

Factors Associated with Future Offending: Comparing Youth in Grandparent-Headed Homes with those in Parent-Headed Homes

By: Lenora R. Campbell, Jie Hu, and Sylvia Oberle

Campbell, L., [Hu, J.](#), & Oberle, S. (2006) Factors associated with future offending by youth in grandparent-and parent-headed households. *Archives of Psychiatric Nursing*, 20(6), 258-267.
[doi:10.1016/j.apnu.2006.07.003](https://doi.org/10.1016/j.apnu.2006.07.003)

Made available courtesy of Elsevier: <http://www.sciencedirect.com/science/journal/08839417>

*****Reprinted with permission.. No further reproduction is authorized without written permission from the (NAME OF PUBLISHER). This version of the document is not the version of record. Figures and/or pictures may be missing from this format of the document.*****

Abstract:

This study examined risk factors for reoffending by youth in grandparent-headed homes and those in parent-headed homes. Using data ed from the juvenile justice records of youth in a variety of living arrangements, we compared the records of 29 youth living in grandparent-headed homes with those of 37 youth living in parent-headed homes. Youth in grandparent-headed homes were significantly more likely to have risk factors and needs associated with reoffending. The findings suggest that youth in grandparent-headed homes are at greater risk for reoffending and that factors predisposing youth in grandparent-headed homes to reoffend may differ from those that predispose youth in non-grandparent-headed homes.

Article:

IN 1997, 25% OF THE AMERICAN population were juveniles younger than 18 years. During the same year, juveniles were responsible for an alarming 17% of all violent crimes (murder, rape, assault) and 35% of all property crimes (theft, arson, vandalism; Holmes, Slaughter, & Kashini, 2001). Although juvenile delinquency rates have declined over the last decade, youth involvement in delinquent activities continues to be a major problem in the United States. In 1999, 2.5 million children and adolescents were arrested by law enforcement agencies, representing almost 4% of the juvenile population (Snyder, 2000).

A number of studies have identified individual, peer, family, school, neighborhood, and social/cultural experiences and situations that place youth at risk for juvenile delinquency. These include abuse and neglect (Dembo, Derke, Borders, Washburn, & Schmeidler, 1998); poor cognitive skills and, subsequently, poor academic performance (Lotz & Lee, 1999; William & Ayers, 1997); as well as poor social skills (William & Ayers, 1997) and limited involvement with prosocial peers (Lotz & Lee, 1999). Other factors include aggression, especially during or before the preschool years (Day & Hunt, 1996), and other mental health issues (Lyons, Baerger, Quigley, Erlich, & Griffin, 2001); lack of family involvement, poor family communication (Williams & Ayers, 1997), and family conflict (Latimer, 2001); parental substance abuse and incarceration (Simons, Lin, & Gordon, 1998), parental abuse and neglect, and poor parental supervision (Jessor, 1993 R. Jessor, Successful adolescent development among youth in high-risk settings, *American Psychologist* 48 (1993) (2), pp. 117–126. Jessor, 1993 and Loeber et al., 1993); as well as poverty and neighborhood crime (Brown, Henggeler, Brondino, & Pinkrel, 1999).

Several studies have examined the moderating effects of family structure on delinquency (Foster et al., 2004 and Griffin et al., 2000). These studies have found that the relationship between parenting and adolescent problem behaviors, including delinquency, differs according to family structure, with youth from single-parent families engaging in higher problem behaviors than youth from two-parent homes (Griffin et al., 2000). The study by Foster et al. (2004) found that youth living with a grandparent had greater involvement in the juvenile justice system than those in non-grandparent-headed homes.

A number of prevention and rehabilitative programs and interventions have been implemented to reduce juvenile delinquent behaviors and to prevent further escalation of arrests (Kam, Greenberg, & Walls, 2001). These efforts have focused primarily on changing the social, environmental, or familial circumstances of at-risk youth (Lyons et al., 2001). For these interventions to be effective, it is important to identify personal, familial, and environmental characteristics and circumstances that place youth at risk for engaging in delinquent behaviors. This study further explored the role of family structure on delinquency. Specifically, the purpose of this study was to examine the likelihood of reoffending among youth in grandparent-headed versus parent-headed homes.

Background

The incidence of youth whose biologic grandparents are their custodial parents continues to rise in the United States. According to the U.S. Census Bureau (2002), more than 5.8 million children and adolescents live in homes that are run by grandparents. In more than 2.4 million homes, grandparents are the sole caregivers for these youth. Raising a grandchild can be both difficult and a long commitment for many grandparents. In one study, more than half of the grandparents who were primary caregivers raised their grandchildren for at least 3 years and one in five had done so for more than a decade (Minkler, 1999).

The circumstances in which grandparents assume custodial responsibility for their grandchildren include parental child abuse, abandonment, and neglect. Grandparents also assume primary caregiving responsibility as a result of parental divorce and teen pregnancy. Parental habitual substance abuse can also lead to grandparents assuming primary child care responsibilities for their grandchildren. In 1998, approximately 13% of women aged between 15 and 44 years reported use of illicit substances (National Institute of Drug Abuse, 2003). Many of these women exposed their fetus to drugs and alcohol. Grandparents who assume custodial rights of these children are often faced with ones who have significant neurobehavioral issues related to the effects of the substance use on them as a developing fetus (Whitley, 2006).

