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FACULTY OF SOCIAL SCIENCES

The undersigned certify that they have read and recommend to the Midlands State University for acceptance of a dissertation entitled: Challenges faced by grandparents in taking care of their orphaned grandchildren in Chiredzi Rural.

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RELEASE FORM

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TITLE OF DISSERTATION :

Challenges faced by grandparents in taking care of their orphaned grandchildren in Chiredzi rural.

DEGREE FOR WHICH DISSERTATION WAS PRESENTED: BSc Honours in Psychology

YEAR GRANTED : May, 2016

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DEDICATION

Dedicated to all the grandparents who have taken up the heroic role of caring for orphaned children.

ABSTRACT

The study aimed to explore the challenges faced by grandmothers who are taking care of their orphaned grandchildren in Chiredzi rural. Relevant literature was discussed, as well as the role theory which formed the theoretical framework of the study. A qualitative paradigm was employed using explorative approach. Data was collected using in-depth interviews which was audio taped and was analysed using thematic analysis. The study targeted rural grandparents taking care of their orphaned grandchildren and purposive sampling was used to select 12 grandparents. The researcher observed ethics which included informed consent, anonymity, confidentiality and privacy. Major findings of the study showed that grandparents taking care of their orphaned grandchildren faced mental and problems, difficulties in social interactions, economic and physical challenges as well as financial challenges. The overall conclusion was that grandparents faced social, psychological, physical and economic challenges. Recommendations were made based on these findings and included that there is need for the government, non-governmental organisations relatives and the community to offer grandparents social, emotional, and economic support.

ACKNOWLEDGEMENTS

My sincere gratitude goes to my supervisor, Mrs. N. Ncube, for her support, patience, knowledge, experience, skill and expertise throughout the process of completing this dissertation.

I am thankful to the Chiredzi Rural District Council Chief Executive Officer for granting me permission to conduct my study in Chiredzi Rural, Sengwe.

I would also like to thank Chief Sengwe, and all the village heads for permitting me to conduct my study in their villages.

Special thanks also goes to Village Health Workers for their assistance in identifying the grandmothers taking care of their orphaned grandchildren.

Finally, I thank the grandparents caring for their orphaned grandchildren for responding to interview questions.

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CHAPTER ONE: INTRODUCTION

1.1 Introduction

This chapter covers background of the study, statement of the problem, significance of the study, research questions, and purpose of the study and, delimitations of the study, limitations, and definition of terms.

1.2 Background to the study

According to Mercy Projects (2016), state that the US government and UNICEF reported that an estimate of 17.8 million children have lost both parents and 153 million children worldwide have lost either one parent or both parents and further argues that these statistics are only inclusive of children currently living in homes and omitting the children living in orphanages. The World Orphans (2016) 24 children are orphaned every hour showing that there is a worrying increase of the number of orphans. The Australian Bureau of Statistics (2004) cited in Lunga (2009), 22 500 many families are made up of grandparents, looking after children younger than 17 years of age in Australia. In 60% of these families the grandparents are over 55 years of age. According to a study in Zambia 57% of primary care givers were grandparents (Sefasi, 2010). Of these, 37% were between 60 and 85 years of age. About 40% of orphans in Tanzania are raised by grandparents, 45% in Uganda, more than 50% in Kenya and around 60 % in Zimbabwe and Namibia (UNICEF, 2015). This has been mainly due to high death rates in the middle ages mostly as a result of HIV/AIDS. According to Zimbabwe National AIDS Council (n.d) approximately 30 percent of children below eighteen years of age have lost one or both parents due to AIDS in Zimbabwe.

Several studies undertaken on grandparenting has indicated that grandparents are more likely to have economic challenges AAMFT (2015). Goodman and Rao (2007) carried out a study in a US - Mexico border area that found out that grandparents caring for their orphaned grandchildren lacked sufficient funds resulting financial strains and the issue of related to adequate housing and space where some grandparents lived in subhuman environments. Also 94% reported a clinically significant level of stress. Studies have also found that custodial grandparents tend to experience worsened emotional and physical health caused by caregiving responsibilities and/or observing the deterioration of an adult child on drugs,

increased financial obligations lack of instrumental and emotional support and role conflict (Minkler et al., 1992).

An investigation by Winston, (2006) found that in USA grandparents often have to bear emotional reactions such as shame, guilty, anger, self-doubt, and discontent with their parental role due to the feeling that they have failed to take good care of their grandchildren. Grandparents that raise their grandchildren have more stress than their less stressed peers. Custodial grandparents also report higher level of distress, emotional problems, clinical depression, insomnia, hypertension, diabetes and less health-services seeking behaviour than grandparents in more traditional roles (Hayslip, and Goldberg-Glen, 2000). Henderson et al, (2015) carried out a study in Alaska and found that grandparents caring for their orphaned grandchildren had little time to themselves and some had little time to engage in church and community activities. Social isolation emerged as a result of having little time to spend with their spouses, other family members, and friend's social isolation contributed to reduced overall health. Similar findings were noted in a study carried out in Alabama by Spence et al (2001), who goes further to say that grandparents may also have difficulty relating to the young parents of their grandchildren's friends. In school activities, for example, they are often the oldest guardians present.

Chen and Liu (2011) says that among Chines grandparents, high intensity care for younger grandchildren accelerates health declines and adds that, rural grandparents and grandfathers engaging in high intensity care have worse self-reported health on average than non-custodial grandparents. Zhen et al, (2013) cited in Chen and Liu notes that policy makers and program planners in China have recognized the challenges faced by grandparent childcare providers noting that they often have limited economic resources and a questionable ability to manage difficult children.

According to NetCE (2014), some grandparents are so old that they can no longer fully care for very young children. Winston (2006) says that rural clinics in Australia are usually a long distance away from where some people live so they fail or will have to travel the long distances which impacts negatively on their health. The social, psychological and emotional strains further impacts on their health thereby weakening them physically (NetCE, 2014).

In South Africa studies on grandparenting has shown that, according Makgato (2010), grandparents are prone to insomnia which is frequently a side effect of emotional problems

such as depression or of significant stress such as pressures at home. Furthermore, the elderly are vulnerable to physical ailments such as backaches and chronic diseases such as hypertension. These problems are indicative that even though the grandparents are faced by financial challenges to raise orphans, they have their own economic and physical challenges which make caring for these orphans a bigger challenge (UNAIDS, 2008).

Mudavanhu (2008) found out that in Zimbabwe, Gutu, grandparents are usually unemployed which makes it extremely difficult for grandparents to provide provision such as food, soap, clothes, shelter, and school fees. She sighted school fees as the major problem faced by grandmothers to the extent that some grandparent caregivers negotiated with older orphans in their care to drop out of school and to search for jobs in order to support the family. Similar findings has been reported by Mudavanhu (2008) whose study shows that grandmothers in Gutu, Zimbabwe, walk long distances to get medical attention for the grandchildren in their custody. Most grandmother-caregivers reported experiencing health problems, either from reparenting at an old age or because of the stress suffered as a result of losing a child or children to HIV/AIDS. Owing to the stress of caregiving, elderly grandmothers may enter higher health risk categories than those dictated by age alone. Similar findings were noted by Matshalaga (2004) in Midlands's province who mentioned depression, poor physical health, poverty and grief as major challenges affecting the grandparents caring for their orphaned grandchildren

1.3 Statement of the problem

A significant number of orphans are currently under the care of their grandparents as a result of parental death, mostly, due to HIV/AIDS. These grandparents are faced with a sudden change of roles, and responsibilities (UNICEF, 2014). Also grandparents are old and already have developmental challenges such as weaker bodies, chronic pains and more profound mental disorders so they sometimes need others to take care of them. Because of the untimely role coming at a time when they need help, the grandparents encounter psychological problems such as stress and depression, economic challenges for example failing to provide food, adequate shelter, emotional challenges that involve grief, shame or guilt as well as social challenges as they interact with others.

1.4 Significance of the study

Findings from the study may be beneficial to the community, non-governmental organisations, grandparents, government, orphaned children under the custody of grandparents, and other researchers.

- Community: The community may become aware of the challenges that grandparents face in caring for their orphaned grandchildren so that they can offer grandparents support.
- Government and non-governmental organisations: Knowledge of the challenges faced by grandparents who are taking care of their orphaned grandchildren will help the government and non-governmental organisations to place higher priority on putting into place supportive programs
- Grandparents: The knowledge obtained from the study will help in drawing attention of potential organisations that can offer assistance to the grandparents as their situation would have been made known to the world.
- Orphaned children under custody of grandparents: Research findings may enable the children to better understand the challenges their grandparents face and therefore allow healthy and supportive relations as a result of mutual understanding.
- Other Researchers: The study's findings may add to the knowledge base on grandparenting

1.5 Research questions

The research sought to answer the following questions:

- What psychological challenges do rural grandparents face in caring for their orphaned grandchildren?
- Do grandparents have adequate resources to cater for their welfare and that of their orphaned grandchildren?
- > What social challenges do grandparents face in caring for their grandchildren?

