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**ABSTRACT**

While husbands and fathers have attracted the attention of family researchers, grandfathers have received much less attention. This study was conducted to explore meanings associated with grandfatherhood, especially with regard to grandfathers' age and health. Questionnaires and interviews were conducted to examine grandfather-grandchild interaction patterns and the personal meaning of grandfatherhood. Subjects were 106 men between the ages of 40 and 84 years. A modified random-digit telephone dialing procedure was used to contact a random sample of households from which participants were recruited. Kivnik's measure of perceived meaning of grandparenthood was used to obtain information on the personal dimensions of grandfathering. It was found that older grandfathers tended to have less contact with grandchildren than did younger grandfathers. The gender of the grandchild was not a significant predictor of frequency or type of interaction. All five of the grandparenthood meaning factors correlated positively with age, three significantly: reinvolvement, centrality, and indulgence scores were higher for older grandfathers. In addition, the lower a grandfather scored on a self-rated measure of health, the more likely he was to agree that he gave more than he received in relationships with grandchildren. (Author/NB)

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## MEN'S PERCEPTIONS OF GRANDFATHERHOOD

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## ABSTRACT

This questionnaire and interview study of men ages 40-84 (N=106) was designed to examine grandfather-grandchild interaction patterns and the personal meaning of grandfatherhood. A modified random-digit telephone dialing procedure was used to contact a random sample of households from which participants were recruited. Kivnick's measure of perceived meaning of grandparenthood was used to obtain information on the personal dimensions of grandfathering. It was found that older grandfathers tended to have less contact with grandchildren than did younger grandfathers. The gender of the grandchild was not a significant predictor of frequency or type of interaction. All five of the grandparenthood meaning factors correlated positively with age, three significantly: reinvolvement, centrality, and indulgence scores were higher for older grandfathers. In addition, the lower a grandfather scored on a self-rated measure of health, the more likely he was to agree that he gave more than he received in relationships with grandchildren. These and other findings are discussed in the context of current models of family relationships in later life.

A recent review of research on grandfatherhood asked the question, "Do grandfathers really exist?" (Baranowski, 1985). Based on an examination of available empirical studies, the answer appears to be, "just barely." Husbands and fathers have attracted the attention of family researchers and therapists, but grandfathers still largely remain what Hagestad and Speicher (1981) described as "forgotten men" in the family system. In keeping with this theme, a popular magazine article on the new interest in grandparenting was titled, "Bringing Back Grandma," presumably suggesting that we should leave grandpa back where he was, wherever that might be (Footlick & Salholz, 1981). Even the most recent large-scale empirical investigations of grandparenthood have either focused exclusively on grandmothers or have under-sampled grandfathers (Bengtson & Robertson, 1985; Cherlin & Furstenberg, 1986). This is usually justified on the grounds that grandfathers are less willing than grandmothers to participate in research on this topic, and women are more likely than men to maintain extended-family ties and be important "kin keepers" or "lineage bridges" in families (Troll, 1983). In an interview study of working-class grandparent couples in Scotland, Cunningham-Burley (1984) describes the involvement (or lack thereof) of grandfathers with the words "incidental," "peripheral," "distanced," and "invisible." Thus what Hagestad (1985) refers to as the "matrifocal tilt" has led to a relative lack of interest in men's grandparental relationships.

We know, of course, that grandfathers do exist, and there is enough empirical evidence and scholarly speculation to develop the following profile of grandfatherhood:

1. The "norm of non-interference" in the lives of adult children is endorsed by grandfathers and limits their involvement with grandchildren. The highly-involved grandfather who spends a lot of time with grandchildren and is central to their well-being is rare (Cherlin & Furstenberg, 1985; Russell, 1986; Troll, 1980, 1983). Grandfathers are seldom involved as surrogate parents in the direct caretaking of grandchildren (Cunningham-Burley, 1984; Neugarten & Weinstein, 1964).

2. The most important responsibilities men feel as grandfathers have to do with "being there"--helping out, being a source of advice, and providing economic support in times of need and when asked to do so by their adult children (Hagestad, 1985; Russell, 1986). The exercising of these responsibilities is not often called for, and the actual levels of aid and assistance to grandchildren in most families are low (Kivett, 1985). The time of maximum responsibility is usually when grandchildren are young (Thomas, 1986).

3. The most frequent styles of grandfathering are the formal, distant, and fun-seeker styles. The fun-seeker style is more common among younger grandfathers, and the formal style is more common among older grandfathers. It is difficult to determine whether this represents primarily age or cohort effects (Cherlin & Furstenberg, 1985; Neugarten & Weinstein, 1964).

