Recognizing Microaggressions: A Framework for Helping Grandfamilies

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Research Brief

Recognizing Micro-aggressions: A Framework for Helping Grandfamilies

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Abstract

Micro-aggressions are manifestations of prejudice targeted toward socially marginalized groups. They may take several forms: subtle discriminatory remarks, behavior, or environmental characteristics. In contrast to overt aggressions, micro-aggressions are not easy to detect. They are often invisible to both perpetrator and recipient and occur in three categories: micro-assaults (discrimination), micro-insults (insensitivity), and micro-invalidations (nullification of experience). Existing research demonstrates that being the target of micro-aggressions is harmful to physical and mental health. Some literature also provides a framework for minimizing their negative effects. Most of the current literature on micro-aggressions is focused on groups characterized by minority race and gender. However, micro-aggressions are also experienced by grandfamilies. This article reviews the theoretical framework of micro-aggressions and notes ways in which it
is applicable to grandfamilies. It also includes suggestions for ways in which service professionals can identify micro-aggressions and assist grandfamilies to minimize or eliminate their harmful effects.

*Keywords*: micro-aggressions, stigma, practice, grandparents, grandchildren

**Introduction**

Over the past several years, the concept of micro-aggressions has come to the forefront of both academic and clinical literature (Garber & Grotevant, 2015; Markose & Simpson, 2014; Sue et al., 2007). Micro-aggressions are manifestations of prejudice targeted toward socially marginalized groups. They may take several forms: subtle discriminatory remarks, behavior, or environmental characteristics. In contrast to overt aggressions, micro-aggressions are not easy to detect and often invisible to both perpetrator and recipient.

A growing body of research demonstrates that being the target of micro-aggressions may have negative effects on health, well-being, and self-esteem (Nadal, Griffin, Wong, Hamit & Rasmus, 2014; Ong, Burrow, Fuller-Rowell, Ja & Sue, 2013; Steele, 2010). To date, most of the literature on micro-aggressions has been focused on groups characterized by minority race (Sue, Lin, Torino, Capodilupo, & Rivera, 2009) and sexual orientation (Shelton & Delgado-Romero, 2011). Recently, some researchers have used the concept of micro-aggressions to understand the impact of prejudice against mixed race and adoptive families (Garber & Grotevant, 2015; Markose & Simpson, 2014). However, researchers have not applied this concept to grandfamilies (i.e., grandparents/kin and the children in their homes) who may experience micro-aggressions from strangers, family members, service
providers, and school professionals (Baldock, 2007). Grounded in the grandfamily literature addressing possible stigmas, the purpose of this paper is to describe the literature addressing micro-aggressions and provide a framework for ways that grandfamilies can mitigate the potential damage of micro-aggressions with the support of service providers.

**Stigma and Grandfamilies**

Despite recent focus on the great deal of resilience shown by grandfamilies (Smith & Hayslip, 2012), and positive press aimed at the work of custodial grandparents (Imada, 2010), some grandfamilies may experience stigma. This stigma appears to originate from two categories: (a) those related to the reasons why grandparents are raising their grandchildren and (b) those related to others not understanding the responsibilities associated with the non-normative custodial grandparent role (Hayslip, Herrington, Glover, & Pollard, 2013).

The first category of stigma some grandfamilies experience relates to the circumstances surrounding the biological parents’ inability to raise their children. Reasons often stem from personal problems such as mental health issues, drug abuse, incarceration, AIDS, and/or child abuse and neglect. The stigma associated with these reasons often “sticks” to custodial grandparents and newly-formed grandfamilies (Baldock, 2007; Hayslip et al., 2013). Further, custodial grandparents tend to be stigmatized when the reasons they are providing care for their grandchildren are not considered to be socially acceptable or are viewed as preventable and within the grandparents’ control (Dolbin-MacNab, 2015).

The second category of stigma stems from the non-normative role of custodial grandparents. Even grandparents who are raising their grandchildren due to socially acceptable reasons beyond their control, such as
military deployment or the death of their grandchildren’s biological parents, may still experience stigma. Historically, grandparents have always been there to help raise grandchildren (Baldock, 2007). However, the assumption in modern western cultures is that grandparental care is supplemental to parental care. For example, Neugarten and Weinstein’s (1964) typology of grandparenting styles -- a staple of introductory aging and lifespan psychology courses -- describes three main grandparenting styles: formal, fun-seeking, and distant. It focuses less on two gender-specific styles. Grandfathers were sometimes observed to be the keepers of family wisdom, and grandmothers were occasionally observed to become surrogate caregivers to their grandchildren. The overall assumption is that grandparental care is in addition to—rather than instead of—parental care. To add to stigma, grandparents raising grandchildren may then become isolated from friends and age-related peers because parenting tasks and other related responsibilities are not normative for their life stages (Hayslip and Kaminski, 2005).

