Patrilineal Ideology and Grandmother Care in Urban China

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Patrilineal Ideology and Grandmother Care in Urban China

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Vanessa Fong
Natasha Warikoo

A Thesis Presented to the Faculty of the Graduate School of Education of Harvard University in Partial Fulfillment of the Requirements for the Degree of Doctor of Education

2016
Dedication

To my daughter, Camilla, my husband, Minglie, and my family
who always, for better or worse,
inspired, encouraged and supported me
Acknowledgements

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Abstract

My dissertation explores an important but understudied dimension of interaction in China’s declining patrilineal kinship system – the childcare support provided by grandparents. Traditionally, paternal grandparents exclusively provided childcare support. Now, this practice appears to be undergoing a transformation towards a more bilateral approach where both maternal and paternal grandparents are involved in childcare. To better understand the changing norms, I investigated the choices of and experiences with grandmother care for 362 urban families with infants in China.

In the first study, I examined parents’ motivations for utilizing maternal versus paternal grandmother care by analyzing semi-structured interview data from a subsample of 77 families. Parents discussed four major considerations affecting their selection process, including grandmothers’ availability and qualifications, avoidance of patrilineal conflicts, and construction of multi-caregiver coalitions. Further examination suggested that stronger influence of interpersonal relationships on intergenerational interactions, women’s increased power in connecting with natal families, and a shift from lineage-determined to skill- and child-based care choice may have led to new norms in child care patterns. These findings suggest that the increase in maternal grandmother care reflects the weakening of patrilineality in Chinese society resulting from China’s rapid modernization.

In the second study, I explored the associations between the type of grandmother care and parents’ adaptation to parenthood, using a mixed-method approach. Quantitative analysis of the survey data showed that overall grandmother support was found to reduce parenting stress for mothers, but not fathers. In addition, no type of
grandmother support, for either mothers or fathers, increased parenting stress. Finally, mothers appeared to be more sensitive to the support offered by their own mother than their in-law. Qualitative analysis of the interview data revealed that the different relationships mothers had with maternal versus paternal grandmothers might have shaped the differences in mothers’ perceived quantity/quality of and satisfaction with the support received. The interviews also suggested that gendered parenting roles that prescribed mother’s primary role as caregiver and father’s primary role as breadwinner may partly explain why grandmother support was more salient for mothers than fathers as a coping resource.
I. Introduction

Grandparents are an important resource for families. They are described as the “supporting generation” (Falk & Falk, 2002, p.69) and are identified as a salient social network support that enhances parents’ coping and adaptation to life challenges and stressors (e.g., Greenfield, 2011; Trute, Worthingyon & Hiebert-Murphy, 2008; Parkes, Sweeting & Wight, 2015; Pearson & Chan, 1993; Lee & Keith, 1999). An extensive body of research reveals that grandparents serve as a major source of childcare support in many countries, including China. (Pilkauskas, 2014; Goodfellow, 2003; Gatti & Musatti, 1999; Brandis, 2003; Gray, 2005; Hank & Buber, 2009; Chen, Liu & Mair, 2011).

As of 2013, as many as sixty percent of children under six in urban China were being cared for by grandparents, and forty percent of children in rural China were receiving exclusive grandparent care (China’s Research Center on Aging, 2013; All-China Women’s Federation, 2013). The prevalence of grandparent care for young children in China in part reflects the longstanding social expectation of intergenerational interaction and support. This trend is also due to the high labor force participation of women with young children, reductions in employer-based child care, a shortage of childcare facilities serving children under age three, and the increased availability of up to 4 grandparents to provide care for a single child wrought by the market-economy transition and the one-child policy (Nyland, Nyland & Maharaj, 2009; Du & Dong, 2010; Chen et al., 2011).

Alongside China’s rapid modernization was a concomitant change in the norms and patterns of grandparent care. The cultural model of patrilineality dictated grandparent support to be traditionally provided exclusively towards sons’ children prior to China’s
1949 revolution (Whyte, 2005). However, China’s rapid economic reforms and policy changes over the last few decades have caused a decline in the dominance of the patrilineal kinship system.

Social and policy changes including increased education and job opportunities for women, free mate choice, marriage at an older age, lower fertility, and separate residence from parents after marriage have all led to weakened control of the kin network over the nuclear family unit (Tsui & Rich, 2002, Fong, 2002; Whyte, 1979; 1990). The relative freedom from kinship control prevents the maintenance or formation of a dominant lineage, promoting a more bilinear pattern of kinship interaction (Goode, 1970). Most studies documenting the transformation of patrilineal norms focus on domains of education, employment and filial obligations of the singleton generations (Fong, 2002; 2004; Guo, 2001; Yan, 2003; Shi, 2009; Evan, 2008; Zhan & Montgomery, 2003; Whyte, 2004). Notably, no study to date has investigated the changing significance of family lineage in shaping the patterns of grandparent care in modern China. Only anecdotal evidence suggests that the extent to which grandparents provide childcare assistance in China has likewise become less patrilineal, as parents rely increasingly on maternal grandmothers for assistance (Chen et al., 2011).

This dissertation is the first to investigate the ways in which the processes of modernization have shaped grandparent childcare support experienced by urban Chinese families. Specifically I ask why maternal grandparents become involved in childcare and how parents experience maternal and paternal grandparent support differently in China. The research consists of two papers, each addressing one the above two topics. Both studies draw on data from an ongoing, multi-method longitudinal study that began in
2006 in Nanjing, China. A sample of 418 six-month-old infants and their parents was drawn from birth lists at a large city hospital in Nanjing and stratified by income level. All infants were first and only children and all parents were married.

We administered surveys in person when the infants were six, fourteen, twenty-four, thirty-six and forty-eight months old. We conducted semi-structured interviews with a random subsample of 81 couples when their infants were 14 months old. For the first study, I analyzed semi-structured interview data from 77 out of 81 couples to investigate their motivations for choosing maternal versus paternal grandmother care.

For the second study, I analyzed the survey data from 362 families who participated in the second wave of the study, as well as the semi-structured interviews with the subsample of 81 couples. I used these data to compare parents’ experiences with maternal versus paternal grandmother support. Specifically, the second study examined the associations between type of grandmother support (no grandmother support; maternal grandmother support only; paternal grandmother support only; and both maternal and paternal grandmother support) and change in parents’ experiences of parenting stress as they adjusted to new parenthood. I analyzed interviews with parents to further illuminate the differences in nature and dynamics of interactions between parents and the two sets of caregiving grandmothers. A deeper understanding of the differences in meaning and dynamic between maternal and paternal grandparent care can help illuminate the evolving gendered family and intergenerational relationships in China’s changing socioeconomic environment.
References


II. STUDY 1: Maternal or Paternal Grandmother? The Transformation of Patrilineal Practice in Grandparent Care in Urban China among Families with Infants

A patrilineal kinship system prevailed in China for thousands of years prior to the establishment of the Communist government in 1949, with patrilineage serving as the primary unit of intergenerational transfer of resources (Whyte, 2005). However, the dominance of patrilineality as a normative cultural pattern has declined alongside China’s rapid socioeconomic and policy changes over the last few decades (Shi, 2009; Kim & Fong, 2014; Xie & Zhu, 2009). This is particularly true in urban settings, where expanded economic and educational opportunities for women, freer mate choice, and later age of marriage have reduced patrilineal control over women (Tsui & Rich, 2002, Fong, 2002; Whyte, 1979; 1990). China’s birth control policy also benefits girls who do not have brothers to compete with, as they receive greater parental investment and maintain close relationships with their natal families after marriage (Fong, 2004; Zhang, 2009).

One important dimension of kinship relations in China is the child-care support provided by kin, particularly grandparents. There is evidence of weakened patrilineality in many aspects of family life in urban Chinese families. However, less is known about how changes in patrilineality may have resulted in new norms in child-care patterns, particularly grandparent care. While paternal grandmother care of infants was normative in patrilineal tradition, recent Chinese media reports (e.g. Jiangnan Evening News, 2014) suggest a transformed pattern of grandparent care, with parents relying increasingly on maternal grandmothers for child-care assistance.

The purpose of this study is to understand urban Chinese parents’ motivations of using maternal grandmother care to explore the shift in grandparent childcare norms
within China’s transformed socio-economic environment. A deeper understanding both of the new patterns and practices of grandparent care in China and of the meaning and dynamics of maternal grandparent care in comparison to paternal grandparent care will help elucidate evolving gendered family relations, parent-child relationships, and authority in China. It may also illuminate the ways in which families negotiate cultural preferences, practical considerations, resources, and individual needs and choices in making child-care decisions.

**Background on Grandparent Care in China**

Over the last few decades, the traditional role of grandparents as caregivers for young grandchildren has become increasingly salient as China has undergone rapid socioeconomic and demographic changes. Increased labor force migration of parents from rural to urban areas left more than 23.4 million rural preschoolers (age 0-5) under grandparent-only care by 2010 (All-China Women’s Federation, 2013). In urban settings, higher labor force participation by women with young children coupled with reductions in employer-based child care have compelled parents to turn to their families -- particularly grandparents -- for care of infants and toddlers (Du & Dong, 2010). The 1979 one-child policy, which targeted urban areas more than rural areas, led to the emergence of the “4-2-1” family structure by the 2000s: four grandparents, a married couple who are both the only child of their respective parents, and the couple’s one child (Wang & Fong, 2009). This structure resulted in more grandparents available to provide care for their only grandchild (Nyland et al., 2009). According to China’s Research Center on Aging (2013), as many as two-thirds of urban children under six are being cared for by at least
one grandparent (e.g. 90% in Shanghai, 70% in Beijing and 52% in Guangzhou). Moreover, half of these grandparents provide exclusive care, a statistic that is increasing.

Prior to 1949, caring for grandchildren was oriented exclusively towards sons’ children in China due to the patrilineal family system (e.g. Silverstein, Cong & Li, 2007). The patrilineally organized family and its kinship rules provided a clear doctrine of inclusion. Specifically, sons had inborn membership in the family lineage and were placed in the roles of elder care provision, bloodline continuation and ancestor worship, whereas daughters were expected to leave their lineage of origin upon marriage and were subsumed under their husbands’ lineage (Murphy, Tao & Lu, 2011; Sun, 2002; Whyte, 2004; Peng, 2010). The male descent line, Chinese marriage patterns, and a Confucian emphasis on filial piety all reinforced intergenerational support along the male lineage. Maternal grandparents’ traditionally distant relationship with their grandchildren is also reflected in their formal title with respect to grandchildren as “外婆” (outside grandmother) and “外公” (outside grandfather).

Research on grandparent care in China has either focused specifically on the normative pattern of paternal grandparent care, or more commonly lumped together child care provided by maternal and/or paternal grandparents in analyses (e.g. Sun, 2013; Short et al, 2001; Chen, 2004). This focus has been constrained by the studies’ context. Most of the studies of grandparent care in China have been conducted in rural China, where traditional lineage culture may be more salient than in urban settings. For this reason, researchers have generally documented only small percentages of non-normative maternal grandparent child care. Few data from urban samples exist with which to make comparisons between maternal and paternal grandparent care. Yet recent scholarship has
revealed a decline in the patrilineal organization of kinship interaction in China, following the market-based reforms and one-child policy (e.g. Shi, 2009; Fong, 2002; 2004; Zhang, 2007). There is anecdotal evidence suggesting that the extent to which grandparents provide child-care assistance has similarly become less patrilineally based (Chen et al., 2011, Zhang, 2009, Ko & Hank, 2013). Contrary to tradition, recent Chinese media discourse has expressed this new pattern as “a child is given birth by the mother, raised by maternal grandmother and visited by paternal grandparents (妈妈生外婆养爷爷奶奶来观赏)” (Kaitifen, 2014). But without further study, the assumption should not be made that maternal grandparent care is simply an alternative in situations where the normative arrangement of paternal grandparent care is not possible.

**Conceptual Framework**

This study is the first to investigate the new norms of grandparent care in contemporary urban China and how China’s modernization processes might have contributed to the shift in the norms. To examine the underlying motivations for utilizing caregiving grandmothers from maternal versus paternal lineages in China, the present study relies on modernization theory. Modernization theory suggests that a process of transformation from “traditional” society to “modern” society will support or bring about a particular set of changes in norms, values, attitudes and behavior. In the realm of family processes, the hallmarks of modernization include increased education, free mate choice, marriage at an older age, lower fertility, and separate residence from parents after marriage. Scholars have argued that these hallmarks can lead to weakened control of the kin network over the nuclear family unit, greater autonomy of the individual and greater
level of gender empowerment (Goode, 1970; Newson & Richerson, 2009; Epstein & Goode, 1971).

Since the transition from state to market-based economy, China has undergone profound and transformative industrialization and urbanization (Whyte & Parish, 1984; Whyte, 2003). Accompanying market economic reforms to encourage economic efficiency and growth was the launch of the one-child policy, which restricted the number and timing of births. Population control propaganda promoted the one-child policy as a strategy to achieve personal as well as national modernization (Fong, 2004). The rationale was that it is easier to modernize a smaller group, in which everyone would receive more familial and national resources. Chinese modernization is differentiated from modernization in Western countries through the challenge it places on the cultural model of patrilineality. Recent scholarship has revealed a concomitant change in the importance of patrilineal kinship interaction alongside Chinese modernization.

**Market Reforms and Matrilineal Kinship Interaction as a Practical Strategy**

Some studies have pointed to the emergence of an increased financial and social bond between people and their matrilineal kin following the inauguration of market reforms (e.g. Shi, 2009; Evan, 2008; Zhan & Montgomery, 2003; Whyte, 2004). Evidence suggests that since the reforms the resources and needs of each generation, rather than their lineage status, have become the foundation for kinship interaction. For example, Zhang (2009) found that with broader post-reform work opportunities, rural women sought to have economic collaboration with matrilineal kin. This collaboration enabled them to overcome the same economic constraints faced by patrilineal kin and generate household income. Other studies suggested that practical issues of economic
interdependency (e.g., the rising standard of living, housing constraints) and reciprocal support (e.g., child care and elder care) all worked to shape the occurrence of co-residence of couples with their matrilineal parents in urban China (Pimental & Liu, 2004; Davis, 1993; 2000).

Couples’ increasing demand for instrumental support from the older generation is especially pronounced in the case of child care (e.g. Zhang, 2009; Pimental, 2006; Short, Chen, Entwisle & Zhai, 2002). Women’s increased work opportunities outside the family have also intensified the incompatibility of mothers’ roles as parent and worker (Short et al., 2002). Although as many as 85% of mothers of young children (0-6) are working, public support for child care has been limited in modern China (Short et al., 2002). The market-based economic reform has led to a near eradication of publicly funded daycare facilities that had been provided as a benefit in, or near, the maternal workplace (Du & Dong, 2010). Additionally, during the danwei (iron rice bowl) era in China, first jobs were assigned and typically lasted one’s entire work career. Since the end of this era, there has been much less time flexibility and job security (Chen et al., 2000). Such constraints in the workplace have further intensified the work-family conflict for parents.

Today, young couples might find child-care support from grandparents attractive, regardless of their lineages, given the competing demands of child care and work, and/or the financial burdens of private daycare or nanny care. It is likely that the use of maternal grandparent care is a utilitarian strategy to call on maternal grandparents’ resources. It is also likely that women’s increased earning power and educational attainment may allow them greater bargaining power if they wish to maintain strong ties to their natal families after marriage (Zhang, 2007; Zhang, 2009). They could use this power to negotiate, for
example, for their preferred yet non-normative maternal grandparent care. However, no previous studies have explored the practical reasons that might shape the use of maternal grandparent care and the mechanisms underlying parents’ choice of paternal vs. maternal grandparent care in contemporary urban China.

The “One-Child” Policy and Matrilineal Kinship Interaction as a Necessity and Privilege

The one-child policy, which was intended to speed up China’s fertility transition and modernization, has had an unintentional consequence of challenging the cultural model of patrilineality and strengthening the ties between singleton daughters and their natal families. There is evidence in the literature that the policy-driven birthrate decreases have contributed to the transformation of the patrilocal tradition. Davis-Friedmann (1991) documented that most cases of matrilocal residence in China involve parents with singleton daughters. Other scholars also found that married women without brothers are more likely to co-reside with their parents (Li, Feldman & Li, 2000; Pimentel & Liu, 2004).

Recent scholarship has also pointed to the role of the one-child policy in decreasing the impact of patrilineality on the practices of filial piety and parental investment in China. The cultural model of filial piety, which prescribes adult children’s duty to support their elderly parents, remained one of the salient Confucian legacies in China and has also been reinforced by states’ laws as a legal obligation (Palmer, 1995). The one-child policy supports, maintains and strengthens women’s long-term interactions with their natal families, as singleton daughters should now shoulder the responsibility of providing nursing care and economic support for their elderly parents, which was once reserved for sons (Fong, 2004).
Female singletons have also received unprecedented parental investment. This is because they have no brothers to compete for parental resources, and because they become the “only hope” for parental fulfillment (Fong, 2002; 2004). Maternal grandmother care may represent another form of parents’ continuing investment in their adult singleton daughters after their marriage. That is, they may become heavily involved in child care to help their singleton daughters raise their only grandchildren. No study to date has examined singleton mothers’ expectations for maternal grandparents’ investment in child care.

**Method**

**Setting**

The current study draws on data from a longitudinal, multi-method study conducted by researchers at New York University, Harvard University, and the Research Center for Learning Sciences at Southeast University in Nanjing, China (cf. Kim et al., 2010). The city of Nanjing is the capital of Jiangsu Province in eastern China, a medium-sized city with a population of over 6 million in 2006, when data collection began. It was chosen for research because it is considered an average Chinese city, neither a “first-tier” city that has experienced dramatically rapid economic reform and growth like Beijing or Shanghai, nor a city like the cities in western regions of China that have been slower to experience social and economic development. It thus provides an ideal environment within which to examine how patterns of child care unfold in the context of large-scale social and economic change.

**Data Collection**
Participants in the Nanjing Metrobaby study were recruited randomly from birth lists at a large city hospital and stratified by income level.1 The second wave of the study (12.6% attrition rate) includes 362 14-month-old infants (175 girls, 187 boys), all first and only children, and their mothers and fathers, all married couples, in Nanjing. Information on child-care arrangements used by the 362 families in the first 14 months of children’s lives was collected through surveys at 14 months. Mothers of the infants reported the types of care arrangements they made for their children since birth, the amount of time their children spent in each care type, the basic demographic information of the care providers, and the cost of child care. All 362 children were cared for at home in their first 14 months, and the vast majority (90.3%) received grandparent care for at least 8 hours a week (97.2% of these were grandmothers). Note that because grandmothers predominated as caregiving grandparents in this sample, the following analysis focuses exclusively on maternal and paternal grandmother rather than grandfather care.

A random subsample (stratified by child gender) of 81 families (81 mothers and 50 fathers) drawn from the survey sample participated in semi-structured interviews when their children were 14 months old. Mothers and fathers in these families were asked specifically about their perceptions of grandparent care. Such perceptions included how they perceived the advantages and disadvantages of grandparent care and their reasons for involving grandparents in child care (Appendix A provides a list of interview questions about grandparent care that will be the basis for the qualitative analysis). The interviews with parents were conducted in Mandarin by mainland Chinese research

1 The expense of the maternity-ward room (single-bed rooms compared to multiple-bed rooms) served as a proxy for income in sampling.
assistants who were current or recently graduated students at a mainland Chinese or U.S. university. The interviews were on average two hours long and were audiotaped.

Participants of the Current Study

The focus of the current study is on the 77 out of the total 81 families (95.1%) whose current care arrangements involved grandparent care. All 77 families had grandmothers involved in child care. All except three families had both living maternal and paternal grandmothers to choose from. The characteristics of the parents and caregiving grandmothers are displayed in Appendix B, Table 1 and Table 2, respectively. Thirty-four (44.2%) of the 77 families used maternal grandmother care, 25 (32.5%) families used paternal grandmother care, and 18 families (23.4%) involved both maternal and paternal grandmothers in child care. The distributions of grandmother care in these 77 families were in accordance with the 318 families that used grandmother care in the larger survey sample. Forty-four percent of the 318 families used maternal grandmother care, 41.2% used paternal grandmother care, and 14.8% used both maternal and paternal grandmother care. With its relatively balanced distribution of maternal and paternal grandmother care, the Nanjing Metrobaby dataset offers a unique opportunity to assess the transformation of patrilineal practice in grandparent care.

All fathers were employed when their children were 14 months old, while 68 of the 77 mothers were employed at least 40 hours per week outside the home at the same time. The average monthly household incomes of the 77 families in 2007, when their children were 14 months old, were 7,890 yuan, or US$1025.7. This average was higher than the average monthly household income of the 81 families in the interview sample.

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2 All currency conversions are based on average 2007 exchange rate of 1 Chinese yuan equivalent to 0.13 US dollars.
(7,762 yuan, or US$1009.3). However, it was slightly less than the average monthly household income of the 362 families in our larger sample (8,753 yuan, or US$1,138).

The average monthly income of the 362 families in our study was somewhat higher than the average monthly income of all urban Nanjing households in 2007 (5,043 yuan, or US$656) (Nanjing Bureau of Statistics 2008). It was also much higher than the average monthly income of all urban households in mainland China in 2007 (3,779 yuan, or $491) (National Bureau of Statistics of China 2008). Ninety-two percent of the mothers and 87 percent of the fathers from the 77 families reported having completed at least a college degree. All 77 couples except three were in their late twenties or early thirties when their first children (38 girls and 39 boys) were born.

There were 95 caregiving grandmothers (52 maternal grandmothers and 43 paternal grandmothers) in the 77 families that were interviewed. The caregiving grandmothers ranged in age from 45 to 74 years old. The majority (84.3% of the maternal grandmothers and 64.3% of the paternal grandmothers) were in their fifties. The education level of the grandmothers varied from no formal education to a college degree. Forty-nine percent of the caregiving maternal grandmothers and 35% of caregiving paternal grandmothers completed at least high school education.\(^3\) On average, the caregiving grandmothers were older\(^4\) yet better educated\(^5\) than the non-caregiving grandmothers. Approximately 77 percent of caregiving grandmothers (40 out of 52

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\(^3\) Grandmothers’ education levels were reported based on 45 out of the 52 caregiving maternal grandmothers and 37 out of the 43 caregiving paternal grandmothers.

\(^4\) The mean age of caregiving maternal grandmothers was 56.54, which was slightly higher than the mean age of non-caregiving maternal grandmothers (56.19). Likewise, the mean age of caregiving paternal grandmothers (60.13) was higher than the mean age of non-caregiving paternal grandmothers (57.75).

\(^5\) Only 23% of the 21 non-caregiving maternal grandmothers and 17% of the 29 non-caregiving paternal grandmothers have completed high school education or above.
maternal grandmothers and 33 out of 43 paternal grandmothers) lived with the families to provide child care. Thirteen percent provided care but maintained their own residence and provided care either at the child’s residence or at the grandmother’s residence. All non-caregiving grandmothers except one paternal grandmother resided separately from the adult children’s household. On average, maternal grandmothers spent 58 hours per week on child care and paternal grandmothers spent 52 hours per week on child care. Four (7%) of the 52 maternal grandmothers and two (5%) of the 43 paternal grandmothers were paid for child care. However, most of the payment was used to purchase the infant’s food at 14 months (伙食费).