4. Grandfathers typically focus their influence on instrumental areas--getting an education, managing money, etc. They are more interested in "doing" rather than "expressing" in relationships with grandchildren (Cherlin & Furstenberg, 1986; Hagestad & Speicher, 1981).

5. Grandfathers are more likely to feel they can be of help and value to grandsons than to granddaughters, and they orient their influence toward grandsons (Atchley, 1980; Cherlin & Furstenberg, 1986; Hagestad, 1985; Troll, 1983). This is especially true with regard to the relationship with adult grandchildren. Grandfathers are likely to focus their vertical kinship ties on the paternal line, and the relationship with a paternal grandson is most likely to hold importance (Hagestad & Speicher, 1981).

6. Grandparenthood does hold meaning for most men--it is not meaningless, and it does not hold the same meaning for all men (Neugarten & Weinstein, 1964). Kivnick (1985) identified the following empirically-derived dimensions of meaning:

- (a) Centrality--grandparenthood as central to grandparents' lives;
- (b) Valued Elder--passing on tradition and being valued in that capacity;
- (c) Immortality Through Clan--patriarchal or matriarchal responsibility, identification with grandchildren, and family immortality;
- (d) Reinvolvement With Personal Past--grandparents reliving their own earlier lives and identifying with their own grandparents; and
- (e) Indulgence--attitudes of lenience and extravagance toward grandchildren (p. 152).

A man's relationship as a child with his own grandparents, especially a favorite grandparent, makes a major contribution to each of these dimensions of meaning (Kivnick, 1982).

The present study sought to build on this empirical foundation by further exploring meanings associated with grandfatherhood, especially with regard to grandfathers' age and health. While there are several studies that suggest that younger grandparents see grandchildren more often and engage in more activities with them (Johnson, 1985; Thomas, 1986), there is little information about age differences in grandparenthood meaning. Hagestad

and Burton (1986) suggest that the most important aspects of grandparenthood among the old-old are symbolic, i.e., being rather than doing. If this is true it is likely that experiences associated with advancing age may alter the subjective meaning of grandparenthood. This study therefore sought to determine patterns of association between meaning and age among grandfathers.

Age in itself, however, is not an explanatory variable, and the search for age-related correlates of grandparenthood meaning inevitably leads to a consideration of health effects. Troll (1985), noting the need for more information, speculates that deteriorating health may increase the meaning of grandparenthood, especially in regard to centrality and immortality. The present study therefore explored the relationship between health and grandfatherhood meaning. Additionally, the effect of educational attainment was assessed because it is known to influence subjective meaning in many spheres of life.

The concept of the grandparent-grandchild relationship as an exchange of services and information was also examined. Johnson (1985) found that patterns of grandmother-grandchild exchange were markedly asymmetrical; that is, most aid and services flowed from grandmothers to grandchildren. The present study assessed mens' perceptions of grandfatherhood as exchange as well as the factors, including health, that might influence grandfather-grandchild activities that involve exchange.

Finally, gender-related aspects of the grandfather-grandchild relationship were explored. Do grandfathers agree with Atchley's (1980) statement that men feel they can be of more help and value to grandsons than to granddaughters? Are men more likely to have contact with a

grandchild of a particular lineage position? These aspects of intergenerational ties were probed primarily to corroborate the findings on gender and lineage described above.

## METHOD

### Sampling Procedure

A modified random-digit dialing procedure was used to obtain a sample of grandfathers for the study (Frey, 1983). The author contracted with a private research organization, Northeast Research of Orono, Maine, to screen a sufficient number of households in Maine to assure at least 100 subjects to participate in a study of grandfathers. This organization conducts statewide polls of a random sample of households in Maine several times each year, and in this case a "grandfather screen" was included in the telephone survey. The Fall 1984 Cooperative Telephone Survey (CTS) produced completed interviews with one randomly selected adult Maine resident in each of 695 randomly selected year-around homes with a telephone (whether listed or unlisted). The resulting survey data can be used to generalize to all Maine adult citizens living in telephone households with a 95% certainty that the survey results would vary no more than 3.7 percentage points from the figure that would be obtained if all adults had been contacted.