Do grandparents face physical challenges in caring for their orphaned grandchildren as a result of old age?

1.6 Assumptions

The researcher made some assumptions that formed the bases for the research.

The researcher assumed that taking care of orphaned grandchildren is a challenging task for grandparents' custodial grandparenting assumed to be a difficult experience due to grandparents' developmental challenges.

1.7 Purpose of the study

The study sought to determine challenges faced by rural grandparents who are taking care of their orphaned grandchildren. The study seeks to examine challenges affecting psychological and emotional, social, physical and economic wellbeing of grandparents taking care of their orphaned grandchildren.

1.8 Delimitations of the study

The study focused on challenges faced by grandparents who are taking care of their orphaned grandchildren without including those caring for grandchildren for other reasons other than death of parents. The data was collected in 2 villages in Chiredzi, namely Mafunjwa and Meke villages through door to door visits.

1.9 Limitations of the study.

The researcher encountered some drawbacks during the study. One limitation was that the researcher encountered communication problems during data collection as most grandparents were illiterate since English was meant to be used. The researcher had to use Shona in some cases for the grandmothers to understand and translated information given in Shona.

1.10 Definition of terms

Grandparent: The Cambridge Online Dictionary (2016) defines a grandparent as a parent of a child's father or mother. The researcher defined grandparent as a grandparents as a parent of a child's mother or father who is taking care of her grandchild.

- Challenges: The Oxford Online Dictionary (2016) defines challenges as something that needs great mental or physical effort in order to be done successfully and therefore tests a person's ability. The researcher defines challenges as psychological, economic, and physical difficulties faced by grandparents in caring for their orphaned children.
 - **Psychological challenges**: These are challenges that impact on the mental processes, emotions, and behaviour of grandparents who are caring for their orphaned grandchildren. An example of a psychological challenge is depression.
 - **Economic challenges:** These are challenges that are connected to the availability or absence of money and resources for example provision of food.
 - **Physical challenges:** These are challenges that affect the body of the grandparents for example, deteriorating mobility,
- Orphans: UNICEF (2014) defines an orphan as a child who has lost one or both parents. In this study an orphan is a child who has lost both parents
- Child: The United Nations Convention (1989) defines a child as a person below the age of 18, unless the law of a particular country set the legal age for adulthood or younger. The adopted definition of a child in this study is one below the age of 18 unless or otherwise they are still in school.

1.11 Conclusion

This introductory chapter has presented the background to the study, the statement of the problem, significance of the study, research questions, and purpose of the study and, delimitations of the study, limitations, and definition of key terms.

CHAPTER 2: LITERATURE REVIEW

2.0 Introduction

The literature review makes a detailed examination the relevant body of knowledge on grandparenting that is known. The researcher made use of general literature on topics such as definition of grandparenting, developmental challenges affecting grandparenting role, why grandparents assume the grandparenting role and theories that explain grandparenting as well as previous studies.

2.1 Grandparenting

A Grandparent as is defined by the Cambridge Online Dictionary (2016) is a parent of a child's father or mother. The term grandparenting here focuses on what is done by grandparents as an expression of their role.

Several authors are of the agreement that grandparenting takes various types of grandparenting styles. Neugarten and Weinstein (1964), cited in Mudavanhu (2008), say there is the grandparenting, who is interested in the grandchild and offers random treats, but doesn't invest large amounts of time in grandparenting or offer child-rearing advice to parents. The grandparent makes it clear that there is a difference between the role of parent and grandparent. The second, type of the grandparent is the fun-seeker type of grandparenting. This is marked by an informal and playful relationship between grandparent and grand-child. Interaction is often around games and other fun activities. The other type is the distant figure type. This type of grandparenting is characterized by a distance between grandparent and grandchild which often goes beyond geographical distance to include limited contact with the grandchild. Also there is the reservoir of family wisdom type which is characterised by grandparents who provide skills, resources, and knowledge to young members in the family. Lastly is the custodial grandparent, which is the main focus of this study, and refers to grandparents who are primary caregivers of the children. There is no clear distinction between parent and grandparent as the grandparent completely takes over the parental role.

Mudavanhu, (2008) says that in the past years, Zimbabwe has been confronted by four major challenges, that is, increasing poverty, a polarised political environment, serious droughts, and the HIV and AIDS. One of the most tragic consequences of the disease has been an

orphan crisis, which has seen some 1,200,000 Zimbabwean children losing one or both parents to the disease. It is predicted that the number of orphans will continue to increase over the next ten years. UNICEF, (2015) says that in Zimbabwe, 60% of orphans live with their grandparents showing that grandparents are playing a crucial role in caring for orphaned children.

Grandparents who have their grandchildren in their custodial care. Custodial grandparents or surrogate, defined as those raising their grandchildren on a full-time, custodial basis. The definition of custodial grandparent is the same used by most authors on the topic that is; grandparents who are fully responsible for raising their grandchildren, given the temporary or permanent absence or unavailability of parents to care for their children (Carlini-Marlat, 2005).

This phenomenon is not new in that grandparents in many Western contexts have featured strongly in the lives of their grandchildren, including as full-time caregivers during times of family crisis, while in some other cultures, it is a normal practice for grandparents to play a major and continuing role in the raising of grandchildren (Kornhaber, 1996). However, what is new is the emergence, all over the world, of a new family type, the grandparent-headed family, largely attributed to changing social conditions over the past 25 years.

According to Erikson (1982), old age should be expected to be a relaxed time. For many grandparents, raising grandchildren is likened to being recycled as parents. Grandparents in most cases consist of population that is a dependent and in need of psychosocial support because of their deteriorating physical and psychological conditions (Wood, (2011). Reparenting at this stage adds on to the grandparents another burden that they have to face on their day to day living.

The HIV and AIDS pandemic and the high adult mortality rate have led to a change in the structure of families and households in South Africa (Wood 2011). Crothers (2001) is quoted in Wood (2011) explaining that AIDS has brought about household demographic structures hollowed out with only grandparents and children present. Smit (2007) cited in Wood (2011) points out that it has been customary in African families in South Africa for grandparents to take part in the socialisation of children but now have no other option but to take on the full responsibility of raising and supporting their grandchildren whose parents have died of AIDS. They no longer can afford the luxury of being only part of what has been called the web of

complementary socialising agents within communities. Similar observations has been made in Zimbabwe by Matshalaga (2004) and Mudavanhu (2008) who indicated that the burden of custodial grandparenting orphaned children has become a very common phenomena.

The Australian Bureau of Statistics (2004) cited in Lunga (2009), 22 500 many families are made up of grandparents, looking after children younger than 17 years of age in Australia. According to a study in Zambia 57% of primary care givers were grandparents (Sefasi 2010). In 60% of these families, the grandparents are over 55 years of age. UNICEF, (2014) reported that about 40% of orphans in Tanzania are raised by grandparents, 45% in Uganda, more than 50% in Kenya and around 60 % in Zimbabwe and Namibia (UNICEF 2015). According to Mudavanhu (2008) marriage in Zimbabwe has become a contract between two individuals which leads to weaker links between and within extended families and when children from these unions are born they are no longer the collective responsibility of communities. Foster and Williamson (2000) cited in Wood (2011) suggest that in Zimbabwe, as the number of orphans in a community increases and uncles and aunts who are usually the traditional first choice to be substitute caregivers become unavailable, grandparents take on the role of caregivers often as a last resort because other relatives refuse.

2.2 Reasons for custodial grandparenting

According to Banchman, and Chase-Landsdale (2005), custodial grandmother kinship care arrangements tend to form in response to urgent needs or problems facing parents and in more extreme cases, parental absence or incapacitation, stemming from substance abuse, AIDS, incarceration, abandonment, or death.

Some common reasons for custodial grandparenting as cited by Sefasi (2014) include parental substance abuse, abuse and neglect, incarceration, HIV/AIDS, mental or physical illness, teenage pregnancy, abandonment, divorce, and death. However a significantly large number of grandchildren are under the care of their grandparents are there because they have lost their parents. Death among in the middle adulthood has been mostly attributed to HIV/AIDS which has left a signifying number of orphans in the care of their grandparents (Pelethu, 2014). Worldwide, it is estimated that 17.8 million children under 18 have been orphaned by AIDS, and that this will rise to 25 million by 2015. Of the more than 132 million children classified as orphans, only 13 million have lost both parents. Around 15.1 million, or 85% of these children live in sub-Saharan Africa. In some countries which are badly affected

by the epidemic, a large percentage of all orphaned children for example 63% in South Africa 74% in Zimbabwe are orphaned due to AIDS. As a result of the increasing number of orphans and the shrinking number of potential caregivers, orphans tend to live in bigger households headed by much older relatives. While grandparents already have an important role in the care of orphans, there is a notable increase in their burden (WHO, 2013).

