate that for most grandparent caregivers, the responsibility of caring for their minor grandchildren is not just a temporary arrangement. Seventy-nine percent of grandparent caregivers have been responsible for their grandchildren for one year or more and nearly 40% have been caring for their grandchildren for five years or more (American Community Survey, 2014). In two-thirds (67%) of all cases, at least one parent also lives in the household (American Community Survey, 2014). In most of these cases (76%), that parent is the mother (Livingston, 2013). In only 8% of cases are both parents in the household. The presence of a parent in the household varies by race. Just half (51%) of black children being cared for primarily by a grandparent have a parent in the household. This share rises to 61% for whites, 66% for Latinos, and 84% for Asians (Livingston, 2013).

Among all grandparents raising grandchildren, the workforce participation rate is approximately 60%. The share of grandparent caregivers working, either part or full-time, rises to 72% for those under age 60. Approximately two-thirds (64%) of grandparent caregivers fall into the “30 to 59” age category. Among grandparent caregivers over age 60, the workforce participation rate drops to 13% (American Community Survey, 2014). In 2014, the median family income for grandfamily households with a parent also present in the household was \$48,705 compared to \$36,315 for grandfamilies without a parent

present (American Community Survey, 2014). Approximately 1 in 5 (21%) grandfamily households has an income below the federal poverty line (American Community Survey, 2014). For grandfamily households with only a grandmother and no parents present, the poverty rate is 48% (Ellis and Simmons, 2014). Among those living in poverty, about half are three or more times below the federal poverty line (Livingston, 2013).

One of the most critical issues that grandfamilies face is the need for affordable housing that meets the needs of both the grandparents and the grandchildren. Grandparent caregivers are often presented with a number of housing-related problems as a result of caring for their grandchildren. Primary challenges include: risk of housing displacement due to lease or program violations; overcrowding and/ or difficulty finding an affordable housing that contains an adequate number of bedrooms; and inability to carry children and strollers up and down stairs, which can be problematic in homes and apartment buildings that do not contain an elevator (Generations United, 2005b). American Community Survey data show that about one-third (31%) of grandparent caregivers live in rental housing (2014). An estimated half of grandfamily renter households spend more than 30% of their household income on rent (Generations United, 2005a). That share rises to 75% for households with incomes at or below 30% of the Area Median Income (U.S. Department of Housing and Urban Development Office of Policy Development and Research, 2008). Approximately one third (32%) of grandfamily renter households and 12% of grandfamily owner households experience what the American Housing Survey defines as a “priority housing problem.” Such problems include either paying 50% or more of gross income for rent and/or living in severely inadequate housing with

plumbing, heating, electrical, or other upkeep problems (U.S. Department of Housing and Urban Development Office of Policy Development and Research, 2008).

According to the U.S. Department of Housing and Urban Development (HUD), about half (55%) of grandparent-headed renter households are eligible to receive federal housing assistance. Among those who are eligible, approximately one third receive some form of subsidy (U.S. Department of Housing and Urban Development Office of Policy Development and Research, 2008). At this time, there are no federally-assisted housing programs specifically intended to meet the needs of grandfamilies. These families may be assisted through the Housing Choice Voucher Program, public housing, Section 202, or Section 811. However, the Department of HUD notes that Section 202 and Section 811 projects are not suitable for intergenerational households, because most dwelling units have fewer than two-bedrooms. In addition, the Section 202 program gives preference to households with at least one member who is 62 years of age or older (Generations United, 2005a).

Nearly two-thirds (64%) of grandparent caregivers are under the age of 60 (American Community Survey, 2014). Some Section 811 projects may contain units with two or more bedrooms, but occupancy in a Section 811 building requires that at least one adult family member (18 years or older) have a physical disability, developmental disability, or chronic mental illness. For grandparent caregivers who are already living in federally subsidized housing at the time they assume care for their grandchildren, it can be difficult to convince housing authorities that they need a larger housing unit if they do not have legal custody of the children (Generations United, 2005b). In addition, some

grandparent caregivers may not want to contact housing authorities for fear of losing their current housing if they no longer meet the bedroom occupancy requirements.

To date, the only federal legislation that specifically addresses the housing needs of grandfamilies in the United States is the LEGACY Act, which stands for Living Equitably: Grandparents Aiding Children and Youth. This bi-partisan bill was passed by Congress in 2003 to address kinship housing challenges (Butts, 2005; Generations United, 2005a). The three major provisions of the bill are: 1) to provide opportunities for demonstration programs based on the concept of Grandfamilies House in Boston, 2) to train and educate federal workers who may misinterpret policies that affect kinship care families, and 3) to conduct a national study of the housing needs of grandparents raising grandchildren (Butts, 2005; Copen, 2006; Butts, 2005 & Generations United, 2005b). However, the provisions of the 2003 LEGACY Act, which were included in the 2003 American Dream Downpayment Act, are not widely known among housing researchers and practitioners. In 2008, the U.S. Department of Housing and Urban Development (HUD) awarded \$3.9 million dollars to support the development of subsidized grandfamily housing demonstration projects in Chicago, Illinois and Smithville, Tennessee (see Table 4); comprehensive training was provided to HUD staff on subsidized grandfamily housing needs in 2007; and in 2008 HUD released, *Intergenerational Housing Needs and HUD Program Options Report to Congress*, fulfilling the last requirement of the LEGACY law (National Low Income Housing Coalition, 2012). Their 2008 study is referenced throughout this chapter.

Since the LEGACY Act was implemented, other cities in the United States have produced housing projects that specifically target low-to moderate-income households

(Generations United, 2005b). These projects have been developed using various funding sources including federal HOME Investment Partnership Program and Community Development Block Grant Program dollars; Low Income Housing Tax Credits; state and local government dollars; and private sources, including financing from banks, CDFIs (Community Development Financial Institutions), foundations, and nonprofit community developers (Generations United, 2005b). A thorough review of existing documentation on these projects reveals that some of the buildings are new construction while others are rehabilitations or additions to existing housing buildings intended for low-income populations. Most subsidized grandfamily housing projects provide some type of supportive services for the families who live there. The most common supportive service offered is tutoring or afterschool programs for school-age children. Other supportive services offered include transportation, case management, support groups, medical care (including mental health services). About half of the existing projects have units that are designated for grandfamilies, but also provide housing for other low-income populations, either seniors or other relative-headed families with children. Although there is no comprehensive list of existing subsidized grandfamily housing developments in the United States, it is estimated that there are 15 projects that have either been completed or planned to date. Table 4 provides a list of subsidized grandfamily housing developments that are known to be in operation or under construction as of October, 2016.

Table 4: Subsidized Grandfamily Housing Developments in the United States: In Operation or Under Construction as of October, 2016.

ID	Name of Grandfamily Housing Project	Status	Location	Number of Units	Bedroom Size	Mixed-Population (includes households other than grandfamilies)
1	Clare Courts	Completed	Baltimore, MD	30 units	2 and 3 bedroom	Yes
2	CRT Generations	Completed	Hartford, CT	24 units	2, 3, 4, bedroom	No
3	Fiddler's Annex	Completed	Smithville, TN	9 units	2 bedroom	No
4	Franklin Field Housing Development	Completed	Boston, MA	15 units	2 bedroom	Yes
5	PSS Grandparent Family Apartments	Completed	South Bronx, NY	50 units	2 and 3 bedroom	No
6	GrandFamilies House	Completed	Boston, MA	26 units	2, 3, 4 bedroom	No
7	Grandfamilies Place of Phoenix	Completed	Phoenix, AZ	56 units	2 and 3 bedroom	No
8	Grandparent's House	Completed	Baton Rouge, LA	30 units	2 bedroom	Yes
9	Ilip Tilixam	Completed	Grand Ronde, OR	3 units	3 bedroom	Yes
10	Kinship Village	Completed	Cleveland, OH	40 units	2 and 3 bedroom	No
11	Las Abuelitas Family Housing	Completed	Tucson, AZ	12 units	2 and 3 bedroom	Yes
12	Pemberton Park	Completed	Kansas City, MO	36 units	2, 3, 4, bedroom	No
13	Plaza West	Under Construction	District of Columbia	223 units	TBD	Yes
14	Roseland Village Intergenerational Apartments	Completed	Chicago, IL	10 units	3 and 4 bedroom	Yes
15	Villard Square	Completed	Milwaukee, WI	47 units	2 and 3 bedroom	Yes

## **Problem Statement**

Although the first subsidized grandfamily housing development in the United States has been in operation for over 15 years now— GrandFamilies House in Boston, Massachusetts opened for occupancy in Fall 1998— the development of housing intended for grandparents providing primary care for their minor grandchildren is still a relatively new concept. Subsidized grandfamily housing projects in Louisiana, New York, and Chicago were established in the mid-2000s also, but the majority of existing projects are less than five years old. It is anticipated that, with the growth of grandfamily households since the Great Recession (Livingston, 2013) and the increased awareness of grandfamilies' housing needs among policymakers and social service providers (Gottlieb & Silvertein, 2003), there will be additional subsidized grandfamily housing developments produced in the near-term. It is assumed that such programs improve the lives of grandfamilies by providing stable housing and needed services, yet the evidence base for subsidized grandfamily housing is limited.

To date, there have been very few studies published on the efficacy of subsidized grandfamily housing for the households it is intended to serve. Additionally, little information is known about grandfamilies' housing preferences and the factors that contribute to their residential satisfaction. And, in practice, some subsidized grandfamily housing developments have proven to be unsuccessful in recruiting and retaining grandfamilies as tenants. While there have been numerous studies published on grandparents raising grandchildren, most of these studies address grandfamilies' needs and preferences from a healthcare, social work, or psychology perspective. Although some authors do mention housing as it relates to health problems or housing

circumstances as a barrier to caring for grandchildren, their research does not focus on grandparent caregivers' housing experiences nor does it examine grandfamilies' needs through a housing lens.

## **Statement of Purpose and Research Questions**

The purpose of this study was to examine how subsidized grandfamily housing works for residents. Specifically, this study looked at how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. It was anticipated that through an understanding of "what works" for subsidized grandfamily housing, better informed decisions can be made by housing developers, investors, policymakers, and service providers, with regard to the design of subsidized grandfamily housing. To shed light on the information gaps identified, this study addressed the following research questions:

1. How does subsidized grandfamily housing influence grandfamilies' housing constraints?
2. How does subsidized grandfamily housing moderate grandfamilies' housing deficits?
3. How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation?

## **Rationale and Significance**

The rationale for this study was based on the lack of evidence-based information regarding the effectiveness of subsidized grandfamily housing and the lack of evidence-based information regarding grandfamilies' housing experiences in general. This study

offers new knowledge about the influence of subsidized grandfamily housing on residential satisfaction and family well-being, and also new information on grandfamilies' housing needs and preferences. The results of this study hold important implications for future design of, investment in, and best practices related to the operation of subsidized grandfamily housing. Findings from this study are likely to be of interest to both researchers and practitioners who are interested in the development of subsidized grandfamily housing and/or improving quality of life for grandfamilies.

### **Definitions of Key Terms**

For the purposes of understanding and evaluating this proposed study, the following key terms are defined.

**Grandfamily:** A term used in the policy arena to describe households headed by a grandparent who is the primary caregiver of their minor grandchildren. The household may also include one or both of the children's parents.

**Subsidized grandfamily housing:** A housing program that is specifically designed and intended for grandfamily households. These programs are typically multifamily, include a rental subsidy that limits tenants from paying more than 30% of their gross household income for rent, and provide limited supportive services to grandparents and grandchildren.

**Housing constraints:** A set of six factors identified by known housing theorists, Morris and Winter, which contribute to households' ability to meet housing norms. These factors include predisposition, resources, organization, market, culture, and discrimination.

**Housing norms:** A set of six factors related to the housing environment identified by known housing theorists, Morris and Winter. These factors include pace, structure, quality, expenditure, tenure, and neighborhood.

**Housing deficit:** Any non-normative condition related to the six housing factors identified by known housing theorists, Morris and Winter. These include deviations from space, structure, quality, expenditure, tenure, and neighborhood norms.

**Residential satisfaction:** Level of contentment with the housing environment, which includes the housing unit, the housing development in which the housing unit is contained, and the neighborhood in which the housing development is located.

**Family well-being:** A set of indicators related to social-emotional and physical health that influence grandfamily household members' overall quality of life. These include physical health, mental health, quality of relationships, and school performance.

## **CHAPTER 2: LITERATURE REVIEW**

### **Introduction**

The purpose of this study was to examine how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. In order to design this study effectively, an ongoing review of the literature was conducted to inform the research. In addition to housing literature, the researcher reviewed published works in journals associated with gerontology, sociology, social work, psychology, public health, and medicine to shed light on issues related to grandfamilies housing constraints, residential satisfaction, and emotional well-being. Information on the design and efficacy of subsidized grandfamily housing was scant, and further confirmed the need for this study.

A thorough review of the literature revealed that most of the existing studies on grandparents raising grandchildren are from the fields of gerontology, social work, psychology, and healthcare. Although researchers in these fields bring valuable perspectives that can shed light on the housing challenges that these families face, there is a gap in the literature when it comes to studies that analyze grandfamilies' housing needs through existing housing theory and/or that offer housing-specific recommendations. In fact, there are only two known studies in the literature that examine residential satisfaction for grandfamily households, both of which are discussed in this chapter. The American Community Survey and American Housing Survey both offer rich sources of data that can be used to analyze the demographics of grandfamily households and whether they meet housing structure, quality, expenditure, and tenure norms, but these data do not capture grandparent householders' perceptions and experiences with their

current housing, which are critical to thoroughly understanding the factors that influence grandfamilies' residential satisfaction and family well-being as it relates to their housing.

One housing theory model that is particularly useful for understanding the housing needs of grandfamilies and for evaluating the effectiveness of subsidized grandfamily housing is Morris and Winter's Housing Adjustment Theory (1996). This model includes six types of housing constraints (predisposition, resources, market, organization, culture, and discrimination) that influence the household's ability to meet its desired housing conditions, where six U.S. cultural housing norms (space, structure, quality, expenditure, neighborhood and tenure) are used as proxy measures for desired household conditions. Failure to meet these established housing norms results in what Morris and Winter call "housing deficits," deviations from the norms that are presumed to generate dissatisfaction, which in turn influences the household's desire to make housing adjustments (changes to the housing itself) or housing adaptations (changes to the household) in order to remove these housing deficits. The inability to make housing adjustments or adaptations that lead to the removal of housing deficits is presumed to lead to pathology, which over an extended period of time, could result in deteriorated mental and/or physical health for household members. Although this theory was originally intended to explain how households make decisions about their housing, and particularly their propensity to move, it provides a useful framework for understanding the housing needs of grandfamilies and for evaluating how subsidized grandfamily housing influences residential satisfaction and family well-being.

Previous research conducted by housing experts supports the use of Morris and Winter's housing adjustment model to guide the study of housing-related needs and

problems among elderly household heads and also household heads with low economic status (Ziebarth & Steggell, 2011) and how they evaluate their housing. Drawing upon Morris and Winter's concept of housing adjustment, one study examined household demographic characteristics, health, and housing status as predictors of the need for help by households headed by persons age 65 or older (Krofta, et. al, 1994). A subsequent study utilized Morris and Winter's concept of housing constraints to examine how single mothers with very low incomes engage in adaptive housing behaviors (Bruin & Cook, 1997). This study does not seek to test or confirm Morris and Winter's 1996 Housing Adjustment Theory, but through its application, offers potential insight regarding its utility for analyzing the housing needs, preferences, mobility, and residential satisfaction of grandfamilies living in subsidized housing.

To conduct the literature review for this study, the researcher used multiple sources of information including peer-reviewed academic journals; research reports published by trusted, nonpartisan institutions including Pew Research Center, Annie E. Casey Foundation, Generations United and the Gerontology Institute at the University of Massachusetts Boston; data from the U.S. Census Bureau; and online websites for existing and planned subsidized grandfamily housing projects. Journal articles were identified using the following indexing databases: Academic Search Premier, EBSCO Megafire, Medline/Pub Med, and PsycINFO. Throughout the review, the researcher focused on two major areas: studies that discussed the constraints identified in Morris and Winter's 1996 Housing Adjustment Theory model and studies that focused on the housing needs and experiences of kinship caregivers. This chapter includes a synthesis of the literature as it relates to the six housing constraints (predisposition, resources, market,

organization, culture, and discrimination) and six housing norms (space, structure, quality, expenditure, neighborhood and tenure) identified by Morris and Winter and a summary of key findings from the post-occupancy evaluations conducted for GrandFamilies House in Boston, Massachusetts and Villard Square in Milwaukee, Wisconsin. The chapter concludes with description of the conceptual framework that will be used for this study.

## **Discussion on Grandfamilies Housing Constraints**

### **PREDISPOSITION**

According to the literature, members of grandfamilies are predisposed toward a number of health problems that can influence their housing needs and choices. In fact, several studies show that the incidence rates of depression, diabetes, hypertension, obesity, insomnia, and limited mobility are greater among grandparent caregivers than their non-caregiver counterparts (Minkler & Fuller-Thompson, 1999; Strawbridge, Wallhagen, Shema, & Kaplan, 1997; Szinovacz, DeViney, & Atkinson, 1999; Whitley, Kelley, & Sipe, 2001). One study which examined transitions in grandmothers' caregiving roles showed that those who serve as primary caregivers experience more stress and poorer health than those in multigenerational households or in non-caregiving roles (Musil, Warner, Zauszniewski, Standing & Wykle, 2010). In cases with no parent present in the household, grandparent caregivers may be prone to grief and other mental health problems related to the death, incarceration or drug problems of their own child (Baird, 2003; Bundy-Fazioli, Fruhauf, & Miller, 2013; and Wohl, Lahner, & Jooste,

2003). In cases with a parent present in the household, studies suggest that grandparent caregivers are likely to experience stress related to disappointment in or resentment of their own child (Gladstone, Brown, & Fitzgerald, 2009; Shore & Hayslip, 1994; Wohl et al., 2003). They are also likely to experience stress as a result of living in a household with grandchildren (Generations United, 2015 and Hayslip, Shore & Henderson, 1998). In addition, grandparents are likely to struggle with maintaining healthy boundaries with their adult child (Bundy-Fazioli, et al., 2013). The transition of the grandparent into the role of kinship caregiver causes a social and emotional toll on all family members whether it is informal, contractual, or permanent (Sampson & Hertlein, 2015; Testa, 2013). Despite these problems, many grandparents feel a strong sense of obligation to care for their grandchildren (Sampson & Hertlein, 2015).

The presence of mental or physical health problems can either increase or decrease a given household's propensity to make housing adaptations or adjustments (Morris & Winter, 1996). On one hand, depression could limit the householder's self-efficacy, which might prevent the householder from moving the family or making alterations to the home that increase residential satisfaction. On the other hand, significant health problems could prompt the householder to move the family closer to needed health care facilities. According to the literature, an adaptation that results in re-organization of the household is unlikely. In one study, 90% of grandparent caregivers said that they would still take responsibility for their grandchildren if they had the choice to make again (Hayslip & Shore, 2000).

In addition to the health problems frequently experienced by grandparent caregivers, there is evidence in the literature that indicates that grandchildren living in

grandfamilies often experience health problems, too. Children may be grieving the loss of a parent (Levine-Perkell & Hayslip, 2002) and they may suffer from asthma, frequent illness, or other physical health problems associated with poor sleeping and eating patterns (Minkler & Roe, 1996; Shore & Hayslip, 1994). A study on the prevalence of overweight and obese children in multigenerational households found that co-residence with a grandmother was associated with increased risk of obesity at ages 3, 5, and 9, increasing the lifetime risk of obesity in adulthood (McKinney, 2015). According to the study author, poverty, insulin resistance linked to stress, and grandmothers' tendency to "spoil" grandchildren with unhealthy food or to adhere to outdated dietary guidelines are all potential triggering factors (McKinney, 2015). Research shows that children living in grandfamilies are more likely than other children to have social and behavioral problems due to the circumstances that led to the caregiving relationship (Generations United, 2005a and Hayslip et al., 1998), including high rates of behavioral problems in school (Solomon & Marx, 1995). One study found that adolescent children raised by grandparents are significantly more likely to be perpetrators of bullying behavior than children living in other care arrangements (Edwards, 2015). In other cases, some children have been exposed to drugs or alcohol in utero that have resulted in them having special needs (Altschuler, 1998). All of these problems can create stress for the household that is likely to result in decreased residential satisfaction (Morris & Winter, 1996). These documented predispositions and the fact that grandparents frequently need assistance and help from family social workers (Cox, Brooks, & Valcarcel, 2000) indicate that many grandfamilies may benefit from housing with supportive services.

According to 2014 American Community Survey data, there are also high rates of disability among grandparent caregivers. Nationwide, one in four grandparents (25%) who are primary caregivers of their grandchildren has a disability (Livingston, 2013). Additionally, 12% of the parents living in grandfamily households have a disability (Livingston, 2013). Households in which one member has a disability may face limited housing options, particularly if an accessible unit is needed. In contrast to grandfamilies living in ownership housing, grandfamilies living in rental housing are likely to have less freedom to make alterations to their living space and may not be able to afford the addition of accessibility features (Morris & Winter, 1996).

## **ORGANIZATION**

Age is a factor related to household organization that is likely to influence grandfamilies' housing choices and their ability to meet cultural housing norms. This is true with respect to both the age of the grandparent caregivers and the age of the grandchildren. According to the 2014 American Community Survey, 34% of grandparent caregivers are 60 years of age or older. Age may limit these householders' behaviors in response to existing housing deficits. For example, a younger person who is constrained by limited income may pursue additional education or training with the expectation that he or she will obtain a higher paying job that will allow them to purchase a larger rental unit or house. However, the benefits of obtaining additional education or training may not outweigh the costs for someone who is approaching retirement age. Additionally, someone who is 60 years of age or older may not find it advantageous to assume a 30-year mortgage even if the additional space and amenities provided by a new home are

likely to produce increased residential satisfaction. Finally, grandparent caregivers over 60 may experience health problems that limit their ability to maintain and care for a single-family home, which is the structure norm for families with children (Morris & Winter, 1996).

## **MARKET**

The age and presence of grandchildren can also influence grandfamilies' market constraints particularly if they are renters, and especially if they live in subsidized housing (Fuller-Thompson & Minkler, 2003; Morris & Winter, 1996). Grandparent renters who take in grandchildren, even temporarily, may risk violating existing lease agreements, which could eventually lead to eviction. Similarly, low-income grandparents who rely on housing subsidy programs, such as the Housing Choice Voucher Program, public housing, or Section 202, may be at risk for losing their housing if the presence of grandchildren violates existing program requirements (Fuller-Thompson & Minkler, 2003; Morris & Winter, 1996). Some of the housing market constraints for grandfamilies caused by a lack of education and training for housing authorities who routinely misinterpret the guidelines regarding familial status and age restrictions (Generations United, 2005a). According to the Department of Housing and Urban Development (HUD) Handbook of Occupancy Requirements for Subsidized Multifamily Housing Programs, owners may not exclude otherwise eligible families with children from the properties (Generations United, 2005a). Still, many grandparent caregivers living in senior housing experience worry about eviction when their grandchildren come to live with them (Generations United, 2005a). In addition to program and lease constraints,

renter grandfamilies may also be subject to tight housing market conditions. Across the nation, rental vacancy rates are currently at a ten-year low, and rental housing in many cities is in short supply.

Other program constraints that can also indirectly restrict the housing choices of grandfamilies are state licensing requirements for foster homes and state welfare program requirements (Copen, 2006). For very low-income families, the TANF (Temporary Assistance to Needy Families) program is the single largest source of cash assistance for grandparents under the age of 65 who are caring for grandchildren (Mullen & Einhorn, 2000), although according to the U.S. Census Bureau, only 14% of grandfamily households without a parent present receive Temporary Assistance to Needy Families (TANF) funds (Beltran, 2015). In all states, TANF recipients are subject to work requirements as part of the Personal Responsibility and Work Opportunity Reconciliation Act (PWORA) (Copen, 2006). Although intended to promote self-sufficiency, most states do not take into consideration the needs of older adults caring for grandchildren. Nearly half of the children (45%) living in grandfamilies are under the age of six (Livingston, 2013) and thus require childcare. However, only 28 states provide hardship exemptions for persons age 60 and older that would exclude grandparent caregivers from federal sanctions if they do not meet program work requirements (Generations United, 2014). Depending on the state and the exemptions made, TANF family grants may not be available for re-tired relative caregivers or for caregivers who will need assistance for more than 60 months (Generations United, 2014).

Foster care licensing requirements can also negatively impact housing options for grandparent-headed households (Copen, 2006). Although all states are required to

provide the same payments to kinship caregivers that they do to non-kinship caregivers, the Adoption and Safe Families Act of 1997 restricts federal reimbursements to states unless relatives meet the same licensing standards as non-relatives (Copen, 2006). In some cases, grandparent caregivers will choose not to become involved in the child welfare system for fear that they may be unable to meet licensing requirements, and in turn, risk losing their grandchildren to a non-kin foster care home (Jendrek, 1994). It is estimated that grandparent caregivers save taxpayers an estimated \$4.0 billion dollars a year by keeping children out of foster care (Generations United, 2016). According to Generations United, for every child in foster care with relatives, there are 20 children being raised by grandparents or other relative caregivers outside of the foster care system (Generations United, 2016).

## **RESOURCES**

Sixty percent of all grandparent caregivers are in the labor force. However the workforce participation rate among grandparent caregivers over the age of 60 is just 13% (American Community Survey, 2014). Additionally, an estimated 49% of grandfamilies are low- to moderate-income, or have household incomes at or below 80% of the Area Median (U.S. Department of Housing and Urban Development Office of Policy, Development, and Research, 2008). In 2014, the median family income for grandfamily households with a parent also present in the household was \$44,705 compared to \$36,351 for grandfamilies without a parent present (American Community Survey, 2014). Although the majority of grandparent caregivers are active workforce participants, approximately 1 in 5 (21%) has an income below the federal poverty line. Among those

living in poverty, about half are 3 or more times below the federal poverty line (Livingston, 2013).

Many grandparents experience a decline in financial well-being when they become caregivers. Triggers include the cost of obtaining legal custody, the cost of raising grandchildren, and sometimes the cost of forgoing paid work in order to provide care for grandchildren (Generations United, 2015). In addition, some grandparent caregivers continue to provide for their grandchildren financially after they reach adulthood because they are in college or do not earn enough to live independently (Generations United, 2015). Such findings indicate that many grandfamilies are subject to income constraints that may limit their ability to make housing adjustments, which may be required to meet the space, tenure, quality, expenditure, and neighborhood norms for families with children in the United States (Morris & Winter, 1996).

Grandparent caregivers also have relatively low levels of education, which could influence their ability to obtain employment and obtain needed services for themselves or their grandchildren. More than half (60%) of grandparent caregivers do not have any college experience and one quarter (26%) do not have a high school diploma (Livingston, 2013).

In addition to lack of income and education, grandfamilies may face other resource constraints that affect their ability to obtain adequate housing and provide a good home environment for their grandchildren. One example is the underutilization of housing subsidy programs that are available. According to a report to Congress by the U.S. Department of Housing and Urban Development Office of Policy, Development, and Research, 55% of grandfamilies are eligible for housing assistance, but only about

30% are receiving it (2008). This behavior may stem from a lack of knowledge or it could be the result of voucher under-utilization since the supply of subsidized housing in many areas is limited. Among grandparent caregivers who do receive housing assistance, public program asset limits sometimes create a disincentive to save, which in turn can exacerbate financial insecurity (Generations United, 2015). Research on social service use among grandparent caregivers indicates that usage rates are low in comparison to unmet need (Carr, Gray, & Hayslip, 2012; Yancura, 2013). Some grandparent caregivers may avoid seeking benefits because they do not want to become involved with the child welfare system (Bertera & Crewe, 2013; Gladstone et. al, 2009).

