

LGBTQ PARENTS AND THEIR CHILDREN DURING THE FAMILY LIFE CYCLE

EDITED BY: Nicola Carone, Henny Bos, Geva Shenkman and Fiona Tasker
PUBLISHED IN: Frontiers in Psychology





frontiers

Frontiers eBook Copyright Statement

The copyright in the text of individual articles in this eBook is the property of their respective authors or their respective institutions or funders. The copyright in graphics and images within each article may be subject to copyright of other parties. In both cases this is subject to a license granted to Frontiers.

The compilation of articles constituting this eBook is the property of Frontiers.

Each article within this eBook, and the eBook itself, are published under the most recent version of the Creative Commons CC-BY licence.

The version current at the date of publication of this eBook is CC-BY 4.0. If the CC-BY licence is updated, the licence granted by Frontiers is automatically updated to the new version.

When exercising any right under the CC-BY licence, Frontiers must be attributed as the original publisher of the article or eBook, as applicable.

Authors have the responsibility of ensuring that any graphics or other materials which are the property of others may be included in the CC-BY licence, but this should be checked before relying on the CC-BY licence to reproduce those materials. Any copyright notices relating to those materials must be complied with.

Copyright and source acknowledgement notices may not be removed and must be displayed in any copy, derivative work or partial copy which includes the elements in question.

All copyright, and all rights therein, are protected by national and international copyright laws. The above represents a summary only. For further information please read Frontiers' Conditions for Website Use and Copyright Statement, and the applicable CC-BY licence.

ISSN 1664-8714

ISBN 978-2-88966-635-5

DOI 10.3389/978-2-88966-635-5

About Frontiers

Frontiers is more than just an open-access publisher of scholarly articles: it is a pioneering approach to the world of academia, radically improving the way scholarly research is managed. The grand vision of Frontiers is a world where all people have an equal opportunity to seek, share and generate knowledge. Frontiers provides immediate and permanent online open access to all its publications, but this alone is not enough to realize our grand goals.

Frontiers Journal Series

The Frontiers Journal Series is a multi-tier and interdisciplinary set of open-access, online journals, promising a paradigm shift from the current review, selection and dissemination processes in academic publishing. All Frontiers journals are driven by researchers for researchers; therefore, they constitute a service to the scholarly community. At the same time, the Frontiers Journal Series operates on a revolutionary invention, the tiered publishing system, initially addressing specific communities of scholars, and gradually climbing up to broader public understanding, thus serving the interests of the lay society, too.

Dedication to Quality

Each Frontiers article is a landmark of the highest quality, thanks to genuinely collaborative interactions between authors and review editors, who include some of the world's best academicians. Research must be certified by peers before entering a stream of knowledge that may eventually reach the public - and shape society; therefore, Frontiers only applies the most rigorous and unbiased reviews.

Frontiers revolutionizes research publishing by freely delivering the most outstanding research, evaluated with no bias from both the academic and social point of view. By applying the most advanced information technologies, Frontiers is catapulting scholarly publishing into a new generation.

What are Frontiers Research Topics?

Frontiers Research Topics are very popular trademarks of the Frontiers Journals Series: they are collections of at least ten articles, all centered on a particular subject. With their unique mix of varied contributions from Original Research to Review Articles, Frontiers Research Topics unify the most influential researchers, the latest key findings and historical advances in a hot research area! Find out more on how to host your own Frontiers Research Topic or contribute to one as an author by contacting the Frontiers Editorial Office: frontiersin.org/about/contact

LGBTQ PARENTS AND THEIR CHILDREN DURING THE FAMILY LIFE CYCLE

Topic Editors:

Nicola Carone, University of Pavia, Italy

Henny Bos, University of Amsterdam, Netherlands

Geva Shenkman, Interdisciplinary Center Herzliya, Israel

Fiona Tasker, University of London, United Kingdom

Citation: Carone, N., Bos, H., Shenkman, G., Tasker, F., eds. (2021). LGBTQ Parents and Their Children during the Family Life Cycle. Lausanne: Frontiers Media SA.
doi: 10.3389/978-2-88966-635-5

Table of Contents

- 05 Editorial: LGBTQ Parents and Their Children During the Family Life Cycle**
Nicola Carone, Henny M. W. Bos, Geva Shenkman and Fiona Tasker
- 09 “We Were Among the First Non-traditional Families”: Thematic Perceptions of Lesbian Parenting After 25 Years**
Nanette Gartrell, Esther D. Rothblum, Audrey S. Koh, Gabriël van Beusekom and Henny Bos
- 19 Desire for Parenthood in Context of Other Life Aspirations Among Lesbian, Gay, and Heterosexual Young Adults**
Doyle P. Tate and Charlotte J. Patterson
- 29 Division of Labor Among Transgender and Gender Non-binary Parents: Association With Individual, Couple, and Children’s Behavioral Outcomes**
Samantha L. Tornello
- 41 Pathways to Fatherhood: Psychological Well-Being Among Israeli Gay Fathers Through Surrogacy, Gay Fathers Through Previous Heterosexual Relationships, and Heterosexual Fathers**
Geva Shenkman, Ofer Siboni, Fiona Tasker and Pedro Alexandre Costa
- 54 Children’s Exploration of Their Surrogacy Origins in Gay Two-Father Families: Longitudinal Associations With Child Attachment Security and Parental Scaffolding During Discussions About Conception**
Nicola Carone, Lavinia Barone, Demetria Manzi, Roberto Baiocco, Vittorio Lingiardi and Kathryn Kerns
- 64 Community Characteristics, Victimization, and Psychological Adjustment Among School-Aged Adopted Children With Lesbian, Gay, and Heterosexual Parents**
Abbie E. Goldberg and Randi Garcia
- 80 Understanding Parenting Intentions Among Childfree Gay Men: A Comparison With Lesbian Women and Heterosexual Men and Women**
Joke T. van Houten, Samantha L. Tornello, Peter J. Hoffenaar and Henny M. W. Bos
- 90 Stigma Experiences, Mental Health, Perceived Parenting Competence, and Parent–Child Relationships Among Lesbian, Gay, and Heterosexual Adoptive Parents in the United States**
Rachel H. Farr and Cassandra P. Vázquez
- 106 Life Finds a Way: Young Adults With Lesbian Mothers Reflect on Their Childhood Prior to Legal Recognition of Same-Sex Parents in Sweden**
Anna Malmquist, Sandra Andersson and Julia Salomonsson
- 116 Gender Identity and Future Thinking About Parenthood: A Qualitative Analysis of Focus Group Data With Transgender and Non-binary People in the United Kingdom**
Fiona Tasker and Jorge Gato
- 131 Anticipating Parenthood Among Lesbian, Gay, Bisexual, and Heterosexual Young Adults Without Children in Portugal: Predictors and Profiles**
Jorge Gato, Daniela Leal, Susana Coimbra and Fiona Tasker

- 149** *Determinants of Non-paid Task Division in Gay-, Lesbian-, and Heterosexual-Parent Families With Infants Conceived Using Artificial Reproductive Techniques*
Loes Van Rijn - Van Gelderen, Kate Ellis-Davies,
Marijke Huijzer-Engbrenghof, Terrence D. Jorgensen, Martine Gross,
Alice Winstanley, Berengere Rubio, Olivier Vecho, Michael E. Lamb and
Henny M. W. Bos
- 162** *The Perceptions of New Zealand Lawyers and Social Workers About Children Being Adopted by Gay Couples and Lesbian Couples*
Rhoda Scherman, Gabriela Misca and Tony Xing Tan
- 181** *Familismo, Lesbophobia, and Religious Beliefs in the Life Course Narratives of Chilean Lesbian Mothers*
Victor Figueroa and Fiona Tasker



Editorial: LGBTQ Parents and Their Children During the Family Life Cycle

Nicola Carone^{1*}, Henny M. W. Bos², Geva Shenkman³ and Fiona Tasker⁴

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy, ² Research Institute of Child Development and Education, University of Amsterdam, Amsterdam, Netherlands, ³ Interdisciplinary Center Herzliya (IDC), Herzliya, Israel, ⁴ Department of Psychological Sciences, School of Science, Birkbeck University of London, London, United Kingdom

Keywords: LGBTQ parent, child development, family relationships, assisted reproduction, adoption

Editorial on the Research Topic

LGBTQ Parents and Their Children During the Family Life Cycle

Over the past few decades the number of children growing up in LGBTQ-parent families has increased dramatically within the context of shifting sociopolitical and legal climates around the world, more favorable attitudes toward diverse family forms, and expanded access to assisted reproduction technology and adoption (Goldberg et al., 2018). Among diverse LGBTQ-parent family forms, lesbian and gay stepfamily arrangements formed post heterosexual relationship (PHR) dissolution likely represent the most common formation (Tasker and Lavender-Stott, 2020). Contrary to prevailing expectations, early studies with mothers who came out as lesbians showed that they were just as likely to have good mental health and positive relationships with their children as were heterosexual mothers, and that their children were no more likely to show emotional and behavioral difficulties, poor performance at school, or atypical gender role behavior than were children with heterosexual parents (Tasker, 2010; Patterson, 2017).

Along with research on lesbian stepfamily arrangements, what we currently know about parenting and the adjustment of children whose parents are a sexual and/or a gender minority is still mainly limited to lesbian-parent families through donor insemination (Bos and Gartrell, 2020). Planned lesbian-parent families were also created by adoption (Farr et al., 2020), by sexual intercourse with a man who would not be a father to the child and by elective co-parenting, whereby the mother had a child with a man who was not her partner but played a role in raising the child (Jadva et al., 2015). The rapid increase in openly lesbian women having children at that time became known as “the lesbian baby boom” (Patterson, 2017).

Studies with lesbian-parent families formed through donor insemination confirmed the positive outcomes found for lesbian stepfamily arrangements. In addition, studies increasingly supplemented a between-difference approach (in which planned lesbian-parent families with donor-conceived offspring were compared with heterosexual-parent families) with a within-difference approach, thus shedding light on the nuanced family dynamics and unique family processes specific to lesbian parents and their donor-conceived offspring (e.g., relationships with donors, parenting with different biological relationships to the child) (Gato, 2016; Bos and Gartrell, 2020). For instance, crucial insights have been generated by the U.S. National Longitudinal Lesbian Family Study (NLLFS), the first study to have examined the experiences and outcomes of donor-conceived offspring and their lesbian parents from conception to mid-adulthood (Gartrell, 2021), emphasizing both the adverse effect of stigmatization on child development over time (Bos et al., 2021) and the absence of difference in psychological adjustment among offspring with an anonymous, a known, or an open-identity donor (Bos and Gartrell, 2011; Carone et al., 2021).

OPEN ACCESS

Edited and reviewed by:

Yvette Renee Harris,
Miami University, United States

*Correspondence:

Nicola Carone
nicola.carone@unipv.it

Specialty section:

This article was submitted to
Developmental Psychology,
a section of the journal
Frontiers in Psychology

Received: 18 December 2020

Accepted: 26 January 2021

Published: 18 February 2021

Citation:

Carone N, Bos HMW, Shenkman G
and Tasker F (2021) Editorial: LGBTQ
Parents and Their Children During the
Family Life Cycle.
Front. Psychol. 12:643647.
doi: 10.3389/fpsyg.2021.643647

In the last two decades, some longitudinal studies have been conducted with adoptive lesbian- and gay-parent families (e.g., Goldberg and Garcia, 2016; Farr, 2017; McConnachie et al., 2020), confirming that the quality of family processes and the stigmatization occurring in the outside world are more relevant to child adjustment than family structure. Also preliminary cross-sectional evidence is now available on the family life dynamics and the positive adjustment of children born to surrogacy and raised in a two-father (e.g., Carone et al., 2018b, 2020b; Golombok et al., 2018; Green et al., 2019; Berkowitz, 2020) or a gay single father (Carone et al., 2020a) family, as well as on the challenges faced and unique strengths among school-age children, adolescents, and emerging adults raised in sexual minority-parent families (Kivalanka and Goldberg, 2009; Tasker and Granville, 2011; Gartrell et al., 2012; Kivalanka et al., 2014; Farr et al., 2016a; Koh et al., 2020). Increasingly, there is also a growing interest in studying the experiences and outcomes of bisexual mothers (Tasker and Delvoe, 2015), and transgender or non-binary parents (Kivalanka et al., 2018; Carone et al., 2020c).

To date, considerable insights have been gained into many aspects of LGBTQ family life, benefitting from theoretical advances (Farr et al., 2017; Prendergast and MacPhee, 2018) and increased methodological rigor, including the use of nationally representative and large data sets (e.g., Bos et al., 2016; Riskind and Tornello, 2017; Calzo et al., 2019), longitudinal designs (e.g., Goldberg and Garcia, 2016; Farr, 2017; McConnachie et al., 2020; Gartrell, 2021), multiple informants (e.g., Farr, 2017; Carone et al., 2018b; Golombok et al., 2018; Simon and Farr, 2020), mixed-method designs (e.g., Farr et al., 2016b; Simon and Farr, 2020), and meta-analyses (Fedewa et al., 2015; Miller et al., 2017). Notwithstanding, research conducted thus far has been limited in terms of the predominant populations studied (e.g., lesbian parents, middle class, White families) and topics under investigation (e.g., child behavioral adjustment, parenting quality). Also, the proliferation of studies in diverse international contexts outside of the U.S. (e.g., Australia, Canada, Italy, the Netherlands, and the U.K.) has not seen the same interest for LGBTQ-parent families living in non-Western contexts [for exceptions, see Erez and Shenkman (2016), Shenkman and Shmotkin (2019), and Shenkman (2020)]. Thus it remains to be seen how combinations of specific cultural and socio-demographic aspects (e.g., parents' class and socioeconomic status, education level, and both parents, and children's race/ethnic background) may shape individual, couple, and family experiences and outcomes (Costa and Shenkman, 2020).

To this end, the current Research Topic brought together experts in the field from different socio-cultural settings around the world (i.e., Chile, France, Israel, Italy, the Netherlands, New Zealand, Portugal, Sweden, the U.K. and the U.S.) to focus on different aspects of the experiences and outcomes of LGBTQ parents and their children, throughout their family life cycle. A total of 14 articles are contained within our Research Topic on diverse family forms of LGBTQ parents using various methodological approaches and including qualitative research and quantitative studies involving between-difference comparisons and within-difference contextual detail. We have

also been able to include papers on a diverse array of LGBTQ-parent family forms covering 8 substantive areas: (1) intentions and desire to become a parent among lesbian women (van Houten et al.), lesbian, gay, and bisexual young adults (Gato et al.; Tate and Patterson), transgender and non-binary people (Tasker and Gato); (2) perceptions of the most challenging and most optimal experiences of raising children in non-traditional families among the first generation of lesbian parents through donor insemination (Gartrell et al.); (3) consideration of the legal restrictions experienced by lesbian parents as remembered by young adult offspring (Malmquist et al.); (4) associations between division of labor and parental, couple, and child outcomes among transgender and gender-non binary parents (Tornello), and lesbian and gay parents through assisted reproduction (Van Rijn—Van Gelderen et al.); (5) stigmatization and contextual influences upon parenting and psychological adjustment among adoptive lesbian and gay parents (Farr and Vázquez; Goldberg and Garcia); (6) longitudinal associations between children's experiences of their surrogacy origins in gay-parent families and family discussions about conception within the context of attachment security (Carone et al.); (7) perceptions of lawyers and social workers toward adopted children with lesbian and gay parents (Scherman et al.) and finally (8) explorations of pathways to parenthood in non-Western contexts considering data on the psychological well-being of Israeli gay parents through surrogacy (Shenkman et al.) and the family lives of Chilean lesbian parents in the context of a heteronormative and Christian society (Figueroa and Tasker).

The 14 articles included in this Research Topic provided a comprehensive contemporary picture depicting the realities and experiences of members of LGBTQ-parent families. In a similar vein, these papers also invite additional questions, particularly from a longitudinal, multi-informant, contextual, and intersectional perspective. Specifically, given the different regulations governing same-sex marriage around the world, future research questions may relate to how (not) gaining marriage equality affects families, especially regarding relationship commitment, divorce, societal stigma, and children's relationship quality with biological and non-biological (legal and non-legal) parents, grandparents, uncles, and aunts. Also, diversity in both family composition and pathways into parenthood means that parents need to explain or contextualize this for their children. In this respect, the little that is currently known about parents' socialization practices and strategies surrounding family structure is largely limited to lesbian and gay adoptive parent families (Goldberg et al., 2016; Wyman Battalen et al., 2019). How parents socialize their children to family diversity in other sexual and/or gender minority-parent families still remains to be addressed. In a similar vein, more first-hand accounts are needed of children's views on their family form (Gartrell et al., 2012; Zadeh et al., 2019), as well as on their understanding of origins and contact experiences with birth parents, gamete donors, and/or surrogates (Blake et al., 2016; Carone et al., 2018a; Farr et al., 2018; Koh et al., 2020).

Beyond gender, sexual orientation, number of parents, and pathway to parenthood, LGBTQ parent-families may also differ on a number of socio-demographic and health aspects,

including race/ethnicity, social class, physical well-being, and geography (e.g., nationality, living in an urban or rural area). In this vein, much more work from an intersectional perspective is needed to understand the lives of minority, binational, and immigrant LGBTQ-parent families with regards to the complex juxtaposition of multiple minority stressors (e.g., racism, heterosexism, cisgenderism, disability status, lack of resource availability). Finally, although included in the panoply of papers on LGBTQ parenting addressed in this Research Topic, it is paramount to note that bisexual, queer, and trans-/gender diverse-parent families remain understudied family forms.

The ways in which LGBTQ-parent family arrangements can be built will continue to evolve in the near future. In this vein, in 2010 lesbian couples began to have children through shared biological motherhood, where one partner provides her eggs that will be fertilized with donor sperm and the other partner carries the pregnancy; the resulting children will have a genetic mother and a gestational mother (Marina et al., 2010). Furthermore, it may be just a matter of time and legislative endeavor until the possibility of using gametes derived

from human embryonic stem cells will enable both partners in same-sex couples to be genetically related to their child (Adashi and Cohen, 2020). How children will develop and how family processes will be articulated in these upcoming LGBTQ-parent families are still to be seen. Notwithstanding, what contemporary research has clearly demonstrated is that although the family structure does not affect the development of children with sexual and/or gender minority parents, discrimination and stigmatization against their family does.

AUTHOR CONTRIBUTIONS

All authors listed have made a substantial, direct and intellectual contribution to the work, and approved it for publication.

ACKNOWLEDGMENTS

We would like to thank all the authors who participated in the present Research Topic.

REFERENCES

- Adashi, E. Y., and Cohen, I. G. (2020). Reproduction reimaged. *F&S Rep.* 1, 7–8. doi: 10.1016/j.xfre.2020.03.002
- Berkowitz, D. (2020). “Gay men and surrogacy,” in *LGBTQ-Parent Families: Innovations in Research and Implications for Practice, 2nd Edn.* eds A. E. Goldberg and K. R. Allen (Cham: Springer), 143–160.
- Blake, L., Carone, N., Slutsky, J., Raffanello, E., Ehrhardt, A. A., and Golombok, S. (2016). Gay father surrogacy families: relationships with surrogates and egg donors and parental disclosure of children’s origins. *Fertil. Steril.* 106, 1503–1509. doi: 10.1016/j.fertnstert.2016.08.013
- Bos, H. M. W., and Gartrell, N. K. (2011). Adolescents of the US national longitudinal lesbian family study: the impact of having a known or an unknown donor on the stability of psychological adjustment. *Hum. Reprod.* 26, 630–637. doi: 10.1093/humrep/deq359
- Bos, H. M. W., Knox, J., van Rijn-van Gelderen, L., and Gartrell, N. K. (2016). Same-sex and different-sex parent households and child health outcomes: findings from the national survey of children’s health. *J. Dev. Behav. Pediatr.* 37, 179–187. doi: 10.1097/DBP.0000000000000288
- Bos, H. M. W., and Gartrell, N. K. (2020). “Lesbian-mother families formed through donor insemination,” in *LGBTQ-Parent Families: Innovations in Research and Implications for Practice (2nd Edn.)* eds A. E. Goldberg and K. R. Allen (Cham: Springer), 25–44. doi: 10.1007/978-3-030-35610-1_2
- Bos, H. M. W., Carone, N., Koh, A. S., Rothblum, E. D., and Gartrell, N. K. (2021). Long-term effects of homophobic stigmatization during adolescence on problem behavior in emerging adult offspring of lesbian parents. *J. Youth Adolesc.* doi: 10.1007/s10964-020-01364-1
- Calzo, J. P., Mays, V. M., Björkenstam, C., Björkenstam, E., Kosidou, K., and Cochran, S. D. (2019). Parental sexual orientation and children’s psychological well-being: 2013–2015 national health interview survey. *Child Dev.* 90, 1097–1108. doi: 10.1111/cdev.12989
- Carone, N., Baiocco, R., Lingardi, V., and Barone, L. (2020a). Gay and heterosexual single father families created by surrogacy: father–child relationships, parenting quality, and children’s psychological adjustment. *Sexual. Res. Soc. Policy* 17, 711–728. doi: 10.1007/s13178-019-00428-7
- Carone, N., Baiocco, R., Lingardi, V., and Kerns, K. (2020b). Child attachment security in gay father surrogacy families: parents as safe havens and secure bases during middle childhood. *Attach. Hum. Dev.* 22, 269–289. doi: 10.1080/14616734.2019.1588906
- Carone, N., Baiocco, R., Manzi, D., Antonucci, C., Caricato, V., Pagliarulo, E., et al. (2018a). Surrogacy families headed by gay men: relationships with surrogates and egg donors, fathers’ decisions over disclosure and children’s views on their surrogacy origins. *Hum. Reprod.* 33, 248–257. doi: 10.1093/humrep/dex362
- Carone, N., Lingardi, V., Chirumbolo, A., and Baiocco, R. (2018b). Italian gay father families formed by surrogacy: parenting, stigmatization and children’s psychological adjustment. *Dev. Psychol.* 54, 1904–1916. doi: 10.1037/dev0000571
- Carone, N., Gartrell, N. K., Rothblum, E. D., Koh, A. S., and Bos, H. M. W. (2021). The stability of psychological adjustment among donor-conceived offspring in the U.S. national longitudinal lesbian family study from childhood to adulthood: differences by donor type. *Fertil. Steril.* doi: 10.1016/j.fertnstert.2020.20.012
- Carone, N., Rothblum, E. D., Bos, H. M. W., Gartrell, N. K., and Herman, J. L. (2020c). Demographics and health outcomes in a U.S. probability sample of transgender parents. *J. Fam. Psychol.* doi: 10.1037/fam0000776
- Costa, P. A., and Shenkman, G. (2020). “LGBTQ-Parent families in non-western contexts,” in *LGBTQ-Parent Families: Innovations in Research and Implications for Practice, 2nd Edn.* eds A. E. Goldberg and K. R. Allen (Cham: Springer), 319–336.
- Erez, C., and Shenkman, G. (2016). Gay dads are happier: subjective well-being among gay and heterosexual fathers. *J. GLBT Fam. Stud.* 12, 451–467. doi: 10.1080/1550428X.2015.1102668
- Farr, R. H. (2017). Does parental sexual orientation matter? A longitudinal follow-up of adoptive families with school-age children. *Dev. Psychol.* 53, 252–264. doi: 10.1037/dev0000228
- Farr, R. H., Crain, E. E., Oakley, M. K., Cashen, K. K., and Garber, K. J. (2016a). Microaggressions, feelings of difference, and resilience among adopted children with sexual minority parents. *J. Youth Adolesc.* 45, 85–104. doi: 10.1007/s10964-015-0353-6
- Farr, R. H., Oakley, M. K., and Ollen, E. W. (2016b). School experiences of young children and their lesbian and gay adoptive parents. *Psychol. Sex. Orient. Gender Divers.* 3, 442–447. doi: 10.1037/sgd0000187
- Farr, R. H., Ravvina, Y., and Grotevant, H. D. (2018). Birth family contact experiences among lesbian, gay, and heterosexual adoptive parents with school-age children. *Fam. Relat.* 67, 132–146. doi: 10.1111/fare.12295
- Farr, R. H., Tasker, F., and Goldberg, A. E. (2017). Theory in highly cited studies of sexual minority parent families: variations and implications. *J. Homosex.* 64, 1143–1179. doi: 10.1080/00918369.2016.1242336

- Farr, R. H., Vázquez, C. P., and Patterson, C. J. (2020). "LGBTQ adoptive parents and their children," in *LGBTQ-Parent Families: Innovations in Research and Implications for Practice, 2nd Edn.* eds A. E. Goldberg and K. R. Allen (Cham: Springer), 45–64. doi: 10.1007/978-3-030-35610-1_3
- Fedewa, A. L., Black, W. W., and Ahn, S. (2015). Children and adolescents with same-gender parents: a meta-analytic approach in assessing outcomes. *J. GLBT Fam. Stud.* 11, 1–34. doi: 10.1080/1550428X.2013.869486
- Gartrell, N. K., Bos, H. M. W., Peyser, H., Deck, A., and Rodas, C. (2012). Adolescents with lesbian mothers describe their own lives. *J. Homosex.* 59, 1211–1229. doi: 10.1080/00918369.2012.720499
- Gartrell, N. K. (2021). Overview of the 35-year U.S. national longitudinal lesbian family study and its 92% retention rate. *J. GLBT Fam. Stud.* doi: 10.1080/1550428X.2020.1861573
- Gato, J. (2016). Beyond comparison: new trends in research with families with GLB members in Europe. *J. GLBT Fam. Stud.* 12, 1–4. doi: 10.1080/1550428X.2016.1127095
- Goldberg, A. E., and Garcia, R. L. (2016). Gender-typed behavior over time in children with lesbian, gay, and heterosexual parents. *J. Fam. Psychol.* 30, 854–865. doi: 10.1037/fam0000226
- Goldberg, A. E., Sweeney, K., Black, K., and Moyer, A. (2016). Lesbian, gay, and heterosexual adoptive parents' socialization approaches to children's minority statuses. *Couns. Psychol.* 44, 267–299. doi: 10.1177/0011000015628055
- Goldberg, S. K., Conron, K. J., The Williams Institute, U. C. L. A. School of Law. (2018). *How Many Same-Sex Couples in the U.S. are Raising Children?* Retrieved from: <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Parenting/Among/Same/Sex/Couples.pdf> (accessed December 16, 2020).
- Golombok, S., Blake, L., Slutsky, J., Raffanella, E., Roman, G. D., and Ehrhardt, A. (2018). Parenting and the adjustment of children born to gay fathers through surrogacy. *Child Dev.* 89, 1223–1233. doi: 10.1111/cdev.12728
- Green, R. J., Rubio, R. J., Rothblum, E. D., Bergman, K., and Katuzny, K. E. (2019). Gay fathers by surrogacy: prejudice, parenting, and well-being of female and male children. *Psychol. Sex. Orient. Gender Divers.* 6, 269–283. doi: 10.1037/sgd0000325
- Jadva, V., Freeman, T., Tranfield, E., and Golombok, S. (2015). 'Friendly allies in raising a child': a survey of men and women seeking elective co-parenting arrangements via and online connection website. *Hum. Reprod.* 30, 1896–1906. doi: 10.1093/humrep/dev120
- Koh, A. S., van Beusekom, G., Gartrell, N. K., and Bos, H. M. W. (2020). Adult offspring of lesbian parents: how do they relate to their sperm donors? *Fertil. Steril.* 114, 879–887. doi: 10.1016/j.fertnstert.2020.05.010
- Kuvalanka, K. A., Allen, S. H., Munroe, C., Goldberg, A. E., and Weiner, J. L. (2018). The experiences of sexual minority mothers with trans* children. *Fam. Relat.* 67, 70–87. doi: 10.1111/fare.12226
- Kuvalanka, K. A., and Goldberg, A. E. (2009). "Second generation" voices: queer youth with lesbian/bisexual mothers. *J. Youth Adolesc.* 38, 904–919. doi: 10.1007/s10964-008-9327-2
- Kuvalanka, K. A., Leslie, L. A., and Radina, R. (2014). Coping with sexual stigma: emerging adults with lesbian parents reflect on the impact of heterosexism and homophobia during their adolescence. *J. Adolesc. Res.* 29, 241–270. doi: 10.1177/0743558413484354
- Marina, S., Marina, D., Marina, F., Fosas, N., Galiana, N., and Jové, I. (2010). Sharing motherhood: biological lesbian co-mothers, a new IVF indication. *Hum. Reprod.* 25, 938–941. doi: 10.1093/humrep/deq008
- McConnachie, A. L., Ayed, N., Foley, S., Lamb, M. E., Jadva, V., Tasker, F., et al. (2020). Adoptive gay father families: a longitudinal study of children's adjustment at early adolescence. *Child Dev.* 92, 425–443. doi: 10.1111/cdev.13442
- Miller, B. G., Kors, S., and Macfie, J. (2017). No differences? Meta-analytic comparisons of psychological adjustment in children of gay fathers and heterosexual parents. *Psychol. Sex. Orient. Gender Divers.* 4, 14–22. doi: 10.1037/sgd0000203
- Patterson, C. J. (2017). Parents' sexual orientation and children's development. *Child Dev. Perspect.* 11, 45–49. doi: 10.1111/cdep.12207
- Prendergast, S., and MacPhee, D. (2018). Family resilience amid stigma and discrimination: a conceptual model for families headed by same-sex parents. *Fam. Relat.* 67, 26–40. doi: 10.1111/fare.12296
- Riskind, R. G., and Tornello, S. L. (2017). Sexual orientation and future parenthood in a 2011–2013 nationally representative United States sample. *J. Fam. Psychol.* 31, 792–798. doi: 10.1037/fam0000316
- Shenkman, G. (2020). Anticipation of stigma upon parenthood impacts parenting aspirations in the LGB community in Israel. *Sexual. Res. Soc. Policy.* doi: 10.1007/s13178-020-00498-y
- Shenkman, G., and Shmotkin, D. (2019). Self-perceived parental role and mental health concomitants among Israeli gay and heterosexual fathers. *J. Homosex.* 67, 712–732. doi: 10.1080/00918369.2018.1555392
- Simon, K. A., and Farr, R. H. (2020). Identity-based socialization and adopted children's outcomes in lesbian, gay, and heterosexual parent families. *Appl. Dev. Sci.* doi: 10.1080/10888691.2020.1748030
- Tasker, F. (2010). Same-sex parenting and child development: reviewing the contribution of parental gender. *J. Marriage Fam.* 72, 35–40. doi: 10.1111/j.1741-3737.2009.00681.x
- Tasker, F., and Delvoye, M. (2015). Moving out of the shadows: accomplishing bisexual motherhood. *Sex Roles.* 73, 125–140. doi: 10.1007/s11199-015-0503-z
- Tasker, F., and Granville, J. (2011). Children's views of family relationships in lesbian-led families. *J. GLBT Fam. Stud.* 7, 182–199. doi: 10.1080/1550428X.2011.540201
- Tasker, F., and Lavender-Stott, E. S. (2020). "LGBTQ parenting post-heterosexual relationship dissolution," in *LGBTQ-Parent Families: Innovations in Research and Implications for Practice, 2nd Edn.* eds A. E. Goldberg and K. R. Allen (Cham: Springer), 3–24. doi: 10.1007/978-3-030-35610-1_1
- Wyman Battalen, A., Farr, R. H., Brodzinsky, D. M., and McRoy, R. G. (2019). Socializing children about family structure: perspectives of lesbian and gay adoptive parents. *J. GLBT Fam. Stud.* 15, 235–255. doi: 10.1080/1550428X.2018.1465875
- Zadeh, S., Imrie, S., and Golombok, S. (2019). Stories of sameness and difference: the views and experiences of children and adolescents with a trans* parent. *J. GLBT Fam. Stud.* doi: 10.1080/1550428X.2019.1683785