The grandmothers were largely substituting for parental care when parents were at work and/or assisting parents when they were at home. The grandmothers spent approximately 60 hours per week, on average, engaged in child care. Mothers on average spent more time on child care (65.8 hours per week) than grandmothers. Maternal grandmothers (69.9 hour/week) on average spent more time on child care than paternal grandmothers (50.09 hour/week). However, the difference was not statistically significant (t=1.42, p=.16). Fathers also provided child care for an average of 32.6 hours per week.

Data Analysis

Interviews with 77 families, including 77 mothers and 43 fathers, regarding their motivation to select maternal versus paternal grandmother care were analyzed. All interviews were audiotaped and transcribed verbatim and were analyzed in Chinese so as

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6 Parents usually reported care hours within the range of 168 hours per week. This was calculated as follows: 168 care hours per week equals 24 hours per day multiplied by 7 days per week. Parents interpreted co-sleeping as an important aspect and measure of care involvement, regardless of the caregiver. Parents also tended to include time spent in co-sleeping with the infant when calculating child care hours.
to preserve the authentic meanings and original nuances of the data (Corbin & Strauss, 2008). To understand parents’ preferred options and criteria for selection, I analyzed parents’ responses to the question, “How do you make grandparent care arrangements? Who is involved in decision-making? How? Why?” I also paid particular attention to their responses on how they came to make the decision about which grandmother to involve.

I first used codes derived from previous research (e.g., Nyland et al., 2009; Zheng & Meredith, 1997; Goh, 2006) for the factors Chinese parents consider when making early child care decisions (e.g., grandparent care versus institutional care or in-home nonrelative care). These codes included parents’ prior expectation for child care support from grandmothers, parents’ trust of family care and distrust of non-family care, and parents’ consideration of the psychological, practical, and financial benefits of utilizing grandmother care. These etic codes represented a starting point for my analyses of the interviews. I also used open-coding methods to identify and develop emic codes and themes that emerged through interviews (Charmaz, 2000; 2006). Constant comparative methods (Glaser & Strauss, 1967) were used to identify the most frequent and useful codes. I also compared codes across interviews with different families and interviews with mothers and fathers within the same households. I separately coded mothers’ reasons for using maternal versus paternal grandmothers and fathers’ reasons for using maternal versus paternal grandmothers to examine the similarities and differences in parents’ preferences and reasons for choices. The constant comparisons were conducted within and between the mothers’ and fathers’ responses. This revealed some shared and distinct concepts identified by the mothers and fathers.
I then grouped the codes/concepts with shared properties into categories and analyzed the relationships within a category and between categories (Corbin & Strauss, 2008). The developed categories and subcategories with exemplary quotations are shown in Appendix C. Each category represented a core criterion/consideration that parents used to select caregiving grandmothers and parents’ relevant preference for maternal versus paternal grandmothers based on the criteria they used. When analyzing the relationships between categories, I discovered the central themes that explained the transformation of the patrilineal norms of grandparent care. Analytic memos were written throughout the analysis process to track the generation of codes and ideas, to clarify and link codes and concepts, and to make connections to the theories (Charmaz, 2006; Corbin & Strauss, 2008).

Findings

Parents discussed four major considerations that affected their decisions about whether to use maternal versus paternal grandmother care: (1) grandmothers’ availability, (2) grandmothers’ qualifications, (3) avoiding patrilineal problems, and (4) a multi-caregiver ideal. Parents used numerous means to calculate and balance their considerations, and each consideration had varying levels of relevance or importance to each parent and family. For example, parents shared stories about turning down available and eager-to-help grandmothers who were perceived to be unqualified. They also told of taking pains to involve capable grandmothers despite complicating steps like grandmothers needing to quit a job or move from one city to another to provide child care. Other parents engineered collaboration between grandmothers based on their
relative convenience and skills. Oftentimes, grandmother care decisions were made by parents by weighing and balancing the consideration(s) and the options they had.

Each one of the considerations was also associated with different orientations of preference for maternal versus paternal grandmother care. When selection was based on grandmothers’ availability and qualifications, parents were equally likely to prefer maternal or paternal grandmother care. The decision between them was made depending on which one of the grandmothers was more available or better qualified as caregiver. When selection was focused on avoiding patrilineal problems, maternal grandmother care was preferred over paternal grandmother care. Moreover, when selection was aimed at creating a multi-caregiver coalition, the participation of both maternal and paternal grandmothers in child care was preferred.

**Grandmothers’ Availability: Maternal Grandmother or Paternal Grandmother?**

Grandmothers’ availability to provide child care constrained parents’ options. The death of a grandmother obviously removed the choice of having that grandmother as caregiver (this was the case for three families in the study). Grandmothers may also be unavailable if they have work commitments, health issues, reside far away geographically, or already provide care for another grandchild. These four factors were the main explanations that parents in the study gave for the unavailability of one of the two grandmothers in the study. Employment precluded 4 non-caregiving paternal grandmothers (12.5%) and 2 non-caregiving maternal grandmothers (8.3%) from providing regular child care to the grandchildren. Moreover, providing care to other grandchildren occupied 5 of the 32 non-caregiving paternal grandmothers (15.6%) and 4 of the 24 non-caregiving maternal grandmothers (16.6%). Notably, among these other
grandchildren, half of them were daughters’ children. This finding suggested that even when the normative alternative (parental grandmother care) existed as an option, some grandmothers still provided care for the daughter’s child instead of the son’s child. Further, poor health conditions caused parents to perceive 8 non-caregiving paternal grandmothers (25%) and 2 non-caregiving maternal grandmothers (8%) as being unable to provide child care. Parents explained that the grandmothers would be too old or too sick to keep up with the intensive physical demands required by infant care. Some also mentioned that they “could not trust [these grandmothers] to take care of the baby” even when they offered their help.

Last, parents also did not consider grandmothers who lived outside of Nanjing (外地) but were not able to move to Nanjing for child-care provision. Such geographical unavailability was the case for 12 non-caregiving paternal grandmothers (37.5%) and 6 non-caregiving maternal grandmothers (25%). Parents unanimously disapproved of sending children away to live with caregiving grandmothers in another city because the all-important parent-child bond would then be hard to maintain. Parents emphasized the positive effects of frequent parent-child interaction on creating such bond. “The baby connects with you if I am always there,” one mother mentioned. “I won’t miss any of my baby’s developmental milestones, and I can always step in to discipline the child when grandmother fails to set boundaries.” Parents suggested the potential for difficulties later in life if an early bond between the parents and child was poorly executed. “The child will eventually return back to your care. If the child was raised up by grandparents, you would not know the child, his personality or other stuff, and he would not be close to you. That will make caretaking and disciplining very difficult.” One mother cited her
husband’s sister as an example: “she was raised by maternal grandmother until coming back to live with her parents at age 3 or 4. She was reluctant to call her parents mom and dad.” In the parents’ generation, it was a common experience for children to be sent away and cared for by grandparents in a different city during early childhood. This was either because their own parents had migrated from rural to urban areas for job opportunities or because there were already more children in the family than they can afford to take care of. By contrast, the current parents’ generation, with only one precious child of their own, desired to cultivate and maintain close ties with their only-children. Many hoped to remain the central and primary caregivers of their children by having children cared for by grandmothers at home or nearby.

Grandmothers with singleton adult children were more likely to be available for child care than the grandmothers who had multiple adult children. Singleton parents faced no competition for family resources, including the resources of grandparent care, because the grandmothers had no other grandchildren to mind. Parents with siblings commonly complained that they did not receive or did not receive as much help with child care from their mothers as they desired. “My mom won’t help me with child care because she has many children,” one mother complained. “She said she does not have the energy to take care of every single one of the grandchildren, and it won’t be fair if she takes care of my child but does not take care of my sibling’s children.”

By contrast, as the sole focus of all their parents’ investment, singleton parents often expressed satisfaction with the concentrated parental help they received with child care. When asked how she came to the decision of arranging maternal grandmother care for her baby, one mother responded: “Because my husband has a little sister who just
graduated from college and has not started working, my in-laws need to work to support their daughter and take care of her.” She added: “my parents, on the other hand, only have me. They don’t have other children to worry about except me. So they come to help me with child care wholeheartedly without reservation (一心想).” In line with many other singletons in their generation (Fong, 2004), singleton mothers in the study often discussed how glad they were that they did not have to compete with siblings for parental resources, in their case, for provision of child care. Singleton mothers were also more likely than singleton fathers to appreciate the concentrated parental support in child care that they received, brought about by the one-child policy. As one mother commented: “now I truly understand the benefits of being the single child. I am really glad that my parents obeyed the one-child policy.”

Grandmother care has also become more available to singleton parents because they generally live close to their singleton adult children. This living arrangement made the grandmothers “convenient,” “natural,” or “expected” caregivers for their grandchildren. This was particularly the case for the singleton mothers in the study. Singleton mothers (50%) were more likely than their non-singleton counterparts (20%) to live with or in close proximity to their natal families before the birth of the child7. Such residential proximity between singleton adult children and their parents could be interpreted as an instrumental convenience for singleton adult children to demonstrate continuous filial obligation to their elder parents. Yet parents revealed that grandparents’ desire to live close to them had less to do with seeking support from adult children.

7 The singleton status of fathers in the study was not associated with their post-marital residence patterns (only 8 singleton and 8 non-singleton fathers resided with or near their parents).
Rather, it was primarily due to grandparents’ strong concerns for singleton adult children’s well-being and their desires to connect with singleton grandchildren. One mother discussed her mother’s concern about her physical well-being as a reason to insist on living with her after she got married: “my mother was so worried that I could not take good care of myself, not to mention taking good care of my future child. You know, our singleton generation relies a lot on the parents, and our parents constantly worry about us.”

Singleton parents also associated grandmothers’ greater availability with better care quality. They assumed that the only grandchildren, like their singleton parents, would be the sole focus of grandmothers’ devotion. Parents reasoned that their children could receive more uninterrupted care or undivided attention from grandmothers with only one grandchild. Grandmothers who needed to rotate between houses to provide care for different grandchildren or who needed to provide simultaneous care for more than one grandchild were, parents’ believed, more likely to be less attentive caregivers.

Parents particularly worried that grandmothers who have multiple grandchildren might selectively invest in different grandchildren depending on their preference. Grandmothers could also invest less in grandchildren whose parent they did not favor and more in their favored adult offspring’s child. In that case, not only the parents’ generation but also the youngest generation had to compete with each other for grandmothers’ favor and involvement. One mother’s response to why she opted not to use paternal grandmother care aptly captured this widely shared concern:

My husband has two older brothers. They both have children, one girl and one boy. My mother-in-law is taking care both of them. Assuming that I entrust my daughter to my in-law’s care, she would not know how to split the chicken thighs among three children! Besides, she already has a grandson and a granddaughter;
my daughter probably won’t be her favorite. I am worried that my daughter would be treated unfairly. Even though my in-laws are kind people, I don’t trust them to take care of my daughter—unlike my parents, who just have me. My mother will give her hundred percent to my daughter because that is her only and precious grandchild. Who else are my parents going to spend all the time and energy on if not her?

This mother speculated that the favoritism that might occur in her high-fertility in-law’s care would not exist in care provided by her mother. This was because her mother was willing and able to concentrate all her love and resources on her only grandchild.

The relative availability of grandmothers with singleton adult children led the singleton parents to have high expectations for the grandmothers’ child-care provision. Parents considered “grandmother providing care to their only adult child’s only child” to be a cultural norm or imperative rather than a favor. Parents often took such grandmother care for granted. This was especially the case when the grandmothers were free from health problems or work commitments.

This sense of a cultural imperative was manifested in one mother’s discussion of her frustration with her child-care arrangement. She was an at-home mother and the sole caregiver of her infant daughter, with assistance provided occasionally by the paternal grandmother. Both the mother and her husband were the only child in their families. As a result, she had high prior expectations for the availability of child-care support from both her and her husband’s families. She perceived her current care arrangement as an unusual and unexpected situation for families with available grandparents like hers:

*My husband and I did not plan ahead to arrange child care before the baby was born...[because] at the time there were three family elders available [for child care]: my dad, mom and mother-in law, all retired. But who knew I would be caught up into this kind of situation after having a kid? I often got angry at home; I never thought that I would be looking after the child by myself! If I’d known this earlier, I definitely would not have had the kid.*
A substantial proportion of grandmothers with singleton adult children were reported to voluntarily choose to leave their lucrative job or sacrifice a comfortable later life to lessen the child-care burdens of their singleton adult children. However, those who did not conform became the target of their singleton adult children’s complaints or resentment. Such sentiments reflected the strong sense of entitlement that singleton adult children in the interviews felt about parental investment.

Indeed, utilizing their own mothers for child care was common for singleton parents in the current study. In the interview sample, 79% of the 38 singleton mothers and 86% of the 21 singleton fathers received child-care support from their own mothers. On the other hand, 56% of the 39 non-singleton mothers and 45% of the 57 non-singleton fathers managed to do so. It is also important to note that in the interviews, mothers were more likely than fathers to be keenly aware of the privilege of singleton status in securing grandmother care. Fathers in the study rarely cited their singleton status as a reason to obtain grandmother care. However, mothers often explicitly interpreted parents’ singleton status (both theirs and their husbands’) as a proxy for grandmothers’ greater availability and willingness to provide child care.

**Grandmothers’ Qualifications: Maternal Grandmother or Paternal Grandmother?**

Another primary consideration in selecting the caregiving grandmothers lies in grandmothers’ capabilities to fulfill children’s developmental needs. Parents understood child-caregiver interactions as directly influencing the quality of the child care and the development of the child. They were also keenly aware that caregiving grandmothers spent a great amount of time with children during children’s waking hours. Given that the stakes are high in deciding which grandmother to involve as the caregiver, parents in
the study followed a skill-based rather than lineage-dependent logic of caregiver selection.

The majority of the parents in the study, including 64% of the mothers and 53% of the fathers, shared this logic of caregiver selection. Only two out of the 120 parents mentioned that they chose the paternal grandmother as caregiver because “the child is a member of father’s family (他们家的人)” and “this is a traditionally appropriate way.” All the other parents prioritized the needs of the children and the qualifications of grandmothers to meet these needs over the traditional patrilineal practice when making child-care decisions. One mother’s comment captures the essence of this perspective:

*It is the Chinese traditional concept that the birth of child is a business of her father’s family, so it is reasonable to have her paternal grandmother take care of her. But our generation has different ideas. I think it should be the case that which side [i.e., which grandmothers] provides better child care should be involved. The reality is that I think my daughter would benefit more if raised by my mother than my mother-in-law.*

Concerns regarding grandmothers’ child-care qualifications were warranted because the grandparents’ generation overall had much lower levels of education and much greater variation in their education levels than the parents’ generation. The grandparents’ generation in the study experienced China’s Cultural Revolution as teenagers or young adults. As such, they are generally referred to as China’s “lost generation” (Bonnin, 2013). During the Cultural Revolution, the normal operation of schools, particularly high schools and colleges, was terminated for years, and privileged urban “intellectual” youth was dispatched to work in the countryside to learn from farmers and workers (Deng & Treiman, 1997). As a result, grandparents with different ages and residences of origin experienced different levels of disruption in their educations. In the Nanjing data, roughly one-third of the grandmothers had either no formal
education or completed primary education. Another third completed middle school education, and the other third completed high school education or above. In contrast, all the parents in the study reported having completed at least a high school degree and more than 80 percent of them had completed at least a college degree.

Partly because of this historical context, the grandparents’ generation also invested much less time and energy in child-rearing than the current parents’ generation. This was because during and shortly after the Cultural Revolution being an at-home mother and taking responsibility for child care was not acknowledged and even deemed selfish, in that it did not contribute to social production (Jacka, 1997; Short et al., 2002). Many grandmothers were not the primary caregivers of the parents’ generation when they were infants. Approximately 73 percent of the parents in the interview sample spent their infancy in grandmother care, relative care, sibling care, or center care. Although provided with limited options, parents often weighed their options, compared maternal and paternal grandmothers on their qualifications and decided which of the two grandmothers could better fulfill children’s basic, cognitive and social needs.

Skills to meet basic needs. Because many grandmothers were not the primary caregivers of their children when they were infants, not all grandmothers in the study had basic knowledge about or experience with infant care. For some parents, grandmothers’ prior experiences in child-rearing, either gained from raising their own children (the parents’ generation) or from raising their other grandchildren, were particularly sought-after qualifications. These parents expected that grandmothers who had experience caring for young children would at least not be ignorant of basic routines of infant care. They also hoped that, ideally, these grandmothers would bring with them child-rearing skills,
knowledge, and hands-on experiences that would benefit the parents as well as the children. One mother stressed the benefit of involving her experienced mother in the care of her newborn:

*Particularly in the first couple months, I was afraid to handle a little baby who was so little, soft and slippery....Luckily, my mom had taken care of her other two grandchildren since they were little....She knew how to put on diapers and how to bathe the baby...and she did everything.*

Although some parents spoke of the advantages of deploying experienced grandmothers, others preferred the malleability of inexperienced grandmothers. The young parents were influenced by the post-Mao modernization project that promoted scientific knowledge related to childrearing. Through mass media and various education classes sponsored by the Chinese government and hospitals, young parents are taught to rely heavily on advice books, experts, and scientific evidence for childcare guidance. This practice of "scientifically guided childrearing (科学育儿)" was strongly embraced by 98% of parents in the current study. In some parents’ opinion, inexperienced grandmothers would be more willing and able at internalizing the practices of "scientifically guided child-rearing" (科学育儿) than the experienced grandmothers who would tend to rely on their "hands-on experience" or "traditional wisdom".

Having limited experience and knowledge about child-rearing, inexperienced grandparents often need to consult experts and advice literature for guidelines on nutrition and illnesses. One mother mentioned that she decided to choose the paternal grandmother as the caregiver because she was very studious. Like the parent generation, this grandmother acquired child-rearing knowledge from books: “She reads the child-rearing books I brought home and discusses with me what the child should eat or do at this age.” The fact that “paternal grandmother’s child-rearing decisions all come from...
books, like *Baby’s Nutrition Guidelines from 0 to 3*” made the mother “very reassured to entrust the child to the hands of paternal grandmother” when she was absent.

In contrast, parents found that it was hard to communicate with experienced grandmothers who often perceived book knowledge as less reliable, and trusted only their grounded, experiential knowledge. One father recounted his disagreement with paternal grandparents on what constitutes an appropriate diet for infants. He offered the book theory that “it is not safe to introduce salt to baby’s diet before age one because it can be harmful to his [the infant’s] immature kidneys.” However, the paternal grandmother ignored it because she perceived book knowledge to be one step removed from the hands-on experience she had. “How are the boys supposed to gain strength without eating salt?” the father recalled the grandmother’s response. “I fed you salt when you were little and you turned out well!”

Lack of child-rearing experiences thus serves as a proxy for malleability—the potential to learn, understand, support, and even share the parent generation’s values and styles of approaching child care. A grandmother without child-rearing experiences is seen as being more “interested in wanting to care for the baby the way we [parents] want the baby cared for.” In contrast, an experienced grandmother might not be so malleable. A sense of solidarity in the project of caring for the children, therefore, would be hard to achieve.

**Skills to meet cognitive needs.** Keenly aware of the latest research findings pointing to the period from birth to age three as being critical for children’s brain development, parents placed great emphasis on their infants’ cognitive learning. Voicing a sentiment shared by almost all the parents in the study, one mother said:
I believe that early learning (早教) is very important, especially for children under age three, [because] early cognitive learning (智力开发) has a lifelong impact on her development and we should do everything we could to support her [the infant’s] learning.

Like most parents, she expressed the fear of failing to provide appropriate stimulation to her infant daughter at this “critical period” (三岁前的敏感时期). She said: “I would have huge regret if she fails to complete developmental milestones or develop certain skills that are appropriate to children of her age and that is all because we did not know [what to train her] or did not provide sufficient training!”

Such fears about early milestones made grandparents’ education level a particularly crucial criterion when parents assessed grandparents’ qualifications as caregivers. Grandmothers with higher levels of education or more years of schooling were preferred caregivers because educational level served as a proxy for better support for learning. Some worried that poorly educated grandmothers would not able to provide sufficient cognitive learning (教地少). One mother echoed the concerns of many others when she was asked why she did not consider her own mother as a caregiver. She replied:

Because my mother does not have much schooling, [If I entrust my baby to her] she would probably just let the baby sit there or crawl around, but you can’t expect her to teach the baby anything. How can she possibly teach the child if herself does know how to read and play those games?

Others were anxious that poorly educated grandmothers would fail to provide proper cognitive learning (教错了). One said, “We are afraid that…[because] his paternal grandmother does not have much education and only speaks dialect…maybe…what she offers to teach the child would be wrong.” One father observed, “taking pronunciation as an example, she pronounces shu as chu. The baby would pick up such wrong
pronunciation very quickly.” He argued, “It would not be good if my son does not hear proper Mandarin in the ages where he just starts learning how to talk.”

Parents shared the fear that if their babies were not exposed to sufficient or proper cognitive stimulation, they would fall behind academically before reaching school age. It was common for parents in the study to compare their children with peers on cognitive abilities and language skills. They often worried whether their babies had learned enough or were as intellectually capable as their peers. Most believed that caregiving grandmothers with well-educated and trained backgrounds (e.g., educators, teachers) would prepare them to organize structured learning/play and initiate interactions that support cognitive learning. They believed that these activities would help develop children’s skills and attributes, ensuring them a competitive edge. As one mother commented, “It will ultimately impact her school performance if we had her raised by paternal grandmother who is less educated than her maternal grandmother.” She added, “My daughter would not have the views nor the language environment that she is having now and would fall behind other kids when she goes to kindergarten.”

**Skills to meet social needs.** Parents in the study repeatedly and emphatically spoke of the importance of their singleton children learning how to care for others and make friends. They worried that, having missed out on the opportunity to experience reciprocal relationships with siblings, their singleton children would “feel lonely.” They also worried about a lack of preparation in sophisticated interpersonal skills that would enable them to deal with complex social relationships as adults. Parents were concerned that their children would become self-aggrandizing (自我为中), selfish (自私), willful
(任性) and aloof (孤僻) if they only experienced interactions with caregiving adults. One father said:

*Because the adults are all making the singleton children the center of their world, they always accommodate [迁就] and give in to [让着] the child. So the child only learns how to take, but does not know how to give, be considerate, and help others. Only being around other children of their age, will they learn the rules of give-and-take, sharing, and team working?*

Parents stressed the pressing need for children to socialize with their peers to compensate for the lack of sibling interactions, starting at infancy. Parents believed that the more the children interact with peers, the more likely they will develop sociable personalities and internalize social guidelines that would enable them to attain socioeconomic success. One mother remarked, “if the child does not have enough outdoor time to meet her peers now, she will later be too shy to make friends in school or to win teacher’s favoritism.”