Incarceration also increases the prevalence of custodial grandparents. In 1998, an estimated 3.2 million women were arrested, and approximately 70% of these women were parents of dependent children (Freudenberg, 2002). Most children who have a parent who is incarcerated live in the home of their nonincarcerated parent. However, when the incarcerated parent is the mother, children most often reside in the home of a non-parent relative, primarily the grandmother (Smith, Krisman, Strozier, & Marley, 2004).

It is clear that youth in custodial grandparent families have a number of behaviors, experiences, and characteristics that place them at risk for delinquency. However, the delinquency literature is virtually silent on this subpopulation of youth. Although some studies have identified risk factors associated with delinquency and factors that mediate or moderate the influence of adverse circumstances on delinquency, there is a need to more fully understand how individual, family, and environmental factors converge to result in delinquency, especially among youth in grandparent-headed homes. This study examined a sample of youth with a history of juvenile delinquency to identify factors associated with reoffending. We compared risk factors for youth living with their grandparents with those for youth living with their parents.

Methods

Setting and Target Population

A descriptive retrospective study design was used to examine 66 youth aged between 12 and 18 years who had records in the juvenile justice system in an urban community in North Carolina. To obtain the sample, we received a list of youth assigned to the 11 juvenile court counselors for the period of April–May 2002. All court counselors were interviewed to determine the family type of each youth in their caseload. The 29 records of all youth identified as living in grandparent-headed homes were reviewed. In addition, we identified 44 youth in the homes of their biologic parents (either one-parent or two-parent homes) from the caseload of each of the 11 court counselors. Seven of the 44 cases were closed (i.e., they were unavailable for review because the youth had aged out of the juvenile justice system). This article presents the findings on the remaining 37 youth in parent-headed homes and the 29 youth in grandparent-headed homes.

Data Collection Instrument

To examine factors associated with reoffending, we ed data on risks and needs from the records of the 66 youth included in the study as determined by court counselors who gathered such data using the North Carolina Assessment of Juvenile Risk of Future Offending and the North Carolina Assessment of Juvenile Need. The North Carolina Department of Juvenile Justice and Delinquency Prevention developed these instruments and mandate their use by juvenile court counselors throughout the state. Demographic data were also ed, including age, sex, ethnicity, presence of health conditions (including mental health conditions), and presence of a mental health evaluation.

The North Carolina Assessment of Juvenile Risk of Future Offending is a nine-item measure of risks that assesses (1) age at first offense/complaints, (2) presence of undisciplined/delinquent referrals, (3) serious prior adjudication, (4) prior assaults, (5) runaways, (6) use of alcohol in the past 12 months, (7) presence of school behavior problems in the past 12 months, (8) presence of delinquent peer relationships, and (9) degree of parental supervision. Scores ranged from 0 to 19, with higher scores indicating greater risk for future offending. A total score of risk of future offending was calculated. A coefficient α was calculated on the overall score of the instrument to assess its reliability. Cronbach's α of .73 in this study revealed moderate internal consistency. The North Carolina Assessment of Juvenile Need is a 15-item measure that assesses both youth and family needs in the areas of social, academic, and behavioral functioning. Specifically, the measure assesses (1) peer relationships, (2) school behavior/adjustment, (3) general academic functioning, (4) substance abuse, (5) juvenile parent status, (6) history of victimization, (7) sexual behavior, (8) mental health, (9) physical needs and health and hygiene, and (10) family needs. Scores ranged from 0 to 24. A total score of assessment of juvenile needs was summed, with higher scores indicating a higher level of needs. A reliability coefficient of .68 in this study revealed moderate internal consistency.

Data Collection Procedures

Data collectors were a doctorally prepared nurse and a baccalaureate-prepared research assistant. To ensure consistency in data collection, they had extensive training in the administration of the instrument. Before using the instruments for the sample, they tested their reliability on 10 juvenile justice records. All records were reviewed at the Office of Juvenile Justice. Interrater reliability was 98%. A 1-week test–retest by one reviewer on five records showed 97% agreement from test to retest.

Statistical Analysis

Data were analyzed initially using descriptive statistics and logistic regression. Percentages of agreement or disagreement for each item were calculated. Youth health conditions obtained from demographic data were compared between grandparent-headed and parent-headed homes using χ^2 statistics. Odds ratios (ORs) and 95% confidence intervals (CIs) were calculated to compare data for youth in grandparent-headed homes with those for youth in parent-headed homes on age at first delinquent offense, undisciplined or delinquent referrals, serious prior adjudication, prior assaults, runaways, use of alcohol/drugs in the past 12 months, school problems during the past 12 months, delinquent peer relationships, parental supervision, peer relationship, school behavior, general academic functioning, substance abuse within the past 12 months, juvenile parent status, history of victimization, sexual behavior within the previous 12 months, mental health, basic physical needs, and health and hygiene. The Mann–Whitney U test was used to examine the differences on risk for future offending and juvenile needs between youth in grandparent-headed homes and those in parent-headed homes. SAS 9.1 and SPSS 13.0 were used for data analysis.