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2021 Carone, Bos, Shenkman and Tasker. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



“We Were Among the First Non-traditional Families”: Thematic Perceptions of Lesbian Parenting After 25 Years

Nanette Gartrell^{1,2*}, Esther D. Rothblum^{1,3}, Audrey S. Koh⁴, Gabriël van Beusekom⁵ and Henny Bos²

¹ Williams Institute, UCLA School of Law, Los Angeles, CA, United States, ² Research Institute of Child Development and Education, University of Amsterdam, Amsterdam, Netherlands, ³ Department of Women's Studies, San Diego State University, San Diego, CA, United States, ⁴ School of Medicine, University of California, San Francisco, San Francisco, CA, United States, ⁵ Netherlands Institute for Social Research, The Hague, Netherlands

OPEN ACCESS

Edited by:

Angelo Brandelli Costa,
Pontifical Catholic University of Rio
Grande do Sul, Brazil

Reviewed by:

Jorge Gato,
Fundação para a Ciência e
Tecnologia, Portugal
Nicola Nardelli,
Sapienza University of Rome, Italy

*Correspondence:

Nanette Gartrell
ngartrell@nllfs.org

Specialty section:

This article was submitted to
Gender, Sex and Sexuality Studies,
a section of the journal
Frontiers in Psychology

Received: 11 September 2019

Accepted: 10 October 2019

Published: 25 October 2019

Citation:

Gartrell N, Rothblum ED, Koh AS,
van Beusekom G and Bos H (2019)
“We Were Among the First
Non-traditional Families”: Thematic
Perceptions of Lesbian Parenting
After 25 Years.
Front. Psychol. 10:2414.
doi: 10.3389/fpsyg.2019.02414

In the sixth wave of the U.S. National Longitudinal Lesbian Family Study (NLLFS), when their offspring were 25 years old, the parents were asked to reflect on their most challenging and best experiences raising children in non-traditional families. The responses of 131 parents were interpreted through thematic analysis. The most challenging parenting experiences fell into five major categories: (1) distress about their children's experiences of exclusion, heterosexism, or homophobic stigmatization; (2) family of origin non-acceptance of their lesbian-parent family; (3) the never-ending process of “educating the world about queer parents”; (4) homophobia or hostility toward their non-traditional family; and (5) lack of legal protections for sexual minority parent (SMP) families. Their best parenting experiences included: (1) being role models, leading to a greater acceptance of LGBTQ people; (2) treasuring the LGBTQ parent and family community; (3) teaching their children to appreciate diversity of all types; and (4) witnessing their child's pride in their non-traditional family. Some of these challenges were anticipated by the parents more than a quarter century ago at the time that they were inseminating or pregnant with the index offspring.

Keywords: lesbian parenting, sexual minority parent families, parent perspectives, thematic perceptions, same-sex parenting, emerging adults, benefits of same-sex parenting, challenges of same-sex parenting

INTRODUCTION

“In third grade, I overheard <my child> telling his friends, ‘there are three unusual things about me: I don’t like chocolate, I don’t eat meat, and I have two moms.’ His friends, horrified, said, ‘YOU DON’T LIKE CHOCOLATE?!’” recalled a parent in describing her best experiences.

Research on sexual minority parents (SMPs) has examined many aspects of parenthood, from the decisions they make in planning their families (Gartrell et al., 1996; Goldberg and Sayer, 2006; Goldberg, 2010), to their negotiations concerning the division of labor and parenting roles (Gartrell et al., 1999; Goldberg and Perry-Jenkins, 2007). Studies have reported on their sources of social support, their concerns about homophobic stigmatization, and their feelings about raising children without fathers or without mothers (Gartrell et al., 1996, 1999, 2000, 2006; Goldberg, 2010). There are data on single parents, couple dynamics, and parental relationship dissolution among those

who identify as sexual minorities (Gartrell et al., 1996, 1999, 2000, 2006, 2011; Goldberg, 2010). Investigators have also asked SMPs about the ways they believe their children might benefit from growing up in non-traditional families (Muzio, 1995; Lynch and Murray, 2000). However, there is a gap in the literature on the experiences of SMPs whose offspring have reached adulthood. The current study explores the most challenging and best parenting experiences of SMPs from the time that their children were conceived until they reach adulthood.

Sexual minority parenting was established as a field of study in the 1970s when lesbian mothers began to seek custody of children they had conceived in heterosexual relationships (Hunter and Polikoff, 1976; Tasker and Golombok, 1997; Tasker, 2013; Golombok, 2015). This was a time of considerable social, cultural, religious, and legal opposition to non-traditional families (Goldberg, 2010; Golombok, 2015). In the absence of empirical data on lesbian-parent families, custody was awarded to the fathers based on assumptions that children reared by lesbians would develop behavioral problems, demonstrate gender non-conformity, experience bullying, and grow up to be LGBT (Golombok and Tasker, 1996; Tasker and Golombok, 1997; Tasker and Patterson, 2008; Tasker, 2013; Golombok, 2015). Although the first research on this topic found that children raised in post-divorce lesbian-parent households were comparable in psychosocial development to those from single heterosexual-mother families (Green, 1978; Kirkpatrick et al., 1981; Golombok et al., 1983), critics pointed to the lack of prospective, longitudinal data on children, adolescents, and adults raised since birth by SMPs (Golombok, 2015). This was the climate in 1982 when The Sperm Bank of California became the first family planning clinic in the United States to offer donor insemination (DI) to all women, regardless of sexual orientation or marital status (The Sperm Bank of California, 2019).

As the news of this clinic made its way around the country, lesbian-identified prospective parents began to conceive children through DI, forming what are now known as planned (or intentional) lesbian-parent families (Gartrell et al., 1996; Goldberg, 2010; Golombok, 2015). Embarking on this path subjected this first generation of parents to criticism from their families of origin, social and religious communities, and even other lesbian women who considered the choice to parent a form of “passing” (i.e., increasing the likelihood of appearing to be heterosexual, and thus reducing one’s exposure to homophobic stigmatization), and a sell-out from the struggle for LGBTQ civil rights (Gartrell et al., 1999; Bradford et al., 2013). At the time, experts in child development, mental health, law, and public policy commented that the outcome of this new social phenomenon would only become fully apparent when the first generation of offspring conceived through DI to lesbian-identified parents reached adulthood (Kolata, 1989; Parke, 2004, 2013). These offspring have now entered adulthood in substantial numbers, providing a wealth of opportunity to study their well-being as adults, and to explore their parents’ perspectives on the bold social experiment in which they participated.

There is now an extensive body of research on the psychological well-being of children and adolescents reared in SMP families. These children and adolescents have been found

to fare as well as, or sometimes better than, those raised in mother–father parent families (Gartrell and Bos, 2010). Many of these studies were grounded in family systems theory (focusing on factors that influence a child’s growth and development over time in the context of family relationships; Goldberg, 2010; Farr et al., 2017), minority stress theory (which attributes the stress of homophobic stigmatization to health disparities found among sexual minority people; Meyer, 2003), as well as social constructionism and queer theory (which emphasize that the concept of family is subject to interpretation, and view SMP families as a challenge to traditional notions of family, gender, gender relations, and sexuality; Dunne, 2000; Oswald et al., 2005; Stacey, 2006; Goldberg and Perry-Jenkins, 2007; Goldberg, 2010; Farr et al., 2017).

Few studies have examined mental health outcomes in adults who were born into SMP families (Golombok and Badger, 2010; Gartrell et al., 2018; Koh et al., 2019). The ongoing U.S. National Longitudinal Lesbian Family Study (NLLFS) began in 1986 with a goal of providing prospective data on the first generation of planned lesbian-parent families (Gartrell et al., 1996). In the sixth wave, the index children – all conceived through DI at Wave 1 by lesbian-identified prospective parents – were 25 years old. When these adult offspring were compared with same-age peers from a nationally representative sample, no differences were found in their relationships with family, friends, or spouses/partners (Gartrell et al., 2018). Also, there were no significant differences in their educational or job performance or mental health (including emotional and behavioral problems). However, NLLFS adult offspring who had been stigmatized in multiple ways because of their parents’ sexual orientation and had low scores on meaning in life were found to have higher rates of emotional or behavioral problems than the remaining NLLFS offspring (Bos et al., 2019; Koh et al., 2019).

To our knowledge, no prior investigation has explored the perspectives of SMPs on their overall parenting experiences from the time that their children were conceived until their children reached adulthood. This information is essential for future generations of SMPs as well as for professionals who may be consulted by SMP families. The current study aims to address this gap in the literature. Research suggests that first-generation DI SMPs might express concerns about the ways that homophobic stigmatization affected their children in the past or present (Gartrell et al., 1996, 1999, 2000, 2006; Goldberg, 2010). Drawing from social constructionism and queer theory (Dunne, 2000; Oswald et al., 2005; Stacey, 2006; Goldberg and Perry-Jenkins, 2007; Goldberg, 2010; Farr et al., 2017) we predict that SMPs might be proud of the ways that their sexual and gender non-conformity influenced cultural concepts of family and parenting in positive ways. The purpose of the current study was to explore the NLLFS parents’ perspectives on the entirety of their parenting, at the time when their children were 25 years old. Specifically, this investigation aimed to gain information about the parents’ most challenging and best experiences related to parenting in a non-traditional family since the time that their children were conceived.

MATERIALS AND METHODS

Participants

One hundred and thirty one parents participated in the sixth wave of the U.S. National Longitudinal Family Study – when their offspring were 25 years old. At Wave 1 (1986–1992), lesbian-identified prospective parents who were inseminating or pregnant via donor sperm were solicited through advertisements in newspapers, flyers in women's bookstores, and leaflets at lesbian events (Gartrell et al., 1996). Interested individuals were invited to call the principal investigator. All callers who felt that they could commit to a longitudinal study of 18+ years duration were accepted as participants. This resulted in an initial cohort of 84 families, consisting of 84 prospective birth mothers and 70 prospective co-mothers. All participants were among the first generation to conceive through DI in planned lesbian families. After Wave 1, data were collected when the index offspring were 2 years old (Wave 2), 5 years old (Wave 3), 10 years old (Wave 4), 17 years old (Wave 5), and 25 years old (Wave 6; Gartrell et al., 2018). During the sixth wave, 77 of the original families were still participating (92% retention rate). The non-participating parents included those in seven families who withdrew or were unavailable, and others who were ill or deceased (from natural causes). For the present study, two families were excluded from the analyses – one because the offspring only partially completed the survey, and another because the offspring was 26 years old at the time of survey completion. Therefore, 75 families, consisting of 69 birth parents, 55 co-parents, and 7 stepparents, were used in the current analyses.

Procedure

After approval was obtained from Sutter Health Institutional Review Board, each NLLFS parent was contacted by email after their offspring reached the age of 25. The email explained the purpose and procedure of the study, and assured each parent that participation in the current wave, as in all prior waves, was entirely voluntary. The measures to ensure confidentiality were also explained to each potential participant (the survey would be administered through a protected online program). After informed consent was obtained and the survey was completed, each participant received a \$60 gift card. Data were collected between 2012 (when the oldest offspring reached the age of 25) until 2017 (when the youngest turned 25; Gartrell et al., 2019).

Self-Report Measures

The current study focused on two open-ended questions:

1. In the past 25 years, what was your most challenging experience related to being a parent in a non-traditional family?
2. In the past 25 years, what was your best experience related to being a parent in a non-traditional family?

Data Analysis

With a goal of providing a descriptive account of the participants' most salient overall experiences in non-traditional parenthood,

the results were interpreted through thematic analysis (Braun and Clarke, 2006). Thematic analysis, which has been used within most theoretical frameworks, involves examining the entire data set for patterns or themes (Braun and Clarke, 2006). The research questions formed two major predetermined themes, each of which allowed for the emergence of novel categories from the participants' responses.

Coding

Two members of the research team (NG and ER) read each response multiple times. These researchers then discussed the major themes that appeared in the responses to the two research questions. Subsequently, NG reread the responses eight times to create broad descriptive categories that encompassed the range of experiences reported by the participants. These categories were discussed and refined multiple times by the two researchers to create an exclusive coding scheme (one code for each phrase, sentence, or group of sentences) before conducting a practice session. NG and ER then independently coded 44 sets of responses, representing 30% of the participants. Their two independently scored sheets were submitted to the statistical analyst (a third member of the research team, HB), who calculated the Krippendorff's alphas: 0.86 for Question 1 and 0.92 for Question 2. NG and ER discussed the responses that they had coded differently and reconciled those into a single code for each response or response segment (phrase, sentence, or group of sentences). Their high level of agreement on the Krippendorff's alphas when coding the first 30% of participant responses made it possible for NG to code the responses of the remaining 70%.

RESULTS

Descriptive Statistics

The descriptive statistics for the total analytic sample are presented in **Table 1**. As can be seen, 96.9% of parents identified as female (at Wave 6) and 89.3% as White (at Wave 1). Their average age at Wave 6 was 59.8 ± 4.9 years. Most parents had a college degree or higher (Wave 6; 92.4%).

Most Challenging Parenting Experiences

Based on the participants' reports, 117 segments were coded. As shown in **Table 2**, thematic analysis revealed that the most challenging parenting experiences associated with raising their children in non-traditional families fell into five major categories: (1) distress about their children's experiences of exclusion, heterosexism, or homophobic stigmatization (33.3%); (2) family of origin non-acceptance of their lesbian-parent family (16.2%); (3) the never-ending process of "educating the world about queer parents" (14.5%); (4) homophobia or hostility toward their non-traditional family (12.8%); and (5) lack of legal protections for SMP families (9.4%). Other challenging experiences included not having the co-mother acknowledged as a parent (6.8%), and dissatisfaction with the known donor's role in the family (5.1%).

TABLE 1 | Demographic information for the sample.

	<i>n</i>	%
Parent type		
Birth parent	69	52.7
Co-parent	55	42.0
Stepparent	77	5.3
Current gender identity		
Female	127	96.9
Male	0	0.0
Transgender female	0	0.0
Transgender male	0	0.0
Genderqueer	3	2.3
Intersex	0	0.0
Other ¹	1	0.8
Age (years)		
<i>M</i> = 59.8		
<i>SD</i> = 4.9		
Race/ethnicity		
People of color ²	7	5.3
White	117	89.3
Unknown	7	5.3
Education		
High school graduate or General Equivalency Diploma	2	1.5
Some college, but no college degree	8	6.1
Associate's, bachelor's, or registered nurse degree	23	17.6
Some graduate school, but no graduate degree	10	7.6
Masters, doctoral, or law degree	88	67.2
Current work status		
No work	27	20.6
Part-time	19	61.1
Full-time	80	14.5
Between part-time and full-time	5	3.8

Birth parent and co-parent type and race/ethnicity data were collected in Wave 1, and the remaining data in Wave 6; all numbers are *n* (%), with exception of age. ¹ Transgender, intersex, multigender. ² Native American: 2, Asian American: 3, African American: 2.

Distress About Their Children's Experiences of Exclusion, Heterosexism, or Homophobic Stigmatization

Thirty-nine parents focused on their children's experiences of homophobic discrimination. Pat (all names are pseudonyms) described a difficult period for her son: "The most challenging experience was trying to get him through middle school years when the kids would tease him about having lesbian parents or accuse him of being gay because of it." Samantha felt particularly bad about the ways her son was excluded: "[His] best friend had a father who disapproved of us not having a man/husband in the house. The father would not let his son stay overnight at our house and our son was never invited to his friend's birthday parties." Judith found it challenging "to explain the ignorance of other people to [her] kids when they were little." Bee pointed to the difficulty of "helping <child's name> to try to understand why a friend from a very religious environment was not allowed to come to her 12th birthday party." Some parents felt sad or

TABLE 2 | Most challenging parenting experience.

	Segment	
	<i>n</i>	%
Thematic coding category		
(1) Distress about their children's experiences of exclusion, heterosexism, or homophobic stigmatization	39	33.3
(2) Family of origin non-acceptance of their lesbian-parent family	19	16.2
(3) The never-ending process of "educating the world about queer parents"	17	14.5
(4) Homophobia or hostility toward their non-traditional family	15	12.8
(5) Lack of legal protections for SMP families	11	9.4
(6) Co-mother not acknowledged as a parent	8	6.8
(7) Dissatisfaction with the known donor's role in the family	6	5.1
(8) Other	2	1.7
Total	117	100.0

hurt when their children were ashamed about their family type as a result of having been stigmatized. Tanya wrote that it was challenging when her "son had times when he was embarrassed to have two moms or when he wouldn't say anything when his friends made homophobic remarks in my presence." One parent described the change in her son's behavior after they moved from a progressive to a conservative community: "Many of the kids <child's name> met were not exactly gay-positive, and after a few negative experiences he stopped telling his fellow students that he had two moms." During the marriage equality debates, many parents had difficulty protecting their children from homophobic stereotypes. Amelia said that "the hardest part was that our daughter was subjected to hearing mean-spirited things about her own family, also at school, in our community, and in the media." Nicola and Jane "were concerned with [their] daughter's well-being and safety as [they] began to speak out publicly about [their] family and [their] desire to marry."

Family of Origin Non-acceptance of Their Lesbian-Parent Family

Nineteen participants reported that they had been rejected by their family of origin for choosing to raise a child in a lesbian-parent household. Penny wrote, "Just about the time I became pregnant, my...brother and his wife became born again Christians. My brother said some very hurtful things to us. For a couple of years after my son's birth, we would never allow my brother and sister-in-law to be alone with him. We didn't know if they would kidnap him or make derogatory comments about us to him." Jessica stated, "My greatest difficulty has been with my own original family, some of whom have found it nearly impossible to accept me as a lesbian, and as a result of that, accept my partner and my children as normal. I have tried for years to show up with my family and participate in the larger circle. But some, I guess because of deep religious conviction, cannot let us be normal and part of the whole. It's so disappointing." Alexandria, a birth mother, stated that her co-parent Rachel had lost custody of a child due to homophobia.

Rachel's family of origin had used the legal system to claim that Rachel was unfit to parent because she was a lesbian: "They were instrumental in her losing custody of her then 4-year-old daughter because we were a lesbian couple." Some parents indicated that their families of origin had been hostile when the pregnancy was announced, but eventually came around. Bev described the painful experience of her "parents telling [her] that <child's name> was not their grandchild. They changed within a couple of years and were very loving and proud, but it took some work." For others, the rejection by the family of origin never ceased. Kim wrote, "My biological family was/is a great challenge. They rarely recognize my children for holidays, etc." Alice stated, "My parents never accepted our kids as their grandchildren because they were children of lesbians." Celia's mother took her homophobia to the grave: "At my mother's shiva 6 years ago, a woman came up to our daughter and said, 'I am so glad your mother decided to have you. I remember your grandmother and mother had talked about whether she would go through with the pregnancy – I'm so glad she decided to do so.' My daughter came to me and literally said 'WTF!' I explained that my mother had told people I was pregnant by accident but had then decided to have the baby. She told people I was a single parent when in reality I had been in a lesbian relationship (family) for 25 years."

The Never-Ending Process of "Educating the World About Queer Parents"

Seventeen parents found the necessity of repeatedly having to explain their family configuration annoying. As Cecilia put it, "We were among the first non-traditional families, so other parents were not sure what to make of us." Debbie tired of "the relentlessness of having to explain we are both parents...[and] having people ask, 'What do you know about the donor?' UGH." One participant mentioned that the conversation became even more complex when she and her co-parent split, and her daughter then had two moms and a stepmom: "I did have to talk to every single teacher for both girls every year to let them know that they had two moms and a stepmom, and that <child's name> lived in two homes." Another parent referred to it as the "many moms" conversation.

Homophobia or Hostility Toward Their Non-traditional Family

Dealing with homophobia or hostility that was directed at their families was particularly challenging for 15 parents. Some cited early incidents that were traumatic. Barb stated, "When my son was 2 years old, someone I supervised at work organized an attack on me and told everyone I was a lesbian and tried to get me kicked out of my job. Although I didn't lose my job, this was really scary. I felt a strong sense of being vulnerable as a lesbian mom and remember feeling scared that my son could be taken away from me. The trauma of that experience, although greatly healed, is still with me." Cassie wrote that she felt that "it was important to be 'out' for [her] child, but [she] often felt some fear while doing so." Several mentioned homophobic experiences in the medical setting. Valerie hated

"having to deal with doctors and hospitals that did not recognize [her] right to parent [her] kids." Kaye Jean elaborated on one such experience: "At <name of hospital>, we walked in the room to meet the head doctor for the first time. She did not introduce herself. She immediately yelled, 'We have to know about the father.' We were shocked by this unprofessional approach. I would have expected her to start by asking us for a family medical history." When her child was very young, Jasmine had to contend with a complaint filed with social services by a neighbor: "It was very challenging, but the support we got from the pre-school, the pediatrician, other neighbors and friends was incredible." Several participants described their efforts to destigmatize SMP families by befriending opponents. Danielle wrote, "There was one mother who was very rude, very uncomfortable around my wife and I. I chose to volunteer in the library every week, the same day as this mother. Within 6 months...she started to talk about being more accepting of a non-traditional family. She did not know any other lesbian or gay people. I think she just had a preconceived idea (with a little influence from her Catholic upbringing) that we were bad people." Wendy felt that cultural homophobia contributed to the dissolution of the relationship with her co-parent: "I sometimes wonder if we could have kept our family intact if we had been a traditional couple. I do see straight couples under stress and imagine more social/societal support to stay together than we had."

Lack of Legal Protections for SMP Families

Eleven participants pointed to the lack of legal protections for their families, especially before marriage equality was granted by the United States Supreme Court. Some of these participants were litigants in the struggle for co-parent adoption. Marty stated, "<Co-mother's name> and I were the first <county name> citizens to legally adopt our non-biological children and have both our names listed on their birth certificates. At the time, the <state name> only allowed adoptions by a man and a woman. The process was expensive, time-consuming, and sometimes frustrating." Silvana described her family's struggle to obtain medical insurance for their child before co-parent adoption: "Before we were able to cross-adopt, when <child's name> was born, I argued she should go on my insurance, because she was my dependent. After agreeing, this option was withdrawn. It made me angry that my parenthood was being written out of existence, and anxious because <child's name> had some serious medical problems." Several mentioned the stress of traveling out of state and the prospect of officials denying the legitimacy of their family ties. Roberta wrote about "not being recognized as a family by the government and always having to be sure you had all the legal paperwork complete and up-to-date at all times." Sallyanne stated, "We were nervous traveling to Texas, that if something happened, they would take <daughter's name> since her family was not recognized. It was insulting for my partner to need to adopt her own child." Some co-parents, like Pauletta, described being fearful when she broke up with her children's birth mother "that the courts would [not] honor my role in my children's lives when we split as I was not the biological mother."

TABLE 3 | Best parenting experience.

	Segment	
	<i>n</i>	%
Thematic coding category		
(1) Being role models, leading to greater acceptance of LGBTQ people	25	23.4
(2) Treasuring the LGBTQ parent and family community	23	21.5
(3) Teaching their children to appreciate diversity of all types	21	19.6
(4) Witnessing their child's pride in their non-traditional family	20	18.7
(5) Gaining legal recognition	10	9.3
(6) Having the freedom to parent across gender expectations	4	3.7
(7) Other	4	3.7
Total	107	100.0 ¹

¹ Due to rounding, the total is 99.9%.

Dissatisfaction With the Known Donor's Role in the Family

Dissatisfaction with the role of the known donor was mentioned by six participants. A few wished that the donor had been more involved in their family life, and others wanted the opposite. Andrea wrote: "Although we have a known donor, I feel very sad that we rarely see him (every few years at this point), and almost never unless I initiate." In contrast, Karen regretted "having to send [her] child (beginning at 6 months of age) to her father's home on alternate weekends during the week, and for extended periods in the summer."

Best Parenting Experiences

Based on thematic analysis, 107 segments were coded from the participants' recollections of their best experiences as parents in non-traditional families over the prior 25 years (see **Table 3**). Four primary categories emerged from these codes: (1) being role models, leading to a greater acceptance of LGBTQ people (23.4%); (2) treasuring the LGBTQ parent and family community (21.5%); (3) teaching their children to appreciate diversity of all types (19.6%); and (4) witnessing their child's pride in their non-traditional family (18.7%). Other themes that were associated with best experiences included gaining legal recognition (9.3%), and having the freedom to parent across gender expectations (3.7%).

Being Role Models, Leading to Greater Acceptance of LGBTQ People

Twenty-five parents were proud to have shown people in all walks of life how healthy, loving, and supportive SMP families could be. They described their delight in witnessing greater acceptance and recognition of LGBTQ-parent families. Many commented on their efforts to educate people about their family type. Deni stated, "I enjoyed...educating other lesbian women who wanted to parent. I liked challenging people's assumptions about who makes a good parent and why." Sondra wrote, "In the beginning it was extremely hard, but as we moved forward, you could see a shift in how people viewed our family. It really was something wonderful to see." Kim reported on a school experience: "I loved it when our son's third grade teacher told us how worried she

had been to have lesbians be part of the parents she had to deal with at the beginning of the school year, and how unnecessary that worry had been – that we were the best parents in the room." Some, like Dale, wrote about "coming out to people in my work or in my social circles over and over and seeing their views change over time, going from either neutral or ignorant to educated and supportive of gay and lesbian parenting." Some parents mentioned past and present opportunities to mentor youth. Ann stated, "For straight friends, I have been someone their kids could come talk to." Others were still receiving feedback about how helpful they had been. Cassie wrote, "In recent years we've heard from some of our daughter's friends – those who are grown up now and out as gay, lesbian, and trans – that growing up they looked up to us as role models and that we gave them some hope that everything could work out." Libby added, "We have been able to mentor several lesbians, gays, and transgender youth in our community – those who now know that non-traditional families can live happy, productive lives, and have children."