Grandparent caregivers may also experience limited resources related to training and peer support which can indirectly affect households' ability to adjust and adapt (Hayslip & Kaminski, 2005; Morris & Winter, 1996). Studies show that social isolation and inadequate social support can be major obstacles for custodial grandparents (Fruhauf & Hayslip, 2013; Wohl et al., 2003). With respect to parenting skills, one study demonstrated that grandparent caregivers were less likely to be aware of and respond to children's social-emotional needs—a factor that could reduce households' propensity to move in response to or in anticipation of pathology created by prolonged housing deficits (Hayslip & Kaminski 2005; Morris & Winter 1996). Research shows that grandparents can benefit from formal support mechanisms that support their role as caregivers such as support groups, legal services, and afterschool programming (Gerard, Landry-Meyer, & Roe, 2006) and also nutrition and physical activity interventions (Kicklighter, Whitley, Kelley, Shipskie, Taub, & Berry, 2007).

## **DISCRIMINATION**

Grandfamilies are at risk for several types of discrimination that may limit their housing choices. Low-income grandfamilies who rent may encounter landlords who are unwilling to rent to them because of age, race, or presence of children in the household. Grandparent caregivers may also face discrimination from employers and managers of housing and income subsidy programs. According to the literature, an estimated 92% of grandparent caregivers do not receive any social security benefits and 85% do not receive any public benefits (Dellmann-Jenkins, Blankemeyer & Olesh, 2002; Landry-Meyer 2000). Nationwide, 60% of grandparent householders who are primary caregivers for their grandchildren are in the workforce (American Community Survey, 2014). However, several of these individuals may be at risk for discrimination from employers based on their age, race, and work history— particularly older women who have been out of the workforce for many years (Copen, 2006). Discrimination against grandparent caregivers by government employees can occur when seeking safety net benefits because administrators either believe that they are trying to “cheat the system” (Waldrop & Gress, 2002) or that they are ineligible because they do not have legal custody of their grandchildren (Minkler & Odierna, 2001).

According to Generations United, many children living in grandfamilies do not have a legal relationship with their grandparent caregivers. Sometimes the grandparents lack the resources necessary to establish a legal relationship. In other cases, the grandparents do not want to terminate their own child’s parental rights to their grandchildren (Generations United, 2005a). Without a legal relationship, grandparent

caregivers can experience difficulty accessing needed services for their grandchildren, including school enrollment, healthcare, food assistance, and housing assistance (Generations United, 2005a and Landry-Meyer, 1999) and claiming child rearing expenses on their income taxes (Gladstone et al., 2009).

## **CULTURE**

According to the literature, the housing norms and preferences of grandfamilies do not differ greatly from those of mainstream culture (Fuller-Thompson & Minkler, 2003). However, studies do reveal some differences across ethnic groups that should be taken into consideration when addressing the needs of these families (Fuller-Thompson & Minkler, 2003; Goodman, 2007). For example, Latino and black grandparents are more likely to co-parent with one of the grandchild's parents than are white grandparents (Cox et al., 200; Ellis & Simmons, 2014; Livingston, 2013; Pebley & Rudkin, 1999). These cultural differences in parental expectations may positively influence the success of grandparent caregivers, where grandparent caregiving is normalized compared to the nuclear family in white culture (Hayslip, 2009). It is worth noting that grandparents of color are also more likely to be associated with demographic characteristics that put families at high risk for housing vulnerability including lower levels of education, poverty, and being unmarried than are whites (Bertera & Crewe 2013, Livingston, 2013 and U.S. Bureau of the Census, 2014).

## **Discussion on Grandfamilies Housing Deficits**

### **SPACE**

According to Morris and Winter's Housing Adjustment Theory, in order for a household to meet space norms in the United States the person-per-room ratio should equal 1 to 1 (1996). Households with any number that deviates from this 1-to-1 ratio are said to have a space deficit (Morris & Winter, 1996). In addition, the normal person-per-bedroom ratio is 2 to 1, with additional considerations given to age, sex, and relationship. (In some cases, it is not appropriate for two persons to be sharing a bedroom.) Based on U.S. Census data, an estimated 17% of renter grandfamilies live in crowded conditions (U.S. Bureau of the Census, 2001). In addition, data indicate that two-thirds (68%) of grandfamilies contain three generations of family members (U.S. Bureau of the Census, 2014). Failure to meet space norms may make it difficult for intergenerational families to achieve desired privacy, which can create stress and result in the manifestation of what Morris and Winter refer to as pathological behavior (Morris & Winter, 1996). Although space deficits are often the reason why families seek to move (Morris & Winter, 1996), many low- to moderate-income grandfamilies may not be able to overcome space deficits due to resource constraints. Opportunities to earn increased income, which could in turn enable the family to move to a larger unit, may be limited by both age and low educational attainment. Housing additions, which are sometimes built in order to overcome space deficits, are also not an option for 31% of grandfamily households that live in rental housing (U.S. Bureau of the Census, 2014).

## **EXPENDITURE**

According to Morris and Winter, it is assumed that expenditure norms vary based on socioeconomic status (Morris & Winter, 1996). In addition, established expenditure norms for housing in the United States have changed over time, although less than 30% of total gross household income remains the industry standard for housing expenditures. This threshold is used to set affordability guidelines for many federal housing programs. Households that spend between 30% and 50% of their total income on housing costs are said to be “cost-burdened.” Those that spend more than 50% of their total income on housing are said to be “severely cost-burdened.” While it is true that some middle- and upper-income households spend more than 30% of their income on housing, housing costs in excess of 30% for low- to moderate-income households leaves little money left over for other household necessities, such as food, healthcare, and clothing.

According to American Housing Survey data, a large proportion of grandfamilies fail to meet expenditure norms. An estimated one-half of renter grandfamilies spend more than 30% of their gross household income on rent (Generations United, 2005a). That share rises to 75% for households with incomes at or below 30% of the Area Median Income (U.S. Department of Housing and Urban Development Office of Policy Development and Research, 2008). Common predispositions among grandparents, grandchildren, and co-resident adult children in grandfamily households that can limit their ability to afford housing are high rates of disability (U.S. Bureau of the Census, 2014) and chronic health problems (Gottlieb & Silverstein, 2003; Minkler & Fuller-Thompson, 1999; Strawbridge et al., 1997; Szinovacz et al., 1999). Both are associated with increased healthcare costs and potentially limited ability to earn income.

## **QUALITY**

According to Morris and Winter, there are several different ways to measure housing quality and federal government definitions of housing quality have changed over time. The American Housing Survey uses a three-category index that classifies housing units as adequate, moderately inadequate, or severely inadequate based on the presence of plumbing, heating, or electrical problems (Morris & Winter, 1996). The definitions are based on risk of exposure to toxins and other harmful environmental factors and also access to hot water and electricity (Raymond, Wheeler, & Brown, 2011).

Government data indicate that approximately one third (32%) of grandfamily renter households and 12% of grandfamily owner households experience what the American Housing Survey defines as a “priority housing problem,” which includes either paying 50% or more of gross income for rent and/or living in severely inadequate housing with plumbing, heating, electrical, or other upkeep problems (U.S. Department of Housing and Urban Development Office of Policy Development and Research, 2008). It is worth noting that the prevalence of inadequate housing is greatest for low- to moderate-income grandfamily households— those with incomes between 30% and 80% of the U.S. Median Family Income (MFI). An estimated 15% of renter grandfamilies at or below 80% MFI live in moderately or severely inadequate housing compared to just 6% of those who are middle-income (above 80% of MFI) and 6% of those who are very low-income (below 30% of MFI) (U.S. Bureau of the Census, 2001). The reason for this pattern is that very low-income households are more likely to live in government subsidized housing, which is subject to regulation.

A report from the Centers of Disease Control, which included a comparative analysis of 2007 and 2009 American Housing Survey data, highlighted large disparities in housing inadequacy across different racial groups (Raymond et al., 2011). According to American Housing Survey data, black and Latino householders are significantly more likely to live in moderate or severely inadequate housing conditions than are white householders (Raymond et al., 2011). This is an important factor to consider when evaluating the housing deficits of grandfamilies of color as these families are more likely to experience deviation from quality norms.

## **TENURE**

In the United States, homeownership is the cultural norm for households with children (Morris & Winter, 1996). While a majority of grandfamily households (69%) live in ownership housing (U.S. Bureau of the Census, 2014), some grandparent caregivers' low levels of education and income make it is unlikely that they will ever be able to obtain homeownership. An estimated one-half of grandfamily renter households have incomes at or below 50% of the Area Median (U.S. Bureau of the Census, 2001) and 1 in 5 (22%) grandfamilies has an income below the federal poverty line. Among those living in poverty, about half are three or more times below the federal poverty line (Livingston, 2013). Additionally, several studies indicate that grandparent caregivers are likely to experience physical and mental health problems (Baird, 2003; Bundy-Fazioli, et al., 2013; Gottlieb & Silverstein, 2003; Minkler & Fuller-Thompson, 1999; Strawbridge et al., 1997; Szinovacz et al., 1999; Wohl et al., 2003) that could interfere with their ability to keep up with the maintenance requirements of a house.

## **NEIGHBORHOOD**

Little is known about how neighborhood living conditions influence the emotional well-being of grandparent caregivers (Longoria, 2009). However, some studies suggest that neighborhood conditions do influence the emotional well-being of grandparents raising their grandchildren (Burton, 1992; Gottlieb & Silverstein, 2003; Minkler & Roe, 1993). Using data from the National Survey of Adolescent Well-Being (NSAW) to construct a random sample of grandparent caregivers and NSAW's Community Environment Scale to assess perceived neighborhood risk, one study found that higher levels of perceived neighborhood risk were associated with decreased levels of grandparent caregiver emotional well-being (Longoria, 2009). According to Longoria, neighborhood disorder can lead to a decrease in grandparent caregivers' sense of personal control which can decrease their levels of emotional well-being, particularly if they feel powerless to change the situation (2009). An evaluation of GrandFamilies House located in the Dorchester neighborhood of Boston found that residents' dissatisfaction with the noise levels, crime, and lack of social activities in the neighborhood had a negative impact on grandparent caregivers' emotional well-being (Gottlieb & Silverstein, 2003). Researchers suggest that practitioners should carefully consider the degree to which neighborhood conditions can impact the well-being of grandparents raising grandchildren (Longoria, 2009; Gottlieb & Silverstein, 2003). Additionally, it is recommended that future studies that examine the relationship between neighborhood characteristics and grandparent caregiver well-being should seek to identify the factors that positively contribute to grandparents' emotional well-being (Longoria, 2009).

## **Post-Occupancy Evaluation of GrandFamilies House**

To date, there are only two studies in the literature that shed light on “what works” for subsidized grandfamily housing and the factors that contribute to grandfamily households’ residential satisfaction. Researchers affiliated with the University of Massachusetts Boston Gerontology Institute conducted two post-occupancy evaluations of the subsidized grandfamily housing development, GrandFamilies House, located in the Dorchester neighborhood of Boston. The first study was conducted in 1999 at six-months and the second study was conducted in 2002 after four years of operation (Gottlieb & Silverstein, 2000; Gottlieb & Silverstein 2003). Although the study findings cannot be generalized to all subsidized grandfamily housing sites, they hold important implications for the development of future subsidized grandfamily housing projects, particularly in instances where GrandFamilies House is being used as the model.

The six-month follow-up evaluation included interviews with 20 of the 26 grandparent caregivers who were living in the building at the time. Interviewees were asked to describe their expectations about living at GrandFamilies House at the time they moved into the housing and their current perceptions of the building facility and its programs (Gottlieb & Silverstein, 2000). Grandparents provided feedback on the building’s characteristics, program and service use, and the sense of community (or lack thereof) within the housing development. Grandparents were also asked a short set of questions about their mental health (Gottlieb & Silverstein, 2000). Study findings on whether GrandFamilies House had met grandparent caregivers’ housing expectations were mixed. Some of the grandparents expressed satisfaction because the housing was an improvement over previous living conditions. However, several grandparents had very

high expectations for living at GrandFamilies House and expressed dissatisfaction with the building's lack of cleanliness, lack of amenities, and lack of social activities offered (Gottlieb & Silverstein, 2000). Study authors reported that grandfamilies use of social services and other income support programs, with the exception of housing subsidy, had either remained the same or decreased since moving to GrandFamilies House. Most notable was decreased access to counseling services for children (Gottlieb & Silverstein, 2000). Researchers also assessed grandparents' emotional health using six items adapted from the Affect-Balance scale established by Bradburn in 1969 (Gottlieb & Silverstein, 2000). About half of the grandparents interviewed reported experiencing positive emotions in the past month, including feelings of achievement, excitement, and contentment with "the way things are going." Half of the grandparents also reported experiencing negative emotions during that same time period, including feelings of depression, loneliness, and boredom (Gottlieb & Silverstein, 2000).

During the interviews, grandparent caregivers expressed a desire for air conditioning in the apartment units, private front porches, and more social activities for both grandparents and grandchildren. Specifically, they identified a lack of activities for older youth and a lack of community space in the building (Gottlieb & Silverstein, 2000). Based on the study results, researchers recommended that subsidized grandfamily housing program developers and funders provide chaperoned activities for older youth; more on-site activities for grandparents, including computer training and fitness classes; services that address grandparents' transportation and childcare needs; and increased opportunities for resident involvement in decision-making about space utilization, policies, and programs (Gottlieb & Silverstein, 2000).

The four-year follow-up evaluation of GrandFamilies House in Boston included interviews with 11 key-informant interviews with site staff, administrators from collaborating agencies, and a member of the GrandFamilies House community task force; interviews with 10 grandparent residents representative of the overall building population, and a focus group with older youth residents [age 13 to 17] (Gottlieb & Silverstein, 2003). Grandparent interviewees were asked whether GrandFamilies House has made it easier or more difficult to raise their grandchildren. Of the 10 grandparent caregivers interviewed, only three indicated that living at GrandFamilies House had made caring for their grandchildren easier. The remainder said that conditions at GrandFamilies House had made things more difficult (Gottlieb & Silverstein, 2003). Stresses that grandparent caregivers indicated had worsened their situation included interactions with problem residents, maintenance problems with the building, and livability issues with the neighborhood, including noise and crime (Gottlieb & Silverstein, 2003). A few grandparents talked about their lack of acceptance in the community and the belief that neighbors did not want GrandFamilies House in the neighborhood (Gottlieb & Silverstein, 2003). Grandparents were also asked about their long-term plans for living at GrandFamilies House. Of the 10 grandparent caregivers interviewed, only two expected to live at GrandFamilies House until their grandchildren were grown. At the time the interviews were conducted, four respondents were in the process of moving out and four respondents indicated that they would consider moving if they could find better affordable housing (Gottlieb & Silverstein, 2003).

Study authors identified three major problems with GrandFamilies House at the time of the four-year follow-up evaluation, including inadequate supportive services,

structural design problems, and insufficient building policies. These issues are discussed in greater detail in the paragraphs that follow. Information gathered from key informants indicate that program developers for GrandFamilies House did not adequately plan for the range of supportive housing services needed by several of the grandfamilies living there. Such services include programs to address grandchildren's social-emotional behavior problems and programs to address grandparents' healthcare needs. Site staff reported that a number of the grandparents living at GrandFamilies House had physical disabilities, issues related to chemical dependency, and/or experienced frequent hospitalizations. At the time the interviews were conducted, the only supportive services that the building offered were afterschool programs and social activities for youth ages 12 and younger even though half of the grandchildren living in the building were teens. Stakeholders involved in the planning of supportive services for GrandFamilies House did not give adequate consideration to the aging of the grandparents nor the aging of the children (Gottlieb & Silverstein, 2003).

Key informants and grandparents also identified a number problems related to the structural design of the building. The design plans for GrandFamilies House involved the rehabilitation of an older, existing two-story nursing home that resulted in housing development with limited natural lighting, narrow hallways, and a lack of community space. In addition, the building did not provide any storage for grandchildren's outdoor toys including bicycles and sports equipment. Other structural design problems identified included inadequate ventilation, sewage backup, insufficient sound proofing, and concerns about fire safety (Gottlieb and Silverstein, 2003).

A number of issues related building policies, or lack thereof, were also identified by key informants. At the time of the four-year evaluation, GrandFamilies House did not have sufficient policies or supports in place to address the relocation of grandparents when the grandchildren age out of the program (Gottlieb & Silverstein, 2003). The building also lacked sufficient tenant screening policies. According to site staff, this had led to the acceptance of building residents whose health problems either required supportive services or disability accommodations that the building did not offer or caused problems for other building residents (Gottlieb & Silverstein, 2003). Other policy issues identified included inadequate building security, problems with managing maintenance requests, and needing to evict tenants who did not comply with the lease requirements, which would create further housing instability for the grandchildren (Gottlieb & Silverstein, 2003).

In response to the problems identified through this evaluation, researchers encouraged future developers of subsidized grandfamily housing to consider the need for 24-hour building security, the need for an operating budget sizable enough to address the costs associated with building maintenance and supportive services, and the need to clearly articulate the goals of the housing program. Study authors noted a strong tension between the desire of some building residents to want to live independently and the need for intensive supportive housing services by other building residents (Gottlieb & Silverstein, 2003). Researchers also stressed the importance of adequate common space in order to meet the complex needs of both children and older adults living in the same building (Gottlieb & Silverstein, 2003). It was recommended that the community room and on-site programming be housed apart from the residential units in order to minimize

noise disturbances and that adequate outdoor recreation space for youth be provided along with adequate seating areas for the grandparents (Gottlieb & Silverstein, 2003). While several key informants suggested that housing developments intended for grandfamilies be larger in order to be more cost effective, several grandparent caregivers indicated that they prefer townhomes or smaller clusters of units that would permit individual porches and offer greater privacy (Gottlieb & Silverstein, 2003). Some key informants and grandparents suggested that mixing grandfamily households with other families less in need of supportive services might be a more viable economic model (Gottlieb & Silverstein, 2003), which is interesting since it is contrary to the concept of providing housing exclusively for grandfamily households.

### **Post Occupancy Evaluation of Villard Square**

A third applied research study on subsidized grandfamily housing, which examined residential satisfaction for residents of Villard Square in Milwaukee, Wisconsin, was conducted by Impact Planning Council in 2014. The author noted that the housing program had been largely unsuccessful in recruiting and retaining grandfamily households; just 34% of resident households were grandfamilies at the time the study was conducted (Impact Planning Council, 2014). The study included a focus group with 12 residents, five of whom were grandparent caregivers (Impact Planning Council, 2014). An examination of supportive service use found that grandparent caregivers experienced financial burden and that the most appreciated social service offering was the mobile food pantry, which helped to reduce monthly household food expenses. The afterschool programming and parenting support groups offered were underutilized, and residents felt that the timing of offerings did not work well with their schedules. Overall, residents

expressed an interest having more input in the planning of building events and activities (Impact Planning Council, 2014).

Residents appreciated the building's amenities, in particular, the availability of a fitness center, in-unit washer and dryers, community room, media room, playground, and close proximity to the Villard Square branch of the Milwaukee Public Library, which was located directly beneath their apartments. Residents also emphasized the importance of being located near public transportation, retail shopping, and clinical care (Impact Planning Council, 2014). Safety and security were principal concerns for grandparents who participated in the study. Specific concerns included unescorted guests in the building, the lack of secured underground parking, and the lack of a building evacuation plan, especially for elderly and disabled residents. Residents also expressed concern about the use of illegal substances and inappropriate behavior by teens in the building and in the adjacent library (Impact Planning Council, 2014).

Impact Planning Council recommended several opportunities to improve residential satisfaction based on the information gathered, including: increased focus on recruitment of grandfamilies; increased offerings of food assistance; creation of additional opportunities for resident input; and increased security measures including the addition of cameras, visitor registration, and onsite weekend staff (Impact Planning Council, 2014). Although the study findings cannot be generalized to all subsidized grandfamily housing sites, they offer valuable insight regarding factors that may influence grandfamilies' residential satisfaction.

## **Literature Review Summary**

Findings reported in gerontology, social work, and psychology literature confirm that grandfamily households in the United States are likely to face multiple barriers to meeting their housing needs, which may lead to housing deficits (U.S. Bureau of the Census, 2001; Morris & Winter, 1996). Left unaddressed, these deficits can lead to pathology in individual members of the household (Morris & Winter, 1996) resulting in deteriorated health, decreased productivity, and in extreme cases, a breakdown of the household. Additionally, findings from the literature review show that grandfamily households do experience housing deficits at a rate greater than the general population, and are also likely to experience mental health, physical health, and relationship problems that may be exacerbated by their housing situation.

An in-depth review of the three existing post-occupancy evaluation studies on subsidized grandfamily housing to date indicate that neighborhood factors, sense of community, and decision-making power are also important contributors to grandparent caregivers' residential satisfaction and family well-being. Findings from the research studies conducted on Grandfamilies House in Boston also suggest that housing specifically intended for grandfamilies does not necessarily lead to improved residential satisfaction or family well-being, and that housing without adequate supportive services and/or housing that is located in a distressed neighborhood, may in fact have negative consequences.

Overall, literature review findings confirm that the evidence base for whether subsidized grandfamily housing ultimately improves quality of life for grandfamily households is limited. More research is needed to better understand the influence of

subsidized grandfamily housing on grandparent caregivers' housing constraints, residential satisfaction, and family well-being. Findings from the literature review also confirm that Morris and Winter's 1996 Housing Adjustment Theory is useful for informing the conceptual framework for this study.

## **Description of Conceptual Framework**

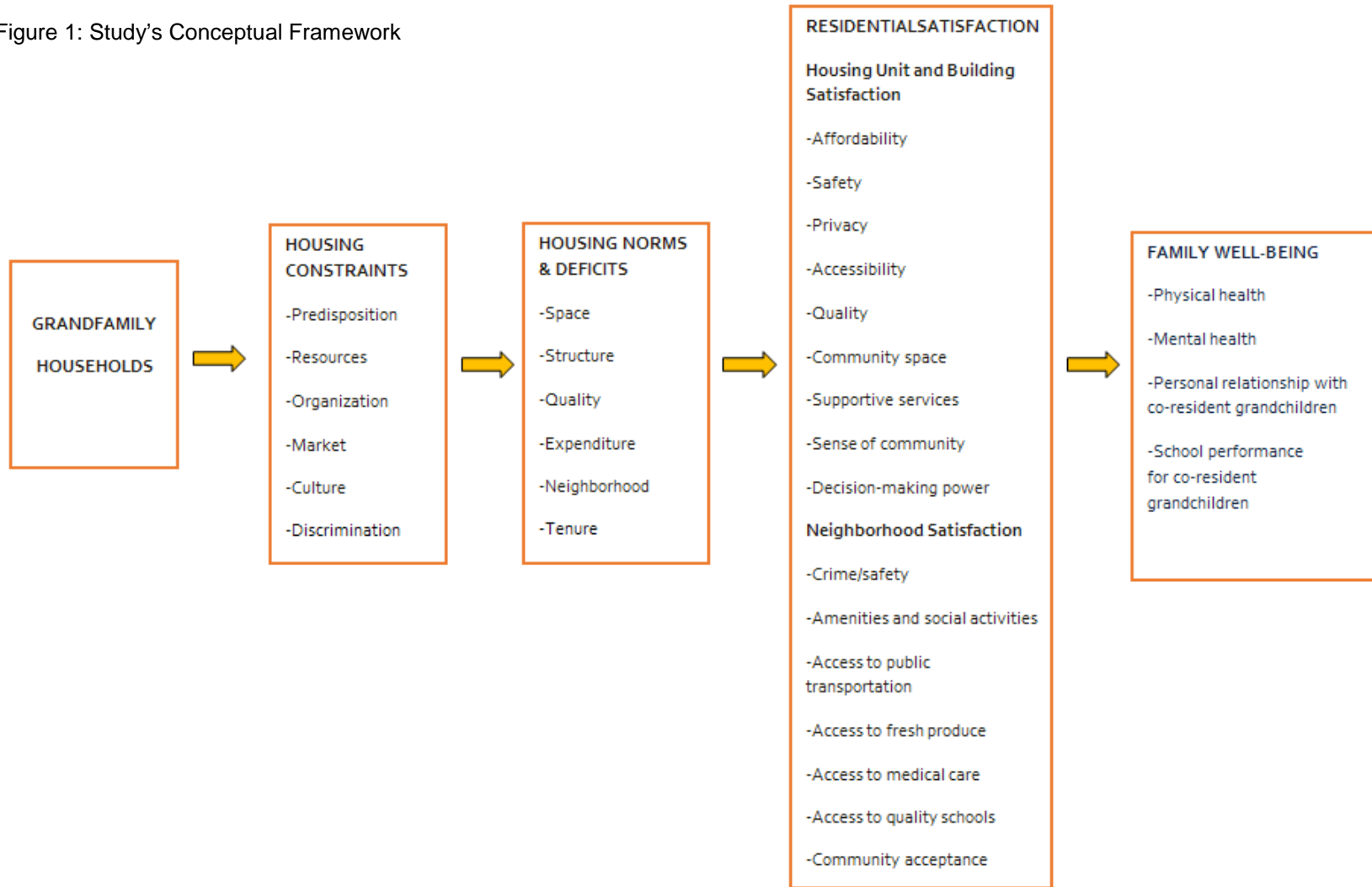
This study sought to address the following principal research questions:

1. How does subsidized grandfamily housing influence grandfamilies' housing constraints?
2. How does subsidized grandfamily housing moderate grandfamilies' housing deficits?
3. How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation?

To develop a conceptual framework for this study, the researcher used Morris and Winter's 1996 Housing Adjustment Theory as a theoretical base and added in additional factors known from the literature to influence residential and neighborhood satisfaction and also factors known to influence family well-being for grandparent caregivers. These additions are in line with the recommendations made by Quercia & Rhoe, who reviewed existing housing adjustment theories and proposed that future models of housing adjustment decision may need to consider other contributors to quality of life besides housing and neighborhood satisfaction (1993). The dependent variables in this study are residential satisfaction and family well-being, and the independent variables in this study are housing characteristics (including both building and program), neighborhood characteristics, and grandfamily household demographics. The intervening variables are

housing norms and deficits (including space, structure, quality, expenditure, neighborhood, and tenure.) A model of the conceptual framework that was used for this study is included on page 45.

Figure 1: Study's Conceptual Framework



## **CHAPTER 3: METHODS**

### **Introduction**

This study examined how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. The purpose of this mixed-methods study was to produce evidence of “what works” for subsidized grandfamily housing to enable housing developers, funders, policymakers, and service providers to make informed decisions with regard to investment, design, and operations for subsidized grandfamily housing. In seeking this information, this study addressed three research questions: 1) How does subsidized grandfamily housing influence grandfamilies' housing constraints? 2) How does subsidized grandfamily housing moderate grandfamilies' housing deficits? 3) How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation? This chapter describes the study's research methodology and the rationale for the proposed research approach, an overview of the research sample and criteria for selection; a summary of the information needed; an overview of the methods of data collection; the plan for analysis and synthesis of the data; and discussion on ethical considerations, issues of trustworthiness, and the study's limitations. This chapter ends with a brief concluding summary.

