Construction and Validation of the Multidimensional Experience of Grandparenthood Set of Inventories

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A new set of inventories designed to examine the multidimensional experience of grandparenthood (MEG) was developed in four stages. Three hundred thirteen grandparents (181 women and 132 men; age range, 46 to 92 years) were asked to complete a series of questionnaires to validate the final structure of the MEG, which consists of 11 factors configured as four dimensions: cognitive (personal investment and personal cost), affective (positive and negative feelings), symbolic (meaning, compensation for parenthood, continuity, and burden), and behavioral (emotional support, contribution to upbringing, and instrumental support). Associations were examined among the four dimensions of the MEG and the hierarchy of roles in grandparents' life, the Caregiving-System Scale, the Big Five Personality Inventory factors, the Social Desirability Scale, and sociodemographic data. The discussion focuses on the validity and utility of the multidimensional conceptualization of the experience of grandparenthood.

KEY WORDS: *construction; grandparenthood; inventories*

Demographic changes in recent decades have brought about a substantial increase in life expectancy. Consequently, more people are becoming grandparents and fulfilling this role for a longer portion of their life span. Silverstein and Marenco (2001) suggested that men and women might spend almost half their lives in the role.

Moreover, growing recognition of the importance of intergenerational bonds has gradually shifted the attitudes toward grandparents and their potential to serve as a source of support for the family in general and for childrearing in particular. The grandparent–grandchild relationship seems to be second in importance only to the parent–child relationship from the point of view of parents (Findler, 2000) and grandparents (Nuttman–Shwartz, 2007).

A wide variety of social background factors has been found to be associated with the way grandparents perform their role and the degree of satisfaction they derive from it (Silverstein & Marenco, 2001). Most research shows that grandmothers are more involved and committed to the grandparent role and are more satisfied with it than grandfathers (for example, Silverstein & Marenco, 2001), perhaps because continuity with maternal involvement in childrearing enables women to feel more comfortable and derive greater pleasure from being a grandparent (Bates, 2009; Reitzes & Mutran, 2004a). Studies have also found that younger grandparents have greater contact with grandchildren and share more recreational activities. Older grandparents, on the other hand, tend to provide more financial assistance (Silverstein & Marenco, 2001). In addition, grandparents with higher levels of education report that they participate in more activities with their adolescent grandchildren, are more likely to play a mentorship role, and are more likely to discuss the grandchildren's problems and plans for the future. Grandparents with lower levels of education report having more contact and are more likely to play the role of friend with their grandchildren (King & Elder, 1998). Thus, grandmothers, younger grandparents, and more educated grandparents can be expected to be more involved in the various aspects of grandparenthood.

The role of grandparent is heterogeneous, complex, and dynamic. This multifaceted nature poses a special challenge for researchers, which may explain why, despite the importance of the role for the individual and the family and its increasing economic, political, and legal implications, the research into the meaning and significance of grandparenthood

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has been sparse (Werner, Lowenstein, & Katz, 1998).

Several instruments have been designed to measure the meaning and role of grandparenthood and have yielded interesting results in a variety of research contexts. A summary of the main instruments and their characteristics is provided in Table 1. These and other instruments have been used to classify distinct types of grandparents (Robertson, 1977), to identify aspects of the meaning of grandparenthood (Kivnick, 1982, 1985), to reveal gender differences (Silverstein & Marcenco, 2001), and to indicate changes over time in the response to the role of grandparent (Neugarten & Weinstein, 1964; Peterson, 1999). They have also been used to identify factors that correlate with satisfaction with the role of grandparent, such as self-esteem (Reitzes & Mutran, 2004a), frequent meetings with grandchildren (Peterson, 1999), gender (Szinovacz, 1998), and a range of social background factors, including socioeconomic resources, race, age, and education (for example, Silverstein & Marceno, 2001).

Despite these results, the psychometric soundness and validity of the instruments remain in question for a number of reasons. First, the unidimensional structure of some of the scales is regarded as a weakness (for example, Van Ranst, Verschueren, & Marcoen, 1995). Second, although most scales have examined internal consistency (by means of Cronbach's alpha), they have yielded low values for reliability (for example, Robertson, 1977). Third, the majority of studies are based on limited samples (mostly grandmothers) in small or rural communities (Lee & Ellthrope, 1982; Robertson, 1977; Wood & Robertson, 1976). Finally, neither the structure nor the predictive validity of these instruments has been sufficiently validated by additional instruments that measure relevant variables, such as personality and sociodemographic characteristics.

Another problem relates to the multifaceted nature of grandparenthood. According to an extensive review by Werner and her colleagues (Werner et al., 1998), research has yielded typologies of grandparenthood (for example, Neugarten & Weinstein, 1964; Roberston, 1977) that have contributed greatly to the development of this field, but most studies almost totally ignore the possibility of multiple meanings of the role.

With these limitations in mind, the current study sought to construct and validate a new self-report instrument for the measurement of four dimensions of grandparenthood. The decision to use a four-dimensional structure stemmed from the typical conception of grandparenthood in the literature as a social role and the fact that social roles are said to comprise four dimensions: attitudinal, behavioral, affective, and symbolic (Heiss, 1990). A first step in this direction was undertaken by Hurme (1991) (see Table 1). According to Hurme, the attitudinal aspect refers to conceptions of the rights and obligations of grandparents, the behavioral aspect refers to the activities involved in the role, the emotional aspect refers to the satisfaction felt by grandparents and the affective expression involved in the role, and the symbolic aspect refers to the representative value attributed to the role. However, the symbolic dimension was not supported by her empirical data. Our aim was therefore to construct and validate an instrument to measure the experience of grandparenthood based on the fourfold structure of social roles.

For validation purposes, we examined the new instrument along with two relevant existing measurements with demonstrated validity: the Big Five Personality Inventory (John & Srivastava, 1999) and the Caregiving-System Scale (CSS) (Shaver, Mikulincer, & Shemesh-Iron, 2010). The widely used classic personality trait taxonomy of the Big Five represents diverse systems of personality in a single framework (John & Srivastava, 1999), offering an integrative overview of personality based on five factors, each representing a variety of specific traits. The five factors are Extraversion, which refers to the tendency to be outgoing, chatty, assertive, active, adventurous, daring, and energetic; Agreeableness, which relates to the tendency to be friendly, modest, courteous, flexible, forgiving, considerate, tolerant, kind, trustworthy, cooperative, and concerned for others; Openness, including the tendency to be intellectually curious, have a vivid imagination, be open to new ideas and experiences, and be sensitive, inquisitive, and inventive; Conscientiousness, consisting of the tendency to be careful, thorough, responsible, efficient, organized, achievement-oriented, and moral; and Neuroticism, which relates to the tendency to be anxious, depressed, tense, nervous, fearful, angry, and insecure as opposed to emotionally stable (Digman, 1990; McCare & John, 1992; Mount & Barrick, 1995).