Treasuring the LGBTQ Parent and Family Community

For 23 parents, the LGBTQ community was a highlight of their parenting years. Many commented on the important connections they had made during LGBTQ Pride celebrations, family camps, and community events. Francis mentioned that she "feel[s] a deep connection to the LGBTQ parenting world." Erin described her favorite memory: "Blueberry Cove Family Camp, with all kinds of families, and having a week of bliss each summer for many years, during which we were just another family that had two wonderful moms and two wonderful sons and many, many good, loving friends to eat with, swim with, write with, play with, and the kids could be freeeeeeee." Joan's family still goes to queer family camp every year: "Camp it Up, a family camp for queer families, we go every summer. It's an essential recharge each year, to have our family affirmed and reflected in a safe environment." Several parents mentioned Family Week in Provincetown as a special annual event. Some also included their religious communities as sources of support. Marie stated, "We have had a great deal of support and affirmation as a lesbian family in our community – synagogue, family camp, community of friends, and family."

Teaching Their Children to Appreciate Diversity of All Types

The best parenting experience for 21 participants involved teaching their children to appreciate all forms of diversity and understand all forms of oppression. Margarita captured this concept in her response: "The best experience was helping to raise an incredible son. He is a sensitive, caring, loving, compassionate person because of the family he was born into, with two great mothers and two great fathers. All of his parents have done a good job of parenting. Being from a gay family has contributed to his understanding of all oppressions – racism, sexism, classism, and gay oppression. He has been a great ally to me, particularly as a woman of color who was raised poor from an immigrant family." Shay wrote of her pride in "watching the ways that both my children actively care for the disadvantaged and stand up for the rights of everyone to equal treatment and opportunity." Ansley stated, "I always knew from a very young age that any

children I brought into this world would be loved, healthy, happy, productive individuals who give back to the world. This has proved to be 100% true." Several parents, like Clare, mentioned their joy in raising empathic sons: "Being able to raise <child's name> with an open mind to different ways of living, nurturing [his] ability to be empathic and sensitive to others." Others commented that helping their children appreciate diversity had the additional benefit of giving them more confidence in themselves, as Maddy's response illustrates: "I believe that our children have learned to be accepting of all types of families and people in general. From a very young age, they learned to stand up for themselves and who they are." Danny mentioned that she was very happy in "seeing that our role modeling and community helped our kids understand that they could be truly themselves, in whatever way they turned out to be." She was also grateful for "their having an appreciation of otherness and difference that helped them be more accepting of diversity in others."

Witnessing Their Child's Pride in Their Non-traditional Family

Twenty parents wrote about witnessing their child's pride in their non-traditional family. Many described important events at which their children spoke or taught others about their family type. Sal commented on an occasion when her young son educated prospective SMPs: "He and some of his friends spoke on a panel at an event for lesbians considering parenthood. [It] was pretty cool too, how positively he expressed he felt about growing up in a lesbian family." Jovi described a proud moment when her son's essay educated his entire school: "When my son was in elementary school (5th grade), he wrote a paper about why he was disappointed in the State of California for trying to pass a law about not allowing same-sex couples to marry (Prop 22). His teacher thought it was a wonderful paper and asked the principal if he could read it to the entire school during the assembly that day. So many of the parents came up to us to let us know that hearing his paper had changed their view on their vote. They had not thought about how unfair it was to not have the same rights that [were] allowed to others." Francis wrote that her children were invited to be panel participants at an annual event for social workers: "They were asked to speak about what it had been like being raised by same-gender parents. It felt like an honor." Others had children who testified for LGBTQ civil rights. In doing so, Diane stated that her daughter was "very mature and comfortable with who she was, even at the tender age of 13!" Sue wrote that her son has made it his life's work to educate the world about his non-traditional family: "He is a writer who has taken many of his childhood experiences and turned them into entertaining and enlightening stories, some of which he has told on radio programs and in community story-telling programs. I am proud of how he has learned to reframe his experiences, to take ownership of the out-of-the-mainstream experiences he has had, and to share his perspective with others through his creativity."

Legal Recognition

For 10 parents, the highlight of their parenting experiences was gaining legal recognition through the United States Supreme Court decisions. Cece was proud of "being involved in the

equal marriage litigation as a family." Sheila wrote that her best experience was "getting married because of the legal security for us, but [also] getting married because the children really wanted us to."

Freedom to Parent Across Gender Expectations

Four parents felt that it was particularly important that they were able to parent across gender expectations. As Jaime put it, "At our house, there were no real traditional gender roles, so anything was seen as possible to do. As a result, my daughter is very sensitive to people saying something like, 'You can't do it because you're _____.'"

DISCUSSION

This study is unique in examining the perspectives of SMPs whose children are now emerging adults. These parents were among the first generation to conceive children through DI and rear them in planned lesbian families. The parents were participants in the sixth wave of the ongoing NLLFS. They were asked to describe their most challenging and best experiences as parents in non-traditional families from the time that their children were born until they reached the age of 25 years. Thematic analyses revealed that the most challenging experiences faced by the NLLFS parents included distress about their children's experiences of exclusion, heterosexism, or homophobic stigmatization; family of origin non-acceptance of their lesbian-parent family; the never-ending process of educating the world about SMPs; homophobia or hostility toward their non-traditional family; and lack of legal protection for SMPs. The best experiences fell into four main categories, namely, serving as role models who contributed to a greater acceptance of LGBTQ people, treasuring the LGBTQ parent and family community, teaching their children to appreciate diversity of all types, and witnessing their child's pride in their non-traditional family.

Studies on SMP families in the transition to parenthood or the early years of childhood (Gartrell et al., 1996, 1999, 2000, 2006; Goldberg and Sayer, 2006; Goldberg, 2010) might have predicted that even as parents of adult children, the NLLFS participants would comment on their children's experiences of homophobic stigmatization. As it turned out, this was the most frequently mentioned parenting challenge by participants in the current study, and it was anticipated by the NLLFS parents at Wave 1 (Gartrell et al., 1996). At that time, the prospective parents worried that their children could be stigmatized because they had been conceived through DI by lesbian-identified women. In preparation for helping their children cope with this challenge, 61% of prospective parents had formed or joined lesbian parenting groups. After their children were born, the parents were actively involved in promoting LGBTQ-awareness in their pre-schools, elementary schools, social groups, and community activities (Gartrell et al., 1999, 2000). The NLLFS parents felt that exposure to all types of diversity was essential to protecting their children from homophobia (Gartrell et al., 1999), and many parents taught their children healthy responses to harassment (Gartrell et al., 2005). Since that time, studies have found that

promoting awareness of diversity and preparing for the prospect of discrimination are important aspects of cultural socialization for non-majority children (Hughes et al., 2006; Oakley et al., 2017). When the NLLFS offspring were 10 years old, 43% reported that they had experienced discrimination based on their family type, and nearly 40% spoke out about it, telling peers that they were “wrong” or “not nice” for making hostile, homophobic comments (Gartrell et al., 2005). The negative impact of homophobia on the psychological well-being of the NLLFS offspring who experienced it was moderated (or lessened) for 10-year-olds who attended schools with LGBTQ curricula and had parents who participated in the lesbian community (Bos et al., 2008); for 17-year-olds, by having close, positive relationships with their parents (Bos and Gartrell, 2010); and for 25-year-olds who had found meaning in life (Bos et al., 2019).

In the current study, for many NLLFS parents, rejection by their family of origin was still a salient memory. At Wave 1, 15% of participants expected that no family member would acknowledge their child because of their own lesbian identity (Gartrell et al., 1996). However, by the time the index offspring were 10 years old, most families of origin had embraced these children and treated them no differently than any other family members (Gartrell et al., 2006). Also, nearly three-quarters of grandparents were “out” about their grandchild’s SMPs. Nevertheless, some parents in the current study had family members who never accepted the index offspring or the SMP family in which they were raised.

Educating others about non-traditional families was a never-ending process for many parents in the first generation of lesbian-identified women to conceive children through DI. When their children were young, these parents had to contend with considerable cultural and institutional homophobia (Gartrell et al., 1996; Tasker and Patterson, 2008; Goldberg, 2010; Bradford et al., 2013; Golombok, 2015). The struggle to create a safe path for their children was at times arduous, according to parent reports across the six waves of the NLLFS (Gartrell et al., 1996, 1999, 2000, 2005). For example, whenever their children changed schools, joined an athletic team, or enrolled in community theater, the parents had to come out to a new group of families, teachers, coaches, or instructors. This meant monitoring to ensure that their children were not stigmatized, and if they were, working to promote acceptance of non-traditional families. In two-mother families, there was an ongoing effort to ensure that both parents were acknowledged as legitimate. In order to do so, many parents in this first generation helped forge the legal protections that SMPs now enjoy. All in all, first-generation SMPs contributed to cultural and institutional changes in the acceptance of non-traditional families in ways that could not have been anticipated when they first embarked on the path to parenthood.

A quarter century after this bold experiment began (Parke, 2004, 2013), the NLLFS parents were proud of their role in promoting greater acceptance of LGBTQ people. In line with social constructionism and queer theory, their best parenting experiences included challenging heterosexual norms about sexuality and gender (Oswald et al., 2005) and what it means to be a family (Dunne, 2000; Oswald et al., 2005; Stacey, 2006).

They described special memories of joyful celebrations and connections with the LGBTQ parent and family community. They appreciated that their adult children welcomed diversity, were unrestricted by gender stereotypes, and continued to educate their own peers about non-traditional families.

Strengths, Limitations, and Future Directions

A strength of the current study is that the data were drawn from the largest and longest-running, ongoing, longitudinal investigation of SMPs. Because the NLLFS is a prospective investigation, the findings from the current study are not biased by overrepresentation of parents who volunteered to participate when they already knew that their families and children were doing well.

There are also limitations that must be noted. The NLLFS is a non-representative sample. The parents enrolled at a time in history when most LGBTQ people were closeted, and recruiting a population-based sample was unrealistic. In addition, the participants were mostly White and highly educated. For these reasons, the results may not be generalizable to the population of SMPs as a whole.

Future prospective, longitudinal studies would benefit from larger, more diverse, and representative samples of parents who identify as LGBTQ, for whom children entered the family unit through DI, fostering, adoption, stepparenting, and surrogacy. These samples would allow for an intersectional approach to explore the parenting experiences of a wide array of sexual and gender minority people, including those who have multiple minority status, in the post-marriage equality era. Because the current study asked parents to reflect on their experiences over a 25-year period, some reported on past and some on recent events. Research is needed to assess whether societal and cultural changes during this period of time have created more of a welcoming environment for newly forming SMP families, or whether these changes are only affecting those who reside in more progressive communities or countries.

Our findings provide implications for practice. Health professionals, educators, and social service agents should be attentive to the prospect that SMPs and their children may be subjected to homophobic discrimination from many sources – families of origin, medical and mental health professionals, teachers, peers, and colleagues. Clinicians should be prepared to help SMPs and their families manage the stress of coming out over and over, sometimes to individuals who may be hostile. Clinicians and educators should also understand the importance of preparing the children of SMPs for the prospect of stigmatization. SMPs should work with the school systems to design or improve anti-bullying programs, and to ensure that the educational curricula provide information on all types of families (Gartrell et al., 1999, 2000, 2005; Hughes et al., 2006; Oakley et al., 2017). In addition, professionals should be fully informed about the favorable outcomes and protective factors for children reared in SMP families (Bos et al., 2008, 2019; Bos and Gartrell, 2010) so that they can share this information with prospective or struggling parents. Despite the many challenges faced by the

first generation of SMPs who conceived through DI, their adult children are faring very well (Golombok and Badger, 2010; Gartrell et al., 2018).

CONCLUSION

To our knowledge, this is the only study to have surveyed SMPs about their most challenging and best parenting experiences from the time that their children were conceived until they became 25-year-old adults. The results revealed that distress over their children's and family's experiences of homophobic stigmatization, family of origin non-acceptance of their lesbian-parent family, the never-ending process of educating people about non-traditional families, and lack of legal protections for SMPs families were the most challenging experiences recalled by the participating parents. On the positive side, the parents were proud that they had contributed to the greater acceptance of SMP families, and that they had taught their children to welcome diversity. They treasured their memories of connecting with the LGBTQ parent and family community, and witnessing their children speak publicly and favorably about their non-traditional family.

REFERENCES

- Bos, H., and Gartrell, N. (2010). Adolescents of the USA national longitudinal lesbian family study: can family characteristics counteract the negative effects of stigmatization? *Fam. Process.* 49, 559–572. doi: 10.1111/j.1545-5300.2010.01340.x
- Bos, H. M., Gartrell, N. K., Peyser, H., and van Balen, F. (2008). The USA national longitudinal lesbian family study (NLLFS): homophobia, psychological adjustment, and protective factors. *J. Lesbian Stud.* 12, 455–471. doi: 10.1080/10894160802278630
- Bos, H. M. W., Gartrell, N., and Koh, A. (2019). Meaning in life as a moderator between homophobic stigmatization and problem behavior in emerging adult offspring from planned lesbian families. *Paper Presented at the American Psychological Association Convention*, Chicago, IL.
- Bradford, J., Ryan, C., Rothblum, E., and Honnold, J. (2013). "I have never slept with a man and there is no star rising in the east": lesbians, bisexual women, and pregnancy before insemination. *J. GLBT Fam. Stud.* 9, 490–509. doi: 10.1080/1550428X.2013.826160
- Braun, V., and Clarke, V. (2006). Using thematic analysis in psychology. *Qual. Res. Psychol.* 3, 77–101. doi: 10.1191/1478088706qp0630a
- Dunne, G. A. (2000). Opting into motherhood: lesbians blurring the boundaries and transforming the meaning of parenthood and kinship. *Gend. Soc.* 14, 11–35. doi: 10.1177/089124300014001003
- Farr, R. H., Tasker, F., and Goldberg, A. E. (2017). Theory in highly cited studies of sexual minority parent families: variations and implications. *J. Homosexual.* 64, 1143–1179. doi: 10.1080/00918369.2016.1242336
- Gartrell, N., Banks, A., Hamilton, J., Reed, N., Bishop, H., and Rodas, C. (1999). The national lesbian family study: 2. interviews with mothers of toddlers. *Am. J. Orthopsychiat.* 69, 362–369. doi: 10.1037/h0080410
- Gartrell, N., Banks, A., Reed, N., Hamilton, J., Rodas, C., and Deck, A. (2000). The national lesbian family study: 3. interviews with mothers of five-year-olds. *Am. J. Orthopsychiat.* 70, 542–548. doi: 10.1037/h0087823
- Gartrell, N., Bos, H., and Koh, A. (2018). National longitudinal lesbian family study—mental health of adult offspring. *N. Engl. J. Med.* 379, 297–299. doi: 10.1056/NEJMc1804810
- Gartrell, N., Bos, H., and Koh, A. (2019). Sexual attraction, sexual identity, and same-sex sexual experiences of adult offspring in the US national longitudinal

DATA AVAILABILITY STATEMENT

The raw data supporting the conclusions of this manuscript will be made available by the authors, without undue reservation, to any qualified researcher.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Sutter Health Institutional Review Board. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

All authors designed the study and made substantial intellectual contributions to the work. HB managed the data file and conducted the statistical analyses. NG and ER developed the thematic coding scheme and coded the responses. NG took the lead in writing the manuscript. All authors revised the manuscript and approved it for publication.

- lesbian family study. *Arch. Sex. Behav.* 48, 1495–1503. doi: 10.1007/s10508-019-1434-5
- Gartrell, N., Bos, H., Peyser, H., Deck, A., and Rodas, C. (2011). Family characteristics, custody arrangements, and adolescent psychological well-being after lesbian mothers break up. *Fam. Relat.* 60, 572–585. doi: 10.1111/j.1741-3729.2011.00667.x
- Gartrell, N., and Bos, H. M. W. (2010). The US national longitudinal lesbian family study: psychological adjustment of 17-year-old adolescents. *Pediatrics* 126, 1–9. doi: 10.1542/peds.2010-1807
- Gartrell, N., Deck, A., Rodas, C., Peyser, H., and Banks, A. (2005). The national lesbian family study: 4. interviews with the 10-year-old children. *Am. J. Orthopsychiat.* 75, 518–524. doi: 10.1037/0002-9432.75.4.518
- Gartrell, N., Hamilton, J., Banks, A., Mosbacher, D., Reed, N., Sparks, C. H., et al. (1996). The national lesbian family study: 1. interviews with prospective mothers. *Am. J. Orthopsychiat.* 66, 272–281. doi: 10.1037/h0080178
- Gartrell, N., Rodas, C., Deck, A., Peyser, H., and Banks, A. (2006). The USA national lesbian family study: interviews with mothers of 10-year-olds. *Fem. Psychol.* 16, 175–192. doi: 10.1177/0959-353506062972
- Goldberg, A. E. (2010). *Lesbian and Gay Parents and Their Children: Research on the Family Life Cycle*. Washington, DC: American Psychological Association.
- Goldberg, A. E., and Perry-Jenkins, M. (2007). The division of labor and perceptions of parental roles: lesbian couples across the transition to parenthood. *J. Soc. Pers. Relat.* 24, 297–318. doi: 10.1177/0265407507075415
- Goldberg, A. E., and Sayer, A. (2006). Lesbian couples' relationship quality across the transition to parenthood. *J. Marriage Fam.* 68, 87–100. doi: 10.1111/j.1741-3737.2006.00235.x
- Golombok, S. (2015). *Modern Families: Parents and Children in New Family Forms*. Cambridge: Cambridge University Press.
- Golombok, S., and Badger, S. (2010). Children raised in mother-headed families from infancy: a follow-up of children of lesbian and heterosexual mothers, at early adulthood. *Hum. Reprod.* 25, 150–157. doi: 10.1093/humrep/dep345
- Golombok, S., Spencer, A., and Rutter, M. (1983). Children in lesbian and single-parent households: psychosexual and psychiatric appraisal. *J. Child Psychol. Psychiatry* 24, 551–572. doi: 10.1111/j.1469-7610.1983.tb00132.x
- Golombok, S., and Tasker, F. (1996). Do parents influence the sexual orientation of their children? findings from a longitudinal study of lesbian families. *Dev. Psychol.* 32, 3–11. doi: 10.1037/0012-1649.32.1.3

- Green, R. (1978). Sexual identity of 37 children raised by homosexual or transsexual parents. *Am. J. Psychiatry* 135, 692–697. doi: 10.1176/ajp.135.6.692
- Hughes, D., Rodriguez, J., Smith, E. P., Johnson, D. J., Stevenson, H. C., and Spicer, P. (2006). Parents' ethnic-racial socialization practices: a review of research and directions for future study. *Dev. Psychol.* 42, 747–770. doi: 10.1037/0012-1649.42.5.747
- Hunter, N. D., and Polikoff, N. D. (1976). Custody rights of lesbian mothers: legal theory and litigation strategy. *Buff. L. Rev.* 25, 691–733.
- Kirkpatrick, M., Smith, C., and Roy, R. (1981). Lesbian mothers and their children: a comparative survey. *Am. J. Orthopsychiatry*. 51, 545–551. doi: 10.1111/j.1939-0025.1981.tb01403.x
- Koh, A. S., Bos, H. M., and Gartrell, N. K. (2019). Predictors of mental health in emerging adult offspring of lesbian-parent families. *J. Lesbian Stud.* 23, 257–278. doi: 10.1080/10894160.2018.1555694
- Kolata, G. (1989). Lesbian partners find the means to be parents. Chicago, IL: Chicago Booth.
- Lynch, J. M., and Murray, K. (2000). For the love of the children: the coming out process for lesbian and gay parents and stepparents. *J. Homosexual.* 39, 1–24. doi: 10.1300/J082v39n01_01
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychol. Bull.* 129, 674–697. doi: 10.1037/0033-2909.129.5.674
- Muzio, C. (1995). Lesbians choosing children: creating families, creating narratives. *J. Feminist Fam. Ther.* 7, 33–45. doi: 10.1300/J086v07n03_05
- Oakley, M., Farr, R. H., and Scherer, D. G. (2017). Same-sex parent socialization: understanding gay and lesbian parenting practices as cultural socialization. *J. GLBT Fam. Stud.* 13, 56–75. doi: 10.1080/1550428X.2016.1158685
- Oswald, R. F., Blume, L. B., and Marks, S. R. (2005). “Decentering heteronormativity: a model for family studies”. in *Sourcebook of Family Theory and Research*, eds V. Bengtson, A. Acock, K. Allen, D. Klein, and P. Dilworth-Anderson. (Thousand Oaks, CA: Sage), 143–165. doi: 10.4135/9781412990172.d32
- Parke, R. D. (2004). Development in the family. *Annu. Rev. Psychol.* 55, 365–399. doi: 10.1146/annurev.psych.55.090902.141528
- Parke, R. D. (2013). *Future Families: Diverse Forms, Rich Possibilities*. Hoboken, NJ: Wiley-Blackwell.
- Stacey, J. (2006). Gay parenthood and the decline of paternity as we knew it. *Sexualities* 9, 27–55. doi: 10.1177/1363460706060687
- Tasker, F. (2013). “Lesbian and gay parenting post-heterosexual divorce and separation,” in *LGBT-Parent Families*, eds A. E. Goldberg, and K. R. Allen, (New York, NY: Springer), 3–20. doi: 10.1007/978-1-4614-4556-2_1
- Tasker, F., and Patterson, C. J. (2008). Research on gay and lesbian parenting: retrospect and prospect. *J. GLBT Fam. Stud.* 3, 9–34. doi: 10.1300/J461v03n02_02
- Tasker, F. L., and Golombok, S. (1997). *Growing Up in a Lesbian Family: Effects on Child Development*. New York: Guilford Press.
- The Sperm Bank of California (2019). *The Sperm Bank of California*. Available at: <https://www.thespermbankofca.org/content/history> (accessed September 6, 2019).

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2019 Gartrell, Rothblum, Koh, van Beusekom and Bos. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Desire for Parenthood in Context of Other Life Aspirations Among Lesbian, Gay, and Heterosexual Young Adults

Doyle P. Tate* and Charlotte J. Patterson*

Department of Psychology, University of Virginia, Charlottesville, VA, United States

OPEN ACCESS

Edited by:

Geva Shenkman,
Interdisciplinary Center Herzliya, Israel

Reviewed by:

Pedro Alexandre Costa,
University Institute of Psychological,
Social and Life Sciences, Portugal

Jorge Gato,
Fundação para a Ciência e
Tecnologia, Portugal

*Correspondence:

Doyle P. Tate
dpt2ac@virginia.edu
Charlotte J. Patterson
cjp@virginia.edu

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 08 October 2019

Accepted: 13 November 2019

Published: 28 November 2019

Citation:

Tate DP and Patterson CJ (2019)
Desire for Parenthood in Context
of Other Life Aspirations Among
Lesbian, Gay, and Heterosexual
Young Adults.
Front. Psychol. 10:2679.
doi: 10.3389/fpsyg.2019.02679

Research has established that sexual minority young adults generally report fewer desires and fewer expectations for parenthood than do their heterosexual peers. Little is known, however, about other desires and expectations. Is parenthood the only domain in which lesbian and gay individuals report fewer desires and expectations than their heterosexual peers? Or do lower aspirations among lesbian and gay adults about parenthood also occur in other domains, such as marriage and work? In this study, we explored a variety of desires and expectations for the future among lesbian, gay, and heterosexual young adults. Participants for this internet survey were recruited via social media, and included 368 childless cisgender young adults (211 lesbian or gay and 157 heterosexual) living in the United States. There were three main findings. First, while lesbian/gay individuals were less likely than heterosexual participants to express desire for parenthood, desires in the other future domains did not vary across sexual orientation. Lesbian/gay participants were as likely as heterosexual individuals to desire marriage, friendships, and community connections, as well as career and economic success. Results for expectations were, however, very different. Lesbian/gay participants were less likely than heterosexual individuals to expect that they would marry, become parents, feel connected to a community, achieve meaningful careers, live in their ideal housing, or that they would attain financial stability. Thus, although desires were largely unrelated to sexual orientation, many expectations were strongly linked to it. Lesbian and gay individuals were also far more likely than their heterosexual peers to desire future goals that they did not expect to achieve. Overall, for lesbian/gay young adults, low parenthood aspirations were part of a general pattern of low expectations (though not reduced desires) across a number of life domains.

Keywords: sexual orientation, parenthood, LGBTQ, parenting desires and intentions, aspirations (psychology)

INTRODUCTION

Research has established that lesbian and gay individuals report lower aspirations for parenthood than do heterosexual individuals (Patterson and Riskind, 2010; Riskind and Patterson, 2010; Baiocco and Laghi, 2013; Riskind and Tornello, 2017; Jeffries et al., 2019; Leal et al., 2019; Shenkman et al., 2019; Tate et al., 2019). As we use the term here, parenthood aspirations include: (1) parenthood desires, i.e., how much people want to become parents, (2) parenthood

expectations, i.e., how likely people think they are to become parents, and (3) parenthood intentions, i.e., whether people are planning to pursue parenthood (Gato et al., 2017; Tate and Patterson, 2019a). Lesbian and gay individuals in the United States (U.S.) report lower parenthood desires, expectations, and intentions than do heterosexual individuals (Riskind and Tornello, 2017; Tate and Patterson, 2019a). Little is known, however, about the generality of this finding. Is parenthood the only domain in which lesbian and gay individuals report fewer desires and expectations than their heterosexual peers? Or do lower desires and expectations among lesbian and gay adults about parenthood also extend to other domains, such as marriage and career? Furthermore, gaps between aspirations for parenthood as a function of sexual orientation have been found (Shenkman, 2012; Riskind and Tornello, 2017), but little is known about how desires and expectations may or may not coincide for other life goals as a function of sexual orientation. In this study, we explored a variety of future desires and expectations among lesbian, gay, and heterosexual young adults.

Lesbian and gay individuals typically have lower parenthood aspirations than heterosexual individuals, and scholars have studied reasons for this finding (Goldberg et al., 2007, 2012; Robinson and Brewster, 2014; Simon et al., 2018; Scandurra et al., 2019; Shenkman et al., 2019; Tate et al., 2019). Lesbian and gay people, both in the U.S. and abroad, face many more societal barriers that limit their access to parenthood than do most heterosexual individuals (Berkowitz and Marsiglio, 2007; Goldberg et al., 2007, 2012; Robinson and Brewster, 2014; Blake et al., 2017; Scandurra et al., 2019; Leal et al., 2019). Moreover, lesbian and gay individuals typically have more strained social relationships, particularly with their parents, than do heterosexual individuals, and this has been found to partially explain disparities in parenthood intentions (Tate et al., 2019). Similarly, Simon et al. (2018) found that lesbian women expressed a greater preference to be employed full-time and in a permanent position before pursuing parenthood than did heterosexual or bisexual women (Simon et al., 2018). In addition, Tate and Patterson (2019a) examined perceptions of social and economic costs involved with parenthood, and found that lesbian women report higher costs than did heterosexual women. Lesbian women's higher perceived costs explained some of the observed differences in parenthood desires, expectations, and intentions as a function of sexual orientation (Tate and Patterson, 2019a).

Moreover, some authors have reported discrepancies in family formation aspirations as a function of sexual orientation, particularly for men (Shenkman, 2012; Riskind and Tornello, 2017). For instance, Riskind and Tornello (2017) found that 20% of gay men reported desire for parenthood, but no intention to pursue parenthood. This difference occurred in only 5% of heterosexual men, 10% of heterosexual women, and 9% of lesbian women, and the majority of these groups reported both desires and intentions to pursue parenthood (Riskind and Tornello, 2017). In addition, Shenkman (2012) found that while 68% of sexual minority men in Israel reported strongly desiring parenthood, only 31% of those men expected to become parents. This finding also extended to couplehood, with 91% of single men strongly desiring couplehood, but only 43% of those men

expecting to find a meaningful relationship (Shenkman, 2012). Thus, there is evidence, at least for sexual minority men, that gaps between family formation desires and expectations may exist.

There has been some work to suggest that lesbian, gay, and heterosexual youth envision their futures in similar ways, particularly when it comes to marriage and parenthood (D'Augelli et al., 2008). Little is known, however, about how findings about future family formation might extend to other aspects of the future, such as finding a meaningful career or achieving financial stability. Frazier and Hooker (2006) reviewed how young adults envision their futures, and found that many young adults hope first to achieve educational goals, find ideal occupations, then marry, start families, and achieve financial success (Frazier and Hooker, 2006). In addition to these goals, many young adults hope to take on civic responsibilities, to find a congenial group of friends, and to manage a home (Hooker et al., 1996). Young adults also reported that they would be concerned if they did not achieve these goals, particularly personal, family, and material goals (Hooker et al., 1996; Frazier and Hooker, 2006).