2.3 Developmental challenges of the aged

The fact that grandparents are usually aged who actually assume custodial parenting, they have reached a stage where they expect to be resting in their retirement. It is a time when they will be experiencing developmental changes that are quite challenging. These involve physical, social and psychological challenges. According to the Center for Diseases Control and Prevention, (2011), common developmental challenge involve the deterioration in visual capabilities and about two thirds of adults with vision problems are older than 65 years of age. Some also face challenges in hearing which begins in the early 60s. This usually leaves people having difficulty perceiving high frequency sounds and problems with pitch discrimination. This has been said to interfere with interpersonal relationships. The elderly people may withdraw from conversations rather than face the shame of misperceiving what is said.

According to Akman (2003), physical deterioration has also been linked to the onset of disease and illness persons over the age of 65 in the United States account for more than one third of the total personal health expenditures and use three times the national average hospitals. The aged report more chronic diseases and disabilities which account for their increased health service utilisation. Disease like diabetes, hypertension urinary incontinence, heart diseases and arthritis are very common among aging people. This illnesses 'may lead to impairment or dependency on others for doing daily activities they used to do easily which can be a very depressing experience (Women's and Childen's Health Network, n.d).

Research has shown that there is a certain amount of deterioration in relation to cognitive abilities. It has been argued that the aged people experience increased brain pathology. The brain shrinks and the old people begin to experience difficulties in attention processes, language functions, learning and memory, processing speed, and executive functions (Akman, 2003). These challenges make life difficult for grandparents who are aging as grandparenting becomes an added burden to the already strained grandparents who are trying

to cope with aging. The health and physical developments makes it difficult for the grandparents to take care of grandchildren especially very children.

2.4 Challenges faced by custodial grandparents

Challenges are defined as a situation of being faced with something that needs great mental or physical effort in order to be done successfully and therefore tests a person's ability (Banchman & Lansdale, 2005). Challenges refer to the difficulties that grandparents face in the day to day upbringing of their grandchildren. These include social, economic, psychological and physical challenges. Thus, it is likely that a disproportionately high number of custodial grandmothers may have serious physical limitations, be responsible for larger numbers of children, and care for more children with behaviour problems than mothers typically encounter (Fuller-Thomson et al., 1997; Pruchno & McKenney, (2000) cited in Banchman & Lansdale, 2005)

2.4.1 Psychological challenges

These are problems affecting, or arising in the mind and is related to the mental and emotional state of a person. Winston (2006) says that the challenges and struggles that grandmothers caring for orphaned grandchildren face involve psychological problems. Grandparents often have to bear emotional reactions such as shame, guilty, anger, self-doubt, and discontent with their parental role (Mertzek, 2007). As a result of perceived failures in carrying some physical and economic functions that grandparents feel they must have done them for their children, they may end up showing signs of distress, clinical depression, and insomnia and suffer emotionally (Sampson and Hartlein, 2015).

A significant link between custodial grandmothers' depression and their low economic resources was established by Burnette, (1999) cited in Banchman and Chase-Lansdale (2005). They further argue that where economic challenges such as financial support, food, security, and employment or poor physical health are commonly detected psychological distress is also exacerbated when grandmothers care for older grandchildren or those with emotional or behavioural problems (Pruchno & McKenney, 2000). Given the stressful family events that usually precipitated the custodial care arrangements, grandmothers' anxieties are also increased by concerns for their grandchildren's wellbeing, particularly if past child abuse or neglect has taken place (Waldrop & Weber, 2001).

The majority of the grandparents still have fresh wounds that affected them psychologically and emotionally when they lost their children. The findings in this research indicated that the grandparents still grieve for their children. According to UNICEF (2002) grief is a normal reaction for parents to the loss of their children and is usually intertwined with bereavement. The report further indicated that most grandparents may begin the mourning process during their child illness and go through most of the emotions related to anticipated loss and grief.

According to Uys & Middleton (2004), cited in Nyatsanza (2010), people from all backgrounds tend to experience a similar set of stages following the loss of a loved such as denial, anger, bargaining, depression and acceptance. People move through the above stages at different rates. Alpaslan and Mabutho (2005,) cited in Makgato (2010), found that elderly caregivers all reported having health problems either from old age or from the stress suffered as a result of a child or children died of AIDS related illnesses. Grandchildren's presence constantly reminds the grandparents of their deceased child or children

Grandparents may lack the skills to deal with the grief of their orphaned grandchildren and may end up feeling helpless. According to Van Dyk (2005) cited in Makgato (2010) the orphans have to go through the same grieving process as adults. They may suffer severe feelings of anxiety and helplessness, feelings of dissociation, emotional unresponsiveness, numbness, and withdrawal from social contact, persistent reliving or re-experiencing of the traumatic event through intrusive, recurring thoughts, repetitive dreams about the event, illusions and flashbacks, sleep disturbance, irritability, finding it difficult to concentrate or remember things and restlessness and voidance of interpersonal involvement. Hayslip and Goodman (2007) also states that such highly depressive symptoms are not only depressive to the children but also to the grandparents who have to witness the grief of their grandchildren on daily basis. Emotional, physical, health or school-related difficulties experienced by the grandchildren may complicate parenting for the grandparents since it might be a new phenomenon to them.

2.4.2 Economic challenges

Grandparents are bound to face economic challenges. Economic challenges refer to those difficulties in terms of money and resources for daily use. Goodman & Rao (2007) states that grandparents caring for their orphaned grandchildren face a lack of sufficient funds and the resulting financial strains poor housing and space emerged as a major theme in his findings

where some grandparents lived in subhuman environments. Mudavanhu (2008) further points to the fact that grandparents are usually unemployed and the unemployed status makes it extremely difficult for grandmothers to provide for their grandchildren's such as the provision of food, soap, clothes, shelter, and school fees as being a major problem.

According to Foster, et al (1996) cited in Mudavanhu (2008), owing to the economic hardships faced by grandmothers, living with these grandmothers is potentially a vulnerable situation, since, as the HIV/AIDS epidemic spreads, grandparents are robbed of one of their main economic support mechanism: their sons and daughters. Therefore, grandparents who have expected to receive assistance from their children, now struggle to find ways to support and care for their orphaned grandchildren.

Matshalaga (2004) found that grandmothers offered extensive care for their grandchildren in a situation of severe poverty. The author further highlights that the care of ill adults and their children contributes to the gradual impoverishment of the grandmothers' households and leads to serious difficulties meeting children's basic needs, such as, clothing, shelter, food, and access to health care and education.

Some grandparents were unable to access or get pension grant because they are below sixty years and as such do not qualify to register for old-age grant .The participant stated that it takes a while for one to start receiving the grants under their care. In another case the participant indicated that she requested the government to provide them with grocery while waiting for social grants. According to Sefasi (2014), the economic hardships are further heightened by the fact that the family that the grandparents are heading are larger that they had ever anticipated while planning to go into retirement. Furthermore, most grandparents are no longer employed and therefore they no Longer have a reliable source of income. Also due to the deteriorating health due to aging, grandparents would be incurring strains to afford their own medication. The addition of grandchildren father burdens the already economically strained grandparents

2.4.3 Social Challenges

According to NetCE (2014) grandparents may face social challenges. Grandparents caring for their orphaned grandchildren find that their social network is affected by assuming the role of a custodial grandparent. No longer can they go out with their friends as child care is necessary. Family members and friends do not necessarily understand the stressors and types

of loss custodial grandparents are experiencing, individuals often must deal with marginalised grief, or grief unacknowledged by society and one's social support system (Goodman & Rao, 2007).

Spence et al (2001), says that grandparents may also have difficulties in relating to the young parents of their grandchildren's friends. In school activities, for example, they are often the oldest guardians present. Consequently, custodial grandparents may feel more isolated. Also it is evident that grandparents face stigmatisation because of the death of their children especially if they died due to AIDS. Many grandparents believe that there is a lot of stigma attached to the grandparenting role that they are usually blamed for having to raise their grandchildren, and are in some way responsible for what goes wrong with their grandchildren (Blackhouse, 2009).

It has been argued by Makgato (2010) that grandparents have limited space for accommodation since the orphans added to the number of family members. The fact that grandparents live with the orphans makes small houses to be over-crowded with limited space to share. This inevitably leads to overcrowded living conditions given the generally small houses that people live in in rural areas. Aronson et al. (2005) cited in Makgato (2010) states that limited physical space makes it difficult for the grandparents to move around freely as they desired as well as lowering the feelings of control. The limited space in the home takes away privacy from the grandparents. WHO (2002) supports this view by stating that accommodation is a major problem in households caring for orphans as there are usually too many people in a house. WHO (2002) went on to point out that the presence of orphans in the household brings limited space, underlying frustration and disharmony and therefore it is difficult for grandparents to cope in such a limited space.