Results

Sample

More than 80% (82% vs. 53%) of the youth in grandparent-headed homes were of racial minority, primarily African Americans (Table 1). The mean ages of the youth in grandparent-headed and parent-headed homes were 16 (range, 13–18) and 15 (range, 2–17) years, respectively. Grandparent-headed homes had a higher percentage of boys (82% vs. 62%). The most common offenses by youth in the sample included substance

abuse, running away, aggressive behavior, and sexual offenses (Table 2). A comparison of committed offenses revealed that youth in grandparent-headed homes committed more offenses in each of the five categories as compared with youth in parent-headed homes. For both groups, substance abuse was the most common offense.

Table 1.

Demographic Characteristics of the Subsamples for the 66 Youth Whose Records Were Selected and Reviewed

	Grandparent-headed homes (n = 29)	Parent-headed homes (n = 37)
Sex [n (%)]		
Male	24 (17.2)	15 (40.5)
Female	5 (82.8)	22 (59.5)
Age [years; M (SD)]	16 (1.37)	15 (1.40)
Ethnicity [n (%)]		
Minority	25 (86.2)	21 (56.8)
Caucasian	4 (13.8)	16 (43.2)
Grade [M (SD)]	8 (1.26)	8 (1.03)
Health history [n (%)]		
Mental health problems	13 (44.8)	11 (29.7)
Asthma/Respiratory problem	7 (24.1)	2 (5.4)
Speech and hearing problems	1 (3.4)	2 (5.4)
Learning disability	1 (3.4)	1 (3.4)
Other physical health problems	7 (24.1)	7 (24.1)

Table 2.

Types of Offenses: Grandparent-Headed versus Parent-Headed Homes (N = 66)

Type of offense	Grandparent-headed homes (n = 29)	Parent-headed homes (n = 37)
Substance abuse		
Yes	16 (55.20)	19 (51.40)
No	13 (44.80)	18 (48.60)
Running away		
Yes	9 (31.00)	9 (24.30)
No	20 (69.00)	28 (5.70)
Assertive/Aggressive		
Yes	6 (20.70)	5 (13.50)
No	23 (79.30)	32 (86.50)
Sexual abuse		
Yes	4 (13.80)	4 (10.80)
No	25 (86.20)	33 (89.20)
Sexual offending		
Yes	3 (10.30)	3 (8.10)
No	26 (89.70)	34 (91.90)

note. Values are expressed as n (%).

Youth in grandparent-headed homes had higher rates of mental health problems (44% vs. 11%) and other physical health problems (26% vs. 21%). However, only respiratory problems were significantly higher among youth in grandparent-headed homes as compared with youth in parent-headed homes (26% vs. 5%, $\chi^2 = 5.85$, $P < .05$).

Risk Assessment

Court counselors identified a high percentage of youth in both groups who experienced risk factors that increased their likelihood of reoffending (Table 3). Youth in grandparent-headed homes and those in parent-headed homes were identified as being at greater risk for reoffending as a result of school problems (88.9% and 86.1%, respectively), deviant peer relationships (78.1% and 54.3%, respectively), poor supervision (58.3% and 19.4%, respectively), and substance abuse (37.5% and 54%, respectively). However, a higher percentage of youth in grandparent-headed homes had experiences and behaviors that placed them at risk for future offending. Youth in grandparent-headed homes were almost six times more likely to have parents/guardians who reported being unable or unwilling to provide supervision (OR = 5.8, 95% CI = 1.82–18.46). They were three times more likely to have had a prior serious adjudication (OR = 3.6, 95% CI = 1.02–12.65), to have their first delinquent offense before they were 12 years old (OR = 3.4, 95% CI = 0.57–20.26), and to have had a history of associating with delinquent peers (OR = 3.2, 95% CI = 0.97–10.50). Youth in grandparent-headed homes were also more likely to have prior assaults, undisciplined or delinquent referrals, and school problems. Only for substance use did youth in grandparent-headed homes have a lower risk, as reported by court counselors.

Table 3.
Risk Assessment: Grandparent-Headed versus Parent-Headed Homes (N = 66)

Risk	Grandparent-headed homes [n (%)]	Parent-headed homes [n (%)]	OR (95% CI)	P
Parental supervision: Parent/Guardian/Custodian is...				
Willing but unable to supervise	14 (58.3)	7 (19.4)	5.8 (1.82–18.46)	.003
Willing and able to supervise	10 (41.7)	29 (80.6)		
Serious prior adjudication				
Classes 1–3/F1 felony/A1 misdemeanor	9 (37.5)	5 (13.9)	3.6 (1.02–12.65)	.06
None	15 (62.5)	30 (83.3)		
Peer relationships				
Rejected by prosocial peers or associates with delinquent peers	19 (78.1)	19 (54.3)	3.2 (0.97–10.50)	.06
Peers provide good support and influence	5 (20.8)	16 (45.7)		
First delinquent offense				
<12 years	4 (16.7)	2 (5.6)	3.4 (0.57–20.26)	.21
≥12 years or no complaint	20 (83.3)	34 (94.4)		
Prior assaults				
Yes	5 (20.9)	3 (8.4)	2.9 (0.62–13.48)	.25
None	19 (79.2)	33 (91.7)		
Undisciplined or delinquent referrals				
More than one prior	10 (41.7)	10 (27.8)	1.9 (0.62–5.53)	.41
Current referral only	14 (58.3)	26 (72.2)		
Runaways (from home/placement)				