When envisioning their future lives, lesbian and gay individuals may have more uncertainties than their heterosexual peers. Lesbian and gay individuals often experience heterosexist and gender harassment at work and can be fired from their jobs based on their sexual orientation in much of the U.S. (Rabelo and Cortina, 2014). Moreover, many states do not have housing protections for lesbian and gay individuals, and sexual minority individuals face housing discrimination throughout much of the country (Quartey, 2018). Hate crimes against lesbian and gay individuals have also sharply risen since 2016 (National Coalition of Anti-Violence Programs, 2018). Moreover, research has found that lesbian and gay individuals have less supportive family relationships than heterosexual individuals (Patterson et al., 2018; Tate and Patterson, 2019b). Thus, it seems possible that lesbian and gay individuals might have different expectations than their heterosexual peers about their future prospects.

This study explored desires and expectations for the future among lesbian, gay, and heterosexual young adults, with three main research questions:

- (1) How do desires for the future differ as a function of sexual orientation?
- (2) How do expectations for the future differ as a function of sexual orientation?
- (3) Are there differential gaps between future desires and expectations as a function of sexual orientation?

Based on earlier findings, we expected that desires for parenthood would be greater among heterosexual individuals than among lesbian and gay individuals (Riskind and Tornello, 2017; Tate and Patterson, 2019a). We expected that lesbian and gay individuals would report lower expectations for parenthood and other life achievements than would heterosexual individuals (Tate and Patterson, 2019a; Tate et al., 2019). Based on previous work (Shenkman, 2012; Riskind and Tornello, 2017), we expected that substantial gaps would exist between desires and expectations for the future, especially for lesbian and gay individuals.

MATERIALS AND METHODS

Participants

Participants were 368 childless cisgender individuals from the U.S. who were recruited via social media, including Facebook, Reddit, Twitter, and email listservs, and participated in an online survey. The data were collected over 2 months in the fall of 2018. The eligibility conditions for this survey were that individuals live in the U.S., be between 18 and 35 years of age, and have no children. The ages of 18–35 years were selected because we were interested in how early and young adults envision their futures, and we used measures designed for this age group (Frazier and Hooker, 2006). The sample was comprised of cisgender childless lesbian, gay, and heterosexual individuals (53 lesbian women, 158 gay men, 97 heterosexual women, and 60 heterosexual men). Sexual orientation was assessed via individuals' self-report about sexual identity. Participants were asked which of the following identities best fit them, "Heterosexual," "Bisexual," "Pansexual," "Lesbian/Gay," "Asexual," "Other: Please Specify." Only heterosexual, gay, and lesbian cisgender individuals were included in this study due to small sample sizes for other identities, especially among men. This study was approved by the Social and Behavioral Sciences Institutional Review board (IRB) at our institution.

Measures

Demographics

We assessed several demographic characteristics (Table 1). Age was self-reported by participants (in years). Race/ethnicity was coded into three categories: White ($n = 244$, 66%), multiracial ($n = 43$, 12%), and single-race racial/ethnic minority ($n = 81$, 22%). The single-race racial/ethnic minority category consisted of 27 (33%) Latino/Latina/Latinx participants, 25 (31%) individuals of East or South Asian descent, 24 (30%) African American individuals, and 4 (5%) people of other racial/ethnic identities. Education was assessed using a scale of 1 = "Less than a high school degree" to 8 = "Professional degree (MD or JD)." Finally, romantic relationship permanence was assessed by asking individuals the degree to which they thought that their relationships (if any) were permanent. Single people were coded as 0 and those in relationships were coded as 1 = "Almost no chance" to 5 = "Almost 100% chance."

Future Life Desires

Eight items were used to assess future life desires. Participants were asked to respond to the following question for a variety of life achievements, "Rate how much you DESIRE the following to describe you at the time you are 40 years old." Participants responded to the following prompts: (1) Be a parent, (2) be married, (3) be an active part of your local community, (4) be an active part of a friendly social group, (5) obtain educational goals, (6) have a meaningful job, (7) live in ideal housing, and (8) be financially stable. Participants could respond on a scale ranging from -2 = "Very undesired" to 2 = "Very desired" with 0 = "Neither desired nor undesired." Items were based on earlier research about future life desires in young adulthood, and we selected the age of 40 years because this age

TABLE 1 | Differences in demographic variables as a function of sexual orientation.

Demographics $n =$	Sexual orientation (S.O)					
	Heterosexual			Gay/Lesbian		
	Male (60)	Female (97)	Male (158)	Female (53)	Test statistics, χ^2	Test statistics, χ^2
Race						
% White (count)	61 (36)	65 (63)	70 (111)	64 (34)	$\chi^2 = 2.10$	$\chi^2 = 1.14$
% Multiracial (count)	15 (9)	8 (8)	11 (18)	15 (8)		
% Racial/ethnic minority (count)	24 (14)	27 (26)	19 (30)	21 (11)		
Education	3.70 (0.20)	3.25 (0.15)	4.37 (0.12)	4.72 (0.21)	$F = 38.37^{***}$	$F = 5.41^*$
Age (in years)	22.95 (0.65)	21.24 (0.51)	26.26 (0.40)	25.68 (0.69)	$F = 45.26^{***}$	$F = 0.95$
Relationship permanence	1.41 (0.21)	1.60 (0.16)	1.08 (0.13)	1.38 (0.22)	$F = 2.27$	$F = 0.09$
						$S.O = 0.10$ Inter. = 0.02
						$S.O = 0.11$ Gender = 0.01

Effect size for chi-squared analyses is ϕ and effect size for ANOVA analyses is reported as partial η^2 . Only effect sizes of significant results are shown. Education was assessed using a scale of 1 = "less than a high school degree" to 8 = "professional degree (MD or JD)." Romantic relationship permanence was assessed using 0 = "single" and 5 = "almost 100% chance relationship is permanent." * $p < 0.05$, *** $p < 0.001$.

was situated near the beginning of middle adulthood (Hooker et al., 1996; Frazier and Hooker, 2006). Considered as a group, these items had adequate internal reliability, $\alpha = 0.75$, and were correlated with one another, with the exception that parenthood and friendship desires which were not significantly correlated in pairwise comparisons (Table 2). Scores were averaged across items to create an overall Future Life Desire score, ranging from -2 to 2 , with higher scores representing greater desires.

Future Life Expectations

The desire items were also adapted to assess expectations. Participants were asked, "For the following statements, regardless of your desires, rate how LIKELY the following will describe you at the time you are 40 years old." Participants responded to the same prompts from above, but these items were scaled from $-2 =$ "Very unlikely" to $2 =$ "Very likely," with $0 =$ "Neither likely nor unlikely." These items showed an adequate internal reliability, $\alpha = 0.79$, and were significantly correlated with one another (Table 3). All eight scores were averaged across items to create a single overall scale for Future Life Expectations, ranging from -2 to 2 , with higher scores representing greater expectations.

Analyses

All statistical procedures were conducted using SPSS 26. Possible differences in demographics were assessed using analyses of variance (ANOVAs), or chi-square analyses (Table 1).

Heterosexual people reported younger ages than lesbian/gay individuals did, $p < 0.001$. Women reported younger ages than men did, $p = 0.048$. Heterosexual people also reported less education than did lesbian/gay people, $p < 0.001$; however, the difference in education between heterosexual men and women was less than the difference between gay men and lesbian women, $p = 0.025$ (Table 1). Because age and education varied as a function of sexual orientation, these were used as covariates in subsequent analyses. The race/ethnicity of the sample did not differ as a function of gender and sexual orientation, and no significant differences were found in relationship permanence as a function of gender and sexual orientation. Thus, race and relationship permanence were not included as covariates.

Multivariate analyses of covariance (MANCOVAs) were used to assess the differences in overall future life desires and expectations scores, and analyses of covariance (ANCOVAs) were used to assess overall scores and averaged scores as a function of gender and sexual orientation (Tables 4, 5 and Figure 1). All *post hoc* pairwise differences were assessed using the Sidak correction for multiple comparisons (Šidák, 1967).

Chi-square analyses were then conducted to analyze the proportion of people who reported future desires that were different from expectations for each individual item as a function of sexual orientation (Table 6). Items were matched for content, i.e., parenthood expectations and parenthood desires, for comparison. Those who scored above 0.5 for desires were coded as having the desire to achieve an outcome,

TABLE 2 | Means, standard deviations, and correlation matrix of future life desires.

Future life desires	M	SD	1	2	3	4	5	6	7	8
1. Parenthood	0.49	1.48	1							
2. Marriage	1.25	0.99	0.52***	1						
3. Community connection	0.82	0.92	0.23***	0.24***	1					
4. Friendships	1.38	0.82	0.02	0.21***	0.35***	1				
5. Education	1.48	0.90	0.18***	0.27***	0.29***	0.26***	1			
6. Meaningful career	1.77	0.67	0.22***	0.42***	0.23***	0.39***	0.49***	1		
7. Ideal housing	1.55	0.77	0.19***	0.32***	0.27***	0.25***	0.35***	0.56***	1	
8. Financial stability	1.82	0.65	0.14**	0.36***	0.19***	0.34***	0.47***	0.78***	0.61***	1
Age	24.32	5.47	-0.26***	-0.21***	-0.07	0.03	-0.19***	-0.02	-0.01	-0.02
Current education level	4.02	1.61	-0.16**	-0.09†	0.00	0.06	-0.14**	0.03	-0.04	0.05

† $p < 0.10$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

TABLE 3 | Means, standard deviations, and correlation matrix of future life expectations.

Future life expectations	M	SD	1	2	3	4	5	6	7	8
1. Parenthood	0.26	1.54	1							
2. Marriage	0.91	1.24	0.63***	1						
3. Community connection	0.50	1.09	0.32***	0.31***	1					
4. Friendships	0.94	0.97	0.21***	0.33***	0.49***	1				
5. Education	1.41	0.90	0.28***	0.31***	0.29***	0.26***	1			
6. Meaningful career	1.17	0.94	0.36***	0.45***	0.37***	0.35***	0.49***	1		
7. Ideal housing	0.96	1.00	0.31***	0.43***	0.35***	0.35***	0.37***	0.56***	1	
8. Financial stability	1.09	0.96	0.26***	0.36***	0.29***	0.26***	0.42***	0.59***	0.63***	1
Age	24.32	5.47	-0.38***	-0.24***	-0.06	0.03	-0.16**	-0.01	-10†	-0.05
Current education level	4.02	1.61	-0.21***	-0.07	0.03	0.05	0.04	0.08	-0.02	0.09

† $p < 0.10$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

TABLE 4 | Future life desires as a function of gender and sexual orientation.

Future life desires <i>n</i> =	Sexual orientation (S.O)		Gender		<i>F</i> _{S.O}	<i>F</i> _{Gender}	<i>F</i> _{Interaction}	Partial η^2
	Heterosexual (157)	Gay/Lesbian (211)	Male (218)	Female (158)				
Parenthood	0.94 (0.12)	0.09 (0.11)	0.65 (0.11)	0.38 (0.12)	25.06***	3.04†	0.28	S.O = 0.07
Marriage	1.34 (0.08)	1.17 (0.08)	1.25 (0.07)	1.25 (0.08)	2.13	<i>F</i> < 0.01	0.50	
Community connection	0.92 (0.08)	0.80 (0.08)	0.77 (0.07)	0.95 (0.08)	1.30	3.10†	0.11	
Friendships	1.31 (0.07)	1.46 (0.07)	1.29 (0.06)	1.48 (0.07)	2.49	3.92*	0.02	Gender = 0.01
Education	1.53 (0.08)	1.41 (0.07)	1.46 (0.07)	1.48 (0.08)	1.19	0.05	0.67	
Meaningful career	1.76 (0.06)	1.81 (0.06)	1.75 (0.05)	1.83 (0.06)	0.41	1.01	0.51	
Ideal housing	1.55 (0.07)	1.63 (0.06)	1.50 (0.06)	1.68 (0.07)	0.70	4.34*	2.74†	Gender = 0.01
Financial stability	1.76 (0.06)	1.90 (0.06)	1.80 (0.05)	1.87 (0.06)	3.21†	0.86	0.83	
Average score	1.39 (0.05)	1.28 (0.05)	1.31 (0.04)	1.36 (0.05)	2.39	0.79	0.01	

Results of MANCOVA are shown for the scale items preceding the results of the ANCOVA of the overall scale. Scale items are scored from -2 = "Very undesired" to 2 = "Very desired." Means are presented above standard errors. Models used age and education as covariates. Effect sizes only shown for significant results. Multivariate results were not significant for gender or interaction effects. †*p* < 0.10, **p* < 0.05, ****p* < 0.001.

TABLE 5 | Future life expectations as a function of gender and sexual orientation.

Future life expectations <i>n</i> =	Sexual orientation (S.O)		Gender		<i>F</i> _{S.O}	<i>F</i> _{Gender}	<i>F</i> _{Interaction}	Partial η^2
	Heterosexual (157)	Gay/Lesbian (211)	Male (218)	Female (158)				
Parenthood	1.01 (0.11)	-0.26 (0.11)	0.37 (0.10)	0.37 (0.11)	64.27***	<i>F</i> < 0.01	0.39	S.O = 0.15
Marriage	1.34 (0.10)	0.62 (0.09)	0.91 (0.09)	1.06 (0.10)	26.31***	1.42	0.13	S.O = 0.07
Community connection	0.71 (0.09)	0.41 (0.09)	0.47 (0.08)	0.65 (0.09)	5.05*	2.06	0.42	S.O = 0.01
Friendships	1.06 (0.08)	0.89 (0.08)	0.86 (0.07)	1.09 (0.08)	2.00	4.28*	0.01	Gender = 0.01
Education	1.50 (0.08)	1.34 (0.07)	1.39 (0.07)	1.46 (0.08)	2.17	0.45	0.16	
Meaningful career	1.37 (0.08)	1.03 (0.08)	1.12 (0.07)	1.27 (0.08)	9.05**	2.17	0.08	S.O = 0.02
Ideal housing	1.16 (0.08)	0.88 (0.08)	0.95 (0.08)	1.09 (0.09)	5.73*	1.57	0.90	S.O = 0.02
Financial stability	1.22 (0.08)	0.94 (0.08)	1.04 (0.71)	1.12 (0.08)	6.31*	0.58	3.61†	S.O = 0.02
Average score	1.17 (0.06)	0.73 (0.06)	0.89 (0.05)	1.01 (0.06)	28.75***	2.68	0.01	S.O = 0.07

Results of MANCOVA are shown for the scale items preceding the results of the ANCOVA of the overall scale. Scale items are scored from -2 = "Very unlikely" to 2 = "Very likely." Means are presented above standard errors. Models used age and education as covariates. Effect sizes only shown for significant results. Multivariate results were not significant for gender or interaction effects. †*p* < 0.10, **p* < 0.05, ***p* < 0.01, ****p* < 0.001.

while those who reported <0.5 were coded as not desiring to achieve an outcome. Participants who scored >0.5 on expectations were coded as having the expectation to achieve an outcome, while those who scored <0.5 were coded as not expecting to achieve an outcome. The value 0.5 was selected because the average scores for overall desires and expectations produced values between 0 and 1, and values <0.5 would round to 0 and those >0.5 would round to 1. A more constrictive cutoff value equaling 0 was also examined, and revealed similar results as the 0.5 cutoff (Table 6). For individual items, however, both scoring methods meant that those who scored above 0 were coded as desiring or expecting outcomes.

Using this coding scheme, four groups emerged: (1) those who desired and expected to achieve an outcome, (2) those who did not desire and did not expect to achieve an outcome, (3) those who desired, but did not expect to achieve an outcome, and (4) those who expected, but did not desire to achieve an outcome. Differences in the proportion of individuals in these groups were examined as a function of sexual orientation. Fisher's exact tests were used when at least one cell had an expected count lower than five participants.

Preliminary Analyses

Age and education were significantly correlated with desires and expectations for the future (Tables 2, 3). Older participants reported fewer desires for parenthood, marriage, and education, $p < 0.001$ for all. Higher education levels were associated with lower desires for parenthood, $p = 0.002$, and lower desires to obtain further educational achievement, $p = 0.006$. Older participants also reported lower expectations for parenthood, $p < 0.001$, marriage, $p < 0.001$, and educational achievement, $p = 0.003$. Having more education was also associated with lower expectations for parenthood, $p < 0.001$.

RESULTS

We report the results in three sections. We report first on desires for the future, then on expectations for the future, and finally on gaps between future desires and expectations.

Desires for the Future

Multivariate analyses found a significant result for sexual orientation when assessing the items about future desires, Wilks'

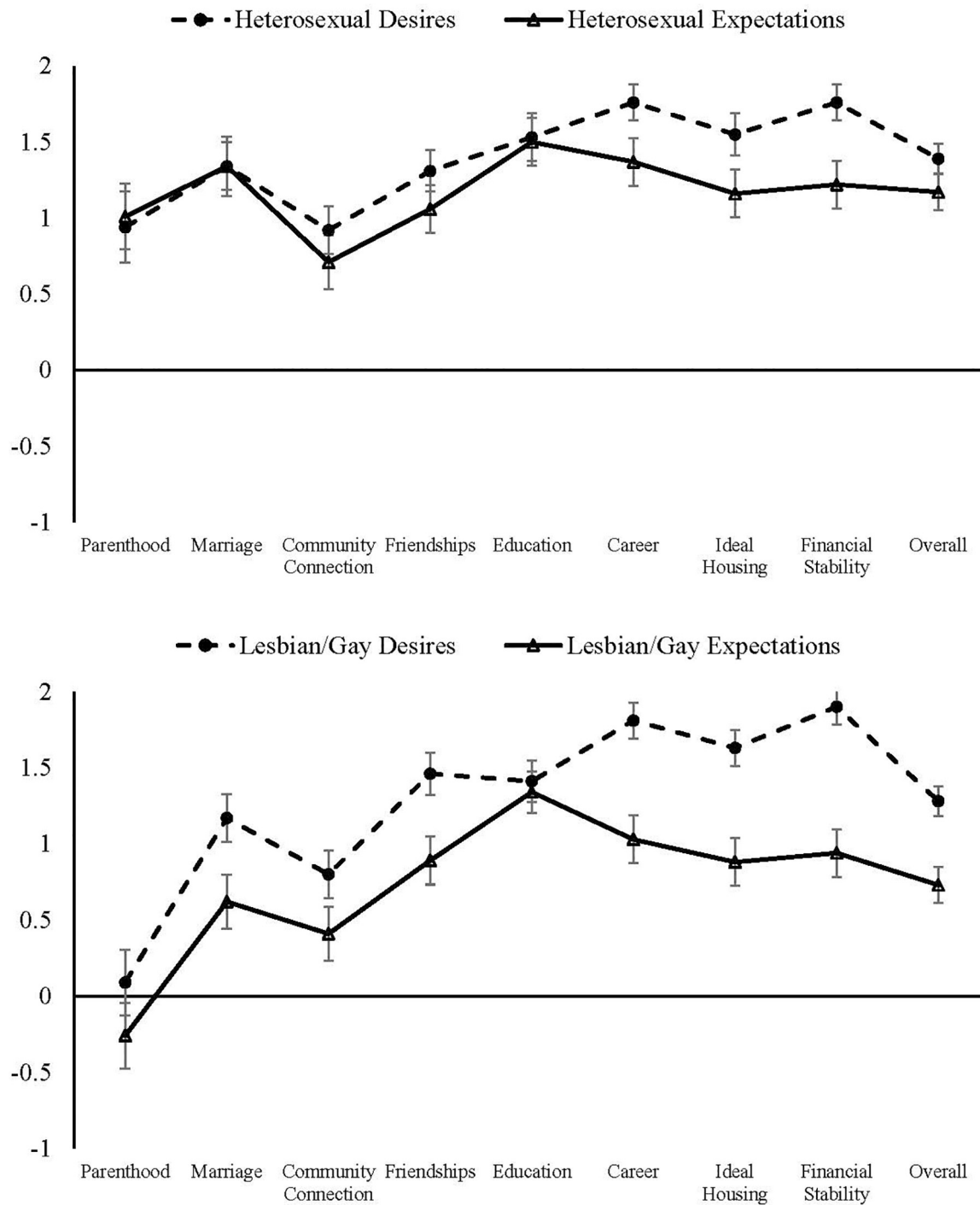


FIGURE 1 | Desires and expectations for the future separated by sexual orientation. 2 represents either "Very desired" or "Very likely," 0 represents either "Not desired nor undesired" or "Not likely nor unlikely," and -1 represents either "Somewhat undesired" or "Somewhat unlikely." Bars represent 95% CIs, and lines connecting outcomes are shown for visualization purposes only.

Lambda = 0.90, $F(8,355) = 4.76$, $p < 0.001$, partial $\eta^2 = 0.10$ (Table 4). Univariate analyses revealed only one difference as a function of sexual orientation, and that was for parenthood desires, $F(1,362) = 25.06$, $p < 0.001$. As expected, lesbian/gay

individuals reported less desire to pursue parenthood than did heterosexual participants, $p < 0.001$. However, no univariate difference in the average score for future desires was found as a function of gender or sexual orientation. Multivariate tests

TABLE 6 | Desire-expectations disparity proportions as a function of sexual orientation.

	Heterosexual (%)	Lesbian/Gay (%)	χ^2	Phi
Parenthood			82.75***	0.47
Desired and expected	70 ^a	26 ^b		
Not desired and not expected	20 ^a	50 ^b		
Desired, but not expected	3 ^a	20 ^b		
Expected, but not desired	7 ^a	4 ^a		
Marriage			57.49***	0.40
Desired and expected	80 ^a	48 ^b		
Not desired and not expected	8 ^a	22 ^b		
Desired, but not expected	3 ^a	26 ^b		
Expected, but not desired	8 ^a	4 ^a		
Community connection			7.41 [†]	0.14
Desired and expected	59 ^a	44 ^b		
Not desired and not expected	22 ^a	31 ^a		
Desired, but not expected	14 ^a	18 ^a		
Expected, but not desired	5 ^a	7 ^a		
Friendships			8.56*	0.15
Desired and expected	75 ^a	69 ^a		
Not desired and not expected	11 ^a	8 ^a		
Desired, but not expected	10 ^a	21 ^b		
Expected, but not desired	4 ^a	2 ^a		
Education			13.49**	0.19
Desired and expected	89 ^a	73 ^b		
Not desired and not expected	3 ^a	9 ^b		
Desired, but not expected	4 ^a	8 ^a		
Expected, but not desired	5 ^a	9 ^a		
Meaningful career			16.43***	0.21
Desired and expected	87 ^a	76 ^b		
Not desired and not expected	3 ^a	0 ^b		
Desired, but not expected	9 ^a	22 ^b		
Expected, but not desired	2 ^a	1 ^a		
Ideal housing			12.59**	0.19
Desired and expected	83 ^a	68 ^b		
Not desired and not expected	5 ^a	5 ^a		
Desired, but not expected	10 ^a	23 ^b		
Expected, but not desired	2 ^a	4 ^a		
Financial stability			11.86**	0.18
Desired and expected	82 ^a	73 ^a		
Not desired and not expected	3 ^a	0 ^b		
Desired, but not expected	13 ^a	25 ^b		
Expected, but not desired	2 ^a	2 ^a		
Overall future aspirations ¹			24.49***	0.25
Desired and expected	89 ^a	68 ^b		
Not desired and not expected	3 ^a	4 ^a		
Desired, but not expected	7 ^a	26 ^b		
Expected, but not desired	2 ^a	2 ^a		
Overall future aspirations ²			27.75***	0.26
Desired and expected	94 ^a	83 ^b		
Not desired and not expected	3 ^a	0 ^b		
Desired, but not expected	2 ^a	16 ^b		
Expected, but not desired	2 ^a	1 ^a		

Fisher's exact test used when at least one cell had an expected count lower than five participants. Different letters denote significant differences. ¹Overall future aspirations using 0.5 as a cutoff value. ²Overall future aspirations using 0 as a cutoff value. [†] $p < 0.10$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

for gender and the interactions between gender and sexual orientation did not show significant findings. Univariate results showed that women reported greater desires for friendships, $F(1,362) = 3.92$, $p = 0.048$, and to live in ideal housing, $F(1,362) = 4.34$, $p = 0.038$, than did men, but these results should be viewed with caution, in light of non-significant multivariate findings.

Expectations for the Future

Multivariate analyses revealed a significant main effect for sexual orientation on future expectations, Wilks' Lambda = 0.85, $F(8,355) = 8.10$, $p < 0.001$, partial $\eta^2 = 0.15$ (Table 5). Univariate analyses revealed differences as a function of sexual orientation in expectations for parenthood, $F(1,362) = 64.27$, $p < 0.001$; marriage, $F(1,362) = 26.31$, $p < 0.001$; community connection, $F(1,362) = 5.05$, $p = 0.025$; meaningful career, $F(1,362) = 9.05$, $p = 0.003$; housing, $F(1,362) = 5.73$, $p = 0.017$; and financial stability, $F(1,362) = 6.31$, $p = 0.012$. Lesbian/gay participants reported lower expectations for parenthood, $p < 0.001$; marriage, $p < 0.001$; community connection, $p = 0.025$; meaningful careers, $p = 0.003$; housing, $p = 0.017$; and financial stability, $p = 0.012$, than did heterosexual individuals. When assessing the average score for future expectations, lesbian/gay individuals reported lower future expectations than did heterosexual individuals, $F(1,362) = 28.75$, $p < 0.001$. Multivariate tests found no significant effects for gender or for the interactions between gender and sexual orientation. Univariate analyses found that women expected to have friendships more than did men, $F(1,362) = 4.34$, $p = 0.039$, but this result should be viewed with caution, in light of the non-significant multivariate test.

Gaps Between Desires and Expectations

We also found significant gaps between desires and expectations for the future as a function of sexual orientation (Table 6 and Figure 1). Chi-square analyses indicated significant gaps in aspirations for the future overall, $\chi^2 = 24.49$, $p < 0.001$, $\phi = 0.25$. More specifically, differences between desires and expectations emerged for parenthood, $\chi^2 = 2.75$, $p < 0.001$, $\phi = 0.47$; marriage, $\chi^2 = 57.49$, $p < 0.001$, $\phi = 0.40$; friendships, $\chi^2 = 8.56$, $p = 0.033$, $\phi = 0.15$; education, $\chi^2 = 13.49$, $p = 0.004$, $\phi = 0.19$; meaningful career, $\chi^2 = 16.43$, $p < 0.001$, $\phi = 0.21$; ideal housing, $\chi^2 = 12.59$, $p = 0.006$, $\phi = 0.19$; and financial stability, $\chi^2 = 11.86$, $p = 0.005$, $\phi = 0.18$.

A greater proportion of lesbian and gay individuals (26%) than heterosexual individuals (7%) reported desiring overall future outcomes, but not expecting to achieve them, $p < 0.001$. When assessing individual aspirations for the future, a greater proportion of lesbian and gay individuals than heterosexual individuals reported desiring, but not expecting to achieve parenthood, $p < 0.001$; marriage, $p < 0.001$; friendships, $p = 0.007$; meaningful careers, $p < 0.001$; ideal housing, $p = 0.002$; and financial stability, $p = 0.008$.

A greater proportion of heterosexual individuals (89%) than lesbian and gay individuals (68%) reported that their expectations for overall future outcomes matched their desires, $p < 0.001$. More heterosexual individuals than lesbian and gay individuals reported both desires and expectations for parenthood, $p < 0.001$,

marriage, $p < 0.001$, education, $p < 0.001$, meaningful careers, $p = 0.014$, and ideal housing, $p = 0.001$.

Moreover, a greater proportion of lesbian and gay individuals than heterosexual individuals reported neither desiring nor expecting parenthood, $p < 0.001$; marriage, $p < 0.001$; or educational achievement, $p = 0.019$. There were no significant differences in the proportions of those who reported expectations for the future, but not desires as a function of sexual orientation.

DISCUSSION

This study examined how lesbian, gay, and heterosexual young adults envision their futures. Much of the existing research focused on disparities in aspirations about future family formation (Patterson and Riskind, 2010; Riskind and Patterson, 2010; Baiocco and Laghi, 2013; Gato et al., 2017; Riskind and Tornello, 2017; Simon et al., 2018; Jeffries et al., 2019; Tate et al., 2019). Whether or not such disparities extended to other aspirations for the future has received less study. We explored a variety of desires and expectations for the future among lesbian, gay, and heterosexual young adults to assess potential disparities as a function of sexual orientation.