Makgato (2010) pointed out that one major challenge is the grandparents' lack of skills to deal with their orphaned grandchildren's deviant behaviours. Most grandchildren show signs of being ill-disciplined, extremely demanding, wasteful and stubborn grandmothers did not know how to deal with the behavioural problems and in some cases they lacked the energy to deal with them. Most grandparents are illiterate, have no information or adequate information dissemination and this makes these grandparents' situation difficult (Winston, 2006). A common behavioural stressor exhibited by the orphaned grandchildren under the custody of grandparents is denying the authority of the grandparents. Grandchildren often show

resentment. The author further explained that it is psychologically distressing and confusing for the grandparents since they have no abilities and skills to deal with their circumstances.

2.4.4 Physical challenges.

Grandparents are expected to physically care for smaller children even though physically they are weak and frail. Grandparents caring for their orphaned grandchildren describe more limitations in performing daily activities. Further, caregiving stress may result in exacerbation of health problems (Williamson, 2000) cited in Wood (2011). Also the grandparents tend to face the challenge of chronic pains such as back pain. These chronic pains interferes with sleep and daily functioning mobility issues exacerbated by child care, and the pressure of managing their own medical conditions as well as their grandchildren's. Studies cited frequent presence of multiple health problems such as hypertension and diabetes (Hadfield, 2014). Grandparents in also reported feeling physically tired and having less privacy.

Some grandparents are expected to bath the orphans and take them to crèche even though they are chronically ill. These aspects take a big toll on grandparents and this is a challenge as it also impacts negatively on their health (Makgto, 2011). Orb and Davey (2015) state that grandmother's usually expressed tiredness as an overriding factor to their physical wellbeing. Oluwagbemiga (2007) mentioned that orphans were left in the hands of caregivers who also could not meet their own physical needs.

Matshalaga (2008) goes on to say that grandparents are so physically weak that they sometimes have to rely on assigning her grandchildren to do some or most of the household chores. In that process, the grandmother is better able to fend for herself, besides caring for her grandchildren.

2.5 Role theory

Role theory is a perspective in sociology and in social psychology that considers most of everyday activity to be the acting out of socially defined categories. Each social role is a set of rights, duties, expectations, norms and behaviours that a person has to face and fulfil. The model is based on the observation that people behave in a predictable way, and that an individual's behaviour is context specific, based on social position and other factors. While

the role theory covers a wide range of concepts, the study used time disordered roles as the main theoretical framework supported by the role identity model.

Time disordered roles: Seltzer (1976) cited in Jendrek (1993) defined time disordered roles as those roles that arise when an individual's various social spheres and roles sets are not temporally synchronised. Normally an individual expects congruency their work, family and age set spheres. Time disordered roles occur when one sphere is out of phase with other spheres, for example the home sphere or the work sphere. Because they are being off time, time disordered roles may create stress and disjuncture's because of a dramatic change in ones' individual expectations and in the ability of peers to provide social support. This means that the individuals who have been rehearsing expected roles find out them that they cannot play the role in the anticipated manner. The resulting disjuncture between the anticipated role and the actual role may create strain. Also the individual's traditional support systems may not be able to provide the needed help because they are no longer simultaneously experiencing a similar phenomenon. Therefore individuals experiencing the time-disordered situations may find that they need to readjust their roles and support groups.

This concept is can be applied to the grandparenting situation where grandparents are taking care of their orphaned grandchildren. The expected paten is that one becomes a parent and raises children once the children have grown into parents themselves, the grandparents become free of parenting responsibilities in relation to grandchildren. The paten is disrupted when the grandparents assume the parenting role for the third generation that is their grandchildren causing a wide range of unanticipated challenges (Jendrek, 1993). According to Szinovacz (1998), many grandparents not only anticipate involvement in other more appropriate activities at this life stage but they also experience a disjuncture between their own activities. Thus these grandparents whose life has become disordered often must look elsewhere for social support, particularly to those whose own current experience is dominated by same unanticipated events. Although the increasing fluidity of the postmodern life course has been called to question the notion of rigid age stages and age appropriate roles, a general sense of certain events time disordered and hence potentially more stressful has conceptual relevance for the this research (Cox, 2000).

Role identity: Role Identity theory proposes that having two oppositional identities activated at the same time will result in some degree of dissonance (Burke, 2003) Firstly, one or both

of the identities may shift as their meanings change and, secondly, one or the other identity may become less important, or salient, or the commitment to the identity may become lower as the person withdraws from relationships involved with the identity.

The theory can be applied to grandparenting. Grandparents develop identities of their socially constructed beliefs of what it means to be a traditional grandparent. When they assume the role of a full time caregiver for their grandchildren both identities are then activated. They may fight between being the traditional grandparent and assuming the parental role which causes dissonance.

2.6 Previous studies

A longitudinal survey was carried out by Minkler et al (2000) from 1992 to 1994 in the United States of America with 158 custodial grandparent caregivers to assess the effect of undertaking custodial care of a grandchild on grandparents' depression levels. The research findings showed that those who provide primary care for a grandchild were almost twice as likely to have levels of depressive symptoms. Among caregiving grandparents, those who had recently assumed caregiving responsibilities and women were more depressed and older respondents and those in good health were less depressed. They concluded that the primary care of a grandchild is associated with an increase in levels of depression.

Dolbin-MacNab (2006) describe a qualitative USA study to learn how grandmothers compared parenting their grandchildren to parenting their own children and how they perceived grandparenting to be like. Forty custodial grandmothers were interviewed. Results indicated that grandmothers perceived added challenges such as having limited energy, negotiating changing family roles, and parenting in a harmful social environment.

Chase-lanesdale & Banchman (2005) refer to a study on custodial grandmothers' physical, mental, and economic well-being in 2005 in the USA. The study was conducted utilising a longitudinal, multimethod approach premised on both qualitative and quantitative methods. Random sampling was used to select 90 grandparents from 3 cities of Boston, Chicago, and San Antonio. The grandmothers reported psychological distress and socio-emotional and behavioural problems were associated with greater material hardship and worse mental and physical well-being for caregivers. This study however did not focus on grandparents who were taking care of orphaned children but grandparents who had grandchildren in their custody regardless of the reason why they needed their care.

Barnett & Whiteside (2002), cited in Kiggundu & Oldewage-Theron (2009), discovered that disciplining grandchildren is a major problem in a study they conducted in Uganda. One can therefore note that discipline problems are encountered by grandmothers who are parenting grandchildren in different regions of Africa. Some studies indicate that grandchildren's difficult behaviour, generational values as well as grandchildren with special needs pose a challenge for grandparents who are primary caregivers (Burton, (1992), cited in Sands and Goldberg-Glen, 2006).

A qualitative interview-based study with 13 participants was conducted in a high-poverty community in rural Georgia to find out about the health and wellbeing challenges faced by grandparents caring for their orphaned grandchildren by Scott & Alfonso (2015) showed that rural African American grandparent caregivers faced a range of challenges to health. Physical challenges included chronic pain and chronic stress that interfered with sleep and daily functioning, mobility issues exacerbated by child care, and the pressure of managing their own medical conditions as well as their grandchildren's. Child care made health appointments and hospitalizations logistically difficult and emotional strain was common as grandparent caregivers struggled to protect their grandchildren. Caregivers worried about their mortality and the related consequences for their grandchildren.

Henderson et al, (2015) carried out a study in Alaska and established that grandparents caring for their orphaned grandchildren had little time to themselves and some had little time to engage in community activities. As a result of having little time to spend with their spouses, other family members, they experienced social isolation. Social isolation contributed to reduced overall health. Similar findings were noted in a study carried out in Alabama by Spence et al (2001), who goes further to say that grandparents may also have difficulty relating to the young parents of their grandchildren's friends. In school activities, for example, they are often the oldest guardians present.

Some studies have focused on the experiences of grandfathers who were taking care of their orphaned grandchildren. Blackhouse & Graham (2010) carried such a study in the in Australia. The researchers point out that the purpose of the qualitative study was to better understand the experience of grandparents who are raising their grandchildren in New South Wales, Australia. They used face-to-face in-depth interviews which were conducted with 34 grandparents and the custodial grandparents' narratives were transcribed and studied using paradigmatic analysis to reveal common themes among the stories told. Findings from the

study showed that grandfathers experienced isolation, had economic challenges, lacked social support to raise the grandchildren and had always felt marginalised.

In 2004, Safman in a longitudinal study investigated HIV/AIDS orphans and their caregivers in Thailand in Chiang Mai province in 2001 to 2002 using on interviews. His findings showed that the dominant concern of caregivers of orphaned children are the costs associated with child rearing in an increasingly market-based society. The study however was inclusive of all caregivers in general although he points that the majority of the caregivers were grandparents.

Watson and Phelethu (2014) refer to a study premised on qualitative research based on an exploratory and descriptive design through the use of semi-structured interviews. It was conducted with 15 participants in rural Koster, South Africa who were selected through purposive sampling. Thematic analysis employed to interpret the data. Low physical space as a result of the increased numbers of people in the home, burden of diseases due to the orphans' and their own illness, and their challenges in caring for smaller children, lack of resources for childcare, the grandparents' lack of skills to deal with post-traumatic experiences of the orphans, and their' lack of skills to deal with the orphans' deviant behaviour were showed to be issues of concern.

