A Conceptual Pathways Model to Promote Positive Youth Development in Children Raised by Their Grandparents

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The numbers of children raised by their grandparents are increasing. These alternate families often emerge following negative life events that result in high risk for adverse child outcomes. Modifications in the traditional roles and relationships of grandparent and child may exacerbate stressors experienced by both parties. The phenomenon has implications for professionals working with these children because these families are increasing in prevalence and research suggests students’ success in school depends on both the home and school environments. Preventing problem behaviors associated with these children’s positive developmental trajectories entail understanding the family members’ unique needs and risks and identifying and accentuating their strengths, supports, and resources. In this paper, (a) the phenomenon of children raised by grandparents is reviewed, (b) positive youth development is advanced as a viable theoretical and applied developmental science framework to understand the children, and (c) a conceptual pathways model is described that can be used to promote their favorable school and life outcomes.

Keywords: children raised by grandparents, positive youth development, applied developmental science, prevention science

The numbers of families in which grandparents are raising their grandchildren are increasing (Hayslip & Kaminski, 2005, 2006; Strom & Strom, 2000). Although the children are said to manifest markers associated with risk for adverse school and life outcomes (Hayslip & Kaminski, 2006), these families can be positive alternatives when parents are unwilling or unable to care for their children (Poehlmann, 2003). Grandparents often provide a more loving and stable environment than foster care and pathogenic parental homes (Hayslip & Kaminski, 2005; Strom & Strom, 2000). Numerous grandparents appreciate the opportunity to help their grandchildren mature successfully into adulthood (Dolbin-MacNab & Targ, 2003). Notwithstanding their grandparents’ optimism, warmth, and caring, many children raised by their grandparents experience unfavorable developmental trajectories and adverse home and school outcomes, often as a function of the context in which these families emerge (Edwards, 2006; Edwards & Ray, 2008; Poehlmann, 2003).

The increasing numbers of these children have implications for school psychologists and other professionals who work with the children because research suggests students’ success in school depends on contextual variables associated with the student, as well as with their home and school environments (Baker, 1999; Baker, Dilly, Aupperlee, & Patil, 2003). Preventing problem behaviors associated with the emergence of these families and promoting the children’s positive developmental trajectories entail understanding the family members’ unique needs and risks and identifying and accentuating their strengths, supports, and resources. In this paper, (a) the phenomenon of children raised by grandparents is reviewed, (b) positive youth development is advanced as a viable theoretical and applied developmental science framework to understand the children, and (c) a conceptual pathways model is described that can be used to promote their favorable school and life outcomes.
Prevalence and Significance

From 1990 to 2003, the United States experienced an approximately 30% increase in the number of children raised by their grandparents (Hayslip & Kaminski, 2005). It is estimated that currently more than 4.4 million children live in households maintained by their grandparents (Hayslip & Kaminski, 2005; U.S. Bureau of the Census, 2003). The contextual variables that give rise to these families are often considered rather negative. For example, when parents die, divorce, become unemployed, or bare children at an early age, their children frequently become the responsibility of grandparents (Hayslip & Kaminski, 2005; Glass & Huneycutt, 2002a). Parents who abuse drugs and other similar substances may physically and sexually abuse or neglect their children (Glass & Huneycutt, 2002a). In cases of abuse or neglect, government social service agencies often remove children from their parental homes and place them with relatives—frequently the children’s grandparents (Dolbin-MacNab & Targ, 2003; Glass & Huneycutt, 2002b).

Despite the negative life events noted above, many grandparents are willing to raise their grandchildren because of their close biological connection and opportunity to perpetuate their family lineage (Minkler & Fuller-Thomson, 1999). Helping their children and grandchildren adds additional meaning and purpose to the grandparents’ lives (Dolbin-MacNab & Targ, 2003; Glass & Huneycutt, 2002b). These grandparents may engage in positive parenting practices that moderate the effects of stress and enhance the children’s functioning (Hayslip & Kaminski, 2005). Nonetheless, the negative life events that frequently lead to the emergence of this alternate family structure may exacerbate stressors experienced by children and custodial grandparents (Poehlmann, 2003; Minkler & Fuller-Thomson, 1999; Kelley, Yorker, Whitley, & Sipe, 2001).