As expected, lesbian and gay individuals were more likely than heterosexual individuals to report lower desire and fewer expectations for parenthood (Baiocco and Laghi, 2013; Gato et al., 2017; Riskind and Tornello, 2017; Simon et al., 2018; Tate et al., 2019). In addition, lesbian and gay individuals were also more likely than their heterosexual counterparts to report lower expectations for marriage, community connection, meaningful employment, housing, and financial stability. These findings are consistent with our prediction that negative expectations for the future encompass multiple aspects of life among lesbian and gay young adults.

Apart from parenthood, desires for the future did not differ as a function of gender or sexual orientation. Lesbian and gay young adults hoped lead lives very much like those envisioned by their heterosexual counterparts. Previous research has found that lesbian and gay youth envision family formation very much as do heterosexual individuals (D'Augelli et al., 2008). Our study extended this finding by showing that lesbian and gay young adults also hope for other life outcomes, such as financial stability, that are similar to those that heterosexual individuals envision.

As expected, lesbian and gay individuals were more likely than heterosexual peers to want future outcomes that they did not expect to achieve. A disparity between desires and expectations for the future has been found repeatedly for aspects of family formation (Shenkman, 2012; Riskind and Tornello, 2017), but our results showed that disparities in desires and expectations for the future are much more widespread across outcomes. The largest effect sizes found for disparities between desires and expectations were in marriage and parenthood, but significant disparities also emerged in other domains.

These findings have significant implications for our understanding of family formation. Much of the work on parenthood aspirations has focused only on parenthood (Baiocco and Laghi, 2013; Gato et al., 2017; Riskind and Tornello, 2017;

Leal et al., 2019; Tate et al., 2019). Our findings suggest that disparities in family formation may be only one part of a larger issue. Research has shown that envisioning a hoped-for future that one believes to be out of reach has negative effects on mental health (Frazier and Hooker, 2006). The current results reveal that lesbian and gay young adults are far more likely than their heterosexual peers to hope for futures that they do not think they can achieve. Thus, our findings may underlie some known health disparities as a function of sexual orientation (National Institutes of Health, 2016; Patterson et al., 2018; Tate and Patterson, 2019b). Future work should examine the possible associations of such discrepancies with mental and physical health.

Moreover, the connections between disparities in parenthood aspirations and other future life aspirations as a function of sexual orientation need to be examined. For instance, differences in social networks seem to explain part of the disparities between lesbian/gay and heterosexual parenthood aspirations (Simon et al., 2018; Tate and Patterson, 2019a; Tate et al., 2019). In addition, disparities in aspirations about marriage may also help to explain part of the disparities in aspirations about parenthood. Parenthood tends to be normalized for heterosexual people within marriage (Ashburn-Nardo, 2017), but whether or not this is true for sexual minorities needs more investigation. Future work should examine how differences in other future aspirations could help account for differences in parenthood aspirations as a function of sexual orientation.

While this research had strengths and produced novel findings, it was not without limitations. For instance, while desires and expectations for the future were examined, intentions to pursue these future life outcomes were not studied here. Also, beliefs of those with plurisexual identities could not be examined due to small sample sizes. In addition, and also due to sample size constraints, comparisons among racial groups were not possible. Data were collected over social media, so the degree to which

these results are representative of the population of lesbian, gay, or heterosexual individuals could not be assessed. Also, the study employed a cross-sectional design, so causal influences could not be identified. Even so, the study produced valuable new information.

In all, for lesbian and gay young adults, low parenthood aspirations were part of a general pattern of low expectations, though not reduced desires, across a number of life domains. Lesbian, gay, and heterosexual young adults seem to be hoping for similar futures, but expecting vastly different outcomes from one another. These findings thus have significant implications not only in understanding the LGBT family life course, but also for work on mental and physical health disparities that impact the lives of lesbian and gay people.

DATA AVAILABILITY STATEMENT

The datasets generated for this study will not be made publicly available. Requests for datasets should be sent to the first author.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the University of Virginia Institutional Review Board. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

Both authors listed have made a substantial, direct and intellectual contribution to the work, and approved it for publication.

REFERENCES

- Ashburn-Nardo, L. (2017). Parenthood as a moral imperative? moral outrage and the stigmatization of voluntarily childfree women and men. *Sex Roles* 76, 393–401. doi: 10.1007/s11199-016-0606-1
- Baiocco, R., and Laghi, F. (2013). Sexual orientation and the desires and intentions to become parents. *J. Fam. Stud.* 9, 90–98. doi: 10.5172/jfs.2013.19.1.90
- Berkowitz, D., and Marsiglio, W. (2007). Gay men negotiating procreative, father, and family identities. *J. Marriage Fam.* 69, 366–381. doi: 10.1111/j.1741-3737.2007.00371.x
- Blake, L., Carone, N., Raffanello, E., Slutsky, J., Ehrhardt, A. A., and Golombok, S. (2017). Gay fathers' motivations for and feelings about surrogacy as a path to parenthood. *Hum. Reprod.* 32, 1–8. doi: 10.1093/humrep/dex026
- D'Augelli, A. R., Rendina, H. J., and Sinclair, K. O. (2008). Gay and lesbian youth want long-term couple relationships and raising children. *J. LGBT Issues Couns.* 1, 77–98.
- Frazier, L. D., and Hooker, K. (2006). "Possible selves in adult development: linking theory and research," in *Possible Selves: Theory, Research and Application*, eds C. K. Dunkel, and J. Kerpelman (New York, NY: Nova Science Publishers), 41–59.
- Gato, J., Santos, S., and Fontaine, A. M. (2017). To have or not to have children? that is the question. factors influencing parental decisions among lesbians and gay men. *Sex Res. Soc. Policy* 14, 310–323. doi: 10.1007/s13178-016-0268-3
- Goldberg, A. E., Downing, J. B., and Moyer, A. M. (2012). Why parenthood, and why now? gay men's motivations for pursuing parenthood. *Interdiscip. J. Appl. Fam. Stud.* 61, 157–174. doi: 10.1111/j.1741-3729.2011.00687.x
- Goldberg, A. E., Downing, J. B., and Sauck, C. C. (2007). Choices, challenges, and tensions: perspectives of lesbian prospective adoptive parents. *Adopt. Q.* 10, 33–64. doi: 10.1300/J145v10n02_02
- Hooker, K., Fiese, B. H., Jenkins, L., Morfei, M. Z., and Schwagler, J. (1996). Possible selves among parents of infants and preschoolers. *Develop. Psychol.* 32, 542–550. doi: 10.1037/0012-1649.32.3.542
- Jeffries, W. L., Marsiglio, W., Tunali, O., and Berkowitz, D. (2019). Fatherhood desires and being bothered by future childlessness among U.S. Gay, bisexual, and heterosexual men—United States, 2002–2015. *J. GLBT Fam. Stud.* 1–16. doi: 10.1080/1550428X.2019.1652876
- Leal, D., Gato, J., and Tasker, F. (2019). Prospective parenting: sexual identity and intercultural trajectories. *Cult. Health Sex* 21, 757–773. doi: 10.1080/13691058.2018.1515987
- National Coalition of Anti-Violence Programs (2018). *A Crisis of Hate: A Report on Homicides Against Lesbian, Gay, Bisexual and Transgender People*. Available at: <http://avp.org/wp-content/uploads/2018/01/a-crisis-of-hate-january-release-12218.pdf> (accessed September 1, 2019).
- National Institutes of Health (2016). *Sexual and Gender Minorities Formally Designated as a Health Disparity Population for Research Purposes*. Available at: <https://www.nlm.nih.gov/about/directors-corner/message.html> (accessed September 1, 2019).

- Patterson, C. J., and Riskind, R. G. (2010). To be a parent: issues in family formation among gay and lesbian adults. *J. GLBT Fam. Stud.* 6, 326–340. doi: 10.1080/1550428X.2010.490902
- Patterson, C. J., Tate, D. P., Sumontha, J., and Xu, R. (2018). Sleep difficulties among sexual minority adults: associations with family relationship problems. *Psychol. Sex Orientat. Gen. Divers.* 5, 109–116. doi: 10.1037/sgd0000264
- Quartey, N. (2018). *Corporate Activism in the Age of LGBT Equality: The Promise and Limitations of the Modern Executive Champion on LGBT Rights*. Available at: <https://search.proquest.com/docview/2128056976?accountid=14678> (accessed September 1, 2019).
- Rabelo, V. C., and Cortina, L. M. (2014). Two sides of the same coin: gender harassment and heterosexist harassment in LGBQ work lives. *Law Hum. Behav.* 38, 378–391. doi: 10.1037/lhb0000087
- Riskind, R. G., and Patterson, C. J. (2010). Parenting intentions and desires among childless lesbian, gay, and heterosexual individuals. *J. Fam. Psychol.* 24, 78–81. doi: 10.1037/a0017941
- Riskind, R. G., and Tornello, S. L. (2017). Sexual orientation and future parenthood in a 2011–2013 nationally representative United States sample. *J. Fam. Psychol.* 31, 792–798. doi: 10.1037/fam0000316
- Robinson, M. A., and Brewster, M. E. (2014). Motivations for fatherhood: examining internalized heterosexism and gender-role conflict with childless gay and bisexual men. *Psychol. Men Masc.* 15, 49–59. doi: 10.1037/a0031142
- Scandurra, C., Bacchini, D., Esposito, C., Bochicchio, V., Valerio, P., and Amodeo, A. L. (2019). The influence of minority stress, gender, and legalization of civil unions on parenting desire and intention in lesbian women and gay men: implications for social policy and clinical practice. *J. GLBT Fam. Stud.* 15, 76–100. doi: 10.1080/1550428X.2017.1410460
- Shenkman, G. (2012). The gap between fatherhood and couplehood desires among Israeli gay men and estimations of their likelihood. *J. Fam. Psychol.* 26, 828–832. doi: 10.1037/a0029471
- Shenkman, G., Bos, H., and Kogan, S. (2019). Attachment avoidance and parenthood desires in gay men and lesbians and their heterosexual counterparts. *J. Reprod. Infant Psychol.* 37, 344–357. doi: 10.1080/02646838.2019.1578872
- Šidák, Z. K. (1967). Rectangular confidence regions for the means of multivariate normal distributions. *J. Am. Stat. Assoc.* 62, 626–633. doi: 10.1080/01621459.1967.10482935
- Simon, K. A., Tornello, S. L., Farr, R. H., and Bos, H. M. W. (2018). Envisioning future parenthood among bisexual, lesbian, and heterosexual women. *Psychol. Sex Orientat. Gen. Divers.* 5, 253–259. doi: 10.1037/sgd0000267
- Tate, D. P., and Patterson, C. J. (2019a). Sexual minority women's attitudes toward infants, children, and parenthood. *J. Lesbian Stud.* 23, 464–475. doi: 10.1080/10894160.2019.1629807
- Tate, D. P., and Patterson, C. J. (2019b). Sexual orientation, relationships with parents, stress, and depressive symptoms among adults. *J. GLBT Fam. Stud.* 15, 256–271. doi: 10.1080/1550428X.2018.1486263
- Tate, D. P., Patterson, C. J., and Levy, A. J. (2019). Predictors of parenting intentions among childless lesbian, gay, and heterosexual adults. *J. Fam. Psychol.* 33, 194–202. doi: 10.1037/fam0000499

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2019 Tate and Patterson. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Division of Labor Among Transgender and Gender Non-binary Parents: Association With Individual, Couple, and Children's Behavioral Outcomes

Samantha L. Tornello*

Human Development and Family Studies, Pennsylvania State University, University Park, PA, United States

OPEN ACCESS

Edited by:

Geva Shenkman,
Interdisciplinary Center Herzliya, Israel

Reviewed by:

Damien W. Riggs,
Flinders University, Australia
Fernando Salinas-Quiroz,
National Pedagogic University, Mexico

*Correspondence:

Samantha L. Tornello
slt35@psu.edu

Specialty section:

This article was submitted to
Developmental Psychology,
a section of the journal
Frontiers in Psychology

Received: 09 November 2019

Accepted: 07 January 2020

Published: 23 January 2020

Citation:

Tornello SL (2020) Division
of Labor Among Transgender
and Gender Non-binary Parents:
Association With Individual, Couple,
and Children's Behavioral Outcomes.
Front. Psychol. 11:15.
doi: 10.3389/fpsyg.2020.00015

The division of unpaid labor is an important aspect in understanding co-parenting dynamics, along with individual well-being, couple functioning, and family dynamics. This study explores the division of household and childcare unpaid labor, well-being, relationship functioning, and child behavioral outcomes in 163 transgender and gender non-binary (TGNB) parents. Research exploring the division of labor among cisgender heterosexual couples has found that cisgender women in heterosexual couples disproportionately conduct more of the household and childcare labor (e.g., Lachance-Grzela and Bouchard, 2010). In addition, among heterosexual (e.g., Lachance-Grzela and Bouchard, 2010) and same-sex couples (Tornello et al., 2015b), discrepancies in the division of unpaid labor has been associated with individual well-being, along with couple functioning. We know very little about the factors that predict how labor is divided, along with the impact these arrangements among of families headed by TGNB parents. In this study, TGNB parents reported dividing their household and childcare labor in an egalitarian fashion and wanted to divide their labor in that way. The gender of participants, gender design of the couple, educational attainment, and legal status of the couple's relationship were not associated with the division of unpaid labor. In contrast, participants who reported making a lower proportion of the household income, worked less hours in paid employment, and were genetically related to their eldest child, reported completing significantly more childcare-related tasks, but not household labor. Using multiple regressions, participants' genetic relatedness to their eldest child was the only significant predictor of performing greater unpaid childcare labor. Lastly, discrepancies in the household, but not childcare labor, predicted parental well-being and couple functioning. The division of labor among TGNB couples was unrelated to their child behavior outcomes. This study not only sheds light on the dynamics of TGNB-headed families, but also additional factors that influence the division of unpaid labor and how this division affects individuals within the family system.

Keywords: transgender, division of labor, parents, relationship satisfaction, child behavior

INTRODUCTION

Division of labor is typically defined as who performs the unpaid household (e.g., washing dishes, cleaning the house, doing laundry) and childcare (e.g., feeds the child, gets up with the child at night, and does homework with a child) tasks (Cowan and Cowan, 1992). How a couple divides their unpaid labor is essential for understanding couple and co-parenting dynamics (e.g., Cowan and Cowan, 1992; Coltrane, 2000; Lachance-Grzela and Bouchard, 2010). For cisgender heterosexual couples, household and childcare labor is typically specialized, with cisgender women doing disproportionately more of the unpaid labor, especially childcare, and men engaging in more paid labor outside the home (e.g., Coltrane, 2000; Lachance-Grzela and Bouchard, 2010). In contrast, for same-sex couples, the division of unpaid labor is reported to be much more egalitarian in nature (e.g., Goldberg et al., 2012; Farr and Patterson, 2013; Tornello et al., 2015a; Bauer, 2016; Brewster, 2017). Across all couples, it is not the actual division of unpaid labor that is associated with individual, couple, and child outcomes, but instead their satisfaction with how these tasks are performed (e.g., Coltrane, 2000; Lachance-Grzela and Bouchard, 2010; Tornello et al., 2015b). Extensive research has examined the division of labor in cisgender heterosexual couples, with a growing area of work exploring these dynamics among same-sex or sexual minority couples.

We know very little about family and relationship dynamics of couples where one or more members identifies as transgender and gender non-binary (TGNB), specifically their division of labor (for exceptions see Pfeffer, 2010; Kelly and Hauck, 2015). TGNB people are typically described as people whose gender differs from what is normatively expected of their sex assigned at birth (American Psychological Association, 2015). Approximately, between 0.3 and 0.6% of the United States population identifies as transgender, although this is likely a great underestimate (Flores et al., 2016; Meervijk and Sevelius, 2017) due a lack of questions on inclusion and standardization of gender identity and sex assigned at birth in research studies. Related, we do not know how many TGNB people are parents, but researchers estimate that between 18 and 50% of TGNB people are currently parents (Grant et al., 2011; Stotzer et al., 2014; James et al., 2016), with an increasing number of individuals who wish to become parents in the future (Light et al., 2017). The purpose of this study is to explore the division of household and childcare labor among TGNB parents, along with examining the factors that predict how these couples divide responsibilities and tasks, and the impact this division has on individual, couple, and child functioning.

As stated prior, for cisgender heterosexual couples, household and childcare labor is typically specialized based on gender, with cisgender women doing more of the unpaid labor, especially childcare labor, and men doing more of the paid labor outside the home (e.g., Coltrane, 2000; Lachance-Grzela and Bouchard, 2010). In contrast, sexual minority (or same-sex) couples report dividing their household and childcare labor in a more egalitarian way compared to their heterosexual peers (e.g., Goldberg et al., 2012; Farr and Patterson, 2013; Tornello et al., 2015b;

Bauer, 2016; Brewster, 2017). We know that TGNB people conceptualize their sexual identity differently than cisgender identified people (Nagoshi et al., 2012; Galupo et al., 2016) and often see gender and gender role expectations as more fluid (Nagoshi et al., 2012). The ways in which cisgender heterosexual couples divide their unpaid labor are often shaped by gender constructions and roles (Erickson, 2005). Same-sex couples, on the other hand, seem to assign these tasks based on personal preferences and negotiation rather than gender (Kurdek, 2007). For TGNB people, is the division of unpaid labor based on gender role assumptions or couple gender design? To understand the factors that influence the division of unpaid labor among TGNB people, three major theories will be explored: relative resource theory (income and education), time-constraint theory (hours in paid employment), and life course theory (relationship status, length of relationship, and family design). Next, I will briefly describe each theory and review relevant literature in this area.

Relative Resource Theory

According to relative resource theory, unpaid labor is divided based on the amount of resources, specifically the level of education and income each member of the couple brings to the relationship (Blood and Wolfe, 1960). In other words, the partner with higher educational attainment and individual income will perform less household and childcare labor. There is support for the relative resource theory among heterosexual couples: cisgender women typically report lower educational attainment and income compared to their partners, and in turn, perform more of the unpaid labor (e.g., Bianchi et al., 2000). Among sexual and gender minority couples, the research support for relative resource theory is mixed.

Among a sample of lesbian, gay, and heterosexual adoptive parents, partners reporting greater income disparities also reported greater incongruences in feminine-related household tasks (such as washing dishes or laundry as opposed to lawn or car maintenance) across all couple types (Goldberg et al., 2012). Related, in a study of 9 men and 40 women in same-sex relationships with school-aged children, partners who reported lower educational attainment, along with lower individual incomes, performed more of the school-related childcare tasks (Sutphin, 2013). In addition, Patterson et al. (2004) found that discrepancies in education, but not income, predicted who performed unpaid childcare labor among lesbian couples. In contrast, among childfree lesbian, gay, and heterosexual couples, Kurdek (1993) found support for the relative resource theory among heterosexual – but not gay and lesbian – couples. Related, for cisgender gay fathers, income and educational attainment did not predict the allocation of household or childcare labor (Tornello et al., 2015b). In all, relative resource theory seems to apply in same sex couples more often to childcare, but not household labor, although these results have not been consistent.

The majority of this work has focused on same-sex and/or sexual minority couples, with very little research exploring the experiences of TGNB couples. To date, only one study has explored the division of labor in TGNB couples as it relates to relative resources of the partners. In this qualitative study of 30

couples, income did play a role in the division of their unpaid labor, but it was not the strongest determinant (Kelly and Hauck, 2015). It is important to note that this study was qualitative in nature. It also consisted of a small sample, most were not parents and they did not examine the role of couple gender design (Kelly and Hauck, 2015). Findings regarding relative resource theory among sexual and gender minority couples is quite mixed, with very limited work exploring the experiences of TGNB couples. The principles of time-constraint theory have had more consistent support.

Time-Constraint Theory

According to the time-constraint theory, the partner who works more hours in paid employment participates less in unpaid household and childcare labor (Presser, 1994; Silver and Goldscheider, 1994). A number of studies have found support for the time-constraint theory among heterosexual, gay, and lesbian cisgender couples (Patterson et al., 2004; Goldberg et al., 2012; Tornello et al., 2015b). In a study of gay fathers, when controlling for relative resources (e.g., income and education) of the couple as well as life course factors (e.g., length of relationship and family design), hours in paid employment was the only predictor of household division of labor. The results for childcare labor were much more complicated, but time in paid employment was still a large predictor in how much each partner contributed (Tornello et al., 2015b). In a study exploring the experiences of women in same-sex couples through the transition to parenthood, researchers found that genetic mothers did slightly more of the childcare, especially if they were working fewer hours in paid employment (Goldberg and Perry-Jenkins, 2007). There has been consistent support for time-constraint theory among all couple types, regardless of sexual or gender identity; therefore, it is hypothesized that the partner who works more hours outside the home in paid employment will perform less household and childcare tasks.

Life Course Theory

Life course theory is the idea that experiences or decisions across the life course can impact or alter later development (Elder, 1998). As it relates to division of labor, life course theory has examined the ways in which relationship status, length of relationship, and family design can affect how couples designate their unpaid labor (e.g., Baxter et al., 2008; Grunow et al., 2012; Yavorsky et al., 2015; Bauer, 2016). Among cisgender heterosexual couples, the specialization of unpaid labor increases the longer the couple remains in a relationship, as well as when the couple becomes parents (e.g., Baxter et al., 2008; Grunow et al., 2012; Yavorsky et al., 2015). Findings were mixed for cisgender lesbian and gay couples (Kurdek, 2005; Tornello et al., 2015b; Bauer, 2016).

In a review, Kurdek (2005) proposed that same-sex couples who have been together longer would be more specialized in their division of unpaid labor. This was confirmed in an international study exploring the association between relationship length and division of labor, in which researchers found that the longer a couple was together, the more specialized the division of unpaid labor was (Bauer, 2016). This was less pronounced among

men in same-sex couples (Bauer, 2016). In contrast, in a study discussed prior, relationship length among cisgender gay fathers was not predictive of how they divided their unpaid labor (Tornello et al., 2015b). These variations may be due to stronger associations between relationship length and parenthood in cisgender heterosexual couples. As a result, those in longer romantic relationships are also more likely to be parents. To date, we do not know if relationship length is associated with how TGNB couples divide their unpaid labor.

We do know that parenthood is associated with increases in specialization of division of labor (Bauer, 2016). It is important to note that for sexual and gender minority people, as compared to the majority of cisgender heterosexual couples, there are unique aspects of family design. For planned cisgender same-sex and TGNB headed families, many pathways to parenthood can result in one parent being genetically related to the child and one not (e.g., use of reproductive technologies where one partner or a surrogate carries the child), or neither (e.g., adoption or foster care). Genetic relatedness among same-sex planned families has not typically been associated with the couple's division of household or childcare labor (Vanfraussen et al., 2003; Sutphin, 2013; Tornello et al., 2015a). Related, in a comparison of adoptive cisgender heterosexual, lesbian, and gay parents with no genetic ties to the focal child, heterosexual couples were more specialized compared to lesbian mothers and gay fathers (Goldberg et al., 2012). However, when examining genetic relatedness in the context of divorce or blended families, these findings are very different.

In exploring the division of unpaid labor among blended families, typically the genetic parent performs more of the childcare tasks compared to the non-genetic or stepparent (e.g., Moore, 2008; Tornello et al., 2015b). For example, in a study of women in same-sex blended families, the child's genetic mother completed more of the childcare related tasks compared to the stepmother (Moore, 2008). In a similar study of cisgender gay fathers who became parents in the context of a prior heterosexual identity, the genetic father completed more childcare duties compared to the stepfather (Tornello et al., 2015b). Family design did not predict the division of unpaid household labor (Tornello et al., 2015b). Among heterosexual cisgender couples, stepparents consistently perform less of the unpaid labor (Ishii-Kuntz and Coltrane, 1992). Genetic relatedness to a child was not predictive of a couple's division of labor, but being a genetic parent in a blended family was.

Impact of Division of Labor on Individual Well-Being, Relationship Satisfaction, and Children's Behavior

Who performs which household or childcare tasks does not often result in negative individual, couple, or family outcomes. Specifically, it is not the *type* of division – specialized vs. egalitarian, but the expectations of each member and their satisfaction with this division. If the couple decides on a more specialized division of labor because it more appropriately reflects their gender role ideation or partner expectations, this

is not associated with negative outcomes. Research exploring the impact of discrepancies or disagreements over unpaid labor has focused on three major areas: individual well-being, couple functioning, and child adjustment (e.g., reviewed in Coltrane, 2000; Lachance-Grzela and Bouchard, 2010).

If each member of the couple has a strong desire for an equitable division of labor, but this is not occurring (Kalmijn and Monden, 2011), or if one partner is experiencing the majority of the stress related to these demands (Tao et al., 2010), this can result in a decreased sense of individual well-being. A similar association has been found among sexual minority or same-sex couples. As stated previously, same-sex couples report a more egalitarian division of labor compared to their heterosexual peers, but this alone does not result in negative well-being. In a study exploring the experiences of women in same-sex relationships during the transition to parenthood, Goldberg and Smith (2008) found that anxiety increased for both parents after the birth of the child, but that the causes were different for the genetic and non-genetic mothers. Specifically, the genetic mother who worked more hours in paid employment and was performing less of the childcare, expressed greater levels of anxiety (Goldberg and Smith, 2008). Again, well-being seems more likely to be affected by the *discrepancies* between ideal and actual division of unpaid labor. For example, in a study of 176 cisgender gay fathers that controlled for the actual division of unpaid labor, greater division of labor discrepancies predicted greater depressive symptoms and lower satisfaction with life (Tornello et al., 2015a). In all, greater discrepancies between actual and ideal division of unpaid labor have been linked to individual well-being.

Another aspect of family life that can be affected by the division of labor is relationship satisfaction or functioning. Greater perceived equalities or discrepancies in the division of unpaid labor have been associated with negative relationship outcomes among heterosexual couples (Coltrane, 2000; Saginak and Saginak, 2005; Mikula et al., 2012) and lesbian and gay couples (Kurdek, 2007; Sutphin, 2010; Tornello et al., 2015a). Among childfree same-sex couples, greater satisfaction with how the couple divides their unpaid labor was associated with greater relationship satisfaction (Sutphin, 2010). Related, gay cisgender surrogate fathers who reported lower discrepancies in unpaid labor seemed to enjoy greater relationship satisfaction (Tornello et al., 2015a). In sum, satisfaction with division of unpaid labor has an impact on relationship satisfaction and this has been found to be consistent across all couple types.

Prior work has also found associations between division of labor and children's adjustment, often explained through the co-parent or couple functioning (e.g., Chan et al., 1998; Farr and Patterson, 2013). Research exploring the direct relationship between division of labor and children's outcomes has had mixed findings (e.g., Patterson, 1995; Chan et al., 1998; Tornello et al., 2015b). Among heterosexual cisgender couples, mothers' reports of less externalizing behaviors were associated with their partner's reports of greater satisfaction with decision-making labor (Chan et al., 1998). No other associations between children's behavioral outcomes and division of labor were found among the heterosexual couples (Chan et al., 1998). In two studies that explored the experiences of lesbian mothers based

on genetic relatedness, greater satisfaction of the non-genetic mother regarding their division of childcare labor (Patterson, 1995) and family decision-making (Chan et al., 1998) was associated with better child adjustment. In a more recent study, discrepancies in division of labor among cisgender gay fathers were associated with individual well-being and relationship functioning, but were unrelated to their child behavioral outcomes (Tornello et al., 2015b). In contrast, in a study of adoptive cisgender heterosexual, lesbian, and gay adoptive parents, greater satisfaction with childcare was associated with less externalizing behaviors among the children (Farr and Patterson, 2013). For children's outcomes, the ways in which a couple divides their labor and how satisfied they are with that labor, may not be directly associated with children's outcomes, but rather, a reflection of larger relationship dynamics and couple functioning.