Nyatsanza (2010) studied grandmothers' perceptions of the types of challenges they faced in caring for AIDS orphans as well as their perceptions of the causes of these challenges. 16 grandmothers from Khayelitsha, Cape Town were interview in a qualitative study. Researchers concluded that environmental challenges such as inadequate housing, crime, and unemployment. Some social challenges they faced included multiple losses of relationships and lack of social support. Medical challenges mainly focused on HIV positive children who were a burden to the grandparents. Behavioural challenges were also cited were grandchildren had defiant behaviour and attitude problems posing a great challenge to the grandmothers who felt that they were failing to be in control of their grandchildren. Also the researcher cited financial challenges which mainly involved caring for a large number of dependents while only relying on social grants to survive.

Makone (2006) describes a qualitative study in Mankweng Township, South Africa which was carried out using interviews and purposive sampling. Twelve grandmothers participated in the study. The findings were consistent with other findings citing economic physical social

and emotional challenges as the major burdens that affected the grandparents caring for their orphaned grandchildren.

A qualitative study that used descriptive analysis conducted in Zimbabwe with 12 grandmothers to find out about the challenges that they faced in caring for their orphaned grandchildren which was conducted by Mudavanhu, (2008). The study used purposive sampling methods. The findings were that most participating grandmothers experienced stress due to unexpected like financial limitations and transitional problems of becoming primary caregivers which included child management problems. Findings also pointed out that unemployment status of grandparents makes it difficult to provide for the orphaned children. Difficulties in accessing governmental aid, physical constrains, lack of support from extended families, fears of being infected with HIV/AIDS and depletion of resources were cited. She mentioned reported emotional reactions experienced came in the form of shame, guilty, anger, self-doubt, and dissatisfaction with their parental role. Some also reported to experience HIV/AIDS stigma and isolation and discrimination.

In Botswana a descriptive qualitative design was used to interview 12 grandmothers 60 years and older in a semi-urban village in Botswana using content analysis to analyse the data. The study was carried out by Shaibu (2013) whose findings showed that grandmothers reported very limited or no support from the extended family, and their health concerns compromised their financial circumstances.

Mudavanhu (2008) explains a survey carried out by Matshalaga (2004) in rural Zimbabwe in Zvishavane was conducted to find out the living experiences of orphans and their caregivers. Multiple feminist qualitative methods or methodological triangulation was used and interviews and participant observations were used as part of the design. 8 grandmothers took part in the study. Concerning the challenges faced by grandmothers she cited that they had limited resources for example, lack of food or school fees, grief from the constant reminder about their deceased children and being stigmatised as the main challenges.

Wilson and Adamchak (2000), cited in Matshalaga et al (2009), in investigating Zimbabwean grandmothers, focused specifically on diminished resources among these grandmothers' households. The authors concluded that these fewer resources reduce the already overstretched ability of older Zimbabweans to maintain their fitness and nutrition. The authors also note that it is inevitable that older Africans and, in particular women who will

outlive their husbands, will shoulder the consequences of HIV/AIDS. This often occurs without concomitant formal or informal

The reviewed literature has shown that grandparents raising their grandchildren experienced increased depression and stress (Mudavanhu 2008; Scott and Alfonso 2015). Studies have also found that custodial grandparents tend to experience worsened emotional and physical health caused by caregiving responsibilities and/or observing the deterioration of an adult child on drugs (Sampson and Hartlein, 2015), increased financial obligations (), lack of instrumental and emotional support and role conflict. Blackhouse and Graham (2010) found that grandparents raising grandchildren with neurological, physical, emotional, or behavioural problems exhibited the most distress, the most disruption of roles, and the most deteriorated grandparent-grandchild relationships.

2.7 Knowledge Gap

Studies on grandparenting have been done in quite a number of countries. A lot of attention has been directed on the concept of grandparenting as a result of the increasing number of orphans who have no one to take care of them. However in Zimbabwe very few studies has fully explored the challenges faced by grandparents. Some studies were limited to grandparents who are taking care of children who were orphaned due to HIV/AIDS negating quite a considerable populace of grandparent's caring for their orphaned grandchildren.

The current study seeks to localise the study on challenges faced by grandparents who are taking care of their orphaned grandchildren to Chiredzi Rural. There is not enough knowledge about the experiences of grandparents living in Chiredzi rural. One cannot generalise the findings on the challenges faced by grandparents in other parts of Zimbabwe to Chiredzi rural is inhabited by a distinct cultural group different from the Shona or Ndebele communities therefore the challenges that the grandparents face may be different from those that are faced by rural grandparents residing in Chiredzi who are taking care of their orphaned children.

2.11 Conclusion

The literature review made detailed examination the relevant body of knowledge on grandparenting that is known which includes subjects on definition of grandparenting,

developmental challenges impacting on the grandparenting role, why grandparents assume the grandparenting role and theories that explain grandparenting as well as previous studies.

CHAPTER THREE: METHODOLOGY

3.1 Introduction

This chapter describes the research paradigm, the research design, target population, population sample, research instrument, data collection procedures, and data presentation and analysis procedures.

3.2 Research paradigm

A research paradigm refers to a perspective about research held by a community of researchers that is based on a set of shared assumptions, concepts, values and practices (Johnson & Christensen, 2012). The study was based upon a qualitative research approach. A qualitative study, according to Cresswell (1994), is defined as a process of understanding a social or human problem, based on building a complex, all-inclusive picture, formed with words, reporting detailed views of informants, and conducted in a natural setting. This approach was chosen because it provided richly descriptive reports of the custodial grandparents' views, experiences and feelings as well as the meanings and interpretations of events making up frameworks which made sense of their experiences. Also a qualitative research design was used in the study because of its richly descriptive nature. Merriam et al (2002) concur with this claim in the sense that words and pictures rather than numbers are used to convey what the researcher has learned about a phenomenon. In this qualitative research, there were descriptions of the context, the participants involved, and the activities of interest

3.3 Research design

Thomas (2010) says that a research design can be thought of as the logic or master plan of a research that throws light on how the study is to be conducted. The researcher used exploratory research design. Exploratory study is explained by Polonsky & Waller (2005) as an approach crucial for obtaining a good grasp of the phenomenon of interest. In this study, the phenomena was that of challenges faced by grandparents caring for their orphaned grandchildren and for advancing knowledge through good theory building. Exploratory research was most useful as it gave the researcher the plasticity to explore the challenges faced by rural grandparents as they come up during interviews (Cooper and Schindler 2006; Boyce and Neale, (2006).

3.4 Target Population

A population is a collection of objects, events or individuals having some common characteristics that the researcher is interested in studying (Barnett, 2005). The target population for this study were rural grandparents taking care of their orphaned grandchildren residing in Chiredzi rural district. The research targeted grandparents aged 65 years and above. According to the village heads, records from which the population sample was obtained, there 36 grandparents who are taking care of at least one orphaned grandchild, excluding those who are caring for grandchildren who are not orphans and 198 grandchildren stay with their grandparents

3.5 Population Sample

Sanders (2010) defines a population sample as a sub-section of the population, which is selected to participate in a study. The research used purposive sampling, which is a form of non-probability sampling according to pre-selected criteria relevant to a particular research question (Palys, 2008), cited in Kothary, (2004). In using purposive sampling the researcher identified key characteristics required for the sample. These qualities were discussed with key informants who assisted to pinpoint the grandparents that had the desired qualities. This was conducted with a purpose of coming up with a population sample consistent of 12 female grandparents out of a total 36 grandparents who were taking care of their orphaned grandchildren in Chiredzi rural aged 65 and above.

3.6 Research Instruments

Research Instruments are measurement tools designed to obtain data on a topic of interest from research subjects (EBSCO Support, 2016). The researcher used in-depth interviews which, according to Braun & Clarke, (2006), are face-to-face conversation with an individual that usually collects specific information about that person or a certain situation that is used in qualitative research methods. Open ended questions were asked which gave the grandparents ample room to explain their challenges. The researcher took the role of a facilitator to enable the grandparents caring for their orphaned children to talk about the challenges they faced and bring out their views thoughts and experiences. The informal atmosphere in interviews encouraged the grandparents to open up. In-depth interviews also provided much more detailed information than what is available through other data collection

methods. Another advantage that influenced the researcher to choose in depth interviews is because data can be collected in a short space of time as compared to other like surveys.

However, interviews had some disadvantages. They were time consuming with each interview lasting 45-60 minutes. Researcher's control of the flow of the interview was limited due to lack of a structured questions. Generalizations about the results cannot be made when using in-depth interviews of the small samples that are used. One other disadvantage of using interviews is that it requires high levels of training and skill to conduct. Furthermore, data analysis is challenging and time consuming. Qualitative data can be unclear, resulting in a more difficult analysis, particularly for less experienced researchers (Boyce & Neale, 2006).