Parents also found peer interactions to be vital to their children’s emotional well-being. Many mentioned that the singleton generation would not have any siblings and few kin of their generation to rely on when facing hardship. They concluded that this would mean their children’s peers would be the main source of favor exchange, assistance, and consolation.

All the parents in the study expected caregiving grandparents to take the infants outside to play with other children in the same neighborhood or nearby parks at least twice a day, once in the morning and once in the afternoon. They spoke of preferring a younger grandmother whose physical condition would not limit her mobility and would allow her to keep up with an active toddler. Parents also believed that, for optimal social development during infancy and toddlerhood, their children needed a caregiver who would not only “take them to many places” but also would “teach them to socialize well
“with other children.” One mother revealed that she chose the paternal grandmother as caretaker because of her sociable personality:

*Her paternal grandmother is a kind of self-invited type [自来熟] of person: When she sees people, she always initiates chatting, engaging people in conversation. I think that really benefits her [the child], particularly because I am not outgoing by nature and I cannot really teach her that.*

Parents sought to ensure that their singleton children consumed healthy and nutritious food, received age-appropriate cognitive stimulation, and gained opportunities to learn to interact properly with peers and adults. Toward this goal, the parents took great care to select caregiving grandmothers whom they believed were mostly likely to meet those developmental needs. Such care selection and arrangement made the parents more confident that their children would suffer no disadvantages as a result of the parents’ decision to continue pursuing their careers. Thus, parents’ decision to compare grandmothers on their caregiving qualifications rather than on their respective lineage has an important consequence: Maternal grandmothers have equal probability as paternal grandmothers of being chosen for child care.

**Avoiding Patrilineal Problems: Maternal Grandmother, Not Paternal Grandmother**

Child-care selection based on grandmothers’ availability and qualifications led parents to be equally likely to choose maternal or paternal grandmothers as caregivers. However, parents’ desire to avoid patrilineal problems that might arise from paternal grandmother care led to a general preference for maternal grandmother care. One of the problems inherent in the paternal grandmother care arrangement lies in the mother-/daughter-in-law conflict (婆媳 enjoyable). This conflict has its roots in the Confucian ideology that dictates a hierarchy of relationships based on gender and generation (Ho,
Traditionally, mothers-in-law held complete authority over daughters-in-law and directly supervised their parenting. Daughters-in-law were assigned to positions of near servitude with respect to mothers-in-law and were expected to obey them unconditionally (Du, 2013; Cong & Silverstein, 2008). Increases in women’s education and employment and declines in patrilocal pattern have lessened the in-laws’ power and dominance over daughters-in-law. As a result, the generation of women that grew up under market reforms, including the mothers in the study, had fewer reasons to obey their in-laws (Du, 2013). Yet the traditional cultural model of role/age-based hierarchy and potential tension in the mother/daughter-in-law relationship seemed to linger (Cong & Silverstein, 2008; Song, 2009).

Mothers in the study often contrasted their intimate and balanced/egalitarian relationships with their mothers to the distant and hierarchical relationships with their mothers-in-law. Avoiding the conflictual mother/daughter-in-law relationship was one of the major reasons why they involved maternal grandmothers in child care. “The relationship between mother-in-law/daughter-in-law is very tricky…too complicated to deal with,” one mother remarked. “It won’t be as comfortable and convenient as having my mother provide child care.”

Fathers, likewise, explained that their general preference for the maternal grandmother was driven by the benefits they enjoyed from the close and harmonious relationships between the mothers and the maternal grandmothers. “At least my wife and her mother won’t have relational problems,” one father said frankly. “It will give me a big headache if I need to mediate the conflicts between my wife and my mother.”
Parents worried that the mother/daughter-in-law relationship would become more tense if they provided child care together. This was because foreseeable intergenerational parenting conflicts would exacerbate the conflicts endemic in the traditional mother-in-law/daughter-in-law relationship. Coming from different families, regions, even social classes, mothers assumed that they were less likely to share parenting values, styles, and practices with mothers-in-law than with their own mothers. As one mother explained, “We are so different in many aspects of habits and styles, and I do not trust my mother-in-law with child care.” Moreover, the shift of post-marital residence from patrilocal to neolocal has made it less likely for daughters- and mothers-in-law to achieve mutual understanding and develop effective communication strategies before they begin providing child care. One mother claimed, “I do not really know my in-law. I do not know her limits. If I let my mother-in-law help with child care, I would worry a lot because I don’t know the proper ways to make criticism or offer suggestions without upsetting her.” Some mothers found that it would be hard to reconcile being a responsible mother (insisting certain child-rearing practices despite mothers-in-law’s resistance/objection) with being an obedient daughter-in-law (accommodating mothers-in-law’s child-rearing practices at the expense of child’s welfare). One mother said, “It is really hard [to figure out] how to ask the paternal grandmother to follow my idea, how to instruct her as a younger generation [晚辈].” Such an awareness of the difficulty of actualizing preferred parenting styles within a hierarchical intergenerational relationship were shared by many other mothers in the study.

In contrast, mothers often identified a strong sense of cohesiveness within the mother and maternal grandmother relationships. In these relationships, “it is much easier
to communicate with your own mother who you have been living long enough to know well.” Mothers suggested that “when there is indeed a problem, we did not have to worry about how to communicate in terms of phrasing.” Moreover, “even if we had argument, that will not affect our relationships because we are mother and daughter.” Mothers considered the emotional intimacy and sentimental bonds shared by mother and daughter, part of what Margery Wolf (1972) called the “uterine family,” to be “natural.”

Concerns about the historical yet still powerful hierarchical relationship between daughters- and mothers-in-law has led these parents to prefer maternal grandmother care. Of the 23 families that used paternal grandmother care, 61% expressed similar concerns. They stated that they chose paternal grandmother care because their preferred maternal grandmother care was not available to them. Sixty-five percent of the 34 families who currently deployed maternal grandmother care admitted that concerns about the mother-in-law/daughter-in-law relationship were a major reason why they asked the maternal grandmother to be the child-care provider.

Another problem associated with paternal grandmother care was that such an arrangement was likely to discourage fathers’ participation in child care. One mother explained her decision to exclude the paternal grandmother in this way:

_I have asked around. In those families where paternal grandmothers helped with child care, fathers usually do not do much child-care work. I want to involve her father to take care of the child together with me, creating an opportunity for him to get to know his daughter._

Fathers’ involvement might be particularly important for the mothers in the study sample. This might be so because parents had delegated so much of the child care that takes place during their work hours to grandparents. The majority of the mothers thus sought to
increase their husband’s participation at the end of the workday so that the fathers won’t be “a stranger who barely knows his child.”

While Chinese fathers tend to be more involved with their children than previous generations, their levels of involvement are still lower than that of mothers, especially on the share of routine physical care for infants (Li & Lamb, 2013; Liu, 1995; Xu & Zhang, 2008; Xia, Xie, Zhou, Defrain & Combs, 2004). Similarly, mothers in the study found that fathers were less likely to be self-motivated to engage in infant care unless they were prompted or requested to do so. Such requests were even harder to deliver when paternal grandmothers were involved in child care. One mother recalled her experience working with paternal grandmother:

*Paternal grandmother always finishes the child-care task I intentionally reserve for my husband. What can I say? I wish my husband could have more chance to interact with the baby by taking more care of her. Even sometimes my husband feels like to do it or was about to do it, his mother would do it for him instead. She felt sorry [心疼] for her son, won’t let him touch any child-care work.*

Another mother was surprised to discover that her “engaging, helpful, independent husband” soon became “lazy, inactive” and began “depending entirely on his mother to do all the work” once the paternal grandmother began caring for their child. She later decided to ask for help from the maternal grandmother instead. She did this, “so that he would feel uneasy if not helping out my mother.” She added, “I did not tell him the intention behind my decision, but the actual reason to switch to maternal grandmother care is that I want to engage him more, to train him to be a competent caretaker. We take care of our son together and that’s what makes a family.” Studies of grandmother care in China and other Asian societies (Lee and Bauer, 2013, Sun, 2008a, Chen, 2004) have suggested that grandmother care seemed to perpetuate the traditional gendered allocation
of housework by filling in more for fathers than for mothers. The findings in the current study seem to further suggest that such replacement was more salient in paternal grandmother care arrangements, where mothers had less power to negotiate for an equal share of child care with the husband.

Yet most mothers expected their husband to be equal sharers in child care. For some mothers, fathers’ equal share was one of the parental responsibilities that fathers should assume. “Fathers and mothers should not be distinguished by their child-care responsibilities,” one mother stressed. “Kids need dad’s love just as much as mom’s. It should not be that way that because dad focuses more on his career and shoulders more family financial responsibility. He can then shed responsibility for child care.” Another mother said that encouraging the father’s involvement was a strategy that enhances and strengthens fathering responsibility: “if a father does not physically accompany the child and take care of him, his fathering responsibility and affection towards the child would be weak. Only being physically present could a father feel a strong sense of responsibility as a father and develop a close relationship with the child.”

For other mothers, paternal involvement was believed to benefit children developmentally. Mothers often compared their “soft, gentle, and protective” characteristics to fathers’ generally “playful, physical, and risk-taking” personalities. From this, they concluded that mothers cannot replace what fathers can provide to the children. They also concluded that children can benefit from father-child interaction by “learning to be courageous” and “developing strong and independent personality.” Parents, mothers and fathers alike, found the practical advantages of father’s involvement to be even more important for boys, who would be deprived of a positive male role model.
if raised primarily by female caretakers, such as mothers and grandmothers. “I wish my
son could spend more time with his father,” one mother worried. “I am afraid that if he
spends too much time with me and his grandmother, he would grow up to be feminine,
not masculine enough.”

The consideration to avoid the problems of conflictual mother/daughter in-law
relationship and the fathers’ disengagement that might arise in paternal grandmother care
led many parents to prefer maternal grandmother care. The intimate relationships
between mothers and maternal grandmothers made mothers feel more comfortable in
negotiating for their preferred child-rearing practices and required no mediating role from
the fathers. Maternal grandmother care was also perceived to encourage greater paternal
involvement than did paternal grandmother care. As a result, children in maternal
grandmother care, boys in particular, could benefit more from interacting with their
fathers. Given that maternal grandmothers were perceived to be better than paternal
grandmothers at collaborating with mothers and fathers in providing child care, maternal
grandmothers became more appealing candidates than paternal grandmothers as
caregivers.

Multi-Caregiver Ideal: Maternal Grandmother and Paternal Grandmother

Rather than seeing maternal and paternal grandmothers as rivals, some parents
sought potential collaborations between them. Eighteen of the 77 families in the
interview sample (23%) utilized both maternal and paternal grandmothers’ resources to
create multi-caregiver coalitions. In such coalitions, maternal and paternal grandmothers
provided either simultaneous or alternating care for the child. According to parents, these
c Coalitions allow each grandmother to work at their peak performance during their time
with the infants and to pool grandmothers’ skills, strengthen, and expertise. As believers in the child-rearing advice literature and experts, the parents in the study were convinced that their children deserved and required, at all times, high quality care. Maternal and paternal grandmothers working in partnership made it possible to achieve this ideal.

**Simultaneous care arrangement.** Half of the 18 families deployed both maternal and paternal grandmothers to provide simultaneous care for the child. This care was provided either at the child’s home (n=7) or at one of the grandmothers’ homes (n=2). Parents in these families agreed that “child care is too much work for one person to do and to do it well.” One father commented: “It is not realistic to just have one grandmother take care of the child. She needs to play with the child, accompany the child all the time while [she] still needs to cook and do other chores. It would be overwhelming for just one grandmother.” Similarly, another mother added, “with so much child-care work for just one grandmother to do, one can only expect the care quality to be OK, not good.”

As these parents revealed in the interviews, they defined high-quality child care as entailing two essential components. One component involves what parents often referred to as “accompanying this child and never leaving him by himself” or what Folbre (2006) called “direct care” work that “involves a process of personal and emotional engagement” with the child (p. 187). This care component requires a grandmother to be constantly present at the infant’s side to attend to and respond to the child’s needs. The grandmother must make certain that the child—as an active crawler and/or walker—does not engage in any exploratory behaviors that might lead to injuries.

The second care component concerns “indirect care” activities, such as preparing meals, doing laundry and cleaning, which provide support for direct care (Folbre, 2006).
Parents particularly perceived the preparation of balanced meals for young children as an indicator of quality infant care. Exclusive breastfeeding in the first year was an uncommon practice for mothers in this study. It is also uncommon for Chinese mothers of the same generation in many other cities (e.g., Xu et al., 2006; Xu et al., 2007; Qiu et al., 2007; Wang, Wang & Kang, 2005). By 14 months, all the infants in the study were receiving a small amount of infant formula. They were receiving most of their nutrition from solid foods, such as porridge, steamed eggs, and noodles cooked with fish soup or pork rib soup as well as wonton with fish and shrimp mixture as filling. All of these are traditional Chinese foods that require complex procedures of preparation. As a result, the grandmother who cooks for the infants must spend a tremendous amount of time preparing infant food and so they can serve fresh infant meals and snacks every three hours.

Having two grandmothers involved in child care permitted one grandmother to focus on the “direct care” work and the other on the “indirect care” activities. The aim of simultaneous care was to ensure quality of care by channeling each grandmothers’ resources toward a single rather than multiple tasks or for a short rather than long time.

**Alternating care arrangement.** The children in the other nine families received alternating care from maternal and paternal grandmothers. In some families, maternal and paternal grandmothers came to the child’s home and provided care on different days of the week. In other families, children rotated between maternal and paternal grandmothers, staying a few days to a few weeks in each grandmother’s household. Some parents mentioned that the alternating care arrangement was a compromise that fulfilled both grandparents’ desires/needs to establish distinctive relationships with the grandchild by
providing care. However, most parents highlighted the arrangement’s function as to provide children with quality care in rotating shifts.

Parents believed that high-quality care required caregivers to be consistently attentive, involved, and active. They understood that meeting these demands could be strenuous, tedious, and physically taxing on grandmothers whose health was declining. One father revealed that he adopted alternating care between maternal and paternal grandmothers because “neither grandmother’s physical condition would allow them to handle the exclusive care.” Another father shared a similar view in a separate interview: “both maternal and paternal grandmothers wanted to take care of our daughter, but we wanted them to take turns.” He explained that this was “because it would be too tiring for one grandmother to take care of the child well. Neither of them has enough energy anyway…When one person is very tired, just like when we ourselves are very tired, we would not be able to take care of the child very well.” Parents worried that maternal or paternal grandmother care alone might compromise the quality of child care. They therefore found that the child was better served to have two grandmothers at peak performance during their shifts, as opposed to a single grandmother who may be burned out.

For some families, alternating between maternal and paternal grandmother care was a strategy to intentionally pool grandmothers’ strength and experiences. Doing so enabled them to meet children’s developmental needs across physical, intellectual, and social dimensions. One mother offered this explanation for shuffling her daughter between maternal and paternal grandmother care periodically:

*Her paternal grandmother takes care of her in a very casual way. Unlike my mother who always pays close attention to my daughter’s nutrient intakes,*
hygiene, and dressing, her paternal grandmother does not even prepare infant meals separately from adult meal. It is very hard for my daughter to eat with only a few teeth.

However, at the same time, this mother valued the “freedom” and “autonomy” that came with this relaxed style of child-rearing. This was especially the case when she compared the relaxed child-rearing style with the maternal grandmother’s child-rearing approach: “Her paternal grandmother gives her plenty, huge freedom to do what she wants and what she likes….But my mother always says to my daughter, ‘don’t touch this, don’t touch that’, putting limits on these things, even though they are not dangerous.” On the one hand, this mother disapproved how her own mother’s “carefulness” had restricted her daughter’s behavior. On the other hand, she appreciated how her mother’s “carefulness” led her to prepare balanced meal and hygienic environment for her daughter. Similarly, she valued the paternal grandmother’s relaxed approach to child-rearing because she felt it cultivated her daughter’s independence. However, she also worried that too much relaxation may lead to insufficient attention paid to her daughter’s nutrition and safety issues. The mother concluded that alternating care between maternal and paternal grandmothers might well help to achieve a balance.

Similarly, another mother mentioned that it was troublesome yet necessary to use alternating care because each grandmother was able to provide her son with different yet essential “developmental things”:

*His paternal grandmother does not teach him much, but she is very good at developing his motor skills. Perhaps precisely because my son has no other things to attend to when he was in paternal grandmother’s care, he can focus on practicing crawling, walking and feeding himself.*

She discovered that the maternal grandmother’s interaction styles were just the opposite: “Paternal grandmother is always like, ‘let’s practice walking’, while my mother is always
like ‘let’s read, do some math, build blocks’. My mother pays a lot of attention to his intellectual development, but she could care less about training his motor skills.”

Understanding that “mastery motor skills will allow him with greater independence” and that “intellectual stimulation at age 0-3 can help brain to develop”, this mother perceived alternating care to be a solution for her son to “get the good sides of both”.

Thus, some parents employed both maternal and paternal grandmothers to provide care in rotating shifts. Other parents employed both maternal and paternal grandmothers to provide care in complementary child-care styles. Either way, maternal and paternal grandmothers were no longer perceived as competitors in this multi-caregiver coalition ideal. Rather, they were collaborators. Because parents embraced this multi-caregiver ideal, both maternal and paternal grandmothers were welcomed into the project of child care to assist and supplement each other.

Such a multi-caregiver ideal, particularly the simultaneous care arrangement is a unique and important child-care arrangement in China. It is made possible largely by China’s one-child policy and is rarely found in other societies (e.g., NICHD, 1997). Chinese singletons are “emotionally priceless” and “economically valuable” to their parents and grandparents. They thereby become the focus of care by the multiple adults in their lives (Fong, 2004, p. 127). In addition, the “4-2-1” family structure generated by the one-child-policy made simultaneous care practically feasible. This was due to the increased availability of up to four grandparents (six close relatives in total) to provide care for a single child.

**Discussion**
The main goal of the current study is to explore the transformation of patrilineal practice in grandparents’ infant care in China. This is the first study that examines the changing significance of family lineage in shaping parents’ grandparent care decisions. My findings on parents’ criteria for selection and preferred care arrangements suggest a trend: parents show a preference for and reliance on maternal grandmothers who were available, qualified, and collaborative in providing child-care assistance.

Both this transformation of the norms in child-care patterns and this increased use of maternal grandmother care reflect the weakening of patrilineality in Chinese society resulting from China’s rapid modernization. This section will discuss the three major factors that contribute to the shift of grandparent care norms: (1) the greater influence of interpersonal relationships on intergenerational interactions because parental power from patrilineage has declined; (2) women’s increased power in connecting with natal families due to their greater educational and economic leverage and singleton status; and (3) a more skill-based and child-centered (rather than lineage-determined) care choice, which emerged with the one-child-policy. This care choice called for paternal and maternal grandmothers to compare or combine resources.

Increased Importance of the Intergenerational Relationship in Guiding Child Care Decisions

Increasingly, maternal grandmothers in urban China are supporting daughters’ families by providing care for grandchildren. This upward trend is associated with the decreased parental power paternal grandparents have over sons and daughters-in-law. In the traditional patriarchal system, the elders had absolute authority and control over family’s property and enjoyed deference paid by children and daughters-in-law (Lan & Fong 1999; Wolf, 1968). A major consequence brought about by the socialist state’s
policies of rapid modernization has been the shift of power from the elders to the young. Urbanization and socialist policies deprived Chinese elders of the authority they previously possessed over housing, property and the ritual power that had once reinforced the intergenerational solidarity along the patrilineal line (Davis & Harrell, 1993; Yan, 2003). The younger generation’s increased educational opportunities and job options, which gave rise to their independent and higher economic and social position, further undermined the position of the elders within the family (Fong, 2004; Sun & Wang, 2013).

The younger generation is now able to choose whether and with whom intergenerational interactions are maintained or strengthened, as observed in this study. There is evidence of this trend in the literature on Chinese young peoples’ practice of filial piety over the last decade (Croll, 2006; Guo, 2011). The younger generation in both urban and rural China tended to provide filial devotion to elders who maintained a good relationship with the married couples. This positive relationship was notably cultivated by financing the housing and/or marriage or assisting with household chores and/or childcare, regardless of lineage. (Sung, 2006; Shi, 2009). Such conditional and non-lineage based practices of intergenerational interaction were also manifested in the context of childcare in the current study. Given that childcare is a joint mission of parents and grandparents in which intergenerational conflict is likely to arise, the quality and strength of intergenerational ties is particularly salient in guiding parents’ child care decisions.

The mothers in the current study almost always preferred their own mothers as caregivers when comparing maternal versus paternal grandmothers. Most mothers tried to
avoid paternal grandmother care, concerned that the potential disagreement over parenting would exacerbate the already contentious nature of the traditional mother-in-law/daughter-in-law relationship. Although these conflicts were still likely to occur between mothers and maternal grandmothers, mothers generally felt more comfortable communicating and negotiating with their own mothers without worrying that such confrontation would undermine the relationship.

Singleton mothers particularly emphasized the close ties with their mothers, and were eager to have their mothers play a central role in the rearing of their only children. These care arrangements provided concerned mothers the comfort and security of knowing their child would receive equal parental investment and devotion as the singleton mothers had received from their own parents. They also provided maternal grandmothers the opportunity to establish and maintain closer relationships with their only grandchildren.

Likewise, fathers expected less conflict in maternal grandmother care. Involving paternal grandmothers inevitably required extra effort from fathers, who stepped into a mediating role when conflicts arose between mother and paternal grandmother. Thus, this became a less appealing choice for some fathers. The fathers in the study, however, never expressed such ambivalence or resistance towards maternal grandmother care. This attitude may reflect a cultural perspective that maternal grandmothers have not been traditionally expected to contribute to daughters’ families (Shi, 2009). Thus, their willingness to assist with childcare was greatly appreciated by fathers and possibly interpreted as a sacrifice out of love.
Furthermore, as fathers weren’t traditionally prescribed with any child care duties, maternal grandmothers had fewer expectations for fathers’ involvement than paternal grandmothers would have for their daughters-in-law (Ho, 1989). Consequently, parents expected less conflicts regarding childcare to arise in maternal grandmother and father dyads. In general, both mothers and fathers perceived greater cohesiveness in their interactions with maternal grandmothers. When parents were freed from patrilineal controls over kinship interactions, maternal grandmothers’ harmonious relationships with fathers and mothers facilitated parents’ use of maternal grandmother care.

Women’s Increased Child-care Decision-making Power in Neolocal and Natal Families

The decrease in parental control over the younger generation has weakened the patrilineal kinship interaction, extending into the traditional practice of paternal grandparent care. Concurrently, the empowerment of women within the family has increased the likelihood of utilizing the maternal grandmother care preferred by mothers. Women’s preference for interacting with their own mothers over their mothers-in-law can date back to pre-revolution China (Wolf, 1972; Lan & Fong, 1999, Yan, 2003). However, at that time women were not able to make that choice. The expansion of employment and educational opportunities for women after the 1949 revolution has improved women’s status in marriage (Fong, 2004; Shi, 2009). This is in line with relative resources theory (Blood & Wolfe, 1960; Lundberg & Pollack, 1996), which suggests that when women contribute more resources to the marriage, they experience an associated increase in influence on familial decision-making (e.g. Sun, 2005; Pimentel & Liu, 2004).