Risk	Grandparent-headed homes [n (%)]	Parent-headed homes [n (%)]	OR (95% CI)	P
Yes	6 (25.0)	7 (19.4)	1.4 (0.40–4.77)	.75
No	18 (75.0)	29 (80.6)		
School behavior during prior 12 months				
Moderate problems/Severe problems	21 (88.5)	31 (86.1)	1.1 (0.24–5.24)	.99
None/Mild	3 (12.5)	5 (13.9)		
Use of alcohol/drugs in the past 12 months				
Need for assessment and/or treatment	9 (37.5)	18 (50)	0.6 (0.21–1.72)	.43
No known substance use	15 (62.5)	18 (50)		

Needs Assessment

For youth in grandparent-headed homes and those in parent-headed homes, court counselors perceived needs in the areas of peer relationships (83.4% and 58.4%, respectively), school behaviors (87.5% and 83.8%, respectively), and mental health (83.4% and 67.6%, respectively). However, in 9 of the 10 needs categories, a higher percentage of youth in grandparent-headed homes were perceived by court counselors to have needs documented in the literature as having a strong association with delinquency and that which might increase the likelihood of future offending. Youth in grandparent-headed homes were three times more likely to be associated with delinquent peers (OR = 3.4, 95% CI = 0.97–11.99). They were twice as likely to be living independently or in a residential or group home (OR = 2.9, 95% CI = 2.0–4.06), to have mental health problems (OR = 2.4, 95% CI = 0.67–8.59), and to have a history of abuse or neglect (OR = 2.2, 95% CI = 0.70–6.79; Table 4). In only one area (substance abuse) did court counselors identify youth in parent-headed homes as having needs that placed them at greater risk for reoffending than youth residing with their grandparents.

Table 4.
Needs Assessment: Grandparent-Headed versus Parent-Headed Homes (N = 66)

Needs	Grandparent-headed homes [n (%)]	Parent-headed homes [n (%)]	OR (95% CI)	P
Peer relationship				
Rejected by prosocial peers or associates with delinquent peers	20 (83.4)	22 (58.4)	3.4 (0.97–11.99)	.09
Peers provide good support and influence	4 (16.7)	15 (4)		
Basic physical needs/Independent living				
Living in short-term residential care/shelter or independently with met needs	4 (16.7)	0 (0)	2.9 (2.00–4.06)	–
Living with parent/guardian with met needs	20 (83.3)	37 (100)		
Juvenile parent status				

Needs	Grandparent-headed homes [n (%)]	Parent-headed homes [n (%)]	OR (95% CI)	P
Is a parent	1 (4.2)	0 (0)	2.6 (1.89–3.60)	–
Not a parent	23 (95.8)	37 (100)		
Mental health				
Mental health problems/concerns	20 (83.4)	25 (67.6)	2.4 (0.67–8.59)	.24
No need for mental health care	4 (16.7)	12 (32.4)		
History of victimization				
Victimized	9 (37.5)	8 (21.6)	2.2 (0.70–6.79)	.24
No history of abuse or neglect	15 (62.5)	29 (78.4)		
General academic functioning				
Generally functions below grade level	8 (33.3)	8 (21.6)	1.8 (0.57–5.75)	.38
Generally functions at or above grade level	16 (66.7)	29 (78.4)		
Sexual behavior during prior 12 months				
Engages in potentially dangerous sex/Victimizes others sexually	4 (16.7)	4 (10.8)	1.6 (0.36–7.13)	.70
No apparent problem	20 (83.3)	32 (86.5)		
School behavior				
Moderate/Severe problems	21 (87.5)	31 (83.8)	1.4 (0.30–6.03)	.73
None/Minor problems	3 (12.5)	6 (16.2)		
Health and hygiene (excluding mental health)				
Youth has health education needs that do not impair functioning	3 (12.5)	4 (10.8)	1.2 (0.24–5.80)	.99
No apparent problem	21 (87.5)	33 (89.2)		
Substance abuse within the past 12 months				
History of substance abuse	9 (37.5)	20 (54)	0.51 (0.18–1.46)	.29
No known substance use	15 (62.5)	17 (45.9)		

The results of the Mann–Whitney U test revealed statistically significant differences between youth in grandparent-headed homes and those in parent-headed homes on the presence of risk factors ($z = -2.17$, $P = .03$) and that of identified needs ($z = -2.25$, $P = .02$). Youth in grandparent-headed homes had greater risks and needs as compared with youth in parent-headed homes (Table 5).

Table 5.