Research in a variety of fields has repeatedly confirmed the Big Five factors as relevant and valid dimensions of personality that reliably predict differences between individuals. Moreover, several

Table 1: Summary of the Main Instruments Designed to Measure the Meaning and Role of Grandparenthood

Instrument and Author	Scale Description	Reliability
The Grandparent Role (Hurme, 1991)	Multidimensional scale measuring the attitudinal, behavioral, emotional, and symbolic aspects of the role of grandparenthood	
Grandparent Meaning Scale (Van Ranst et al., 1995)	Eleven a priori subscales (Reliable Alliance, Emotional Support, Reassurance of Worth, Financial Support, Link with the Past, Acquaintance with Aging, Mentor and Role-Model, Kin Keeper, Mediator Child–Parents, Substitute Caregiver, Distant Figure)	Cronbach's α = .61–.96 for grandmothers and .69–.96 for grandfathers
Grandparent Support Scale for Teenage Mothers (Borcherding, SmithBattle, & Schneider, 2005)	Multidimensional scale composed of three subscales (Grandparent Responsiveness, Grandparent as a Decision Maker, Grandparent as an Actor); three versions	Cronbach's α = .70–.90
Perceptions of Grandparenting (Thomas, 1986)	Multidimensional scale composed of five subscales (Satisfaction with Grandparenting, Perceived Responsibility for Grandchildren's Discipline, Grandchildren's Care, Giving Child-Rearing Advice, Helping Grandchildren)	Cronbach's α = .55–.90
Grandparent Strengths and Needs Inventory (Collinsworth, Strom, Strom, & Young, 1991)	Multidimensional scale composed of six subscales (Satisfaction, Success, Teaching, Difficulty, Frustration, Information Needs)	Cronbach's α = .66–.93; test–retest = .70–.85
Meaning of Grandmotherhood (Robertson, 1977)	Scale assessing personal and social dimensions yielding four types of grandmotherhood: apportioned, symbolic, individualized, and remote	
Behavior of Grandmothers (Robertson, 1977)	Scale assessing expressive and instrumental behaviors	
Grandparent Identity & Meaning (Reitzes & Mutran, 2004b following Mortimer, Finch, & Kumka, 1982)	Scale consisting of three dimensions: competence, confidence, and sociability	Cronbach's α = .91
Satisfaction with Grandparenting (Peterson, 1999)	Scale assessing global and relative satisfaction with the role of grandparenting	Cronbach's α = .82–.99
Grandparent–Grandchild Relationship Questionnaire (Clingempeel, Colyar, Brand, & Hetherington, 1992)	Multidimensional scale measuring the degree of relationship involvement between maternal grandparent and grandchildren with two subscales: Physical Involvement and Emotional Involvement; three versions	Grandparents' report at wave 1: α = .67; .72. Grandparents' report at wave 2: α = .67; .75
Grandparenthood Meaning (Kivnick, 1982)	Five grandparenthood dimensions: centrality, valued elder, immortality through clan, re-involvement with personal past, spoil	Cronbach's α = .69–.90

scholars have highlighted the theoretical and empirical importance of this construct (for example, Barrick & Mount, 1991; Buss, 1996). Hence, numerous studies have used the Five Factor Model in a range of populations, including older and aging adults (for example, Donnellan & Lucas, 2008; Steca, Allesandri, & Caprara, 2010) and parents (for example, Vermaes, Janssens, Mullaart, Vinck, & Gerris, 2008). In their meta-analysis, Prinzie, Stams, Dekovi, Reijntjes, & Belsky (2009) showed that parents' personality, in terms of the Big Five, was meaningfully, albeit modestly, related to parenting practices. The associations were robust not only across mothers' and fathers' reports, but also across different assessment methods.

More specifically, parents manifesting higher levels of Extraversion, Agreeableness, Conscientiousness, and Openness and lower levels of Neuroticism engaged in more warm and structured parenting and were more able to initiate and maintain positive interactions, to respond adequately to their child's signals, and to provide a more consistent and structured childrearing environment. In addition, parents who scored higher on Agreeableness and lower on Neuroticism were more supportive of their children's autonomy than other parents. Moreover, Kochanska, Friesenborg, Lange, & Martell (2004) indicate that the relationship between personality and parenting appears to grow stronger with the passage of time. To the best of our knowledge, the Big Five personality dimensions have never been used in a population of grandparents. Nevertheless, it may be assumed that, similar to parents, grandparents who are high on Extraversion, Agreeableness, Openness, and Conscientiousness and low on Neuroticism would have a more positive perception of their role as grandparents on all four dimensions of grandparenthood.

The CSS, which may also be relevant to the experience of grandparenthood, derives from a recent development in attachment theory. According to attachment theorists, the goal of any caregiving system is to reduce other people's suffering, protect them from harm, and foster their growth and development. In other words, the caregiving system is designed to meet other people's needs for protection and support (Mikulincer & Shaver, 2007). Collins, Guichard, Ford, and Feeney (2006) maintain that this empathic attitude includes sensitivity and responsiveness, the two aspects of parental caregiving emphasized by Bowlby (1982) and Ainsworth, Blehar, Waters, and Wall (1978). Dysfunctions in the caregiving system can trigger one of two nonoptimal caregiving strategies: hyperactivation or deactivation. Hyperactivated caregiving is intrusive, poorly timed, and effortful. The caregivers' goals may be to make themselves indispensable to others or to applaud themselves for being competent or admirable as caregivers. The caregivers can achieve these goals by making exaggerated appraisals of the other persons' needs, adopting a hypervigilant stance toward them, forcing them to accept the caregiving efforts, and focusing on the needs of others to the neglect of their own. On the other hand, strategies associated with deactivated caregiving include having insufficient empathy, withdrawing from caregiving, offering only half-hearted assistance, and insisting on maintaining emotional distance when the other seeks care, consideration, closeness, and comfort (Shaver et al., 2010).

Bowlby (1982) claimed that these caregiving behaviors are part of the relationships with children, siblings, and tribe members. Indeed, caregiving has been defined as a primary ingredient of parental behavior. In our view, as the role of grandparent entails caring for grandchildren on the instrumental and the emotional level, it may be assumed that the experience of the grandparent role among hyperactivated individuals will be characterized by more positive attitudes, meaning, and emotions related to grandparenthood (along with more anxiety) and more active involvement than among deactivated individuals. Furthermore, in this stage of life, individuals are engaged in a variety of roles in addition to that of grandparent, such as parent, spouse, career maker, and so on. Thus, to further validate our questionnaire, we examined the relative importance of the role of grandparenthood in the grandparents' lives. We assumed that the higher grandparenthood was ranked by the grandparents, the more positive their attitude would be toward the significance of the role, its meaning, and the emotions associated with it and the more active their involvement in it.