In the current sample, which considers relatively high levels of social economic status, over 85 percent of the mothers participated in the labor force when their infants
were 14 months old. Among them, approximately 40 percent (123 mothers in the survey sample and 31 mothers in the interview sample) earned as much as or more than their husbands. With regard to education levels, over 80 percent of the mothers in the survey sample and 84 percent of the mothers in the interview sample had equal or higher educational attainment than their husbands. The mothers’ great bargaining power in family affairs might be closely associated with their competitive earning power and educational attainment relative to their spouses. Particularly in the case of childcare, it was often the mothers who made decisions on how the child should be cared for and who should provide care. Fathers in the study concurred that mothers should make the final decision on which grandmother she preferred to interact with, perhaps because mothers served as the primary caregiver and communicator with caregiving grandmothers. Such decision-making power allowed mothers to negotiate for their preferred, yet non-normative, maternal grandparent care.

Moreover, a shift of post-marital residence from patrilocal to neolocal has increased mothers’ negotiating power in using maternal grandparent care. Sixty-three out of the 77 families (81.8%) in the interview sample adopted neolocality after marriage. Neolocality allowed married couples to function as independent domestic and economic units unlike patrilocality (Yan, 2003; Zhang, 2000). Since marriage in China is now based on free choice and mutual attraction (rather than arranged marriage which was abolished in 1950 under The Marriage Law), the neolocal family unit is the main place where emotional exchange and adjustment between husbands and wives takes place (Diamant, 2000). The husband-wife relationship also tends to supersede the parent-adult child relationship, as extended kin can exert less control and influence over neolocal
couples. Increasingly empowered in the marital household, a wife’s preference for joint childcare with her own parents is more likely to be accommodated. Post-marital neolocal residence also sets a structural precondition for parents to have broader care choices. Neolocality does not limit the parents to paternal grandmother care as patrilocality would. Parents with neolocal residence can choose to send their child to maternal or paternal grandmother for childcare, or have the maternal or paternal grandmother visit or move into the child’s household to provide care, depending on the amount of time and living space they can spare.

The one-child policy has also empowered singleton Nanjing mothers to receive unprecedented parental support for childcare from their natal families. Having no brothers to compete for parental resources, the mothers born after China’s one-child policy grew up to be the sole focus of parents’ investment (Fong, 2002; 2004). The findings of this study suggested that singleton mothers enjoyed historically unprecedented childcare assistance from their parents after marriage. The expectations for and actual practices of maternal grandmother care among singleton mothers may be explained by several reasons. First, maternal grandmothers were more available for childcare because the singleton mothers had no siblings to compete for parental support on childcare. Second, assisting with childcare was a means to continue supporting their singleton daughters’ well-being in which maternal grandmothers had long invested. Finally, providing childcare also allowed maternal grandmothers to establish a close tie with their only grandchildren. Having only one child, the maternal grandmothers with singleton daughters were generally available and willing to help their daughters with child care. Being the only child in the family, the singleton daughters had taken for
granted the intensive parental investment once reserved for boys but now afforded them by the one-child policy.

The heavy reliance on maternal grandmother care in the current sample may be partly explained by the high proportion of singleton mothers, relative to singleton fathers, in the study. It is surprising that 49 percent of the mothers and 25 percent of the fathers in our sample had no siblings. Given the strong preference for sons in China, Chinese parents who only have a daughter may be motivated to keep trying for more children until they finally have a son. If that is the case, a greater percentage of the women in our sample would be expected to have siblings than the men. However, this is not reflected in our data; in fact, a greater percentage of women are an only-child than men are. A possible explanation for this unexpected finding is that the women in our sample were more likely than the men to be born after the one-child policy was made mandatory and implemented in 1979.

**Shift from Lineage-Determined to Skill- and Child-Based Care Choice**

The increase in maternal grandmothers’ participation in childcare is also closely associated with the increasingly skill- and child-centered parenting practices in China brought about by the implementation of the one-child policy. The social significance of the children is increasingly recognized as the number of children per family has been limited by the birth control policy (Ho, 1989; Goh, 2006; Feng, Poston & Wang, 2014). Parents of singleton children have been found to be more likely than other parents to emphasize having children as the most meaningful and major life aspiration and fulfillment (Chow & Chen, 1994). They also tend to attach a high priority to their singleton children and perceive children as embodying the only hope in life (Fong, 2002;
Being “economically valuable” and “emotionally priceless” to their parents, singleton children become the sole focus of parents’ love, needs, hope and investment (Fong, 2004, p.127). Public recognition of single children as a generation of “little suns” or “little emperors” denotes the central position they occupy in families (Wang & Fong, 2009; Fong, 2004). All members of the family, including parents and grandparents, revolve their lives around caring for the singleton children (Feng, et al, 2014). This child-centered orientation has become a standard feature of contemporary childrearing practices adhered by parents of the singleton generation in China (e.g. Goh, 2009), including the parents in the current study.

Nanjing parents in this study adopted a child-centered approach when making infant care arrangements. Rather than framing grandparent care as an affordable, easy, and convenient care option for parents, parents highlighted grandparent care as a more safe, nurturing and trustworthy arrangement for their infants than any other type of non-parental care, such as nanny care or center care. Moreover, parents in the study did not simply entrust child care to the grandmothers who were most convenient or available to them. Although parents did talk about using grandmothers’ availability as criterion for selection, they also simultaneously explained why such availability and convenience might enhance child-care quality. For example, parents’ preference for the geographic proximity of grandparents’ residence had the function of facilitating interactions between parents and infants, thereby sustaining the parent-infant bond: it allowed parents to spend less time commuting and more time accompanying the child, and enabled parents to pay frequent visits to the child from work whenever possible. Similarly, parents oftentimes interpreted grandmothers’ lack of work and other obligations as commitment to child
care. That is, grandmothers who were more available were more likely to provide focused and uninterrupted care for the child.

The findings of this study also suggested that such a skill- and child-centered approach, emphasizing caregivers’ devotion, qualifications, and capacity in collaborating with other caregivers, gave maternal grandmothers a chance to be chosen as caregivers. In some families, the skill-centered approach allowed maternal grandmothers to have equal chance as paternal grandmothers when the criterion for caregiver selection became skill-based rather lineage-based. In such cases, parents weighed their options in deciding which of the two grandmothers better fulfilled the developmental needs of the infants.

Maternal grandmothers were compared with paternal grandmothers on dimensions of childcare experience, educational levels and social skills. Whether maternal or paternal grandmothers, parents chose the highest-quality candidates based on their better child care qualifications. In other families, the skill-centered approach led parents to strive for a multi-caregiver ideal, which required maternal grandmothers to work together with paternal grandmothers to provide childcare. For some families, the child-centered approach may increase maternal grandmothers’ chances of being selected for childcare. Parents perceived collaboration with maternal grandmothers would make it easier for their preferred childrearing practices to be realized, or would encourage greater paternal involvement which helped children developmentally. Such partnerships called for both maternal and paternal grandmothers to pool together resources to ensure the best possible care. In general, when selection of the caregiving grandmother was skill- and child-centered rather than longer lineage-focused, maternal grandmothers who were perceived as qualified, collaborative, and dedicated caregivers became compelling candidates.
Conclusion

Research on Chinese modernization documents the decline of the dominance of patrilineal traditional on intergenerational interactions as a result of China’s social, political and economic development. This study contributes to the literature by providing evidence of weakened patrilineality in the area of childcare, which is an important yet virtually unstudied dimension of kinship relations in the previous research. The findings of this study suggest that the pattern of care has shifted from the traditional patrilineal norm, which relied exclusively on paternal grandparent care, to a bilateral interaction that increasingly involves maternal grandparents in childcare assistance. These findings are consistent with the modernization theories (Goode, 1970; Whyte, 1979; 1990) which suggest that the hallmarks of modernization worldwide including urbanization, neolocality, fertility decline, and increased education levels lead to a shift of power from the elders to the young and a weakened control of the kin network over the neolocal family unit. This relative freedom from kinship control prevents the maintenance or formation of a dominant lineage, promoting a more bilinear pattern of kinship interaction (Goode, 1970). The current study suggests that China’s transformed pattern of grandparent care from a patrilineal to a bilateral arrangement might be driven by China’s modernization processes including reinterpreted intergenerational relations, women’s empowerment in decision-making, and modified child care standards as a result of the one-child policy.

Parents’ utilization of maternal grandmother care is powerful evidence of the decline of China’s longstanding patrilineal system, which long ignored maternal grandmother care or treated it as a substitute for the normative paternal grandmother care.
Further, the demand for maternal grandmother care should only increase, with the declaration of the two-child policy in 2015 (Xinhua News Agency, 2015). More bilateral support from both paternal and maternal grandparents might be expected when the demand for childcare doubles in the family. Considering maternal grandparent care as a viable pattern in China, future research should pursue separate analyses of patrilineal- and matrilineal-based childcare to illuminate potentially different dynamics in lineage-based kinship interactions.

This study represents an important first step in identifying parents’ motivation to utilize paternal versus maternal grandmother care and exploring the sociocultural forces that drive parents’ care decisions and preferences. There are limitations, however, with the non-representative nature of the sample. Parents in the study were more highly educated and had higher earnings than the average urban family in Nanjing. Future studies should examine parents’ choices of and preferences for grandparent care in a wider range of urban families as indicated by socioeconomic status. Another limitation of the study is focusing solely on parents’ voices. It would be useful in future research to obtain grandparents’ perspectives on the changing expectations of their involvement in childcare, and their understandings of appropriate/legitimate roles they play in the care of grandchildren. It would be interesting to explore, for example, how paternal grandmothers respond to modified norms that challenge their well established and defined roles in child care, to which they might feel entitled (e.g., do they view it as a declined sense of respect and values or as a relief?). It would also be useful to consider how maternal grandmothers reflect on their newly assumed responsibility (e.g., do they view it as a sacrifice or an opportunity to connect with daughters’ families?). Moreover,
grandmothers’ voices as autonomous agents in negotiation for childcare decisions are missing in this study. Future research investigating grandparents’ accommodation and/or resistance to the changing expectations and definitions of their roles could potentially shed light on power struggles and gendered relations within intergenerational interactions in China.
Appendix A

Interview Protocol Section IV Grandparenting

[Note: If you’ve learned in DAILY ROUTINE that another senior person plays parenting role (e.g., child’s grandmother, grandaunt/uncle, etc.), ask these questions about/ in reference to them]

If grandparents are involved with childcare,
1. How do you make this arrangement? What are the major reasons? Who are involved in decision-making? How? Why?
   如果跟祖父母照顾孩子，为什么这么安排？主要原因？怎么决定的？

2. How do you feel about it now? Good parts and bad parts? How do you handle the worries?
   对于这个安排，自己感觉怎么样？好的地方？有什么担忧？如何处理呢？
## Appendix B

Table 1

*Characteristic of the Parents in the Second Wave (14 months) Survey Sample and Interview Sample.*

<table>
<thead>
<tr>
<th></th>
<th>Survey Sample (N=362)</th>
<th>Interview Sample (N=77)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>N (%) 175 (48.3)</td>
<td>38 (49)</td>
</tr>
<tr>
<td>Male</td>
<td>N (%) 187 (51.7)</td>
<td>39 (51)</td>
</tr>
<tr>
<td><strong>Age of Parents</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>Mean (SD) 29.1 (3.0)</td>
<td>28.8 (2.8)</td>
</tr>
<tr>
<td>Father</td>
<td>Mean (SD) 31.9 (4.1)</td>
<td>31.1 (3.9)</td>
</tr>
<tr>
<td><strong>Singleton Status of Parents</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>N (%) 131 (36.5)</td>
<td>38 (49.4)</td>
</tr>
<tr>
<td>Father</td>
<td>N (%) 91 (25.4)</td>
<td>21 (27.3)</td>
</tr>
<tr>
<td><strong>Educational Level of Mother</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school</td>
<td>N (%) 66 (18.2)</td>
<td>6 (7.8)</td>
</tr>
<tr>
<td>College</td>
<td>N (%) 261 (72.1)</td>
<td>64 (83.1)</td>
</tr>
<tr>
<td>Graduate/professional degree</td>
<td>N (%) 35 (9.7)</td>
<td>7 (9.1)</td>
</tr>
<tr>
<td><strong>Educational Level of Father</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school</td>
<td>N (%) 58 (16)</td>
<td>10 (13.0)</td>
</tr>
<tr>
<td>College</td>
<td>N (%) 249 (68.8)</td>
<td>54 (70.1)</td>
</tr>
<tr>
<td>Graduate/professional degree</td>
<td>N (%) 55 (15.2)</td>
<td>13 (16.9)</td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>N (%) 304 (84.0)</td>
<td>68 (88.3)</td>
</tr>
<tr>
<td>Father</td>
<td>N (%) 354 (98.1)</td>
<td>77 (100)</td>
</tr>
<tr>
<td><strong>Household Income</strong></td>
<td>Mean (SD) 8051.1 (5667.1)</td>
<td>7890.8 (3770.2)</td>
</tr>
</tbody>
</table>
Table 2
Characteristic of the Grandmothers in the Second Wave (14 months) Survey Sample and Interview Sample

<table>
<thead>
<tr>
<th></th>
<th>Maternal Grandmother</th>
<th>Paternal Grandmother</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Survey Sample (N=335)</td>
<td>Interview Sample (N=75)</td>
</tr>
<tr>
<td>Age</td>
<td>Mean (SD)</td>
<td>56.6 (4.8)</td>
</tr>
<tr>
<td>Employment</td>
<td>n (%)</td>
<td>65 (18.8)</td>
</tr>
<tr>
<td>Co-residence</td>
<td>n (%)</td>
<td>162 (48.4)</td>
</tr>
<tr>
<td>Educational Level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No formal school/primary school</td>
<td>n (%)</td>
<td>93 (28.6)</td>
</tr>
<tr>
<td>Middle school</td>
<td>n (%)</td>
<td>94 (28.9)</td>
</tr>
<tr>
<td>High school</td>
<td>n (%)</td>
<td>107 (32.9)</td>
</tr>
<tr>
<td>College</td>
<td>n (%)</td>
<td>31 (9.5)</td>
</tr>
</tbody>
</table>
Table C.1. Main Categories, Subcategories with Sample Quotes and Associated Preference for Maternal Versus Paternal Grandmother Care

<table>
<thead>
<tr>
<th>Categories</th>
<th>Sample Quotes</th>
<th>Care Preference</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Grandmothers’ Availability</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1. Employment</td>
<td>My parents cannot take care of my child because they are both working.</td>
<td>Maternal grandmother or paternal grandmother</td>
</tr>
<tr>
<td>1.2. Health condition</td>
<td>My paternal grandmother is relatively old, reflexes are a bit slow, blood pressure is also high, and sometimes after a long time, not being able to physically keep up, sometimes the child walks very quickly, if not paying attention would fall down, and so it’s better to give him a little security, safety wise.</td>
<td></td>
</tr>
<tr>
<td>1.3. Geographic distance</td>
<td>We live with maternal grandmother because her home is close to his (baby’s) mother’s workplace. It is convenient for his mother to take care of the baby. We don’t want to send our child to his maternal grandmothers’ because they live too far away and we won’t be able to see him often.</td>
<td></td>
</tr>
<tr>
<td>1.4. Other child care commitment</td>
<td>My mother is not available for child care because she is taking care of my sister’s child who is two years older than ours.</td>
<td></td>
</tr>
<tr>
<td>1.5. Greater availability of grandmothers with singleton adult children</td>
<td>My mom won’t help me with childcare because she has many children, she said she does not have the energy to take care of every single one of the grandchildren, and it won’t be fair if she takes care of my child but does not take care of my sibling’s children.</td>
<td></td>
</tr>
<tr>
<td>1.5.1. Grandmothers having no other child care obligations</td>
<td>My mother insisted to live with me and worried that I could not take good care of myself, not mention to take good care of my future child. You know, our singleton generation relies a lot on the parents.</td>
<td></td>
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<tr>
<td>1.5.2. Grandmothers living in close proximity to singleton adult children</td>
<td></td>
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</tr>
<tr>
<td>Categories</td>
<td>Sample Quotes</td>
<td>Care Preference</td>
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<tr>
<td>1.5.3. Grandmothers providing concentrated resources to singleton grandchildren</td>
<td>My mother-in-law has three grandchildren. If there were more kids she was caring for, she would not know how to split the chicken thighs.</td>
<td></td>
</tr>
<tr>
<td>1.5.4. Singleton parents taking child care from their own mothers for granted</td>
<td>I often got angry at home, I never thought that I would be looking after the child without having my mother’s help! If I’d known this earlier, I definitely would not have had the kid.</td>
<td></td>
</tr>
<tr>
<td><strong>Grandmothers’ Qualifications</strong></td>
<td></td>
<td></td>
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<tr>
<td>2.1. Skills to meet basic needs</td>
<td>Luckily my mom had taken care of her other two grandchildren since they were little…she knew how to put on diapers and how to bathe the baby…and she did everything.</td>
<td>Maternal grandmother or paternal grandmother</td>
</tr>
<tr>
<td>2.1.1. Prior child care experiences</td>
<td>Paternal grandmother’s childrearing decisions all come from books, like Baby’s Nutrition Guidelines From 0 To 3. That makes me feel very reassured to entrust the child to the hands of paternal grandmother.</td>
<td></td>
</tr>
<tr>
<td>2.1.2. Capacity for scientific ways of childrearing</td>
<td>Because my mother does not have much schooling, (If I entrust my baby to her) she would probably just let the baby sit there or crawl around, but you can’t expect her to teach the baby anything. How can she possibly teach the child if herself does know how to read and play those games?</td>
<td></td>
</tr>
<tr>
<td>2.2. Skills to meet cognitive needs</td>
<td>Her paternal grandmother is a kind of self-invited type (自来熟) of person: When she sees people, she always initiates chatting, engaging people in conversation. I think that really benefits her (the child), particularly because I am not outgoing by nature and I cannot really teach her that.</td>
<td></td>
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<tr>
<td>2.3. Skills to meet social needs</td>
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### Table C.1. Continued

<table>
<thead>
<tr>
<th>Categories</th>
<th>Sample Quotes</th>
<th>Care Preference</th>
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<tbody>
<tr>
<td><strong>Avoiding Patrilineal Problems</strong></td>
<td></td>
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<tr>
<td>3.1. Avoiding the conflictual relationship with paternal grandmother</td>
<td>I am not ready to deal, have not yet acquired the skill set to deal with a mother-in-law/daughter-in-law relationship, but now, with the addition of a child, it will be very much likely to cause more conflicts between us if we take care of the child together.</td>
<td>Maternal grandmother, not paternal grandmother</td>
</tr>
<tr>
<td>3.2. Avoiding care arrangement that discourages fathers’ participation</td>
<td>I have asked around, in those families with paternal grandmothers helped with childcare, fathers usually do not do much childcare work. I want to involve her father to take care of the child together with me, creating an opportunity for him to get to know his daughter.</td>
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<tr>
<td><strong>Multi-Caregiver Ideal</strong></td>
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<tr>
<td>4.1. Simultaneous care</td>
<td>It is not realistic to just have one grandmother take care of the child. She needs to play with the child, accompany the child all the time whiles still needs to cook and do other chores. It would be overwhelming for just one grandmother.</td>
<td>Maternal grandmother and paternal grandmother</td>
</tr>
<tr>
<td>4.2. Alternating care</td>
<td>Paternal grandmother is always like, ‘let’s practice walking’, while my mother is always like ‘let’s read, do some math, build blocks’. My mother pays a lot attention to his intellectual development, but she can care less about training his motor skills…I want him to get the good sides of both.</td>
<td></td>
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</tbody>
</table>
References


Kim, S.W. & Fong, V.L. (2014). A longitudinal study of son preference and daughter


III. Study 2: Grandmother Childcare Support and Parenting Stress of First-Time Parents in Urban China: A Mixed Method Study from Nanjing

Parenting stress is normative for couples entering the transition to parenthood. Parenting stress is generated when the subjectively experienced demands of parenthood exceed parents’ capacity and personal resources to fulfill their parental roles (Abidin, 1995; Pearson & Chan, 1993; Deater-Deckard, 2004). Child care during the early years is especially intensive, and the failure to manage this stress is a risk factor for parents’ psychological well being, quality of parenting, and children’s later cognitive and social adaptation (Abidin, 1992; Belsky, 1984). Theories and research aimed at identifying the factors that contribute to a successful transition to parenthood in various family contexts highlight the role of social support. Social support can buffer the effects of parenting stress, providing parents with additional resources to fill the gap in perceived parenting demands (Aldwin, 1994; Hill, 1949; McCubbin & Patterson, 1982).

Grandparents are a common source of social support across the world in infant care. Over the past few decades, researchers have investigated extensively the risks and benefits that grandparent support may present to parents’ adjustment to parenthood (e.g., Belsky & Rovine, 1984; Apfel & Seitz, 1991; Contreras et al., 1999). However, the predominance of research to date has focused primarily on North American samples, and little is known about the ways in which grandparent support relates to adjustment among Asian parents. This poses a significant gap in the literature, as childcare provided by grandparents in Western societies such as the United States, Europe, and Australia, is still found to be far less prevalent than it is in Asian societies (Mehta & Thang, 2012). Moreover, given that cultural traditions regarding intergenerational relationships in Asian
societies differ from those of Western societies, relations between grandparent support and adjustment may also differ. As a step in this investigation, the current study explores the associations between parenting stress and grandparent support in urban China, where as many as two-thirds of the parents with young children are receiving grandparent support for child care (China’s Research Center on Aging, 2013). This research is intended to advance our understanding of the relationships between grandparent support and parenting stress across national and cultural contexts.

**Stress and Support during Transition to Parenthood**

**Parenting Stress**

Like other major life transitions, the transition to parenthood can be challenging and stressful, especially for first-time parents. New parenthood was rated as the sixth most stressful life event among 102 events by 2500 adult respondents in a study conducted by Dohwrenwend and colleagues (1978). For many parents, the birth of a first child launches a series of disequilibrating changes in lives that involve new responsibilities and redefinitions of roles in marriage, family and work (Kline, Cowan & Cowan, 1991; Power & Parke, 1984; Belsky & Rovine, 1984; Liu, Chen, Yeh & Hsieh, 2012). Across sociocultural contexts, mothers generally find the transition to parenthood more stressful than fathers (e.g., Belsky, Spanier & Rovine, 1983; Cowan et al., 1985; Simpson & Rholes, 2008; Lee & Keith, 1999; Lu, 2006). This is partly because women not only endure physiological changes but also face more demands of newborn care than fathers (Cowan & Cowan, 2000; Levy-Shiff, 1994; Lee & Keith, 1999).