Custodial Grandparents

A custodial grandparent is a surrogate parent who assumes the role of their grandchild’s primary caregiver. One of the child’s parents may continue to live in the home, but that parent, officially or unofficially, relinquishes custody of the child to the grandparent (Edwards, 1998). Thus, custodial grandparents may be legal guardians or merely members of the extended family with responsibility for raising the child. Custodial grandparents are found across the spectrum of society. They enter the surrogate parenting role at different ages and from various socioeconomic levels, religious backgrounds, and ethnic groups (Minkler & Fuller-Thomson, 1999). Although single custodial grandparent households are dominant, several different family structures comprise these households (Glass & Huneycutt, 2002b). In approximately 34% of these families, both grandparents and one parent live in the home. More than 28% of the time, grandmothers raise their grandchildren without at least one parent living in the home. In 17% of these families, both grandparents live in the home without the children’s parents. Approximately 14% of the time, grandmothers raise their grandchildren without either of the children’s parents living in the home. Finally, nearly 6% of custodial grandfathers raise their grandchildren without a spouse or the children’s parents living in the home (Glass & Huneycutt, 2002b). More than 50% of custodial grandparents are between the ages of 55 and 64, and almost 20% are over the age of 65 (Hayslip & Kaminski, 2005).

Although some custodial grandparents are positively affected by their second chance at parenting, many custodial grandparents are jeopardically impacted by their encore parenting responsibility (Minkler & Fuller-Thomson, 1999; Strom & Strom, 2000). These custodial grandparents do not expect to spend their later years caring for young children (Strom & Strom, 2000). They may struggle with role conflict because rather than relaxing during retirement, participating in hobbies, volunteering, or traveling, they face a return to parenting roles such as toilet training, disciplining, helping with homework, communicating with teachers, and encouraging youngsters to learn and to live well in a fast-paced, technology- and information-driven world (Hayslip & Kaminski, 2005). Contemporary culture may be quite different from the culture and society in which the majority of custodial grandparents were raised or perhaps different from the culture in which they raised their own children.

Research indicates some custodial grandparents believe their freedom has been usurped and these grandparents do not desire and are unprepared for this often unexpected return to a pri-
mary child caregiver role (Dolbin-MacNab & Targ, 2003; Strom & Strom, 2000). Additional research suggests custodial grandparents can become overwhelmed, anxious, or depressed because of the daunting role of raising young children (Kelley et al., 2001; Landry-Meyer, 2005). They may experience feelings of anger at their own children for allowing negative life circumstances such as drug abuse and child abuse to adversely influence their children and grandchildren’s lives and intrude on the grandparents’ later years (Edwards, 2003). Custodial grandparents may also be grieving if their children are deceased. Taken together, these emotions and challenging circumstances may negatively affect the grandparents’ physical and psychosocial well-being and their ability to raise children who will succeed in school and life (Edwards, 2003; Harrison, Richman, & Vittimberga, 2000; Landry-Meyer, 2005).

Functioning of Children Raised by Grandparents

Qualitative and anecdotal data suggest children raised by their grandparents may experience feelings of confusion due to their parents’ unfavorable life circumstances and the conditions that predate changes in caregiver arrangement (Edwards, 2003). Some of these children are abused, neglected, or have experienced little sense of stability (Takas, 1995). They struggle with anxiety, depression, and insecurity because the persons who are supposed to care for them are unable to provide sensitive and nurturing caregiving, either by choice or accident (Edwards, 2009; Glass & Huneycutt, 2002a). Consequently, many of children raised by their grandparents experience difficulty establishing trusting, connected relationships with caregivers, teachers, and peers (Edwards, 2003; Edwards & Ray, 2008; Poehlmann, 2003).