Current Study

This study has three major aims: (1) Provide descriptive information regarding division of household and childcare labor among TGNB parents. Based on the prior findings that TGNB people hold more fluid and flexible ideas about gender identity, gender roles, and sexual orientation (Nagoshi et al., 2012; Galupo et al., 2016), TGNB parents will report dividing their household and childcare labor in an egalitarian fashion. Similarly, TGNB parents will have low discrepancies between their actual and ideal division of labor. In addition, as with sexual minority individuals (e.g., Goldberg et al., 2012; Farr and Patterson, 2013; Tornello et al., 2015b; Bauer, 2016; Brewster, 2017) and in contrast with cisgender heterosexual couples (e.g., Artis and Pavalko, 2003; Bauer, 2016), there will be no differences in the division of unpaid household and childcare labor across parental gender or couple gender design (same-gender vs. different gender couples). (2) Understand the factors that shape the division of household and childcare labor in TGNB couples. Three theoretical models will be used to predict division of labor. The relative resource theory will examine the role of income and education in division of household and childcare labor, with the hypothesis that income – but not education level – will predict household and childcare division of labor (e.g., Bianchi et al., 2000; Patterson et al., 2004; Goldberg et al., 2012; Sutphin, 2013; Kelly and Hauck, 2015). Next, consistent with time-constraint theory, the individual who works fewer hours in paid employment will complete more of the household and childcare unpaid labor (e.g., Patterson et al., 2004; Goldberg et al., 2012; Tornello et al., 2015b). The life course theory will be used to explore couple and family factors, such as length of relationship and family design (genetic vs. non-genetic parent). As has been found with research among same-sex couples (e.g., Vanfraussen et al., 2003; Moore, 2008; Sutphin, 2013; Tornello et al., 2015a,b), genetic parents will complete more childcare tasks, but not household labor, compared to non-genetic parents. (3) Explore the relationships between division of labor discrepancies and individual well-being, relationship satisfaction, and children's behavioral outcomes. Household and childcare division of labor discrepancies, not current division of labor, will directly predict individual (Goldberg and Smith, 2008; Tornello et al., 2015b) and couple functioning (Kurdek, 2007;

Sutphin, 2010; Tornello et al., 2015a), but not children's outcomes (Tornello et al., 2015b).

MATERIALS AND METHODS

Participants

The study sample consisted of 163 TGNB parents and their children. The original sample consisted of 311 TGNB parents and their children. Due to our interest in the division of labor around childcare, those who had children over the age of 18 ($n = 79$) or child age was missing ($n = 8$) were removed. Participants who were currently single ($n = 38$), who had multiple current partners ($n = 20$), or did not live together at least 50% of the time ($n = 3$) were removed. The final sample consisted of 163 transgender and non-binary parents.

Participants were on average 36 ($SD = 6.37$) years of age, and the majority self-identified as White/European American (88.3%). The socioeconomic class of participants varied greatly; however, the majority reported being a middle class household, having a Bachelor's degree or higher (60.7%), and of those who were currently employed, participants worked an average of 41 ($SD = 9.88$) h per week. Most participants identified their gender as transgender men (25.2%) and transgender women (30.7%). A minority of participants identified their gender as genderqueer (16.0%), non-binary (8.0%), gender non-conforming (6.1%), gender fluid (3.1%), multiple gender identities (3.7%), and additional identities (7.3%; e.g., agender, bigender, choose not to label, genderless, and two-spirited). Due to the small numbers of participants identifying with these genders identities, these were combined into a non-binary gender group (44.1%). The majority of participants self-identified their sexual identity as queer (28.2%), lesbian (16.6%), pansexual (16.0%), bisexual (12.9%), heterosexual (9.2%), choose not to label (3.1%), demisexual (3.1%), gay (2.5%), asexual (2.5%), and additional identities (6.0%; e.g., questioning, androsexual, attracted to women, female-bodied women, not sure, and multiple sexual identities). All participants had a current partner, and the majority were legally married (79.7%). Participants reported being with their partner for an average of 10 ($SD = 5.75$) years, and those with a legally recognized relationship had been together for an average of 7 ($SD = 5.30$) years.

Participants' partners were 37 ($SD = 7.06$) years old on average, self-identified as White/European American (85.3%), the majority had a Bachelor's degree or higher (57.7%), and those who were employed worked an average of 39 ($SD = 13.01$) h per week. Participants identified their partners' gender identities as predominantly cisgender women (65.6%), with others identifying as cisgender men (12.3%), transgender women (5.8%), transgender men (4.5%), gender non-conforming (4.0%), genderqueer (3.3%), multiple gender identities (1.3%), and additional gender identities (2.8%; e.g., gender fluid, non-binary, two-spirited, or choose not to label). As with participants, if the partner identified their gender identity as non-binary (e.g., gender non-conforming, genderqueer, non-binary, or reported multiple gender identities) they were grouped in the non-binary gender group (11.4%). Participants reported their partner's sexual

identity as heterosexual (31.6%), queer (19.1%), bisexual (13.2%), pansexual (13.2%), lesbian (11.2%), choose not to label (3.9%), gay (2.6%) and some other sexual identity (5.5%; e.g., asexual, demisexual, polysexual, questioning, or unknown).

Participants reported having an average of two children per family ($SD = 0.97$). The eldest children of participants joined their families in many different ways. Most children were conceived through genetic means (96.3%), with a few joining the family through adoption (2.5%) and foster care (1.2%). In the subset of participants who had children join their family through genetic means, over half the participants and their current/former partners were genetically related to the focal child (53.8%), 30.1% of participants were not genetically related but their current/former partner was genetically related, and 16.1% of participants were genetic parents without any genetic co-parent. On average, eldest children were approximately 8 ($SD = 5.47$) years of age, most participants identified their children's race/ethnicity as White/European American (81.6%), and about half were assigned female at birth (49.1%). All demographic information is on **Table 1**.

Procedure

Participants were recruited through a large international study of gender-diverse parents and their children. Study advertisements were listed on social media and networking websites for transgender and gender non-conforming/non-binary parents. The inclusion criteria for the study was that the individual had to identify their gender as non-cisgender, be a parent of at least one child, and be over the age of 18. Participants saw advertisements that included the inclusion criteria on family and parenting TGNB websites, and if they were interested in participating they contacted the PI (author) of the study or completed an online information form. If eligible to participate, they received an email with a personalized study link and password for them and their partner (if applicable). When clicking on the link, participants first read the consent form, agreed to participate, and then completed a series of surveys. The study proposal, consent, and surveys were approved by the IRB at Pennsylvania State University.

Measures

Demographics

Participants completed a series of demographic questions about themselves and their partners, such as age, gender, sex assigned at birth, sexual orientation, race/ethnicity, individual and household income, hours of paid employment per week, educational attainment, relationship status, and religious affiliation. Participants were asked a series of question about their eldest child such as age, gender, sex assigned at birth, race/ethnicity, and how the child joined the family.

Pathways to Parenthood

Participants completed a series of questions about how their eldest child joined the family. Participants were first asked "Which of the following best describes how this child came into your family?" The question included the following response options: "I and/or my partner (or former partner) is biologically

TABLE 1 | Demographic information of Transgender and Non-binary parents, partners, and eldest child.

Variable	Participant <i>n</i> = 163	Partner <i>n</i> = 163	Child <i>n</i> = 163
	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)
Age	36.15 (6.37)	37.72 (7.06)	7.59 (5.47)
Individual income (thousands)	49,750.96 (52,375.32)	–	–
Household income (thousands)	86,427.12 (79,170.22)	–	–
Hours per week in paid employment	33.58 (17.74)	29.78 (19.36)	–
Length of relationship (years)	10.05 (5.75)	–	–
Number of children	1.71 (0.99)	–	–
Sex assigned at birth (% female)	62.6	78.1	49.1
Gender (%)			
Transgender woman	25.8	3.7	0.0
Transgender man	21.5	2.5	0.0
Cisgender woman	4.9	62.6	38.7
Cisgender man	3.7	12.9	35.0
Genderqueer	16.0	3.1	0.0
Gender non-conforming	6.1	3.7	1.2
Gender fluid	3.1	0.6	1.2
Non-binary	8.0	0.6	0.0
Multiple identities	3.7	1.2	0.0
Choose not to label/unknown	0.6	0.6	18.4
Additional identities ^a	6.7	0.6	5.5
Sexual orientation (%)			
Queer	28.2	17.8	–
Heterosexual	9.2	29.4	–
Lesbian	16.6	10.4	–
Gay	2.5	2.5	–
Bisexual	12.9	12.3	–
Pansexual	16.0	12.3	–
Asexual	2.5	0.6	–
Demisexual	3.1	0.6	–
Questioning	1.2	1.2	–
Choose not to label	3.1	3.7	–
Not sure/unknown	0.6	0.6	–
Additional identities ^b	4.2	1.8	–
Race/ethnicity			
White/Caucasian	87.7	78.5	81.6
Hispanic/Latino(a)	3.7	4.9	4.3
Black African American	0.0	1.2	0.6
Asian Indian	1.2	1.2	0.6
Biracial/Multiracial	6.7	1.8	9.2
Additional race/ethnicities ^c	0.0	4.2	1.2
Relationship status			
Committed relationship	14.1	–	–
Married legally recognized	79.1	–	–
Engaged	6.1	–	–
Polyamorous	0.6	–	–
Education			
Less than high school	1.2	1.8	–
High school/GED	23.9	25.2	–
Vocational/Trade school	3.1	3.1	–
Associates degree/2 years	11.0	9.2	–
Bachelor's degree/4 years	24.5	23.3	–
Graduate degree	36.2	30.1	–

Not all numbers will total to 100 due to rounding. ^aAdditional gender identities include: agender, bigender, genderless, trans feminine, and androgynous. ^bAdditional sexual identities include: omnisexual, transitioning sexual orientation, heteroflexible, polysexual, female bodied women, dike, androsexual, and attracted to women. ^cAdditional race/ethnicities include: American Indian/Alaskan Native, Chinese, Filipino, Native Hawaiian/Pacific Islander, and Creole.

related to the child,” “Through adoption (no direct biological relationship with the child; this option includes foster care to adoption situations),” “Through the foster care system (either or both is the legal foster parent),” or “Self-describe (please specify).” If participants choose the option of genetically related, they were asked “Which best describes your current situation?” with the options regarding who is genetically related to the child (participant, partner, another individual) and the means of conception.

Division of Household and Childcare Labor

Participants completed the Who Does What (WDW) Scale (Cowan and Cowan, 1992, 1995), which measures a couple’s division of labor. Two types of division of labor were assessed: household division of labor, such as preparing meals, laundry, and cleaning the home (13 items), and childcare division of labor based on the age of the child (six versions; 12–20 items depending on the age of the child), such as dressing, homework, and organizing playdates. For each item, participants rated on a 9-point Likert scale (1 = *partner does it all* to 9 = *I do it all*) based on who completes the tasks (actual) and how the participant would like it to be (ideal).

Six different scores were calculated: (a) actual household labor was calculated by taking the average of actual household items; (b) actual childcare labor was calculated by taking the average of actual childcare items; (c) ideal household labor was calculated by taking the average of ideal household items; (d) ideal childcare labor was calculated by taking the average of ideal childcare items; (e) discrepancy scores in household division of labor were calculated by taking the average of the absolute difference of the actual and ideal household responses; and (f) discrepancy scores in childcare division of labor were calculated by taking the average of the absolute difference of the actual and ideal childcare responses. A score closer to five on the actual household or childcare division of labor reflected an egalitarian division of labor. A score closest to five on the ideal household or childcare division of labor reflects a desire to have an egalitarian division of labor. On the discrepancy division of household and childcare labor scales, values closer to zero reflected greater similarity between how the labor was being divided and how the individual would ideally like it to be divided. All scales had moderate to high reliability (alphas = 0.62 through 0.92).

Individual Well-Being

Participant well-being was measured using two different scales. First, the Center for Epidemiological Studies-Depression Inventory (CES-D; Radloff, 1977), a 20-item self-report survey that measures the frequency of symptoms associated with depression, was administered. Participants were asked how often in the past week they felt lonely, talked less than usual, or had crying spells. Participants responded to each item using a 4-point Likert scale [0 = *Rarely or none of the time (less than 1 day)*, 1 = *Some or a little of the time (1–2 days)*, 2 = *Occasionally or a moderate amount of the time (3–4 days)*, and 3 = *Most or all of the time (5–7 days)*]. A total score was calculated by summing all item responses for a total score that

ranged from 0 to 60, with scores >16 (Radloff, 1977) reflecting clinical levels of depressive symptoms. This scale had good reliability (alpha = 0.90).

The second measure used was the Satisfaction with Life Scale (Diener et al., 1985), a 5-item self-report survey that measures an individual’s current level of contentment with their life. Example items include, “The conditions of my life are excellent,” “So far I have gotten the important things I want in life,” and “In most ways my life is close to my ideal.” Participants responded to survey items using a 7-point Likert scale from 1 = *Strongly disagree* to 7 = *Strongly agree*. A total score was calculated by summing all responses that could range from 5 to 35. This scale had good reliability with an alpha of 0.88.

Relationship Adjustment

The Dyadic Adjustment Scale (DAS; Spanier, 1976) is a 32-item survey used to measure the participants’ relationship adjustment with their current romantic partner. Items addressed different aspects of a romantic relationship such as, “In general, how often do you think that things between you and your partner are going well?” or “How often do you or your mate leave the house after a fight?” Item response scales varied, with some items having 6-point Likert scales in which 0 = *never* and 5 = *more often* or 0 = *always disagree* and 5 = *always agree*, or a 2-point scale, such that 0 = *yes* and 1 = *no*. An overall relationship adjustment score was calculated by summing all item responses together to create a total score, which could range from 0 to 151, with higher scores reflecting greater relationship adjustment. Previous research has found that the average score in a heterosexual married sample was 114.8 ± 17.8 (Spanier, 1976). This sample was within normal range with a total score of 112.30 ± 13.64 . This scale had good reliability with this sample, with an alpha of 0.90.

Child Behavior

The Child Behavior Checklist (CBCL; Achenbach and Rescorla, 2000, 2001) measured children’s behavioral and emotional development. Two versions of the CBCL were used depending on the child’s age, with the preschool version (100 problem behavior items) being used among children ages 1 1/2 to 5 years of age, and the school age version (118 problem behavior items) for children 6 to 18 years of age (Achenbach and Rescorla, 2000, 2001). Example items for the preschool version include behaviors such as, “cries a lot,” “unusually loud,” “disobedient at home,” and “argues a lot.” Items for the preschool version included behaviors such as, “acts too young for age,” “defiant,” “easily frustrated,” “worries,” and “sulks a lot.” Participants responded to each item using the Likert scale of in which 0 = *Not true*, 1 = *Somewhat or sometimes true*, or 2 = *Very true or often true*. All responses were totaled for a final behaviors score. Scores were then standardized based on the child’s age and sex assigned at birth using the Achenbach System of Empirically Based Assessment (ASEBA® Web™) online scoring system (Achenbach, 2010). Both the CBCL preschool version (alpha = 0.95) and the school-age version (alpha = 0.94) had good reliability.

RESULTS

Findings are presented according to the aims of the study. First, descriptions of the division of household and childcare unpaid labor and satisfaction with that division, along with conducting a series of one-way ANOVAs comparing the actual and ideal division of household and childcare labor based on individual and couple gender design will be explored. Second, multiple regression models will explore the predictors of household and childcare division of labor, while controlling for participant age, number of children, and age of eldest child. The three theoretical frameworks that will be tested are the relative resource theory (income and educational attainment), time-constraint theory (hours in paid employment), and life course theory (length of romantic relationship and family design). Finally, multiple regression models will explore if discrepancies in actual and ideal division of household and childcare labor-predict parental well-being, relationship satisfaction, and children's adjustment.

Division of Household and Childcare Labor

On average, participants reported having ($M = 5.48$, $SD = 0.98$) and wanting ($M = 5.10$, $SD = 0.57$) an egalitarian division of household unpaid labor. Similarly, participants reported having ($M = 5.24$, $SD = 1.24$) and wanting ($M = 5.03$, $SD = 0.84$) an egalitarian division of childcare labor. When examining the discrepancies in the division of household and childcare labor, participants reported being satisfied, $M = 0.72$, $SD = 0.61$, $M = 1.19$, $SD = 0.75$, respectively.

Division of labor was then examined by participant gender by comparing three groups: Transgender men (25.2%), transgender women (30.7%), and non-binary (44.1%). Current and desired division of household labor did not differ by parent gender, $F(2,141) = 0.55$, $p = 0.58$, $F(2,135) = 0.17$, $p = 0.85$; see **Table 2**. Similarly, there were no differences in current and desired division of childcare labor, $F(2,126) = 1.06$, $p = 0.35$, $F(2,122) = 0.13$, $p = 0.88$; see **Table 2**. Discrepancies in division of both household and childcare labor did not differ by parent gender, $F(2,122) = 0.23$, $p = 0.80$, $F(2,135) = 0.32$, $p = 0.73$; see **Table 2**. To examine parental gender by couple design, couples

were split into two groups: (1) those with the same gender identities (e.g., both members identified as men, women, or GNB) or (2) different gender identities (e.g., one member identifies as a man and one as a woman). There was no difference in current or ideal division of household or childcare based on partner gender design ($p < 0.14$).

Predictors of Division of Labor

To understand the division of household and childcare labor of TGNB parents, three different theories – relative resource theory (income and education), time-constraint theory (hours in paid employment), and life course theory (relationship status, length of relationship, and family design) – were tested using a regression model, while controlling for participant age, number of children, and age of eldest child.

The first model predicting current household division of labor was not significant, $F(9,101) = 1.33$, $p = 0.08$, with no controls or theoretical variables predicting current household division of labor. In contrast, participants who reported wanting to contribute more to the household division of labor were older, made a higher percentage of household income, and worked fewer hours in paid employment, $F(9,96) = 1.98$, $p = 0.049$. The next two models examined the predictors of current and ideal childcare division of labor. Participants who reported currently performing more childcare tasks were in newer relationships, worked fewer hours per week in paid employment, and were the genetic parent to the focal child, $F(9,91) = 5.30$, $p < 0.001$. For the ideal childcare division of labor, being the genetic parent to the focal child was the only significant predictor of desired division of childcare labor, $F(9,87) = 2.73$, $p = 0.008$.

Impact of Division of Labor on Individual, Couple, and Child Outcomes

Using a series of regression analyses, we explored the relationship between household and childcare division of labor discrepancies and individual, couple, and child outcomes. All models controlled for participant age, number of children, child's age and actual division of labor, along with marital status, relationship length, parental genetic relatedness, relative education, proportion of income, hours in paid employment, and current division of labor (see **Tables 3, 4**).

The first pair of models explored the predictors of participants' depressive symptoms. Division of household labor discrepancies was the only factor that predicted participant depressive symptoms, $F(11,88) = 3.04$, $p = 0.002$, adjusted $R^2 = 0.19$. Reporting greater division of childcare labor discrepancies was predictive of depressive symptoms in the participant, as was having more children, having children who were older, and reporting a lower income, $F(11,82) = 2.28$, $p = 0.017$, adjusted $R^2 = 0.13$. Division of household labor discrepancies was the only factor that predicted participant satisfaction with life, $F(11,91) = 2.28$, $p = 0.017$, adjusted $R^2 = 0.23$. In contrast, division of childcare labor discrepancies were not predictive of the participants'

TABLE 2 | Division of household and childcare actual and ideal labor among TGNB parents by gender identity.

Variable	Male <i>M (SD)</i>	Female <i>M (SD)</i>	Non-binary <i>M (SD)</i>	<i>F</i>
Household actual division of labor ^a	5.59 (0.93)	5.36 (1.07)	5.50 (1.07)	n.s.
Household want division of labor ^a	5.09 (0.61)	5.14 (0.56)	5.07 (0.56)	n.s.
Childcare actual division of labor ^a	5.14 (1.17)	5.06 (1.44)	5.41 (1.13)	n.s.
Childcare want division of labor ^a	5.01 (0.99)	5.10 (0.92)	5.01 (0.69)	n.s.
Ideal household division of labor ^b	1.10 (0.65)	1.20 (0.84)	1.23 (0.74)	n.s.
Ideal childcare division of labor ^b	0.66 (0.51)	0.72 (0.68)	0.60 (0.63)	n.s.

^a 1 = partner does it all to 9 = I do it all. ^b Higher values indicate greater division of labor discrepancies.

TABLE 3 | Division of labor household discrepancies predicting individual well-being, couple functioning, and child behavior among TGNB parents.

Variable	Depressive symptoms ^a			Satisfaction with life ^b			Relationship quality ^c			Child behavior ^d		
	B	SE B	β	B	SE B	β	B	SE B	β	B	SE B	β
Participant age	0.00	0.00	−0.24*	0.00	0.00	−0.09	0.00	0.00	−0.12	0.00	0.00	−0.36**
Number of children	−2.98	1.33	−0.23*	0.92	0.86	0.11	−1.18	1.70	−0.07	−3.03	2.33	−0.14
Eldest child age	0.44	0.26	0.19	−0.22	0.16	−0.15	0.55	0.32	0.20	1.33	0.44	0.35**
Married ^e	0.38	3.57	0.01	1.12	2.33	0.05	−0.41	4.46	−0.01	−3.13	6.35	−0.05
Length of current relationship	−0.01	0.20	−0.01	0.19	0.13	0.15	−0.50	0.26	−0.20	0.46	0.36	0.14
Genetic relatedness to child ^f	3.97	2.25	0.16	−2.14	1.46	−0.14	−1.70	2.84	−0.06	0.44	3.94	0.01
Relative education ^g	0.28	0.56	0.05	0.63	0.36	0.17	1.01	0.71	0.15	−0.66	0.97	−0.07
Relative income ^g	−0.11	0.07	−0.30	0.03	0.04	0.12	0.00	0.08	0.01	−0.06	0.12	−0.10
Relative hours worked in paid employment ^g	0.10	0.08	0.23	−0.04	0.05	−0.14	−0.10	0.10	−0.17	0.18	0.14	0.24
Actual division of household labor ^h	−1.90	1.27	−0.15	0.31	0.83	0.04	−1.48	1.62	−0.10	0.38	2.27	0.02
Division of household labor discrepancy ⁱ	5.51	1.50	0.36***	−3.81	0.98	−0.39***	−6.05	2.04	−0.30**	1.38	2.67	0.05
R ²		0.19			0.12			0.16			0.06	
F		3.04**			2.28*			2.64**			1.62	

^aHigher scores indicate greater depressive symptoms. ^bHigher scores indicate greater satisfaction with life. ^cHigher scores indicate positive relationship quality. ^dHigher scores indicate greater behavioral problems. ^e1 = Married, 0 = Not married. ^f1 = Genetically related to focal child, 0 = Not genetically related to focal child. ^gHigher values indicate greater individual income, education, and hours worked in paid employment relative to their partner. ^hHigher scores indicate greater participant participation in household division of labor. ⁱHigher values indicate greater household division of labor discrepancies. B = unstandardized beta. SE B = standard error for the unstandardized beta. β = standardized beta. *p < 0.05. **p < 0.01. ***p < 0.001.

TABLE 4 | Division of labor childcare discrepancies predicting individual well-being, couple functioning, and child behavior among TGNB parents.

Variable	Depressive symptoms ^a			Satisfaction with life ^b			Relationship quality ^c			Child behavior ^d		
	B	SE B	β	B	SE B	β	B	SE B	β	B	SE B	β
Participant age	0.00	0.00	−0.18	0.00	0.00	−0.14	0.00	0.00	−0.17	0.00	0.00	−0.25*
Number of children	−3.84	1.43	−0.29**	1.63	0.93	0.19	−1.07	1.85	−0.07	−1.64	2.30	−0.08
Eldest child age	0.58	0.27	0.25*	−0.29	0.17	−0.20	0.38	0.34	0.13	1.58	0.43	0.42***
Married ^e	2.40	3.78	0.07	−0.31	2.48	−0.01	−1.83	4.76	−0.04	−1.14	6.09	−0.02
Length of current relationship	−0.21	0.24	−0.10	0.23	0.16	0.18	−0.36	0.31	−0.14	0.06	0.39	0.02
Genetic relatedness to child ^f	4.46	2.59	0.19	−1.89	1.71	−0.13	0.13	3.31	0.00	1.86	4.18	0.05
Relative education ^g	0.64	0.62	0.11	0.36	0.41	0.10	1.09	0.79	0.16	−0.40	1.01	−0.04
Relative income ^g	−0.18	0.07	−0.51*	0.06	0.05	0.26	0.01	0.09	0.01	−0.07	0.12	−0.13
Relative hours worked in paid employment ^g	0.14	0.08	0.33	−0.06	0.06	−0.21	−0.13	0.11	−0.24	0.20	0.14	0.28
Actual division of childcare labor ^h	−1.99	1.29	−0.20	0.04	0.86	0.01	0.13	1.66	0.01	1.53	2.11	0.10
Division of childcare labor discrepancy ⁱ	4.58	2.26	0.23*	−1.63	1.50	−0.13	−6.30	2.93	−0.26*	2.95	3.69	0.09
R ²		0.13			0.01			0.08			0.09	
F		2.28*			1.10			1.70†			1.91†	

^aHigher scores indicate greater depressive symptoms. ^bHigher scores indicate greater satisfaction with life. ^cHigher scores indicate positive relationship quality. ^dHigher scores indicate greater behavioral problems. ^e1 = Married, 0 = Not married. ^f1 = Genetically related to focal child, 0 = Not genetically related to focal child. ^gHigher values indicate greater individual income, education, and hours worked in paid employment relative to their partner. ^hHigher scores indicate greater participant participation in childcare division of labor. ⁱHigher values indicate greater childcare division of labor discrepancies. B = unstandardized beta. SE B = standard error for the unstandardized beta. β = standardized beta. †p < 0.10. *p < 0.05. **p < 0.01. ***p < 0.001.

satisfaction with life, $F_{(11,84)} = 1.10$, $p = 0.373$. The next two models examined the predictors of relationship satisfaction. Participants who reported greater discrepancies in household division of labor reported lower relationship satisfaction, $F_{(11,85)} = 2.64$, $p = 0.006$, but relationship satisfaction was not associated with discrepancies in childcare division of labor, $F_{(11,79)} = 1.70$, $p = 0.088$. Lastly, neither household, $F_{(11,94)} = 1.62$, $p = 0.106$, nor childcare, $F_{(11,85)} = 1.91$, $p = 0.05$, discrepancies in division of labor were predictive of children's behavioral problems.

DISCUSSION

In this study exploring the division of household and childcare labor of TGNB parents, there were a number of interesting findings. TGNB parents reported dividing their household and childcare labor in egalitarian ways, with this division being uninfluenced by gender or couples design. In exploring three theories used to predict division of labor, there was clear support for the time-constraint theory and the life course theory, with little support for the relative resource theory. Actual division of

labor were not predictive of individual, couple, or child outcomes, but discrepancies in the ideal and actual division of this labor, specifically household labor, did predict individual well-being and couple functioning. Division of labor discrepancies were not predictive of child behavioral outcomes.

Similar to cisgender sexual minority couples (Goldberg et al., 2012; Farr and Patterson, 2013; Tornello et al., 2015b; Bauer, 2016; Brewster, 2017) and, in contrast, to cisgender heterosexual couples (Artis and Pavalko, 2003; Bauer, 2016), TGNB couples reported wanting – and actually having – an egalitarian division of household and childcare labor. In addition, discrepancies between how these couples actually and ideally wanted to divide this labor were relatively minimal. As hypothesized, and in contrast to cisgender heterosexual couples (Erickson, 2005), participants' gender and the gender design of the couple did not play a role in how unpaid labor was divided. One explanation for these findings is that TGNB people conceptualize gender, gender role expectations, and sexual identity in a more fluid and dynamic fashion (Nagoshi et al., 2012; Galupo et al., 2016). This greater gender and sexual identity flexibility could lead TGNB couples to negotiate and decide the division of unpaid labor based on personal preferences, similar to cisgender same-sex couples (Kurdek, 2007), and in contrast with cisgender heterosexual couples. With cisgender heterosexual couples' division of unpaid labor typically being shaped by gender role expectations or assumptions (Erickson, 2005). Although TGNB parents reported dividing their labor in an egalitarian fashion and wanting it to be that way, this division was not associated with couple gender. Additional factors also that predicted actual and ideal division of unpaid labor.

When examining the factors associated with how a couple divides their unpaid labor, there was limited support for relative resource theory but moderate support for the time-constraint and the life course theories. For these couples, relative income and hours in paid employment predicted ideal – but not actual – division of household labor. Specifically, if the participant reported a higher income and working more hours in paid employment relative to their partner, they reported wanting to perform less household labor. In the one qualitative study of TGNB couples, Kelly and Hauck (2015) found an association between individual income and household division of labor, although only one of the 10 TGNB couples were actually parents and this study did not control for other factors such as time in paid employment or genetic relatedness. As expected, these findings are in contrast with the research among cisgender heterosexual couples (Bianchi et al., 2000), but the findings do support some of the research on same-sex couples. Among cisgender gay men with children under the age of 18 and childfree lesbian and gay couples (Kurdek, 1993; Tornello et al., 2015b), income and education were not associated with household division of labor. Although among the cisgender gay fathers, when controlling for income and education, time in paid employment was associated with household division of labor (Tornello et al., 2015b). We could hypothesize that income and educational attainment are important at specific periods of time, and that having children may change the impact of these factors on the division of household labor among these couples.