A large number of empirical studies have linked greater parenting stress to problems in adaptation of individual family members as well as development of mutually
satisfying family relationships and functioning during the early childrearing years. Such problems include parents’ poor psychological adjustment (Simpson & Rholes, 2008; Roggman et al., 1994), perceived negative marital quality (Lavee, Sharlin & Katz, 1996; Lee & Keith, 1999), negative parenting behaviors (e.g., Chan, 1994; Rodriguez & Green, 1997; Crnic, Greenberg & Slough, 1986), insecure parent-child attachment relationships (Jarvis & Creasey, 1991), children’s behavioral problems (Marshall et al., 2001; Osberg, 1998; Creasey & Jarvis, 1994), and children’s poor cognitive and socio-emotional development (Crnic & Low, 2002; Deater-Deckard, 2005).

Patterns of Grandparent Support during Infancy

Grandparents are a common source of social support for parents in their transition to parenthood in many countries. Supporting adult children and caring for infants are quite common practices for grandparents in Asian countries such as China and Korea (Cong & Silverstein, 2011; Lee & Bauer, 2010). Studies have also documented the use of grandparent care during infancy in Europe as well as in other Western countries, such as Australia and the United States. For example, twenty-three percent of the infants in a ten-state sample in the U.S. were reported under the care of relatives, including grandparents, on a regular basis shortly after birth (NICHD ECCRN, 1997). Pilkauskas and Martinson (2014) reported that 7-8% of Australian and UK infants and 15% of U.S. infants lived in a three-generation household in the first year of life with the potential of receiving grandparent care. The extent to which grandparents provide child care support may vary depending on cultural preferences/expectations and availability/accessibility of child care welfare (Lokteff & Piercy, 2012). Some scholars have also argued that increased divorce rates, non-marital childbearing, and population aging over the past several decades have
resulted in greater grandparent involvement in early child care in some Western societies (e.g., Bengtson, 2001).

Previous literature has reported that grandmothers are more involved in child care than grandfathers across cultures, especially when it comes to intensive child care during the early years (Dimova & Wolff, 2008; Fuller-Thomson & Minkler, 2001; Hank & Buber, 2009; Ipsos MORI and Department of Education, 2013; Goh, 2006; Lee & Bauer, 2013). Some studies found that grandfathers’ involvement in child care is usually determined by the levels of grandmothers’ involvement (e.g., Hank & Buber, 2009). There is also evidence that parents perceive grandmothers to be more supportive than grandfathers in providing child care assistance (Findler, 2000; Seligman et al., 1997; Trute, 2003). This literature suggests the gendered nature of child care, with grandmothers playing a larger role than grandfathers.

**Relationships of Grandparent Support to Parenting Stress**

There have been a myriad of studies that examine the effects of grandparent support on parents’ adjustment to parenting stress, most of which focus on grandmother support for high-risk parents, such as adolescent/single parents and parents with children with disabilities. Many of the studies found a stress-buffering effect of grandparent support (e.g., Arnold et al., 2011; Contreras et al., 1999; Greenfield, 2011; Trute, 2003; Ostberg & Hagekul, 2000; Cohen & Wills, 1985; McConnell, Breitkreuz & Savage, 2010; Aldwin, 1994). These studies suggest that grandparent support may provide parents with additional resources to cope with parenting demands, and is therefore likely to relieve parenting stress indirectly as well as directly. However, there is also evidence suggesting that grandparent support does not necessarily improve parents’ adjustment to stressful life
experiences (e.g., Hasting et al., 2002; Coley & Chase-Lansdale, 1998; Kalil & Danziger, 2000; Gordon et al., 2004; Trute, Worthington & Hiebert-Murphy, 2008; Greenfield, 2011; Apfel and Seitz, 1991). Indeed, the mixed results observed across studies showed that grandparent support can be unrelated, or worse, potentially a source of stress when the support is insensitive to parent needs and/or creates strained intergenerational relationships.

**The Importance of Perceived Parent Needs in Grandparent Support**

Social support theories point to the variations in the nature and function of grandparent support as possible explanations of this inconsistency. Social support literature has long associated the recipient’s subjective interpretation of the quantity and quality of the support with the recipient’s positive adjustment to stressful events. This association is noted as opposed to the receipt of actual support, or network characteristics as rated by outside observation (e.g., Bolger, Zuckerman & Kessler, 2000; Kaul & Lakey, 2003). Maisel and Gable (2009) further suggest that the most effective and beneficial support is the one that is interpreted by the recipient as responding to one’s needs. These studies highlight the importance of compatibility between the support desired and the support received.

Such a proposition suggests that grandparent support will be received beneficially depending on the needs of the parents. Studies on adolescent mothers’ parenting stress have provided robust evidence of this account. Researchers found that higher levels of grandmother support without much consideration of young mothers’ needs do not necessarily reduce stress (Coley & Chase-Lansdale, 1998; Kalil & Danziger, 2000; Gordon et al., 2004). Extensive grandmother support may be perceived and experienced
as a source of conflict, and may interfere with adolescent mothers’ needs to master the maternal role and achieve independence from their family (Richardson, Barbour & Budenzer, 1991).

There is also evidence that types of support may operate in a stressor-specific manner. This stressor-specificity hypothesis (e.g., Cohen & McKay, 1984; Gottlieb, 1978) suggests that the types of supportive behaviors parents find helpful may differ depending on the type of problems/stressor faced. For example, some studies differentiated grandparent support into instrumental and emotional support. Instrumental support included tangible assistance, such as child care, housekeeping, rendering of goods from grandparents, whereas emotional support included more non-tangible assistance such as expression of sympathy, empathy, encouragement, and solidarity (e.g. Hastings, 1997; Findler, 2000; Trute, 2003; Trute et al., 2008). These studies found that parents of children with disabilities consistently benefited more from grandparents’ emotional support than instrumental support in terms of psychological adjustment and parenting stress. In discussing these findings, researchers suggested that grandparents’ emotional support such as non-judgment, non-blaming and acceptance of disability might emerge as particularly salient coping resources for parents in situations of childhood disability. This line of research suggests examining not just availability and quantity, but also how parents perceive quality, adequacy, relevance, and satisfaction with grandparent support can advance our understanding of the implications of this source of support.

The Importance of Parent-Grandparent Relations

Literature on intergenerational family relationships suggests that different kinds of relationships between grandparents and parents may be associated with different levels
of support received, and the effectiveness of support in reducing stress. Sociocultural theories (e.g., Roschelle, 1997) on families argue that intergenerational relationships are likely to vary with families’ sociocultural backgrounds. The sociocultural, economic and political contexts in which families are situated can interact to influence the nature and dynamics of intergenerational interactions. For example, the norms and behaviors of interdependence across generations, as well as the relegation of power and status by age and generation were found to differ across sociocultural contexts (e.g., Ikels, 1998; Mehta & Thang, 2012).

In a study that compared the experiences of grandparent support among non-married mothers from different races and ethnicities, Greenfield (2011) found that the variation in norms and expectations of intergenerational relationships shaped the ways in which grandparent support (in the form of intergenerational co-residence) protected or exacerbated parenting stress. Specifically, support from co-residing grandparents was found to have a neutral or positive association with parenting stress among white and black mothers, but a negative association with parenting stress among Latina mothers. Greenfield (2011) posited that the strong sociocultural norms in Latino families, such as familial interdependence and frequent intergenerational interactions might protect them against the risks that co-residence might pose to families lacking similar norms (Chase-Lansdale, Brooks-Gunn & Zamsky, 1994; Spieker & Bensley, 1994; Wakschalg, Chase-Lansdale & Broookes-Gunn, 1996; Coley & Chase-Lansdale, 1998). In a different investigation focused solely on Latina immigrant adolescent mothers in the United States, Contreras and colleagues (1999) found that levels of acculturation moderated the associations between grandmothers’ support and the adolescent mothers’ adjustment to
parenthood. In other words, greater support was related to less parenting stress only when the adolescent mothers were more identified with Latino family norms in favor of intergenerational interdependence, rather than American family norms emphasizing nuclear family arrangements, individual autonomy, and generational independence (Cherlin & Furstenberg, 1985).

Studies examining intergenerational relationship quality and dynamics suggest that positive and balanced interactions between parents and grandparents promote better adjustment to stress. Such evidence mostly comes from studies of adolescent mothers. In examining the negotiations of the daily care roles and responsibilities between adolescent mothers and grandmothers, Smith (1983) uncovered three patterns of intergenerational relationships. “Role-blocking,” characterized by the daughter relinquishing the parental role and grandmother assuming total care responsibility, had the potential for maternal depression due to the sense of the “loss of baby”. The pattern of “role-binding,” characterized by the adolescent mother’s primarily caregiving role, could lead to role restriction and contribute to her depression and isolation. The optimal pattern Smith (1983) discovered was “role-sharing,” which was characterized by a more balanced and supportive relationship between adolescent mothers and grandmothers. Apfel and Seitz (1991) also identified recurrent typologies of relationships between adolescent mothers and grandmothers, and their different associations with the amount of grandmother support and levels of stress and conflicts. They further differentiated the patterns of interactions where the mother and grandmother shared care work to highlight the benefits of having grandmothers mentor and educate adolescent mothers without supplementing the parenting role for them. This pattern of relationship, which Apfel and Seitz (1991)
termed “parental apprentice model”, was argued to have the highest potential for adolescent mothers’ adjustment success. These findings highlight the variability of intergenerational relational dynamics and suggest that relational patterns can contribute to a deeper understanding of parents’ experiences of grandparent support in their transition to parenthood.

**Grandparent Support in China**

Differences in cultural norms of intergenerational relationships and child care practices may lead to different relationships between grandparent support and parenting stress across national and cultural contexts. In some Asian societies such as China, Korea, and Taiwan, grandparents, particularly grandmothers, commonly support new parents (e.g., Lee & Bauer, 2013; Lu, 2006; Nyland et al., 2009). In China, it is a traditional cultural expectation that grandmothers provide postpartum care to the mother and the newborn (commonly known as “doing the month” 坐月子) after childbirth (Gao, Chen, You & Li, 2010; Strand et al., 2009). Grandmothers continue to be the predominant source of early childcare support for mothers in China. This is because the bulk of the caregiving for infants is perceived as the mother’s responsibility rather than the father’s, and grandmothers are viewed as legitimate supplements or substitutes for infant care (Nyland et al., 2009).

In the past few decades, grandparents in China have been increasingly involved in supporting parents with childcare during the children’s first years of life. This is due to the high labor force participation of women with young children; the limited (usually three months) paid maternal leave; the reductions in employer-based child care; and the increased availability of up to four grandparents to provide care for a single child.
wrought by the market-economy transition and the one-child policy (Du & Dong, 2010; Nyland et al., 2009). Recent data (China’s Research Center on Aging, 2013; An, 2003; Li, 2003) suggest that as many as sixty percent of urban children under six are being cared for by at least one grandparent (e.g. 90% in Shanghai, 70% in Beijing and 52% in Guangzhou).

Much research on implications of grandparent support in China focuses on the outcomes of the grandchildren and grandparents themselves (e.g., Chen & Liu, 2012; Li, Peymane & Cheng, 2015). Fewer researchers systematically examine the impact of grandparent involvement on adult children’s well being. Some studies highlight the important functions grandparents may serve to support parents with young children in China. For example, grandparents can act as temporary caregivers, relieving mothers from the full-time child care role and supporting mothers’ gainful employment. They can also act as educators, advising the first-time parents on caregiving issues (e.g., Mehta & Thang, 2012; Goh, 2006; Sandel, Cho, Miller & Wang, 2006; Zhu, 2010). At the same time, there is also evidence indicating that grandparent support could be a potential source of conflict and stress as the younger generation may hold very different views regarding childrearing attitudes and practices to those of grandparents (e.g., Goh, 2006; Goh & Kuczynski, 2010; Zhu, 2010; Leung & Fung, 2014). Many researchers have found that social support in general has beneficial effects on parenthood adjustment in China (e.g., Chi et al., 2011; Liu et al., 2012; Gao et al., 2010; Lu, 2006), with only a few differentiating grandparent support from other sources of social support (e.g., Pearson & Chan, 1993). Among these limited studies, grandparent support was found to be more
beneficial than was support from community members or friends, particularly in the situation of childhood disabilities (e.g., Pearson & Chan, 1993).

To date, research on grandparent support in China has either focused specifically on the paternal grandparents, or more commonly lumped together support provided by maternal and paternal grandparents in analyses (e.g., Sun, 2013; Short et al, 2001; Chen, 2004). This focus has been largely shaped by China’s patrilineal tradition, which considers caring for sons’ children as a normative pattern (e.g. Silverstein, Cong & Li, 2007), despite a growing evidence suggesting a more bilinear pattern of grandparent care, following the market-based reforms and one-child policy (Chen et al., 2011; Zhang, 2009; Ko & Hank, 2013).

Consequently, no study to date has compared maternal versus paternal grandparent support in relation to parents’ adjustment outcomes in China. This is a substantial empirical gap because the lineage-based differences in intergenerational relationships may shape parents’ experience of grandparent support differently. Gender theory in China suggests a potential difference in mothers’ relationships with maternal vs. paternal grandmothers. The traditional gender norms dictated a hierarchy of responsibility drawing on gender and generation (Ho, 1987). Although care responsibility rested exclusively on women, the division of domestic labor between women was not equal. Daughters-in-law were expected to defer and provide service to mothers-in-law, while mothers-in-law held complete authority over daughters-in-law and trained the daughters-in-law for their subordinate roles (Du, 2013; Cong & Silverstein, 2008). Traditional gender/family ideology called for daughters-in-law to alleviate the burdens of household labor for their mothers-in-law, not the other way around (Chen, 2004). In
contrast, in contemporary urban China it may be that mothers-in-law serve as the normative supplemental child caregivers for their daughters-in-law. Furthermore, although via increased empowerment in education and employment women today have fewer reasons to obey their in-laws, dependence on mothers-in-law for childcare support may compromise their negotiating power (Shih & Pyke, 2010; Cong & Silverstein, 2008). Conflict and ambivalence in role identification and power struggles may complicate the interaction between the mother and the paternal grandmother when they care for the child together. However, such complications may not exist in the interactions between mother and maternal grandmother. Evidence that paternal grandmother may be a potential source of stress for new mothers was demonstrated in a few qualitative studies examining stressors for postpartum depression among first-time mothers in the Chinese context (e.g., Chan, Levy, Chung & Lee, 2002; Gao et al., 2010). These studies found that paternal grandmothers’ involvement in postpartum care were likely to increase stress in new mothers when the mother disagreed with in-law on practices and values, perceived her in-law as holding gender biases towards the child, and experienced discrepancy in expected care and reality. These findings further highlight the importance of examining lineage differences in links between grandparent support and parental distress in China.

Perhaps because mothers are more often the focus of support provision during new parenthood, the literature on transition to parenthood in China has focused predominately on mothers’ experiences (Lu, 2006). Evidence in the Western literature however suggests that mothers and fathers may differ in how they utilize and respond to social support when coping with stress. In research that explores gender differences in seeking and receiving support, there appears to be a consistent pattern that mothers more
actively seek out and receive social network support than fathers (Lu & Argyle, 1992; Barnett et al., 1987; Ventura & Boss, 1983). Moreover, mothers more than fathers seek social support from extended family members, particularly grandmothers, whereas fathers tend to seek support within their intimate social relations, primarily from their conjugal partner (Cutrona et al., 1996). A few studies of families with handicapped children reported the gender differences in parents’ responses to grandparent support. For example, Sandler, Warren and Raver (1995) found that grandparents’ support was positively correlated with paternal but not maternal adjustment. They highlighted the psychological benefits of paternal grandparent support for fathers, and explained that mothers were likely to be blamed by paternal grandparents for giving birth to children with disabilities. Conversely, Trute, Worthingyon and Hiebert-Murphy (2008) found that grandmothers’ emotional support was associated with lower parenting stress levels for mothers but not fathers. They noted that fathers’ parenting stress was predicted more by mothers’ emotional coping with stress. Yet, such investigation on the gender differences in parents’ psychological responses to grandparent support are still lacking in China studies.

**Current Study**

The current study seeks to advance the research on grandparent support and parenting stress by addressing the aforementioned gaps in the previous literature. First, it focuses on a sample of first time parents in urban China, to examine the associations between grandparent support and parents’ adjustment to parenthood in a general population within a non-Western context. Second, it further differentiates support from maternal versus paternal grandmothers to illuminate the role of intergenerational
relationships in shaping parents’ experiences with grandparent support. Third, it examines the transition processes for both mothers and fathers, to overcome the shortcoming in previous literature that focused primarily on mothers and excluded fathers’ experiences.

I adopted a mixed method approach to address the primary research question in this study: How does the type of grandmother care for infants (no involvement, maternal grandmother care only, paternal grandmother care only, and both maternal and paternal grandmother care) shape parenting stress experienced by first-time mothers and fathers in urban China? Based on the family stress theories and sociocultural perspective on families, I hypothesize that grandmother support is negatively associated with parenting stress given the long-standing social expectation for grandmother support in Chinese culture. Additionally, I expect that the effects of the type of support are stronger for mothers than for fathers. In other words, I expected mothers to be more sensitive than fathers to whether the support is from paternal or maternal grandmothers. In an effort to obtain a nuanced understanding of the statistical findings, the current study further supplements the quantitative analyses with qualitative interview data from a random subsample of the larger sample to understand the processes by which the effects of grandmother support come about.

Setting

The current study draws on data from a longitudinal, multi-method study conducted by researchers at New York University, Harvard University, and the Research Center for Learning Sciences at Southeast University in Nanjing, China (cf. Kim et al., 2010). The city of Nanjing is the capital of Jiangsu Province in eastern China, a medium-
sized city with a population of over 6 million in 2006, when data collection began. It was chosen for research because it is considered an average Chinese city, neither a “first-tier” city that has experienced dramatically rapid economic reform and growth like Beijing or Shanghai, nor a city like those in the western regions of China that have been slower to experience social and economic development. It provides an ideal environment within which to examine how parenting experiences unfold in the context of large-scale social and economic change.

Participants

Participants in the Nanjing Metrobaby study were recruited randomly from birth lists at a large city hospital and stratified by income level. The current study uses data from the second wave of the study, which includes 352 fourteen-month-old infants (170 girls, 182 boys), all first and only children, and their mothers and fathers, all married couples, in Nanjing (See Table 1 for family demographic characteristics). The families that participated in the second wave did not differ from the 66 families (15.8 %) who were recruited but were lost to follow up on child gender, parents’ education or household income. However, participating mothers were significantly older (M=29.1 years versus 28.1 years for those lost to follow-up, t=2.34, p=.02). Families came from a wide range of socioeconomic backgrounds, with the majority of parents having graduated from high school. At 14 months, 98 percent of the fathers and 84 percent of the mothers were employed, and 82.1% of the children lived with at least one grandparent. The demographic data were similar to those for the urban population in China, except that the average monthly income of the 352 families in our study (8,020 yuan) was much higher.

The expense of the maternity-ward room (single-bed rooms compared to multiple-bed rooms) served as a proxy for income in sampling.

Procedure

Surveys were administered to parents of infants at 6 months, and the parents were followed up on when the infants were 14, 24, 36 and 48 months old. The current study uses the second wave survey (14 months) because 1) demand for grandparent care support is usually much greater for younger children (e.g. Chen et al., 2011), and 2) by this time, the stress of being a new parent is high and persistent—the novelty of the new parent role has begun to wane, and the permanence of the life changes associated with having a baby have fully set in (e.g. Simpson & Rholes, 2008; Cowan & Cowan, 2000). The 14-month survey with parents includes sections on parents’ demographic information, psychological well-being assessments and information on childcare arrangements used by the families in the first 14 months of children’s lives. All children retained in the second wave of the study were cared for at home in their first fourteen months and the vast majority (90.3%) received grandparent care for at least 8 hours a week (97.2% of these were grandmothers). Note that the predominance of grandmothers as sources of childcare support in this sample leads the following analyses to focus exclusively on maternal and paternal grandmother rather than grandfather care.

A random subsample (stratified by child gender) of 81 families (81 mothers and 50 fathers) drawn from the full sample participated in semi-structured interviews when their children were 14 months old (See Table 1 for family characteristics). The interviews

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9 Roughly 10% of the grandfathers were involved in child care. Most grandfathers were assisting grandmothers with childcare, providing care for one to two hours on average per day.
with parents were conducted in Mandarin by Mainland Chinese research assistants who were current or recently graduated students at a Mainland Chinese or US university. The interviews were on average 2 hours long and were audiotaped. Additional information regarding everyday parenting tasks, views of parenting and parenting roles, and expectations and perceptions of childcare support from spouse and grandparents was gathered to complement the survey data on childcare. Families receiving grandparent support on childcare (95.1%) were asked additional questions regarding parents’ interactions with grandparents in childcare, including the division of care labor between parents and grandparents, the areas in which disagreements with grandparents related to childrearing might arise, and how these disagreements were handled (Appendix B provides a list of interview questions about grandparent’ childcare support that will be the basis for the qualitative analysis).

Measures

**Dependent variable. Parenting stress** was self-reported using an abbreviated Chinese version (See Appendix C) of the Parenting Stress Index (PSI) (Abidin, 1983; 1995). The Chinese translation of the PSI has been validated for use in the Chinese population (e.g., Chan, 1990; Tam, Chan & Wong, 1994). The 101-item original PSI contains three subscales that include 1) the parents’ perception of parental distress (PD) (i.e. I feel trapped by my responsibilities as a parent), 2) parent-child dysfunctional interaction (P-CDI) (i.e. Most times I feel that my child does not like me and does not want to be close to me) and 3) the difficulty of their child (DC) (i.e. My child does a few things which bother me a great deal). The shortened measure of parenting stress used in the current study includes ten items that were representative selections of the three
subscales (3 items from PC, 3 items from P-CDI and 4 items from DC). The selected scale has a high inter-item reliability, with Cronbach’s alpha of .83, for the mother and .87 for the father respondents respectively. An exploratory factor analysis was conducted to assess the underlying factor structure of the shortened PSI for mothers and fathers separately. Both analyses suggested for a one-factor structure of the shortened PSI with the sample from the current study. For mothers, the one factor model accounted for 88.1% of the variance with eigenvalue of 3.56. For fathers, the one factor model accounted for 87.6% of the variance with eigenvalue of 4.11.

Mothers and fathers separately rated the ten items on a 5-point Likert-type scale from strongly disagree (1) to strongly agree (5). Items were summed to create a total score and higher scores denoted higher parenting stress. Possible values ranged from 10 to 50.

Independent Variable. Type of grandmother support was measured based on parents’ survey responses on the current childcare arrangement adopted and types of caregivers involved at 14 months. The four nominal categories of grandmother support are: no grandmother support; maternal grandmother support only; paternal grandmother support only; and both maternal and paternal grandmother support. In the quantitative analysis, type of grandmother support was coded as three dummy variables, with no grandmother support as the reference group.