Because grandparents are often aware of the cultural and societal expectations for them (King, Russell, & Elder, 1998), they may report a brighter picture than is actually the case. Thus, to examine the extent to which grandparents' responses were honest and authentic, we added the Social Desirability Scale to our set of inventories. We assumed

that the lower the association between social desirability and the reports regarding attitudes, meaning, emotions, and active involvement in grandparenthood, the less the responses would be biased by cultural and societal pressures and expectations.

The overall goal of the current study was to construct a multidimensional self-report set of inventories to examine the experience of grandparenthood along four dimensions of grandparenthood and validate it by means of existing instruments. To this end, the new set of inventories was subjected to factor analysis, and the internal consistency of the factors that emerged was examined to determine reliability. The validity of the construct was then tested by means of the associations between the new questionnaire on one hand and the Big Five personality trait taxonomy, the caregiving system model, the hierarchy of roles in grandparents' lives, social desirability, and sociodemographic variables on the other.

METHOD

Participants

The participants consisted of 313 Jewish grandparents from various geographical areas in Israel who volunteered to take part in the study. They did not live with their children and grandchildren, and none of them was principally responsible for raising their grandchildren. The sample was composed of 181 (57.8%) women and 132 (42.2%) men ranging in age from 46 to 92 years ($M = 62.26$, $SD = 8.41$). Most of the participants were married (86.2%, $n = 269$), 4.2% ($n = 13$) were divorced, and 9.6% were widowed ($n = 30$). In terms of education, 24.1% of the grandparents ($n = 75$) had less than 12 years of schooling, 20.2% had more than 12 years ($n = 63$), and 55.6% held a university degree ($n = 173$). Full or partial employment was reported by 59.5% ($n = 183$), whereas 14.3% ($n = 44$) were retired, 19.5% ($n = 60$) were unemployed, and 6.8% ($n = 21$) were housewives. Health status was described as above average by 28.2% ($n = 86$), below average by 7.2% ($n = 22$), and average by 64.6% ($n = 197$). The majority defined their economic status as average (68.5%, $n = 207$), 29.5% ($n = 89$) as above average, and 2% ($n = 6$) as below average. Most grandparents had three children (47.6%, $n = 148$), 27% ($n = 84$) had four children or more, 1.6% ($n = 5$) had one child, and 23.8% ($n = 74$) had two children. In respect to number of grandchildren, 15.1% ($n = 47$) had one, 19.9% ($n = 62$) had two, 28.7% had three or four ($n = 89$), and 36.3% had five grandchildren or more ($n = 113$). Regarding religiosity, 16.9% ($n = 53$) of the grandparents were Orthodox, 20.4% ($n = 64$) defined themselves as traditional, and 62.3% ($n = 195$) were totally secular. Proximity was determined by the distance between grandparents' homes and their grandchildren's homes, ranging from a short distance (within walking distance) (1) to a long distance (more than an hour's drive) (5). Twelve and a half percent ($n = 39$) lived very close to their children, 17.6% ($n = 55$) lived close, 26.5% lived in an average distance from their children ($n = 83$), 30% lived far from their children ($n = 94$), and 12.1% lived very far away ($n = 38$).

Procedure

The participants were recruited via convenience snowball sampling: Research assistants (social work students) from different areas in Israel were instructed to look for grandmothers and grandfathers in their neighborhoods and to ask for their consent to complete a set of questionnaires. They recruited a large heterogeneous group of grandparents who were then asked to approach friends, acquaintances, and family members and to ask them to also participate in the study. Because men are typically less willing to take part in studies of this sort, the research assistants approached the grandfather first; if he agreed to participate, he was the only member of the couple who was given the questionnaire. If the grandfather did not give his consent, the assistants approached the grandmother; in most cases, she agreed to participate. The research assistants then contacted the participants by telephone and explained the purpose of the study. Four hundred ten grandparents gave their consent to participate in the study; the questionnaires were mailed in a sealed envelope with a stamped self-addressed envelope in which to return them. Three hundred fifty questionnaires were returned. The final sample consisted of the 313 grandparents whose questionnaires were completed.

Participants were asked to complete the packet of questionnaires in the following order: the Multidimensional Experience of Grandparenthood Set of Inventories (MEG), the Hierarchy of Roles in Grandparents' Life Scale, the CSS, the Big Five Personality Inventory, the Social Desirability Scale,

and sociodemographic data. It took 45 to 60 minutes to complete all questionnaires.

Instruments

The MEG is a new instrument that was constructed in four stages. First, five grandmothers and five grandfathers were interviewed to learn about the main themes that characterize their experience as grandparents and to generate relevant items for the questionnaire. In the second stage, a questionnaire was constructed from original items based on these interviews and by adapting items from several existing instruments (for example, the Grandparent Meaning Scale) (Hurme, 1991; Kivnick, 1982; Peterson, 1999; Robertson, 1977; Thomas, 1986). The clarity and comprehensibility of the items was confirmed by three professionals (a psychologist and two social workers). We distributed the questionnaire to a pilot sample to ensure that all the questions were phrased clearly and were relevant to the respondents' experiences as grandparents. In the last stage, the set of inventories was finalized on the basis of the pilot. In its final form, the MEG consists of 77 items (out of the original 110). This instrument was completed by the participants in the current sample.

The MEG contains four inventories reflecting the cognitive, affective, symbolic, and behavioral dimensions of grandparenthood. Each inventory is accompanied by a short introduction with instructions for its completion. The cognitive dimension (14 items) relates to the grandparents' willingness to invest in the role of grandparenthood and pay the accompanying costs. It consists of two factors: Personal Investment and Personal Cost. Respondents are asked to indicate the degree to which they agree or disagree with each statement on a five-point Likert-type scale ranging from 1 (strongly disagree) to 5 (strongly agree). The affective dimension (21 items) relates to feelings aroused by the role of being a grandparent and consists of two factors: Positive Emotions and Negative Emotions. Respondents are asked to indicate the degree to which they experience the specific emotion indicated in each item on a five-point Likert-type scale ranging from 1 (not at all) to 5 (very much). Items 1 and 20 in this dimension were adapted from Thomas (1986). The symbolic dimension (19 items) relates to the significance that the respondents attribute to the role of being a grandparent and consists of four factors: Meaning, Compensation for Parenthood, Continuity, and Burden. Respondents are asked to indicate the degree to which they agree or disagree with the statement in each item on a five-point Likert-type scale ranging from 1 (strongly disagree) to 5 (strongly agree). Items 2, 7, 8, 9, and 15 were adapted from Hurme (1991); Items 1, 8, and 13 were adapted from Kivnick (1982); Items 1, 2, and 13 were adapted from Robertson (1977); and Items 1, 8, and 12 were adapted from Thomas (1986). The behavioral dimension (23 items) relates to the grandparents' interactions with their grandchildren and consists of three factors: Emotional Support, Contribution to Upbringing, and Instrumental Support. Respondents are asked to indicate the frequency of the activity described in each item on a five-point Likert-type scale ranging from 1 (never) to 5 (very often). Item 12 in this dimension was adapted from Peterson (1999); items 7, 9, 14, 16, and 21 were adapted from Robertson (1977); and items 7, 9, 12, and 16 were adapted from Thomas (1986).