### **Rationale for Using a Mixed-Methods Approach**

The researcher employed a phenomenological approach (Creswell, 2007) with mixed-methods to answer the study's central research questions. Several different research approaches were considered for this study, including both quantitative and

qualitative designs. After careful consideration, the researcher determined that purely quantitative methods would not produce the rich information needed in order to answer the study's principle research questions. The need to maintain design flexibility given the known barriers to accessing this particular study population, the need to facilitate a personal connection in order to elicit trust, the need to develop a deep contextual understanding of the housing environments in which grandfamilies live, and the desire to capture the authentic voices of participants led the researcher to employ a design that included qualitative methods. To address the many factors identified in the framework, and to minimize bias in the qualitative analysis, a quantitative instrument was also developed. Ultimately, a mixed-methods research design that included focus groups, key informant interviews, observation, and a survey was used for this study.

### **Selection of Study Participants**

A purposeful sampling procedure was used to select the sample for this phenomenological study. The researcher first created a quasi-population list of grandparents living in subsidized grandfamily housing in the United States by assembling a list of all existing subsidized grandfamily housing developments. Next, the researcher examined key attributes of the developments which could influence the ability to gather rich information about grandfamilies housing experiences. These attributes included location, number of housing units, population mix, and supportive services. Using these factors, the researcher developed four key criteria for selecting the housing sites from which grandparent residents, and subsequently grandfamily housing staff and key partners, were recruited. Key criteria for selection of these sites included: 1) regional

variation, 2) resident population consisting mostly or exclusively of grandfamilies, 3) variety of supportive services offered, and 4) more than 30 housing units. Additional consideration was given to the age of the housing program and whether the program served as a replicable model for other subsidized grandfamily housing. The researcher determined that these criteria were important for eliciting the rich information needed to answer the study's research questions. Specifically, the inclusion of regional variation allowed the researcher to capture building design differences relevant to climate and regional transportation systems; a focus on resident populations consisting mostly or exclusively of grandfamilies helped the researcher to ensure that key informants were focused on the experiences of grandfamilies; capturing a variety of supportive services allowed the researcher to ascertain which were most effective; and a focus on sites with more than 30 housing units helped the researcher to ensure that a sufficient number of grandparent caregivers could be recruited for participation in focus groups. The inclusion of housing programs of different ages allowed the researcher to capture information relevant to different stages in the life cycle, for both households and buildings, and the inclusion of programs that had served as replicable models helped the researcher to identify the success ingredients important for understanding what works. Applying both these primary and secondary criteria, Table 5 includes a list of subsidized grandfamily housing sites, of similar sizes and services, from metropolitan areas in differing parts of the United States that were selected for participation in this study.

Table 5: Subsidized Grandfamily Housing Sites Selected for Participation

ID	Name of Grandfamily Housing Development	Location	Number of Housing Units	Year Established
1	PSS Grandparent Family Apartments	South Bronx, NY	50 units	2005
2	Grandfamilies Place of Phoenix	Phoenix, AZ	56 units	2012
3	Pemberton Park	Kansas City, MO	36 units	2011
4	Villard Square	Milwaukee, WI	47 units	2010

In order to gain access to grandparents and housing staff and key partners, the researcher secured permission from housing property managers at selected sites. Housing property manager contact information was retrieved from the Internet through a search using the names of the selected sites: Pemberton Park (Kansas City), PSS Grandparent Family Apartments (New York), and Grandfamilies Place of Phoenix (Phoenix), and Villard Square (Milwaukee). To establish trustworthiness, the researcher enlisted the help of Generations United, a nationally-recognized, nonpartisan advocacy organization dedicated to improving the lives of children and older adults through intergenerational collaboration whose deputy executive director co-signed the study invitation letter.

Initial study invitation letters (see Appendix A: First Study Invitation Letter) explaining the purpose of the study, reason for selection, and plans for data collection were sent to housing property managers of selected sites via email. Housing property managers also received a follow-up telephone call and a second study invitation letter (see Appendix B: Second Study Invitation Letter) one week later. No one responded to the initial email invitations or telephone call, thus several additional call attempts were made in order to reach the housing property managers at selected sites— in some cases up to ten telephone calls. It was necessary to reach housing property managers in their

office in order to further explain the research and obtain their permission. Once telephone contact was made, copies of the study's data collection instruments, consent forms, and approval from the University of Minnesota IRB were sent to the housing property managers. Three of the four selected sites agreed to participate: Pemberton Park (Kansas City), PSS Grandparent Family Apartments (New York), and Grandfamilies Place of Phoenix (Phoenix). The housing property manager at Villard Square (Milwaukee) did not respond. It was later determined that Villard Square would not have met the selection criteria for participation since less than 35% of the building's residents were grandfamilies at the time the study was conducted.

In order to give consent, housing property managers required approval from property owners. PSS Grandparent Family Apartments (New York) also required a formal memorandum of understanding with the researcher mandating a final copy of the study report and advance notice of publication. Once housing property owners granted consent to carry out the research, the researcher began the process of recruiting individuals to participate and scheduling visit times to collect the data in cooperation with participating site staff. Because of housing property managers' busy schedules and potential staff turnover, it was important to act quickly with scheduling. Site visits were made with an average of three weeks' notice.

In effort to respect the privacy of residents, the researcher enlisted the resident services coordinator at each of the participating sites to help with the recruitment process. All grandparents (with co-resident grandchildren) at participating sites were invited to participate in the study. The resident services coordinator distributed the University of Minnesota IRB-approved recruitment flyer (see Appendix C: Grandparent Focus Group

Recruitment Flyer) and registered grandparents on a first-come, first-served basis. The researcher monitored recruitment by conducting weekly check-ins and answering questions. Resident services coordinators were told that if they were able to recruit more than 12 grandparents, the researcher would conduct two focus groups with a maximum of 24 participants total at each site. Resident services coordinators expressed from the outset that we would be unlikely to generate enough interest to hold two focus groups. In the end, their predictions were correct. A total of 29 grandparents living in subsidized grandfamily housing agreed to participate in the study, and one focus group was held at each participating site.

## **Description of Housing Sites**



Figure 2: Photo of Pemberton Park Apartments (August, 2015)

### **PEMBERTON PARK APARTMENTS <sup>1</sup>**

Pemberton Park Apartments is located at 5010 Cleveland Avenue on the East Side of Kansas City, Missouri (see Figure 2). The program offers subsidized, supportive

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<sup>1</sup> Dr. Marilyn Bruin accompanied the researcher to Kansas City and served as an adviser and recorder for this first site visit.

housing to grandparents age 55 years or older who are primary caregivers of their grandchildren (or great-nieces or great-nephews) and have legal custody. Established in 2011, the building was developed by Cougar Capital in partnership with Kansas City Housing Authority and is managed by Yarco Company, Inc. The building was financed through a combination of private investments and federal Low Income Housing Tax Credits. Project-based rental subsidy is provided through the Kansas City Housing Authority and resident households pay 30% of their income for rent. The development is three stories and includes 36 apartment units with two-bedroom, three-bedroom, or four-bedroom configurations. The three-bedroom and four-bedroom units have two bathrooms. All units were designed to be accessible or adaptable for people with disabilities and include emergency cords in each room. Building amenities include in-unit washer and dryers, central air conditioning, off-street parking, walkout patios, controlled access, a playground, and recreation rooms for grandparents and grandchildren, including a computer lab, a grandparents' lounge, and a community room. Services include case management, out-of-school time programming, and grandparent support groups.

The development is located across the street from the YMCA Thomas Roque Head Start Program and is also near the Emmanuel Family and Child Development Center and two Kansas City public schools. Large open greenspace and a street separates the development from Pemberton Heights, a Kansas City Housing Authority-owned high-rise building that provides subsidized housing for seniors and people with disabilities, which is located opposite it. Pemberton Park is accessible by public transit bus, which stops one block away. Swope Community Health Services (a federally qualified community health center), a credit union, and restaurants are located 0.25 miles away,

and a full-service grocery store and other retail shopping are located 0.5 miles away. The neighborhood includes other newly constructed affordable rental buildings and post-World War II homes that appear to be in fair to poor condition. According to 2015 American Community Survey estimates, the neighborhood's residents are predominately black (86%) and low-income. The median household income is just \$27,625; more than half of renter households are cost-burdened (58%); one-third of residents (33%) live below the poverty line; and approximately 1 in 5 households (22%) are without a vehicle. Table 6 provides a snapshot of housing and resident characteristics for the 64130 neighborhood ZIP Code in which Pemberton Park is located. Additional photos of Pemberton Park Apartments and the neighborhood are included in Appendix K.

Table 6: Housing and Resident Characteristics for Pemberton Park Neighborhood

ZIP Code 64130 (Kansas City, MO)	
<b>HOUSING UNIT CHARACTERISTICS</b>	
TOTAL UNITS	11,506
Single family detached	85%
Vacant	27%
Owner-occupied	54%
Renter-occupied	46%
Built 1950 or earlier	84%
No vehicles available	22%
1 vehicle	46%
2 or more vehicles	32%
Owner paying 30% or more of household income for monthly mortgage	42%
Renter paying 30% or more of household income for monthly rent	58%
<b>RESIDENT CHARACTERISTICS</b>	
TOTAL PEOPLE	20,590
<b>RACE</b>	
White	8%
Black	86%
American Indian	1%
Asian	1%
Some other race	1%
Two or more races	3%
Hispanic (of any race)	3%
<b>EMPLOYMENT STATUS FOR 16+ POPULATION</b>	
Employed	47%
Unemployed	8%
Not in labor force	45%
MEDIAN HOUSEHOLD INCOME	\$27,625
<b>AGE</b>	
Under 18	25%
18 to 64	58%
65 or older	17%
<b>POVERTY STATUS</b>	
Living below poverty	33%
Receiving SNAP benefits or food stamps	31%
Source: U.S. Bureau of the Census, American Community Survey 2015 5-Year Estimates	



Figure 3: Photo of PSS Grandparent Family Apartments (September, 2015)

### **PSS GRANDPARENT FAMILY APARTMENTS**

PSS Grandparent Family Apartments (see Figure 3) is located at 951 Prospect Avenue in the South Bronx in New York City, New York. The program offers subsidized, supportive housing to grandparents age 62 years or older who are primary caregivers of their grandchildren (or great-nieces or great-nephews) and have legal custody. Established in 2005, the building was developed in partnership by Presbyterian Senior Services and West Side Federation for Senior and Supportive Housing, Inc. and New York City Housing Authority, and is managed by West Side Federation for Senior and Supportive Housing, Inc. The building was financed through a combination of private, philanthropic, and public investments, including federal Low Income Housing Tax Credits. Project-based rental subsidy is provided through the New York City Housing Authority and resident households pay 30% of their income for rent. The building is six stories and includes 50 apartment units with two-bedroom and three-bedroom configurations. The three-bedroom units have two bathrooms. All units were designed to be accessible or adaptable for people with disabilities and include emergency cords in each bedroom. Building amenities include a rooftop garden, washers and dryers

on each living floor, controlled access with 24-hour security, and recreation rooms for grandparents and grandchildren including a computer lab, a grandparents' lounge, a youth game room, and a community room. Services include case management, out-of-school time programming, and grandparent support groups.

The development provides street-level commercial space to Montefiore Dental Clinic (part of a large nonprofit hospital system that serves the Bronx) and it is located across the street from Morelba deli grocery store. A grassy courtyard separates the development from Union Avenue Senior Center, a New York City Housing Authority-owned high-rise building that provides subsidized housing for seniors, which is located behind it. PSS/WSF Grandparent Family Apartments is accessible by public transit subway lines 2 and 5; the train station is located three blocks away. The South Bronx Neighborhood Center, South Bronx Children's Health Center, and Group Family Daycare in the Bronx are located less than 0.25 mile away. Also located less than 0.25 mile away, are Bronx Regional High School and a number of other public and charter schools. A full-service grocery store and large playground are located 0.5 miles away. The neighborhood also includes 19 other New York City Housing Authority-owned public housing projects. According to 2015 American Community Survey estimates, the neighborhood's residents are predominately Hispanic (71%) and low-income. The median household income is just \$; nearly two-thirds of renter households are cost-burdened (65%); more than one-third of residents (40%) live below the poverty line; and the majority of households (72%) are without a vehicle. Table 7 provides a snapshot of the housing and resident characteristics for the neighborhood ZIP Code in which PSS

Grandparent Family Apartments is located. Additional photos of PSS Grandparent Family Apartments and the neighborhood are included in Appendix L.

Table 7: Housing and Resident Characteristics for PSS Neighborhood

ZIP Code 10459 (New York, NY)	
<b>HOUSING UNIT CHARACTERISTICS</b>	
TOTAL UNITS	17,104
Single family detached	3%
Vacant	8%
Owner-occupied	9%
Renter-occupied	91%
Built 1950 or earlier	55%
No vehicles available	72%
1 vehicle	23%
2 or more vehicles	5%
Owner paying 30% or more of household income for monthly mortgage	65%
Renter paying 30% or more of household income for monthly rent	65%
<b>RESIDENT CHARACTERISTICS</b>	
TOTAL PEOPLE	47,778
<b>RACE</b>	
White	12%
Black	31%
American Indian	1%
Asian	1%
Some other race	52%
Two or more races	3%
Hispanic (of any race)	71%
<b>EMPLOYMENT STATUS FOR 16+ POPULATION</b>	
Employed	46%
Unemployed	6%
Not in labor force	48%
MEDIAN HOUSEHOLD INCOME	\$23,761
<b>AGE</b>	
Under 18	30%
18 to 64	61%
65 or older	9%
<b>POVERTY STATUS</b>	
Living below poverty	40%
Receiving SNAP benefits or food stamps	51%

Source: U.S. Bureau of the Census, American Community Survey 2015 5-Year Estimates



Figure 4: Photo of Grandfamilies Place of Phoenix (December, 2015)

### **GRANDFAMILIES PLACE OF PHOENIX**

Grandfamilies Place of Phoenix is located at 5150 South 18<sup>th</sup> Place in the South Phoenix region of Phoenix, Arizona. The program offer subsidized, supportive housing to grandparents age 62 years or older who are primary caregivers of their grandchildren (or great-nieces or great-nephews). Legal custody is preferred. However, a notarized letter from the child's mother authorizing the grandparent's care is also accepted. Established in 2012, the building was developed by the Los Angeles-based Allied Property Group and is managed by Dunlap & Magee Property Management, Inc. The building was financed through a combination of private and public investments, including federal Low Income Housing Tax Credits. A portion of the units are targeted at 40% Area Median Income, 50% Area Median Income, and 60% Area Median Income, and resident households pay 30% of their income for rent. The building is three stories and includes 56 apartment units with two-bedroom and three-bedroom configurations. The three-bedroom units have two bathrooms. The units do not include emergency cords and only some units are designed to be accessible for people with disabilities. Building amenities include in-unit washers and dryers, private balconies, controlled access, off-street

parking, playgrounds, swimming pool, grilling area, basketball, volleyball, and tennis courts, and recreation rooms for grandparents and grandchildren including a fitness center, a computer lab, a grandparents' lounge, a youth game room, and a community room. Services include case management, out-of-school time programming, and grandparent support groups.

The development is located across the street from a large block-size undeveloped lot in a predominately residential neighborhood with mix of low- and middle-income single-family homes. Grandfamilies Place of Phoenix is accessible by public transit bus. Sabis International School and a number of other charter and public schools are located within 0.5 miles of the site. A large public park and convenience store are located 1 mile away, and a full service grocery store, bank, and other retail shopping are located 2.5 miles away. According to 2015 American Community Survey estimates, the neighborhood's residents are predominately Hispanic (67%) and low-income. The median household income is just \$27,625; more than half of renter households are cost-burdened (56%); more than one-third of residents (39%) live below the poverty line; and nearly 1 in 5 households (18%) are without a vehicle. Table 8 provides a snapshot of housing and resident characteristics for the neighborhood ZIP Code 85040 in which Grandfamilies Place of Phoenix is located. Additional photos of PSS Grandparent Family apartments and the neighborhood are included in Appendix M.

Table 8: Housing and Resident Characteristics for Grandfamilies Place Neighborhood

ZIP Code 85040 (Phoenix, AZ)	
<b>HOUSING UNIT CHARACTERISTICS</b>	
TOTAL UNITS	10,648
Single family detached	62%
Vacant	14%
Owner-occupied	42%
Renter-occupied	58%
Built 1950 or earlier	17%
No vehicles available	18%
1 vehicle	38%
2 or more vehicles	54%
Owner paying 30% or more of household income for monthly mortgage	40%
Renter paying 30% or more of household income for monthly rent	56%
<b>RESIDENT CHARACTERISTICS</b>	
TOTAL PEOPLE	31,850
<b>RACE</b>	
White	52%
Black	18%
American Indian	3%
Asian	2%
Some other race	23%
Two or more races	2%
Hispanic (of any race)	67%
<b>EMPLOYMENT STATUS FOR 16+ POPULATION</b>	
Employed	50%
Unemployed	8%
Not in labor force	42%
MEDIAN HOUSEHOLD INCOME	\$27,625
<b>AGE</b>	
Under 18	31%
18 to 64	62%
65 or older	7%
<b>POVERTY STATUS</b>	
Living below poverty	39%
Receiving SNAP benefits or food stamps	34%
Source: U.S. Bureau of the Census, American Community Survey 2015 5-Year Estimates	

## **Characteristics of Study Participants**

The 29 grandparents who participated in the study were predominantly black and female, and ranged in age from 54 to 85 years. The majority had one or two grandchildren living with them. The children living with them ranged in age from less than one year to 22 years. In addition to grandchildren or grandnieces/grandnephews, a few mentioned that they were caring for great-grandchildren. Table 9 summarizes the demographics of grandparent residents who participated in this study.

Table 9: Characteristics of Grandparent Resident Study Participants

Gender	N
Female	28
Male	1
Total participants	29
Age	N
54 to 64	14
65 to 75	8
Over 75	7
Unknown	2
Number of children in care (includes co-resident grandchildren, grandnieces, grandnephews, and great grandchildren)	N
1	14
2	5
3	4
4	2
Unknown	4
Age of children in care (includes co-resident grandchildren, grandnieces, grandnephews, and great grandchildren)	N
Living with children 0 to 5	5
Living with children 6 to 12	14
Living with children 13 to 18	9
Living with young adults 19 to 22	5
Unknown	5

It is recommended that 20 to 30 individuals be included in order to develop a well-saturated theory (Creswell, 2007). Upon consideration of this best practice identified in the literature, and an assessment of field notes which suggested that saturation had been reached, the researcher determined that the inclusion of additional sites was unlikely to yield new information relevant to the study's research questions. The recruitment process—from site consent to identification of focus group and key informant interview participants—occurred over a period of 12 months. Data collection for the study occurred between August and December, 2015.

### **Overview of Information Needed**

This mixed-methods study examined how subsidized grandfamily housing influences grandfamilies quality of life through its effects on housing constraints, residential satisfaction, and family well-being. The information needed to answer the principle research questions for this study was determined by the conceptual framework and fell into three main categories: contextual, perceptual, and demographic. It is valuable to think systematically about the types of information needed to answer the research questions for this study, which in turn, helped to determine the appropriate methods for data collection and inform the design of the data collection instruments. Table 10 provides an overview of the information needed and the methods of data collection used to gather each piece of information.

Table 10: Overview of Information Needed and Methods of Data Collection Used

Research Question	Description of Information Needed	Data Collection Method Used
<p>Research Question 1: How does subsidized grandfamily housing influence grandfamilies housing constraints</p>	<p><u>Perceptual information about housing constraints</u></p>	<p>Focus group Survey</p>
	<p>How do grandparents living in subsidized grandfamily housing feel about their economic security and access to needed resources?</p>	
	<p>How do grandparents living in subsidized grandfamily housing perceive that life has (or has not) changed since moving?</p>	
	<p>What forms of discrimination have grandparents living in subsidized grandfamily housing experienced?</p>	<p>Key informant interview</p>
	<p><u>Contextual information about housing constraints</u></p>	
	<p>What are the predispositions of households that move into subsidized grandfamily housing?</p>	
	<p>What is the context of the housing market as it relates to grandfamilies?</p>	
	<p>What supportive services are offered in subsidized grandfamily housing?</p>	<p>Key informant interview</p>
	<p>What building policies are typical for subsidized grandfamily housing?</p>	
	<p><u>Demographic information about who lives in subsidized grandfamily housing</u></p>	
<p>Age, race, gender and employment status of grandparents</p>		
<p>Age and gender of grandchildren</p>		

Table 10: (Continued) Overview of Information Needed and Methods of Data Collection Used

Research Question	Description of Information Needed	Data Collection Method Used
<p>Research Question 2: How does subsidized grandfamily housing moderate grandfamilies housing deficits?</p>	<p><u>Perceptual information about the housing environment</u></p> <p>How do grandparents living in subsidized grandfamily housing perceive the apartment units and buildings in which they live, particularly with respect to space, quality, and expenditure?</p> <p>How do grandparents living in subsidized grandfamily housing perceive the neighborhoods in which they live?</p> <p><u>Contextual information about the housing environment</u></p> <p>How are individual apartment units and building common spaces designed?</p> <p>What building amenities are available to subsidized grandfamily housing residents?</p> <p>What is the condition of the neighborhoods in which subsidized grandfamily housing is located?</p> <p>What neighborhood amenities are available to subsidized grandfamily housing residents?</p>	<p>Focus group Survey</p> <p>Key informant interview Observation</p>
<p>Research Question 3: How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation?</p>	<p><u>Perceptual information about residential satisfaction and family well-being</u></p> <p>What factors related to the housing environment are most important for grandfamilies residential satisfaction? What needs appear to be met and unmet?</p> <p>How do grandparents living in subsidized grandfamily housing rate their household members' physical and mental health?</p>	<p>Focus group Survey</p>

## **Research Design Overview**

Prior to the data collection process, the researcher conducted an in-depth review of the literature in order to identify proven research methods for gathering information from grandparent caregivers and to identify key topics related to their housing constraints, residential satisfaction, and emotional well-being that should be covered. The researcher also met with staff from Generations United and AARP, Inc., two national, nonpartisan organizations who disseminate applied research on the needs and characteristics of grandfamilies. Representatives discussed their experiences with collecting information from grandparent caregivers and grandfamily housing staff and identified what information would be of greatest interest to policymakers and practitioners. In general, all parties were interested in which policies and practices have proven to be most effective. The foundation arm of AARP was most interested in the experiences of housing residents, while the policy arm of AARP was most interested in the experiences of housing staff. Drawing upon the literature, Housing Adjustment and Adaptation Theory, and advice from advocates, interview questions for key informants and residents were developed from the conceptual model.

## **KEY INFORMANT INTERVIEWS**

The researcher conducted in-person, group interviews with 15 grandfamily housing staff and key partners. The interviews were designed to gather contextual information about the buildings and the neighborhoods in which grandfamilies live, and perceptual information about what has worked well and what has not worked well regarding the development and operation of subsidized grandfamily housing. Housing site staff and partners were asked the following questions. (For the complete instrument

with introduction and probes, see Appendix D: Key Informant Interview Questions for Housing Site Staff).

#### Interview Questions for Housing Site Staff and Key Partners

For the record, can you state your name and your staff role?

1. Can you tell me about the history of this housing site?
2. What would you say has worked well with this housing site?
3. What would you say has not worked well with this housing site?
4. For others who are considering the development of subsidized grandfamily housing what would you recommend?
5. Do you have any other comments or examples you would like to share?

#### **FOCUS GROUPS**

The researcher conducted focus group discussions with 29 grandparents living in subsidized grandfamily housing. The focus groups were designed to gather information on grandparents' perceptions of their housing environment, and how that housing environment has influenced their family's well-being. Grandparent residents were asked the following questions. (For complete instrument with introduction and probes, see Appendix E: Focus Group Questions for Grandparent Residents).

### Focus Group Questions for Grandparent Residents

1. What do you like about living in this building?
2. What do wish was different about living in this building?
3. If you could change one thing about this building, what would you say is the most important thing to change?
4. What do you like about living in this neighborhood?
5. What do you dislike about living in this neighborhood?
6. How has your life has changed for the better since moving here?
7. How has your life has not changed since moving here?
8. For other grandparents like you who are considering moving to this site, what advice would you give them?
9. Is there anything else that you would like to tell us?

Grandparents who participated in focus groups were also asked to complete a short survey (see Appendix F: Housing and Neighborhood Survey for Grandparent Residents) to provide methodological triangulation and increase the validity of the results.

### **OBSERVATION**

The researcher participated in guided tours at each of the subsidized grandfamily housing sites included in the study: Pemberton Park (Kansas City), PSS Grandparent Family Apartments (New York), and Grandfamilies Place of Phoenix (Phoenix). These tours provided additional contextual information about the housing environment, and helped to inform the interpretation of results gathered through other study methods. An observational checklist and photos were used to capture observations (see Appendix J: Site Visit Observational Checklist).

## **IRB Approval**

The University of Minnesota IRB granted approval to carry out the study using the informed consent forms, focus group questions, key informant interview questions, survey, and recruitment materials that the researcher developed in consultation with her adviser. Copies of forms, instruments, and materials used in this study are included in Appendices A thru J.

## **Data Collection Methods**

Multiple methods were used to answer the research questions for this study, including focus groups, surveys, key informant interviews, and recorded observations. The use of mixed-methods approach adds both depth and rigor to the information collected and provides a method of triangulation (Bloomberg & Volpe, 2008). The steps taken to carry out each of these data collection strategies are discussed in detail in the following paragraphs.

## **FOCUS GROUPS**

Focus groups were conducted to gather information on grandparents' perceptions of their housing environment, and their descriptions of how that housing environment influenced their family's well-being. The use of focus groups enabled the researcher to establish trust with participants and verify responses, which helped to reduce measurement error. The use of focus groups also helped to facilitate rich, iterative responses to questions by allowing participants to build off one another's comments (Krueger & Casey, 2000). To encourage a high rate of participation, the researcher

worked with the resident services coordinators to schedule focus group meetings at times that were convenient for staff and that did not conflict with any other scheduled activities. Meeting these criteria involved scheduling around holidays, building celebrations, staff members' off-site work obligations, grandparents' social and work activities, and grandchildren's school schedules. At Pemberton Park (Kansas City) and PSS Grandparent Family Apartments (New York), where few or no grandparents were employed, a late morning meeting on a weekday was preferred. At Grandfamilies Place of Phoenix (Phoenix), where the majority of grandparents were employed, an evening meeting on a weekday was preferred. Focus group participants were compensated with a meal and a thirty-dollar VISA gift card. The researcher worked closely with resident services coordinators to identify incentives and food that appealed to participants, and also to coordinate room set-up and food pick-up.