Quantitative Research Findings

Unfortunately, a paucity of quantitative research examines the functioning of children raised by their grandparents. The extant research suggests the children experience social-emotional and school-related difficulties (Edwards, 2006; Smith & Palmieri, 2007; Solomon & Marx, 1995). In a recent large-scale study of children raised by grandparents, researchers used the 2001 National Health Interview Survey (NHIS) to obtain data from caregivers concerning 9,878 children and data from grandmothers of 733 grandchildren recruited from 48 states (Smith & Palmieri, 2007). The study was designed to examine risk of emotional and behavioral difficulties of children raised by grandparents compared to children in the NHIS sample who were living with their parents. Both groups of caregivers completed the Strengths and Difficulties Questionnaire (SDQ, Goodman, 1997). The SDQ is a psychometrically strong measure of emotional and behavioral functioning and it differentiates children with and without psychopathology (Smith & Palmieri, 2007). The results indicate that on all SDQ scales, children raised by grandparents were rated as experiencing significantly greater difficulties than children raised by parents. That is, the grandchildren were perceived as manifesting more emotional, behavioral, hyperactivity/inattention, and peer problems, as well as fewer prosocial behaviors than the comparison group (Smith & Palmieri, 2007).

In an earlier empirical investigation of children raised by their grandparents (Edwards, 2006), the researcher used a sample of 54 African American elementary school students being raised by one or two grandparents and a comparison group of 54 elementary school students living with one or two biological parents. The researcher administered the norm-referenced the Child Behavior Checklist: Teacher Report Form (TRF, Achenbach, 1991) to measure the emotional and behavioral functioning of the children. The study group was contrasted to a comparison group and the normative group. Results from this study suggest teachers perceive children raised by their grandparents as experiencing significantly more internalizing and externalizing problems than their peers (Edwards, 2006).

In an even earlier study that used data from the 1988 NHIS sample, researchers compared children raised by their grandparents (n = 448) to children living with both biological parents (10,086) and children living with one biological parents (n = 5,646) (Solomon & Marx, 1995). The findings did not indicate differences with respect to the children’s social-emotional and behavioral functioning. However, children raised by grandparents experienced signifi-
cantly less academic success than children living with both biological parents. Children living with one biological parent experienced similar academic success as children raised by their grandparents.

Additional data from the Solomon and Marx (1995) study suggest the age of custodial grandparents may influence the child’s academic functioning and development. It is likely younger grandparents have more energy to engage in typical parenting activities. In addition, they may be more aware of contemporary culture and thus are better able to moderate problems associated with generational differences. However, custodial grandparents younger than 50 years of age may experience more challenges raising grandchildren than older custodial grandparents. The aforementioned statement is supported by the researchers’ finding that children raised by older grandmothers performed better academically than children raised by younger grandmothers (Solomon & Marx, 1995). The researchers hypothesized that younger grandmothers may have experienced problems with role timing due to their early entrance into the grandparenting role and were less inclined to provide the necessary educational and emotional support to their grandchildren.

Taken together, these three studies indicate both grandparents and teachers perceive the children as experiencing emotional, behavioral, and educational difficulty. However, the findings do not specify that the problems occur primarily as a functioning of grandparents’ parenting. In all likelihood it is the combination of negative early life events, caregiving, and adverse contextual conditions that contribute to the children’s difficult functioning (Edwards & Ray, 2008; Harrison et al., 2000).

Positive Child Outcomes

Although a substantial number of children raised by their grandparents experience diminished social, behavioral, and academic functioning, many children in these families achieve favorable outcomes (Edwards, 2006; Edwards & Ray, 2008). Positive child outcomes are particularly associated with access to contextual resources such as caring and willing custodial grandparents, a family support network (e.g., aunts and uncles), and community support resources (e.g., involvement in a Boys and Girls Club). Additional important supports include academic environments that provide primary prevention resources such as low student-to-teacher ratios, training in effective interpersonal and coping skills, and access to school-based mental health professionals (Edwards, 2003; Edwards & Ray, 2008; Kelley et al., 2001). These contextual supports are associated with positive youth development (PYD), an emerging prevention science model that encourages ready access to supports and services in schools, homes, and communities in order to promote favorable school functioning and life outcomes for all children, and in particular, children who experience negative early life events.

A keyword search of PYD in PsycInfo reveals more than 190 scholarly articles that address the theory, but only two such articles (Edwards, Mumford, & Serra-Roldan, 2007; Buckley, Storino, & Saarni, 2003) were found among school psychology journals. None of the articles addresses the implications of PYD for children raised by grandparents. In light of the increasing numbers of children raised by grandparents and PYD’s emergence as an important positive theoretical framework, school psychologists can benefit from the delineation of a PYD model that facilitates better understanding of the developmental trajectories of these children. Such a model provides a conceptual lens to help school psychologists design prevention and intervention approaches and promote healthy development, not only for children raised by grandparents, but for all children.