For childcare labor, these findings were a bit more complex. As predicted, the genetically related parent who worked fewer hours in paid employment reported performing more of the childcare labor. Related, only genetic relatedness was associated with the ideal childcare labor, with genetic TGNB parents wanting to do perform more of the childcare labor. Prior research with same-sex couples has consistently found that the partner who works more in paid employment performs less of the childcare labor (Patterson et al., 2004; Goldberg et al., 2012; Tornello et al., 2015b), but the findings regarding genetic relatedness were more mixed (e.g., Vanfraussen et al., 2003; Goldberg and Perry-Jenkins, 2007; Moore, 2008; Sutphin, 2013; Tornello et al., 2015a,b). Among cisgender adoptive parents, in which genetic relatedness is not a factor, heterosexual couples reported being more specialized compared to their lesbian and gay peers (Goldberg et al., 2012). Genetic relatedness and childcare division of labor may be explained by family context, such as parenting in blended or stepfamilies (e.g., Ishii-Kuntz and Coltrane, 1992; Moore, 2008; Tornello et al., 2015b). Although these couples reported a generally egalitarian division of childcare labor, genetic relatedness and hours in paid employment both play a role in how childcare responsibilities were divided.

As hypothesized, regardless of how TGNB parents divide their unpaid labor, greater discrepancies between each partner's actual and ideal division of unpaid labor, were associated with poorer individual well-being and couple relationship quality, but not child outcomes. Specifically, TGNB parents that reported greater discrepancies between their actual and ideal household and childcare labor reported greater depressive symptoms. In addition, couples with greater discrepancies in their household division of labor, but not childcare, reported greater overall life satisfaction. These findings replicate previous research, with more significant discrepancies between how unpaid labor is divided and the individual expectations of this division, resulting in more negative individual well-being (e.g., Coltrane, 2000; Goldberg and Smith, 2008; Lachance-Grzela and Bouchard, 2010; Tornello et al., 2015b). Prior research has also found that these inequalities impact relationship functioning, with greater discrepancies predicting poorer relationship functioning and satisfaction among cisgender heterosexual (e.g., Saginak and Saginak, 2005; Mikula et al., 2012) and same-sex couples (Kurdek, 2007; Sutphin, 2010; Tornello et al., 2015a). Some prior work with same-sex couples has found an association between child's outcomes and satisfaction with childcare division of unpaid labor (Patterson, 1995; Chan et al., 1998), studies exploring household and childcare discrepancies directly, like this study, have not found this relationship (Tornello et al., 2015b). It is possible that satisfaction with division of labor, along with the co-parenting relationship mediated the association between children behavioral outcomes and unpaid labor (Chan et al., 1998; Farr and Patterson, 2013), which was unexplored in the current study. In sum, for all couples regardless of gender identity, if each partner believes their unpaid labor is divided the way they would like it to be, both the individual and couple enjoy greater functioning. This was not, however, directly related to children's adjustment.

This study has a number of strengths and limitations. Research examining TGNB couples, especially parents, is quite scant (exceptions see Kelly and Hauck, 2015). This study was the first to explore both household and childcare division of labor qualitatively among a relatively large sample of TGNB parents. This sample of TGNB parents was heterogeneous in a number of ways, such as in parent gender, child age, and family design, but even with this diversity, some of these factors could not be examined in detail. For example, comparisons across gender identity were possible for some groups, but finer analyses of those who identified on the non-binary spectrum were not possible in this study. Future research should examine the experiences of people who identify as these less represented or with multiple gender identities. Related, although an examination of same-gender and different-gender couples were possible in this study, and exploration by sexual identity or orientation was not due to small sample sizes. Future work should examine the relationship between genders, along with sexual orientation, to provide a more complex examination of these family dynamics. Another limitation is that all participants identified their genetic relatedness to the focal child, but we do not know details regarding how that child joined the family, such as in the context of a current or former relationship. Future research should focus on the variations of family and couple dynamics based on family context. Related, it is important to note that this study was cross-sectional, along with being on-line and survey-based. Some researchers have discussed the shortcomings of self-report measures of division of labor (Carrington, 1999) since this division of unpaid labor could be shifting daily, weekly, or monthly, which would not be captured by this type of methodology. Future research should examine these constructs using multiple methods of data collection, including collecting data in real time with the use of daily diary methodology and observational techniques.

In all, this study provides insight into the couple and family dynamics of TGNB parents. TGNB parents report dividing their unpaid household and childcare labor in a generally egalitarian fashion, and report wanting it to be divided in that

way. Parent gender, along with the sex and gender design of the couple, were not associated with how the couple's unpaid labor was divided. Relative resources of each partner were not predictive of how the couple divided their unpaid labor, although time spent in paid employment and genetic relatedness was associated with the division of childcare labor. Regardless of how the couple divided their labor, fewer discrepancies between how the unpaid labor is being divided and how they would like it to be was predictive of better individual well-being and relationship quality, but unrelated to their children's adjustment.

DATA AVAILABILITY STATEMENT

The datasets analyzed in this article are not publicly available. Requests to access the datasets should be directed to Samantha L. Tornello at SLT35@psu.edu.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Pennsylvania State University, Ethics Board (IRB). The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

ST independently designed the study, research questions, data collection, and data analysis.

FUNDING

This study received support through the Research Development Grant at Pennsylvania State University, Altoona.

REFERENCES

- Achenbach, T. M. (2010). *Achenbach System of Empirically Based Assessment (ASEBA® Web™)* [Web based computer software]. Burlington, VT: Center for Children, Youth, & Families.
- Achenbach, T. M., and Rescorla, L. A. (2000). *Manual for the ASEBA Preschool Forms & Profiles*. Burlington, VT: University of Vermont, Research Center for Children, Youth, & Families.
- Achenbach, T. M., and Rescorla, L. A. (2001). *Manual for the ASEBA School-Age Forms & Profiles*. Burlington, VT: University of Vermont, Research Center for Children, Youth, & Families.
- American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. *Am. Psychol.* 70, 832–864. doi: 10.1037/a0039906
- Artis, J. E., and Pavalko, E. K. (2003). Explaining the decline in women's household labor: individual change and cohort differences. *J. Marriage Fam.* 65, 746–761. doi: 10.1111/j.1741-3737.2003.00746
- Bauer, G. (2016). Gender roles, comparative advantages and the life course: the division of domestic labor in same-sex and different-sex couples. *Eur. J. Populat.* 32, 99–128. doi: 10.1007/s10680-015-9363-z
- Baxter, J., Hewitt, B., and Haynes, M. (2008). Life course transitions and housework: marriage, parenthood, and time on housework. *J. Marriage Fam.* 70, 259–272. doi: 10.1111/j.1741-3737.2008.00479.x
- Bianchi, S. M., Milkie, M. A., Sayer, L. C., and Robinson, J. P. (2000). Is anyone doing the housework? trends in the gender division of household labor*. *Soc. Forces* 79, 191–228. doi: 10.1093/sf/79.1.191
- Blood, R., and Wolfe, D. (1960). Husbands and wives: the dynamics of family living. *Glencoe Press* 338, 201–202. doi: 10.1177/000271626133800183
- Brewster, M. E. (2017). Lesbian women and household labor division: a systematic review of scholarly research from 2000 to 2015. *J. Lesbian Stud.* 21, 47–69. doi: 10.1080/10894160.2016.1142350
- Carrington, C. (1999). *No Place Like Home: Relationship and Family Life Among Lesbians and Gay Men*. Chicago, IL: The University of Chicago Press.
- Chan, R. W., Brooks, R. C., Raboy, B., and Patterson, C. J. (1998). Division of labor among lesbian and heterosexual parents: association with children's adjustment. *J. Fam. Psychol.* 12, 402–419. doi: 10.1037/0893-3200.12.3.402
- Coltrane, S. (2000). Research on household labor: modeling and measuring the social embeddedness of routine family work. *J. Marriage Fam.* 62, 1208–1233. doi: 10.1111/j.1741-3737.2000.01208.x

- Cowan, C. P., and Cowan, P. A. (1992). *When Partners Become Parents: The Big Life Change for Couples*. New York, NY: Basic Books.
- Cowan, C. P., and Cowan, P. A. (1995). Interventions to ease the transition to parenthood. Why they are needed, and what they can do. *Fam. Relat.* 44, 412–423.
- Diener, E., Emmons, R. A., Larsen, R. J., and Griffin, S. (1985). The satisfaction with life scale. *J. Pers. Assess.* 49, 71–75. doi: 10.1207/s15327752jpa4901_13
- Elder, G. (1998). The life course as developmental theory. *Child Dev.* 69, 1–12. doi: 10.2307/1132065
- Erickson, R. (2005). Why emotion work matters: sex, gender, and the division of household labor. *J. Marriage Fam.* 67, 337–351. doi: 10.1111/j.0022-2445.2005.00120.x
- Farr, R. H., and Patterson, C. J. (2013). Coparenting among lesbian, gay, and heterosexual couples: associations with adopted children's outcomes. *Child Dev.* 84, 1226–1240. doi: 10.1111/cdev.12046
- Flores, A. R., Herman, J. L., Gates, G. J., and Brown, T. N. T. (2016). *How Many Adults Identify as Transgender in the United States?*. Los Angeles, CA: The William Institute.
- Galupo, M. P., Henise, S. B., and Mercer, N. L. (2016). “The labels don't work very well”: transgender individuals' conceptualizations of sexual orientation and sexual identity. *Int. J. Transgender.* 17, 93–104. doi: 10.1080/15532739.2016.1189373
- Goldberg, A., and Perry-Jenkins, M. (2007). The division of labor and perceptions of parental roles: lesbian couples across the transition to parenthood. *J. Soc. Person. Relat.* 24, 297–318. doi: 10.1177/0265407507075415
- Goldberg, A. E., and Smith, J. Z. (2008). The social context of lesbian mother's anxiety during early parenthood. *Parent. Sci. Pract.* 8, 213–239. doi: 10.1080/15295190802204801
- Goldberg, A. E., Smith, J. Z., and Perry-Jenkins, M. (2012). The division of labor in lesbian, gay, and heterosexual new adoptive parents. *J. Marriage Fam.* 74, 812–828. doi: 10.1111/j.1741-3737.2012.00992.x
- Grant, J. M., Mottet, L. A., and Tanis, J. (2011). *Injustice at Every Turn: A Report of the National Transgender Discrimination Survey*. Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force.
- Grunow, D., Schulz, F., and Blossfeld, H. (2012). What determines change in the division of housework over the course of marriage? *Int. Sociol.* 27, 289–307. doi: 10.1177/0268580911423056
- Ishii-Kuntz, M., and Coltrane, S. (1992). Remarriage, stepparenting, and household labor. *J. Fam. Issues* 13, 215–233.
- James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., and Anafi, M. (2016). *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality.
- Kalmijn, M., and Monden, C. (2011). The division of labor and depressive symptoms at the couple level: effects of equity or specialization? *J. Soc. Pers. Relat.* 29, 358–374.
- Kelly, M., and Hauck, E. (2015). Doing housework, redoing gender: queer couples negotiate the household division of labor. *J. GLBT Fam. Stud.* 0, 1–27. doi: 10.1080/1550428X.2015.1006750
- Kurdek, L. A. (1993). The allocation of household labor in gay, lesbian, and heterosexual married couples. *J. Soc. Issues* 49, 127–139. doi: 10.1111/j.1540-4560.1993.tb01172.x
- Kurdek, L. A. (2005). What do we know about gay and lesbian Couples? *Am. Psychol. Soc.* 14, 251–254.
- Kurdek, L. A. (2007). The allocation of household labor by partners in gay and lesbian couples. *J. Fam. Issues* 28, 132–148. doi: 10.1177/0192513X06292019
- Lachance-Grzela, M., and Bouchard, G. (2010). Why do women do the lion's share of housework? A decade of research. *Sex Roles* 63, 767–780. doi: 10.1007/s11199-010-9797-z
- Light, A., Wang, L. F., and Gomez-Lobo, V. (2017). The family planning needs of young transgender men. *J. Pediatr. Adolesc. Gynecol.* 30, 274. doi: 10.1016/j.jpjg.2017.03.012
- Meervijk, E. L., and Sevelius, J. M. (2017). Transgender population size in the United States: a meta-regression of population-based probability samples. *Am. J. Public Health* 107, e1–e8. doi: 10.2105/AJPH.2016.303578
- Mikula, G., Bernhard, R., and Bodi, O. (2012). Perceived justice in the division of domestic labor: actor and partner effects. *J. Int. Assoc. Relat. Res.* 19, 680–695. doi: 10.1111/j.1475-6811.2011.01385.x
- Moore, M. R. (2008). Gendered power relations among women: a study of household decision making in black, lesbian stepfamilies. *Am. Sociol. Rev.* 73, 335–356. doi: 10.1177/000312240807300208
- Nagoshi, J. L., Brzuzy, S. I., and Terrell, H. K. (2012). Deconstructing the complex perceptions of gender roles, gender identity, and sexual orientation among transgender individuals. *Femin. Psychol.* 22, 405–422. doi: 10.1177/0959353512461929
- Patterson, C. J. (1995). Families of the lesbian baby boom: parents' division of labor and children's adjustments. *Dev. Psychol.* 31, 115–123. doi: 10.1037/0012-1649.31.1.115
- Patterson, C. J., Sutfin, E. L., and Fulcher, M. (2004). Division of labor among lesbian and heterosexual parenting couples: correlates of specialized versus shared patterns. *J. Adult Dev.* 11, 179–189.
- Pfeffer, C. (2010). “Women's work”? Women partners of transgender men doing housework and emotion work. *J. Marriage Fam.* 72, 165–183. doi: 10.1111/j.1741-3737.2009.00690.x
- Presser, H. B. (1994). Employment schedules among dual-earner spouses and the division of the household labor by gender. *Am. Sociol. Rev.* 59, 348–364.
- Radloff, L. S. (1977). The CES-D scale: a self-report depression scale for research in the general population. *Appl. Psychol. Measure.* 1, 385–401. doi: 10.1177/014662167700100306
- Saginak, K., and Saginak, M. (2005). Balancing work and family: equity, gender, and marital satisfaction. *Fam. J.* 13, 162–166. doi: 10.1177/1066480704273230
- Silver, H., and Goldscheider, F. (1994). Flexible work and housework: work and family constraints on women's domestic labor*. *Soc. Forces* 72, 1103–1119.
- Spanier, G. B. (1976). Measuring dyadic adjustment: new scales for assessing the quality of marriage and similar dyads. *J. Marriage Fam.* 38, 15–28. doi: 10.2307/350547
- Stotzer, R., Herman, J., and Hasenbush, A. (2014). *Transgender Parenting: a Review of Existing Research*. Los Angeles, CA: The Williams Institute.
- Sutphin, S. (2010). The division of child care tasks in same-sex couples. *J. GLBT Fam. Stud.* 9, 474–491. doi: 10.1080/1550428X.2013.826043
- Sutphin, S. (2013). The division of child care tasks in same-sex couples. *J. GLBT Fam. Stud.* 9, 474–491. doi: 10.1080/1550428X.2013.826043
- Tao, W., Janzen, B. L., and Abonyi, S. (2010). Gender, division of unpaid family work and psychological distress in dual-earner families. *Clin. Pract. Epidemiol. Mental Health* 6, 36–46. doi: 10.2174/1745017901006010036
- Tornello, S. L., Kruczkowski, S., and Patterson, C. (2015a). Division of labor and relationship quality among male same-sex couples who became fathers via surrogacy. *J. GLBT Fam. Stud.* 11, 375–394. doi: 10.1080/1550428X.2015.1018471
- Tornello, S. L., Sonnenberg, B. N., and Patterson, C. J. (2015b). Division of labor among gay fathers: associations with parent, couple, and child adjustment. *Psychol. Sex. Orient. Gender Divers.* 2, 365–375. doi: 10.1037/sgd0000109
- Vanfraussen, K., Ponjaert-Kristoffersen, I., and Brewaeys, A. (2003). Family functioning in lesbian families created by donor insemination. *Am. J. Orthopsychiatr.* 73, 78–90. doi: 10.1037/0002-9432.73.1.78
- Yavorsky, J. E., Dush, C. M. K., and Schoppe-Sullivan, S. J. (2015). The production of inequality: the gender division of labor across the transition to parenthood. *J. Marriage Fam.* 77, 662–679. doi: 10.1111/jomf.12189

Conflict of Interest: The author declares that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Tornello. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Pathways to Fatherhood: Psychological Well-Being Among Israeli Gay Fathers Through Surrogacy, Gay Fathers Through Previous Heterosexual Relationships, and Heterosexual Fathers

Geva Shenkman^{1*†}, Ofer Siboni¹, Fiona Tasker² and Pedro Alexandre Costa³

¹ School of Psychology, Interdisciplinary Center Herzliya, Herzliya, Israel, ² Department of Psychological Sciences, Birkbeck, University of London, London, United Kingdom, ³ William James Center for Research, ISPA – Instituto Universitário, Lisbon, Portugal

OPEN ACCESS

Edited by:

Magdalena Zadkowska,
University of Gdańsk, Poland

Reviewed by:

Barry Adam,
University of Windsor, Canada
Rachel H. Farr,
University of Kentucky, United States
Vittorio Lingiardi,
Sapienza University of Rome, Italy

*Correspondence:

Geva Shenkman
geva.shenkman@idc.ac.il

†ORCID:

Geva Shenkman
orcid.org/0000-0002-5263-8888

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 03 October 2019

Accepted: 13 January 2020

Published: 29 January 2020

Citation:

Shenkman G, Siboni O, Tasker F and Costa PA (2020) Pathways to Fatherhood: Psychological Well-Being Among Israeli Gay Fathers Through Surrogacy, Gay Fathers Through Previous Heterosexual Relationships, and Heterosexual Fathers. *Front. Psychol.* 11:91. doi: 10.3389/fpsyg.2020.00091

This study explored differences in psychological well-being as assessed by life satisfaction, parenthood satisfaction, depressive symptoms and the Big Five personality dimensions among 219 Israeli fathers; 76 gay men who had become fathers through a heterosexual relationship, 63 gay men who had become fathers through surrogacy, and 78 heterosexual men. After controlling for sociodemographic characteristics, gay fathers through surrogacy reported greater satisfaction with parenthood, greater satisfaction with their lives, and reported higher levels of extraversion when compared to heterosexual fathers. No significant differences emerged between the three groups on depressive symptoms, neuroticism, conscientiousness, agreeableness, and openness to experience. These findings emphasize the predominant similarities and some possible differences on psychological well-being between the different paths to fatherhood. This study is one of the first to compare several paths to fatherhood on psychological well-being, thus illuminating the contribution of fatherhood route to psychological well-being in an era where gay men are increasingly becoming fathers in diverse ways.

Keywords: gay fathers, same-sex parenting, surrogacy, parenthood satisfaction, Big Five, personality dimensions, sexual orientation, well-being

INTRODUCTION

In light of social, political, and technological developments, gay men are becoming fathers nowadays more than ever before (Carneiro et al., 2017; Carone et al., 2017b). Gay fatherhood has attracted growing research attention in recent years in varied countries (e.g., Tornello et al., 2011; Shenkman and Shmotkin, 2014; Baiocco et al., 2018; Bos et al., 2018), and has focused both on the development of children of gay fathers, alongside the psychological functioning of the parents themselves (e.g., Goldberg et al., 2010; Tornello and Patterson, 2015; Tornello et al., 2015; Shenkman and Shmotkin, 2016, 2019; Farr, 2017; Patterson, 2017; Green et al., 2019), yet little attention has been given to the comparison between different paths to gay fatherhood both in

the developmental domain of the children and the psychological well-being of the parents (Tasker, 2013). Thus, this study aims to examine the broad concept of psychological well-being (as indicated by parenthood satisfaction, depressive symptoms, life satisfaction, and the Big Five personality dimensions) among three groups of Israeli fathers: gay men who had become fathers through surrogacy, gay fathers through a previous heterosexual relationship, and heterosexual fathers.

Our current study dwells in the theoretical framework of the family systems theory (Cox and Paley, 1997) which suggests that the development and adaptation of both children and parents are influenced and shaped not only by the family subsystems (e.g., parents and children) but also by the broader socio-cultural context. The sociocultural environment of Israel is a particularly rich terrain for exploring the similarities and differences in psychological well-being as a function of fatherhood route. On the one hand, a familistic society, which Israel is a prime example, promotes and values childbearing more highly than many other Western nations and sanctifies parenthood as the primary path to social acceptance (Tsfati and Ben-Ari, 2019). On the other hand, Israel enacts multiple legal hardships upon gay men who wish to become parents. For example, surrogacy services are not legal for same-sex couples in Israel though they are legal for heterosexual couples, and gay men who wish to become parents via surrogacy turn to highly expensive overseas surrogacy services in South East Asia and North America (Teman, 2010). In addition, the opportunities for gay men to adopt are extremely restricted (Gross, 2014), which makes the surrogacy path, though encompassing multiple ordeals for Israeli gay men, one of the preferred routes to gay fatherhood (Birenbaum-Carmeli, 2016; Tsfati and Ben-Ari, 2019). Succeeding to achieve fatherhood through this desired but difficult path might be linked with a gain in well-being among gay men (e.g., Erez and Shenkman, 2016) and therefore, stands as one of the primary rationales for expecting differences in psychological well-being outcomes as a function of fatherhood route. Also, the above-mentioned conflicting messages from the Israeli socio-cultural context, make it even more interesting to understand whether the different paths chosen by gay fathers relate simply to cohort differences or psychological characteristics, or whether these pathways are linked to distinct differences in psychological well-being in comparison to the patterns recorded by heterosexual fathers.

The current study adopted a comparative approach to examine differences between the three paths to fatherhood. This comparative approach in the context of LGBT families has previously produced important information regarding disparities between heterosexual and gay/lesbian parents with respect to marital and parental rights, division of labor, and well-being (e.g., Hatzenbuehler et al., 2010; Reczek and Umberson, 2012; Shenkman, 2018). However, the comparative approach between gay/lesbian and heterosexual parented families also has been criticized as between-group designs focus primarily on differences based on sexual identities, while other identities that are salient to the experience of LGBT individuals and families become invisible (Fish and Russell, 2018). Our current comparative design,

included both a comparison with heterosexual fathers and a comparison between two pathways and experiences of gay fatherhood. Thus, we cast light on different experiences of gay fatherhood while also keeping a point of comparison with heterosexual counterparts.

Pathways to Gay Fatherhood

Four common routes are associated with gay fatherhood worldwide (e.g., Tasker and Patterson, 2007). These include gay men who had become fathers through a previous heterosexual relationship; gay men who had become fathers through adoption; gay men who had become fathers through shared parenting in agreement with a woman; and gay men who had become fathers through surrogacy. In the current study we will focus on the first and last, which are commonly considered as the most distinct in representing two polar social contexts (Tornello and Patterson, 2015). Gay parenting through a previous heterosexual relationship is commonly associated with fatherhood among middle-aged and older gay men who grew up in an environment in which their sexual orientation was considered as pathological and opportunities to become a parent outside of a heterosexual relationship were almost non-existent (Morrow, 2001; Tasker and Patterson, 2007; Tasker, 2013). In contrast gay fatherhood through surrogacy is associated with contemporary planned gay-fathers families, and is achieved through the use of progressive fertility technologies involving donated eggs, *in vitro* fertilization, and surrogacy with at least some liberal state policies allowing gay men access to these procedures (e.g., Carone et al., 2018a,b). Extremely scarce are studies that directly compare between different pathways to gay fatherhood (e.g., Carroll, 2018), probably because of difficulties inherent in achieving sufficient sample size for each group to allow quantitative comparisons (Roy et al., 2015). Thus, many studies that focus on gay fatherhood tend to combine different paths under one group of “gay fathers” or to concentrate on a single parenthood path (e.g., Shenkman and Shmotkin, 2016; Carone et al., 2017a,b).

While comparisons between different pathways to gay fatherhood are scarce, some comparisons between gay fathers through surrogacy and heterosexual fathers via assisted reproduction have been conducted. Van Rijn-van Gelderen et al. (2018) for example compared the well-being of gay fathers through surrogacy with heterosexual IVF parent families from three European countries (United Kingdom, the Netherlands, and France) and found no differences on parental stress, depression, anxiety, or relationship satisfaction between the two groups.

Shenkman et al. (2018), compared Israeli gay fathers with children from a previous heterosexual relationship and heterosexual fathers and found gay fathers reported higher levels of personal growth (feelings of continued development and self-improvement alongside a sense of personal fulfillment). The authors suggested that gay fathers from a previous heterosexual relationship had probably overcome numerous challenges entailed in the complex course of coming out to oneself and their ex-spouse and children. Coping successfully with such challenges could result in the construction of a new

meaning to life, which might then explain the high levels of personal growth displayed. In another Israeli study, gay men who had pursued several different routes to gay fatherhood (fatherhood through surrogacy, a shared parenting agreement with a woman, and adoption) were compared with heterosexual fathers. Some differences between gay and heterosexual fathers emerged showing gay fathers reporting greater satisfaction with life and general happiness than did heterosexual fathers (Erez and Shenkman, 2016). No group differences were observed in self-reported positive and negative emotions. This lack of difference between gay fathers from a variety of routes to parenthood and heterosexual fathers on negative emotions, alongside the absence of differences on levels of neuroticism and depressive symptomatology, was again confirmed by Shenkman and Shmotkin (2019). Thus, in a familistic society such as Israel, success in becoming a gay father might ameliorate the adverse consequences of minority stress, thus resulting in no difference or even more positive psychological well-being outcomes for gay men compared with heterosexual men upon attaining fatherhood (Shenkman and Shmotkin, 2014, 2016, 2019).

Research exploring differences between gay and heterosexual men on Costa and McCrae's (1992) Big Five personality traits, namely, extraversion, neuroticism, conscientiousness, agreeableness, and openness to experience, has produced mixed results. While some research teams have found no profound differences between the groups on personality traits in countries such as Israel and New Zealand (e.g., Greaves et al., 2017; Ifrah et al., 2018), others have indicated that gay men were slightly higher than heterosexual men on agreeableness, conscientiousness, neuroticism, and openness to experience (e.g., Lippa, 2005; Zheng et al., 2011). Significant results have been interpreted in light of minority stress theory (Meyer, 2003) and the possible association between greater exposure to prejudice, discrimination, and social disapproval and particular personality features (Zheng et al., 2011). It was proposed, for example, that gay men and lesbian women may experience, on average, higher levels of neuroticism (e.g., higher levels of anxiety and depression and reduced levels of self-esteem) compared to heterosexual men and women, because of the stress related to their prevalent experience with prejudice and discrimination (Lippa, 2005). However, these studies did not specifically focus upon gay fathers.

Research Hypotheses

The current research hypotheses were derived from the literature comparing gay fathers (single route and combined routes) with heterosexual fathers and a consideration of the Israeli societal climate that highly esteems childrearing (e.g., Shenkman, 2012; Erez and Shenkman, 2016; Shenkman and Shmotkin, 2019). From the literature on the route to surrogacy for gay men and other results suggesting more positive outcomes in psychological well-being for parents who contended with difficulties prior to parenthood (Taubman-Ben-Ari, 2012, 2014; Shenkman and Shmotkin, 2016), we hypothesized that gay fathers who had become fathers via surrogacy would score higher than heterosexual fathers on parenthood satisfaction and life satisfaction. Considering prior findings suggesting enhanced life meaning for gay fathers through heterosexual relationship in

comparison to heterosexual fathers (Shenkman et al., 2018), we hypothesized that the former group would score also higher on life satisfaction.

As research on personality dimensions as a function of fatherhood route is quite novel, and given the exploratory nature of these anticipated analyses, we did not formulate specific hypotheses regarding differences between the study groups on personality dimensions. However, we did expect to find a difference between gay fathers through surrogacy and heterosexual fathers or gay fathers through a previous heterosexual relationship on extraversion, such that gay fathers through surrogacy would report higher levels of extraversion. Our rationale for this centered on the characteristics of extraversion and the characteristics of the surrogacy path for Israeli gay men. The Five Factor Model of personality has situated extraversion as a preference for higher interpersonal interaction, activity level, and stimulation, whereas introversion indicates the opposite tendencies (Costa and McCrae, 1992). Thus, extraverts prefer attending to the outer world of objective events placing an emphasis on active involvement in the environment and in developing larger social support networks whereas introverts do not. We suggest that these features of extraversion are especially relevant for Israeli gay men seeking surrogacy. Because surrogacy is not legal for same-sex couples in Israel, gay men pursuing surrogacy turn to extremely expensive overseas surrogacy services in South-east Asia and the United States of America. This journey to fatherhood therefore requires several active steps to be taken by gay men, such as reaching out to specialist lawyers in Israel and abroad, undergoing specific medical and psychological examinations in Israel and abroad, choosing and securing an egg donor, choosing a surrogate and building a relationship with her, undertaking several journeys to the country of surrogacy while the surrogacy is being conducted, and dealing with the extensive bureaucracy surrounding the registration of a newborn born abroad as an Israeli citizen (Ziv and Freund-Eschar, 2015). Therefore, we thought that the successful pursuit of surrogacy might be associated with extraversion. Similarly, it was suggested that sexual identity disclosure and extraversion might be associated (e.g., Clausell and Roisman, 2009), thus, in the process of pursuing surrogacy, which requires multiple disclosures to relevant services, it could be assumed that there would be a link between disclosure, extraversion, and the surrogacy path. Based on these rationales, we predicted that gay fathers through surrogacy would report higher levels of extraversion than heterosexual fathers or gay fathers through a heterosexual relationship.