In each household the respondent was asked if a grandfather resided in the home and would be willing to give his telephone number to be contacted about participating in a study about grandfatherhood. In two of the 695 surveyed households the randomly selected adult refused to indicate whether or not there was a grandfather in the household. A total of



196 grandfathers resided in 195 of the successfully screened households, and in 154 cases (78.6%) the random respondent agreed to allow the interviewer to talk to the grandfather and the grandfather gave permission to give his telephone number to the author. Follow-up calls to these 154 "proto-subjects" were made by the author and his research assistant in the month following the initial contact. Of the 154, 135 agreed in a phone conversation to receive and complete the mailed questionnaire. Of the 135 who agreed, 106 returned a usable questionnaire after the initial and follow-up mailing. Although this sample cannot be regarded as a random sample of grandfathers in Maine because of possible differences between those who agreed to participate and those who did not, it is likely to be more representative of the population as a whole than are the samples of convenience or chain referrals often used in research on grandparenthood.

#### Sample Characteristics

Ninety-nine percent of the participants were White, and 94% were married. The age range was 40 to 84 years (mean-62), and the number of years of education ranged from 3 to 20 (mean-12). Forty-one percent were employed full time, 7% part time, 3% were unemployed, and 49% were retired. Twenty-nine percent lived in cities or suburbs, 42% in towns or villages, and 31% in rural areas. Eighty-six percent rated their health as moderately good to very good, and 14% rated it as moderately poor to very poor. The mean number of grandchildren was 4.3, with a mode of 2 and a range of 1 to 18.

## Measures

The questionnaire, pilot-tested in an earlier phase of the project, consisted of questions about demographic characteristics and items regarding the following:

1. Grandparenthood meaning--A shortened version of a Likert-type measure of perceived meaning of grandparenthood developed by Kivnick (1982, 1983) was used. Factor analysis and reliability testing produced the five dimensions of grandparenthood meaning described above and resulted in an instrument consisting of 53 items. However, when this instrument was used in the pilot study of the present research project, problems arose due to the length of the survey. Respondents complained of repetition in the items, and perseveration of responses (usually involving the middle or neutral choice) was common in the last third of the measure. Therefore the instrument was shortened to 31 items for the present study by retaining those within each factor that had the highest part-whole correlations as reported by Kivnick (1983). Analysis of the shortened scales in the present study using Cronbach's alpha measure of internal consistency yielded values of .664 to .890, with three of the scales yielding scores of more than .800. These, as well as correlations between factors, were comparable to values reported by Kivnick for the longer measure.

2. Information about grandchildren--Age, sex, lineage, frequency and location of contact with the grandchild seen most often during the last year were assessed. Also included were several Likert-type questions asking respondents for opinions on selected aspects of grandparent-grandchild relationships.

3. Grandfather-grandchild activities-- A checklist of activities the respondent had engaged in with the grandchild during the most recent visit was provided. Activities deemed appropriate for this list were collected from previous studies and from the pilot study for this research.

In addition to the survey information, follow-up open-ended interviews were conducted with a 15% random sample (N=16) of the respondents in order to acquire more detailed information and probe for reasons for particular patterns determined by questionnaire analysis. Converse and Presser (1986) suggest this as an efficient way of combining advantages of both open and closed questions and a method of revealing flaws in "overly intellectual" questionnaire items.

## RESULTS

As shown in Table 1, there was an approximately equal number of grandchildren in each of the four lineage positions for this sample of grandfathers. The grandchild seen most often during the last year was about equally distributed across the positions except for the paternal granddaughter, who was underrepresented. The age of the grandchild seen most often ranged from 1 to 34 years with a mean of 7.8 years.

Respondents most often lived within one hour's driving distance of the selected grandchild, and frequency of interaction varied widely, from every day to 1 to 3 times per year (Table 2). Typical of results of kinship contact studies, frequency of interaction was highly correlated with geographic proximity ( $r = .76, p < .001$ ). The older the selected grandchild, the less often he/she was seen ( $r = -.32, p < .01$  controlling for grandfather's age). However, age of grandfather was not significantly related to visitation frequency

( $r = -.12$  controlling for grandchild's age). The location of the most recent interaction was the grandparents' home (68%), with the grandchild's home a distant second (24%).