Positive Youth Development

PYD consists of contemporary scholarship that seeks to proactively promote the healthy development of youth instead of reactively attempting to protect them from risk and challenges (Damon, 2004). Similar to all paradigm transitions in psychology, PYD originated from multiple earlier psychological perspectives (Lerner, Almerigi, Theokas, & Lerner, 2005). It is rooted in research in comparative psychology that identified the potential for systematic change or plasticity along a child’s developmental trajectory. It is also has roots in research in developmental psychology that documents the potential to optimize individual well-being by varying reciprocal relationships between...
persons and their contextual ecologies to take advantage of plasticity (Lerner, Almerigi et al., 2005).

PYD extends our knowledgebase because it does not merely attempt to predict, prevent, or help youth prevail over challenges, but as a “new paradigm” (Theokas et al., 2005, p. 114), it aligns youth’s strengths with resources and ecological supports to maximize healthy developmental trajectories. Youth are viewed as resources that can be developed, instead as challenges that must be managed (Theokas et al., 2005). PYD models acknowledge the existence of adversity, risk, and developmental challenges that impact children differentially, but the developmental process is not largely centered on overcoming adversity and risk (Damon, 2004). PYD differs from traditional psychological approaches that often emphasize problems and disorders experienced by youth such as learning disabilities, attention deficit hyperactivity disorder, conduct disorder, low motivation, and delinquency (Damon, 2004). Traditional, problem-focused orientations emerged from medical or deficit-reduction models and require that a disease entity or deficits be identified before interventions are attempted (Lerner et al., 2005). That is, children must first manifest symptoms or deficits, and their symptoms must be treated, reduced, or removed in order for the children to be considered healthy (Kamphaus & Frick, 2005).

Problem-focused models are reactive and often considered ineffective because they tend to highlight risk behaviors and frequently generate time-consuming interventions that require the child to fail, show resistance to intervention, or experience an undesirable psychosocial outcome to receive services (Belsito, Ryan, & Brophy, 2005). In contrast, a model such as PYD that emphasizes prosocial behaviors necessary for good mental health and successful functioning in peer groups, schools, and communities is considered systemic, proactive, and beneficial to healthy child outcomes (Lerner et al., 2005).

PYD and Children Raised by Grandparents

Although PYD is beneficial to all children because it accentuates each child’s positive characteristics, including identifiable talents, strengths, interests, and contextual resources to foster favorable psychosocial and educational functioning (Damon, 2004), it is particularly advantageous to children raised by grandparents. It makes a significant contribution to our understanding of all children raised by their grandparents because it is based on a perspective that recognizes that although these children are often at high risk to experience difficult life and school functioning, their developmental trajectory need not emphasize overcoming deficits and risks (Damon, 2004). Due to developmental plasticity, children raised by grandparents are able to experience positive changes along their developmental trajectories. That is, in spite of the unique characteristics of their negative early life events and vulnerability to risk, all children raised by grandparents have positive characteristics that offer opportunities for successful life outcomes.

Promoting the children’s prosocial behaviors, preventing risk, and advancing successful outcomes necessitate considering the family, peers, school, and community systems in a child’s life, the interactions among the systems, and the creation of healthy environments that meet and appropriately challenge children’s psychosocial developmental needs (Baker et al., 2003). Creating these environments is the responsibility of the child and multiple combinations of caregivers, educators, mental health practitioners, and community members (Edwards et al., 2007). Rather than merely building resilience, applying these developmental resources in a proactive and integrated manner is an ecologically effective method of promoting positive school and life trajectories for students normally considered at-risk such as children raised by grandparents (Benson, 2003).

Resilience Compared to PYD

Resilience is a characteristic of persons that allow them to achieve life success despite encountering multiple negative life events (see Garmezy, 1983). Resilience, as a psychological construct, emerged from Norman Garmezy’s (1983) work with persons who demonstrated resistance to life’s most severe stressors (Damon, 2004). Resilience describes characteristics many children use to thrive despite experiencing disadvantages (such as abrupt separation from parents early in life) that make other children vulnerable to adverse outcomes
Garmezy’s notion of the “invulnerable” child emphasized the strengths of young people, and thus resilience foreshadowed PYD (Benson, 2003). Despite its benefits, resilience presupposes a background of problems and pathology that must be overcome via multiple protective factors. This emphasis on problems and pathology that must be treated is considered a deficit-driven developmental model (Benson, 2003). Resilience models suggest personal strength emerges as a response to adverse life events rather than a normal developmental adaptation to challenges that many persons may consider opportunities rather than risks (Damon, 2004). These models involve the implementation of specific intervention strategies to moderate risk during child development (Damon, 2004).