Risk of Future Offending and Needs (Mann–Whitney U Test): Grandparent-Headed versus Parent-Headed Homes (N = 66)

	Grandparent-headed homes		Parent-headed homes		Mann–Whitney	
	n	M	n	M	z	P
Risk	27	37.33	39	27.17	-2.17	.03
Need	27	38.20	39	27.55	-2.25	.02

Discussion

This study provides preliminary data on the risk of engaging in future delinquent behavior based on the presence of risk factors and identified needs. It also supports previous studies that have found a number of family, peer, and individual factors that place youth at risk for delinquent behaviors. In this study, youth in grandparent-headed homes and those in parent-headed homes were identified as having a number of risks and needs associated with delinquency. Moreover, the study supports the findings of Foster et al. (2004) indicating that youth in grandparent-headed homes had greater involvement in the juvenile justice system as compared with youth in parent-headed homes. In the present study, youth in grandparent-headed homes were more likely to have risk factors associated with delinquency, including being involved in delinquent acts at a young age (≤ 12 years), committing more serious delinquent offenses, having greater difficulty developing and maintaining relationships with nondelinquent peers, and having caregivers who expressed difficulty with providing adequate parental supervision.

The finding that grandparents were six times more likely to report an inability or unwillingness to provide supervision to the youth in their care is especially troubling. Youth involvement in delinquency has been directly linked to a lack of parental/caregiver supervision (Keller et al., 2002 and Loeber et al., 1993). In fact, supervision and monitoring have been found to have a strong protective effect against delinquency (Griffin et al., 2000, Keller et al., 2002 and Woolfender et al., 2002). Unsupervised youth have higher exposure to negative peer groups and are less likely to perform well academically and to develop self-discipline skills and the ability to respond appropriately to rules (Johnson-Reid, 2002).

The fact that many more grandparents reported an inability or unwillingness to supervise their grandchildren supports findings from previous studies indicating that custodial grandparents, especially African Americans, are more likely than their peers to have functional limitations (Minkler & Fuller-Thomson, 2005). It is also well documented that grandparents who assume care for grandchildren experience higher levels of emotional burnout and depression secondary to their caregiving role (Szinovacz, 1998). Specific factors that compromise the health and, subsequently, the parenting of custodial grandparents include caring for children with behavioral problems and parenting stress (Butler & Zakari, 2005 and Pruchno, 1999); stressful relationships with other family members, including the biologic parents of the grandchildren (Janicki, McCallion, Grant-Griffin, & Kolomer, 2000); and poor access to needed resources (Cox, 2002). Although this study did not examine the physical and mental health needs of caregivers, it raises the possibility of a relationship between the ability of custodial grandparents to provide needed supervision to the children in their care, their physical and mental health, and the at-risk status of grandchildren. Other studies have found that grandparents in better health perceive themselves to be more effective in their caregiving role (King & Elder, 1998).

The findings of this study are consistent with those of a number of other studies that have found that many youth in the juvenile justice system suffer from mental health problems (Cauffman et al., 2005, Grisso et al.,

2001, Shelton, 2001 and Templin et al., 2005). Study findings are also consistent with research that has found an increased risk of emotional and behavioral issues among children being parented by grandparents (Pruchno, 1999). In the present study, youth in grandparent-headed homes were more likely to be identified by court counselors as having greater needs associated with a history of abuse and neglect and mental health problems as compared with youth in parent-headed homes. Youth in grandparent-headed homes were three times more likely to be identified as requiring a mental health evaluation.

The association between mental health and delinquency is well established (Kataoka et al., 2001 and Templin et al., 2005). Emotional health involves learning to manage one's impulses and emotions and being able to respond flexibly to situational demands. Youth who are not able to regulate their affect, delay gratification, and anticipate consequences in age-appropriate ways are more likely to engage in impulsive behaviors that may lead to delinquent acts. These youth are also less likely to focus their attention on school-related tasks and develop good social skills, both of which are critical to healthy growth and development and were found to be areas of need among youth in the grandparent-headed homes in this study.

This study also found that youth in grandparent-headed homes were twice as likely to have a history of neglect. Child abuse and neglect are directly related to one's mental health (Williams & Ayers, 1997; Williams, Ayers, & Arthur, 1999; Williams et al., 1997 and Williams et al., 1999). Like emotional health, child maltreatment exerts its effect by adversely impacting dimensions of development (e.g., peer and intimate relationships, self-regulation of emotions, and behavioral adjustments; Chang, Schwartz, Dodge, & Mc-Bride-Chang, 2003). Moreover, studies have found that both neglected and abused children are significantly more likely to have arrests, both as juveniles and adults, as compared with those without these experiences (Dembo et al., 2000). Children who have experienced abuse or neglect also have a heightened need for permanency, security, and emotional constancy (Miller et al., 2000). Our finding indicating that youth in grandparent-headed homes were more than twice as likely to have unstable living arrangements compromises this heightened need for permanency. Although this study did not address issues of causality, it is clear that having a consistent relationship with an adult who fosters trust and security helps children develop into healthy adults and reduces the risk for problem behavior, including delinquency.

The findings of this study suggest that youth in grandparent-headed homes may indeed represent a vulnerable population. Their increased need for social, academic, and mental health assistance, coupled with the parenting needs of custodial grandparents, could help explain the heightened risk for reoffending, as found in this study, and the greater involvement in the juvenile justice system among youth in grandparent-headed homes, as found in other studies.