Control variables. The demographic variables that I controlled for were family income, parents’ educational attainment, parents’ age, parents’ employment status, intergenerational coresidence and gender of child. Family income was measured as the annual household income in yuan, and was coded as a continuous variable. Parents’
educational attainment was measured as the highest level of education attained by the parent and was represented in the analysis as two dummy variables, completed college and graduate/professional degree, with high school as the reference category. These two variables are relevant because both low socioeconomic position relating to material hardship and high socioeconomic position relating to demands of employment and career could potentially contribute to higher parenting stress (e.g. Parkes, Sweeting & Wight, 2015). Parents’ age, which was represented as a continuous variable measuring a parent’s reported age in years, is considered here because age of parent is known to be positively associated with feeling more restricted and less fulfilled by the parental role, independent of other influences (Nomaguchi & Brown, 2011). Parents’ employment status was indicated as a dichotomous variable with non-employed as the reference category. It was included in the analysis because employment outside home, particularly of mothers with young children, was found to be either a risk factor contributing to stress and anxiety (e.g., Leonard, 1993) or a protective factor against social isolation, decreased self-image and depression (e.g., Brown & Harris, 1978). Intergenerational coresidence was measured as a dichotomous variable with non-coresidence as the reference category. It is important to our analysis because some studies have cautioned the adverse child-parent effects and mother-grandmother conflicts that occur due to intergenerational coresidence (e.g., Gorden et al., 2004; Chase-Lansdale et al., 1994; Black & Nitz, 1996). The gender of the child was operationalized as a dichotomous variable with female as the reference category. In Chinese contexts where preference for a son is salient, child gender has been linked to parenting stress and support provision. (e.g., Gao et al., 2010).

**Data Analytic Approach**
I adopt a mixed method approach whereby I triangulated between the quantitative and qualitative data. First, I investigated the associations between types of grandmother support and parenting stress using Ordinary Least Squares (OLS) regression. For mother and father separately, I modeled the levels of parenting stress (PS) as a function of types of grandmother support (GS). The model was estimated as,

\[ \hat{PS}_i = \beta_0 + \beta_1 GS_i + \beta_2 COV_i + \epsilon_i \]

where \( GS_i \) is represented by three dummy variables indicating types of grandmother support: maternal grandmother support only (MGM), paternal grandmother support only (PGM) and both maternal and paternal grandmother support (BOTH), with no grandmother support as the reference group; \( COV_i \) represents a vector of covariates that include parents’ age, educational attainment, employment status, household income, intergenerational coresidence and gender of the child; and \( \epsilon_i \) represents the error term. Across the sample, 11 out of 352 families (3%) were missing the outcome variable. As for the predictor and covariates, 3 families (1%) were missing the family income data and no missing data was found on the other variables.

I then drew on the interview data to understand/explain the associations found in the quantitative analyses and generate new ideas and insights about parents’ perceptions of parenting roles and intergenerational support, including the dimensions of intergenerational interactions and relationships that statistical analyses did not capture. I paid particular attention to parents’ understanding of the parenting roles of mothers, fathers and grandmothers, and to parents’ perceived nature, adequacy of, and satisfaction with grandmother support in two conventional dimensions: instrumental and emotional support. I coded parents’ responses to interview questions on view of parenting (in
Appendix B, Section III) to examine parents’ perceptions for the gender differences with regard to parenting roles and the types of stressors they experienced during transition to parenthood. I also analyzed parents’ responses to interview questions on grandparenting (in Appendix B, Section IV) to gain some insights on parents’ perceived quality of the support. Specifically, I coded parents’ responses to interview questions 1 and 3 in section IV, which asked how childcare labor was divided among mothers, fathers and grandmothers and how allocation of care was negotiated, to examine parents’ perceptions on grandmothers’ instrumental support. I also attended to parents’ responses to interview questions 2 and 4 on their relationships with grandmothers, when conflicts regarding childcare arose, what the conflicts were and how the conflicts were handled, to capture a general sense of parents’ perceived emotional support from grandmothers. Finally, I compared parents’ experiences with maternal grandmother support to their experiences with paternal grandmother support to further examine the ways in which maternal and paternal grandmother support might differently shape parents’ parenting experiences.

**Quantitative Findings**

The demographic characteristics of both the larger quantitative sample and the qualitative sample, as well as the prevalence of the four grandmother care types for each sample are presented in Table 1. Among the 352 families, 12% had no grandmother support on child care (n=43), 39% received maternal grandmother support only (n=137), 36% received paternal grandmother support only (n=127) and 13% had both grandmothers involved in providing childcare support (n=45). Among the 81 families who participated in the interview, 4 (5%) had no grandmother support on child care, 34 families (42%) used maternal grandmother care, 25 families (31%) used paternal
grandmother care, and 18 families (22%) involved both maternal and paternal
grandmothers in child care. Mothers on average reported a higher level of parenting stress
(Mean=21.03 SD=5.89) than fathers (mean=19.43, SD=6.13). The difference was
statistically significant (t=4.09, p=.0001).

The results of estimated OLS regression models for parenting stress predicted by
types of grandmother support are presented in Table 2. Overall, there were no significant
positive associations between any of the three types of grandmother support and
parenting stress, which suggest that parents who received grandmother support did not
experience higher parenting stress than parents who received no grandmother support, on
average.

Comparing predictors of parenting stress across gender, I found grandmother
support to be a salient predictor of parenting stress only for mothers. For fathers,
grandmother support did not significantly predict parenting stress. In addition, mothers
were sensitive to the type of grandmother support they received. When mothers received
childcare support from maternal grandmothers only (MGM) or from maternal and
paternal grandmothers together (BOTH), they experienced significantly lower levels of
parenting stress on average compared to mothers receiving no grandmother support,
when family demographics were controlled ($b_{MGM}=-3.10, p=.033$ and $b_{BOTH}=-3.50,$
$p=.028$). The estimated coefficient on MGM, -3.10, means that mothers who received
maternal grandmother support scored on average three points lower on the stress measure
(representing about half a standard deviation) compared to mothers who had no
grandmother support. However, there was no statistically significant association of
paternal grandmother support compared to no grandmother support predicting parenting
stress ($b_{PGM}=-1.64, p=.25$). These results suggest that it matters to mothers which grandmother is providing the childcare support. Mothers were more likely to report lower levels of parenting stress when their own mothers were involved in childcare support but not when their mother-in-laws were the source of support. In the model predicting maternal parenting stress, types of grandmother support and family demographics on parents’ socioeconomic status, age, employment, co-residence with grandmother and child’s gender were found to explain 6.53% of the variance in mothers’ levels of parenting stress.

Among the covariates, only family income was associated with parenting stress, and only among mothers. I found a negative association between family income and maternal parenting stress ($b=-.00017, p=.003$). Every 10,000 yuan increment in monthly household income corresponded to a decrement of 1.7 points in average maternal parenting stress scores (about a quarter of a standard deviation), controlling for types of grandmother care, parents’ age, education level and child’s gender. However, such an association was not found for fathers.

**Qualitative Findings**

The quantitative findings described above suggest that overall grandmother support was found to reduce parenting stress for mothers, but not fathers. In addition, no type of grandmother support, for either mothers or fathers, increased parenting stress. In order to illustrate and interpret the quantitative findings, I will draw on the qualitative findings of parents’ perceptions of grandmother support, parenting roles, and mothers’ relationships with maternal versus paternal grandmothers.
Positive Perceptions of Grandmother Support

The quantitative analysis found no significant positive associations between any type of grandmother support and parenting stress. This suggests that overall parents who received grandmother support did not experience higher parenting stress than parents who received no grandmother support. In the interviews, parents described their strong expectations and trust of grandmothers for child care. Their positive perceptions of grandmother support may explain these findings.

Prior expectations. Both mothers and fathers expressed high expectations for, and heavy reliance on, the grandparents for childcare assistance, particularly grandmothers. There was concern that grandfathers may not be as nurturing and experienced as grandmothers. According to the parents, grandfathers may not be ideal caregivers because “taking care of children is not men’s specialty by nature.” Parents usually questioned whether the grandfather would be as detail-oriented (细心), careful, delicate and patient as the grandmother. These are particularly salient and sought after caregiver qualities, given that infant care requires constant attention and proper responses to the infant’s needs. Moreover, as opposed to the grandmothers, parents felt grandfathers “had less experiences in taking care of siblings and raising their own children”, due to the Confucian gender norm that prescribed childcare to be predominately a women’s work. Parents revealed such perceptions of gender norms might also cause grandfathers to feel uncomfortable assuming the role of caregiver. One mother indicated, “My father felt losing face being a baby-sitting man amongst those female caregivers (扎在女人堆里带孩子没面子).”
On the other hand, most parents considered grandmother care as a “natural” “obvious” or “expected” arrangement that required little to no “prior planning” or “discussion”, unless the grandmother had legitimate excuses not to do so. Grandmothers who were free from health problems or work/other childcare commitments but failed to offer childcare usually became the target of their adult children’s complaints or resentment. “I really do not understand why my mother would not help me with childcare”, one mother voiced her frustration, “I don’t blame my dad because he does not know how [to take care of the child], but my mom does. I am deeply puzzled about why she was not willing to [provide childcare].” Similarly, another mother perceived her current care arrangement without grandparent support as an unusual and unexpected situation for families with available grandparents like hers:

_My husband and I did not plan ahead to arrange child care before the baby was born...(because) at the time there were three family elders available (for childcare), my dad, mom and mother-in-law, all retired. But who knew I would be caught up into this kind of situation, with no grandparent help, after having a kid? I often got angry at home, I never thought that I would be looking after the child by myself! If I’d known this earlier, I definitely would not have had the kid._

Such sentiments reflected a strong culturally defined intergenerational contract, and the expectation that grandmothers’ provision of childcare is an obligation rather than a favor.

The singleton parents in particular assumed that they could rely on their parents for childcare just like they had always relied on parents since early childhood. Having no siblings to compete for parental resources, the parents born after China’s one-child policy began in 1979 grew up to be the sole focus of their parents’ love and care (Fong, 2002; 2004). A particularly influential critique of such concentrated parental investment is that the singleton-child generation in China is overly dependent on their parents and incompetent to care for themselves (e.g., Sun, 1993; Shanghaishi Youerjiaoyu Yanjiushi
Echoing this critique, singleton parents in the current study cited this as one of the reasons for their reliance on grandparents for child care. As one mother stated, “Our singleton generation was raised so delicately (娇生惯养) by our parents so that we are not independent enough. Even now I am married and having our own children, I still depend on my parents for many basic household chores, like cooking, which I don’t how to do,” she added, “the only food I know how to prepare for my baby is infant formula and this would have been a problem had my mother not helped me (prepare solid foods for my baby).” Parents’ reliance on grandparents for childcare was reinforced by grandparents’ strong concerns for singleton children’s inability to care for the infants, and their own desires to provide assistance. One singleton mother discussed the reason that her mother insisted on living with her after the baby was born: “My mother was so worried that I could not take good care of myself, not to mention taking good care of my child. When my husband and I took the baby out alone, she would constantly text me about her worries.” She explained, “My mother still treats me like a child even I am a parent already.”

**Trust of kin care.** Parents also considered grandmothers to be a safer, more nurturing and trustworthy option than any type of non-kin childcare, such as nanny or center care. Parents held a strong belief that caregivers’ kinship status has important implications for the quality of care the caregiver is willing to provide. “I always think that the treatment is not quite the same if it’s not your own biological child,” one mother expressed her concern about non-kin care, “even though sometimes the hired nannies should have more experience in child rearing than we do, I fear that other people don’t take care of the baby as well as we would ourselves.” Parents shared that their distrust of
non-kin care was intensified by horrifying stories about child abuse by heartless nannies and day care providers that were often portrayed in the media at the time of this study.

Conversely, parents frequently stressed how much children could benefit from being cared for by a blood-related grandparent who offered genuine love and care. As a part of the family rather than an employee of the family, grandparents were implicitly expected to provide care on a flexible schedule, accommodate or even sacrifice for the good of the child and family, and work for love rather than money. Parents did worry that “grandparents’ ‘excessive love and care’ (溺爱) might have a bad influence on the development of the child’s personality, not forming a good character.” However, they believed this disadvantage was offset by the relief that they needn’t worry about the child being “maltreated or suffering any grievances” when entrusted to grandparents in their absence. Parents emphasized that having grandparents provide infant care allowed them to feel sufficiently confident and secure to go to work with “settled hearts” (安心).

Such positive perceptions of grandmother care may lead parents to conceptualize grandmother support as a reliable coping resource rather than an intrusion or interference in their transition to parenthood. The latter perception was found to contribute to negative effects of grandparent support in several Western contexts where such support was not a highly anticipated cultural norm (e.g., Contreras et al., 1999; Davis & Rhodes, 1994). Chinese parents’ strong expectation and positive perception of childcare support from grandmothers may explain the quantitative finding that grandmother support was not associated with higher parenting stress among the Chinese mothers or fathers.

**Grandmother Support Offers Greater Benefit for Mothers than Fathers**
In the quantitative findings, I observed that while grandmother support was associated with lower parenting stress for mothers, it was not associated with parenting stress for fathers. This finding suggests that grandmother support is a salient coping resource for maternal parenting stress but not for paternal parenting stress. The gendered differences in response to grandmother support may be partly explained by the Chinese traditional gender role ideology that dictates females as caregivers and males as breadwinners (Ho, 1987). Grandmothers’ childcare support may relieve more of the parental responsibilities and stress of mothers than those of fathers.

**Gender differences in parenting roles.** Interviews with parents revealed a clear gendered division of parenting roles in these families with newborns. The majority of parents drew on the cultural/historical gender-role differentiation—the “outside world of men and inside world of women (男主外,女主内)”—to justify the routine care of infants as a domestic duty thus primarily a mother’s responsibility. Although women’s education and employment were improved under China’s economic and policy reforms after 1949, these improvements are found more in educational opportunity than in the job market (Kim & Fong, 2014). Marketization widened the wage gap between men and women, and the more prestigious private sector jobs became male-dominated (Kim et al., 2010). Men’s role as primary breadwinners continues to prevail, and traditional cultural models of gender roles within marriage linger. Women in China still shoulder a greater share of childcare labor than men, despite their increased outside paid employment (Pimentel, 2006).

Parents also shared the consensus that mothers were by nature more capable than fathers at various functions of caring for young children. Fathers stressed a mother-infant
bond superior to the father-infant bond because “the baby is coming from mother’s womb”. They believed that such an inherent and strong mother-child connection would enable the mother to intuitively comprehend, interpret, and respond to her child’s needs better than the father. Similarly, mothers remarked that their female qualities such as being “sensitive”, “nurturing” and “patient” made them better caregivers of the infants than the fathers. Moreover, both mothers and fathers considered a father’s role in child care only to be salient later in the child’s life, when the child reached what Xia and colleagues (2004) called the “age of reason”. Fathers mentioned that their infants were too young to be capable of formal learning and sports. They aspired to participate more in dealing with the child’s academic, social, and moral development when their children were old enough to be instructed and disciplined.

Based in part on this role differentiation, the mothers in the study tended to shoulder much more infant care duties than fathers. On average, mothers reported spending much more time on childcare (75 hours per week\(^{10}\)) than fathers (29 hours per week), even though the majority of the mothers (84%) were also employed. Fathers’ less significant role in infant care was also reflected in the interviews, in which fathers were often less knowledgeable than mothers on childcare information and grandmother support. They tended to defer to mothers as primary informants for the child’s needs, routine care details and practices, and identification of support effectiveness. In families that could afford one non-working parent, the mother was usually the one who stayed

\(^{10}\) Parents usually reported care hours within range of 168 hours per week. 168 care hours per week was calculated as 24 hours per day*7 days per week. Parents interpreted co-sleeping as an important aspect and measure of care involvement, regardless of the caregiver, and they tended to include time spent in co-sleeping with the infant when calculating childcare hours.
home or was expected to stay home to assume the role of caregiver. In families that relied on mothers’ additional income, the employed mother faced extra pressure fulfilling dual roles, as the expectation of her involvement did not decline despite her employment.

Perhaps because of this gendered allocation of childcare tasks, mothers tended to find transition to parenthood more stressful than fathers. Mothers often reported experiencing substantial changes in their work schedules, social lives, and physiological conditions (e.g., health and appearance). On the other hand, most fathers reported their “daily routines/activity paths (生活轨迹) to be still on track”, and that “work time is still work time and social time is still social time”. To them, new parenthood meant “an addition of a child who enriched my life” and “made home welcoming”.

**Benefits of grandmother support for mothers.** Given mothers’ primary role in childcare and particular stress in experiencing motherhood, grandmother care is likely to benefit mothers more than fathers. Specifically, grandmothers’ physical assistance with child care alleviated mothers’ burden and stress from child care responsibilities. Moreover, grandmother care had potential psychological benefits for mothers who held strong work commitment. Their support enabled mothers to pursue careers that helped them maintain active lives, feel accomplished and fulfilled, and avoid depression. As one mother explained, “age 20 to 35 is the most glorious period of a woman’s life and I do not want spend that time being a sallow-faced housewife (黄脸婆) and isolate myself from connecting to society.” However, when thinking about the Chinese job market, most mothers observed that it was nearly impossible to find a job where one could balance family and work life well in reality. One mother commented, “you can not find a job in China that would allow you to spend a lot of time with your child,” she emphasized, “it is
a dilemma facing the working mothers in China that we want to take good care of our child but at the same time we do not want to sacrifice our career for the sake of childcare.” Most mothers preferred to maintain economic independence; to counteract the concern that in contemporary China marriage is less stable, and financial dependence on a spouse is less reliable. They found grandmother care to be a practical solution to the dilemma they were facing. Transferring the traditional female role of childcare to the grandmothers reduced the tension of negotiating gendered allocation of childcare duties between mother and father, which tended to disadvantage the mothers in many ways. This may have accounted in part for our finding that grandmother care was predictive of lower parenting stress for mothers but not for fathers, because mothers tended to be the primary beneficiaries of grandmother support with child care.

**Mothers’ Experiences with Different Types of Grandmother Support**

In the quantitative analysis, I also found that mothers were sensitive to the type of grandmother support they received. Mothers experienced lower parenting stress when they received childcare support from maternal grandmothers only, or from maternal and paternal grandmothers together. However, exclusively receiving paternal grandmother support was not significantly associated with lower levels of maternal parenting stress. These results suggest that mothers tend to experience lower levels of parenting stress when their own mothers are involved, but not when their mothers in-law are the sole support providers.

The interviews revealed that the different relationships mothers had with maternal versus paternal grandmothers might have shaped the differences in mothers’ perceived quantity/quality of and satisfaction with the instrumental and emotional support received.
The differences in support received may elucidate some of the reasons why mothers expressed different levels of parenting stress related to role restrictions, social isolation, and sense of competence in the parenting role when working with caregiving grandmothers from different lineages. I found that while maternal grandmothers were positioning themselves as readily available and actively working to alleviate their daughters’ stress, paternal grandmothers were expecting the mothers to defer to their parenting, and fulfill filial duty to relieve the burden of their assistance. It seemed that the involvement of maternal grandmother support, regardless of paternal grandmother, led the mothers to feel more supported and less stressed.

**Maternal grandmother support.** The quantitative findings suggest that mothers feel less stressed when receiving childcare support from maternal grandmothers. Our interviews revealed that the loving, caring, and collaborative relationship between mother and maternal grandmother provided greater instrumental and emotional support, which may explain lower parenting stress levels in this arrangement. It was likely that a warmer and closer relationship between them was already in place before the maternal grandmother came to help. Without that pre-existing closeness, the mothers and the maternal grandmothers may refuse to use and offer support. Their relationship might also be strengthened by the adult daughter’s transition to motherhood, which allowed the young mother to “better understand and appreciate [her] own mother’s parenting efforts (养育之恩).” Such strong and intimate relationships led the mothers to interact more comfortably with maternal grandmothers and led maternal grandmothers to carefully attend to mother’s needs and tailor their support to these needs.
Instrumental support. Mothers’ believed maternal grandmothers were motivated to provide childcare support by a genuine concern for mothers’ well-being. Many mothers perceived maternal grandmother care as caring for them, not just for the grandchild. “My mother helps with child care because she feels sympathetic towards her daughter (体恤女儿) and wants to take care of me,” one mother commented, “she holds the baby for me worrying that I might hurt my back [if I hold the baby too long]; [she] asks me to go out and have fun and takes care of the child for me by herself.” Employed mothers felt that maternal grandmothers were especially sympathetic to and understanding of their employed daughters’ struggles with domestic and work responsibilities. One mother spoke of how the maternal grandmother assisted her in coping with the challenges of a working mother: “My mom always says that I have already had a laborious day at work, and all what she can do is to share my household and child care burden as much as she could.”

Concern for the daughters’ well-being was also evident in the high rates of maternal grandmothers’ co-sleeping with the infant. Co-sleeping with infants was practiced in all the families of the current study. It was also a common practice for Chinese families with young children in many other studies (Wang, Huang & Jiang, 2008; Li et al., 2009). The Nanjing parents found it to be customary and preferable to have infants sleep in the same bed or same room as caregiver(s), to make it easier and more convenient to respond to the infant’s sensory signal and cues. However, this setup was hard on the caregiver, whose sleep was disturbed throughout the night caring for and checking on the infant, especially if the infant needed to be fed or required some other attention. On average, infants in the study weaned from breast milk at 6 months, so co-
sleeping with the grandmother was usually possible in the later months of the first year\textsuperscript{11}. Indeed, the majority of the caregiving maternal grandmothers (73\%) offered to care for the 14-month-old infants at nighttime, prioritizing their adult daughters’ physical well-being over their own well-being.

Mothers also felt comfortable relinquishing care responsibilities to their own mothers. When asked about how she came to the decision of arranging maternal grandmother care for her baby, one mother responded, “I feel more comfortable and relaxed interacting with my mother rather than my mother in-law [who is] after all not my own mother. With my mom, I can just stick my baby in her arms when I don’t feel like taking care of him.” The strength of the mother-daughter relationship led the mothers to assume and expect unconditional love and support from the maternal grandmothers. Although some mothers felt uneasy relinquishing domestic duties they failed to fulfill, most felt settled and comforted by the prevalence of the practice: “other [grandmother] mothers are doing the same for their [adult] daughters”.

\textit{Emotional support.} Mothers reported that maternal grandmothers often framed their childcare support as merely assisting and offering protection to the mothers. Such mindset led maternal grandmothers to rarely interfere with mothers’ parenting practices. One mother gratefully acknowledged that, “my mother does what I say almost all the time, because she came to help with childcare to support me.” She recalled, “my mom always says, ‘it is your child. I only come to help relieve your burden, so I try to do what

\textsuperscript{11} Only 7 percent of the infants still received somewhat breast milk at 1 year old. In some families, the pattern of grandparent co-sleeping also occurred for breast-feeding infants, who were bottle fed pumped breast milk by grandparents or were sent to mother’s room for breastfeeding during the night and brought back to sleep with grandparents after feeding.
you want me to do’.” Some mothers placed great trust in maternal grandmother care, knowing that the maternal grandmother would raise their child in the same way as they were raised. “My mom is my best and safest choice of caregiver for my baby when I am away at work,” one mother stated, “she has always been a housewife, taking care of me well when I was little.” The shared childcare expectations and styles helped families avoid the rise of many intergenerational parenting conflicts and struggles.