Although PYD builds on resilience models, it is a new model that focuses on the strengths, resources, and positive experiences of youth and communities (Sesma, Mannes, & Scales, 2005). It differs from resilience because it offers new ways of conceptualizing, identifying, measuring, and promoting optimal outcomes for youth (Eccles & Gootman, 2002). Whereas PYD proactively promotes youth well-being, resilience emphasizes intervention efforts to interrupt and attenuate processes leading to specific problem behaviors (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2004). PYD gained international prominence when scholars in prevention science began to develop consensus that a successful developmental trajectory “requires more than avoiding drugs, violence, school failure, or precocious sexual activity. The promotion of children’s social, emotional, behavioral, and cognitive development began to be seen as key to preventing problem behaviors themselves” (Catalano et al., 2004, p. 100).

Attenuating youth risk behaviors is not equivalent to taking steps to promote positive youth development. Moreover, projects or systems that are shown to moderate youth problems do not automatically prepare youth to contribute meaningfully to society (Damon, 2004; Lerner, Fisher, & Weinberg, 2000). Engaging children in productive activities, educating them regarding prosocial behavior, maintaining high expectations, and connecting them with caring adults and peers who strive to understand them are more effective proactive strategies to advance favorable outcomes than treating, moderating, or remediating intellectual, academic, and psychosocial “disorders and deficiencies” (Damon, 2004). PYD models engage children in productive activities and specify that young people who are able to experience mutually beneficial relations with the people and institutions of their environments, will contribute positively to self, family, school, and community (Lerner et al., 2005). These young people will likely experience positive school, career, and life outcomes.

The Five Cs and Children Raised by Grandparents

Determining which variables positively influence the children’s developmental trajectories and their life and school-related outcomes has important implications for the promotion of successful outcomes (Benson, 2003). Positive development of youth can be proactively advanced via the fostering of five factors often called the Five Cs of PYD—competence, confidence, character, connection, and caring/compassion (Lerner, 2004). Competence references young people’s positive perspective regarding their abilities in several domain-specific areas (e.g., social, academic, cognitive, and vocational). Confidence, rather than referring to domain-specific beliefs, refers to a young person’s positive beliefs regarding her or his overall self-worth and self-efficacy. Character means the young person’s knowledge of societal mores, respect for societal and cultural norms, adherence to standards for acceptable behaviors, and sense of integrity. Connection is when young people form positive bonds with social and environmental networks that result in constructive bidirectional exchanges in which all parties contribute to the relationship. Caring and compassion references the young person’s capacity to express sympathy and empathy for others (Lerner, 2004; and Lerner et al., 2005). When these Five Cs are present in youth across time, Lerner and his collaborators believe it will ultimately lead to a sixth C—contribution. Contribution refers to a young person’s participation in productive activities that contribute positively to self, family, community, and finally civil society (Lerner et al., 2005).

Relatively recent research supports the theoretical framework and foundational components...
of PYD and the Five Cs (Benson, 2003; Eccles & Gootman, 2002; Theokas & Lerner, 2006). These bellwether studies have identified critical elements of social contexts central to PYD and the Five Cs. A seminal series of studies in particular will be addressed.

Research support for the utility of the Five Cs has emerged from a national longitudinal study labeled the 4-H Positive Youth Development Studies (Institute for Applied Research in Youth Development, 2007). The series of longitudinal studies began in 2002–2003 by examining a cohort of approximately 1,700 fifth grade students and their parents from 13 states in different regions in the United States. The studies have reached the fourth stage and involve approximately 3,500 youth from over 25 states and more than 1,500 of their parents. The studies are designed to test the Five Cs model of PYD and to examine the key characteristics of healthy, positive youth development through the adolescent years. Findings from the studies reveal the Five Cs exist as latent constructs accounting for several desirable outcomes such as academic, social, and vocational competence. PYD was additionally found to correlate positively with the Sixth C—youth contribution.