Focus group meetings were held in the on-site community gathering room at each respective site. At the start of each focus group, participants were provided with an overview of the study, including the risks and benefits associated with participation, and asked to sign an informed consent form. Specifics regarding these two items are discussed under the Ethical Considerations section of this chapter. During each focus group, participants responded to a set of nine questions designed to capture information on grandparents' perceptions of their housing environment, and how that housing environment has influenced their family's well-being (see Appendix E: Focus Group Questions for Grandparent Residents). Participants also completed a survey with 32 questions (see Appendix F: Housing and Neighborhood Survey for Grandparent Residents) designed to collect basic demographic information and additional perceptual

information on the items listed in the conceptual framework model for the study. The survey was designed using best-practices discussed by Salant and Dillman in their book, *How to Conduct Your Own Survey* (1994). These practices included: use of objective question wording, avoidance of double-barreled questions, use of mutually exclusive response categories, inclusion of an equal number of negative and positive response choices, avoidance of jargon, and use of broadly word questions that do not call for answers too difficult to quantify or to recall. The research also checked with each participant to make sure they understood the questions and response categories. Focus group discussions included nine to ten participants and ranged in length from 68 minutes to 98 minutes, excluding meal time.

## **KEY INFORMANT INTERVIEWS**

Semi-structured, group interviews with grandfamily housing staff and key partners were conducted to gather contextual information about the buildings and the neighborhoods in which grandfamilies live, and perceptual information about what has worked well and what has not worked well regarding the development and operation of subsidized grandfamily housing. Subsidized grandfamily housing developers, owners, and staff responsible for property management, resident services, or facilities maintenance were targeted for participation. Arrangement of these group interviews required the researcher to work with different entities depending upon the decision-making authority for each participating site. In the case of Pemberton Park (Kansas City), cooperation from the Kansas City Housing Authority, who is also the property owner, was required in order to arrange a group. In the case of PSS Grandparent Family

Apartments (New York), the resident services coordinator was able to arrange a group. In the case of Grandfamilies Place of Phoenix (Phoenix), the housing property manager was able to arrange a group. Prior to scheduling, the researcher worked with the decision maker at each participating site to identify names and contact information for individuals who would be able to participate. Prior to being interviewed, individuals received an email invitation that included an overview of the study, a brief description of the types of information they would be asked to provide, and a request for confirmation of their willingness to participate (see Appendix I: Email Confirmation Letter). A total of 15 grandfamily housing staff and key partners participated in the study.

Group interviews were held in the on-site community gathering room at each respective site. At the start of each group interview, key informants were provided with an overview of the study, including the risks and benefits associated with participation, and asked to sign an informed consent form prior to the start of the discussion. Specifics regarding these two items are discussed under the Ethical Considerations section of this chapter. During the interview, key informants responded to a set of five questions designed to address the building's history, design, supportive services, and structure of operations—including staffing, budget, and maintenance. Key informants also shared their perceptions of how programs, policies, and other building systems have (or have not) contributed to grandfamilies' residential satisfaction and family well-being (see Appendix D: Key Informant Interview Questions for Housing Site Staff). During the interviews, key informants were provided with water and light refreshments, but they did not receive any monetary compensation for their time and efforts. Group interviews included four to seven participants and ranged in length from 80 minutes to 100 minutes.

## **OBSERVATION**

To gather additional contextual information about the housing environments in which grandfamilies live, the researcher went on a guided building tour at each participating site. Tours allowed for in-depth observation of apartment units, indoor and outdoor common spaces, building amenities, building culture, and building security measures. The researcher also observed the housing stock, commercial buildings, and amenities located within a one-mile vicinity of each participating site to gather additional contextual information about the neighborhoods in which grandfamilies live.

Observations were recorded with still photos to aid recall and supplement written field notes. To help ensure that the same information was collected for each building and neighborhood, a checklist of items was used (see Appendix J: Site Visit Observation Checklist).

## **Methods for Data Analysis and Synthesis**

Focus groups and key informant interviews were audio recorded with permission and transcribed verbatim by GMR Transcription Services. Following receipt of the written transcriptions, the researcher listened to the audio recordings and reviewed the each transcript for accuracy. To analyze the data, the researcher began with the initial categories included in the conceptual framework for this study (see p. 45) that were deducted from the literature and used them as categorical bins for organizing the data. Next, the researcher developed an inductive coding scheme using both the responses most frequently mentioned and key themes that emerged from the discussions. The perceptual information gathered from grandparents was reviewed first, followed by the

contextual information gathered from grandfamily housing staff and key partners. The researcher moved back and forth between the conceptual framework and the written transcripts throughout the review process, making note of the subcategories and issues under each initial category. During the process, the researcher also extracted participant quotes that were illustrative of the issues. Next, the researcher analyzed the information for common patterns and differences, keeping in mind the unique housing environments and demographic characteristics of respondents. To winnow, the researcher created frequency tables and also considered the length of time spent on each given topic as well as participants' tone of voice, to determine which issues were most salient.

According to Volpe and Bloomberg (2008), quantitative findings should be considered secondary and used to augment the primary qualitative findings. Surveys completed by grandparent participants were each assigned a numerical ID and the data for all cases were entered into SPSS statistical software (see Appendix F: Housing and Neighborhood Survey for Grandparent Residents). One-way ANOVA statistical tests were conducted to compare the means of the respondent groups associated with the three subsidized grandfamily housing sites included in this study— Pemberton Park (Kansas City), PSS Grandparent Family Apartments (New York), and Grandfamilies Place of Phoenix (Phoenix)— to confirm the appropriateness of combining these 29 cases in an overall analysis. For each survey variable, the researcher created basic frequency tables and organized the results into the same categorical bins derived from the conceptual framework that were used to organize the qualitative data. The researcher also created new data variables that allowed for analysis of responses by race and age of children. Analysis along these dimensions was important for thorough examination of the effects

on housing constraints and residential satisfaction. These quantitative data were compared and contrasted with the qualitative information gathered to increase the credibility of the research findings and provide insights where qualitative information was lacking. A summary of the research findings are presented in Chapter 4.

## **Ethical Considerations**

In any research study involving human subjects, that are ethical issues related to the protection of participants (Bloomberg & Volpe, 2008; Sales & Folkman, 2000). This is particularly true when the study involves participants who are considered members of a vulnerable population, such as this study which included focus groups and surveys with low-income, older adults that addressed potentially sensitive topics. In developing the research design for this study, a number of ethical factors were taken into consideration including potential risks to participants, the need for informed consent, and the need to protect participants' privacy and confidentiality. No serious risks to participants were expected to occur as a result of this study, however the following procedures were implemented into order to protect the grandparents and grandfamily housing staff and key partners who agreed to participate.

### **Informed consent, privacy, and confidentiality**

Both grandparents and grandfamily housing staff and key partners were asked to provide written consent at the time of the interview/focus group acknowledging that they understood the purpose of the study, the potential risks associated with participation, and (*for grandparents only*) the monetary compensation provided in exchange for their time and efforts.

Prior to signing the consent form, the researcher verbally informed the participants of the organizations affiliated with conducting and funding the research, why the research was being conducted, and how the results would be used and reported. Participants were told how they were selected for participation in the research, that participation in the study was entirely voluntary, and that the discussion would be audio recorded. Participants were provided with an overview of what they could expect to occur during the interview/focus group, including the topics that would be covered. They were also told that they would not be expected to answer any questions that they did not feel comfortable answering. Focus group participants were provided with ground rules for discussion that emphasized the room as a safe space for sharing and that participants would be expected to be respectful of their neighbors even if they disagreed with what was being said. Both focus group participants and key informants were informed that participant confidentiality would be protected, that the audio recordings would be destroyed after the written transcription was completed, and that no personally identifiable information would be reported. Focus group participants were told that they may decide to leave at any time, but that they must be present at the end of the discussion in order to receive the compensation.

In order to protect the privacy of grandparents, they were not contacted directly by the researcher in any way. As a result, the collection of mailing addresses, telephone numbers, and personal email addresses were not required for implementation of this study. Resident services coordinators at each participating site assisted the researcher with focus group recruitment using materials approved by the University of Minnesota

IRB. To protect the privacy of grandparents during the focus groups, the survey was anonymous.

To protect the confidentiality of all participants in the study, written documents did not contain any personally identifiable information and were stored in a secure place. Data that was entered into a statistical software program did not contain any personally identifiable information and was stored on a secure computer. Audio recordings were stored in a secure place and destroyed after the written report was completed. No one had access to the information collected for the study other than the researchers who were directly involved in the project.

### **Steps to minimize participation risks**

According to the literature, the types of risks to participants that must be considered include physical, psychological, social, economic, and legal (Sales & Folkman, 2000). In order to minimize the risks to grandparents and housing staff and key partners who took part in this study, participation was entirely voluntary. To minimize psychological risk, grandparents with untreated psychiatric illness or chemical dependency were considered ineligible; resident services coordinators who assisted with the focus group recruitment process were asked to use professional discretion when registering individuals to participate in this study. To minimize economic risk for grandparents who participated in this study, focus group participants received a thirty-dollar VISA gift card and a meal in exchange for their time and efforts. Additionally, steps were taken to schedule the focus groups during a time that would not interfere with participants' work schedules. To minimize social risk for grandparents, focus groups were administered by a trained moderator. Discussion ground rules emphasized the room

as a safe space for sharing and participants were expected to be respectful of their neighbors even if they disagreed with what was being said. Both grandparents and grandfamily housing staff and key partners were told that their decision to participate in this study would not affect their relationships with the organizations involved in conducting and funding this study. To minimize physical risks for grandparents, steps were taken to serve food that would pose a risk to participants with food allergies, and that was in accordance with building food safety policies. Also, the monetary compensation provided for this study was distributed discretely, out of sight from residents who did not participate in the study. To minimize legal risk, grandparents were informed of mandated reporting requirements, specifically disclosure of information that would pose a serious safety risk to themselves or their grandchildren.

### **Issues of Trustworthiness**

Several strategies were employed to ensure the credibility, dependability, and transferability of the information gathered for the study. To ensure credibility, data was collected using three different approaches (focus groups, key informant interviews, and observation) to provide methodological triangulation. The process of “peer debriefing” was used (Bloomberg & Volpe, 2008). The researcher’s advisor reviewed the written transcripts and alternative ways of viewing and analyzing the data were discussed. To address validity and reduce measurement error, housing and neighborhood survey items were constructed using standard Likert scales. Questions about health, a topic that falls outside of the researcher’s academic discipline, were modeled after standard questions included in the U.S. Department of Health and Human Services Centers for Disease

*Control Behavioral Risk Factors Surveillance System* survey. All data collection instruments were developed in consultation with the researcher's dissertation advisor and were reviewed by Generations United staff for appropriateness of use with the intended population. The researcher also consulted with resident services coordinators in advance of each site visit to determine whether any of the grandparents participating in focus groups would need assistance with completing the survey. Two focus group participants required reading assistance; all focus group participants were able to complete the survey. Additionally, completed surveys from the first focus group were reviewed by the researcher to determine whether questions might need to be reworded; no adjustments were needed.

To address the issue of dependability, the researcher maintained an audit trail to document the rationale for decisions made during the research process and a detailed record of how data were analyzed and interpreted. The researcher's advisor also reviewed the coding scheme used for data analysis to verify that the codes were relevant to the study's principle research questions and the descriptive categories contained within the conceptual framework.

To allow other researchers to assess transferability, the researcher gathered extensive background and contextual information about the participants, the buildings, and the neighborhoods studied so that rich descriptions the housing environments and grandparents' experiences could be included.

## **Study Limitations**

The results of this study may offer valuable insights that can inform future design of, investment in, and best practices related to the operation of subsidized grandfamily housing. However, it is important to understand the study's limitations. The qualitative approach and small number of participants used in this study limit the generalizability of the research findings, which may not be representative of all grandparents living in subsidized grandfamily housing, or of all subsidized grandfamily housing programs. The researcher attempted to capture differences that might arise from geography, age of housing program, or demographic characteristics of residents by using a recruitment approach that offered variability with respect to these factors. It should be noted that Latinos were underrepresented in the sample of grandparents, and it is possible that their perceptions could differ systematically in some way.

Another possible limitation of the study is that grandparents, housing staff, and key partners may have offered responses that were considered socially and politically correct since the data were collected in group settings. To address social desirability, the researcher made a conscious effort to create an environment where all participants felt comfortable disclosing their perceptions and honest opinions, and also refrained from expressing unconscious agreement or disagreement through body language. Additionally, focus group participants were given an opportunity to provide follow-up comments in an anonymous survey, and key informants were encouraged to contact the researcher via email if they had additional feedback to share regarding the topics that were addressed during their group interview. Although not an inherent part of the research design, the

fact that University of Minnesota was not a local partner of any of the participating sites may have also helped to minimize social bias on the part of respondents.

The researcher attempted to minimize her own biases by avoiding the use of leading questions during focus groups and key informant interviews, and by avoiding the formation of any hypotheses about which factors in the conceptual framework were most important prior to conducting the research. The researcher further attempted to minimize bias during the data analysis phase by analyzing only de-identified data, which required the removal of participant names from written transcripts.

### **Methods Summary**

This chapter provided a detailed description of the research methodology used to carry out this study. A mixed-methods approach that included focus groups, surveys, key informant interviews, and recorded observations was used to answer the study's principle research questions. Various strategies were used to ensure the credibility of the data collected, including methodological triangulation and "peer debriefing". Ethical issues, including the need to minimize potential risks to participants, the need for informed consent, and the need to protect privacy and confidentiality, were strongly considered during each stage of the study. The conceptual framework developed from the literature review was used inform the data analysis for this study. Qualitative data were analyzed using an inductive coding scheme developed from the study's conceptual framework and survey data were analyzed using SPSS statistical software. Data were reviewed against the literature, and analyzed for key patterns and emerging themes. The intent of this study was to contribute to a greater understanding of "what works" for subsidized grandfamily

housing and it is hoped that the information will be of value to housing developers, funders, policymakers, and service providers who have vested interest in its design.

## **CHAPTER 4: RESEARCH FINDINGS**

### **Introduction**

The purpose of this exploratory study was to examine how subsidized grandfamily housing works for residents. Specifically, this study looked at how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. It was anticipated that through an understanding of "what works" for subsidized grandfamily housing, better informed decisions can be made by housing developers, investors, policymakers, and service providers, with regard to the design of subsidized grandfamily housing. In seeking this information, this study addressed three research questions:

1. How does subsidized grandfamily housing influence grandfamilies' housing constraints?
2. How does subsidized grandfamily housing moderate grandfamilies' housing deficits?
3. How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation?

To answer these questions, the researcher conducted focus groups and surveys with 29 grandparent residents of subsidized grandfamily housing and also semi-structured, group interviews with 15 subsidized grandfamily housing site staff and key partners. The researcher analyzed the results using the categories included in the study's conceptual framework (see p. 45) that were deducted from the literature to form categorical bins for organizing the data and then followed an inductive coding scheme that was developed using both the responses most frequently mentioned and key themes

that emerged from the discussions. To winnow, the researcher created frequency tables and also considered the length of time spent on each given topic as well as participants' tone of voice, to determine which issues were most salient. Using the study's conceptual framework as an organizational guide, following is a detailed discussion of the research findings relevant to each of the research questions addressed in this study. This chapter ends with a brief concluding summary. The reader should note that the percentages in tables and figures may not add to 100 due to rounding.

## **Housing Constraints**

The conceptual model for this study includes six housing constraints identified in Morris and Winter's Housing Adjustment Theory (1996). These constraints include: predisposition, organization, market, resources, discrimination, and culture. This study examined how subsidized grandfamily housing influences grandfamilies' housing constraints by collecting information through focus groups, key informant interviews, surveys, and observation. This section synthesizes the information gathered to describe how each of these six constraints relates to living in subsidized grandfamily housing. Key findings are reported in-depth using thick description from focus groups and key informant interviews, along with illustrative quotes. Relevant findings from the quantitative survey conducted with grandparent participants are also presented to support the interpretation of the qualitative data.

### **PREDISPOSITION**

Findings show that grandparents feel a strong moral obligation to take care of their grandchildren in spite of sacrifice; that several grandfamilies experience poor

physical and mental health; that some grandparents do not want to obtain legal custody of their grandchildren; and that some grandparents do not want to participate in supportive services. These key findings are described in the following paragraphs.

### **Grandparents feel strong moral obligation to take care of their grandchildren in spite of sacrifice**

Grandparents who participated in focus groups expressed some resentment of having to take care of the grandchildren in their twilight years, but also reported a strong sense of moral and familial obligation to do so. They did not want their grandchildren to end up in foster care or out on the street. They talked about the sacrifices that they had to make in order to support their grandchildren, including not being able to travel or buy nice things. “Grandparents don’t get help with food or health care. All of this has to come out of their pocket and nobody wants to turn their back on their grandkids,” explained one grandparent resident. Below are some additional quotes from focus group participants:

We are grandparents that took in our grandchildren to raise them. We didn’t have to do it. We could have let them go into the System and they would have provided for them...I had no plans to take nobody’s child and raise it. But if you said those are my grandchildren, my son’s children, then I’m going to step in and do what I have to do. I’d rather do that then worry about whether they are being taken care of or abused. (Grandparent resident)

You take your funds to take care of your grands, and we still ain’t going nowhere. They go out and buy name brands. I don’t have no name brand nothing. What I have I’ve had it for years, because I’ve been spending my money on providing for you. (Grandparent resident)

Housing site staff and partners also acknowledged the moral commitment and sacrifices made on the part of grandparent caregivers. They discussed the importance of recognizing grandparents for their efforts and encouraging them to practice self-care:

You've got a group of people that are stepping up and doing the right thing for their families, but from a physical and emotional standpoint, they might not be prepared to do this again— in some cases, for a third time.

(Site property manager)

You know, it takes guts to do this for a second time around at that age when you're retired. The grandparents deserve praise for that. We recently did an appreciation luncheon for them. (Site staff)

We also have programming for the grandparents because they tend to want to worry about the kids and worry less about themselves. So, we try to refocus them and say, you've got to worry about yourself, too. (Site staff)

### **Several grandfamilies experience poor physical and mental health**

Housing site staff discussed the physical and mental health needs of grandfamily residents and the fact that their supportive service needs were much higher than originally anticipated. Many of the grandparent residents were in their seventies and eighties, taking care of great-grandchildren. Many were also very low-income, which staff noted was often correlated with poorer health status. Staff reported a decline in mobility as grandparents aged and an observed increase in the use of walkers over time. According to staff, an estimated 50% of grandparent residents have major physical health issues:

We expected grandparents to be a little bit healthier, a little bit younger. We ended up with an average age in the seventies. About 50% of our residents

are frail with significant health issues... The social service needs were higher than what we had anticipated. (Site staff)

They also discussed the mental health care needs of residents, citing the high number of mental health issues among resident grandchildren, noting that many of their psychiatric issues may stem from the status of the absentee parents. Staff explained that, “for most grandchildren, at least one parent is incarcerated or deceased, and in some cases, they both are.” “A lot of the kids have emotional problems and are already seeing their own therapist or their own mental health practitioner. These grandparents have to deal with a lot, really,” said one staff person. “We definitely wish we had mental health services on site,” said another staff person. Overall, staff expressed a need for greater access and utilization of mental health care services.

Several grandparents who participated in focus group discussions also commented on their aging and physical limitations. Some examples of physical limitations, which grandparents mentioned, included: not being able to walk up stairs, difficulty carrying groceries and taking out the trash, difficulty walking a long distance from the car to the building entrance, and loss of bladder control and needing to rush to the bathroom. They also expressed a need to identify better safety evacuation routes for people with walkers and wheelchairs. Focus group participants did not discuss mental health issues in any detail, but articulated the need for on-site mental health services and/or site staff with experience in treating people with mental health issues. “It would be really good if they had a social worker who understands people with different disabilities...people with mental health problems,” explained one grandparent resident.

## **Some grandparents do not want to obtain legal custody of their grandchildren**

In addition to poor health, site staff and partners identified a number of other predispositions typical of grandparent caregivers. Many grandparents are tired and do not have the energy required to keep up with young children or to navigate government systems in order to obtain benefits or legal custody of their grandchildren. Additionally, some grandparents simply were not interested in obtaining legal custody of their grandchildren. In some cases, grandparents feared their own adult children and did not want to risk losing the government benefits that parents are receiving for the grandchildren. In other cases, grandparents remained hopeful that their adult children will “get clean” and resume caregiving responsibility for the grandchildren. The quotes below illustrate grandparents’ sentiments when it comes to pursuing legal custody of their grandchildren:

I’ll grant you for every person who has moved in, two people have said, ‘I don’t want to go through the courts.’ They’re too tired. They don’t know where to get the required information. They’re transportation-challenged.  
(Site property management)

You’re just a grandparent raising your grandchild like your momma probably helped you raise your children. Why do you have to go to the courts and try to get guardianship of that baby? (Grandparent resident)

## **Some grandparents do not want to participate in supportive services**

Subsidized grandfamily housing is often developed to include supportive services, however not all grandparent caregivers displayed an interest in participating in these services. When it comes to the utilization of supportive services, housing site staff

mentioned that several grandparents were resistant to taking parenting classes at their age, believing that they already everything there is to know about raising children. Staff also mentioned that, while some residents were actively engaged in the services offered, for example, grandparent support meetings, other residents were difficult to engage. Primary reasons cited for lack of participation include physical and mental health problems and an existing family support network. “About a third of the grandparents have family support. You’re probably only going to see them when they need utility assistance or when they need a bed—something the family can’t provide,” one site staff person explained. Below are two additional quotes from key informants regarding some grandparents’ lack of participation in supportive services:

They like their grandparent support group. They come to that religiously, but only one-third of the residents come to that. (Site staff)

What we cannot fathom is why not everybody takes advantage of the social services. Some grandparents have family support systems that are involved with their children’s lives and they give them relief. We think those are the people who don’t come to the programs. (Site staff)

## **ORGANIZATION**

Findings indicate that the household arrangement of grandchildren living with grandparents may continue into adulthood; that grandparents may be the caregivers for entire family, not just co-resident grandchildren; and that few grandparents and grandchildren earn wages. These key findings are described in the following paragraphs.

## **Grandchildren living with grandparents may continue into adulthood**

Grandparents who participated in focus groups and housing staff who participated in key informant interviews both identified that the structure of grandfamily households might not be temporary. “Right now, when the children age out, they are either on their own or they’re still with grandma, but in a different location,” explained one staff person. Even after the youngest child ages out of subsidized grandfamily housing at age twenty-one, it is likely that some grandparents and grandchildren will continue to live together for either economic or emotional reasons. In some cases, the grandchildren are unable to maintain an independent living situation because they lack economic stability. In other cases, the grandchildren assume the role of caregiver for their elder grandparents, which, in some cases can make it difficult to work outside of the home while responsible for the care needs of the grandparent. The quotes below characterize some of the reasons why the grandfamily household structure may even after the grandchildren reach adulthood:

Some of us have grandchildren that’s not capable of getting a job and maintaining an apartment. So, they are going to have to go with us even though they are twenty years old. They had problems when they moved here and they still have problems as adults. (Grandparent resident)

These young adults, they are in their twenties, granted. They don’t know how to go out there and survive and take care of themselves. We teach them that there is going to come a time in your life when you are going to have to be independent. You are going to have to leave me at some point. They are not ready for that, not at all, even if they get a job. (Grandparent resident)

We have grandchildren that don't want to leave us because they know that we are ill and feel like we've provided for them. They feel they should be there to help us as much as they can. (Grandparent resident)

A lot of the youth also become caregivers. So, the roles switch where they can't work. (Site staff)

### **Grandparents may be the caregivers for entire family, not just co-resident grandchildren**

Grandparents who participated in focus groups talked about hosting family visitors including their adult children, non-resident grandchildren, siblings, and even their own mothers. According to grandfamily housing staff, grandparents living in subsidized grandfamily housing are often the most stable individuals in their family. "The caregivers in this building are most likely the caregivers of the family," explained one site staff person. As a result, other family members will often seek money, food, and a place to stay. Housing staff described how they handled building visitors, emphasizing a need for strict visitor policies:

We have to make sure that people are not moving in under our nose. We give permission for visitors to stay two weeks and that's it. They have to be announced, and if there are any rules broken they may be escorted out...If there are any safety or legal issues, they may not be allowed in at all.  
(Site staff)

## **Few grandparents and grandchildren earn wages**

Another factor related to household organization is employment status.

Grandparent caregivers exhibited stark differences in employment behavior based upon age and income. According to housing site staff, grandparents who were low-income (at or below 50% AMI) or very low-income (at or below 30% AMI) and who were over 65 years of age tended to have low rates of employment. By staff estimate, only 10% of grandparents living in subsidized grandfamily housing who fit this profile earn wages. In contrast, many younger grandparents, particularly those above 50% AMI were more likely to be working, at least part-time. A few of the older grandchildren in their teens and early twenties also held jobs, but were often discouraged from seeking employment because they do not want their grandparent to experience a rent-increase.

## **MARKET**

Findings indicate that subsidized grandfamily housing positively influenced market constraints, but that the effects may only be temporary; the age out requirement of subsidized grandfamily housing programs caused worry and anxiety for some grandparents; and having a lack of custody or being very low-income may have presented barriers to participation in subsidized grandfamily housing. These key findings are described in detail in the following paragraphs.

## **Subsidized grandfamily housing positively influences market constraints, but effects may only be temporary**

Some of the grandparents who participated in focus groups offered details about their previous living situations that underscored the difficulty that low-income grandfamilies faced in finding and keeping affordable housing in the marketplace. Their housing problems included living in a building that would not accept children, unaffordable rents, substandard housing, drug-ridden housing, overcrowding, eviction, foreclosure, and homelessness.

Subsidized grandfamily housing appeared to positively influence grandfamilies market constraints by providing an affordable housing alternative, but the effects may only be temporary. For the three sites included in this study, the time at which a family “ages out” of the housing program was when the youngest grandchild turns 21 year of age, though one site did not have a formal policy in place. Housing options for grandfamilies varied once they “age out” of a program depending upon whether the housing is publically or privately owned. Some households had the opportunity to transfer into public housing; some had the opportunity to receive a Housing Choice Voucher upon exit; and some would return to the general housing market with the *possibility* of qualifying for other subsidized housing.

Housing site staff acknowledged that finding housing can be difficult and emphasized the importance of starting the move-out process early. Staff at one housing site said they usually begin the process 18 months in advance, but had recently considered starting the process much earlier in hopes of making the transition easier on families. Site staff also discussed their reservations about asking families to move out

when the building had existing vacancies and also the desire to support grandfamily households with young adults going to college.