Stigma may be particularly harmful when grandparents experience it from multiple contexts including schools, other family members, and service providers. Each context, in turn, may contain many sources. For example, in the school context, grandparents may find that schools have changed a great deal since their children (i.e., the grandchildren’s parents) attended them. Further, grandparents may be unfamiliar with current curricula, procedures, and use of technology. They may also not believe they fit in with other biological parents simply because of age or cohort differences. In addition to this, schools in some states do not recognize the legal capacity of grandparents to enroll their grandchildren in school or give consent for grandchildren to participate in extracurricular activities or receive medical care.
(Silverstein & Vehvilainen, 2000). Even in states with laws that allow grandparents to enroll grandchildren, grandparents are often excluded from the Individual Educational Plans (IEP) for grandchildren with special needs because federal law requires legal guardianship and does not recognize state level consent laws.

Service providers who may hold misperceptions about the variability of grandfamily situations, or do not have appropriate resources for the complicated situations, may be another source of stigma (Dolbin-MacNab, 2015; Fruhauf, Pevney, & Bundy-Fazioli, 2015; Yancura, 2013). These providers may have ambivalent feelings about working with grandfamilies due to the increased time it takes to understand complex issues and triangulate services among three generations (Fruhauf et al., 2015; Peters, 2005). Stigma from service providers may also be perceived on the part of the grandparents due to past experiences, which may have led them to believe that service providers prefer traditional foster care over kinship care situations and will remove grandchildren from their care (Yancura & Greenwood, 2013).

Stigma may also come from other family members. For example, other adult children/siblings may be resentful of the time and resources that grandparents give to their custodial grandchildren, as they believe that it takes away from their own children’s grandparent-grandchild relationship. Other family members, who have been previously harmed by the grandchildren’s parents or who see the stress grandparents are under when caring for a grandchild, might not provide appropriate support and further stigmatize grandparents and/or the children they are raising (Sampson & Hertlein, 2015).

Together, these varying types and sources of stigma may lead to words, behaviors, and environmental factors that deliver underlying messages that are harmful to the health and well-being of grandfamilies. The concept of
micro-aggressions directly addresses these types of stigma faced by grandfamilies. It provides one framework for recognizing when this stigma is being realized so that members of grandfamilies, service providers, and even communities can be taught to bring these harmful messages into awareness. Bringing this stigma into awareness then provides an opportunity for recognizing that it is based on stereotypes and inaccurate information. In other words, the literature on micro-aggressions gives service providers a set of powerful tools to assist grandparents raising grandchildren in an effort to counter the harmful effects of stigma.

**Micro-aggressions**

The current concept of micro-aggressions has its theoretical underpinnings in the broader study of racism, which has evolved from outright bigotry to more subtle forms over the past half-century (Steele, 2010; Wong, Derthick, David, Saw, & Okazaki, 2014). Racism may be motivated by “traditional American values,” typically endorsed by political conservatives, or “egalitarian values,” typically endorsed by political liberals. In both cases, the racism engendered by these beliefs is largely unconscious on the part of the perpetrator (Sue et al., 2007). In addition to explaining actions motivated by racism, the concept of micro-aggressions is also applicable to other forms of prejudice—particularly those directed at grandparents raising grandchildren. In this case, prejudice might stem from beliefs about “family values,” beliefs about the primacy of a traditional two-parent family structure, and/or beliefs about parents’ (grandparents’) familial obligations to their adult children and their families.

There are several types of micro-aggressions, ranging from least to most subtle. The broadest level is *micro-assaults*, which are “Explicit …. derogations characterized primarily by a violent verbal or nonverbal attack meant to hurt the intended victim through name-
calling, avoidant behavior or purposeful discriminatory actions” (Sue, 2007, p. 274). Perpetrators of micro-assaults may or may not be aware that their comments are harmful, but these comments are most likely to be clearly perceived as harmful to grandparents. A prime example of a micro-assault comes from a qualitative study addressing micro-aggressions toward adopted families. A young adopted participant reported that another child in the family told him: “You are not really my cousin!” (Garber & Grotevant, 2015, p. 448). Further examples of micro-assaults that individuals may say and the messages these statements may convey to grandparents are described in Table 1.