The 4-H studies also describe a replicable community youth development programming model (e.g., adult role models and mentors, youth participation and leadership, and life skills development) that promotes PYD (The 4-H Study of Positive Youth Development, 2007). Taken together, findings from the longitudinal series of studies suggest perceived and observed developmental supports and resources are predictive of positive developmental outcomes, both substantively and methodologically. In addition, the supports and resources are useful because they can be practically applied in multiple settings and with diverse youth (Lerner, 2004; Lerner et al., 2005; Lerner, Dowling, & Anderson, 2003; Theokas et al., 2005; Theokas & Lerner, 2006).

In circumstances in which children are raised by grandparents, discontinuity between children and parents as a result of negative early life events will likely diminish the children’s access to supports, resources, and the Five Cs and, concomitantly, their overall functioning. For example, the connections children make early in life with their parents and peers influence their development trajectory (Belsky & Fearon, 2002). Children raised by grandparents whose connections to parents are prematurely or unnaturally severed by parental rejection or governmental edict will not have access to the persons who are biologically and socially charged with their care (Glass & Huneycutt, 2002a). As previously noted, the children often experience social-emotional problems (Edwards, 2006; Smith & Palmieri, 2007) as the persons who are expected to actuate or further their Five Cs, cannot do so, either by choice or accident. Of course, grandparents who assume care of the children early in life may foster the Five Cs, especially when they receive substantive support and assistance from school and community stakeholders.

Consistent with PYD’s strength-based approach to human development, both children and their custodial grandparents are considered resources rather than problems for society. The child, grandparents, and society are considered partners in the process of child development, bearing shared rights and responsibilities in promoting healthy psychological and physical environments (see Damon, 2004). Society (e.g., schools and communities) can help children and their grandparents function effectively by facilitating supportive environments based on a PYD model that proactively offers substantial access to the Five Cs.

Conceptual Model

Despite the fact scholarship regarding PYD and the Five Cs is increasing substantially, no extant scholarship offers a conceptual framework that describes how accessibility to the Five Cs influences the well-being of children raised by grandparents. Figure 1 is a graphical representation of a pathways model to help advance these children’s well-being. It describes the interface among persons in the child’s environment, the ecological context, the Five Cs, and child developmental outcomes. The model visually illustrates how the Five Cs can be activated to shape a child’s developmental trajectory. The pathways model is represented by a series of concentric social circles surrounding the child. The concentric circles represent the social relationships and proximal distance of access to any or all of the Five Cs that promote PYD. The model is derived from the social support theoretical notion that the closer the
emotional relationship between significant others and the child, the greater influence on the child’s psychosocial well-being (Levitt, Guacci-Franco, & Levitt, 1993).

Persons included in the child’s social circles are determined by their relational and role proximity to the child. Relational proximity refers to the emotional distance between the child and persons with whom they share biological or social relationships. Role proximity refers to the emotional distance between the child and persons whose role status (e.g., school staff) results in relatively frequent interpersonal interactions with the child. Grandparents are generally closest emotionally to elementary and middle school children for whom they serve as primary caregivers and their interactions with the children tend to be more influential than teachers’ interactions (Eccles & Gootman, 2002). Likewise, their teachers tend to be more influential than the children’s social network during the elementary years. However, interactions within adolescents’ social networks may be more influential than interactions with their teachers (Levitt et al., 1993).

The outer circle comprises the Five Cs and children can develop any of all of these Cs partly as a function of interactions with significant persons in their social circles. The dashed
lines indicate the mobilization of the Five Cs and the arrows show their direction. The inner shaded circle represents child personal attributes (including motivation, social judgment, and cognitive skills) and ecological contexts (including healthy environments and presumed risks and stressors). The shading symbolizes a type of filter that facilitates or impedes the child's development of the Five Cs. The converging variables form conoidal pathways of transactions that can foster positive child development (Belsky & Fearon, 2002; Lerner, Lerner et al., 2005). The pyramid in the center represents the child and his or her psychosocial well-being and favorable school functioning at the lower angles, and ultimately contribute at the apex. In this conceptual pathways model, warm, sensitive, nurturing, and connected social relationships, as well as positive child attributes and ecological contexts, help to actuate the Five Cs and advance PY D. Pathogenic parenting, abrupt parent-child discontinuity, undesirable child attributes (e.g., introversion and disagreeableness), and aversive environments hinder positive child development (Belsky & Fearon, 2002).