If children are in college, we still consider it a grandfamily household. Higher education is a key to kids' success. (Site staff)

We've learned that we have to start them early to make sure they are on board with the process. We've found that the longer we waited, the more comfortable they got, and the more traumatic it is to the family. (Site staff)

### **Age out requirement causes worry and anxiety for some grandparents**

The aging out requirement associated with subsidized grandfamily housing programs was a salient topic of discussion among grandparents who participated in focus groups. Participants expressed a wide range of feelings from indifference, to confusion and uncertainty about existing policies, to extreme worry about the impending move. The latter was particularly true among grandparents who were 75 years of age or older or facing a move within the coming year. Grandparents expressed worry about their ability to find affordable housing, their ability to physically pack boxes and move, and having to move away from an established community. Some grandparents felt that they should not be forced to move in their old age. The following quotes illuminate grandparents' sentiments:

Other senior apartments take seniors, but they don't take kids. So, you have to find a place which is like totally non-existent, really. Because there are regular apartments, but seniors cannot afford them. (Grandparent resident)

At this age, do you think we should move? I mean yeah, we got children, but they got their own lives. They didn't help me move in and they ain't going to help me move out neither. (Grandparent resident)

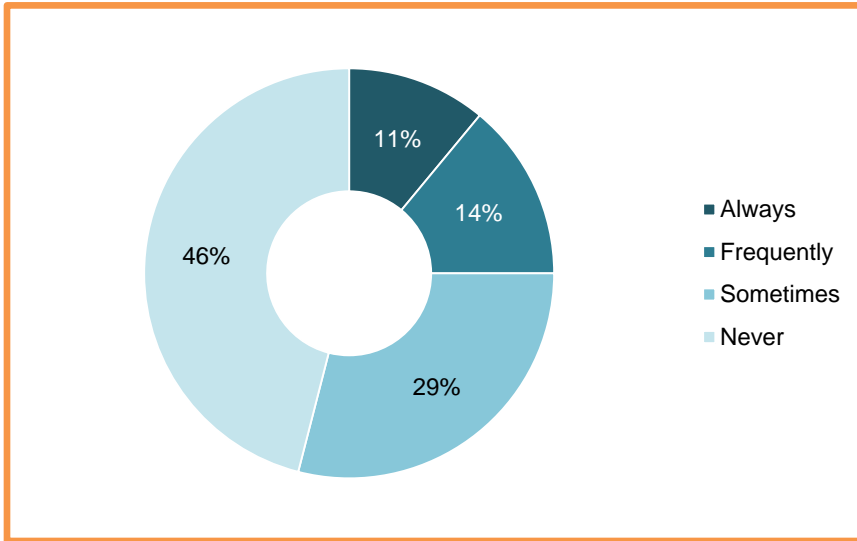
Where am I going to find a new apartment at 81 years of age? I mean, I don't even have the energy to pack a box. All this stuff we've been accumulating over ten years? What are we going to do? (Grandparent resident)

They are going to have to get the Fire Marshall to put me out. I'm not going out like that. I'm 85 right now. How am I going to get these pictures off the wall and put them back up? (Grandparent resident)

Grandparents should not have to move when the children age out. They can give you a smaller unit, but they should say you don't have to move. This is your home. (Grandparent resident)

In a survey administered among focus participants, 25% of grandparents said they “always” or “frequently” worry about having to move, while 46% said they never worry about it (see Figure 5).

Figure 5. Grandparent residents' frequency of worry about needing to move  
**Q. Since moving here, how often do you worry about needing to move? (N=28)**



### **Lack of child custody and/or very low-income may present barriers to participation**

Housing site staff and partners who participated in key informant interviews also identified two presiding factors that can limit a family's ability to participate in subsidized grandfamily housing. The first factor being that many programs require the grandparent to have legal custody of the grandchildren, which can be undesired or difficult to achieve, and the second factor being that not all units in a given building may be available to extremely low-income grandfamilies (at or below 30% AMI). Depending upon the building's sources of financing, some units may be reserved for tenants earning 40%, 50%, or 60% of area median income in order to provide sufficient cash flow for building services and maintenance. Thus, while staff described a very high demand for subsidized grandfamily housing in their respective regions—with long waiting lists and applications from cities more than 200 miles away—two of the three buildings still had vacancies. Site property managers emphasized the importance of having some type of

project-based subsidy, in addition to Low Income Housing Tax Credits, in order to serve the neediest families:

This property has a project-based voucher for every apartment. That subsidy is what's going to make this place successful, hopefully, in the long-run. (Site property manager)

The biggest difficulty in leasing up by far is the non-qualifying grandparents that we couldn't help. We had to turn away a lot of people who didn't make enough money to afford the community. (Site property manager)

It's always bothered me that we couldn't serve the neediest of the needy because we didn't have that [project-based] subsidy. We really want to make a difference. Those very low-income grandparents really need housing of this nature. (Site property manager)

Key informants also discussed the various ways in which they had tried to address the custody barrier. At one housing site, staff were able to work with Legal Aid to reduce the amount of time required to obtain legal custody of a grandchild from six months to 90 days. At another housing site, staff were willing to accept a notarized letter in lieu of legal custody— a practice that staff said has proven to be successful:

We don't want to put up barriers that don't need to be there to obtain this housing. If we can get legal custody great, but we're not going to make a decision based solely on that. We will accept a notarized letter from the mother that says I can't raise my child right now. My mother is going to do it for me. So far, that has worked well for us. (Site property manager)

## RESOURCES

Findings indicate that grandfamilies experience limited resources both in-terms of income and in-terms of information about services available to support their households. According to housing site staff who participated in key informant interviews, the primary source of income for many grandfamilies was the grandparent's social security check from either retirement or disability. While some families also received food stamps, some received no additional benefits for the children in the household. "We have quite a few families who get no benefits for the grandchildren. So, it's pretty much just what the senior has," explained one site staff person. Additionally, housing staff mentioned that several grandfamilies relied heavily on the National School Lunch Program, and experienced difficulty affording breakfast and lunch for grandchildren when school is not in session.

Grandparents who participated in focus groups acknowledged that having a rent subsidy was helpful, but still expressed worry about having enough money. Grandparents also discussed the challenges associated with living on a fixed-income and difficulty obtaining benefits for their grandchildren. They expressed a desire to access more informational resources for grandparents raising grandchildren saying, "We grandparents need more help." Below are two quotes that illustrate grandparents' sentiments about having limited resources:

I don't think a lot of people on the outside know how strong the need is. The numbers are crazy. People don't think that there are that many grandparents taking care of grandchildren with their Social Security check.

(Grandparent resident)

We all appreciate the fact that we are here and we appreciate the help we are getting. I know there are a lot of resources that we don't know about. I just want to say, being a minority; we don't always get all that is available.

(Grandparent resident)

## **DISCRIMINATION**

Findings indicate that grandparent caregivers perceive discrimination in two ways that could influence their residential satisfaction. Grandparents who participated in focus groups said that they felt discriminated against when federal and state government regulations made it difficult to receive aid in order to care for their grandchildren. They felt that they were treated differently than foster care parents in terms of the amount of money and support they received in order to provide care. The quote below illustrates grandparents' perception of unfair treatment with regard to income benefits:

You know what I don't understand? For senior citizens like us, the trouble they put us through to raise our grand. Ain't nobody want to help you. You got to help yourself and you doing the best that you can. They tell you, we don't have no funds for you. They give foster care parents all this money to raise these kids, but they don't help people on a fixed income. (Grandparent resident)

The second way in which grandparents' perceived discrimination relates to the supervision policies that dictate the use of common spaces in subsidized grandfamily housing, which was salient topic of discussion. Grandparents who participated in focus groups felt that they did not require supervision and that they were treated "like children" with the level of monitoring and approval that was required in order to access common spaces such as the community room, library, computer room, and public bathrooms. They

felt that elders deserved greater respect in that regard and should not be “policed.” The quote below illustrates grandparents’ perception of such supervision policies:

We’re not supposed to be in the community room unless we are supervised. Supervised by whom? Why do we need supervision at our age? Everything has to be supervised by the staff, and we’re older than the staff. Our kids is older than the staff. We know right from wrong. They treat us like we are children. (Grandparent resident)

One grandparent also stated that they did not receive all of the resources that were available to grandparents raising grandchildren because they were racial minorities (see Resources section), but did not elaborate further. Grandparents indicated that living in subsidized grandfamily housing removed the stigma of not having parents in the home for grandchildren who attended school and might be judged by their peers. Grandparents did not mention any other instances of feeling discriminated against based upon race, income, gender, age, disability status, or other condition.

## **CULTURE**

Housing site staff and partners who participated in key informant interviews emphasized the importance of having culturally competent staff. “Having a mature case manager who is culturally competent and can relate to both groups [older adults and children] is critical,” explained one staff person. Another site staff person disclosed plans to hire a therapist who was also a person of color, in hopes that the grandparents, who were predominantly black, would relate better to that person.

Among grandparents who participated in focus groups, some were caring for grandchildren, some were caring for grandnieces/nephews, and others were caring for

great-grandchildren or great-grandnieces/nephews. Some grandparents spoke of these kinship care relationships as though they were a cultural norm, while others stressed that they had not planned to be caring for children during their retirement years. For residents who viewed kinship care as a cultural norm, subsidized grandfamily housing appeared to positively influence this cultural constraint. The effects of subsidized grandfamily housing on other aspects of culture were not addressed by participants in this study.

### **Housing Norms and Deficits**

The conceptual model for this study includes six housing norms identified in Morris and Winter's Housing Adjustment Theory (1996). These norms include: space, quality, neighborhood, expenditure, structure, and tenure. This section synthesizes the information gathered to describe how subsidized grandfamily housing does (or does not) moderate the deficits that grandfamilies experience (see Literature Review Section) with respect to these housing norms. Research findings indicate that subsidized grandfamily housing programs enable residents to meet space, quality, and neighborhood norms, which in turn, have positive effects on well-being.

By design, these programs helped grandfamilies to meet expenditure norms by providing some type of rental subsidy, although findings indicate that some grandfamilies still struggled to make household ends meet. Although subsidized grandfamily housing programs did not enable residents to meet structure and tenure norms, findings suggest that some grandparents still aspired to meet them. These key findings are described in detail, in the paragraphs that follow, using thick description from focus groups and key informant interviews, along with illustrative quotes. Relevant findings from the

quantitative survey conducted with grandparent participants are also presented to support the interpretation of the qualitative data.

## **SPACE**

Grandparents who participated in focus groups described how subsidized grandfamily housing had enabled them to meet space and bedroom norms that were not met in their previous housing— a change that grandparents emphasized was very important to their well-being. As a result of living in subsidized grandfamily housing, grandparents were able to avoid sharing a bedroom with a grandchild; avoid having grandchildren of opposite genders sleeping in the same room; and avoid using the living room as a bedroom. Mitigation of this space deficit provided grandparents the freedom to use the living room and kitchen areas at will without fear of waking another household member. Grandparents residing in larger units also mentioned that it was nice to have two bathrooms. The following quote illustrates the positive impact that meeting space norms had on one resident:

I was in a one-bedroom apartment with three children. I had one in the dining room, one in the living room, and one in my bedroom. So, it's like 8:00 p.m. and I can't even do dishes. I could sit in the bathroom for three hours until I went to bed, but really you can only do so much in your bathroom every night, you know? It's nice have the space. I can get my dishes done at night. It's the little things like that which make me excited.

(Grandparent resident)

While talking about living space, grandparents offered comparisons to their previous housing. One grandparent mentioned that she had been living in a shelter.

Another grandparent mentioned that she had been sharing a one-bedroom apartment with her daughter and her grandson. Notably, in this case, the child's mother was not necessarily absent, but the grandparent elected to move so that space norms could be achieved for household members:

I was living with my daughter and it just got to the point where [my grandson] needed his own room and I needed my space and this is the best place that I could think of [to go]. (Grandparent resident)

## **QUALITY**

Findings indicate that subsidized grandfamily housing enables households to achieve quality norms. Some grandparents shared stories about living in substandard conditions prior to moving to subsidized grandfamily housing. One grandparent mentioned that she had been living in a shelter. Another grandparent said she had been living in a house that was infested with snakes. One grandparent, who indicated that she had lived in public housing for 30 years prior, emphasized that her current apartment was much better than her previous unit:

It's up to date. There ain't holes and cracks in the wall like what I was living in before I came here. (Grandparent resident)

This is a really nice place for the price that we pay...two bedrooms, two bathrooms, and a washer and dryer. When I opened up that closet door and I saw that washer and dryer, I'm like, girl, I'm going to get this apartment. I said do you believe in god, 'cause he gonna give me this place right here. (Grandparent resident)

In a survey administered among focus group participants, 97% percent of grandparents either “agreed” or “strongly agreed” that they were pleased with the quality of their apartment units. Several residents also noted that they had very good building maintenance and that, aside from minor cleaning issues, things were well-kept. Most grandparents (82%) either “agreed” or “strongly agreed” that their building is clean and well-maintained. Housing site staff who participated in key informant interviews also stressed the importance of housing quality and building maintenance:

You invest a lot of money in landscaping. Why? Because it creates that comfort zone where people say, oh wow, this is beautiful. If they care that much about the building, then they must care about me. (Site staff)

You know the way seniors live, children don’t live and vice-versa. So, that’s very crucial in keeping up your property. And, I think the better you keep up your property the more the tenants are invested in it. (Site staff)

## **NEIGHBORHOOD**

Residents living in subsidized grandfamily housing appear to be meeting neighborhood norms in terms of convenient access to schools, amenities, and needed services for families. The housing sites included in this study were situated in neighborhoods with public transit, health care clinics, schools, grocery stores, restaurants, and other shopping. Although the neighborhoods were low-to moderate-income, grandparent residents who participated in focused groups indicated that crime-levels were no higher than average, and that developers had “picked a good neighborhood.” “You can get the bus right there. It’s really good for people who don’t have cars,” explained one grandparent. When probed further about neighborhood conditions, residents

mentioned non-violent crimes, such as car break-ins, and occasional misbehaving children, but they did not have anything particularly negative to say about their neighborhoods. Furthermore, when surveyed, grandparents indicated fairly high levels of neighborhood satisfaction. These results are discussed later in this chapter under the section, Residential Satisfaction, pp. 99 to 120.

There is good retail. There's a grocery store, there's optical, there's a dentist, there's pizza, there's restaurants, there's Target. There's a bank. Down the street, there's a park. Everything we need. (Grandparent resident)

This used to be a bad neighborhood, but it's calmed down a lot. I was here New Year's Eve and I didn't hear any gunshots. (Grandparent resident)

Housing site staff and partners who participated in key informant interviews emphasized the importance of neighborhood quality when building subsidized grandfamily housing. In addition to infrastructure, such as schools and public transportation, they also cited the importance of having good community organizations that could act as service partners.

Design isn't a critical feature of this project. What was more important was the community connections—the fact that we are across the street from a health center, a school, a daycare center. We could have designed the most dramatic piece of architecture and it wouldn't have as important as the location. (Site developer)

Having an anchor agency that is well-connected to the community is vital because you can't deliver the level of services needed because of the complexity of the families. So, having good community partners...is critical. (Site staff)

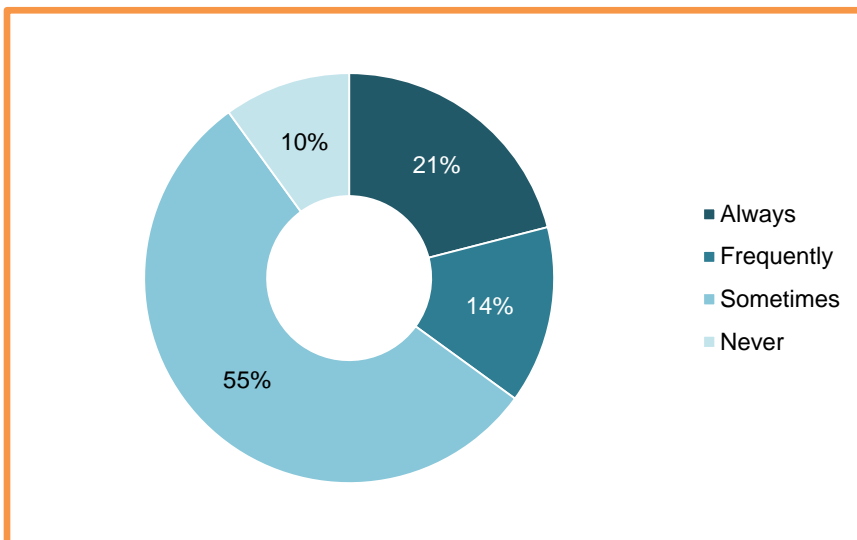
## EXPENDITURE

According to housing site staff and partners, subsidized grandfamily housing enabled residents to meet expenditure norms by providing rental assistance through federally funded Low Income Housing Tax Credits (LIHTC), project-based voucher assistance (by way of the public housing authority), or Housing Choice Vouchers. The type of rental subsidy was dependent upon the funding sources attached to or accepted by a given building. But in all cases, households living in subsidized grandfamily housing did not pay more than 30% of their adjusted gross income for rent and utilities.

Despite meeting expenditure norms, grandparents still experienced feelings of worry about financial security and not having enough money to cover basic needs. Among grandparents who participated in focus groups, 35% said they “always” or “frequently” worry about money. Only 10% said they never worry about it (see Figure 6).

Figure 6. Grandparent residents' frequency of worry about not having enough money to cover basic needs

**Q. Since moving here, how often do you worry that you do not have enough money left over to pay for other basic needs, such as clothing, medicine, and transportation? (N= 29)**



Some grandparents also expressed dismay that a raise or a grandchild getting a job also meant that their rent would increase because of voucher program rules, and felt that it was difficult, economically, to ever get ahead.

If your kid (grandchild) get a job, then your rent goes up. So, your kid is going to look for low-wage or part-time work so your rent doesn't go up. But if a child really wants to work, then your rent goes up triple the amount because they are making too much and they lose almost everything. They can't get food stamps, they can't get Medicaid, and their grandparent's rent goes up.  
(Grandparent resident)

## **STRUCTURE AND TENURE**

As it presently exists, subsidized grandfamily housing does not enable residents to meet the structure and tenure norms of single-family detached, ownership housing. Typical of other subsidized grandfamily housing in United States, the sites included in this study were multifamily, rental. Some of the grandparents who participated in focus groups mentioned that they would prefer to live in a house and anticipated that they would move in a few years.

Comments from housing site staff and partners who participated in key informant interviews suggest that grandfamilies still aspire to meet structure and tenure norms. "Residents still dream of having a house with using a Housing Choice Voucher," said one staff person. "Grandparents still have a little bit of a dream that they would rather have a house. They would rather not be rules driven," explained another key informant who noted that, for these particular individuals, the desire to live independently outweighed the challenges they might face with paying utilities or mowing a lawn.

## **Residential Satisfaction**

Residential satisfaction for the purposes of this study is defined as the level of contentment with the housing environment, which includes the housing unit, the housing development in which the housing unit is contained, and the neighborhood in which the housing development is located. The conceptual model for this study (see p.43) includes 16 factors identified from the literature as being important to the residential satisfaction of grandfamily households. Grandparent caregivers' residential satisfaction was measured using a survey that contained 17 items related to their housing and neighborhood environment and through open-ended questions asked during focus groups. The results are described in this section in detail, using thick description from focus groups and illustrative quotes. Relevant findings from key informant interviews with housing site staff and partners and researcher observations are also included to provide context. This section is organized into nine subparts: sense of community, safety, affordability, accessibility, building design, community space, supportive services, neighborhood services and amenities, and community acceptance.

### **SENSE OF COMMUNITY**

Findings indicate that most grandfamily residents experience a strong sense of community and appear to benefit from living in housing with like households. Housing site staff and partners who participated in key informant interviews agreed that having grandfamilies live next door to one another was a benefit to the families and recommended that the population not be mixed with other subsidized housing residents. In general, staff acknowledged a strong sense of community among residents, indicating

their willingness to take care of one another. At one site included in this study, the housing property management group helped to launch a resident council, which according to staff, has been very successful in building community. The council provided a newsletter for residents, decorated the building for holidays, and organized group dinners. Site staff also described a sense of community among residents and building staff, highlighting the important role of the building maintenance man who was called “grandpa” by the children at more than one site.

Key informants also discussed how different design elements of their respective buildings helped to develop and support community among residents. Such design elements included: communal seating near entrances and elevators, shared laundry facilities on each floor, a rooftop garden, a patio and grill, community rooms, and a security desk staffed by residents. According to staff, each of these building features helped to build social connectedness by stimulating conversation among neighbors. Below are some quotes that reflect staff and partner insights on the sense of community in subsidized grandfamily housing:

It’s a big benefit to allowing grandfamilies to live in the same community next door to each other is the stability that’s created with the support system they develop because of their like situations. It’s just invaluable to the community. They may not be able to do everything they need to do at their age, but they do band together. They stick together and they take care of their own.  
(Site staff)

We have laundry rooms on each floor. I think that has helped families be neighbors because they have to share a laundry room. We have it open 24-hours a day and it seems to work. (Site staff)

Our super has actually gone into people's apartments and helped to quiet down the children. He's the male figure in the building, and sometimes a grandmother needs help taking in the groceries or changing a light bulb. We even had a tenant that was stuck in the bathtub. He had to go in and help her out because the kid was too young. Some of the children call him "grandpa."  
(Site staff)

Grandparents who participated in focus groups also indicated that living exclusively with other grandfamilies helped to create a sense of community among residents. They described neighbors as being more approachable and understanding of their household circumstances when compared to living in senior housing or in an apartment building with younger parents:

I like the building because it's all grandparents. Its' not like you live in a building with younger people with kids, and you don't know what to talk to them about. When you have grandparents with grandchildren, we can all talk about raising them and even having grandchildren. (Grandparent resident)

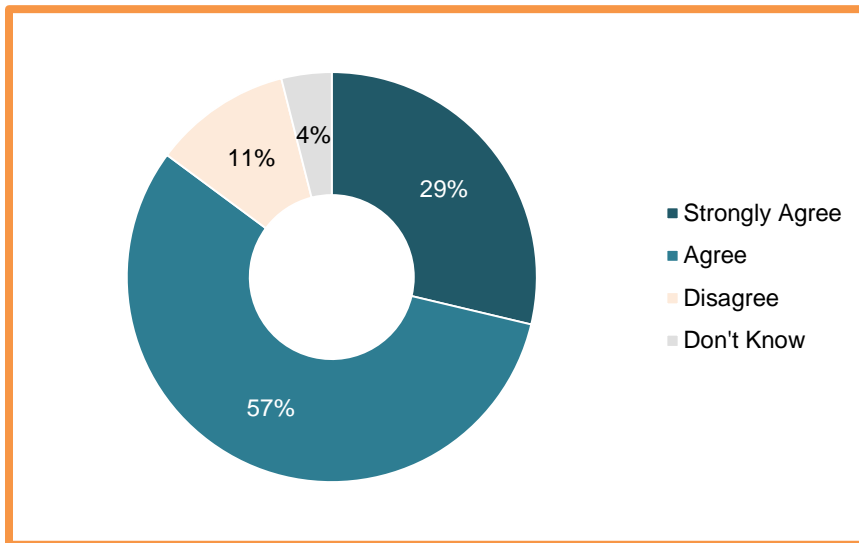
You don't have to be afraid to ask the people in your building for what you need, because we all live here for the same reason. (Grandparent resident)

They also described a sense of community among resident grandchildren who, while living together, had become close friends and playmates. Other evidence of community among residents included an active resident council at one site, grandparents' expressing an interest in doing more activities as a group, grandparents helping their neighbors' grandchildren (which was observed during the researcher's site visits). Most grandparents (86%) either "agreed" or "strongly agreed" that there was a strong sense of

community in their building (see Figure7). However, not all participants agreed with this sentiment. When surveyed, just 69% of grandparents rated the number of friends they can count on for help as “good” or “better” and a few grandparents criticized other neighbors for not adequately monitoring or disciplining their own grandchildren.

Figure7. Grandparent residents' sense of community among building residents

**Q. This building has a strong sense of community. How much do you agree or disagree with this statement? (N=28)**



## **SAFETY**

Findings indicate that most grandfamily residents feel safe in their respective buildings and neighborhoods, but that more security features are desired. Housing site staff who participated in key informant interviews described some of the design features installed in their respective buildings that were intended to increase safety among residents. Features intended to prevent accidental falls and decrease emergency response time if needed included handrails in the hallways and emergency pull cords in apartment units. Features intended to prevent crime included double-restricted access, security cameras, a security desk, and keyless building entry. Site staff also talked about the value

of having staff on-site, and in some cases, staff in residence, who they believed helped to deter nuisance crimes and also disagreements among residents. “The seniors feel more secure when there are more staff members on site,” explained one staff person. Below are two additional quotes that characterize their sentiments:

The one really good thing they did is double-restricted access; restricted access to the parking areas and restricted access to the building, so you have two different barriers to getting into the units. That has helped. (Site staff)

I think that having a security desk is very crucial. Another feature is that we control who comes in and out. (Site staff)

Grandparents who participated in focus groups reported feeling very safe inside their respective buildings. “I like the security. The kids are able to come out and play and ride their bike with the gate here. I feel a little more secure,” said one grandparent resident. A few grandparents mentioned that living in subsidized grandfamily housing felt safer than the previous apartments in which they had lived, which had problems with drug-related crime. In a survey administered among focus group participants, nearly all grandparents (93%) either “agreed” or “strongly agreed” that they felt safe inside their building. The majority of grandparents (79%) also said they felt safe inside their neighborhood. (Figures 8 and 9, which illustrate grandparents’ perceptions of building safety and neighborhood safety, are shown for comparison.) In discussions, grandparents characterized the crime level in their respective neighborhoods as average— no worse than other city neighborhoods. They did not express much concern about crime in their neighborhoods, but did mention isolated instances of car break-ins and teenage

vandalism. One concern that grandparents raised was the issue of people entering the building who did not live there. In turn, they called for tighter building security and the installation of more cameras:

You have people who slips in the back and you don't know who's on the stairways, hoping that the cameras will catch them. (Grandparent resident)

Just make the security functional. Don't make it hard for the residents whether you have cameras and a guard, or you just have cameras. (Grandparent resident)

Figure 8. Grandparent residents' sense of safety inside their building

Q. I feel safe inside this building. How much do you agree or disagree with this statement? (N=29)

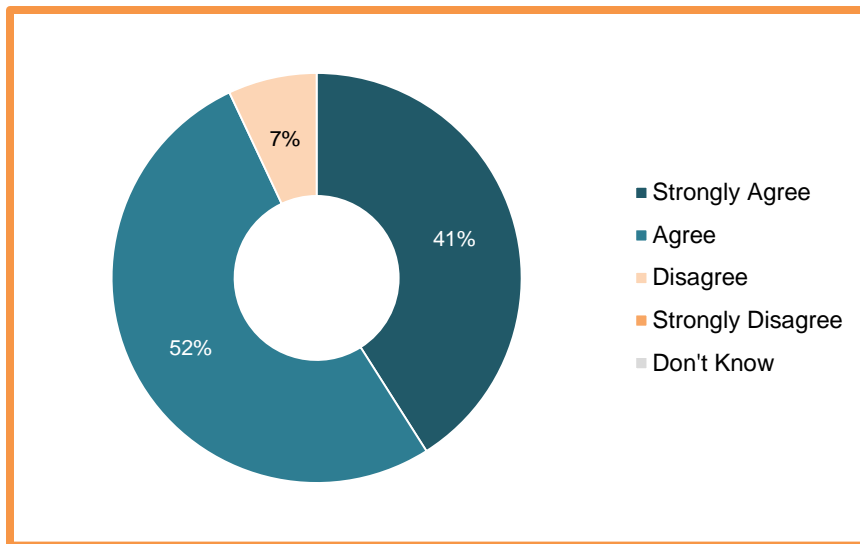
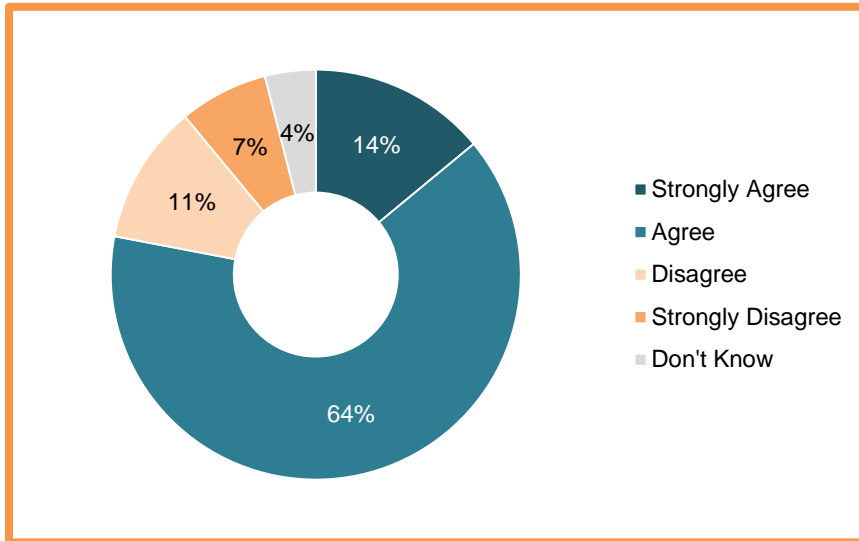


Figure 9. Grandparent residents' sense of safety inside their neighborhood

**Q. I feel safe inside this neighborhood. How much do you agree or disagree with this statement?  
(N=29)**



## **AFFORDABILITY**

Among grandparents who participated in focus groups, perceptions about the affordability of subsidized grandfamily housing were mixed. Some grandparents felt that the rental subsidy made a substantial difference in their overall monthly budget, which allowed them to cover the costs of meaningful extras for their grandchildren, such as holiday gifts and extracurricular activities. Other grandparents felt that the rent and utilities were too expensive and viewed the use of dishwashers, air conditioners, and refrigerators as major contributing factors towards unaffordable electrical bills. Differing perceptions regarding affordability appeared to be influenced by whether residents had lived in public or private housing before moving to subsidized grandfamily housing. Those who had lived in private housing were more likely to describe subsidized grandfamily housing as being affordable. Below are some quotes that illustrate grandparents' thoughts about affordability:

I'm just happy to be able to do a little bit more for my kids financially. This year will be the first time they've had a great Christmas in God...I can't even begin to remember. It's very important and I appreciate it so much.