3.7 Data collection procedures.

The researcher used a research letter from the Department of Psychology at the Midlands State University. There after permission from Chiredzi Rural District Council and from the 2 local Headman. The researcher was assisted by village health workers and the local leadership to identify homesteads with grandparents caring for their orphaned grandchildren. Four grandparents were interviewed in their homes per day in interviews lasting 45-60 minutes for four days, usually indoors or under a shade at a quiet and private place,

3.7.1. Ethical considerations

- Informed consent: The researcher provided the selected grandmothers with information about the study on when, where and how it will be conducted to allow them to decide whether or not to participate in the study. The grandparents were informed of their freedom to withdraw from participating in the research and have their information destroyed in their presence whenever they felt they needed to stop participating.
- Confidentiality: The researcher ensured the grandparents that the information they gave will not be divulged to anyone without their approval. Knowing that the information shared during the interview will not be released to anyone without their consent helped the grandparents to say more.
- Anonymity: Consequently, no identifying information about the individual should be revealed in written or other communication. During data presentation code names were used to avoid identification of the participants. This helped to make the
grandparents confident to share their experiences freely because they knew that they wouldn't be identified.

Privacy: The researcher made sure that the privacy of the grandparents was protected by ensuring that interviews are not done in public places where they will be known that they participated in the study. Interviews were carried out indoors or under a secluded shade at the grandparents' homesteads.

3.7.2 Pretesting

A pre-test was carried out to find out the effectiveness, relevance, and reliability of the interview. It also helped to determine the time and costs it took to carry out an interview. The pre-testing was carried out in Chiredzi rural with randomly selected 3 grandparents who were not part of the main research but fitting the study's criterion. Pre-testing helped the researcher to correct unclear questions and ascertain the nature of responses given by participants.

3.8 Data presentation and analysis procedures

Demographic data from the interviews was presented in its raw form making use of descriptive analysis. Thematic analysis was also used to analyse the gathered data. The process involved reading through the recorded data repeatedly, and engaging in activities of breaking the data down by thematising and categorising, building up key points by elaborating and interpreting in order to identify emerging themes and their relationships to the main objectives of the study. The researcher reviewed data, made notes and sorted them into categories for easy interpretation

3.9 Conclusion

This chapter has described how the study was conducted with reference to the research paradigm, the research design, target population, population sample, research instruments, target population, data collection procedures, ethical considerations, data presentation and analysis procedures used by the researcher.

CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.1 Introduction

The chapter presents, analysis and interprets the data collected on the challenges faced by grandparents who take care of their orphaned grandchildren in Sengwe rural, Chiredzi

4.2 Grandparents' responses

The researcher interviewed 12 custodial grandparents whose responses constitutes the data to be presented.

4.2.1 Section A: Grandparents' Demographic Data

Table 4.1 introduces the grandparents, providing information on their age, number of grandchildren under their care, marital status, and period over which they have been taking care of their orphaned grandchildren. All participants were female grandparents. Table 4.1

Pseudo-Name	Age	Marital status	No. of grandchildren	Period
Tino	73	Married	3	8
Tsako	69	Divorced	6	2
Tee	81	Widowed	5	13
Roy	83	Married	2	7
Tsakani	71	Widowed	1	3
Mlilo	67	Widowed	3	4
Farai	76	Married	4	11
Nandi	63	Widowed	3	7
Tomu	74	Widowed	2	5
Gamuchirai	72	Married	7	15
Rhanzu	66	Widowed	3	8
Vula	77	Widowed	5	4

The majority of the grandparents were aged between 65 and 74 years. This may imply that the research findings are more biased towards the experiences of grandparents who were in this age range.

Seven (58%) of the grandparents interviewed were widowed. This may imply that the grandparents had to deal with the experience of grandparenting on their own without spousal support.

Ten (83%) of the grandparents had taken care of grandchildren for 10 years or less. The findings might reflect challenges faced by the grandparents who have been taking care of their grandparents for ten years or less.

Nine (75%) of the grandparents take care of not more than 5 grandchildren. This may imply that the research findings may be influenced by grandparents caring for less than 6 grandchildren.

4.2.2 Challenges faced in caring for orphaned grandchildren

The research findings include the following themes and sub-themes:

- Psychological difficulties
 - Disrupted sleep patterns
 - Constant worries about grandchildren's welfare
 - Hopelessness due to failures in grandparenting
- Poor social relations
 - Lack of parenting skills
 - Lack interactions with peers
 - Stigmatisation
 - Lack of social support
 - Crowding in the homestead

- Lack of financial resources
 - Lack of funds for provision of basic needs
 - No source of income

Poor body health

- Reduced functionality
- Chronic pains

Responses to questions on challenges faced by rural grandparents caring for their orphaned grandchildren is presented under four research questions which were used as subheadings. Direct quotes are used to

Psychological difficulties

Regarding question on whether or not grandparents experienced changes in their sleep patterns ever since they started grandparenting. 9 (75%) of them reported that they had sleep disturbances. This is illustrated by grandmother Tino who said:

"How can I sleep well my son? These children look up to me for everything they need and there is always not enough. I fall asleep late at night and sometimes in the early morning hours trying to figure out how I will provide for them"

This could imply that the grandparents were depressed due to lack of financial difficulties.

When asked about their concerns in caring for their grandchildren, 12 (100%) of the grandmothers reported that they were mostly worried about their ability to provide care for the grandchildren and feared desertion by grandchildren. The grandmothers also feared that their grandchildren may get into trouble due to delinquency. This was illustrated by grandmother Tsako who said:

"I am worried about my grandchildren. I fear that one day they may run away like their older brother who ran away to South Africa because he couldn't stand the poverty that we were enduring. These younger boys smoke and drink beer. They are always having trouble with their teachers and they might have a bad influence on their little sister"

This might imply that the behaviours of the grandchildren negatively affected the grandmothers' mental welfare.

Among grandparents who expressed concerns over their grandchildren, five (41%) of them expressed hopelessness and frustrations. This was demonstrated by grandmother Nandi who said:

"I have tried all I can to make life better for my grandchildren but after all the toil I have barely been able to make them smile or forget for a moment their destitution. I feel annoyed and helpless in the face of these problems. It is now up to God to help me"

This might imply that the grandparents had experienced continues difficulties over a long period of time and they may have lost hope that things could change for better and get frustrated by the perceived failure.

Regarding the question on how grandparents rated their success in their grandparenting role, 7 (58%) of them that they are successful in bringing up their grandchildren although there had been difficulties. 5 (42%) stated that they had failed in bringing up their grandchildren as they had as they had not been able to provide for them. These grandmothers expressed feelings of guilt and self-blame. These two views are noted by the following quotations by Grandmother Roy and grandmother Gamuchirai respectively who said that:

> "I have taken care of them (grandchildren) for 11 years now and they never got what they wanted but is that not the way life is? At least we survive, so yes, I think I am playing my role well"

> "I have tried all I can to make life better for my grandchildren but after all the toil, I haven't been able to improve our lifestyle.

They don't have enough food, the older child has dropped out of school and they all do not have decent clothing. No my son, I haven't been a good guardian"

This might indicate that the grandparents had difficulties in the grandparenting and the fact that some of them regarded themselves as having failed might have had an influence on their psychological wellbeing.

Regarding the question on interests in daily activities, 9 (75%) of the grandparents reported that they had lost interest in most of the activities that they used to have interest in. This view is explained by grandmother Vula who said,

I used to love going to visit my friends and chat about the different things taking place in the village or tell my grandchildren folktales. Now I just do not feel like doing it. I feel like it is a waste of time as there are far more important things to concern myself with.

This lack of interest in daily activities may imply that the grandparents may be suffering from depression since lack of interest in activities once enjoyed is a symptom of depression.

Poor Social relations

Regarding their relationship with their peers 10 (83%) grandparents indicated that grandparents mentioned that their relationship with their peers had ended as childcare took most of their time.

"I no longer have friends at all. I don't find the time to visit friends. The people I used to do tasks and daily chores like fetching water are now just distant figures. We just greet and that is as far as we go. The only company that I have are my grandchildren".

The response might indicate that their friends are no longer close to them as there are differences in daily activities carried out by the grandparents and their friends. This might also mean that the grandparents are isolated marginalised by friends.

Eleven (91%) of the grandparents who complained on their poor social relations reported that they felt socially isolated. They cited that there is a lot of stigma attached to the grandparenting role that they are usually blamed for having to raise their grandchildren, and are in some way responsible for what goes wrong with their grandchildren.

> "I am blamed for not being able to provide for my grandchildren. They say I do not take good care of my grandchildren. It is like it is my fault that my son died"

This is might indicate that society misunderstood the grandparents' predicament and may have been supportive.

Other grandparents added that, they naturally always felt out of place. For example in school activities where guardians are needed, they are often the oldest guardians present as is explained by grandmother Mlilo who said:

"When I go to school to see my grandchildren's books, I am usually the only one who is as old as so I am always alone because my peers do not go to school for such events because they do not have little children to take care of. Often, I am the odd one out, with no friends."

This may mean that the grandparents experience social isolation as they perceive themselves to be different therefore they do not fit into the social systems in their community.