This model also shows that grandparents who receive affective and instrumental support from the children are better able to moderate stressors associated with custodial grandparenting (Kelley et al., 2001; Edwards & Sweeney, 2007). Other persons in the children's social circles (e.g., school staff, family, and friends) can also positively influence grandparents' well-being and parenting as they likely will interact frequently with the grandparents. Strategies to promote grandparents' well-being and parenting include offering regular support group meetings, social support from family and friends, and home visits from social workers (Kelley et al., 2001).

In the pathways model, when these directional (social circles → child; social circles → grandparents) and bidirectional (grandparents ↔ child) relationships are positive and supportive, they help propel the child along a healthy developmental trajectory and at any single point in time facilitate psychosocial well-being (see Lerner, Lerner et al., 2005). Children and their social circles also engage in bidirectional transactions, but these transactions are of limited applicability in this model. Although this pathways model has not been tested empirically, it is aligned with the Five Cs conceptual model of thriving that is well-supported by the 4-H series of research studies (Lerner, 2004; Lerner et al., 2005, 2003).

Mobilizing the Five Cs

Caring/compassion. Research suggests parental caring/compassion is positively correlated with appropriate psychosocial behavior in children and negatively correlated with anxious, internalizing behaviors (Belsky & Fearon, 2002; McCabe & Clark, 1999). Caregiver support is also negatively associated with inappropriate internalizing behaviors and externalizing behaviors in children. In addition, consistent and caring/compassionate application of parental rules is negatively associated with disruptive, externalizing behaviors (McCabe & Clark, 1999). In light of these research findings, grandparents who are new to raising contemporary children will likely benefit from parenting education to help them establish appropriately caring and compassionate homes. These grandparents may need to learn or relearn how to provide affective and instrumental support. Support of this type is said to prevent or minimize stress and stress symptomatology (Poehlmann, 2003). The grandparents may also need to learn how to express warmth, to empathize, and to spend important quality time with their charges. Moreover, they may need coaching to help them make the children feel welcomed, protected, and to realize that their grandparents will not desert them as may have been the case with their parents.

Character. In light of research suggesting many children raised by grandparents experience character weaknesses and behavior difficulties (Edwards, 2006; Smith & Palmieri, 2007), they may encounter challenges adopting accepted values of society without explicit instruction from teachers, school counselors, school psychologists, or other responsible adults (see Baker, 1999). To develop character, children raised by grandparents may benefit from the direct teaching of social skills such as responsibility, integrity, respect, shared decision making, and self-discipline (Forness et al., 2000). This type of character education transmits specific mores to children to help develop valued character traits. It is worth mentioning, however, that moral education has recently as-
assumed a more prominent role than character education in children's social skills development because it emphasizes the expansion of children's moral reasoning rather than the mere transmission of specified values (Eggen & Kauchak, 2004). Teachers and counselors can use moral dilemmas, role playing, and classroom discussions to teach moral problem-solving skills and to enhance the way children raised by grandparents think about moral issues (Eggen & Kauchak, 2004).

Confidence and competence. In the school environment, activities that appropriately enhance children's confidence as well as their social, cognitive, and academic competence will help their psychosocial and psychoeducational development (Benson, 2003; Scales & Leffert, 1999). Given data indicating many children raised by grandparents may come from disadvantaged, intellectually restrictive, or unstable backgrounds (Hayslip & Kaminski, 2006; Glass & Huneycutt, 2002a), enrichment activities, skill builders, extra practice, extra time on assignments, hands-on projects, and field trips that build background knowledge are encouraged. Additionally, to enhance confidence, students need classroom activities at which they can succeed, but which they also consider challenging (Eggen & Kauchak, 2004). Teachers can assign motivating classwork that students are able to complete independently. As students complete the work, the teachers can increase the level of difficulty as they provide educational scaffolding (Eggen & Kauchak, 2004).