As can be seen in Table 3, meaning of grandparenthood scale scores did not correlate significantly with frequency of contact, but all of the correlations are positive indicating a weak connection between greater meaning and more frequent interaction. All five of the meaning factors were positively correlated with age, three significantly: reinvolvement with personal past ( $r = .43$ ,  $p < .001$ ), centrality ( $r = .32$ ,  $p < .01$ ), and indulgence ( $r = .31$ ,  $p < .01$ ). That is, being older was predictive of greater grandparenthood meaning, especially in terms of reinvolvement with the past. Immortality through clan ( $r = -.24$ ,  $p < .05$ ) and indulgence ( $r = -.23$ ,  $p < .05$ ) scores were significantly lower for those with higher levels of education, and poorer health was predictive of significantly higher immortality through clan scores ( $r = -.32$ ,  $p < .01$ ). It also should be noted that age and self-rated health were not significantly correlated ( $r = -.08$ ) in this study. In addition, all significant zero-order correlations in this table retained their level of significance when the effects of the other variables were partialled out.

The effect of employment status on grandparenthood meaning was explored by creating two categories, employed (including full and part time, coded 1) and not employed (including unemployed and retired, coded 0). Zero-order point-biserial correlations between employment status and the reinvolvement, centrality, and indulgence factors were significant, with the retired group scoring higher. However, not surprisingly, grandfathers' age and employment status were highly correlated ( $r = .66$ ,  $p < .001$ ). When the

effects of age were controlled for, none of correlations between employment status and meaning dimensions were significant at the .05 level.

In order to examine the connection between meaning and age more closely, the sample was divided into four age groups: 40-49, 50-59, 60-69, and 70-84. A one-way analysis of variance was performed with each meaning factor as the dependent variable and age as the independent variable, and the Duncan post-hoc procedure was used to examine the differences between age groups when the F value was significant. For the reinvolvement with personal past scale, the oldest group scored significantly higher than the other three age groups ( $F(3,102)=6.41, p<.001$ ). For the centrality dimension, the youngest group scored significantly lower than the three older groups ( $F(3,102)=3.99, p<.01$ ). For the indulgence dimension, the oldest group scored significantly higher than the youngest ( $F(3,102)=2.75, p<.05$ ).

Table 4 reveals that there was more disagreement than agreement with the item, "As a grandparent, I give more to my grandchildren than I get in return." Respondents who were more likely to agree with this statement had significantly poorer health ( $r=-.48, p<.001$ ), had a lower educational level ( $r=-.27, p<.01$ ), selected an older grandchild as the one seen most often ( $r=-.35, p<.001$ ), and saw that grandchild less often ( $r=-.21, p<.05$ ). Grandfathers' age was not significantly correlated with the response to this statement ( $r=.16$ ).

Further examination of connection between self-rating of health and the response to this exchange statement was conducted using the chi-square measure (Table 5). Response to the statement was collapsed into three categories: agree, undecided, disagree. Because of the small number of

respondents indicating less than moderately good health, the moderately poor, poor, and very poor health categories were collapsed into one. As Table 5 indicates, those who describe their health as good or very good overwhelmingly disagree with the statement. However, the direction of the distribution changes with the moderately good category, and those in moderately poor to very poor health were most likely to agree that they gave more than they received (chi-square(6)-38.80,  $p < .001$ ).

The activities engaged in by grandfather-grandchild dyads were also examined to determine if health influenced their likelihood of occurrence. Three pairs of activities were selected for this analysis because they were particularly useful in determining the direction of orientation of activity toward either the grandfather or grandchild. Table 6 indicates that conversation and gift-giving were more often about the grandchild rather than grandfather. Conversation most often centered around what the grandchild had done and what the grandchild's future plans were, and gifts were given to the grandchild far more often than they were received from the grandchild. All activities examined here were more likely to have occurred if the grandfather was in poor health. Poor health was especially likely to increase the likelihood of activities oriented toward the grandchild's world.

Finally, there was more disagreement (53%) than agreement (22% with the statement, "I feel I can be of more help and value to grandsons than to granddaughters." A substantial proportion (26%) were undecided, and a majority of these respondents had either only one grandchild or had grandchildren all of whom were the same sex. Older grandfathers were somewhat more likely to agree with the statement ( $r = .23$ ,  $p < .05$ ).

## DISCUSSION

Cherlin and Furstenberg (1986) point out that grandparenthood may be thought of as a "career" characterized by different role performance at different ages and stages. The results of the present study suggest that grandparenthood meaning is also likely to be different for older as compared to middle aged men, with higher scores on reinvolvement with personal past, centrality, and indulgence dimensions characteristic of advanced age. Other studies typically have found a decrease in grandparenthood role activity with age, but in the present study this is a function of grandchildren's age rather than grandfathers' age. In either case, we are left with the conclusion that older men typically don't do more grandparenting, but they are more likely to attribute meaning to whatever grandfatherhood represents.