The next level of micro-aggressions is called micro-insults, which are “Behavioral/verbal remarks or comments that convey rudeness, insensitivity and demean a” (Sue et al., 2007, p. 274) grandparent or grandchild’s situation. These types of remarks are somewhat more subtle than micro-assaults, but can be quite harmful nonetheless. Nadal et al. (2013) give an excellent example of a within-family micro-insult in their study of micro-aggressions aimed at multiracial family members. For example, a non-Filipino speaking participant reflected on what she heard from her family in the Philippines: “Why can we go to your country and we can speak English and when you come here and you can’t speak our language?” (Nadal, Sriken, Davidoff, Wong, & MacLean, 2013, p. 196). More micro-insults towards grandfamilies and the messages they convey are included in Table 1.

The third level of micro-aggressions is micro-invalidations, which are “verbal comments or behaviors that exclude, negate, or nullify the psychological thoughts, feelings, or experiential reality” (Sue et al., 2007, pp. 274) of a grandparent. In a sense, these type of micro-aggressions can be the most harmful because they are essentially “hidden” to both perpetrator and recipient. They express deeply-held and unquestioned societal views. For
example, Garber and Grotevant (2015) used the term *assumption of bionormativity* to express the micro-
invalidations experienced by adoptive families. This
assumption is based on the belief that traditional biological
families are the only legitimate family structures. Although
it was not expressed through direct language, this micro-
invalidation may be perceived as extremely hurtful by the
adoptive families in their study. Table 1 includes common
micro-invalidations often experienced by grandfamilies and
their underlying messages.

**Table 1**

*Examples of Micro-assaults, Micro-insults, and Micro-
invalidations*

<table>
<thead>
<tr>
<th>Micro-assault</th>
<th>Message</th>
</tr>
</thead>
<tbody>
<tr>
<td>“You are too old to raise children.”</td>
<td>You are not capable.</td>
</tr>
<tr>
<td>“Why do you want to raise your grandchild? Don’t you just want to play</td>
<td>You are making a bad/poor decision to raise grandchildren. OR You are</td>
</tr>
<tr>
<td>bridge/hang out with your friends? Remember, you’re retired!”</td>
<td>stupid to give up retirement for your grandchild/family.</td>
</tr>
<tr>
<td>“Mom, you always did everything for her (sister). Now look at you, you’re</td>
<td>You treated your children unfairly as they were growing-up and you</td>
</tr>
<tr>
<td>raising her children!”</td>
<td>continue to do so.</td>
</tr>
<tr>
<td>“If you had raised your children right, you wouldn’t be raising your</td>
<td>You are to blame for the situation.</td>
</tr>
<tr>
<td>grandchildren.”</td>
<td></td>
</tr>
<tr>
<td>“Why did you take away your daughter’s responsibility as a parent? You</td>
<td>This isn’t your business. You are enabling your daughter</td>
</tr>
<tr>
<td>should have let her learn the hard way and let her take care of her own</td>
<td></td>
</tr>
<tr>
<td>kids.”</td>
<td></td>
</tr>
<tr>
<td>“Because your parents aren’t around, you don’t live with a real family.”</td>
<td>Your family situation is not legitimate.</td>
</tr>
<tr>
<td><strong>Micro-insult</strong></td>
<td><strong>Message</strong></td>
</tr>
<tr>
<td>------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>“Aren’t you afraid that your grandchildren will end up just like their parents?” (to grandparents) or “You will end up just like your parents.” (to grandchildren)</td>
<td><em>You do not deserve a second chance</em></td>
</tr>
<tr>
<td>“You know, the apple does not fall far from the tree.”</td>
<td><em>It is the grandparents’ fault that they are raising their grandchildren. Clearly they did not parent their child correctly.</em></td>
</tr>
<tr>
<td>“My grandchildren are not my responsibility. I did my job raising my own children.”</td>
<td><em>You must not have done a good job raising your own children.</em></td>
</tr>
<tr>
<td>“Oh too bad you guys are “stuck” now and can’t enjoy your life.”</td>
<td><em>Raising grandchildren will take the joy out of later life.</em></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Micro-invalidation</strong></th>
<th><strong>Message</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>When a school does not allow a grandparent to attend a parent-teacher conference, participate in an IEP/special education planning meeting, or register a child for school.</td>
<td><em>You are not a valid representative for your grandchild’s education and do not have the right to make educational decisions for them.</em></td>
</tr>
<tr>
<td>When a medical clinic refuses medical care because the custodial grandparent does not have legal guardianship.</td>
<td><em>You are not a legal representative for your grandchild and do not have the right to make health care decisions for them.</em></td>
</tr>
</tbody>
</table>
| When a teacher sends home letters addressed to, “The Parents of…” | *You are not a “typical, nuclear” family.*  
*You are “less than” the norm.* |
| When someone says that “You do such a good job raising your grandchild…I know how hard it is because my children spend two hours a day after school with my mom and she tells me how tired she is afterwards.” | *The experience of one person is exactly like the experience of another person.* |
All three types of micro-aggressions (i.e., micro-assaults, micro-insults, and micro-invalidations) can undermine the stability and health of grandfamilies because they indirectly express personal or societal judgments about them and their situations. Because micro-aggressions are oftentimes subtle, grandparents and grandchildren may not fully realize how harmful they are. Research demonstrates that individuals can develop coping skills to recognize, respond to, minimize, and mitigate the harmful effects of micro-aggressions (Wong et al., 2014). Thus, it is also possible that educational protocols could be implemented with custodial grandparents and their grandchildren to increase awareness and empower them with skills to combat micro-aggressions.