Community members, such as coaches and faith-based youth leaders, as well as school staff such as school counselors, school psychologists, and school social workers, can also assist students develop and enhance their confidence by giving them useful roles in the community and school and encouraging them to be of service to others (Damon, 2004). Youth can engage in community service projects such as adopting a senior citizen at the nursing home or in the community, participating in neighborhood watch groups that monitor the school and community, and painting murals in the community or school (Edwards et al., 2007). These types of activities empower youth and help develop a sense of personal accomplishment and confidence (Damon, 2004).

Connection. Research suggests successful students view their teachers as caring (Baker, 1999). Successful students also feel a connection with their teachers, classrooms, and other school staff (Baker et al., 2003). Teachers engender caring and connection by acquiring knowledge of students' personal lives, giving personal attention, creating a safe learning environment, promoting learning, and holding students to appropriately high standards (Eggen & Kauchak, 2004). In addition, they provide substantive academic and social support to children. Connection to others is also engendered by providing children raised by grandparents with a principled school staff member to whom the student can turn for help or guidance and a conscientious classmate who can serve as a peer mentor. These persons assist the children develop connected stable and satisfying relationships that help build or rebuild trust in, and out, of school (Edwards et al., 2007).

Contribution. Early implementation of these strategies based on the Five Cs will in all likelihood help children raised by grandparents develop mutually beneficial relations with the people and institutions of their environments. Despite risks associated with negative early life events and the potential for psychological distress, accessing the Five Cs can advance the children’s healthy psychosocial and psychoeducational development. Taken together, the Five Cs encourage youth to contribute meaningfully to self, family, school, and society. School psychologists can work with grandparents and the children's schools to help construct these support- and resource-rich environments.

Limitations and Conclusion

One major limitation of the PYD theoretical framework is that additional empirical studies (and studies by researchers unaffiliated with the Five Cs model) need to be conducted to test the framework. This limitation is tempered by the fact more than 75 rigorous, data-based programs that utilize components of PYD have been evaluated (for a review, see Catalano et al., 2004). Nonetheless, implementing and empirically evaluating a model grounded in PYD that is designed to meet the unique needs of children raised by their grandparents is an important area for future research. Researchers could measure how such a model might impact the children's
development of the Five Cs and subsequent outcomes.

Despite PYD’s limitation, this model has several important implications for the profession and practice of school psychology. In light of the move toward Response to Intervention (RtI) in schools, this PYD model offers tier-one strategies to enhance the school-related functioning of all students. Children will receive supportive services without need to show resistance to intervention. In addition, because increasing numbers of children are raised by their grandparents, school psychologists will likely work with many of these students and by using PYD approaches school psychologists will help advance the children’s well-being.

School psychologists can use the model described in this paper to collaborate with educators to build the Five Cs, foster positive attitudes and open communication, and develop appropriate prevention and intervention supports to enhance the grandparents’ psychological well-being and promote the children’s prosocial behaviors and positive school and life outcomes. Some school psychologists may be concerned about diminished roles in schools due to RtI and reduced demand for intelligence testing. Reconceptualizing school psychology practice in order to provide services to all students, but particularly children raised by grandparents, via use of this model, will continue to expand the roles of school psychologists beyond the special education domain.

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If you are interested in reviewing manuscripts for APA journals, the APA Publications and Communications Board would like to invite your participation. Manuscript reviewers are vital to the publications process. As a reviewer, you would gain valuable experience in publishing. The P&C Board is particularly interested in encouraging members of underrepresented groups to participate more in this process.

If you are interested in reviewing manuscripts, please write APA Journals at Reviewers@apa.org. Please note the following important points:

• To be selected as a reviewer, you must have published articles in peer-reviewed journals. The experience of publishing provides a reviewer with the basis for preparing a thorough, objective review.

• To be selected, it is critical to be a regular reader of the five to six empirical journals that are most central to the area or journal for which you would like to review. Current knowledge of recently published research provides a reviewer with the knowledge base to evaluate a new submission within the context of existing research.

• To select the appropriate reviewers for each manuscript, the editor needs detailed information. Please include with your letter your vita. In the letter, please identify which APA journal(s) you are interested in, and describe your area of expertise. Be as specific as possible. For example, “social psychology” is not sufficient—you would need to specify “social cognition” or “attitude change” as well.

• Reviewing a manuscript takes time (1–4 hours per manuscript reviewed). If you are selected to review a manuscript, be prepared to invest the necessary time to evaluate the manuscript thoroughly.