Hagestad and Burton (1986) contend that the most important societal functions of grandparents may be symbolic; the present study suggests that for older grandfathers, the most important functions of grandchildren may also be symbolic. This theme was reflected in the comments of a 78-year-old man in the interview portion of our study:

Well, I don't really see the grandkids quite as much as I used to, but somehow it means more to me now. I used to pretty much take it all for granted. In fact I think I probably thought all this family stuff was silly. If you'd have asked me all these questions 25 years ago I probably would have run you off with a gun and told you to stop wasting the taxpayers' money! But it was odd--when I filled out your survey I kept saying to myself, "Yes, that's it! That's exactly what it means!" And you don't even have to see the grandkids. It's just knowing that they're there.

If it is true, as Hagestad (1985) claims, that "being here" is the primary post-industrial value of grandparents, it appears that a similar



"knowing they're there" is the primary value of grandchildren to older grandfathers. Whether or not this is cohort-specific cannot be determined because of the cross-sectional nature of the study.

Scores on the reinvolvement with personal past dimension showed the strongest relationship with age, with the effect being due primarily to the higher scores of the oldest group (70 years and older) compared to the three younger groups. According to Kivnick (1983), this dimension represents grandparenthood as a link to one's family past--remembering one's own grandparents and re-living one's childhood and young adult experiences. Kastenbaum (1979) suggests that with advancing age, ways of using the past, or "retrospective modalities" such as replaying and the life review, become more salient and important for happiness and adjustment as one approaches the inevitability of death. The results of this study suggest that reinvolvement with personal past is likely to be the contribution that grandfatherhood makes to reviewing one's life and putting the stamp of validation on one's family history, especially for older grandfathers.

The pattern of age effects is somewhat different for the centrality dimension. In this case it is the youngest group--grandfathers in their 40s--that had a significantly lower mean score than the three older groups. Johnson (1985) noted that younger grandmothers were more likely than older grandmothers to have commitments that competed with grandparenting activity. Young grandfathers in the present study suggested a similar reason for grandfatherhood not being central to their lives--there were "too many other things going on" and many other sources of meaning in life, leaving less room for grandfatherhood-derived meaning. The interviews also confirm that one's 40s were considered by some in our sample as being



"too early" for grandfatherhood to be central to one's life. Neugarten and Neugarten (1986) point out that people have internalized social clocks that provide them with an "ought-to-be" time for life events and urge them to compare themselves with others their age to determine how well they're doing. Troll (1985) and Hagestad and Burton (1986) also have noted the significance of "on time" and the "right time" for satisfaction in the grandparent role. The present study suggests that there is also an "on time" for grandfatherhood meaning, and a man's 40s are likely to be thought too early for centrality.

With respect to the influence of health on meaning, the only significant correlation was with the immortality through clan dimension-- those who rated their health as being poorer tended to score higher on the immortality factor. Troll (1985) notes that most studies require us to infer the effects of health on grandparenting from the probability that poor health increases with age. However, the self-ratings of health, no doubt subjective and colored with a "for my age" interpretation, did not correlate significantly with grandfathers' age in this study, nor did age correlate significantly with immortality scores. For men in this sample it is declining health rather than advanced age that is likely to increase the salience of family continuity and the idea of "living on" through one's family after death that are characteristic of the immortality dimension.

This study found a reasonably strong connection between lower ratings of health and agreement with the statement, "As a grandparent, I give more to my grandchildren than I get in return." One explanation for this might be that grandfathers in poor health actually do "get less" from grandchildren. If we strip grandparenthood of its nostalgia, it is probably

true that an older man in poor health is not likely to be high on a grandchild's list of favorite companions. However, in this study, health did not correlate significantly with frequency of contact with grandchildren. Further, conversations between grandfather and grandchild and giving of gifts in both directions were more likely to occur in the poor health group. What appears to be happening is that poor health increases activity directed toward the welfare of grandchildren more than it increases activity oriented toward the welfare of grandfathers. Thus perhaps the exchange does become more asymmetrical, not because grandchildren give less but because grandfathers give more. Also, what grandchildren give, being largely symbolic, is not likely to compensate for the what poor health takes away-- grandchildren do not have an exchange currency that solves the problems of a grandfather's serious ill health. One of our interviewees, a 62-year-old man who rated his health as very poor and strongly agreed that he gave more than he received, said:

I've had the bad arthritis and now I've got a little of the cancer, too. I don't know how much longer I'll be around, so I've been giving my grandson something of mine or a little money each time my daughter brings him around. We talk, you know, but there's not much he can do, is there? He can't take the cancer away, he can't give me good legs, and he don't pay the bills. But I like the boy. He talks to me and he does stuff around the yard for me.