The Hierarchy of Roles in Grandparents' Life, a scale especially created for the purposes of this study, was used to evaluate the respondents' perceptions of the relative importance of the various roles with which they identify. Participants were presented with a list of six domains (marriage, parenthood, grandparenthood, friends, career, and community involvement) and were asked to rank them in order of their importance in their life from 1 (most important) to 6 (least important). The rank order score of each of the domains was calculated for each participant, with a lower score indicating higher rank order.

The Big Five Personality Inventory (John & Srivastava, 1999) is a scale that consists of 44 items assessing five personality constructions: Extraversion (eight items; for example, "I like to talk a lot"); Agreeableness (nine items; for example, "I start arguments with others"); Openness (10 items; for example, "I have a vivid imagination"); Conscientiousness (nine items; for example, "I am exacting in my work"); and Neuroticism (eight items; for example, "I get stressed out easily"). Participants are asked to indicate the extent to which they consider each item to be descriptive of them, using a five-point Likert-type scale ranging from 1 (not at all) to 5 (very much). A previous study conducted on a large sample of adults ages 21 to 60 years (Srivastava, John, Gosling, & Potter, 2003) found Cronbach's alphas of .86 for Extraversion,

.79 for Agreeableness, .80 for Openness, .82 for Conscientiousness, and .84 for Neuroticism. Cronbach's alphas in the current study were .65 for Extraversion, .75 for Agreeableness, .75 for Openness, .74 for Conscientiousness, and .80 for Neuroticism. Each participant's scores on the items in each subscale were averaged, yielding five scale scores.

The CSS (Shaver et al., 2010) is a self-report scale consisting of 24 items tapping hyperactivated (12 items; for example, "I sometimes try to help others more than they actually want me to") and deactivated (12 items; for example, "I feel uncomfortable when I'm required to help others") caregiving attachment strategies. Participants are asked to rate the extent to which each item is descriptive of their caregiving, using a seven-point scale ranging from 1 (not at all) to 7 (very much). In a previous study, Cronbach's alphas for deactivation were .82 and .81, for American and Israeli students, respectively, and were .88 and .87, for hyperactivation in the two groups, respectively (Shaver et al., 2010). In the current sample, Cronbach's alpha coefficients were .82 for the deactivated caregiving items and .77 and for the hyperactivated items. Accordingly, two scores were computed for each participant by averaging the responses on the relevant 12 items in each dimension.

The Marlowe-Crowne Social Desirability Scale (Crowne & Marlowe, 1964) is a 31-item scale designed to assess social desirability bias. Participants are asked to indicate whether the statement in each item is true or false as it pertains to them. A previous study reported a Cronbach's alpha of .77 for this scale (Reizer & Mikulincer, 2007). The current study yielded a Cronbach's alpha of .78. The responses on all 31 items were averaged to produce a score for each participant, with higher scores indicating a higher social desirability bias.

A sociodemographic instrument was used to tap data, including grandparent's age, marital status, education, employment, health status, economic status, religiosity, number of children and grandchildren, and proximity to grandchildren.

RESULTS

Factor Analysis of the MEG Dimensions

As our aim was to validate the four-dimensional construct of the new questionnaire. In the first stage of the analysis, factor analysis with varimax rotation was conducted for each of the MEG dimensions to explore distinguishable subfactors. The loadings of the relevant items in the subfactors in the four dimensions are presented in Table 2. The cognitive dimension was found to contain two factors (eigenvalue > 1) that explain 55.2% of the variance in this scale. Factor 1 explains 33% of the variance (Cronbach's alpha = .91) and consists of seven items loading high (greater than .60) on the factor. All the items relate to commitment to the role of grandparent and motivation to invest in grandchildren and spend time with them and were therefore labeled "Personal Investment." Factor 2 explains 22.2% of the variance (Cronbach's alpha = .81) and consists of seven items loading high (greater than .60) on the factor. These items relate to acknowledgment of the cost of grandparenthood in terms of money, other relationships, values, and priorities and were therefore labeled "Personal Cost." Cronbach's alphas were .91 for personal investment and .81 for personal cost. The correlation between the two factors was $r = .27$, $p < .05$, indicating that they are similar but do not overlap.

The affective dimension was found to contain two factors (eigenvalue > 1) that explain 46.6% of the variance in this scale. Factor 1 explains 31.7% of the variance (Cronbach's alpha = .90) and consists of 13 items that loaded high (greater than .60) on the factor and refer to feelings such as joy, accomplishment, and pride. It was therefore labeled "Positive Emotions." Factor 2 explains 14.9% of the variance (Cronbach's alpha = .77) and consists of eight items that loaded high (greater than .42) on the factor and refer to feelings such as anger, guilt, and disappointment. It was therefore labeled "Negative Emotions." The correlation between the two factors was $r = .08$, $p > .05$.

The symbolic dimension was found to contain four factors (eigenvalue > 1) that explain 65.1% of the variance in this scale. Factor 1, which explains 27.6% of the variance (Cronbach's $\alpha = .84$), consists of eight items loading high (greater than .52) on the factor. These items relate to grandparenthood as enriching, challenging, and meaningful and were therefore labeled "Meaning." Factor 2 explains 14.6% of the variance (Cronbach's alpha = .82) and consists of four items that loaded high (greater than .75) on the factor and indicate that grandparenthood is seen as more rewarding and satisfying than parenthood. Factor 2 was therefore labeled "Compensation for Parenthood." Factor 3, which explains 12.3% of the variance (Cronbach's

Table 2: Factor Model Coefficients of the Multidimensional Experience of Grandparenthood Set of Inventories