When asked how well they were able to deal with their grandchildren in terms of discipline, 8 (67%) showed that they had problems. This is illustrated by grandmother Ruva who said that:

"These children are now different from our own. They seem to be always seeking to do the things that we never thought of doing. They seem to want to do what they are not supposed to do. I always tell my granddaughter that it is not right for a girl to stay out late at night but she does not listen"

This might mean that the grandparents had difficulties disciplining the grandchildren because there is a generation gap between them and their grandchildren are exposed to a different lifestyle. Regarding the involvement in social activities 10 (83%) of the grandparents showed that they no longer engaged in social activities that they used to do as they were usually preoccupied with offering childcare services to their grandchildren but had also lost interest in the activities. As one grandmother puts it,

"I no longer take part in the social activities. There is no longer time for me to be involved in social gatherings. I no longer have the energy to spare as there are children who need to be taken care of"

This might suggest that the caregiving role does not allow grandparents to get involved in the social activities as grandparenting has taken up all the time they had.

Regarding the availability of social support, 10 (83%) grandmothers reiterated that they lacked social support. Some were widowed or divorced so they carried the burden of grandparenting alone. The lack of contact between the grandparents and other family members left the grandmothers with no one to look up to for assistance. Grandma Tsako, for example, mentioned that:

"We haven't heard from my oldest grandson who went away a long time ago. I hoped that he would help me and his siblings once he got a job but nobody even know where he is right now."

This may reflect that family members, the community and the government are not offering social and economic support to the grandparents

Concerning the living conditions in the household conditions they lived in, 9 (75%) of the grandparents reported that they did not have adequate housing facilities. They said they share the same hut with their children and grandchildren. Grandmother Tsako illustrated this when she said are reflective of this situation

"I sleep in the same hut with my grandchildren because. I am now forced to make my granddaughters and grandsons share the same room. The oldest boy in form one sleeps with my neighbour's son because he refuses to sleep in the same room with his sisters" This may imply that grandparents and their grandchildren may be living in crowded home environment. Possibly, the lack of financial resources hinder the construction of new houses.

Lack of financial resources

With regard to the grandparents' source of income, 12 (100%) of the grandparents indicated that they had no reliable source of income, with the majority mentioning that they practised subsistence farming which does not yield enough produe due to droughts. Grandmother Tsako pointed this out in the following quote.

"We farm on a small piece of land. My grandchildren and I work in the field. The produce is not enough for us but that is our only hope."

The response may show that grandparents work in the fields which might be physically challenging given their old age. Due to the old age they may not be able to produce enough which may lead to grandparents facing economic challenges.

Regarding provision of basic needs to the children, 10 out of 12 (75%) of the grandparents showed that they had challenges in doing so since they were not employed. These views can be noted in the following quotes by grandmother Farai and Rhanzu.

"It is hard to provide for these children my son, they want food, school fees, clothing, decent rooms and blankets. I don't work and no one is helping me. The produce from the fields is barely enough"

"Their Uncle used to help me with money to pay for their school fees. He then lost his job in Hippo Valley, leaving me alone with no one to turn to because he is the only one who understood my situation"

The state of unemployment and the inability to effectively till the land made it extremely difficult for these grandmothers to make available their grandchildren's needs, such as food, soap, clothes, shelter, and school fees.

Poor physical health

When asked how lack of energy impacted on their grandparenting role, 11 (92%) grandparents reported that lack of energy was a challenge as it made it more difficult to care for their orphaned children. This can be noted by grandmother Farai's statement who said that:

"Because of the pain, I have trouble walking to the clinic to have the child treated with this pain in my back. I can't even carry her and she can't walk the long distance."

The responses may imply that grandparents cannot satisfactorily care for their grandchildren as they have difficulties in conducting daily chores because of body weakness.

Regarding the question on how their grandparenting role influenced on their health, 8 (67%) of the grandparents reported that the chores associated with grandparenting, like bathing children and cooking resulted in them experiencing increased pains. The following quotation by grandmother Tino helps to explain their experience:

Because I have to work hard in the fields, wash their clothes, and cook for them, I am always having these pains all over my body that I cannot even tell which part of my body is in pain.

This might mean that instead of resting, grandmothers are forced to carry out chores that are physically challenging when they are supposed to be resting leading to worsened physical health.

4.4 Conclusion

The chapter, has presented, analysed and interpreted collected data. Thematic analysis guided the data analysis.

5.0 CHAPTER FIVE: DISCUSSION, CONCLUSIONS AND RECOMMENDATION

5.1 Introduction

The chapter gives the discussion, conclusions and recommendations based on research findings on challenges faced by grandparents caring for their orphaned grandchildren.

5.2 Discussion of results

The discussion of the research is based on research questions which are used as subheadings.

Psychological challenges

Nine (75%) of the grandparents reported that they had sleep disturbances which is suggestive of depression. Mudavanhu (2008) reported similar findings with Zimbabwean grandparents who are raising their orphaned who reported that the grandparents experienced increased depression and stress. Similarly, Makgato (2010), and Hayslip and Goldberg-Glen (2000) found out that grandparents custodial grandparents reporting high levels of distress, emotional problems, clinical depression, insomnia, hypertension and diabetes.

Findings were that all 12 (100%) of the grandmothers expressed that they worried about their grandchildren. In support of these findings, Waldrop & Weber, 2011) says that given the stressful family events that usually precipitated the custodial care arrangements, grandmothers' anxieties are also increased by concerns for their grandchildren's wellbeing, particularly if past child abuse or neglect had taken place. Shaibu (2013) also reports that grandparents had health concerns about their own health and that of their grandchildren among the other challenges they faced. Scott and Alfonso (2015) supports the idea by stating that caregivers worry about what would happen to their grandchildren in case of their death.

Nine (75%) of the grandparents reported that they had lost interest in most of the activities that they used to have interest in daily activities which might be a symptom of depression. Sampson and Hartlein (2015) supports the view as he says that as a result of perceived failures in carrying some physical and economic functions they may end up showing signs of distress, clinical depression, and insomnia and suffer emotionally. Similarly, Hayslip, and Goldberg-Glen, (2000) says custodial grandparents report higher level of distress, emotional problems, clinical depression and insomnia. Findings by Minkler et al (2000) indicate that

those who provide primary care for a grandchild were almost twice as likely to have levels of depressive symptoms.

Social challenges

Ten (83%) of the grandparents showed that they were no longer actively engaged in the social activities that they used to do as they were usually preoccupied with offering childcare. These findings are congruent with the findings of Henderson et al, (2015) who carried out a study in Alaska and found out that grandparents caring for their orphaned grandchildren had little time to themselves and community activities leading to social isolation. Consistent with the findings by Sampson & Hartlein (2015), grandparents reported that raising their grandchildren impacted their social life as they are unwelcome at events because they are raising young children. Similar findings were noted in a study carried out in Alabama by Spence et al (2001), who says that grandparents may also have difficulty relating to the young parents of their grandchildren's friends.

Eight (67%) of the grandparents reported that they had problems disciplining their grandchildren. Similar findings were reported by Makgato (2010) in a South African study with grandparents caring for orphaned grandchildren where he stated that the major challenge was grandparents' lack of skills to deal with their orphaned grandchildren's deviant behaviours. In agreement, Barnett and Whiteside (2002) cited in Kiggundu and Oldewage-Theron (2009) also discovered that disciplining grandchildren is a major problem in a study they conducted in Uganda. Winston (2006) supports the view saying that most grandparents are illiterate and have no adequate information making it difficult to understand the way to deal with their grandchildren. One can therefore note that discipline problems are encountered by grandmothers who are parenting grandchildren in different regions of Africa as well as beyond Africa.

Ten (83%) of the grandmothers indicated that they lacked social support. This is consistent with the time disordered roles theory as is explained by Seltzer (1976) cited in Jendrek (1993) who says grandparenting may create stress and disjuncture because of the dramatic changes in ones' individual expectations and in the ability of peers to provide social support. This finding is consistent with findings by Goodman & Rao (2007) who discovered that individuals often must deal with marginalised grief, or grief unacknowledged by society and one's social support system as family members and friends do not understand the stressors

and types of loss custodial grandparents are experiencing. Blackhouse and Graham (2010) also found out that grandfathers experienced isolation, and lacked social support to raise the grandchildren.

Nine (75%) of the grandparents reported that they did not have adequate housing facilities for themselves and their grandchildren. Similarly, Goodman and Rao (2007) carried out a study in a US - Mexico border area that found out that grandparents caring for their orphaned grandchildren lacked sufficient funds for the provision of adequate housing. Findings by Mudavanhu (2008) also indicate that grandparents are usually unemployed leading to failure in the provision of housing facilities among other basic needs. Nyatsanza (2010) found that grandparents have limited space for accommodation since the orphans added to the number of family members leading to over-crowding in the home.