**Practice Approaches When Dealing with Micro-aggressions**

The vast majority service providers who work with and on behalf of grandfamilies do not consciously engage in micro-aggressions. However, all service providers can incorporate strategies to help grandfamilies cope with the potentially harmful effects of this subtle form of prejudice. We recommend three main strategies: (a) recognizing biases and micro-aggressions, (b) using strengths-based approaches and reframing situations, and (c) cultivating positive support networks.

It is important for practitioners to know their own biases (Dolbin-MacNab, 2015) and to become aware of and teach grandfamilies about micro-aggressions. Practitioners are human and susceptible to prejudice and stereotypes; this is often the case when working with older adults (Hanna & Hargrave, 1997). It is important to meet each individual and family as unique, to listen to the facts surrounding each situation and to understand the strengths and weaknesses of each grandfamily. Further, bringing micro-aggressions into awareness, rather than accepting them as truth, may allow
individuals the chance to decide how they are going to react to them, whether they accept them as fact or challenge their validity (Sue et al., 2009). As a result, service providers may coach grandparents about making a decision to educate (O’Hora & Dolbin-MacNab, 2015) or confront (Hernández, Carranza, and Almeida, 2010) the perpetrator. Depending on the situation, this strategy may or may not be desirable. In some cases, such as when the micro-aggression comes from a stranger whom the individual is unlikely to encounter again, individuals may not chose to expend effort on education or confrontation. In other cases, such as with micro-aggressions expressed by judgmental friends or family, confrontation might be the best strategy.

Another way to help grandfamilies combat the negative effects of micro-aggressions is to use a strengths-based approach; this approach may also provide a way to reframe what might be perceived as negative or stigmas and instead focus on the positive aspects of grandparent-headed-households (Conway & Consedine, 2013; Fruhauf & Bundy-Fazioli, 2013). As a result, grandparents might cultivate an attitude of acceptance toward the perpetrators, who are most likely ignorant of their wrongdoing. Hernández et al. (2010) note that individuals’ spirituality may be helpful in cultivating acceptance, and even forgiveness of the micro-aggression.

Finally, as service providers, it may be appropriate to convey to grandparents and/or grandchildren that they can terminate friendships with individuals who engage in micro-aggressions. Further, grandfamilies should be empowered to seek out and cultivate friendships and social relationships that are both positive and meaningful (Fruhauf & Bundy-Fazioli, 2013). This may provide an avenue to develop “counter spaces,” physical or relational spaces where individuals are assured of respite from micro-aggressions (Grier-Reed, 2010). Such counter spaces may include their own home, churches, centers, or support
groups. Finally, self-care and collective organizing are other strategies the literature recommends for coping with micro-aggressions (Hernández et al., 2010). Collective organizing to advocate for grandfamilies rights is also helpful in assisting grandfamilies to combat the harmful effects of micro-aggressions (Hernández et al., 2010). Efforts to combat micro-aggressions should also include grandchildren (O’Hora & Dolbin-MacNab, 2015).

Conclusion

Helping grandfamilies become resilient to the effects of stigmatizing micro-aggressions can foster healthy development for both grandparents and grandchildren. Future research should examine the impact micro-aggressions have on grandparents and grandchildren, as no empirical work has engaged in this program of research. Further, researchers should consider examining the extent to which grandparents/grandchildren experience micro-aggressions, how they discuss them with service providers, and the positive impact service providers can have on mitigating the potential harmful effects of micro-aggressions. With a focused research agenda addressing micro-aggressions in the context of grandfamilies, professionals will be better prepared to develop data-driven interventions for promoting healthy development of grandfamilies.

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