Factors and Items	Factor 1	Factor 2	Factor 3	Factor 4
Cognitive Dimension				
Factor 1: Personal Investment				
1. I am highly motivated to fulfill my role as grandparent.	.82	–.05		
2. It is important to me to invest in my relationship with my children, even if it means I have to give up other things in my life.	.77	.19		
3. I make an effort to promote my relationship with my grandchildren.	.77	–.01		
4. It is important to me to devote time to my grandchildren.	.77	–.03		
5. I have a strong sense of commitment to my role as grandparent.	.73	.18		
6. I try to ensure my grandchildren's future.	.70	–.16		
7. Being a grandparent requires an emotional, as well as practical, investment.	.61	.11		
Factor 2: Personal Cost				
8. Being a grandparent sometimes means giving up other social and leisure activities.	.04	.84		
9. Being a grandparent means giving up some of my privacy.	.02	.80		
10. The role of grandparent requires a change in my priorities.	.14	.78		
11. Being a grandparent sometimes interferes with relations with my spouse and friends.	.17	.69		
12. Being a grandparent sometimes means giving up my free time.	.14	.64		
13. Being a grandparent sometimes means compromising my values and principles.	.07	.63		
14. Being a grandparent sometimes involves financial sacrifices.	.09	.81		
Affective Dimension				
Factor 1: Positive Emotions				
1. Joy	.02	.77		
2. Exhilaration	–.12	.74		
3. Concern	–.01	.74		
4. Satisfaction	–.24	.71		
5. Happiness	–.10	.71		
6. Closeness	–.20	.70		
7. Pleasure	–.21	.70		
8. Contentment	–.20	.68		
9. Excitement	.00	.68		
10. Pride	.13	.67		
11. Vitality	–.02	.64		
12. Accomplishment	.03	.64		
13. Challenge	–.03	.60		
Factor 2: Negative Emotions				
14. Frustration	–.10	.78		
15. Disappointment	–.12	.72		
16. Sadness	.08	.71		
17. Guilt	–.13	.63		
18. Inadequacy	–.06	.62		
19. Weakness	–.01	.57		
20. Anger	.03	.56		
21. Failure	–.22	.42		
Symbolic Dimension				
Factor 1: Meaning				
1. Being a grandparent gives more purpose to my life.	.74	.07	.29	–.10
2. Being a grandparent makes my life seem more vital.	.72	.23	.31	–.07
3. My relationship with my grandchildren is one of the most significant relationships in my life.	.70	.22	.15	.01

(continued)

Table 2: Continued				
Factors and Items	**Factor 1**	**Factor 2**	**Factor 3**	**Factor 4**
4. Being a grandparent enriches my world.	.67	.14	.26	–.12
5. Being a grandparent is one of the greatest challenges in my life.	.65	.10	.09	.02
6. My grandchildren do not add a lot of meaning to my life. [-]	.58	–.08	.05	–.16
7. Being a grandparent strengthens my relationship with my children.	.52	.11	.41	.03
8. At this stage in my life, other things are more important to me than being a grandparent. [-]	.52	.03	–.01	–.39
Factor 2: Compensation for Parenthood				
9. I feel I am a better grandparent than I was a parent.	.11	.82	.02	.07
10. Being a grandparent gives me the chance to correct the mistakes I made as a parent.	.09	.80	.14	-.01
11. I sometimes feel inadequate as a parent, but my role as grandparent makes up for that.	.05	.79	.13	.12
12. I find being a grandparent more rewarding than being a parent.	.22	.75	.00	.05
Factor 3: Continuity				
13. My grandchildren represent the continuation of my family.	.23	–.16	.70	–.03
14. Being a grandparent gives me the opportunity to connect with my family history.	.04	.26	.70	–.01
15. My grandchildren are a link between the past and the future.	.26	.12	.68	–.10
16. Grandparenthood extends the connections between the generations in the family.	.25	.07	.65	.04
Factor 4: Burden				
17. Being a grandparent is another inconvenience in my life.	–.07	.00	–.05	.79
18. For me, being a grandparent is a real burden.	–.16	.11	–.04	.79
19. Being a grandparent tires me out.	–.05	.10	.01	.74
Behavioral Dimension				
Factor 1: Emotional Support				
1. I show my love for my grandchildren.	.75	.21	.27	
2. I hug and kiss my grandchildren.	.73	.14	.18	
3. I show my grandchildren how clever I think they are.	.71	.22	.21	
4. I encourage and praise my grandchildren.	.71	.35	.08	
5. I pay close attention to my grandchildren's development.	.70	.12	.23	
6. I display an interest in my grandchildren's lives.	.63	.18	.26	
7. I offer my support when my grandchildren are in distress.	.60	.30	.28	
8. I try to help my grandchildren stay calm in stressful situations.	.57	.54	.13	
9. I am someone my grandchildren can talk to.	.55	.51	.13	
10. I am always available for my grandchildren.	.50	.04	.37	
Factor 2: Contribution to Upbringing				
11. I expand my grandchildren's general knowledge.	.02	.80	.14	
12. I teach my grandchildren about values and their legacy.	.24	.79	.02	
13. I do things with my grandchildren that help develop their abilities and contribute to their education.	.28	.70	.22	
14. I tell my grandchildren about the family history.	.15	.66	.19	
15. I display an interest in my grandchildren's hobbies.	.47	.59	.12	
16. My grandchildren and I do things together, like arts and crafts, homework, games, writing poems, reading, studying, praying, etc.	.18	.55	.39	
17. I tell my grandchildren stories.	.31	.52	.40	
18. I comfort my grandchildren when they have problems.	.51	.51	.27	
Factor 3: Instrumental Support				
19. I change/changed my young grandchildren's diapers.	.18	.19	.82	
20. I bathe/bathed my young grandchildren.	.26	.09	.80	
21. I babysit my grandchildren when they are sick.	.24	.21	.64	
22. I make my grandchildren their favorite foods.	.24	.41	.54	
23. I babysit my grandchildren when their parents go out.	.39	.20	.47	

Note: [+] = reversed item.

alpha = .68), consists of four items loading high (greater than .65) on the factor. These items refer to a sense of continuity, intergenerational links, and a connection between past and future that result from being a grandparent and were therefore labeled "Continuity." The final factor in this dimension explains 10.6% of the variance (Cronbach's alpha = .67) and consists of three items that loaded high (greater than .74) on the factor and refer to grandparenthood as burdensome and inconvenient and were therefore labeled "Burden." The correlations of Meaning with Continuity, Burden, and Compensation for Parenthood were $r = .53$, $p < .001$; $r = .22$, $p > .001$; and $r = .29$, $p < .001$, respectively. The correlations of Continuity with Burden and Compensation for Parenthood were $r = .08$, $p > .05$; and $r = .26$, $p < .001$, respectively; and the correlation between Burden and Compensation for Parenthood was $r = -.15$, $p < .05$.

The behavioral dimension yielded three factors (eigenvalue > 1) that explain 57.5% of the variance in this scale. Factor 1 explains 43.6% of the variance (Cronbach's alpha = .88) and consists of 10 items that loaded high (greater than .50) on the factor that refer to acts such as kissing, hugging, and encouraging the grandchildren and were therefore labeled "Emotional Support." Factor 2 explains 7.7% of the variance (Cronbach's alpha = .84) and consists of eight items that loaded high (greater than .51) on the factor and relate to shared activities that enrich the grandchildren or contribute to their development, such as telling stories or doing arts and crafts. Factor 2 was therefore labeled "Contribution to Upbringing." Factor 3, which explains 6.2% of the variance (Cronbach's alpha = .79), consists of five items loading high (greater than .47) on the factor. These items refer to instrumental chores such as babysitting, cooking for grandchildren, or bathing them and were therefore labeled "Instrumental Support." The correlation of Emotional Support with Contribution to Upbringing was $r = .69$, $p < .001$; and with Instrumental Support, it was $r = .66$, $p < .001$. The correlation between Contribution to Upbringing and Instrumental Support was $r = .58$, $p < .001$.