(Grandparent resident)

I'm so glad to have down-sized. It kind of hurt my feelings to get rid of a lot of my stuff, but just to have affordable rent and utilities, it's a godsend. This place is a godsend. (Grandparent resident)

If you build another building, make sure they put in central air and don't charge residents for electricity. Here, you have to pay for your own air conditioner. They run five-hundred to seven-hundred dollars. Who has that kind of money? (Grandparent resident)

## **ACCESSIBILITY**

Findings indicate that the accessibility features in subsidized grandfamily housing are needed and appreciated, but that such features could be improved upon. Housing site staff who participated in key informant interviews described some of the design features installed in their respective buildings intended to help improve livability for residents with disabilities and/or limited mobility. Features included in-unit washer and dryers or laundry facilities on each floor, trash disposal on each floor, ADA-compliant door handles and faucets, grab bars in the shower, handrails along hallway corridors, and elevators. "Several of these features are required in buildings designated as senior housing," one site staff person explained. Key informants also discussed the mobility of grandparent residents and how it has declined with age over time:

The hall design and the doors are accessible if you need to walk with your cane and you need to hold onto something. All of the apartments are handicap adaptable. Since opening, we've acquired more tenants with walkers— not so many with wheelchairs— but the mobility of residents has changed. (Site staff)

When asked, “What do you like most about living in this building?” grandparents who participated in focus groups expressed appreciation for the elevators and in-unit washers and dryers, in particular. For the most part, grandparents seemed to feel that their respective buildings were largely accessible. They also identified some design shortfalls, which are described in the quotes below:

There are grab bars in the shower, but no grab bar where the toilet is. I had my mother a couple of nights, and I'm like, oh my god, don't push down on that, because the toilet paper holder can't hold your weight. That feature should have been in every unit. You don't know whether a grandparent is going to have a disabled kid or end up disabled themselves.

(Grandparent resident)

The doorknobs look nice, but they are way too easy to get open with little ones. My 18-month old, before I know it, he's gone down the hall. I know they're thinking in-terms of the grandparents, but they have to work for both of us. (Grandparent resident)

## **BUILDING DESIGN**

Grandparents who participated in focus groups seemed largely satisfied with the design of their apartment buildings, except for the utilization of outdoor space. “We got good space, everything's not together,” explained one grandparent resident. When

surveyed, most grandparents (96%) either “agreed” or “strongly agreed” that the space in their home provided adequate privacy for both grandparents and grandchildren.

In units where they were present, grandparents were most appreciative of having in-unit washers and dryers, two bathrooms, and large master bedroom closets. When asked if there was anything about the design of their building they did not like, grandparents mentioned the lack of storage space, the need for better sound proofing, and the need for more kitchen cupboard space. They also mentioned the need for more guest parking and more communal seating areas for entertaining visitors. Below are some quotes that illustrate grandparent’s sentiments:

I think they need to have a place for storage, because we have no place for storage. (Grandparent resident)

I’ve gotten complaints that I made too much noise in my apartment. Maybe they need more soundproofing. (Grandparent resident)

We’re elderly people and we have to walk from down that way up to the door. We shouldn’t have to do that. The parking is not good at all.  
(Grandparent resident)

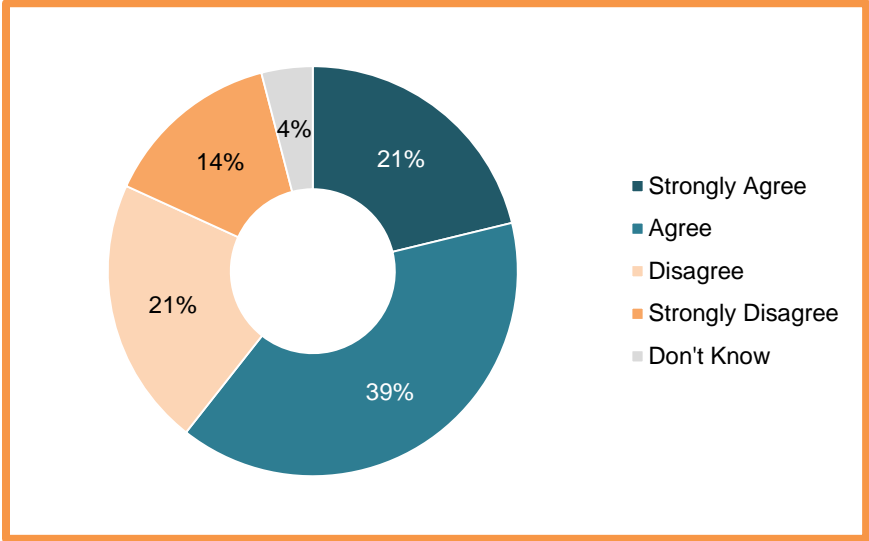
The most prominent dissatisfaction that grandparents’ expressed with regard to building design was a perceived poor usage of outdoor space. “They don’t need trees and flowers, they need something to do,” said one grandparent resident in reference to the teens living in the building. The quote below illustrates the sentiments of several grandparents regarding this issue:

The way they designed the building is okay. That don't seem to be a problem, except they didn't build a playground out there. They should take out that parking lot and build a basketball court or something.

(Grandparent resident)

Outdoor amenities desired by grandparents included basketball courts, grilling areas, and safe spaces for children to run around. At one site where these amenities were already present, grandparents still expressed interest in having more outdoor activity space. Housing site staff who participated in key informant interviews also suggested the addition of grassy play areas. When surveyed, just 60% of grandparents “agreed” or “strongly agreed” that their building provided good spaces for grandchildren to play or “hang out” (see Figure 10).

Figure 10. Grandparent residents' perception of play spaces in their building  
**Q. This building provides good spaces for my grandchildren to play or “hang out.” How much do you agree or disagree with this statement? (N=28)**



Housing site staff and partners who participated in key informant interviews felt that the physical spaces of their respective buildings were well-designed, but universally

recommended three design changes: hardwood or vinyl flooring in common areas, additional guest parking, and more outdoor activity areas for the children. According to site staff, the installation of carpeted hallways, in particular, had been a costly mistake:

Carpet in the hallways was a bad decision. With a 56-unit building there isn't a lot of cash flow available to just do a wholesale replacement of common area flooring. (Site property management)

## **BUILDING POLICIES**

Findings point to a link between community space and a lack of decision-making power in subsidized grandfamily housing that might reduce residential satisfaction. Grandparents who participated in focus groups expressed strong dissatisfaction with policies that limited their use of common spaces in the building, which were universal across all three sites included in this study. These common spaces, which included community rooms, computer rooms, activity rooms, exercise rooms, and library areas, were all under lock and key when researchers visited. Usage policies varied across sites, but in general, these rooms were only open during office hours or when a housing staff person was present. Site staff explained that these rooms were not open on evenings or weekends, or during other times when the resident office was not staffed. Grandparents expressed frustration over not being able to use these spaces at will, and a few grandparents went so far as to say there was no point in having these types of amenities if residents could not use them. It is worth noting that when asked, "What do you like about living in this building?" grandparents did not mention any of the above listed amenities. Grandparents acknowledged that, at one point in time, some of these rooms had been vandalized, resulting in restricted access. However, several grandparents felt that

restricting access was unfair, and suggested the use of security cameras or hiring additional staff to monitor rooms, if necessary. Below are some comments that highlight grandparents' sentiments regarding building policies that limit the use of these common areas:

They need to have it accessible because it makes no sense having places and no place to go. You can't go nowhere on the weekend— everything is locked up. (Grandparent resident)

I wish there was a place that our kids, who are going to school, could come down and don't have to worry. If you have to print something out, you have to go into the office and ask staff to print it for you. The computer room closes at 4 p.m. and some kids come home late...not everybody has a computer. (Grandparent resident)

Maybe when the different investors and owners hear that, 'wow, they've got that nice fitness room and that nice computer room in there that the residents don't have access to it [they will say] what can we help do to help them have access to those things? And then, boom. We're gonna be able to come in here on a Saturday and workout and the kids can go be on the computer. (Grandparent resident)

I come in and I have to use the bathroom and I have to go upstairs because I can't get to no bathroom on the first-floor. It's locked up.  
(Grandparent resident)

## **SUPPORTIVE SERVICES**

Housing site staff and partners who participated in key informant interviews talked about the importance of including high-quality supportive services in subsidized grandfamily housing buildings. “If you’re going to build supportive housing without adequate social services you’re wasting your time. You’re just going to have another building with another set of problems,” explained one site staff. “This a good design. People love it and people react to the design of the building, but it has to have support services in it. You’ve got to hire people that buy into the mission,” emphasized another site staff person. This section describes the needs, challenges, staff requirements, and level of satisfaction regarding supportive services.

### **Supportive service needs**

Housing site staff described the different types of supportive services they offered, which included case management, support groups for grandparents, and academic and workforce readiness programs for the grandchildren. These services were typical across the three sites included in this study. Site staff seemed to be in agreement that the most critical service offered was onsite “out-of-school time” programming. These programs, which provided organized activities and homework help for resident grandchildren, also offered grandparent givers much needed respite. During the summertime, these programs also served breakfast and lunch to the children, filling an important gap in food assistance that occurs in summer months for grandfamilies who are dependent on the National School Lunch Program, a federally-funded benefit program that provides reduced-price or free meals to eligible school children. Below are two

quotes that illustrate the value of onsite “out-of-school” time programming from staff’s perspective:

The summer program allows children who may normally go home and be with just a senior to be with other children. And, it allows the grandparents to have some sort of respite. I’ve heard grandparents say, ‘great now I can do the grocery shopping and I can do the cooking.’ (Site staff)

We have a lot of grandparents who cannot really travel and it’s the greatest thing ever to just say, ‘you can go downstairs,’ and have homework help and people who really care and try to assist you. (Site staff)

One unmet service need that staff specified was the need for onsite mental health services. Grandparent residents who participated in focus groups also expressed a need for onsite mental health services. Other additional supports desired by grandparents included paratransit services, computer classes, subsidized internet service, and more organized activities for the grandchildren.

### **Supportive service challenges**

Housing site staff also discussed the challenges associated with delivering supportive services, which included insufficient funding, changing resident demographics, and difficulty cultivating resident engagement. Site staff identified a strong need to tailor and adjust programming over time as resident grandchildren age and grow:

When we first started the building ten years ago, we didn't have a young adult success program. We just catered to the younger children. But, as these children got older the needs changed so we've had to change. You can't keep the programming stagnant because then the residents won't benefit from it. (Site staff)

According to site staff, seed grants and strong community partnerships were both key in helping to establish supportive services for grandfamily residents. They also mentioned that identifying ongoing sources of funding for supportive services remained a huge challenge, especially when it came to funding for site coordinator and case manager positions.

### **Supportive service staffing**

Site staff and partners also talked about the importance of having high-quality, committed staff who genuinely buy into the mission of improving the lives of grandfamilies with the understanding that staff play an important role creating stability for residents. Another important characteristic for grandfamily housing staff they identified was the ability to relate to both children and older adults. "I have to find somebody who can work with adults, grandparents, and children and that's a unique person," explained one site staff person. Below are two additional quotes from key informants that illustrate the importance of having high-quality staff:

You cannot be hands-off in a building like this. That will be the detriment of the building. You have to be hands-on and you've got to have your heart in it. You know, it's now easy, but it's worth it. (Site staff)

The most consistent thing for residents to see is the staffing. Life is okay if you see your support system being okay. When we seem strong, they feel stronger. When you're dealing with seniors whose life is totally different than what they expected at this point [in their lives], they're happy knowing that there's somebody consistent that supports them. (Site staff)

### **Supportive service satisfaction**

Grandparents who participated in focus groups expressed appreciation for the supportive that were offered, particularly the "out-of-school time" programming, which provided respite and enabled them time to cook dinner and/or the grocery shopping. Grandparents also identified two factors that contributed towards some residents' dissatisfaction with the supportive services: staff turnover and a perceived lack of mentorship opportunities and organized activities for older youth, especially the boys. According to grandparents, the staff turnover was particularly hard on the grandchildren who were already coping with absentee parents. Below are some quotes that illustrate grandparents' sentiments regarding the supportive services:

I have to give my granddaughter something to do. It's not my fault we're in this situation. I want her to be a normal little girl and do all those things...Girls Scouts and dance classes. All of those agencies, we need them to keep coming. We need all that. (Grandparent resident)

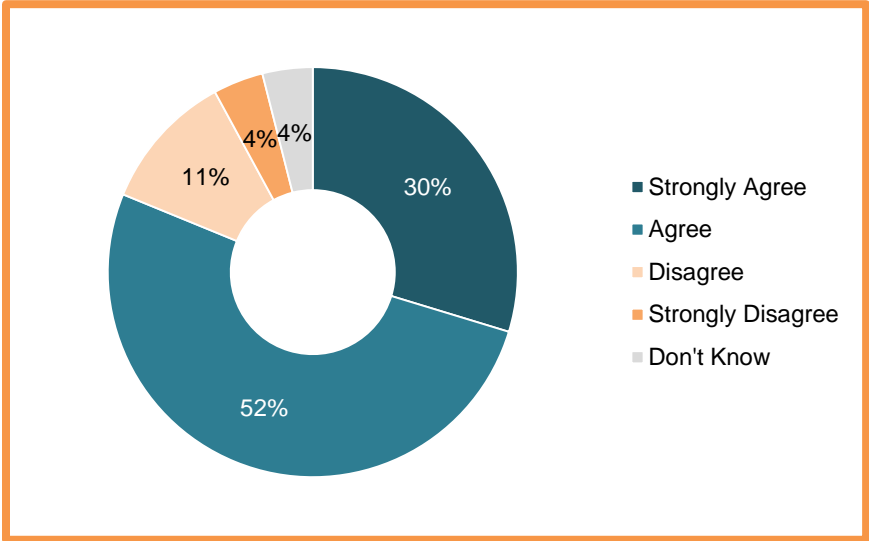
They got to understand that the staff turnover is really hard on the kids. These are kids without parents in the first place. Then you come, you the social worker. They meet you, they like you, they have confidence in you. Then, all of a sudden once they get used to you and bare their heart, then you gone. (Grandparent resident)

When I first moved here, I loved it. It was beautiful and it was new and there were a lot of things for the kids. They were small at that age. They had the nursery room downstairs. All the kids played together...that was when we first moved here. (Grandparent resident)

When they got older there wasn't anything for the older children to do...When they turn 15, 16, 17, 18— that's when they really need help. There was no one here but us, and we are not men. I can't go out there and jump no hoop. I might be able to do something with the girls and teach them something, but we have boys, too. (Grandparent resident)

When surveyed, the majority of grandparents (82%) either “agreed” or “strongly agreed” that their building provided needed supportive services (see Figure 11.)

Figure 11. Grandparent residents' perception of support services in their building  
**Q. This building provides needed supportive services. How much do you agree or disagree with this statement? (N=27)**



## NEIGHBORHOOD SERVICES AND AMENITIES

Based upon researcher observation, the housing sites included in this study were situated in neighborhoods with public transit, health care clinics, schools, grocery stores, restaurants, and other shopping nearby. Grandparents who participated in focus groups expressed high satisfaction with their respective neighborhoods. When surveyed, most grandparents (88 to 100%) either “agreed” or “strongly agreed” that they had convenient access to grocery shopping, medical care, and public transportation. The majority of grandparents (78%) also either “agreed” or “strongly agreed” that that their neighborhood was safe and that it had good community activities for elders. Three measures of neighborhood quality were rated positively by less than 70% of grandparents. These included safe places to exercise, neighborhood school quality, and good community activities for children (see Table 11).

Table 11: Grandparent Residents’ Satisfaction with Neighborhood Services and Amenities

N=29	Please indicate how much you agree or disagree with the following statements...		
	<i>Percent who said “Agree” or “Strongly Agree”</i>	<i>Percent who said “Disagree” or “Strongly Disagree”</i>	<i>Percent who said “Don’t Know”</i>
I have convenient access to a grocery store that carries fresh produce	100	--	--
I have convenient access to medical care for me and my grandchildren	89	7	4
I have convenient access to public transportation.	88	12	--
I feel that this neighborhood is safe	78	18	4
There are good community activities for me in this neighborhood	78	15	7
I have convenient access to safe places to exercise	67	33	--
The schools in this neighborhood are of high quality	63	18	19
There are good community activities for my grandchildren in this neighborhood	53	33	14

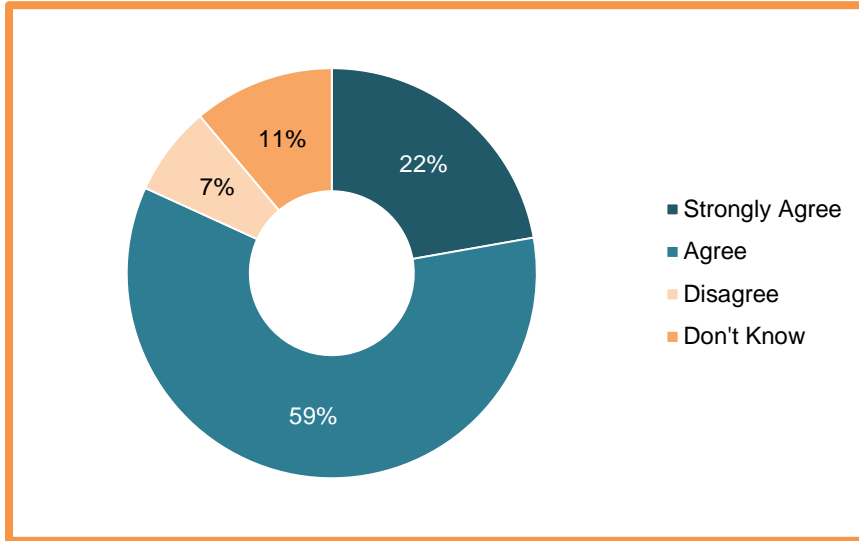
In focus group discussions, several grandparents spoke positively about the retail shopping and public transportation options near the housing in which they lived. A few participants, who felt that public transit was not super convenient, described challenges related to limited mobility such as needing to walk up stairs or up hills to reach bus or train stops. The majority of grandparents seemed to feel that they had convenient access to medical and dental care in their neighborhoods, although a few participants at different sites mentioned that they were unaware of the clinical services offered nearby. Grandparents seemed to appreciate having community centers, parks, and schools nearby, but indicated that they would like to see more community activities for both children and elders.

## **COMMUNITY ACCEPTANCE**

Grandparents who participated in focus groups described very positive relationships with community organizations, several of whom provided donations and services to subsidized grandfamily housing residents including food assistance, employment assistance, backpacks, and toy donations. Grandparents mentioned a few problems with neighborhood children coming over to use their facilities, but reported no issues or disagreements with other neighborhood residents. When surveyed, the majority of grandparents (81%) either “agreed” or “strongly” agreed that the community was accepting of them and their grandchildren (see Figure 12).

Figure 12. Grandparent residents' perception of community acceptance

**Q. The community is accepting of me and my grandchildren How much do you agree or disagree with this statement? (N=27)**



Housing site staff and partners who participated in key informant interviews also indicated that their subsidized grandfamily housing programs were well-received in their respective communities, stating strong support from nonprofit community organizations and local politicians. Key informants also provided examples of support from private local businesses, including a pizza parlor that regularly donated lunches for the summer activity program at one site and a bicycle shop that routinely donated bikes to grandchildren at another site. “Everyone was encouraged by this new development...The buy-in from the neighborhood was automatic because of the blighted nature of the prior property,” explained one site property manager.

## **Family Well-Being**

In this study, family well-being was measured along four dimensions which, according to the literature, can influence grandfamily household members overall quality of life. The conceptual model for this study (see p. 45) lists these four dimensions which include: physical health, mental health, personal relationships, and school performance for grandchildren. Family well-being among resident grandfamilies was measured using eight question items in a survey that was completed by grandparent caregivers who participated in focus groups. The results are described in this section in detail.

Grandparents reported very high levels of satisfaction when asked to rate their relationships with their grandchildren. Most grandparents (96%) rated their personal relationships with their grandchildren as good or better; half (50%) rated them as “excellent.” Grandparents also reported high levels of satisfaction when asked to rate their grandchildren’s social networks. The majority of grandparents (75%) rated the number of friends their grandchildren have to play with as good or better. Overall, grandparents rated their own social networks slightly less favorably— just 69% rated the number of friends they can count on for help if needed as good or better (see Figures 13 and 14).

Figure 13. Grandparent residents' rating of grandchildren's social networks

**Q. Thinking about how things were on most days over the past month, how would you rate the number of friends your grandchildren have to play with? (N=24)**

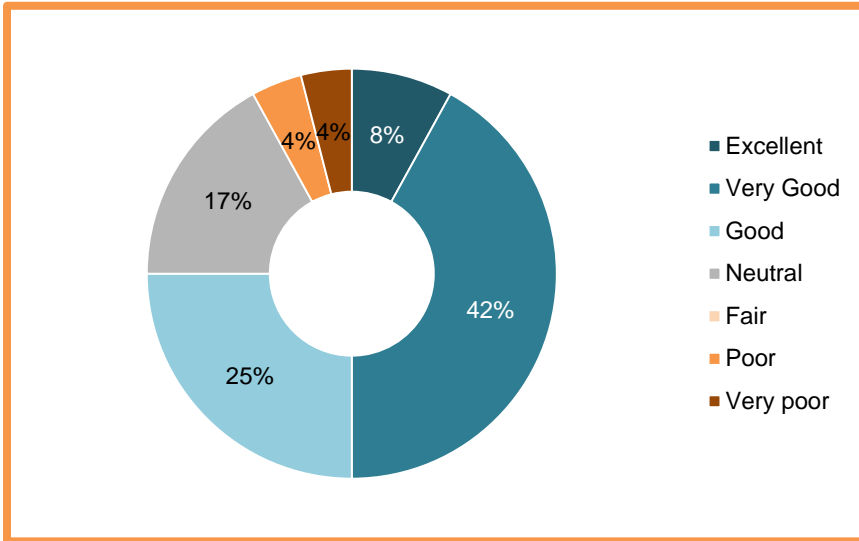
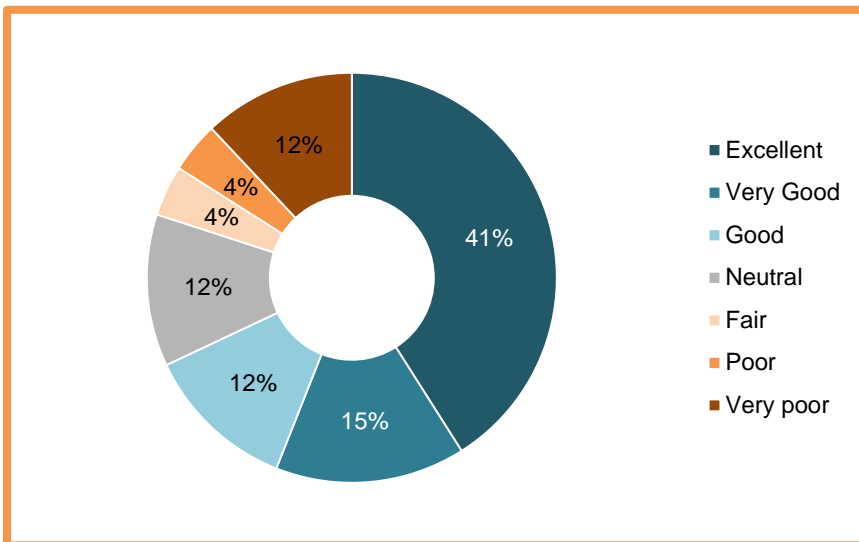


Figure 14. Grandparent residents' rating of own social networks

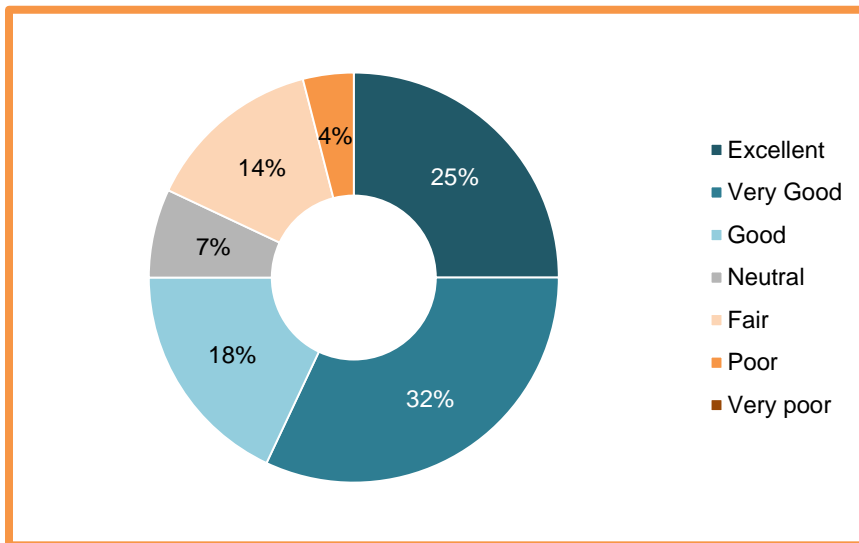
**Q. Thinking about how things were on most days over the past month, how would you rate the number of friends you can count on for help if needed? (N=26)**



When asked to rate the school performance of their grandchildren, the majority of grandparents (75%) rated it as good or better. Notably, one-quarter of grandparents did not rate their grandchildren's school performance positively (see Figure 15). During focus groups, a few grandparents mentioned that not all of their co-resident grandchildren exhibited similar school performance. In such cases, one or more children were performing well while others were performing poorly.