Limitations

The findings of this study are limited by its cross-sectional retrospective design and the lack of baseline data (e.g., the time frame for placing youth in grandparent-headed homes). These design issues make it impossible to examine causal relationships. For example, the poor manageability of the behavior of youth living in grandparent-headed homes may have served as the impetus for placing these youth in a custodial caregiving arrangement. In addition, some of the findings of the study may reflect sampling differences. In this study, youth in grandparent-headed homes were more likely to be African American and male. A number of studies have found boys and minority youth to have a greater involvement in the juvenile justice system (Bilchik, 1999). The lack of randomization, small sample size, and geographic location of the study limit generalization of the findings. A number of variables unavailable to the researchers, such as time in the juvenile system, type of mental health problems, and marital status of grandparents and parents, might have confounded the results. Finally, all youth in this study had at least one adjudicated experience. This sampling characteristic should be considered when generalizing these findings to other groups of youth in custodial grandparent families.

Implications

Considering the rapid increase in the population of grandparents raising grandchildren, a clearer understanding of the challenges of these families and the resources and interventions at their disposal is needed. Moreover, the

unfortunate circumstances in which many of these youth come to live with their grandparents suggest that they are a vulnerable population. The results of this study indicate that these youth in fact have risks factors and needs that have been linked with juvenile delinquency. Moreover, these factors may be qualitatively and quantitatively different from those found among youth with a different parenting experience.

There has been little focus in the research literature on the needs of youth in grandparent-headed homes. Clearly, more research is needed to identify the experiences, challenges, and health issues of this population of youth. Professionals in health care, academic settings, social services, and child development need to be aware of the needs of these children and make provisions for them to receive needed assistance. Specifically, because many come from adverse life circumstances, including a history of abuse and neglect (Green, 2004), service providers working with these youth need to assess their growth and development, especially their emotional, behavioral, cognitive, and social functioning, and, if necessary, assist them to receive services. This is especially significant given the fact that researchers have consistently found that many youth in the juvenile justice system do not receive needed mental health care (Templin et al., 2005). Recommendations have been made for the integration of and coordination between the mental health system and juvenile justice system to address this concern.

Grandparent caregivers also represent a vulnerable population (Dowdell, 2004 and Minkler & Fuller-Thomson, 2005). Many report physical and mental health problems and a lack of adequate resources needed to successfully undertake caregiving responsibilities (Dowdell, 2005). Agency and public policies that are unresponsive to the needs of these families make it impossible for grandparents to obtain needed assistance, including health care. Increased awareness by policymakers of the needs of these caregivers is critical. Currently, state child welfare agencies are mandated to give initial custody consideration to grandparents and other relatives and, if at all possible, to assign legal guardianship to these relative caregivers (Green, 2004). This study suggests that consideration should be given to the ability of these potential caregivers to adequately supervise children and to ensuring the availability of adequate support.

Community-based interventions, such as support groups, have been found to provide needed assistance to custodial grandparents and to improve their health, well-being, and, subsequently, parenting. A number of interventions that have demonstrated their effectiveness with this population have been identified in the evidence-based literature (Dannison & Smith, 2003 and Hayslip & Kaminski, 2005). Additional research is needed to understand factors that influence the involvement in juvenile delinquency among youth in grandparent-headed homes and to design and test interventions aimed at reducing these behaviors.

Conclusions

Despite the fact that youth in grandparent homes are a growing population whose circumstances place them at risk for a number of adverse outcomes (Green, 2004), including delinquency, this study is one of only a small number of published studies examining their involvement in the juvenile justice system. Clearly, additional studies are needed to examine the rate of delinquency among children being raised by grandparents and to explore similarities and differences in risk factors for these youth and those living in non-grandparent-headed homes. Studies that explain their increased involvement in the juvenile justice system and that test interventions designed to reduce this occurrence are also needed.

Health, social service, and juvenile justice professionals should consider the unique circumstances of youth in different caregiver relationships and the impact of these on behavior. Policies that support the stability of grandparent families and that provide needed support and resources to kinship caregivers are needed. The age, health, limited resources, and lack of training of many kinship caregivers can complicate efforts to meet the needs of the children in their care and can thus jeopardize caregivers' ability to provide care until reunification with birthparents can successfully occur (Green, 2004). The findings of this study suggest that youth in grandparent-headed homes may be at greater risk for juvenile delinquency as compared with youth in a different family structure. The findings of this study also suggest that factors that predispose youth in non-grandparent-headed homes to reoffend may differ from those that predispose youth in grandparent-headed homes.