Even when differences in opinions about parenting occurred, the strong sense of cohesiveness and solidarity between mother and maternal grandmother often made the conflict negotiation an easier process. “It is much easier to communicate with your own mother who you have been living long enough to know well,” one mothers explained, “when there is indeed a problem, we did not have to worry about how to communicate in terms of phrasing.” Another mother concurred, “Our communication is very free. When my mom does something wrong, I say it, when I do something wrong, she says it.” She found that even though they “would argue with each other and sometimes it could be very intense”, such open communication about their conflicts would “not affect [their] relationship as mother and daughter.” The easy and open communication allowed the sharing of values and expectations, created opportunities for mutual understanding and agreement, and facilitated the participation of both mothers and maternal grandmothers in child care decisions. Mothers might feel less stressed when they expect that, through open communication, the maternal grandmother would know and would be willing to carry out their wishes in their presence or absence.

**Paternal grandmother support.** The quantitative finding that exclusive paternal grandmother support was not associated with lower levels of maternal parenting stress
may be explained by the historical yet still powerful hierarchical relationship between daughters- and mothers-in-law. The hierarchical nature of the relationship prescribed mothers to attend to mother in laws’ needs and provide filial care. Unlike with maternal grandmothers, sensitivity to mothers’ physical and psychological needs was not a part of this dynamic. Moreover, the hierarchical relationship gave mothers less power to negotiate for their preferred childrearing practices when there was disagreement with paternal grandmothers. This suggests that when using paternal grandmother care, the mothers may not receive the desired levels of instrumental and emotional support.

*Instrumental support.* In contrast to those used maternal grandmother care, mothers utilizing paternal grandmother care felt obligated to alleviate mothers-in-laws’ burden of childcare and household labor whenever they had time to spare. Some working mothers felt stressed about having to assume full responsibilities of childcare after they came back from work. “I feel tired, because my work has kept me busy, and then I have to take care of child after work, without having time for myself, to do what I like to do,” one working mother complaint, “this is hard and depressing.” The incidences of grandmother co-sleeping with the infant were also rare in paternal grandmother care. Only 19% of the 42 caregiving paternal grandmothers in our interview sample were co-sleeping and taking care of the infants during nighttime. Many working mothers cited sleep deprivation and fatigue when asked what they found the most difficult about parenting. Other mothers using paternal grandmother care complained about being bound with housecleaning, laundry, and cooking even though they would rather spend the time interacting with their children. This is particularly the case for working mothers who delegated so much of the childrearing to the paternal grandmothers when they were at
work, and sought to maximize their limited time at home to focus exclusively on their children. Nevertheless, they found themselves working a “second shift” after work, taking care of parenting duties along with housework and errands. When asked what they perceived to be difficult and stressful as a mother, they often mentioned the lack of support with housework from paternal grandmother during the second shift, noting this conflicted with their desires to bond with their children.

Some mothers drew on the cultural model of filial piety to explain that “it is daughters-in-law’s duty to assist mother-in-law whenever possible”. Other mothers viewed their active participation in housework and childcare as necessary to express their gratitude and indebtedness to paternal grandmothers’ childcare provision. As one mother noted, “Sometimes I was too tired to take care of the baby, but I would feel guilty if I let her paternal grandmother watch her [baby] during the day and night, so I say I will do it [co-sleeping at night].” Receiving support from the paternal grandmother without reciprocation may make daughters-in-law feel that the hierarchical relationship between them is imbalanced, thus running the risk of engendering tensions.

Mothers also described paternal grandmothers’ expectation, rooted in filial duty, that they would relieve them from childcare and household duties. Paternal grandmothers’ sense of entitlement to the deference and service from their daughters-in-law was evident in their complaints about their daughters-in-law as not being caring enough. One mother who worked the night shift and had her son cared for at his paternal grandmother’s house during the daytime articulated such complaints: “She has complaints (about) how I rest at home at daytime. She was like ‘why don’t you come over and assist me?’ She wants me to always be there (to help) but I need some sleep
Another mother recounted a paternal grandmother’s complaints about her participation in socializing activities and having leisure time with friends over the weekend, “she would say, in a complaining tone, that ‘I am already so tired taking care of the baby for you during the weekdays, and you don’t even help me over the weekend and still want to go out’.” Mothers, particularly those employed full-time, often expressed their stress in meeting paternal grandmothers’ expectations for filial duty. They felt that their desires and needs as the recipients of childcare support were neglected.

**Emotional support.** Mothers also tended to have more parenting conflicts with paternal grandmothers than with maternal grandmothers. Coming from different families, regions, even social classes, mothers explained that they were less likely to share parenting values, styles and practices with mothers-in-law than with their own mothers. “Our conflicts came from the conflicts between two different families”, one mother suggested, “it is not like we are intentionally creating conflicts, it is the differences in cultural backgrounds, habits, living styles and ways of thinking between the two families that lead to the conflicts.” She explained that the disagreements she had with her in-law were derived from the different views about childrearing in rural vs. urban China:

*My in-law is from rural China where infant formula is rare, so she found formula feeding very surprising and peculiar. When introducing solid food to baby, she found (the practice that) putting less salt, sugar, no oil or MSG in baby’s food bothersome. She said in her hometown infants eat whatever adults eat since 6 month old...Same thing about treating the illness, we think the baby should see the doctor whenever he is sick, but their rural view is that just wait for couple days and time will heal it.*

Another mother echoed such a view: “Every family has different living habits and styles. My in-law and I try to take care of the baby based on our own habits and that is where the conflicts usually come from.” She gave an example of such a disagreement when she
explained, “her family likes greasy and salty food and they eat fewer vegetables and fruits than my family does. So my in-law does not think vegetables and fruits are necessary for kids but I do.” She revealed that “the process of trying to adjust to each other (磨合) is long and painful and neither of us is happy.”

The disagreements and conflicts over parenting practices could be intensified when mothers and paternal grandmothers struggled for greater decision-making powers. One mother commented, “Paternal grandmother thinks that because she helps me with childcare so I have to listen to her. My thought is that you are just helping me and it does not mean that you are in control of everything.” Another mother voiced a common frustration shared by mothers using paternal grandmother care, “She would just intentionally do the opposite of whatever I suggest! (故意唱反调)” Paternal grandmothers’ ignorance of requests and resistance to compliance were often interpreted by mothers as the fear of having their authority challenged. As one mother noted:

When I raised a different opinion about childrearing, she (paternal grandmother) would say that she had raised couple children to adulthood, in her way. Being the older generation [with greater experiences and authority] (作为长辈), she may feel that if she agrees to what I say, that simultaneously invalidates and debunks her way of raising her children and makes her lose face.

Even though at times paternal grandmothers did take their advice, mothers often found that “paternal grandmother does it unwillingly”. Such unwilling display of deference to the directives usually led to what Shih and Pike (2010) called “covert backstage resistance”, during which the paternal grandmother failed to carry out the suggestion and insisted on implementing her own parenting method in mothers’ absence. One mother described such an instance: “For example, I do not let my son drink coca cola, so she would not let him drink it in front of me, but would secretly feed him when I
am not around. She told him to drink it fast and don’t let mom see it.” Given mothers’ reliance on grandmothers for childcare, the household has become the battleground on which paternal grandmothers—who have increasingly lost privileged status in their relationships with daughters-in-law—can assert greater power and authority. The contest of “whose opinion counts (谁说了算数)” only led to more conflicts and tensions in the interactions between mothers and paternal grandmothers.

In the face of conflicts with paternal grandmothers, mothers often chose to restrain their resistance and remain silent. Echoing a common trend, one mother described how she dealt with conflicts with her mother-in-law, “In most cases I don’t talk back. I let paternal grandmother say and do whatever she wants to do. Only in those cases when I really cannot stand, I will argue back, but I normally would not.” Other mothers mentioned that they never vocalized disagreements and only responded with confirmative opinions when they were in agreement. They pointed to their code of conduct as “No matter how big an objection I have to paternal grandmother, it cannot be said face to face.”

Some mothers reasoned that their conflict-avoidance behavior was in accordance with the norms and hierarchies associated with the cultural expectations of respect and deference to paternal grandmothers. Restraining from direct and overt questioning and challenging paternal grandmothers may be partly due to mothers’ fear of “showing disrespect” and “creating the impression of a unfilial daughter-in-law”. Moreover, mothers’ dependency on paternal grandmothers for childcare further situated them in a vulnerable and disadvantaged position in an already hierarchical relationship. Mothers using paternal grandmother care felt they lacked the power to negotiate for their preferred
childrearing practices, particularly when the practices were in discordance with paternal grandmothers’ beliefs and styles.

Mothers using paternal grandmother care usually relied on fathers to negotiate on their behalf when conflict or disagreement erupted. However, the practice of using the father as a medium for communication came with its risks. The intergenerational conflict could spill over to marital conflict if the husband failed to take sides, or worse, declared loyalty to the paternal grandmother over his wife. “I am very disappointed and dissatisfied with him” one mother responded when asked about her relationship with her husband after the child was born, “he listens to his mother. He probably agrees with his mother because he was raised that way.” Likewise, another mother complained about her husband, “sometimes even he thinks his mother is wrong, he does not point that out. That makes his mother think that I am picky(挑剔) if I am the only one who is not happy with what she did, which is in fact untrue.” One mother shared an inconvenience of this communication practice, “My husband is not always around to observe [something that the paternal grandmother did wrong]. I will have find an opportunity for a similar incidence to occur again, in my husband’s presence, to bring it up,” she mentioned, “Otherwise, the paternal grandmother would know that I was talking at her back, which would make our relationship even tenser.” In some cases, the avoidance of direct communication with paternal grandmother and the unsuccessful negotiation through the father led the mother to shoulder more of the child care. One mother mentioned, “When I feel that something is inappropriate to mention, or I cannot have her [the paternal grandmother] do it the way I wanted, I will just to do it myself.” These findings suggest that mothers using paternal grandmother care might receive insufficient physical and
psychological support. Any positive impact that paternal grandmother support may provide could be counterbalanced by the tensions and frustrations experienced by mothers in their interactions with paternal grandmothers. In dealing with the conflict with paternal grandmothers, mothers made efforts to suppress negative emotions towards the paternal grandmother, minimize or avoid direct conflict, and seek out the father to mediate discord. These coping behavior mothers used to deal with paternal grandmothers involvement may explain why paternal grandmother care did not increase parenting stress for mothers.

It is noteworthy that the estimated coefficient on paternal grandmother for fathers’ parenting stress \( (b_{PGM}=1.14) \) is positive and the largest in magnitude of the coefficients on all three types of grandmother care. It is double the size of coefficient on maternal grandmother \( (b_{MGM}=0.66) \) and represents about a fifth of a standard deviation. It may be that being the middleman between their mother and their wife in conflicts is stressful to fathers. As one father acknowledged, “it is very hard for daughter and mother-in-law to get along, they would have conflict even over trivial things and it depend on me to go in between, explain and smooth things over”. He described his role as “double sided tape,” sticking the mother and paternal grandmother together as a family. He perceived that failing his work would make the family fall apart. Serving as the “go-between” to communicate information about difficult or unpleasant issues was already a stressful role, while the need to declare loyalty to the mother or paternal grandmother was even more stressful for mediating fathers. Fearing that taking his mother’s side would affect his marital relationship, one father talked about his strategy: “when my wife wanted me to talk to my mother about something that I actually thought my mother was right, I just told
her (my wife) that I had a conversation with my mother which in fact did not happen.”

Taking their wives’ side could also incur problems. One father revealed: “you have to be very strategic, say it in roundabouts ways (委婉), if you are too obviously on my wife’s side, my mother would complain that I forgot about her after married my wife (娶了老婆忘了娘)”. Fathers pointed out that no mediating role was necessary for them in the mother-maternal grandmother dyads as mothers and grandmothers usually negotiated and resolved the conflicts by themselves through open communication.

**Both maternal and paternal grandmother support.** Mothers received greater levels of instrumental support in families that utilized both maternal and paternal grandmothers providing simultaneous or alternating care for the infant. Some families deployed both maternal and paternal grandmothers to provide simultaneous care for the child either at the child’s home or at one of the grandmother’s homes. Other families had maternal and paternal grandmothers provide care on different times of a day or different days within a week. The collaboration of two sets of grandmothers reduced the amount of childcare and household duties left up to the mother. Moreover, the demands and stress of infant care and domestic work were distributed between the grandmothers so that neither would be overwhelmed or distressed by the workload. Child care provided by both maternal and paternal grandmothers was often deliberately arranged when the two sets of grandmothers possessed child care skills, experiences and styles that could assist and supplement each other. Mothers found that such collaborative care could deliver more satisfying care qualities and mitigate their fear and distress that their children might suffer disadvantages as a result of their decision to continue pursuing their careers.
The presence of maternal grandmother in the care coalition, particularly in the simultaneous care arrangement, might offset the tensions and conflicts between mother and paternal grandmother. Mothers described the maternal grandmother’s role as an informant to learn about “what paternal grandmother did with the child during the day” and as mother’s deputy to represent her interests and “convey childrearing ideas and expectations to the paternal grandmother”. Mothers would usually avoid directly questioning or confronting paternal grandparents’ by gaining information from the maternal grandmother, and letting her negotiate with the paternal grandmother when conflicts arose.

One mother described her practice, “I let my mom talk to my in-law as if these [my ideas] were her ideas,” and pointed out that “the paternal grandmothers is more likely to consider maternal grandmother’s suggestion and opinions on childrearing” than her own. In her case, this mother gained power through alliance with her own mother who possessed equal status as the paternal grandmother in the family structure. The negotiation between the two grandmothers thus posited less threat to the traditional cultural model of age/generation-based hierarchy that might otherwise weaken mothers’ power in bargaining with paternal grandmothers. The findings that mothers enjoy greater instrumental support from both grandmothers, and greater power as a result of maternal grandmothers’ emotional support, may partly explain why they experience less parenting stress in this care structure.

**Discussion**

This study examines the ways in which types of grandmother care shape parenting stress experienced by first time mothers and fathers in urban China. It draws on the
strengths of both quantitative and qualitative approaches by observing the quantitative associations between grandmother support and parenting stress, while also using the qualitative interview data to enhance these findings and shed light on the mechanisms of the associations found.

In support of the first hypothesis, the quantitative results suggest that overall grandmother support is not associated with higher parenting stress for mothers and fathers. The interviews with parents reveal that the negative or neutral associations between grandmother support and parenting stress in the Chinese context may be explained by the prevailing cultural values of intergenerational interdependence, and resource exchange and mutual support among extended family members. This explanation is in accordance with the sociocultural framework (Roschelle, 1997), which posits that experiences with intergenerational relationships are likely to differ with families’ sociocultural backgrounds.

Consistent with the findings in studies of grandparent care in other Asian societies (e.g., Lee & Bauer, 2013; Mehta & Thang, 2009), I found that expectation for support was stronger for grandmothers than grandfathers, based on the traditional Confucian female gender role. Chinese parents also expressed strong preference and trust toward grandmother support over non-familial care, echoing Asian parents in many other studies (Goh, 2009; Goh & Kuczynski, 2010; Lee & Bauer, 2013). Previous research suggests such strong trust of family members and distrust of non-kin relationships is a central characteristic of societies like China in which family and family ties are exclusively prioritized (e.g., Fukuyama, 1995; Goh, 2006). Given such positive perceptions of
familial assistance, grandmother support is likely to be perceived as an additional resource that would not increase parenting stress for Chinese couples.

The findings of the current study also support the hypothesis that intergenerational relationships may guide the nature of associations between grandmother support and parental adjustment. The quantitative results show that mothers reported less parenting stress only when they received support involving maternal grandmothers (both in MGM care and BOTH care). However, receiving support from only paternal grandmothers was not associated with lower parenting stress for mothers. The pattern of matrilineal advantage in grandparent support is consistent with the findings in previous studies examining families with children with disabilities in North American samples (e.g., Hasting et al., 2002; Trute, 2003; Trute et al., 2008). These studies consistently found maternal grandmothers to be more supportive than paternal grandmothers in assisting mothers coping with parenting stress. The researchers argued that the stronger relationship between mothers and their own mothers facilitated the acceptance of the disabilities and the provision of emotional support, which differed from mothers’ experiences with paternal grandmothers.

The interviews with the Chinese parents in the current study suggest that the matrilineal advantage in grandparent support seems to be shaped by the lineage-based differences in intergenerational power relations. The mothers tended to report sharing a more balanced relationship with maternal grandmothers than paternal grandmothers. There is also evidence of mothers’ privileged status in their relationships with maternal grandmothers, particularly in the families with singleton adult daughters. It is likely that the mothers who are able to negotiate for non-normative maternal grandmother care are
already more empowered in their family system than those who fail to arrange the care. By contrast, mothers seem to occupy a lower status in their relationships with paternal grandmothers. Their dependence on paternal grandmother support seems to perpetuate the traditional hierarchical mother/daughter in-law relationship that works against them in the realm of child care, despite their increased empowerment in many other family affairs given their increased educational attainment and earning powers (Shih & Pyke, 2010; Cong & Silverstein, 2008; Song, 2009).

The interviews suggest that the variation in the mother-grandmother power relations may have implications for how responsive grandmothers are to mothers’ needs. Maternal grandmothers tended to provide support that was attentive to the needs of their daughters. Perceiving maternal grandmothers as providing care for themselves as well as their children, the mothers often felt comfortable relinquishing undesirable duties to maternal grandmothers and freely negotiating their needs and desires through open communication.

Such care for the adult daughter was particularly salient among grandmothers with singleton daughters. Their interactive styles resembled those of grandmothers and adolescent mothers in U.S. studies (e.g., Smith, 1983; Apfel & Seitz, 1991). Like their Western counterparts who helped their less skilled and less mature teenager daughters raise infants, grandmothers of the singleton generation attempted to educate their “less independent daughters” about child care, and assumed great responsibility for childrearing. These support styles offer the potential advantages of children being raised under the supervision of the more experienced grandmother, and mothers being able to continue with their careers and desirable lifestyles without facing all the realities and
difficulties of parenthood in one sudden transition. However, there is an associated risk that mothers who relinquish so much of the parenting work to grandmothers may not learn to effectively communicate with or respond to the child’s needs, nor establish a strong mother-child bond. In the current study, many mothers who used maternal grandmother care commented in interviews that great levels of instrumental support (e.g., co-sleeping) from the maternal grandmother led the child to attach to the grandmother more than the mother. However, mothers did not consider distancing from the mother a stressful or undesirable situation, nor did they feel exclusive attachment between mother and child to be a healthy behavior. Mothers reported that providing the room for children to establish relationships with grandparents during infancy necessarily prepared them for the close and complex kin relationships that made up adult and family life in China in their futures. This may reflect a cultural difference in ideology of mothering and beliefs in the exclusiveness of mother-child bond (Barlow & Chapin, 2010; Hays, 1996). It also explains why some mothers’ great dependence on maternal grandmother care (e.g., relinquishing behavior), which might pose a threat to the mother-infant bond, did not increase parenting stress in these mothers.

By comparison, in paternal grandmother care the hierarchical relationship obliged the mothers to attend to the needs of paternal grandmothers. This included fulfilling filial duties to relieve their domestic burden, and deferring to their authority on parenting decisions. The lack of effects of paternal grandmother support on reducing maternal parenting stress may be partly due to the perception that the support was not fully responsive to mothers’ needs. The interviews also revealed mothers’ inhibitions regarding disruptive emotional expression and efforts to preserve harmonious
relationships when coping with conflicts with paternal grandmothers. Such coping strategies may explain why paternal grandmother care did not increase maternal parenting stress in the quantitative analyses.

Together, the qualitative findings suggest that the different relationships mothers had with maternal versus paternal grandmothers might have shaped the differences in mothers’ perceived effectiveness of received support in reducing their stress. This finding is in line with the social support theories that highlight the perceived quality/responsiveness of the support to be a more important determinant of the effectiveness of the support than the availability per se (e.g., Maisel and Gable, 2009; Bolger et al., 2000; Cutrona, 1996). Future research aiming to better understand the relationships between intergenerational involvement and parental adjustment to life stress should consider factors such as the relationship quality and dynamics between parents and grandmothers, parents’ perceived adequacy, relevance and satisfaction with support from grandparents, and family cohesion/conflict.

In addition, the findings on the distinctive effects of maternal versus paternal grandmother care on parenting stress provide strong support for the idea that maternal grandmother care should be treated as a viable pattern of childcare support in China. China’s longstanding patrilineal system, which identifies paternal grandmother care as the normative pattern, has led most research on grandparent support in China to either ignore the non-normative maternal grandmother care, or treat it merely as an alternative when paternal grandparent care is not available (e.g., Sun, 2013; Short et al, 2001; Chen, 2004). However, a few studies (e.g., Chen et al., 2011) including the current one have provided evidence that maternal grandparent care may function differently from
normative paternal grandparent care. Future research on grandparent care in China should pursue separate analyses of patrilineal- and matrilineal-based support to further illuminate potentially different dynamics in lineage-based kinship interactions.

The findings of this study also suggest a gender pattern in the importance of grandmother support as a predictor of parenting stress for mothers and fathers. Grandmother child care support seems to be more essential for mothers than fathers as a coping resource for transition stress related to role restrictions and dysfunctional parent-child interactions. The gendered parenting roles assumed by the mothers and fathers in the current study may partly explain such gender differences. Like the studies of parents in many Western and non-Western societies (e.g., Lee & Keith, 1999; Simpson & Rholes, 2008; Belsky, Lang & Huston, 1986), I observed a more traditional sex-based division of labor between spouses after the birth of the child. In the interviews, mothers reported to shoulder greater daily routine care responsibilities than fathers. They were more likely than fathers to be the one who took care of the child after work and at night, experienced deprivation of sleep and social life, and struggled with the demands of childcare and work. In the current study, parenting stress was measured in the realms of role restrictions, social isolation, and sense of competence in the parenting role. Thus, grandmother support may serve as a more important and relevant resource for stress coping for mothers than for fathers, in accordance with the stressor-specificity hypothesis (e.g., Cohen & McKay, 1984; Gottlieb, 1978).

In line with the gendered parenting roles, all the fathers in the interview sample considered providing economic resources to be their primary parental responsibility as well as the main source of parenting stress, regardless of their income levels. Low-
income fathers faced the pressure to earn more as their financial burden increased by the birth of the child. Conversely, high-income fathers faced the pressure to maintain their high earnings and worried about the sustainability of the high quality of living they could provide for their children. It is likely that for fathers, grandparents’ financial support would be more significant than grandparents’ childcare support in reducing paternal parenting stress. However, the domains of financial support from grandparents and financial stress for parents were not measured in this study. It is also likely that fathers’ stress levels are less sensitive to grandmother support but more sensitive to their spouse’s stress level. As revealed in the interviews, fathers may face pressure and stress to intervene when the mothers were coping poorly with grandmothers’ involvement and the demands of childcare. Fathers may experience less pressure when they are confident that their spouse is functioning with lower levels of parenting stress. Future research and intervention should better address the needs and concerns of fathers in their transition to parenthood.