Figure 15. Grandparent residents' rating of grandchildren's school performance

**Q. Thinking about how things were on most days over the past month, how would you rate your grandchildren's school performance? (N=28)**



Grandparents were also asked to rate physical and mental health status for both themselves and their grandchildren. Table 12 provides a summary of grandparents' survey responses. According to grandparent's self-reported health status, several subsidized grandfamily housing residents experience poor physical and/or mental health. Just two-thirds (67%) rated their grandchildren's mental health as good or better and half (55%) rated their own physical health as good or better. Overall, family well-being among households living in subsidized grandfamily housing was mixed, with social-emotional and health outcomes ranging from excellent to very poor.

Table 12: Grandparent Residents' Reports on Physical and Mental Health Status for Both Self and Grandchildren

N=29	Thinking about how things were on <u>most</u> days over the past month, how would you rate...?		
	<i>Percent who said "Excellent," "Very Good" or "Good"</i>	<i>Percent who said "Neutral"</i>	<i>Percent who said "Fair," "Poor," or "Very Poor"</i>
The physical health of your grandchildren	75	7	18
The mental health of your grandchildren	67	11	22
Your own physical health	55	3	42
Your own mental health	76	3	21

## Research Findings Summary

This chapter presented the research findings uncovered by this study. Findings were organized according to the categories included in the study's conceptual model (p. 45), which offered a framework for analysis. Qualitative information gathered from focus groups, key informant interviews, and researcher observations and quantitative data gathered from surveys were synthesized to answer the study's central research questions:

1. How does subsidized grandfamily housing influence grandfamilies' housing constraints?
2. How does subsidized grandfamily housing moderate grandfamilies' housing deficits?
3. How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation?

Findings indicate that subsidized grandfamily housing programs both positively and negatively influence grandfamilies housing constraints; that subsidized grandfamily housing programs effectively moderated grandfamilies housing deficits; and that grandfamilies experienced overall high residential satisfaction. Family well-being among households living in subsidized grandfamily housing was mixed, with social-emotional and health outcomes ranging from "excellent" to "very poor."

Following is a summary of key learnings presented in this chapter:

1. Lack of child custody and very low-income may present barriers to participation in subsidized grandfamily housing.
2. Grandchildren may continue to live with grandparent caregivers into adulthood. Additionally, the age-out requirement of subsidized grandfamily housing programs was a cause for worry among some grandparents.
3. Subsidized grandfamily housing programs aided households in meeting space, quality, and expenditure norms, but some grandfamilies still struggled to make ends meet. Ability to meet space norms was extremely important to grandparents.
4. Subsidized grandfamily housing programs did not enable households to meet structure and tenure norms, but some grandparents still aspired to become homeowners.
5. Grandparents and grandchildren appeared to benefit from living in housing with like households, and most grandparent caregivers experienced a strong sense of community.
6. Grandparents indicated that existing accessibility features were needed and appreciated, but that more could be done to assist residents with physical limitations.
7. Grandparents caregivers seemed largely satisfied with the design of their apartment buildings, except for the utilization of outdoor space. More outdoor recreation amenities for both grandparents and grandchildren were desired.
8. Grandparents expressed strong dissatisfaction with policies that limited their use of common spaces in the building, including restricted access and supervised use.

9. Most grandparents felt safe in their respective buildings and neighborhoods, but still desired more security features.

10. Neighborhoods appeared to play an important role in the success of subsidized grandfamily housing developments— housing site staff identified strong community partners, neighborhood acceptance, and neighborhood amenities as key factors.

11. Housing site staff emphasized the importance of including high-quality supportive services in subsidized grandfamily housing buildings. Staff identified the need to tailor and adjust programming over time as resident grandchildren age and grow. Several challenges associated with delivering supportive services were also identified including: insufficient funding, changing resident demographics, and difficulty cultivating resident engagement.

12. Several grandfamilies experienced poor physical and mental health. An estimated 50% of grandparent residents have major physical health issues. Both grandparents and housing site staff identified a need for onsite mental health services.

13. Grandparents reported very high levels of satisfaction when asked to rate their relationships with their grandchildren.

Below is an at-a-glance summary of all the recommendations made by study participants for improving subsidized grandfamily housing sites (see Table 13). The research findings presented in this chapter hold important implications for the future subsidized grandfamily housing— including building design, supportive services, program policies, and development and financing. Implications for practice and suggestions for future research are discussed in Chapter 5.

Table 13. Summary of Grandparent Resident and Housing Site Staff Recommendations for Improving Subsidized Grandfamily Housing Sites

	Recommended by Grandparent Residents	Recommended by Housing Site Staff
<b>Building Design</b>		
Security cameras	X	X
Formal security desk with sign-in procedures	X	X
Visitor parking (increased number of spaces)	X	X
Dedicated parking spaces for residents	X	
More accessibility features to support residents with physical limitations	X	X
Recreation for grandchildren: <i>Additional playground equipment, grassy play areas, activity courts, indoor recreation spaces, more organized activities for youth, i.e., movie night</i>	X	X
Dedicated activity rooms, computer labs and play spaces for each building included in the development	X	
Recreation for grandparents: <i>Outdoor seating, grilling area, discounted movie and event tickets, exercise room, computer classes</i>	X	
Family room common area for entertaining visitors	X	
Sound proofing (increased)	X	
Storage space: <i>Dedicated storage space for apartment units, additional kitchen cupboard space, large closets</i>	X	
Use vinyl or carpet squares in common areas (avoid rolled carpet)		X
<b>Supportive Services</b>		
Mental health services on-site	X	X
Out-of-school time programming	X	X
Staff qualities: <i>Culturally competent, committed to the mission, able to work with both children and elders; maintenance person who lives onsite.</i>	X	X
Transportation: <i>paratransit services, van for group activities</i>	X	X
Informational resources: <i>job board, information on parenting and how to apply for benefit programs</i>	X	

Table 13: (Continued) Summary of Grandparent Resident and Housing Site Staff  
 Recommendations for Improving Subsidized Grandfamily Housing Sites

	Recommended by Grandparent Residents	Recommended by Housing Site Staff
<b>Program Policies</b>		
Accept waiver signed by child's mother in lieu of legal custody		X
Do not mix resident populations- entire building should be grandfamilies		X
Focus on building community, establish a resident council		X
Allow small pets- companion animals are good for residents' health		X
Use of common spaces: <i>Allow grandparents to use common spaces unsupervised, hire staff or install cameras to monitor youth if necessary- locked spaces are underutilized</i>	X	
Utilities: <i>Subsidized Wi-Fi internet services, utilities included in rent</i>	X	
Provide "transitional" units for grandparents after grandchildren age-out (allow grandparents to remain part of the housing community)	X	
<b>Development and Financing</b>		
Most households want 2-bedroom units		X
Seek project-based subsidy to serve households at or below 50% Area Median Income		X
Do not exceed 50 units- anything larger does families a disservice		X
Involve housing property manager early on in the development to avoid costly design mistakes		X
Identify strong community partners who can assist in the provision of supportive services		X
Locate in quality neighborhoods with access to shopping, transit, and clinical services		X
Supportive services need to change as population ages		X
Low Income Housing Tax Credits (LIHTC) have been key in financing, but application process could be improved		X

*Researcher note: The recommendation for improving the application process for Low Income Housing Tax Credits (LIHTC) was mentioned by one housing site developer and was not discussed in this chapter.*

## **CHAPTER 5: DISCUSSION AND RECOMMENDATIONS**

### **Introduction**

The purpose of this exploratory study was to examine how subsidized grandfamily housing works for residents. Specifically, this study looked at how subsidized grandfamily housing influences grandparent caregivers' quality of life through its effects on housing constraints, residential satisfaction, and family well-being. It was anticipated that through an understanding of "what works" for subsidized grandfamily housing, better informed decisions can be made by housing developers, investors, policymakers, and service providers, with regard to the design of subsidized grandfamily housing.

The researcher conducted focus groups and surveys with 29 grandparent residents of subsidized grandfamily housing and key informant interviews with 15 subsidized grandfamily housing site staff and key partners. The researcher analyzed the results using the categories included in the study's conceptual framework (see p. 45). The study was based on the following research questions:

1. How does subsidized grandfamily housing influence grandfamilies' housing constraints?
2. How does subsidized grandfamily housing moderate grandfamilies' housing deficits?
3. How does subsidized grandfamily housing influence grandfamilies' residential satisfaction and family well-being as it relates to their housing situation?

These three research questions were largely satisfied by the findings presented in Chapter 4, which concluded with a summary of key learnings. This chapter begins with an interpretative analysis of the study's key findings organized by the main subtopics on

grandfamily households that appear in the literature (overall health status, child custody, disability, employment and income, social support, neighborhood conditions, supportive services, long-term considerations, and building design and policies), moving parallel with the study's conceptual framework— from housing constraints to residential satisfaction. The discussion is framed by what is known from previous research, and implications seek to augment current understanding of grandfamilies' needs and challenges by applying a housing design lens. Following are considerations for policy and practice, including recommended actions for housing developers, services providers, investors, and policymakers. The chapter concludes with a section on recommendations for future research.

## **Connections to previous research**

### **Overall health status**

One key finding from this study was that several grandfamilies living in subsidized grandfamily housing experience poor physical and mental health based on self-reported health status. Among grandparents who participated in this study, 42% reported their own physical health less than “good” and housing site staff estimated that 50% of grandparent residents have major physical health problems. When asked to rate their own mental health status, 21% of grandparents provided a rating of less than “good.” This finding was consistent with the literature, which suggested that grandparent caregivers are predisposed toward a number of health problems including depression, diabetes, hypertension, insomnia, and limited mobility (Baird, 2003; Bundy-Fazioli, Fruhauf, & Miller, 2013; Minkler & Fuller-Thompson, 1999; Strawbridge et al., 1997;

Szinovacz, et al, 1999; Wohl et al., 2003; Whitley et al., 2001). The pervasive physical health problems among grandparents living in subsidized grandfamily housing indicate a need for programs designed to accommodate residents with limited mobility and that facilitate access to clinical care through proximity or other means.

The literature suggests that grandchildren living in grandfamilies are also predisposed toward having health problems including asthma, frequent illness, insomnia, poor diet and behavior problems at school (Hayslip et al., 1998, Hayslip, 1994; Levine-Perkell & Hayslip, 2002; McKinney, 2015; Minkler & Roe, 1996; Solomon & Marx, 1995). However, grandparents who participated in this study rated the health of their grandchildren more positively; 75% rated the physical health of their grandchildren as “good” or better, 67% rated the mental health of their grandchildren “good” or better, and 75% rated their grandchild’s school performance as “good” or better. Because this study did not include a pre-test or a control group, the researcher was unable to measure change in grandchildren’s health as a result of subsidized grandfamily housing. However, grandparents’ favorable self-reports compared to previous studies suggest that living in subsidized grandfamily housing may have some positive effect.

### **Child custody**

A second key finding from this study was that lack of child custody may present barriers to participation in subsidized grandfamily housing. Housing site staff who participated in this study indicated that many grandparent caregivers seeking subsidized housing do not have legal custody of their grandchildren. This finding is consistent with previous research studies which indicate that some grandparents lack the resources

necessary to establish a legal relationship or do not want to terminate their own child's parental rights to their grandchildren (Generations United, 2005a) and that without a legal relationship, grandparents can experience difficulty accessing needed services for their grandchildren (Generations United, 2005a; Gladstone et al., 2009; Minkler & Odierna, 2001). However, this study adds to the literature by illuminating the extent to which this issue can be a barrier to participation in housing programs that require legal custody. During the lease-up process, all of the sites included in this study encountered grandparent caregivers who were either unwilling or unable to obtain legal custody. One site staff person estimated that for every one grandparent who moved into subsidized grandfamily housing with legal custody, there were two grandparents who had no desire to go through the court system even if it meant that they would be ineligible to participate in the program. Since legal custody has been a frequent eligibility requirement of subsidized grandfamily housing programs to date, findings suggest that this policy may prevent some subsidized grandfamily housing programs from reaching their intended service population. One housing site that participated in this study accepted a notarized letter in lieu of legal custody, which appears to be a promising practice that deserves further investigation.

### **Disability**

A third key finding from this study was that grandparent residents indicated that accessibility features in subsidized grandfamily housing were needed and appreciated, but that more could be done to assist residents with physical limitations. Housing site staff who participated in key informant interviews also emphasized the need to address limited mobility among grandparent residents, noting an increased use of canes and

walkers overtime. These findings were consistent with previous research, which estimated that nearly one in four grandparents (24%) who are primary caregivers of their grandchildren has a disability (Livingston, 2013). However, this study also uncovered the need for housing unit features that can accommodate the disabilities of other family members. Grandparent residents who participated in focus groups spoke about their own physical limitations, but also talked about meeting the accessibility needs of resident grandchildren and visiting elderly parents. These circumstances underscore the value of applying universal design concepts to subsidized grandfamily housing buildings, regardless of whether the building is designated as senior housing.

### **Income and employment**

A fourth key finding from this study was that few grandparents living in subsidized grandfamily housing have earned income and that several struggle to make ends meet. Among grandparents who participated in focus groups, 35% said they “always” or “frequently” worry about money. Housing site staff who participated in this study also highlighted the issue of food insecurity among grandfamily residents and emphasized the importance of providing food supplements to households as part of their program, especially during periods when school is not in session. Throughout this study, the author observed differences in the employment status of caregivers based on age and income. Grandparents living subsidized grandfamily housing who were low-income (at or below 50% AMI) or very low-income (at or below 30% AMI) and who were over 65 years of age tended to have low rates of employment. Housing site staff estimated that only 10% of grandparent residents who fit this profile had earned income. In contrast, many younger grandparents, particularly those above 50% AMI were more likely to be

working, at least part-time. Some grandparents communicated their worries about a decline in rental subsidy due to wage raises or their teenaged grandchild getting jobs.

These findings were consistent with the food insecurity issue identified in the post-occupancy evaluation of Villard Square (Impact Planning Council, 2014), and with secondary data from the American Community Survey, which show that the workforce participation rate among grandparent caregivers over the age of 60 is just 13%, and that grandfamily households experience high rates of poverty (Ellis & Simmons, 2014; Livingston, 2013; U.S. Bureau of the Census, 2014) and economic insecurity (Generations United, 2015). This study adds to the literature by providing additional insight on the employment behaviors of grandfamily households living in subsidized grandfamily housing, and their perceptions regarding their own financial security. The provision of rental subsidy eliminates grandfamilies' housing cost-burden, but other interventions may still be needed in order for households to make ends meet.

### **Social support**

A fifth key finding from this study was that grandparents and grandchildren appear to benefit from living with like households. Most grandparent residents (86%) reported a strong sense of community in their respective buildings. Both residents and housing site staff who participated in key informant interviews commented on the extent to which grandparents frequently rely on their neighbors, and that living with like households helps to reduce the stigma that sometimes accompanies grandfamily household membership—for both grandparents and grandchildren. Housing site staff also cautioned against mixing grandfamilies with other low-income housing populations and recommended that subsidized grandfamily housing developments serve exclusively

grandfamilies. Previous research studies indicated that grandparent caregivers may experience limited resources related to training and peer support, which can indirectly affect households' ability to adjust and adapt (Hayslip & Kaminski, 2005; Morris & Winter, 1996) and that social isolation and inadequate social support can be major obstacles for custodial grandparents (Fruhauf & Hayslip, 2013 and Wohl et al., 2003). Findings from this study add to the literature by demonstrating that, for grandfamily households, living in an intentional housing community can be an effective measure for mitigating social isolation and providing needed peer support.

In a post-occupancy evaluation of GrandFamilies House in Boston Massachusetts, key informants and grandparents suggested that mixing grandfamily households with other families less in need of supportive services might be a more viable economic model (Gottlieb & Silverstein, 2003). Findings from this study suggest that, despite potential cost-effectiveness, this approach is unlikely to yield the same social benefits for grandfamily households, and thus may not be worth the trade-offs.

### **Neighborhood conditions**

A sixth key finding from this study was that neighborhoods appear to play an important role in the success of subsidized grandfamily housing developments—strong community partners, neighborhood acceptance, and neighborhood amenities were identified as key factors. Housing site staff who participated in key informant interviews emphasized the importance of selecting a neighborhood with good community institutions and social supports. When asked to describe their neighborhoods, grandparent residents spoke of their close proximity to services, retail, and other neighborhood amenities, and when surveyed, they also expressed fairly high levels of neighborhood

satisfaction. These findings build upon previous studies, which suggested that neighborhood conditions influence the emotional well-being of grandparents raising their grandchildren (Burton, 1992; Gottlieb & Silverstein, 2003; Longoria, 2009; Minkler & Roe, 1993). Longoria recommended that future studies that examine the relationship between neighborhood characteristics and grandparent caregiver well-being (Longoria, 2009). Findings from this study add to the literature by confirming the important role that neighborhoods play in supporting grandparents caring for grandchildren and by identifying some of the specific neighborhood attributes that are important. These findings also offer practical insight for the various stakeholders involved in the development of subsidized grandfamily housing who may be concerned with site selection.

### **Supportive services**

A seventh key finding from this study was the importance of including high-quality supportive services in subsidized grandfamily housing buildings and the need to tailor and adjust programming overtime as resident grandchildren age and grow. Both grandparent residents and housing site staff who participated in key informant interviews viewed “out-of-school time” programming as the most valuable service offering and identified onsite mental healthcare as an unmet need. Housing site staff also identified lack of funding and resident engagement as key challenges. These findings were consistent with the post-occupancy evaluation of GrandFamilies Housing in Boston, Massachusetts, which also identified the need to give adequate consideration to the aging of grandparents and grandchildren in the planning of supportive services (Gottlieb & Silverstein, 2003) and the post-occupancy evaluation of Villard Square in Milwaukee,

Wisconsin, which also identified problems with resident engagement (Impact Planning Council, 2014). Previous research studies highlight the various predispositions and service needs of grandfamilies (Baird, 2003; Bundy-Fazioli, et al., 2013; Cox, et al., 2000; Generations United, 2015; Gerard et al., 2006; Gottlieb & Silverstein, 2003; Hayslip et al., 1998; Wohl et al., 2003) that may be addressed effectively through housing with supportive services. Findings from this study expand upon current understanding of grandfamilies' supportive service needs and the factors that are important for successful supportive service delivery.

### **Long-term considerations**

An eighth key finding from this study was that grandchildren may continue to live with grandparent caregivers into adulthood. Comments from both grandparent residents and housing site staff indicate that even after the youngest child ages out of subsidized grandfamily housing at age twenty-one, some grandparents and grandchildren will continue to live together for economic and/or emotional reasons. Previous studies have highlighted the housing challenges grandparent caregivers may face when grandchildren come to live with them, particularly those caregivers who live in federally subsidized housing (Generations United, 2005a and U.S. Department of Housing and Urban Development Office of Policy Development and Research, 2008). However, there has been little research to date on the housing needs and circumstances of grandparents living with adult grandchildren. A joint study by Generations United and the Corporation for Enterprise Development (CFED) found that some grandparent caregivers continued to provide for their grandchildren financially after they reached adulthood either because they were in college or because they did not earn enough to live independently

(Generations United, 2015). Research findings were consistent with the aforementioned study, but also uncovered instances of adult grandchildren becoming caregivers of their elderly grandparents. Both situations underscore the importance of considering grandfamilies' long-term housing needs if family stability is an intended program or policy goal.

### **Building design and management policies**

Results from this study identified several opportunities to improve upon the design of subsidized grandfamily housing. Most grandparents felt safe in their respective buildings and neighborhoods, but still desired more security features. This finding is consistent with the post-occupancy evaluations of Villard Square in Milwaukee, Wisconsin (Impact Planning Council, 2014) and GrandFamilies House in Boston, Massachusetts (Gottlieb & Silverstein, 2003) where, in both cases, residents identified safety and security as principal concerns.

Grandparent residents in this study seemed largely satisfied with the design of their apartment buildings, except for the utilization of outdoor space. More outdoor recreation amenities for both grandparents and grandchildren were desired. Grandparent residents and housing site staff who participated in this study also emphasized the need for indoor spaces that permit grandchildren to be physically active and make noise. The post-occupancy evaluation of GrandFamilies House in Boston also illuminated the need for adequate outdoor recreation spaces and common spaces (Gottlieb & Silverstein, 2003). However, findings from this study highlight just how central these design features are to residential satisfaction. Outdoor recreational amenities at the housing sites where grandparent residents participated in focus groups ranged from— a single playground at

one site— to multiple playground lots, a swimming pool, grilling area, and basketball, volleyball, and tennis courts at another site. Grandparents who resided at the latter site still expressed interest in having more outdoor activity space.

This study also ascertains the importance of two factors relevant to grandparent caregivers' residential satisfaction that have not appeared in the literature to date: 1) the ability to meet housing space norms and 2) strong discontent with policies that limit use of common spaces, including restricted access and supervised use. The importance of meeting housing space norms, particularly bedroom norms, was made salient in drawing upon Morris and Winter's 1996 Housing Adjustment Theory to answer the central research questions for this study. While several previous research studies have focused on the pathologies frequently observed among grandfamily households, few have explored their relationship with the housing environment. The role that housing space norms play in grandfamilies' residential satisfaction may also be important for understanding and treating the stress and mental health issues that grandfamilies experience.

Grandparent residents' desire to be involved in establishing building policies and planning activities was identified in the post occupancy studies conducted on Villard Square (Impact Planning Council, 2014) and GrandFamilies House (Gottlieb & Silverstein, 2003), however neither report discussed policies regarding the use of common space. All of the housing sites that participated in this study had policies in place that limited residents' use of common spaces, such the computer room, library, community room, and youth activity room. The negative effects of these policies were palpable across all three sites where 1) when residents were asked what they liked about their building none of these amenities were mentioned; 2) when visiting during weekday,

daytime hours the researcher observed that these spaces were locked and not being occupied by residents; and 3) during focus group discussions residents expressed strong dissatisfaction with the policies that limited their use of these common spaces. According to grandparent residents, access was restricted in order to prevent vandalism, but in doing so, had led to feelings of mistrust or undeserved punishment. Study findings indicate that some common spaces in subsidized grandfamily housing designed to improve well-being are likely underutilized, and that changes to policies limiting their use may increase residential satisfaction.

### **Considerations for policy and practice**

One of the key findings from this study was that several grandfamilies living in subsidized grandfamily housing experienced poor physical and mental health. Developers and managers of subsidized grandfamily housing should consider the importance of access to clinical care for this population in their site selection process and in developing plans for supportive services. Building relationships with health care providers in the community should be prioritized and opportunities to provide onsite clinical care and mental health services should be explored. The 2010 Affordable Care Act (ACA) includes two provisions that encourage supportive housing providers to collaborate with health agencies to address resident health issues. Since July 2013, non-medical practitioners have been eligible to receive Medicaid reimbursement for offering preventative services as long as there are recommended by a doctor or other licensed practitioner. Subsidized grandfamily housing providers should investigate opportunities to receive Medicaid funding for individual home assessments and education that targets health and wellness. The ACA also requires nonprofit hospitals to provide a “community

benefit” equivalent to the amount of their tax exemption. Should a subsidized grandfamily housing development be located in a community with a nonprofit hospital, there may be opportunities to direct hospital dollars into funding for subsidized grandfamily housing supportive services.

This study identified several factors that are important for successful supportive service delivery to grandfamily households. “Out-of-school time” programming that provides respite to grandparent caregivers and services that aid households in meeting monthly household expenses, such as food supplements, should be prioritized. Housing managers and service providers should plan adequately for the changing service needs of residents as they age, and seek to provide programming for all ages of children in the building, especially teens.

Findings from this study indicate that community organizations and businesses were often eager to support their subsidized grandfamily housing neighbors, and housing managers should not hesitate to draw upon these potential resources. In addition to community organizations, the built environments of neighborhoods played an important role in supporting grandparents in raising their grandchildren. Developers and funders of future subsidized grandfamily housing should prioritize sites that offer convenient access to public transit, retail shopping, parks, public schools, and early care providers.

Another key finding from this study was that few grandparents living in subsidized grandfamily housing have earned income. Most subsidized grandfamily housing developments are designated as senior housing and have eligibility criteria that require renters to be at least 55 years of age, and in most cases, 62. Since employment opportunities for this population may be limited, housing developers and managers

should seek project-based rental subsidy that provides sufficient cash flow and allows the building to serve households below 30% Area Median Income. For subsidized grandfamily housing programs with eligibility requirements that allow service to younger grandparent caregivers, housing managers should prioritize services and resources that help connect residents to employment. One housing policy issue that advocates for grandfamilies should consider is that the U.S. Department of Housing and Urban Development (HUD) currently bases voucher holders' rent on household income. Allowing for exclusions of income earned by grandchildren under age 21, could help to encourage workforce participation by youth— a frequent precursor to adult employment— and improve grandfamilies' financial well-being.

An additional key finding from this study was that lack of child custody may present barriers to participation in subsidized grandfamily housing. To date, most subsidized grandfamily housing developments require residents to obtain legal custody of their grandchildren. However, the practice of accepting a wavier signed by the child's mother in lieu of legal custody has shown promise at one site. Given the reluctance of some grandparents to pursue legal custody of their grandchildren, and the difficulty that some housing sites have experienced with recruiting grandfamily tenants (such as Villard Square and Las Abuelitas Family Housing), housing managers of existing and future subsidized grandfamily housing may want to consider adopting a similar practice. Formal pilot-testing of this approach could lead to a better understanding of whether legal custody is a necessary program criterion or if alternatives can be used widely and effectively. With proper supporting evidence, eventual removal of the child custody

requirement could help housing providers to reach more grandfamilies in need and expand housing opportunities.

Findings from this study indicate that grandfamilies benefit from living with like households. Primary benefits include increased social support and reduced social stigma. Given the prevalence of depression and isolation among grandfamily households, these benefits should be weighed heavily when deciding whether to mix grandfamilies with other low-income housing populations. Though a mixed resident population may yield a cost benefit, housing providers that are truly concerned about the social welfare of grandfamilies should avoid making this trade-off.

Another key finding from this study was that grandparent residents indicated that accessibility features in subsidized grandfamily housing were needed and appreciated, but that more could be done to assist residents with physical limitations. Accessibility needs may also extend to resident grandchildren and visitors. Housing developers should seek to apply universal design practices in the development of subsidized grandfamily housing buildings and housing managers should consider adopting practices that take into consideration the needs of residents with limited mobility. Examples of such practices that counter barriers identified by grandparent residents in this study include 1) assigning individual parking spaces so that residents do not have to walk a long distance from their vehicle to their apartment unit and 2) providing grandparents with electronic keycard access to first-floor restrooms rather than using a physical lock and key to prevent inappropriate behavior by teens. In the case of developments where a large proportion of residents do not drive, paratransit services might also be considered.

Results from this study identified several opportunities to improve upon the design of subsidized grandfamily housing beyond accessibility features. Items of residential satisfaction that were rated the lowest by grandparent residents included building play spaces for grandchildren, community activities for grandchildren, and safe places to exercise. Also, study participants expressed a need for additional outdoor recreation amenities and indoor spaces that allow grandchildren to be physically active. Developers and managers of subsidized grandfamily housing should consider opportunities to increase recreation for residents including: additional playground equipment, grassy play areas, walking paths, activity courts, indoor gym, grilling and picnic areas, movie nights, and field trips.

Other desired housing features that may increase residential satisfaction include: the addition of security cameras, a formal security desk with visitor sign-in procedures, visitor parking, increased sound proofing, additional storage space in apartment units, a family room areas for entertaining visitors, and subsidized Wi-Fi internet.