References

- Bilchik, 1999 S. Bilchik, *Juvenile Justice Bulletin*. U.S. Department of Justice, Office of Justice Program, National Report Series, Office of Juvenile Justice and Delinquency Prevention, Washington, DC (1999).
- Brown et al., 1999 T.L. Brown, S.W. Henggeler, M.J. Brondino and S.G. Pinkrel, Trauma exposure, protective factors, and mental health functioning of substance-abusing and dependent juvenile offenders, *Journal of Emotional and Behavioral Disorders* 7 (1999) (2), pp. 94–103.
- Butler & Zakari, 2005 F.R. Butler and N. Zakari, Grandparents parenting grandchildren: Assessing health status, parental stress and social supports, *Journal of Gerontological Nursing* 31 (2005) (3), pp. 43–54. (10)
- Cauffman et al., 2005 E. Cauffman, S.H. Scholle, E. Mulvey and K.J. Kelleher, Predicting first time involvement in the juvenile justice system among emotionally disturbed youth receiving mental health services, *Psychological Services* 2 (2005) (1), pp. 28–38. Full Text via CrossRef (3)
- Chang et al., 2003 L. Chang, D. Schwartz, K.A. Dodge and C. Mc-Bride-Chang, Harsh parenting in relation to child emotion regulation and aggression, *Journal of Family Psychology* 17 (2003) (4), pp. 598–606. Full Text via CrossRef (60)
- Cox, 2002 C.B. Cox, Empowering African American custodial grandparents, *Social Work* 47 (2002) (1), pp. 337–352.
- Day & Hunt, 1996 D. Day and A. Hunt, A multivariate assessment of a risk model for juvenile delinquency with an “under 12 offender” sample, *Journal of Emotional and Behavioral Disorders* 4 (1996) (2), pp. 66–72. Full Text via CrossRef (3)
- Dannison & Smith, 2003 L.L. Dannison and A.B. Smith, Custodial grandparents community support program: Lessons learned, *Children and Schools* 25 (2003) (2), pp. 87–95. (5)
- Dembo et al., 1998 R. Dembo, M. Derke, S. Borders, M. Washburn and J. Schmeidler, The relationship between physical and sexual abuse and tobacco, alcohol and illicit drug use among youth in a juvenile detention center, *International Journal of the Addictions* 23 (1998) (4), pp. 351–378.
- Dembo et al., 2000 R. Dembo, W. Wothke, M. Stenwell, K. Pacheco, W. Seeberger and M. Rollie et al., Testing a longitudinal model of the influence of family problem factors on high risk youths' troubled behavior: A replication and update, *Journal of Child and Adolescent Substance Abuse* 10 (2000) (2), pp. 9–22. Full Text via CrossRef (7)
- Dowdell, 2004 E.B. Dowdell, Grandmother caregivers and caregiver burden, *The American Journal of Maternal Child Nursing* 29 (2004) (5), pp. 299–304. Full Text via CrossRef (13)
- Dowdell, 2005 E.B. Dowdell, Grandmother caregiver reactions to caring for high-risk grandchildren: I could write a book!, *Journal of Gerontological Nursing* 31 (2005) (6), pp. 31–36.
- Foster et al., 2004 E.M. Foster, A. Qaseem and T. Connor, Can better mental health services reduce the risk of juvenile justice system involvement?, *American Journal of Public Health* 94 (2004) (5), pp. 859–865. Full Text via CrossRef (24)
- Freudenberg, 2002 N. Freudenberg, Adverse effects of US jail and prison policies on the health and well-being of women of color, *American Journal of Public Health* 92 (2002) (12), pp. 1895–1899. Full Text via CrossRef (41)
- Green, 2004 R. Green, The evolution of kinship care policy and practice, *The Future of Children*. Los Altos 14 (2004) (1), pp. 130–150.
- Griffin et al., 2000 K.W. Griffin, G.J. Bovine, L.M. Scheier, T. Diaz and N.L. Miller, Parenting practices as predictors of substance use, delinquency, and aggression among urban minority youth: Moderating effects of family structure and gender, *Psychology of Addictive Behaviors* 14 (2000) (2), pp. 174–184. Full Text via CrossRef (121)
- Grisso et al., 2001 T. Grisso, R. Barnum, K. Fletcher, E. Cauffman and D. Deuschold, Massachusetts youth screening instrument for mental health needs of juvenile justice youths, *Journal of the American Academy of Child and Adolescent Psychiatry* 40 (2001), pp. 541–548. Full Text via CrossRef (65)
- Hayslip & Kaminski, 2005 B. Hayslip and P.L. Kaminski, Grandparents raising grandchildren: A review of the literature and suggestions for practice, *Gerontologist* 45 (2005) (2), pp. 262–270.
- Holmes et al., 2001 S.E. Holmes, J.R. Slaughter and J. Kashini, Risk factors in childhood that lead to the development of conduct disorder and antisocial personality disorders, *Child Psychiatry and Human*

Development 3 (2001), pp. 183–193. Full Text via CrossRef (24)

Janicki et al., 2000 M. Janicki, P. McCallion, L. Grant-Griffin and S. Kolomer, Grandparent caregivers: I. Characteristics of the grandparents and the children with disabilities for whom they care, *Journal of Gerontological Social Work* 33 (2000) (3), pp. 35–55. Full Text via CrossRef (10)

Jessor, 1993 R. Jessor, Successful adolescent development among youth in high-risk settings, *American Psychologist* 48 (1993) (2), pp. 117–126. Full Text via CrossRef (249)

Johnson-Reid, 2002 M. Johnson-Reid, Exploring the relationship between child welfare intervention and juvenile corrections involvement, *American Journal of Orthopsychiatry* 72 (2002) (4), pp. 559–576.

Kam et al., 2001 C. Kam, M. Greenberg and C. Walls, Examining the role of implementation quality in school-based prevention using the PATHS, *Curriculum* 4 (2001) (1), pp. 55–63.