Economic challenges

Findings were that 12 (100%) of the grandparents indicated that they had no reliable source of income, with the majority practising subsistence farming which did not yield enough due to droughts. Similar findings were noted by Mudavanhu (2008) who found out that grandparents in Gutu, Zimbabwe were no longer employed and therefore they no longer had a reliable source of income. Matshalaga (2004) made similar conclusions from a study carried out in Zvishavane, Zimbabwe when she pointed out that grandparents were unemployed and relied on farming which was unproductive due to droughts. However, Makgato (2010) notes that the grandparents in South Africa were given government grants which made life easier although the grants were not easy to come by.

Ten (75%) of the grandparents reported that they had challenges in affording basic needs for their grandchildren since they were not employed. Matshalaga (2004) found that grandmothers would offer extensive care for their grandchildren in a situation of severe poverty leading to serious difficulties meeting children's basic needs, such as, clothing, shelter, food, and access to health care and education. Smith & Vacha-Haase, (1999) also showed state that grandparents are usually unemployed which makes it extremely difficult for grandparents to provide provision such as food, soap, clothes, shelter, and school fees. According to Sefasi (2014), the economic hardships are further heightened by the fact that the family that the grandparents are heading are larger that they had ever anticipated while planning to go into retirement.

Fifty percent of the 10 of the grandparents who complained about a lack of funds also reported that they did not have enough money to cater for their children's medical heath care costs. Similarly Scot and Alfonso (2015) says that childcare made health appointments and hospitalizations logistically difficult and emotional strain was common as grandparent caregivers struggled to ensure their grandchildren are well taken care of. Similar views were expressed by AAMFT (2015) which state that grandparents require constant medical attention but resources for medication are diverted to child care. Nyatsanza (2010), in a study carried out in Cape Town South Africa, noted similar findings where grandparents faced medical challenges without the money for medical attention for themselves and their grandchildren, especially those grandchildren who were HIV positive.

Physical challenges

Findings were that 11 (92%) grandparents reported lack of energy was a challenge as it made it more difficult to care for their orphaned children. The Women's and Children's Health Network, (n.d) stresses similar views as highlighting that the deterioration of the body leads to dependency on others for doing daily activities they used to do easily which can be a very depressing experience. This is consistent with Orb and Davey (2015) cited in Makgato (2010) stated that grandmother's usually expressed tiredness as an overriding factor to their physical wellbeing. Similar findings were also reported by Pelethu & Watson (2014) who says that in South Africa grandparents faced physical challenges in caring for smaller children where they are expected to take care of the grandchildren although they are chronically ill.

The research showed that 8 (67%) of the grandparents reported that the chores associated with grandparenting like bathing children and cooking resulted in them experiencing increased body pains. Williamson (2000), cited in Wood (2011), also stated that grandparents tend to face the challenge of chronic pains which interferes with sleep and daily functioning mobility issues exacerbated by child care, and the pressure of managing their own medical conditions as well as their grandchildren's. Similar findings were reported by Mudavanhu (2008) whose study reports that grandmothers in Gutu, Zimbabwe, complained over walking long distances to get medical attention for the grandchildren in their custody. Winston (2006) supports these findings as he says that rural clinics in Australia are usually a long distance away from where some people live so grandparents fail or will have to travel the long distances which impacts negatively on their health.

5.3 Conclusions

The following conclusions were drawn based on the research questions:

Findings were that grandparents experienced psychological challenges as nine (75%) of the grandparents reported having disrupted sleep patterns and Also, 12 (100%) of them constantly worried about their grandchildren's welfare.

Findings also indicate that grandparents face social challenges in caring for their orphaned grandchildren as grandparents reported that they had problems disciplining their grandchildren, were deprived of the opportunity to engage in the activities that they used to do as they were supposed to take care of their grandchildren, lacked social support and lived in crowded conditions.

Findings also showed that grandparents experienced economic challenges as all twelve (100%) of grandparents interviewed indicated that they had no reliable source of income to cater for their welfare and 10 (75%) of the grandparents showed that they had challenges in providing the basics such as food, clothing, school fees and housing facilities for themselves and their grandchildren showing that most grandparents are economically disadvantaged.

Findings also showed that grandparents faced physical challenges as a result of grandparenting where old age hindered performance of tasks while in some cases performance of the many tasks while grandparenting increased chronic pains and diseases. 11 (92%) reported that they faced physical challenges as they had to work hard to provide for their grandchildren which increased their chronic pains like back aches closely associated with their developmental challenges. Also 8 (67%) of the grandparents complained that their bodies were already weak and because of the weakness, they had problems in offering care for their young grandchildren as they took too much time to complete tasks.

Overall conclusion.

Grandparents taking care of orphaned grandchildren experience psychological, social, economic and physical challenges.

5.4 Recommendations

Based on the findings of the study, the researcher came up with the following recommendations:

- There is also need for the Ministry of Social Welfare and non-governmental organisations to introduce support groups in communities for the grandparents. Which might help grandparents who are taking care of their orphaned grandchildren to interact and share their problems, challenges, successes and offer support to each other.
- There is a need for the Ministry of Social Welfare to provide grandparents taking care of their orphaned grandchildren with skills training and orientation in raising orphaned grandchildren as they may not be equipped enough to meet the orphans' requirements.
- The government needs to revise the education policy and take over the responsibility of the education of the orphaned grandchildren by paying their school fees and providing all other school requirements that have monetary value. This is because grandmothers are burdened with this responsibility, which they cannot afford.
- There is need for aid agencies and the Ministry of Social Welfare to help grandparents rather than just focussing on the grandchildren since these grandparents are greatly affected by the presence of these grandchildren.
- It is recommended that aid agencies pay special attention to grandparents who are taking care of their orphaned grandchildren and provide them with some of the basic needs since most grandparents are not able to provide to these basic needs to the grandchildren.
- Local leadership and aid agencies need to give priority to grandparents who are taking care of their orphaned grandchildren in food aid distributions as some of them are not receiving food aid as well as provide basic needs to the grandparents and their grandchildren
- There is need for future researchers to focus on the study of the relationship of grandparent caregivers' age and their emotional wellbeing. Researchers also need to

focus on the relationship between the period of grandparenting and grandparents' psychological wellbeing.

5.5 Conclusion

The chapter has discussed the research findings, drawn conclusions, and suggested recommendations based on the research findings.

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APPENDIX 1

Midlands State Established 2000 P BAG 9055, GWERU TEL: (263) 54 260450 EXT 261 FAX: (263) 54 260311 FACULTY OF SOCIAL SCIENCES DEPARTMENT OF PSYCHOLOGY (date) !!!!03!!!6 To whom it may concern

Dear Sir / Madam

RE: REQUEST FOR ASSISSTANCE WITH DISSERTATION INFORMATION FOR HARDSON NEWENYEN! BACHELOR OF PSYCHOLOGY HONOURS DEGREE

This letter serves to introduce to you the above named student who is studying for a Psychology Honours Degree and is in his/her 4th year. All Midlands State University students are required to do research in their 4th year of study. We therefore kindly request your organization to assist the above –mentioned student with any information that they require to do their dissertation.

TOPIC: CHALLENGES FACED BY GRANDPARENTS IN THANG CARE OF THEIR ORPANIED GRANDCHILDREN IN CHIREDZ RURAL.

For more information regarding the above, feel free to contact the Department.

Yours faithfully	MIDLANDS STATE UNIVERSITY MIDLANDS STATE UNIVERSITY FAGULTY OF SOCIAL SCIENCES FAGULTY OF SOCIAL SCIENCES	EX. TO OUNCIL
PP F. Ngwenya Chairperson	DEPARTMENT	2016 -03- 23
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APPENDIX 2

INTERVIEW GUIDE FOR GRANDPARENTS

Section A: Demographic Data

- ➢ Age_____
- Number of grandchildren ______
- Period of custodial grandparenting ______

Section B: Challenges faced by grandparents

Psychological

- 1. How would describe changes in your sleep patterns since you stated grandparenting?
- 2. What are your concerns about your grandchildren?
- 3. Explain how successful you think you are on grandparenting role.
- 4. Describe your interest in daily activities ever since you started grandparenting

Social challenges

- 5. Can you describe your relationship with your peers after since custodial grandparenting?
- 6. How good have you been at disciplining your grandchildren?
- 7. What form of social support are you receiving from other people in your community?
- 8. How has the addition of grandchildren affected the availability of social space in the home?

Physical challenges

- 9. How does lack of energy impact on your role as a grandparent?
- 10. How has grandparenting influenced your health?

Economic challenges

- 11. How well have you managed to provide for your grandchildren's school fees?
- 12. Describe your ability in providing basic needs for your grandchildren
- 13. Explain any other challenges you face in grandparenting.

APPENDIX 3

DISSERTATION

SUPERVISOR - STUDENT AUDIT SHEET

DATE	ACTIVITY /CHAPTER	LECTURER'S NAME AND SIGNATURE	STUDENT'S NAME AND SIGNATURE	
11-09-15	Topic	NEUTRE N.	NEWIENYEN UT H.	
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SUPERVISOR'S SIGNATURE:

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