Construct Validity

In the second stage of analysis, we sought to establish the construct validity of the questionnaire by examining the associations among the four dimensions and other relevant variables.

Sociodemographic Characteristics. We first looked for associations between the MEG dimension and various sociodemographic characteristics, beginning with gender. Differences between men and women were examined by means of a one-way multivariate analysis of variance. This analysis revealed a significant gender difference [$F(11, 301) = 9.38$, $p < .001$, $\eta^2 = .26$]. The means and *SD*s of the 11 factors in the four dimensions according to gender, along with the results of the univariate analyses of variance (ANOVAs) conducted for each of the factors are presented in Table 3. Univariate ANOVAs revealed that grandmothers had more positive feelings about grandparenthood, displayed more

Table 3: Means, Standard Deviations, and *F* Scores of the Multidimensional Experience of Grandparenthood Set of Inventories Factors by Gender

	Grandmothers ($n = 181$)		Grandfathers ($n = 132$)			
Factor	***M***	***SD***	***M***	***SD***	***F***	η^2
Personal investment	3.12	.57	3.10	.65	.16	.04
Personal cost	2.30	.76	2.34	.86	.17	.00
Positive emotions	4.45	.49	4.23	.55	14.24***	.04
Negative emotions	4.69	.60	4.83	.30	5.86*	.02
Meaning	4.00	.70	3.89	.71	1.12	.00
Compensation for parenthood	2.06	.96	2.49	1.06	14.00***	.04
Continuity	3.76	.78	3.75	.71	.01	.00
Burden	4.57	.61	4.56	.59	.02	.00
Emotional support	4.38	.56	4.10	.67	16.13***	.05
Contribution to upbringing	3.77	.71	3.38	.88	18.37***	.06
Instrumental support	3.74	.84	2.98	.97	55.46***	.15

*$p < .05$. **$p < .01$. ***$p < .001$.

emotional involvement with their grandchildren, and did more to enrich their grandchildren, whereas grandfathers tended more to feel that they were better as grandfathers than as fathers and had a more negative response to their role.

Pearson correlations were then computed between the dimensions of grandparenthood and the sociodemographic variables of level of education, health, economic status, number of children, number of grandchildren, proximity to grandchildren, and religiosity. The only significant correlations to emerge indicated that the older the grandparents were, the higher they scored on Meaning ($r = .22$, $p < .001$), Continuity ($r = .20$, $p < .001$), and Compensation for Parenthood ($r = .12$, $p < .05$); the higher the grandparents' level of education, the lower their reported levels of instrumental support to their grandchildren ($r = -.15$, $p < .01$); and the better their health, the more they perceived grandparenthood as compensation for parenthood, ($r = .15$, $p < .01$) but the less they were involved in their grandchildren's upbringing ($r = -.15$, $p < .05$). Proximity was correlated only with Negative Feelings ($r = -.16$, $p < .05$). Finally, grandparents who defined themselves as more religious reported more sense of continuity ($r = .14$, $p < .05$).

Hierarchy of Roles. The results of the participants' ranking of grandparenthood in respect to other roles in their lives (marriage, career, parenthood, and so forth) revealed that 3.8% ($n = 12$) ranked grandparenthood as the second role in importance, 9.9% ranked it as third ($n = 31$), 40.6% rated it as fourth ($n = 127$), 14.7% rated it as fifth ($n = 46$), and 4.2% rated it as sixth ($n = 13$). Pearson correlations were then calculated to examine the relationship between the importance attributed to grandparenthood and the four MEG dimensions. It was found that the higher the participants ranked the role of grandparent, the higher their personal investment ($r = .21$, $p < .01$), the higher their positive emotional response to the role ($r = .28$, $p < .001$), the higher the level of meaning they associated with the role ($r = .37$, $p < .001$), the more they viewed grandparenthood as compensation for parenthood ($r = .15$, $p < .05$), and the higher their perception of both continuity ($r = .14$, $p < .05$) and burden ($r = .26$, $p < .001$). In addition, they reported offering their grandchildren more emotional support ($r = .31$, $p < .001$), contributing more to their upbringing ($r = .26$, $p < .001$), and providing more instrumental support ($r = .37$, $p < .001$).

Caregiving. In the next stage of the analysis, we examined the associations between the caregiving scores and the dimensions of grandparenthood (see Table 4). Caregiving hyperactivation was found to correlate significantly and positively with the two factors in the cognitive dimension and with all the factors in the symbolic dimension except for Burden and to correlate negatively with Negative Emotions. No significant correlations were found with the behavioral dimension. On the other hand, deactivation correlated significantly and negatively with the factors in the behavioral and symbolic dimensions, except for Compensation for Parenthood, and with Positive Emotions and Personal Investment.

Big Five Personality Factors. Pearson correlations were conducted to examine the associations between the Big Five personality traits and the four dimensions of grandparenthood (see Table 4). The only personality factor that correlated positively with the two factors in the cognitive dimension was Neuroticism. Although the correlations were low, they indicated that grandparents who are higher on Neuroticism are both more committed to their role as grandparents and more aware of its costs. Personal Investment was positively correlated to all other factors except for Openness, indicating that when grandparents are motivated to invest in their role they also show high levels of Extraversion, Agreeableness, and Conscientiousness. In regard to the affective dimension, Extraversion, Agreeableness, Conscientiousness, and Openness all correlated positively with Positive Emotions, whereas Neuroticism alone correlated positively with Negative Emotions. In addition, Extraversion, Agreeableness, Conscientiousness, and Openness correlated positively with Emotional Support and Contribution to Upbringing, but only Agreeableness correlated positively with Instrumental Support. In respect to the symbolic dimension, Extraversion did not correlate with any of the factors, while Agreeableness and Conscientiousness correlated positively with Meaning, Compensation for Parenthood, and Continuity and correlated negatively with Burden. On the other hand, Neuroticism correlated positively with Burden and negatively with Continuity, and Openness correlated negatively with Burden. In other words,

Table 4: Correlations between Personality and Caregiving Scores and Multidimensional Experience of Grandparenthood Set of Inventories Factors ($N = 313$)

Factor	Extraversion	Agreeable	Conscientiousness	Neuroticism	Openness	Caregiver Hyperactivation	Caregiver Deactivation
Personal investment	.12*	12*	.11*	.15**	.05	.24***	–.12*
Personal cost	.02	–.05	-.04	.18**	–.10	.18**	.06
Positive emotions	.19***	.36***	.20***	–.07	.21***	.00	–.30***
Negative emotions	–.02	.04	–.02	–.26***	.07	–.17**	–.08
Meaning	.06	.26***	.20***	–.03	13	.16**	–.22***
Compensation for parenthood	.10	.17**	.11*	–.07	.10	.31***	.02
Continuity	–.03	.15**	.15**	–.19***	.06	.19***	–.13*
Burden	–.03	–.14*	–.07	.22***	–.20***	–.09	–.14*
Emotional support	.25***	.37***	.22***	–.01	.27***	.02	–.28***
Contribution to upbringing	.18***	.37***	.20***	–.10	.34***	.03	–.25***
Instrumental support	.10	.26***	.08	.03	.10	.05	–.22***

*$p < .05$. **$p < .01$. ***$p < .001$.

grandparents who were higher on Neuroticism felt more burdened by the role of grandparent and also felt a lower sense of continuity. Thus, the MEG yielded numerous, albeit modest, correlations with the Big Five personality factors.