Kataoka et al., 2001 S. Kataoka, B. Zima, D. Dupre, K. Moreno, X. Yang and J. McCracken, Mental health problems and service use among female juvenile offenders: Their relationship to criminal history, *Journal of the American Academy of Child and Adolescent Psychiatry* 40 (2001) (5), pp. 549–555. Full Text via CrossRef (40)

Keller et al., 2002 T.E. Keller, R.F. Catalano, K.P. Haggerty and C.B. Fleming, Parent figure transitions and delinquency and drug use among early adolescent children of substance abusers, *American Journal of Drug and Alcohol Abuse* 28 (2002) (3), pp. 399–427. Full Text via CrossRef (29)

King & Elder, 1998 V. King and G.H. Elder, Perceived self-efficacy and grandparenting, *Journal of Gerontology* 53B (1998) (5), pp. S249–S257. (13)

Latimer, 2001 J. Latimer, A meta-analytic examination of youth and delinquency, family treatment, and recidivism, *Canadian Journal of Criminology* 43 (2001) (2), pp. 237–253. (15)

Loeber et al., 1993 R. Loeber, P. Wung, K. Keenan and B. Girouz, Development pathways in disruptive child behavior, *Development and Psychopathology* 5 (1993) (1–2), pp. 103–133.

Lotz & Lee, 1999 R. Lotz and L. Lee, Sociability, school, experience, and delinquency, *Youth and Society* 31 (1999) (2), pp. 199–223.

Lyons et al., 2001 J.S. Lyons, D.R. Baerger, P. Quigley, J. Erlich and E. Griffin, Mental health service needs of juvenile offenders: A comparison of detention, incarceration, and treatment settings, *Social Policy, Research and Practice* 4 (2001) (2), pp. 69–85. Full Text via CrossRef (13)

Miller et al., 2000 P.M. Miller, D.A. Borchers, J.A. Jenista, C.D. Johnson, N.D. Kaufman and S.E. Levitzky et al., Developmental issues for young children in foster care, *Pediatrics* 106 (2000) (5), pp. 1145–1150. (21)

Minkler, 1999 M. Minkler, Intergenerational homes headed by grandparents: Contexts, realities, and implications for policy, *Journal of Aging Studies* 3 (1999) (2), pp. 199–216.

Minkler & Fuller-Thomson, 2005 M. Minkler and E. Fuller-Thomson, African American grandparents raising grandchildren: A national study using the Census 2000 American Community Survey, *Journal of Gerontology* 60B (2005) (2), pp. S82–S92.

National Institute of Drug Abuse, 2003 National Institute of Drug Abuse, Drug use among racial and ethnic minorities, US Department of Health and Human Services, National Institutes of Health, Washington, DC (2003) (NIH Publication No. 03-3888).

Pruchno, 1999 R. Pruchno, Raising grandchildren: The experience of black and white grandmothers raising children of the crack cocaine epidemic, *Medical Care* 34 (1999), pp. 1072–1084.

Shelton, 2001 D. Shelton, Youthful offenders with emotional disorders, *Journal of Nursing Scholarship* 33 (2001), pp. 259–263. (23)

Simons et al., 1998 R.L. Simons, K.H. Lin and L.C. Gordon, Socialization in the family of origin and male dating violence: A prospective study, *Journal of Marriage and the Family* 60 (1998), pp. 467–478. Full Text via CrossRef (86)

Smith et al., 2004 A. Smith, K. Krisman, A.L. Strozier and M.A. Marley, Breaking through the bars: Exploring the experiences of addicted incarcerated parents whose children are cared for by relatives, *Families in Society* 85 (2004) (2), pp. 187–195. (11)

Snyder, 2000 H.N. Snyder, *Juvenile Justice Bulletin*, U.S. Department of Justice, Office of Justice Program, Office of Juvenile Justice and Delinquency Prevention, Washington, DC (2000).

Szinovacz, 1998 M. Szinovacz, Grandparents today: A demographic profile, *The Gerontologist* 38 (1998), pp. 37–52. (70)

- Templin et al., 2005 A.L. Templin, K.M. Abram, G.M. McClelland, J.J. Washburn and Pikus, Detecting mental disorders in juvenile detainees: Who receives services, *American Journal of Public Health* 95 (2005) (10), pp. 1773–1780.
- U.S. Census Bureau, 2002 U.S. Census Bureau, Grandparents living with own grandchildren under 18 years and responsibility for own grandchildren: Table PCT015 of the Census 2001 Supplementary Survey Available at:<http://factfinder.census.gov/servlet/BasicFactsServlet> (2002).
- Whitley, 2006 D. Whitley, Early intervention support services for grandchildren with developmental delays Paper presented at the meeting of the National Center on Grandparents Raising Grandchildren, Atlanta, GA (2006, May).
- Williams et al., 1997 J. Williams, C. Ayers and M. Arthur, Risk and protective factors in the development of delinquency and conduct disorder. In: M.W. Fraser, Editor, *Risk and resilience in childhood. An ecological perspective*, NASW Press, Washington, DC (1997), pp. 140–170.
- Williams et al., 1999 J.H. Williams, C.D. Ayers, R. Abbott, J.D. Hawkins and R. Catalano, Racial differences in risk factors for delinquency and substance use among adolescents, *Social Work Research* 23 (1999) (4), pp. 241–257.
- Woolfender et al., 2002 S.R. Woolfender, K. Williams and J. Peat, Family and parenting interventions for conduct disorder and delinquency: A meta-analysis of randomized controlled trials, *Archives of Disease in Childhood* 86 (2002), pp. 251–256.