Why the general disagreement with the exchange statement given the asymmetry of activity orientation during grandfather-grandchild visits found in this study? It is possible that the types of grandfather-grandchild activities focused on, talking and gift-giving ( or what one of our interviewees referred to as "gabbing and trinkets"), are not those that grandfathers see as important areas of exchange, especially with grandsons.

It is also probable that, as one grandfather put it, "the getting is in the giving." Conversations about grandchildren and giving gifts to grandchildren are not simply acts of giving but acts of receiving as well, which is especially true if grandfathers experience the role vicariously. In other words, there is some evidence that many of the grandfathers in this study see the process of exchange as involving the giving of tangibles and the receiving of intangibles, a process not tapped with this study's measures.

Finally, while the sampling procedure allowed us access to grandfathers with a wide variety of backgrounds and experiences, generalizability is limited by the nature of those who participated. For example, none of the grandfathers in this study was institutionalized, and therefore these findings may not be applicable to men in nursing facilities or other non-home settings. Also, being a characteristically Maine sample, our group was largely White and had a smaller percentage of urban residents than the nation as a whole. Therefore caution should be exercised in attempting to apply these results to large non-White urban populations, where the aspects of meaning and exchange are likely to be influenced by other important subcultural dynamics.

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**Table 1. Number of Grandchildren and Lineage of Grandchild Seen Most Often**

<b>Lineage</b>	<b>Number of Grandchildren</b>	<b>Lineage of Grandchild Seen Most Often (N)</b>
<b>Maternal Grandsons</b>	<b>115</b>	<b>26</b>
<b>Maternal Granddaughters</b>	<b>111</b>	<b>27</b>
<b>Paternal Grandsons</b>	<b>117</b>	<b>28</b>
<b>Paternal Granddaughters</b>	<b>114</b>	<b>18</b>

**Table 2. Geographic Proximity and Frequency of Contact with Grandchild Seen Most Often During the Last Year**

	N	%
<b><u>Proximity</u></b>		
Same house	4	4
Walking distance	16	15
Less than one hour by car	49	48
1 to 5 hours by car	17	16
5 to 10 hours by car	9	9
More than 10 hours by car	8	8
No Response	3	
<b><u>Frequency of Contact During Last Year</u></b>		
Every day	22	21
Once or twice a week	31	30
1 to 3 times per month	24	23
1 to 3 times per year	26	25
No Response	3	



**Table 3. Correlations of Grandparenthood Meaning Dimensions with Selected Variables**

Meaning Dimension	How Often	G'father's Age	Education	Health
Valued Elder	.17	.07	.09	.02
Immortality	.18	.16	-.24*	-.32**
Reinvolvement	.05	.43***	-.14	-.12
Centrality	.18	.32**	-.16	-.10
Indulgence	.11	.31**	-.23*	-.04

\*  $p < .05$

\*\*  $p < .01$

\*\*\*  $p < .001$

Two-tailed tests

**Table 4. Distribution of responses to the exchange statement, "As a grandparent, I give more to my grandchildren than I get in return."**

<b>Response</b>	<b>N</b>	<b>%</b>
<b>Strongly Agree</b>	<b>9</b>	<b>9</b>
<b>Agree</b>	<b>20</b>	<b>19</b>
<b>Undecided</b>	<b>25</b>	<b>24</b>
<b>Disagree</b>	<b>36</b>	<b>34</b>
<b>Strongly Disagree</b>	<b>16</b>	<b>15</b>

**Table 5. Crosstabulation of Grandfather's Health with Response to Exchange Statement**

	EXCHANGE STATEMENT		
	Agree	Undecided	Disagree
<b>HEALTH</b>			
Very Good	5	3	19
Good	2	15	26
Mod. Good	12	4	5
Mod. to Very Poor	10	3	2

Chi-square=38.80 df=6 p<.001

**Table 6. Percent of Grandfathers Engaging in Specified Activity with Grandchild During Last Visit, by Grandfathers' Health**

ACTIVITY	HEALTH	
	Good (N=91)	Poor (N=15)
Talked about what grandchild had done recently.	45	60
Talked about what grandfather had done recently.	23	27
Talked about grandchild's future plans.	13	28
Talked about grandfather's future plans.	2	7
Gave grandchild a gift.	37	62
Received a gift from grandchild.	14	27