Social Desirability. Pearson correlations were computed to examine the associations between social desirability and the dimensions of grandparenthood to rule out the possibility that the answers to the MEG were biased on the desire to conform with social expectations. This analysis produced only a few significant correlations. Specifically, social desirability was found to correlate with Burden ($r = .19$, $p < .01$), Positive Emotions ($r = .20$, $p < .001$), Emotional Support ($r = .16$, $p < .01$), and Contribution to Upbringing ($r = .17$, $p < .01$).

DISCUSSION

The aim of this research was to develop an integrative multidimensional measure of the experience of grandparenthood and to examine its usefulness and validity. The findings provide strong evidence for the value of distinguishing among different domains of grandparenthood, as well as for the internal reliability and validity of the MEG and its ability to explain variations in the experience of grandparenthood.

The results confirm the four dimensions of grandparenthood proposed by Hurme (1991), including the symbolic dimension, which her own study failed to confirm. Moreover, they indicate a further complexity within each of the dimensions and show that positive and negative features of the experience of grandparenthood may exist concurrently.

The cognitive dimension was found to include two factors that relate to commitment to the role of grandparenthood: the motivation to invest time and effort and the perceived personal cost in terms of priorities, time, and money. Theorists have previously related commitment to the altruistic aspect of grandparenthood and the willingness to contribute in various ways to the nuclear family (Fantino & Stolarz-Fantino, 2010). There is no question that the role has its rewards, yet our findings clearly show that it also exacts a cost, which has received very little attention in the literature. The affective dimension was also shown to consist of two factors: positive feelings of joy, accomplishment, and pride; and negative feelings of anger, guilt, or disappointment. Although grandparents typically describe the

positive emotions aroused by their role, it is to be expected that intergenerational relations also generate stress and conflicts. Consequently, the emotional response to grandparenthood appears to be more complex than is generally recognized in the literature (for example, Fingerman, 1998). The behavioral dimension was found to contain three factors: Emotional Support, expressed in kissing, hugging, and encouraging the grandchildren; Contribution to Upbringing, reflected in shared activities that enrich the grandchildren or contribute to their development, such as storytelling or arts and crafts projects; and Instrumental Support, such as babysitting, bathing the grandchildren, or cooking for them. The symbolic dimension was found to comprise four factors: Meaning, that is, the sense that grandparenthood is a uniquely enriching and challenging experience; Compensation for Parenthood, or the sense that grandparenthood is more rewarding and satisfying than parenthood; Continuity, representing the intergenerational bond and the link between past and future; and Burden, the perception of grandparenthood as burdensome and inconvenient. The symbolic aspect of the role was referred to in the initial stages of research into grandparenthood by Kivnick (1982) and Neugarten and Weinstein (1964), who claimed that at a time of rapid change in society and the family, grandparenthood signifies a stability that connects the history of the family with its future continuation and therefore has a unique meaning for older people. The sense that grandparenthood offers an opportunity to repair mistakes made as parents and to compensate for what may be seen as flawed relations with one's children is also described in the literature (Neugarten & Weinstein, 1964). The greater generational distance between grandparents and their grandchildren would seem to enable a special relationship that allows the older generation to make amends for earlier relations or tensions with their children and is therefore significant for all three generations. Nonetheless, the symbolic dimension may also contain the negative element of burden. Thus, in contrast to most of the previous literature, our instrument does not ignore the negative implications that may be associated with the role of grandparent. The factors within most dimensions evidenced high reliability and were moderately correlated, indicating that although they are associated with each other and coexist in the perception of grandparents, they reveal different aspects of the various dimensions and reflect unique facets of the grandparenthood experience.

The associations among the MEG factors and sociodemographic characteristics show that grandmothers report that they experience more positive emotions, provide more emotional and instrumental support, and contribute more to the grandchildren's upbringing than grandfathers, whereas grandfathers describe grandparenthood as compensation for parenthood more than grandmothers and express more negative feelings toward the role. These findings are all in line with previous literature, which indicates that grandmothers are more involved and more committed to the role of grandparent than grandfathers (for example, Reitzes & Mutran, 2004a; Silverstein & Marenco, 2001). It has been suggested that the continuity of maternal involvement in childrearing may make women more comfortable in the role and that the increased involvement of grandmothers may stem from the greater contribution of women to the socialization of children and the maintenance of kinship relations (Bates, 2009). At the same time, there may be fewer expectations for grandfathers, making their involvement more voluntary and enabling them to more freely express negative feelings. Consequently, role-related behaviors may be influenced more by personal factors among grandfathers than among grandmothers (Reitzes & Mutran, 2004a). The fact that grandfathers were more likely to feel that their role served as compensation for parenthood may derive from the fact that they were more invested in their careers and had less time for their family when their own children were young. Now, however, many of them are free to devote more time to their grandchildren, causing them to feel they are making up for what they missed as fathers. Although a higher social desirability bias might have been expected among grandmothers due to the greater social expectations of them, the associations between social desirability and the dimensions of grandparenthood were small in number and weak for both genders, indicating that, on the whole, the responses were not affected by social norms and expectations. In other words, the differences found between grandmothers and grandfathers do not appear to reflect social desirability, but rather the unique place that the roles of mother and grandmother hold in a woman's life.

In addition, older grandparents were found to be more preoccupied with meaning, continuity,

and compensation for parenthood than younger grandparents. Indeed, it is logical to assume that as people grow older, they view their lives from a certain perspective, look for meaning, and gain a type of symbolic immortality through the next generation (Silverstein & Marenco, 2001). Proximity to the grandchildren's home did not play a significant role, probably because in a small country like Israel, distances are short and may not necessarily affect the quality of relationships or the perceived role of grandparenthood.

Associations were also examined between the MEG factors and the importance attributed to grandparenthood. The results show that individuals who ranked grandparenthood higher in importance invested more in it and felt it exacted a greater personal cost. Those who ranked grandparenthood as an important role in their life were more motivated to invest in it; contributed more to the upbringing of their grandchildren; and reported more meaning, more compensation for the role of parenthood, and more instrumental and emotional support. However, they also evidenced less positive feelings and more burden. Thus, being an involved and caring grandparent appears to have a price. Such individuals may fail at times to balance their life roles and integrate them in a positive way. This possibility deserves more thorough investigation in future studies.