While the current study represents an important first step in exploring the relationship between grandparent support and parents’ adjustment to new parenthood in a general population of China, several features limit the extent to which conclusions can be drawn. This analysis examined grandmother involvement and parenting stress at a single point in time so that causal relationships between grandmother support and parenting stress cannot be inferred. It is not clear whether grandparent support protects against stress associated with new parenthood or if those parents who are suffering higher levels of parenting stress are more likely to experience what Kerr and Bowen (1988) called “intergenerational cutoffs” and reject support from grandparents. The interviews revealed
evidence that grandmother support can have positive and negative impact on parenting stress. However, further research, ideally employing a longitudinal measure of parenting stress and grandparent involvement, is needed to better differentiate cause from effect.

Another limitation of the study is that the perspectives from the grandparents are missing. It would be useful to get information on grandparents’ interpretations of what care support means and their opinions on what roles they ought to play in providing the support. The findings suggest that the effectiveness of the support is rooted in the intergenerational relationships and the perceived adequacy of the support. It is therefore important to understand not only parents’ but also grandparents’ accounts of relationships with adult children, their understandings of what childcare support means and entails, and their appropriate/legitimate roles in the care in future studies.

An additional limitation of the study is that parents with higher incomes may have been overrepresented in our study. It is possible that higher income parents were more likely to consent to participating in our study, and that the hospital from which we recruited parents was more likely to attract high-income parents because of its good reputation and its proximity to relatively high-income areas in Nanjing. It is also important to note that the current study focuses its examination on urban families. The findings of the study may not be applicable to families in rural China, where grandparent care functions more as a substitute rather than a supplement for parental care for as many as 40 percent of the young rural children whose parents migrated from rural to urban areas for better work opportunities (All-China Women’s Federation, 2013).

**Implications**
With increasing numbers of grandparents available to support parents raise singleton grandchildren, continual focus on grandparent involvement in family life in China is important. The findings from this study suggest that the family system, potentially along with the dynamics within the intergenerational system, is critical to the wellbeing of urban Chinese mothers. Public initiatives and programs seeking to support mothers and families in the transition to parenthood may benefit from adding a focus on strengthening the relationships between mothers and caregiving grandparents, and improving the functioning of intergenerational co-parenting structures in China. For example, the provision of basic information regarding childcare and family adjustment can help grandparents better understand the practical and emotional needs of new parents, and how relevant support can be provided. For parents, a more positive intergenerational relationship could include expression of gratitude and appreciation of the support, recognition of the value of grandparents’ contributions to their shared childrearing endeavor, and initiation of two-way communication to facilitate exchange of information and mutual learning about childrearing.

Moreover, the current study and some others (e.g., Lee & Keith, 1999; Lee & Bauer, 2013) suggest that mothers in societies that highly value and rely on family support for childcare (such as China and South Korea) are particularly likely to experience difficulties and stress in situations of family support deficits. Programs and policies such as long-term maternity leave, part-time employment with benefits, and high quality day care facilities should be introduced and expanded to supplement grandmother support and offer additional resources to assist new mothers.
Appendix A

Table 1. Demographics and Type of Grandmother Support in Survey and Interview Samples.

<table>
<thead>
<tr>
<th>Child Gender</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>170 (48.3)</td>
<td>40 (49.4)</td>
</tr>
<tr>
<td>Male</td>
<td>182 (51.7)</td>
<td>41 (50.6)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age of Parents</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>Mean (SD)</td>
<td>29.1 (2.9)</td>
</tr>
<tr>
<td>Father</td>
<td>Mean (SD)</td>
<td>31.9 (4.1)</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Singleton Status of Parents</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>N (%)</td>
<td>126 (36.1)</td>
</tr>
<tr>
<td>Father</td>
<td>N (%)</td>
<td>88 (25.3)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Educational Level of Mother</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High school</td>
<td>N (%)</td>
<td>65 (18.5)</td>
</tr>
<tr>
<td>College</td>
<td>N (%)</td>
<td>252 (71.6)</td>
</tr>
<tr>
<td>Graduate/professional degree</td>
<td>N (%)</td>
<td>35 (9.9)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Educational Level of Father</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High school</td>
<td>N (%)</td>
<td>56 (15.9)</td>
</tr>
<tr>
<td>College</td>
<td>N (%)</td>
<td>242 (68.8)</td>
</tr>
<tr>
<td>Graduate/professional degree</td>
<td>N (%)</td>
<td>54 (15.3)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>N (%)</td>
<td>295 (83.8)</td>
</tr>
<tr>
<td>Father</td>
<td>N (%)</td>
<td>343 (97.7)</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Household Income</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
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</thead>
<tbody>
<tr>
<td>Mean (SD)</td>
<td>8020.2 (5653.6)</td>
<td>7761.9 (3761.5)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Grandmother Co-residence</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N (%)</td>
<td>289 (82.1)</td>
<td>67 (82.7)</td>
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<table>
<thead>
<tr>
<th>Type of Grandmother Care</th>
<th>14 months Sample (N=352)</th>
<th>Interview Sample (N=81)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No grandmother support</td>
<td>N (%)</td>
<td>43 (12.2)</td>
</tr>
<tr>
<td>Maternal grandmother only</td>
<td>N (%)</td>
<td>137 (38.9)</td>
</tr>
<tr>
<td>Paternal grandmother only</td>
<td>N (%)</td>
<td>127 (36.1)</td>
</tr>
<tr>
<td>Both grandmother support</td>
<td>N (%)</td>
<td>45 (12.8)</td>
</tr>
</tbody>
</table>
Table 2: Multiple Regression Models for Maternal and Paternal Parenting Stress Predicted by Types of Grandmother Support.

<table>
<thead>
<tr>
<th>Types of Grandmother Support</th>
<th>Maternal Parenting Stress</th>
<th>Paternal Parenting Stress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Types</td>
<td>(N=338)</td>
<td>(N=330)</td>
</tr>
<tr>
<td>Independent Variables</td>
<td>B(S.E.)/p</td>
<td>B(S.E.).p</td>
</tr>
<tr>
<td>Types</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NGM (reference)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MGM</td>
<td>-3.10 (1.45)*</td>
<td>.66 (1.50)</td>
</tr>
<tr>
<td>PGM</td>
<td>-1.64 (1.44)</td>
<td>1.14 (1.50)</td>
</tr>
<tr>
<td>BOTH</td>
<td>-3.50 (1.59)*</td>
<td>1.09 (1.63)</td>
</tr>
<tr>
<td>Covariates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child gender (1=boy)</td>
<td>-.20 (.65)</td>
<td>1.13 (.68)</td>
</tr>
<tr>
<td>Family income</td>
<td>-.00017 (.000058)**</td>
<td>-.000074 (.000064)</td>
</tr>
<tr>
<td>Respondent’s age</td>
<td>-.085 (.11)</td>
<td>.042 (.087)</td>
</tr>
<tr>
<td>Respondent’s employment</td>
<td>-1.55 (.98)</td>
<td>.030 (2.22)</td>
</tr>
<tr>
<td>(1=yes)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grandmother coresidence</td>
<td>1.54 (1.15)</td>
<td>-.71 (1.19)</td>
</tr>
<tr>
<td>(1=yes)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respondent’s education level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school (reference)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>College</td>
<td>.60 (.89)</td>
<td>-1.44 (.97)</td>
</tr>
<tr>
<td>Graduate school</td>
<td>-1.16 (1.31)</td>
<td>-.92 (1.25)</td>
</tr>
<tr>
<td>Constant</td>
<td>27.06 (3.58)***</td>
<td>19.07 (3.86)***</td>
</tr>
<tr>
<td>F</td>
<td>2.29*</td>
<td>.77</td>
</tr>
<tr>
<td>df</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>$R^2$</td>
<td>.0653</td>
<td>.0236</td>
</tr>
</tbody>
</table>

*p < .05; **p < .01; ***p < .001
Appendix B

Nanjing Family Qualitative Study: Parents Of Infants Interview Protocol (Only Provide Here A List Of Interview Questions in Part III. Parenting and Part IV. Grandparenting)

第三部分 为人父母
Section III. Parenting

VIEWS OF PARENTING

- What are the things you enjoy most about being a parent? [Probe for details and stories]
  对你来说，作为父母让你感到最快乐/享受/喜欢的是什么呢？[询问：细节内容和故事]

- What are the hardest/most difficult things about being a parent? [Probe for details and stories; view on it; how does she/he deal with it; why in that way]
  对你来说，作为父母让你感到最困难/不容易的是什么呢？[询问：细节内容和故事；怎么看？怎么影响？怎么解决的？为什么这么做？]

- What kind of mother/father do you think you are? [What are some qualities you have as a mother?]
  你认为自己是怎样的母亲（父亲）？[询问：特点/品质][询问：和其他的妈妈/爸爸不一样的？]

- What are things you are proud of as a mother/father? [or you are satisfied with yourself as a mother/father]
  作为父母，你觉得自己在哪些方面做得很好/很不错/很满意/很骄傲的地方？

- What are the things that you wish you could do better as a mother/father?
  作为父母，你觉得自己在哪些方面还应该做得更好些？[当母亲/做母亲有没有不完美/遗憾的地方，改进就能更完美了。]

- How did life change for you after [CHILD] was born? How did life change for your partner/others in the household?
  自从孩子出生后，你自己的生活有哪些变化？ 对于你爱人呢？ 家里其他人呢？你怎么看待自己的这种变化？

- Can you tell me one thing you wish you had known about being a parent before you had [CHILD]? Anything else? [Probe for reasons; what happened?]
有没有遇到过这种情况。有些为人父母/照顾教育孩子的事情，你希望在有孩子之前就早些知道的[或者说，早点知道就好了？] 是关于什么事情？[询问：为什么想早点知道？发生了什么事情，影响后果] 其他呢？

- How would you describe [child’s father/mother] as a father/mother? [NOTES TO INTERVIEWER: Ask about mother, if interview child’s father] 孩子的父亲/母亲是一个怎样的父亲/母亲？

- What are some of the important differences between being a mother and being a father? How is it the same being a mother and being a father? 做母亲和做父亲相同的地方有哪些？差异是什么？[可能有父母询问：对于孩子来说；作为父母说；目前和以后] 为什么有这些差异？

- How has parenthood affected your relationship with [mother/father of child, or other co-parent]? 你做父母后，对夫妻之间的关系有什么变化？好的地方/促进的地方/不好的地方。[有的家庭…..，为什么您家里没有变化呢？]

FAMILY RELATIONSHIP

- 在照顾和教育孩子的过程中，跟孩子父/母亲有没有意见不一致情况？关于什么事情？例子？如何处理？

- All relationships have disagreements. When you do have disagreements with (child’s father), what are they usually about? [probe recent episodes]. What kind of disagreements do you have related to your child? 其它方面呢？跟孩子的父/母亲有意见不同的时候吗？什么时候？关于什么事情？具体例子，如何处理？

- IF FATHER NON-RESIDENT: How do you think child’s father not living with you has affected your child? How has this affected you as a parent? [如果孩子父亲不住在家里] 这样对孩子有什么影响？对你作为母亲有什么影响？

PARENTING ADVICE

- How have you learned about all of parenting things (i.e., feeding, sleeping, play, media)? Who do you talk with about parenting tasks/ how to care for your child when you need help or advice about particular things? Where do you go? 你是如何学会做父母的/照顾孩子/养育孩子/育儿的知识（例如，喂饭、睡觉、游戏等等）如果你有寻求关于如何做父母/或者对于具体照顾孩子的问题，都向谁？到哪里寻求帮助？什么途径？
When you grew up, how do your parents take care of you? Any influence on how you act as a parent to your [CHILD]? Examples? [If taken care by grandparents, ask about it] 你小时候长大过程中，你父母亲是如何照顾你的？对你现在自己做父母有什么影响？
或者可以说，你自己父母对你的做法想法，对你现在照顾教育自己的孩子的做法想法有什么影响？[例如：父母的当年的做法，我现在作父母一定不要象他们那样；或者我也要象他们那样。]
[如果小时候是祖父母照顾长大的，询问祖父母如何照顾，对目前做父母的影响]
[注意：可能在后面，隔代照顾的冲突的时候提到]

第四部分 隔代抚养
Section IV. Grandparenting

[Note: If you’ve learned in DAILY ROUTINE that another senior person plays parenting role (e.g., child’s grandmother, grandaunt/uncle, etc.), ask these questions about/ in reference to them]

If grandparents are involved with childcare,
1. How do you make this arrangement? What are the major reasons? Who are involved in decision-making? How? Why?
如果跟祖父母照顾孩子，为什么这么安排？主要原因？怎么决定的？

2. How do you feel about it now? Good parts and bad parts? How do you handle the worries?
对于这个安排，自己感觉怎么样？好的地方？有什么担忧？如何处理呢？

3. How is the care labor divided? Who make the important decisions about [CHILD] – Probe who makes decisions about: Childcare, feeding, shopping, education? How is that?
How are other family members involved in this process? How do you communicate with the grandparents? How do you instruct the grandparents on chidrearing? Have there been disagreements about these issues/decisions? What are they? How have disagreements about these decisions been handled?
关于孩子的事情，如何分工？都是谁做决定？[分别询问：关于吃 、穿、用、教育等等方面。]
怎么决定的？家里其他人如何参与？有没有意见不统一的时候？关于什么？如何解决
询问平时跟看护人的交流；怎么给与指导？

4. Tell me about the last time you have disagreement with grandparents related to chidrearing. How was it handled? What was your spouse’s attitudes/perspectives on this?
谈谈上次，你和孩子祖父母对于照顾孩子的做法意见不同的时候。怎么处理的？
您爱人的心态？
[Probe: How did it start? What happened in detail – who was around – what was the setting – what did she/he say – how she felt – How often does this happen?]

[询问：具体发生什么？怎么开始？谁在？场景？都说什么？想法，感受？处理？多久发生一次？]

[If differences in parenting/views of childrearing arise, explore these differences. What were the differences? What were the discussions you had with your spouse and grandparents, and What were the decisions?]

[抚养教育孩子观念做法的不同，询问不同之处；为什么这么认为？夫妻间的讨论/与祖父母的讨论；结论/决定]

[When you have issues with grandparents regarding childrearing, whom will you bring this up to? What would be the next step? Why do you handle it this way?]

[有意见先跟谁提出，再怎么？为什么这么处理？]

[Give examples on the disagreements you had with grandparents, or things that you did not approve and ask them to modify]

[曾经有过的分歧；或者你不赞同，提出而纠正过来的地方。]

[How is the father’s relationship with maternal grandparents? How is the mother’s relationship with paternal grandparents?]

[孩子父亲和外公外婆的关系；孩子母亲和爷爷奶奶的关系。]
### Appendix C

**Nanjing MetroBaby 14 Months Home Survey with Mothers and Fathers on Parenting Stress**

**第三部分：为人父母的感受**  
**Part III. The Feelings of Being Parents**

下列表格中列出了您可能会有的感受，您觉得这些说法是否符合您自己的情况，您是否同意？请在最符合您情况的选项上划圈。请仔细回答每一个问题，不要漏选。谢谢！

The following questionnaire contains statements that describe the feelings you might have. Do these statements represent your feelings/opinion? Please circle the response that comes closest to describing how you feel. Please answer each question carefully and complete each one of them. Thank you!

<table>
<thead>
<tr>
<th>Question</th>
<th>Not Agree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Very Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 我常常觉得自己不太能处理好事情。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. 我觉得做父母的责任把我束缚住了。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. 自从我有了这孩子，我觉得我几乎没有办法做我喜欢做的事情。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. 我的孩子难得做让我高兴的事情。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. 很多时候我觉得我的孩子不喜欢我,也不想亲近我。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. 当我为我的孩子做事的时候，我觉得没有人欣赏和感激我所做的一切。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. 我的孩子能做的事情没有我期望的多。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. 有些事情我孩子做得实在让我觉得烦恼。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9. 我孩子的问题比我预想的多。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10. 我的孩子对我的要求比大多数孩子更多。</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Not Sure</td>
<td>Agree</td>
</tr>
<tr>
<td>---</td>
<td>------------------------------------------------------------------</td>
<td>-------------------</td>
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<td>----------</td>
<td>-------</td>
</tr>
<tr>
<td>1.</td>
<td>I often have the feeling that I cannot handle things very well.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2.</td>
<td>I feel trapped by my responsibilities as a parent.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3.</td>
<td>Since having a child, I feel that I am almost never able to do things that I like to do.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4.</td>
<td>My child rarely does things for me that make me feel good.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5.</td>
<td>Sometimes I feel my child doesn’t like me and doesn’t want to be close to me.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6.</td>
<td>When I do things for my child, I get the feeling that my efforts are not appreciated very much.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7.</td>
<td>My child is not able to do as much as I expected.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>8.</td>
<td>There are some things my child does that really bother me a lot.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>9.</td>
<td>My child turned out to be more of a problem than I had expected.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>10.</td>
<td>My child makes more demands on me than most children.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
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IV. Conclusion

This dissertation presents two studies that explore the transformation of patrilineal practice in the care of infants by their grandparents in urban China. These two studies yield two important findings. First, the shift from the traditional patrilineal norm relying exclusively on paternal grandparent care to a bilateral interaction involving maternal grandparent care seems to result largely from China’s modernization process. When making grandmother care decisions, parents’ primarily consider the availability and qualifications of grandmother’s, the avoidance of patrilineal conflicts, and the construction of multi-caregiver coalitions. These considerations may lead them to increasingly prefer and use maternal grandmother care.

An in-depth examination of this significant shift in the patrilineal tradition of grandparent care suggests that three major factors associated with China’s modernization process may contribute to the change. First, a greater emphasis on interpersonal relations between the generations may explain parents’ increased use of and preference for maternal grandmother care. Moreover, women’s empowerment as a result of increased educational and economic leverage has allowed them to negotiate for their preferred, yet non-normative, care structure. Finally, parents embraced a more skill-based and child-centered childcare ideology that emerged concomitantly with the one-child policy, which called for both grandmothers to compare or combine resources in providing childcare.

The second finding is that parents interact differently with caregiving grandmothers from maternal versus paternal lineages. I found that mothers’ levels of parenting stress varied between maternal versus paternal grandmother childcare support.
While mothers tended to have strong expectations and positive perceptions of childcare support from grandmothers, they appeared to be more sensitive to the support offered by their own mother than their in-law. Specifically, mothers were more likely to report lower levels of parenting stress when their own mothers were involved, but not when their mother in-laws were the source of support.

The interviews revealed that both mothers and fathers tended to report more positive relationships and interactions with maternal grandmothers than paternal grandmothers. Mothers often described their relationships with maternal grandmothers as intimate and collaborative whereas they characterized their relationship with mothers-in-law as distant and hierarchical. Fathers were particularly distressed by the extra effort needed to mediate the relationships between mothers and paternal grandmothers, while such a mediation role was not required dealing with maternal grandmothers. These findings have implications for research and practices on intergenerational interaction and family relations in China or sociocultural contexts similar to those in China.

The findings of the study serve as further evidence of the weakened patrilineality in an understudied domain of kinship interaction in China - childcare support provided by grandparents. Given the dominant patrilineal principles in East Asian cultures, past research on the topic in China or other East Asian cultures focused exclusively on the normative and patrilineal pattern of grandparent care, or merged maternal and paternal grandparent care in the analyses. Such approaches are based on unwarranted assumptions that support provided by husbands’ families is culturally preferred and that the same rule governs both patterns of care arrangements. However, the current study proves these assumptions unfounded. I found that parents’ use of and preference for maternal
grandmother care reflected a conscious choice based on practical considerations, resources and needs. The choice also reflected a renegotiation of cultural preference versus personal choice, the parent-child relationship, and ideas/constructs of independence and authority, as a result of China’s modernization process.

Parents also expressed that they interacted differently with maternal versus paternal grandmothers. Moreover, I found that maternal versus paternal grandparents support parents coping with the stresses of parenting differently. These findings provide powerful evidence that maternal grandparent care is a meaningful pattern in China, rather than a trivial or unimportant substitute for the normative paternal grandmother as past research has relegated them. (e.g., Sun, 2013; Short et al, 2001; Chen, 2004). In a society that relies heavily on family support for early childcare, the importance of and demand for maternal grandmother care should only increase as more children are likely to be born to each family under the recently launched two-child policy (Xinhua News Agency, 2015). Future research investigating grandparent care in China should consider maternal grandparent care as a viable pattern and pursue separate analyses of patrilineal- and matrilineal-based child care to illuminate the evolving gendered family and intergenerational relationships in China’s changing socioeconomic environment.

The findings of this dissertation also illustrate that it’s not just the patrilineal structure of kinship interaction that has become unstable. The dynamics and nature of such interaction, historically characterized by boundaries and hierarchies set by gender and generation, are also constantly negotiated and shifting in a rapidly modernizing China. Though most couples recognized the historically hierarchical relationship that emphasizes filial piety and obedience to older generations, their narratives showed how
fluid the boundaries and hierarchies could be, as the intergenerational interaction became
more instrumental and adaptive (Davis, 1983; Chen et al., 2011). Consistent with
previous studies (Guo, 2001; Yan, 2003; Shi, 2009), my findings showed members of the
older generation who had fewer resources to offer (e.g., less satisfying qualifications as
caregivers) could occupy a lower status, feel powerless vis-à-vis the younger generation,
defer to the decisions of adult children, and show reluctance to challenge the family
arrangement. In contrast, members of the older generation who provided more resources
to the younger generation tended to earn more power, respect, and filial care through the
younger generations’ dependence on them.

Power negotiation between the generations was particularly salient in the mother
and daughter-in-law relationship in the current study, echoing many other studies about
China (Cong & Silverstein, 2008; Du, 2013; Shih & Pyke, 2010). In the context of
childcare, although paternal grandmothers traditionally played a central role in instructing
daughters-in-law on matters of parenting, daughters-in-law who are increasingly educated
and reliant on childrearing experts for parenting guidance have constantly challenged this
educator role (Mjelde-Mossey, 2007, Nyland, Zeng & Tran, 2009; Zhu, 2010).
Concurrently, although daughter-in-laws’ greater educational and economic leverage
have empowered them to make childcare decisions, their dependence on mother-in-laws’
support, especially so they can work and study outside the home, has led them to
experience a decline in their power in exercise their parenting preferences. Consistent
with the structural family theory (e.g., Faber, 2002; Bartram, 1996), the lack of clarity
regarding roles and boundaries can cause strain in a caregiving arrangement that involves
mother and paternal grandmother, negating the positive impact and support that paternal
grandmother involvement could provide. The more positive relationship observed between mother and maternal grandmother may result from a more balanced relationship between the two generations. Perhaps, the mothers who used maternal grandmother care may be more empowered in the family system than those who used paternal grandmother care, evidenced by their ability to negotiate for a non-normative care arrangement.

The differential outcomes between mothers using maternal versus paternal grandmother support suggest that parents’ experiences of the available support might be more important than the availability *per se* in assisting parents’ coping and adaptation to challenges and stressors. Findings encourage future research on intergenerational support to complement the dominant focus on the support availability (usually measured by size of support network and frequency of contact). Future research should include equal interest in relationship quality and dynamics, such as parents’ perceived adequacy, relevance and satisfaction of the grandparent support. It also recommends multigenerational interventions with focus on relational support in family practice involving both parents and grandparents providing childcare.
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