An additional key finding of this study was that grandparent residents expressed strong discontent with policies that limit the use of common spaces, including restricted access and supervised use. This issue was common across all three sites that participated in this study. Comments from grandparent residents and researcher observation led to the deduction that, many of the common spaces in subsidized grandfamily housing designed to improve well-being, such as computer labs, libraries, activity rooms, community rooms, and fitness rooms, were not being fully utilized. In addition, some grandparents felt that required supervision at their age demonstrated a lack of respect for elders living in the building. Managers of subsidized grandfamily housing should consider employing

alternatives to keeping rooms locked, such as hiring more staff to supervise children in the building, installing security cameras, and adequately budgeting for repair or replacement of items that may become damaged over time. Research findings indicate that any of these strategies would be preferable to residents. Additionally, housing developers and managers may want to explore the installation of electronic keycard access as a mechanism for regulation if it is not practical to keep rooms open at all hours to all residents.

A final consideration for housing providers and policymakers is the long-term housing needs of grandfamilies. A key finding of this study was that grandchildren may continue to live with grandparent caregivers into adulthood. In addition, the age-out requirement of subsidized grandfamily housing caused extreme worry for some grandparents who expressed concerns that their grandchildren would not be able to live independently; that they might not find another housing unit they could afford; that they would lose their social network; and that they did not have the physical capacity to move. Research findings also suggest that, when grandchildren become adults, they may transition into the caregiver role. Assuming that family stability is an intended program or policy goal, it will be important to develop strategies that address this concern. Potential housing strategies for exploration include the development of subsidized housing for adult grandchildren living with grandparents and transitional units located within subsidized grandfamily housing.

## **Recommendations for future research**

This study provided evidence for Morris and Winter's 1996 Housing Adjustment Theory as a useful framework for studying the housing needs and preferences of grandfamily households. Researchers interested in further studying the housing experiences of grandfamilies should consider the application of this Morris and Winter theory in the development of future studies and models. This study offered new information on what works for subsidized grandfamily housing, but also poses new questions for researchers to consider. The author recommends that further studies be conducted to gain a more comprehensive understanding of grandfamilies' long-term housing needs and the impacts of providing housing for grandfamilies. Suggestions for future research include the following:

1. This study identified the possibility that grandchildren living with grandparent caregivers may continue into adulthood. Research that examines grandfamily households that remain intact after grandchildren are grown could shed light on the long-term housing needs of this family type and the prevalence of this phenomenon. In particular, it would be helpful to understand the extent to which grandchildren assume the caregiver role.
2. This study identified that subsidized grandfamily housing positively influences market constraints, but effects may only be temporary. This also study determined that some grandparent caregivers still desire to live in single family housing, and that some grandparents have concerns about their own housing security once grandchildren age out of the program. Research that examines the housing paths

of grandfamily household members after exiting subsidized grandfamily housing could help to inform the development of additional programs and policies intended to provide housing stability for grandfamilies, and the extent to which such interventions are needed.

3. This study examined residential satisfaction and family well-being among grandfamily households living in subsidized grandfamily housing, but did not include a control group. Research that examines the same factors using treatment and control groups that include grandfamily households with similar demographic characteristics could help measure the extent to which subsidized grandfamily housing programs contribute to improved outcomes for grandfamily households.
4. This study included focus groups with grandparent caregivers, but did not examine the perspectives of grandchildren living in subsidized grandfamily housing. While it can be difficult to gain the necessary approvals required to conduct research involving children, an alternative option would be to study earlier cohorts of grandchildren who lived in subsidized grandfamily housing that have now reached adulthood. A retrospective study could offer insight on what works from the perspective of grandchildren, and could also be used to explore various long-term outcomes for children who lived in subsidized grandfamily housing— including education, income, health, and housing status.
5. This study uncovered the lack of legal custody as a potential barrier to participation in subsidized grandfamily housing. Housing site staff who

participated in this study noted that several grandparent caregivers were not interested in obtaining legal custody, despite it being a common subsidized grandfamily housing program requirement. Staff at one subsidized grandfamily housing site also indicated that the acceptance of a notarized letter from the child's mother in lieu of legal custody has been a successful practice for their program. Given the reluctance of some grandparent caregivers to pursue legal custody and also the difficulty filling that some subsidized grandfamily housing programs have experienced with filling vacancies, additional research to determine the efficacy of such practice and whether it should be replicated at other sites might be worthwhile.

6. It is unknown whether different lengths of residence or different move-in ages influence outcomes for grandfamilies living in subsidized grandfamily housing. Studies that attempt to measure the impacts of such differences might be helpful for understanding when grandfamily households are most likely to benefit from a move to, or from, subsidized grandfamily housing.

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APPENDICES A TO M

## APPENDIX A

### **EMAIL INVITATION TO HOUSING SITE STAFF**

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

**Dear [insert housing site contact name]:**

The University of Minnesota is conducting a study on housing for grandparents raising grandchildren. The purpose of the study is to better understand what practices and policies are most effective in meeting grandfamilies' housing needs. We hope that you are willing share your insights as a frontline expert.

**[Insert housing site name]** was selected for participation because of its geographic location and because of the supportive services that it offers.

Researchers will conduct in-person interviews with staff members who are able to share their perspectives about building design, supportive services, building policies, and other factors that influence the success of subsidized grandfamily housing programs.

We also plan to conduct two focus groups with grandparent residents at each site and hope you can help us tell your residents about this opportunity. Each resident who participates in a focus group will receive a \$30.00 gift card.

Generations United, a national advocacy organization that works to improve the lives of intergenerational families, has agreed to support us in our effort.

We would like to schedule a site visit at your convenience. Please contact me, Ela Rausch, Ph.D. Candidate at [erausch@umn.edu](mailto:erausch@umn.edu) or 612-978-6795 or study co-investigator Marilyn Bruin, Ph.D. Faculty at [mbruin@umn.edu](mailto:mbruin@umn.edu) or 612-624-3780.

Your participation in this effort is entirely voluntary. We will follow-up with you by phone in the next 5 to 10 days to answer any questions that you might have.

Best regards,

Ela Rausch, PhD candidate  
University of Minnesota  
Housing Studies Program

Jaia Lent, Deputy Director  
Generations United

## APPENDIX B

### EMAIL INVITATION TO HOUSING SITE STAFF

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

Dear **[insert housing site contact name]**:

The University of Minnesota is conducting a study on housing for grandparents raising grandchildren and would like to visit **[insert housing site name]** during the month of **[insert month]**.

We are not evaluating individual housing sites or programs. We are simply interested in gathering advice from staff and residents about what works well for families living in subsidized grandfamily housing.

Our site visit is designed to include three components: a tour, a meeting with site staff, and focus groups with residents. We typically conduct these activities over a two-day period.

Included in the attached document you will find: 1) A detailed description of our research, 2) Contact information for PhD Candidate researcher and faculty, 3) A copy of the University of Minnesota's Institutional Review Board Letter of approval letter for this study 4) A detailed description of the steps we will take to protect client dignity and anonymity, 5) Copies of the instruments we will use to carry out our data collection with clients, which include: our focus group questions, our focus group survey, and our consent form for grandparent residents who agree to participate in a focus group, our questions for housing site staff, and our consent form for site staff who agree to participate in a conversation.

If necessary, we are willing to sign a memorandum of understanding regarding this research to provide any additional assurances you might require.

As part of our site visit, we would like to schedule a focus group with grandparent residents. We would like to recruit 8 to 10 participants for this focus group. **The focus group will last approximately 90 minutes.** During our time together, we will host a discussion and administer a brief survey. We will also provide a meal (or lite refreshments depending on the time of day that the meeting is scheduled). In addition to the meal/refreshments, each grandparent resident who participates will receive a \$30.00 VISA gift card.

If you would like to discuss our study protocol further before agreeing to a site visit, please do not hesitate to contact me. We would be happy to discuss any questions or concerns that you have and work out any additional arrangements if needed. We would really like **[insert housing site name]** to be a part of this study and want to ensure that our site visit is a positive experience for both staff and residents.

I look forward to hearing back from you.

Sincerely,  
**Ela Rausch, PhD candidate**  
University of Minnesota  
Housing Studies Program  
Cell Phone: 612-978-7695

APPENDIX C

**Help improve **HOUSING** for grandfamilies**

**Get lunch and a \$30.00 VISA gift card!**

**If you are a grandparent resident and live with  
grandchildren or great grandchildren...**

**We would like to hear your thoughts about  
your housing and living in this neighborhood**

Participate in a focus group discussion on (insert date)  
conducted by the University of Minnesota

**To sign up:** (Contact Name), (Contact Title)  
Tel. (Contact Telephone) or email (Contact Email)

**Register early! Maximum of 20 participants**

COLLEGE OF DESIGN UNIVERSITY OF MINNESOTA HOUSING STUDIES PROGRAM

## APPENDIX D

### **INTERVIEW QUESTIONS FOR HOUSING SITE STAFF**

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

#### **Introduction**

Welcome and thanks again for agreeing to do this interview. My name is Ela Rausch. I am a PhD Candidate in the housing studies program at the University of Minnesota. I will be conducting this interview today as part of study about subsidized grandfamily housing. The purpose is to gather information from staff and residents at multiple sites that can be used to inform housing developers, service providers, policymakers, and other key stakeholders in their decision-making about future housing intended for grandfamilies in the United States. As a staff person who works at a site that provides housing for grandfamilies, your insights are very important to us. Our discussion today will last approximately 60 minutes. We will be recording this discussion because we want to make sure that we have an accurate record of what is said. People often say very helpful things, and it is difficult to write fast enough to capture everything. Before we begin, I want to let you know that: We are looking for your honest thoughts and opinions. There are no right or wrong answers. Your thoughts are important so don't worry if you not every staff person feels the same way that you do. Everything that you say during this interview will remain confidential. We will not disclose what you said to other staff or residents. Do you have any questions before we get started?

## **Interview questions**

For the record, can you state your name and your staff role?

1. Can you tell me about the history of this housing site?

*(Possible probes: When was it built? Who funded the project? What factors influenced the design of the building and services offered? Do you have materials and your mission, history, and clients served that you would be willing to share?)*

2. What would you say has worked well with this housing site?

*(Possible probes: What about the building's design? What about programs and supportive services? What about building policies? What about the neighborhood location? What about for families? What about for staff? What about your operational structure?)*

3. What would you say has not worked well with this housing site?

*(Possible probes: What about the building's design? What about programs and supportive services? What about building policies? What about the neighborhood location? What about for families? What about for staff? What about your operational structure?)*

4. For others who are considering the development of subsidized grandfamily housing what would you recommend?

5. Do you have any other comments or examples you would like to share?

## APPENDIX E

### **FOCUS GROUP QUESTIONS FOR GRANDPARENT RESIDENTS**

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

#### Introduction

Welcome and thanks again for agreeing to be part of this focus group today. My name is Ela Rausch. I also want to introduce you to my colleague Marilyn Bruin. We are both researchers in the housing studies program at the University of Minnesota. We are conducting this focus group as part of a study about subsidized grandfamily housing. The purpose is to gather information from staff and residents at multiple housing sites that can be used to inform housing developers, service providers, policymakers in their decision-making about future housing for grandfamilies in the United States. As residents in a building that provides housing for grandfamilies, you are really the experts. So, we would like to hear from you what works, what doesn't, and what can be improved. Our discussion today will last approximately 90 minutes. We will be recording this discussion because we want to make sure that we have an accurate record of what is said. People often say very helpful things, and it is difficult to write fast enough to capture everything. Before we begin, I want to go over some quick guidelines for our discussion:

-We are looking for your honest thoughts and opinions. There are no right or wrong answers. You might not agree with everything that is said here today and that is OK. We just ask that if you do disagree with your neighbors that you do it respectfully.

-You do not need to respond to all of the questions that we ask today, but we would like to hear from everyone in the room. My role as the moderator will be to keep our discussion on task and make sure there is only one person speaking at a time. We do have

a limited amount of time today, so I might need to interrupt to move the conversation along.

-Everything that is said in this room today should remain confidential. So, we ask that you do not repeat other people's comments when you leave the room today.

-If you have a cell phone with you, please turn it to silent or turn it off now. If you do need to answer a call, we ask that you please step outside the room to take the call and rejoin us as quickly as you can.

-As promised, we do have gift cards for everyone who participates in the discussion today. We will be handing those out at the end of our discussion, and we do ask that you please stay for the full discussion in order to receive a gift card.

Before we begin, let's take a moment to go around the room and introduce ourselves.

And for fun, in addition to your first name, tell us your favorite type of candy.

I would like to start out by talking about the design of PSS Grandparent Family Apartments. But, before we do, I'd like everyone to take a few minutes to fill out the survey questions you have in front of you on page 1 about the building. Remember there are no right answers. We simply interested in your opinions. If you have a hard time with reading or writing, we are planning to stay afterwards and would be happy to go over these survey questions with you aloud.

(Allow a couple of minutes to complete the questions on page 1)

*(AFTER EACH QUESTION WE WILL SUMMARIZE PARTICIPANTS RESPONSES IN THEIR OWN WORDS AND ASK IF THEY HAVE ANYTHING ADDITIONAL TO ADD. IN DOING SO, WE WILL BE ABLE TO VERIFY THAT WE UNDERSTOOD RESPONDENTS CORRECTLY BEFORE THEY LEAVE THE ROOM.)*

Focus group questions

1. What do you like about living in this building?
  
2. What do wish was different about living in this building?
  
3. If you could change one thing about this building, what would you say is the most important thing to change?

Next, I'd like to talk about living in this neighborhood. But, before we do, I'd like everyone to take a few minutes to fill out the survey questions you have in front of you on page 2 about the neighborhood.

(Allow a couple of minutes to complete the questions on page 2)

4. What do you like about living in this neighborhood?
  
5. What do you dislike about living in this neighborhood?

Next, I'd like to talk about life since moving to PSS Grandparent Family Apartments.

6. How has your life has changed for the better since moving here?
  
7. How has your life has not changed since moving here?
  
8. For other grandparents like you who are considering moving to this site, what advice would you give them?
  
9. Is there anything else that you would like to tell us?

I want to thank everyone for participating in our discussion today. In a few minutes, we will hand out the gift cards, but before we end, I would like everyone to talk a few minutes to complete the last two pages of the survey which are about you and your family. When you are done, please turn your completed survey into Marilyn and pick up your gift card. If you need help completing your survey and want to do the questions aloud, come see me. I would be happy to talk with you.

END

## APPENDIX F

### HOUSING AND NEIGHBORHOOD SURVEY FOR GRANDPARENT RESIDENTS

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

#### **About the building**

**Please indicate how much you agree or disagree with the following statements.** (*For each statement, check the category that best describes how you feel.*)

1. The space in my home provides both me and my grandchildren our own privacy.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

2. I am pleased with the quality of my apartment unit.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

3. I am pleased with the outside appearance of the building.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

4. I feel that this building is clean and well-maintained.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

5. This building provides good spaces for my grandchildren to play or "hang out."

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

6. This building provides needed supportive services.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

7. I feel safe inside this building.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

8. There is a strong sense of community in this building

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

## About the neighborhood

**The following questions are about the neighborhood. Please indicate the how much you agree or disagree with the following statements. (For each statement, check the category that best describes how you feel.)**

1. I have convenient access to a grocery store that carries fresh produce.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

2. I have convenient access to safe places to exercise.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

3. I have convenient access to medical care for me and my grandchildren.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

4. I have convenient access to public transportation.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

5. The schools in this neighborhood are of high quality.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

6. I feel that this neighborhood is safe.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

7. There are good community activities for my grandchildren in this neighborhood.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

8. There are good community activities for me in this neighborhood.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

9. The community is accepting of me and my grandchildren.

Strongly agree       Agree       Disagree       Strongly disagree       Don't know

<b>About your family's health and relationships</b>							
	Thinking about how things were <u>on most days</u> over the past month, how would you rate...?						
1. Your physical health?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
2. Your mental health?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
3. The physical health of your grandchildren?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
4. The mental health of your grandchildren?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
5. The school performance of your grandchildren?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
6. Your personal relationship with your grandchildren?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
7. The number of friends you can count on for help if needed?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor
8. The number of friends your grandchildren have to play with?	Excellent	Very Good	Good	Neutral	Fair	Poor	Very Poor

9. Since moving here, how often do you worry that you do not have enough money left over to pay for other basic needs, such as clothing, medicine, and transportation? (*Check one*)

- Always
- Frequently
- Sometimes
- Never

10. Since moving here, how often do you worry about needing to move? (*Check one*)

- Always
- Frequently
- Sometimes
- Never

## Comments

Is there anything else you would like to tell us about your apartment, your building, your neighborhood or about housing and services for grandfamilies in general? *(Please write in the space below)*

## About You

12. What is your gender? *(Check one)*

- Female
- Male

13. What is your age? \_\_\_\_\_ *(Write in number of years)*

14. What age and gender of each grandchildren living with you? *(For each child, list gender and age) Example: Boy, age 9 and Girl, age 14*

15. Please select the racial/ethnic category that best describes the group that you self-identify with. *(Check one)*

- Asian
- Black/African American
- Hispanic/Latino
- Native American
- White non-Hispanic
- Multi-racial (please specify which races) \_\_\_\_\_  
Other (please specify) \_\_\_\_\_

## APPENDIX G

### CONSENT FORM FOR HOUSING SITE STAFF

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

You are invited to take part in a research study about housing for grandparents raising grandchildren. You were selected as a possible participant because of your staff role at a site that provides housing for this population.

We ask that you please read this form and ask any questions you might have before agreeing to participate in this study.

#### **Background Information**

This study is being conducted by researchers from the University of Minnesota Housing Studies program (Department of Design, Housing, and Apparel, College of Design, Twin Cities Campus).

This study is about subsidized grandfamily housing and its impacts on residents. The purpose is to gather information from staff and residents at multiple sites that can be used to inform housing developers, service providers, policymakers, and other key stakeholders in their decision-making about future housing intended for grandfamilies in the United States.

This study is not intended to evaluate the overall quality or effectiveness of individual housing sites.

#### **Procedures**

If you agree to take part in this study, we will ask you to do the following:

Participate in a short, in-person interview at your housing site. Interviews with housing site staff are intended to gather “on-the-ground” insight about what works and advice for future subsidized grandfamily housing development.

During the interview, we will ask you to share your perspectives about building design, supportive services, building policies, and other factors that influence the success of subsidized grandfamily housing programs. We will also ask you to provide general information about your housing site, such as history, mission, and characteristics of the population served.

*Interviews are expected to last approximately 60 minutes in length and will be audio recorded for report writing purposes. Your responses will remain confidential.*

### **Risks, Benefits, and Compensation**

There are no known risks associated with your participation in this study. However, you may refuse to answer any questions that you do not want to answer or that make you feel uncomfortable.

As study participant, you will have an opportunity to contribute information that could lead to the improvement of future housing opportunities for grandfamilies. You will also receive a summary report of results from this study, which you may use to inform your own practices and programs.

We are unable to provide any monetary compensation to housing site staff who participate in this study.

### **Confidentiality**

The information you choose to provide to researchers will remain confidential. In any research report or other materials we might publish, we will not include any information that will make it possible to identify any individual housing site staff or any individual housing site residents.

Research records will be stored securely and only researchers will have access to the records. Study data will be encrypted according to current University policy for protection of confidentiality. Audio recordings will be used for report writing purposes only and will be destroyed once written transcription is complete.

### **Voluntary Nature of the Study**

Participation in this study is entirely voluntary. Your decision on whether or not to participate will not affect your current or future relations with the University of Minnesota or with Generations United, nor will it affect any benefits to which you are otherwise entitled. If you decide to participate, you may choose not to answer any question or withdraw from this study at any time without affecting these relationships or benefits.

### **Contacts and Questions**

The researchers conducting this study are: Ela Rausch, Ph.D. Candidate, and Marilyn Bruin, Ph.D. Faculty. You may ask any questions you have now. If you have questions later, you are encouraged to contact Dr. Marilyn Bruin, Housing Studies Professor, Director of Graduate Studies, Design Graduate Program by email [mbruin@umn.edu](mailto:mbruin@umn.edu), telephone 612-624-3780, or mailing address at 240 McNeal Hall, 1985 Buford Avenue, Saint Paul, Minnesota, 55108.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher(s), you are encouraged to contact the Research Subjects' Advocate Line, D528 Mayo, 420 Delaware St. Southeast, Minneapolis, Minnesota 55455; Telephone (612) 625-1650.

*You will be given a copy of this information to keep for your records.*

**Statement of Consent:**

I have read the above information and I have received answers to my questions about participation. I consent to participate in this study.

I agree to be recorded

I do not agree to be recorded

Signature of Participant:

---

Date: \_\_\_\_\_

Signature of Investigator:

---

Date: \_\_\_\_\_

## APPENDIX H

### CONSENT FORM FOR GRANDPARENT RESIDENTS

*An Exploration of Subsidized Grandfamily Housing in the United States: What Works*

You were invited to take part in this study because you are a grandparent raising grandchildren in subsidized grandfamily housing.

We ask that you please read this form and ask any questions you might have before agreeing to participate in this study.

#### **Background Information**

This study is being conducted by researchers from the University of Minnesota Housing Studies program (Department of Design, Housing, and Apparel, College of Design, Twin Cities Campus).

This study is about subsidized grandfamily housing and its impacts on residents. The purpose is to gather information from staff and residents at multiple sites that can be used to inform housing developers, service providers, policymakers, and other key stakeholders in their decision-making about future housing intended for grandfamilies in the United States.

This study is not intended to evaluate the overall quality or effectiveness of individual housing sites.

#### **Procedures**

If you agree to take part in this study, we will ask you to do the following:

Participate in a focus group with other grandparent residents at your site. The purpose is to understand what it is like to live in subsidized grandfamily housing, what works well, and what could be improved.

During the focus group, we will ask you to share your thoughts about living in subsidized grandfamily housing. We will also ask you to complete a short survey about you and your grandchildren and your perceptions of the building and the neighborhood in which you live.

*Focus groups are expected to last approximately 90 minutes in length and will be audio recorded for report writing purposes. Your responses will remain confidential.*

### **Risks, Benefits, and Compensation**

There is a minimal risk associated with participation in this study. It is possible that participants in the focus group could repeat what is heard. However, you may refuse to answer any questions that you do not want to answer or that make you feel uncomfortable.

As a focus group participant, you will receive a \$30.00 gift card for your compensation and refreshments.

### **Confidentiality**

The information you choose to provide to researchers will remain confidential. However, if you disclose any information that indicates that you or your family members are in danger, we are required to report it to the authorities.

In any research report or other materials we might publish, we will not include any information that will make it possible to identify any individual housing site staff or any individual housing site residents.

Research records will be stored securely and only researchers will have access to the records. Study data will be encrypted according to current University policy for protection of confidentiality. Audio recordings will be used for report writing purposes only and will be destroyed once written transcription is complete.

### **Voluntary Nature of the Study**

Participation in this study is entirely voluntary. Your decision on whether or not to participate will not affect your current or future relations with the University of Minnesota or with Generations United, nor will it affect any benefits to which you are otherwise entitled. If you decide to participate, you may choose not to answer any question or withdraw from this study at any time without affecting these relationships or benefits.

### **Contacts and Questions**

The researchers conducting this study are: Ela Rausch, Ph.D. Candidate, and Marilyn Bruin, Ph.D. Faculty. You may ask any questions you have now. If you have questions later, you are encouraged to contact Dr. Marilyn Bruin, Housing Studies Professor, Director of Graduate Studies, Design Graduate Program by email [mbruin@umn.edu](mailto:mbruin@umn.edu), telephone 612-624-3780, or mailing address at 240 McNeal Hall, 1985 Buford Avenue, Saint Paul, Minnesota, 55108.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher(s), you are encouraged to contact the Research Subjects' Advocate Line, D528 Mayo, 420 Delaware St. Southeast, Minneapolis, Minnesota 55455; Telephone (612) 625-1650.

*You will be given a copy of this information to keep for your records.*

**Statement of Consent:**

I have read the above information and I have received answers to my questions about participation. I consent to participate in this study.

I agree to be recorded

I do not agree to be recorded

Signature of Participant:

---

Date: \_\_\_\_\_

Signature of Investigator:

---

Date: \_\_\_\_\_

## APPENDIX I

The University of Minnesota is conducting a study on subsidized housing for grandparents raising grandchildren, and will be visiting **[insert housing site name]** the week of **[insert date]**.

**[Insert housing site name]** was selected for participation because of its potential as a replicable model for other communities interested in developing subsidized grandfamily housing.

As part of our visit, we are conducting an in-person conversation with a small group of key partners and staff who are able to share their perspectives about building design, supportive services, building policies, and other factors that influence the success of subsidized grandfamily housing programs.

We are not evaluating housing sites or programs. We are simply interested in gathering advice from experts in the field about what works well and what they would recommend for other communities who are interested in developing similar housing. This will also be an opportunity for participants to gain valuable insights from each other.

You have been identified as key person who should be included in the conversation about **[insert housing site name]**. We hope that you are willing share your insights, and would like to know which of the following times you would be available to meet. We will schedule this meeting at a time when the greatest number of individuals are available.

**[List time and date options for meeting here]**

Please respond with your availability to [erausch@umn.edu](mailto:erausch@umn.edu) or 612-978-7695 no later than **[insert date]**. We will send a follow-up email with the final time and additional meeting details to all confirmed participants.

If you have any additional questions about your participation in this study, please don't hesitate to contact me.

Best regards,

**Ela Rausch, PhD candidate**  
University of Minnesota  
Housing Studies Program

## **Site Observation Checklist**

### **HOUSING SITE**

- Laundry facilities
- Hallways
- Lighting
- Community room
- Other common spaces (indoor)
- Outdoor recreation
- Storage (indoor and outdoor)
- Overall building appearance (outdoor)
- Social activities
- Supportive services
- Resident interactions
- Other

## **NEIGHBORHOOD**

- Appearance
- Perceived safety
- Grocery retail
- Transportation
- Medical clinics
- Schools
- Recreation & Activities
- Infrastructure
- Community-based organizations
- Other

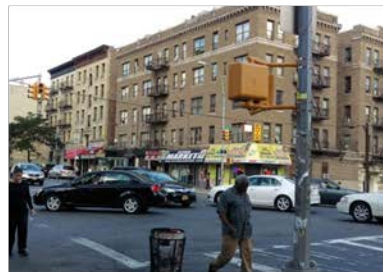
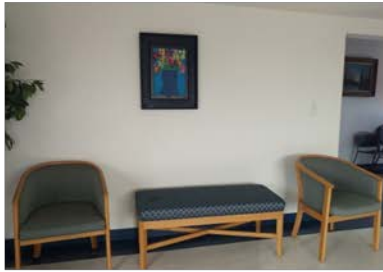
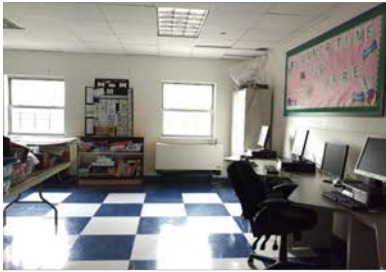
APPENDIX K

**Pemberton Park Apartments/Surrounding Neighborhood Photos**



APPENDIX L

PSS Grandparent Family Apartments/Surrounding Neighborhood Photos



APPENDIX M

**PSS Grandparent Family Apartments/Surrounding Neighborhood Photos**