The MEG was also validated by means of the notion of caregiving attachment, which relates to perceptions of the self as an effective caregiver and of others as deserving of help and protection. Obviously, more positive working models of the self as caregiver can be expected to contribute to optimal functioning, whereas less positive perceptions can trigger one of two dysfunctional strategies: hyperactivation or deactivation of the caregiving system. The associations found here between caregiving attachment and the MEG factors reveal that the two nonoptimal strategies produced totally different patterns of associations with the various aspects of grandparenthood. Grandparents who were high on caregiving deactivation were low on most of the grandparenthood dimensions, investing less in the role, displaying less positive feelings, providing less emotional and instrumental support, contributing less to their grandchildren's upbringing, and scoring lower on most of the factors in the symbolic dimension, including Meaning, Continuity, and Burden. These findings are in line with previous research showing that people who are characterized by caregiving deactivation, like those high on attachment avoidance, refrain from closeness (Mikulincer & Shaver, 2007). In the case of grandparents, this means that they are less invested in all aspects of the role. To avoid being hurt, they keep their distance, do not show positive emotions, do not assign meaning or continuity to the role of grandparent, and are less involved in their granchildren's upbringing. At the same time, their lack of involvement causes them to feel that they are paying less of a price.

Caregiving hyperactivation was found to be positively associated with Personal Involvement, Personal Cost, and the symbolic aspects of Meaning, Continuity, and Compensation for Parenthood and negatively associated with Negative Emotions. This, too, is consistent with attachment theory, whereby hyperactivated caregivers, like those high on anxiety attachment, are motivated by guilt and anxiety and therefore invest a great deal but typically feel that they are not fairly rewarded for their efforts. Thus, driven by the sense that they have to compensate for their role as parents, hyperactivated grandparents take on a lot of responsibilities, often at their own expense, and consequently feel they are paying a heavy price. Moreover, because of their high level of involvement and the meaning they attribute to the role of grandparent, they cannot allow themselves to have negative emotions, as this would only increase their sense of guilt.

In addition, significant associations between the MEG and the Big Five personality factors were shown by research in a variety of fields to be relevant and valid dimensions of personality that reliably predict differences between individuals in respect to familial roles (for example, Vermaes et al., 2008).

On the whole, the positive personality factors were found to be associated with the positive and active factors in the experience of grandparenthood. More specifically, the tendency of persons who are characterized by Conscientiousness to be careful, thorough, responsible, and efficient was reflected in the willingness of grandparents scoring high on this trait to invest in the role, to feel positive affect, to assign unique meaning and continuity to the intergenerational relationships, to contribute actively to the upbringing of their grandchildren, and to

support their grandchildren emotionally. Similarly, participants scoring high on Agreeableness displayed the tendency to be friendly, flexible, forgiving, considerate, tolerant, and kind in their familial relationships as well, investing in their grandchildren, and enjoying their interactions with them. People rating high on Openness are characterized by sensitivity and openness to new ideas and experiences, and these qualities are naturally related to the positive aspects of grandparenthood. Such grandparents were indeed found to express positive emotions, invest emotionally in the role, and enrich their grandchildren's store of knowledge. Moreover, they do not have a strong sense of burden, most likely because they invest heavily in grandparenthood just as they do in other areas of their life. Individuals rating high on Neuroticism tend to be anxious, fearful, tense, angry, and insecure. This trait was associated with the willingness to invest in the role of grandparent, but participants scoring high on Neuroticism also displayed a tendency to be self-centered and preoccupied by negative feelings and the personal cost and burden associated with grandparenthood. It is not surprising to find that people who experience such mixed feelings fail to support their grandchildren emotionally and instrumentally. Finally, Extraversion, which refers to the tendency to be outgoing, assertive, active, energetic, daring, and adventurous, was found to be associated with a willingness to invest in grandparenthood, to express positive emotions, and to provide emotional support. No associations were found, however, with the symbolic dimension. It is possible that people with this tendency are concerned more with the external aspects of life and less sensitive to inner experiences such as the spiritual and symbolic meaning of family continuity.

Except for the association between Openness and Burden, no correlations were found between the Big Five personality factors and the negative factors of the MEG. This indicates that, as frequently suggested in the literature, grandparents tend to focus on the positive aspects of the role. Even when a high level of Instrumental Support was provided, this factor was not associated with the personality traits, with the exception of Agreeableness. It may be that this sort of support is offered by all grandparents as a matter of course, particularly in a society like Israel where intergenerational bonds are very strong (Findler, 2000). Some of the correlations between the MEG factors and the Big Five factors are relatively weak and thus should be viewed with caution. In addition, it must be remembered that these are two essentially different constructs; even though they share certain features, they do not overlap, as each is also affected by many additional factors.

Certain limitations of the current study should be noted. First, it relied exclusively on grandparents' self-reports. Though we were able to rule out the possibility that the responses were biased by social desirability, future research would do well to include additional measures, such as observations and data obtained from other relevant sources (for example, family members, professionals). Second, although the sample was relatively large and heterogeneous, it was not representative. Third, although numerous correlations were found between the MEG and other instruments, many of them were low, so caution should be taken before drawing conclusions from these associations. Fourth, although quite a few sociodemographic characteristics were examined, additional variables might also be relevant to the experience of grandparenthood, such as hours spent with the grandchildren per week. Finally, even though Israel is in many ways a Western society, it is possible that certain culture-specific factors may have impacted the findings. It would therefore be interesting to examine whether studies conducted elsewhere would provide cross-cultural and cross-ethnic validation of the MEG.

Despite the limitations, we believe the current investigation answers an important need in the study of grandparenthood, proposing an instrument that examines the many aspects of the experience of this role. Not only is the structure of the questionnaire consistent with Hurme's model of the four dimensions of grandparenthood, but it also breaks these dimensions down into a variety of positive and negative factors and reveals the associations among them, allowing for a much clearer picture of what is undoubtedly a complex experience.

In addition to the theoretical value of the MEG and its advantages for researchers, the new instrument has practical implications for professionals in the field. Grandparents can play an important role in the family and contribute significantly to all generations. It must be remembered, however, that this is a voluntary function that must be undertaken by older adults of their free will. Understanding the complex experience of grandparenthood, including the aspects of the role that are positive

and negative, makes it possible to respect grandparents' decisions regarding the manner in which they choose to fulfill their role. For the family to benefit most from the involvement of grandparents, it is important that the expectations for grandparents be adjusted and the lines of communication be opened between the generations. By providing professionals with an instrument that enables them to identify the different aspects of the experience of grandparenthood, the MEG will aid in their work with families. Interventions can focus on taking full advantage of the positive elements of the experience and easing the more difficult ones to the benefit of all members of the family. Such interventions can be advantageous for all families and may be even more salient in the case of special circumstances, such as divorce, disability, or a death in the family. SWR

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