MATERIALS AND METHODS

Participants

The participants included Israeli gay and heterosexual fathers that were selected from two larger samples. The first, including 692 gay men (aged 16–84, $M = 42.20$, $SD = 14.23$) who were recruited in the years 2010–2016, and the second, including 317 gay and heterosexual men (aged 18–85, $M = 38.13$, $SD = 9.43$)

who were recruited in 2013–2014. Participants in both samples were fathers and also non-fathers, and were recruited via targeted sampling (see section “Procedure”). These samples were drawn from a larger research project that explored psychological well-being and adverse experiences among cisgender men throughout their lifespans. Participants for the current analysis who were not biological fathers, who did not become fathers through surrogacy or a heterosexual relationship, and those who identified themselves other than exclusively gay or exclusively heterosexual were excluded from the current analyses as we aimed to focus on the ends of the Kinsey scale. Thus, the sample for the current study comprised: 76 gay men who had become fathers through a heterosexual relationship (mean age 57.84, $SD = 7.56$), 63 gay men who had become fathers through surrogacy (mean age 39.11, $SD = 5.56$), and 78 heterosexual fathers (mean age 38.99, $SD = 7.90$).

Table 1 shows sociodemographic characteristics of the three study groups. Gay fathers through a heterosexual relationship were older than either gay fathers through surrogacy or heterosexual fathers, $F(2,212) = 169.37$, $p < 0.001$, $\eta^2 = 0.615$. Most of the participants in each of the study groups were born in Israel, though gay fathers who had become fathers through a heterosexual relationship were slightly more likely to have been born outside of Israel, $\chi^2(2) = 12.06$, $p = 0.002$, Cramer’s $V = 0.235$. Most participants had a University level education, and reported an average to high economic status, with gay fathers through a heterosexual relationship reporting a lower economic status than heterosexual fathers and gay fathers through surrogacy, $F(2,216) = 8.33$, $p < 0.001$, $\eta^2 = 0.072$. Most participants reported good or very good physical health, with gay fathers through a heterosexual relationship reporting somewhat poorer health status than heterosexual fathers and gay fathers through surrogacy, $F(2,214) = 4.20$, $p = 0.016$, $\eta^2 = 0.038$. Further, most of the participants were secular, though gay fathers who had become fathers through surrogacy were more likely to declare themselves as secular when compared with gay fathers who had become fathers through a heterosexual relationship and heterosexual fathers, $\chi^2(2) = 7.75$, $p = 0.021$, Cramer’s $V = 0.188$. Most participants identified as Jewish, and lived in a city. While most gay fathers who had become fathers through surrogacy and heterosexual fathers were in a committed romantic relationship, this was the case for only about a half of the gay fathers who had become fathers through a heterosexual relationship, $\chi^2(2) = 20.39$, $p < 0.001$, Cramer’s $V = 0.305$. The average number of children was two among heterosexual and gay fathers through surrogacy, and three for the gay fathers through a heterosexual relationship, $F(2,216) = 26.15$, $p < 0.001$, $\eta^2 = 0.195$. The average child’s age was approximately six year for the heterosexual father group, approximately two for gay fathers through surrogacy, and approximately 28 for gay fathers through a heterosexual relationship, $F(2,215) = 341.98$, $p < 0.001$, $\eta^2 = 0.761$. The greatest likelihood of having children living with them at home was among gay fathers through surrogacy, then among heterosexual fathers, and lastly among gay fathers with children from a heterosexual relationship, $\chi^2(2) = 128.07$, $p < 0.001$, Cramer’s $V = 0.770$. All these significant differences were controlled for in later analyses.

Measures

Sociodemographic Variables

A 7-point self-rating scale was used to classify participants’ sexual orientation (Kinsey et al., 1948) ranging from 0 (*exclusively heterosexual*, identifying the heterosexual men as participants) to 6 (*exclusively homosexual*, identifying the gay men as participants). We have also assessed self-acceptance of one’s sexual orientation among gay participants by the following item: “To what extent do you accept your sexual orientation?” The item was rated on a scale ranging 1 (*not at all*) to 5 (*very much*). This item is thought to reflect the central component of sexual identity (Elizur and Mintzer, 2001), and a similar item assessment had been used with an Israeli sample previously (Shenkman, 2012). Other sociodemographic queries such as education level (ranging from 1, *elementary or no education* to 5, *University education*), self-rated economic status (ranging from 1, *low*, to 5, *high*), and self-rated religiousness (divided into *secular* versus *traditionalist or religious*), along with their encoded categories, are presented in **Table 1**. It should be noted that we have used a self-rated economic status measure, i.e., a subjective assessment rather than objective report based on actual income. This subjective measure has proved to be a reliable measure of self-reported economic status with high compliance in previous studies (e.g., Ifrah et al., 2018; Shenkman et al., 2019) and has been shown to be associated with actual income (e.g., Litwin and Sapir, 2009).

Big Five Inventory (BFI)

This 44-item measure was designed to allow a quick and efficient assessment of the Big Five personality dimensions: extraversion, neuroticism, conscientiousness, agreeableness, and openness to experience (John and Srivastava, 1999). Each item includes one or two prototypical trait adjectives with some clarifying information. For example, openness to experience is measured by 10 items such as “original, comes up with new ideas” and “curious about many different things.” Respondents are asked to rate the extent to which they are characterized by each item on a scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Each personality dimension was scored as the respondent’s mean of the respective items, where higher scores indicated higher levels of each dimension. Cronbach’s alpha coefficients for extraversion, neuroticism, openness to experience, conscientiousness, and agreeableness in the current sample as a whole were 0.77, 0.86, 0.76, 0.81, and 0.69, respectively. Among heterosexual fathers the coefficients were 0.74, 0.87, 0.64, 0.86, and 0.76. Among gay fathers through a previous heterosexual relationship the coefficients were 0.80, 0.86, 0.75, 0.62, and 0.60. Among gay fathers through surrogacy the coefficients were 0.80, 0.86, 0.86, 0.86, and 0.63. This measure has been widely used worldwide (e.g., Prinzie et al., 2009) including in Israel (e.g., Ifrah et al., 2018).

Center for Epidemiologic Studies Depression Scale (CES-D)

Center for Epidemiologic Studies Depression Scale was designed to assess self-reported symptoms associated with depression (Radloff, 1977). This measure consists of 20 items describing major components of depressive symptomology. For each item,

TABLE 1 | Sociodemographic characteristics of the study groups.

Variable	Heterosexual fathers (<i>n</i> = 78)	Gay fathers through a heterosexual relationship (<i>n</i> = 76)	Gay fathers through Surrogacy (<i>n</i> = 63)	Difference test
Age (range)	29–66	39–78	30–56	$F(2,212) = 169.37^{***}$, $\eta^2 = 0.615$
<i>M</i>	38.99 ^a	58.17 ^b	39.11 ^a	
<i>SD</i>	7.90	7.79	5.56	
Place of birth (%)				$\chi^2(2) = 12.06^{**}$, Cramer's $V = 0.235$
(0) Israel	92.3	79.5	96.8	
(1) Other	7.7	20.5	3.2	
Education level (%)				$F(2,216) = 0.46$, $\eta^2 = 0.004$
(1) Elementary or no education	1.3	1.3	0	
(2) Partial high school	0	5.1	1.6	
(3) Full high school	5.1	3.8	9.5	
(4) Higher education	5.1	3.8	3.2	
(5) Academic education	88.5	85.9	85.7	
<i>M</i>	4.79	4.68	4.73	
<i>SD</i>	0.65	0.86	0.70	
Self-rated economic status (%)				$F(2,216) = 8.33^{***}$, $\eta^2 = 0.072$
(1) Low	2.6	1.3	0	
(2) Below average	0	6.4	1.6	
(3) Average	32.1	47.4	22.2	
(4) Above average	46.2	35.9	52.4	
(5) High	19.2	9.0	23.8	
<i>M</i>	3.79 ^a	3.45 ^b	3.98 ^a	
<i>SD</i>	0.84	0.80	0.72	
Self-rated health (%)				$F(2,214) = 4.20^*$, $\eta^2 = 0.038$
(1) Bad	0	0	0	
(2) Not so good	0	2.6	0	
(3) Fair	5.1	16.9	3.2	
(4) Good	46.2	41.6	48.4	
(5) Very good	48.7	39.0	48.4	
<i>M</i>	4.44 ^a	4.17 ^b	4.45 ^a	
<i>SD</i>	0.59	0.80	0.56	
Self-rated religiousness (%)				$\chi^2(2) = 7.75^*$, Cramer's $V = 0.188$
(0) Secular	84.6	87.2	98.4	
(1) Other	15.4	12.8	1.6	
Family religion (%)				$\chi^2(2) = 1.15$, Cramer's $V = 0.073$
(0) Jewish	98.7	100	98.4	
(1) Other	1.3	0	1.6	
Children at home (%)				$\chi^2(2) = 128.07^{***}$, Cramer's $V = 0.770$
(0) No	8.0	78.2	0	
(1) Yes	92.0	21.8	100	
Place of residence (%)				$\chi^2(2) = 2.25$, Cramer's $V = 0.101$
(0) City	78.2	84.6	87.3	
(1) Rural	21.8	15.4	12.7	
Relationship status (%)				$\chi^2(2) = 20.39^{***}$, Cramer's $V = 0.305$
(0) Not in relationship	19.2	46.2	15.9	
(1) In relationship	80.8	53.8	84.1	

(Continued)

TABLE 1 | Continued

Variable	Heterosexual fathers (n = 78)	Gay fathers through a heterosexual relationship (n = 76)	Gay fathers through Surrogacy (n = 63)	Difference test
Number of children (range)	1–6	1–8	1–3	$F(2,216) = 26.15^{***}$, $\eta^2 = 0.195$
M	1.87 ^a	2.79 ^b	1.71 ^a	
SD	0.92	1.25	0.60	
Children's age ¹ (range)	0.08–31.5	9–47	1–17	$F(2,215) = 341.98^{***}$, $\eta^2 = 0.761$
M	5.86 ^a	28.29 ^b	2.29 ^c	
SD	7.19	7.95	2.49	

The ANOVA tests regarding age, education level, self-rated economic status, self-rated health, number of children, and children's age compared the respective mean ratings of the three study groups. Significant pairwise comparisons are noted by different superscripts within each sociodemographic variable (according to Bonferroni post hoc tests, $p < 0.05$). ¹ Calculated as the mean age of each participant's children. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

respondents were asked to rate how often they had felt or behaved this way in the past week (e.g., “I felt that I could not shake off the blues even with help from my family or friends” and “I felt hopeful about the future,” the latter was one of four reverse-coded items). Ratings ranged from 1 (*rarely or none of the time*) to 4 (*most or all of the time*). The respondent's score was the items' mean rating, with higher scores referring to more depressive symptoms. Cronbach's alpha coefficient in the current sample as a whole was 0.87, and respectively 0.85, 0.87, and 0.89 among the heterosexual fathers, the gay fathers through a previous heterosexual relationship, and the gay fathers through surrogacy. This instrument has been extensively used in research and for clinical purposes (Stansbury et al., 2006) and has been widely used in Israel (e.g., Shenkman, 2012; Shenkman et al., 2017).

Satisfaction With Life Scale (SWLS)

This measure was constructed to assess life satisfaction as the cognitive concomitant of subjective well-being (Diener et al., 1985). The measure consists of five items referring to judgments of one's life (e.g., “The conditions of my life are excellent”) and rated by respondents on a scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The score was the items' mean rating. Cronbach's alpha coefficient of SWLS in the current sample as a whole was 0.88, and respectively 0.91, 0.84, and 0.88 among the heterosexual fathers, the gay fathers through a previous heterosexual relationship, and the gay fathers through surrogacy. This measure proved to have highly favorable psychometric properties (Pavot and Diener, 1993) and has been used with Israeli samples (e.g., Shenkman and Shmotkin, 2011).

Parenthood Satisfaction

The following item assessed satisfaction from parenthood: “Please rank your satisfaction with being a parent.” This item was rated on a scale ranging 1 (*not at all*) to 10 (*very much*). This item is based on item number 8 from the self-perception of the parental role questionnaire (SPPR; MacPhee and Benson, 1986).

Procedure

Participants were sampled during one of three waves of recruitment. First, participants were recruited via targeted sampling through various gay social groups across Israel in

2010. Second and third waves of targeted sampling were launched in 2013–2014 and 2015–2016 focusing on recruiting heterosexual fathers and topping up the gay fathers group. By targeted sampling we meant a purposeful, systematic method listing specified sub-populations and aiming to recruit adequate numbers of participants within each of these sub-populations (Watters and Biernacki, 1989). Actual recruitment of participants was then conducted through gay venues, internet forums and websites dealing with LGB issues and/or fatherhood in general, as well as through social media outlets (such as Facebook pages focusing on gay men, gay fathers, or heterosexual fathers) through which contact information for the study was provided to potentially interested participants. The study was advertised to all sub-populations as a study exploring how people maintain happiness in the face of various life adversities. Participants were asked if they were fathers, and if they answered positively, they were further asked to specify the specific route to fatherhood that they had taken (e.g., through adoption, surrogacy, sharing parenting with a woman, or fathering a child through previous heterosexual relationship). All participants were informed that the questionnaires were anonymous and that participation was voluntary, and all participants gave their consent for data entry into the study. Participants were invited to write to the researchers if any question arose, such that a more thorough debriefing could be done. The study was approved for ethical requirement by Tel-Aviv University and the Interdisciplinary Center (IDC), Herzliya, Institutional Review Boards.

Data Analysis Plan

Data analyses were conducted using SPSS 25. Pearson correlations were first calculated between the main study variables, and preliminary analyses were conducted to identify potential covariates by examining differences between the three groups (gay fathers through surrogacy; gay fathers who had become fathers through a heterosexual relationship; and heterosexual fathers) in the demographic variables using chi-square tests and *F*-tests. Variables with significant differences were controlled in all subsequent analyses.

To test whether the study groups differed on psychological well-being (indicated by depressive symptoms, life satisfaction,

and parenthood satisfaction), multivariate analyses of covariance (MANCOVAs) were conducted with pairwise comparisons using Bonferroni-corrected *post hoc* tests. In this analysis, the study group (gay fathers through surrogacy; gay fathers who had become fathers through a heterosexual relationship; and heterosexual fathers) served as the independent variable, depressive symptoms, life satisfaction, and parenthood satisfaction served separately as dependent variables, and nine sociodemographic variables found to significantly differ among the fathers' groups were used as covariates (age, place of birth, economic status, self-rated health, self-rated religiousness, relationship status, number of children, children mean age, and children residency).

To test whether the study groups differed on the extraversion dimension an analyses of covariance (ANCOVA) was conducted with pairwise comparisons using Bonferroni-corrected *post hoc* tests. In this analysis the study group (gay fathers through surrogacy; gay fathers who had become fathers through a heterosexual relationship; and heterosexual fathers) served as the independent variable, extraversion served as the dependent variable, and nine sociodemographic variables found to significantly differ among the three fathers' groups were used as covariates. As we did not formulate specific predictions regarding differences between the study groups on the other personality dimensions, four exploratory ANCOVAs were also conducted in the same way with neuroticism, conscientiousness, agreeableness, and openness to experience each serving as dependent variables. Thus, personality dimensions were tested separately by ANCOVAs and not together in a MANCOVA, as they can not be considered as adjacent aspects (a design decision reinforced by the general lack of correlation between most dimensions).

A power analysis using the G*Power 3.1.9.4 computer indicated that a minimum total sample size of 155 people would be needed to detect a medium effect size of $\eta_p^2 = 0.06$ with a conventional power of 0.80 at 0.05 significance level, using ANCOVA with nine covariates and three groups.

RESULTS

Associations Between the Main Variables Under Study

Pearson correlations between the main study variables (the Big Five dimensions, depressive symptoms, life satisfaction and parenthood satisfaction) revealed that higher levels of extraversion were significantly correlated with higher levels of openness to experience, life satisfaction, and lower levels of depressive symptomatology (see **Table 2**). Neuroticism and depression levels were positively correlated. Higher neuroticism also was correlated with lower levels of conscientiousness, agreeableness, life satisfaction, and parenthood satisfaction. Higher levels of conscientiousness were correlated with lower levels of depressive symptoms and higher levels of life satisfaction. Similarly, higher levels of agreeableness were correlated with lower levels of depressive symptoms and higher levels of life satisfaction. Higher levels of depressive

symptomatology were correlated with lower levels of life satisfaction and parenthood satisfaction.

Correlations with the sociodemographic variables that served as controls in our study revealed that being older was significantly correlated with reports of worse physical health ($r = -0.28$, $p < 0.001$), a greater chance of children living outside of home ($r = -0.74$, $p < 0.001$), of having more children ($r = 0.52$, $p < 0.001$), of having older children ($r = 0.93$, $p < 0.001$), and reports of lower levels of satisfaction with parenthood ($r = -0.17$, $p = 0.011$). Higher economic status was significantly correlated with better physical health ($r = 0.16$, $p = 0.019$), greater chance of having children living at home ($r = 0.20$, $p = 0.004$), of having younger children ($r = -0.18$, $p = 0.007$), of being in a romantic relationship ($r = 0.28$, $p < 0.001$), higher levels of life satisfaction ($r = 0.39$, $p < 0.001$), higher levels of parenthood satisfaction ($r = 0.15$, $p = 0.030$), lower levels of depressive symptomatology ($r = -0.26$, $p < 0.001$), and higher levels of extraversion ($r = 0.18$, $p = 0.009$). Better physical health status was significantly correlated with having younger children ($r = -0.23$, $p = 0.001$), a greater likelihood of being in a romantic relationship ($r = 0.15$, $p = 0.029$), and higher levels of life satisfaction ($r = 0.16$, $p = 0.017$) and parenthood satisfaction ($r = 0.20$, $p = 0.004$). Identifying as non-secular (i.e., traditionalist or religious) was significantly correlated with having more children ($r = 0.20$, $p = 0.003$). Having more children was also significantly correlated with having older children ($r = 0.52$, $p < 0.001$), with children not living at home ($r = -0.41$, $p < 0.001$), and lower levels of parenthood satisfaction ($r = -0.14$, $p = 0.042$). Being in a romantic relationship was correlated with higher levels of life satisfaction ($r = 0.26$, $p < 0.001$) and parenthood satisfaction ($r = 0.27$, $p < 0.001$), and lower levels of depressive symptomatology ($r = -0.23$, $p = 0.001$).

Comparing the Different Pathways to Fatherhood

To test whether gay fathers who had become fathers through surrogacy would score higher than heterosexual fathers on parenthood satisfaction and life satisfaction and whether gay fathers through heterosexual relationship would score higher on life satisfaction in comparison to heterosexual fathers, we conducted a multivariate analysis of covariance (MANCOVA) with *post hoc* pairwise comparisons. Study group (gay fathers through surrogacy; gay fathers who had become fathers through a heterosexual relationship; and heterosexual fathers) served as the independent variable, depressive symptoms, life satisfaction, and parenthood satisfaction served separately as the dependent variable, and the nine sociodemographic variables found to significantly differ between the fathers' groups (age, place of birth, economic status, self-rated health, self-rated religious classification, relationship status, number of children, mean age of children, and child residency) were used as covariates.

The results indicated a significant multivariate effect, Wilks's $\Lambda = 0.894$, $F(6,348) = 3.345$, $p = 0.003$, $\eta_p^2 = 0.055$. When looking at the univariate effects (see **Table 3**), life satisfaction significantly differed among the three groups, $F(2,176) = 4.827$, $p = 0.009$, $\eta_p^2 = 0.052$. Pairwise comparisons

TABLE 2 | Means, standard deviations and correlations between the study variables.

Variable	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8
(1) Extraversion	3.52	0.69	–	–0.17*	0.10	0.02	0.16*	–0.33***	0.43***	0.08
(2) Neuroticism	2.44	0.84		–	–0.26***	–0.48***	–0.08	0.50***	–0.35***	–0.23**
(3) Conscientiousness	3.80	0.68			–	0.14	0.11	–0.31***	0.17*	0.03
(4) Agreeableness	3.83	0.57				–	0.09	–0.18*	0.26***	–0.01
(5) Openness	3.98	0.57					–	–0.06	0.09	0.07
(6) Depressive symptoms	1.53	0.39						–	–0.53***	–0.23**
(7) Life satisfaction	5.03	1.25							–	0.30***
(8) Parenthood satisfaction	8.56	1.78								–

N = 219. Reported are Pearson correlations. **p* < 0.05, ***p* < 0.01, ****p* < 0.001.

TABLE 3 | Multivariate Analysis of Covariance of Group (Gay Fathers through surrogacy, Gay Fathers through Heterosexual Relationship, and Heterosexual Fathers) for Psychological Wellbeing Concomitants (Age, Place of Birth, Economic Status, Self-Rated Health, Self-Rated Religiousness, Relationship Status, Number of Children, Children's Mean Age and Children's Residency Controlled).

Dependent measures	Wilks's Λ	Descriptives						F	p	Partial eta squared
		Gay fathers through surrogacy		Gay fathers through heterosexual relationship		Heterosexual fathers				
		M	SD	M	SD	M	SD			
	0.894							$F(6,348) = 3.345$	0.003	0.055
Depressive symptoms		1.50 ^a	0.40	1.60 ^a	0.43	1.50 ^a	0.35	$F(2,176) = 1.806$	0.167	0.020
Life satisfaction		5.31 ^a	1.16	5.18 ^{a,b}	1.08	4.70 ^b	1.39	$F(2,176) = 4.827$	0.009	0.052
Parenthood satisfaction		9.34 ^a	0.90	8.03 ^a	2.24	8.27 ^b	1.72	$F(2,176) = 3.556$	0.031	0.039

N = 188. The MANCOVA test regarding depressive symptoms, life satisfaction and parenthood satisfaction compared the respective mean ratings of the three study groups. Significant pairwise comparisons are noted by different superscripts within each sociodemographic variable (according to Bonferroni post hoc tests).

revealed that gay men who became fathers through surrogacy ($M = 5.31$, $SD = 1.16$) scored significantly higher than heterosexual fathers ($M = 4.70$, $SD = 1.39$) on life satisfaction ($p = 0.002$), with no significant differences between gay men who became fathers through surrogacy and gay fathers who became fathers through a heterosexual relationship ($M = 5.18$, $SD = 1.08$; $p = 0.161$) or between gay fathers who became fathers through a heterosexual relationship and heterosexual fathers ($p = 0.804$).

Univariate effects also showed that parenthood satisfaction significantly differed among the three groups, $F(2,176) = 3.556$, $p = 0.031$, $\eta_p^2 = 0.039$. Pairwise comparisons revealed that gay men who became fathers through surrogacy ($M = 9.34$, $SD = 0.90$) scored significantly higher than heterosexual fathers ($M = 8.27$, $SD = 1.72$) on parenthood satisfaction ($p = 0.018$), with no significant differences between gay men who became fathers through surrogacy and gay fathers who became fathers through a heterosexual relationship ($M = 8.03$, $SD = 1.72$; $p = 0.870$) or between gay fathers who became fathers through a heterosexual relationship and heterosexual fathers ($p = 0.216$). The differences between gay fathers through surrogacy and heterosexual fathers on life satisfaction and parenthood satisfaction remained significant when Bonferroni corrections were applied.

As shown in **Table 3**, univariate effects additionally showed that depressive symptomatology did not significantly differed among the three groups, $F(2,176) = 1.806$, $p = 0.167$.

To test our prediction that gay fathers through surrogacy would report higher levels of extraversion than either heterosexual fathers or gay fathers through a heterosexual relationship, we conducted univariate analysis of covariance (ANCOVA) with *post hoc* pairwise comparisons. Study group (gay fathers through surrogacy; gay fathers who had become fathers through a heterosexual relationship; and heterosexual fathers) served as the independent variable, extraversion served as the dependent variable, and the nine sociodemographic variables found to significantly differ between the fathers' groups (age, place of birth, economic status, self-rated health, self-rated religiousness, relationship status, number of children, children mean age, and child residency) were used as covariates.

The results displayed in **Table 4** indicated that extraversion significantly differed among the three groups, $F(2,179) = 4.182$, $p = 0.017$, $\eta_p^2 = 0.045$. Pairwise comparisons revealed that gay men who became fathers through surrogacy ($M = 3.64$, $SD = 0.72$) scored significantly higher on extraversion than heterosexual fathers ($M = 2.39$, $SD = 0.87$; $p = 0.006$). Gay men who became fathers through surrogacy also scored significantly higher on extraversion than gay fathers who became fathers through a

TABLE 4 | Analysis of Covariance of Group (Gay Fathers through surrogacy, Gay Fathers through Heterosexual Relationship, and Heterosexual Fathers) for Extraversion, Neuroticism, Conscientiousness, Agreeableness, and Openness (Age, Place of Birth, Economic Status, Self-Rated Health, Self-Rated Religiousness, Relationship Status, Number of Children, Children's Mean Age and Children's Residency Controlled).

Dependent measures	Descriptives						<i>F</i>	<i>p</i>	Partial eta squared
	Gay fathers through surrogacy		Gay fathers through heterosexual relationship		Heterosexual fathers				
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Extraversion	3.64 ^a	0.72	3.50 ^b	0.69	3.40 ^b	0.63	<i>F</i> (2,179) = 4.182	0.017	0.045
Neuroticism	2.55 ^a	0.80	2.35 ^a	0.84	2.39 ^a	0.87	<i>F</i> (2,179) = 1.325	0.268	0.015
Conscientiousness	3.73 ^a	0.76	3.84 ^a	0.54	3.85 ^a	0.75	<i>F</i> (2,179) = 0.204	0.816	0.002
Agreeableness	3.65 ^a	0.55	3.99 ^a	0.48	3.85 ^a	0.64	<i>F</i> (2,179) = 0.795	0.453	0.009
Openness	3.92 ^a	0.67	3.96 ^a	0.58	4.03 ^a	0.47	<i>F</i> (2,179) = 1.146	0.320	0.013

N = 191. The ANCOVA tests regarding Extraversion, Neuroticism, Conscientiousness, Agreeableness, and Openness compared the respective mean ratings of the three study groups. Significant pairwise comparisons are noted by different superscripts within each sociodemographic variable.

heterosexual relationship ($M = 3.50$, $SD = 0.69$; $p = 0.038$). No significant difference was found between gay fathers who became fathers through a heterosexual relationship and heterosexual fathers ($p = 0.458$). The differences between gay fathers through surrogacy and heterosexual fathers on extraversion remained significant when Bonferroni corrections were applied. However, the difference between gay fathers through surrogacy and gay fathers who became fathers through a heterosexual relationship was non-significant.

We also ran four exploratory separate ANCOVAs to examine whether the three fatherhood pathways groups would differ on neuroticism, conscientiousness, agreeableness, or openness to experience. As seen in **Table 4**, no significant differences among the three groups emerged on either neuroticism, $F(2,179) = 1.325$, $p = 0.268$; conscientiousness, $F(2,179) = 0.204$, $p = 0.816$; agreeableness, $F(2,179) = 0.795$, $p = 0.453$; or openness to experience, $F(2,179) = 1.146$, $p = 0.320$.

Another exploratory ANCOVA was conducted to explore whether gay fathers who became fathers through surrogacy would differ from gay fathers who became fathers through a heterosexual relationship on self-acceptance of one's sexual orientation, after controlling for the nine sociodemographic covariates. Results indicated that gay fathers through surrogacy did not differ from gay fathers through a previous heterosexual relationship on self-acceptance of sexual orientation, $F(1,121) = 1.195$, $p = 0.277$, partial $\eta^2 = 0.010$ ($M = 4.80$, $SD = 0.60$ and $M = 4.69$, $SD = 0.52$, respectively).

DISCUSSION

In line with our hypothesis, gay fathers via surrogacy scored higher on parenthood satisfaction and life satisfaction when compared with heterosexual fathers. In line with our prediction regarding the level of extraversion, gay fathers via surrogacy also scored higher on extraversion compared with heterosexual fathers. No significant differences were found between the three fatherhood pathway groups on levels of depressive symptoms or the personality dimensions of neuroticism, conscientiousness, agreeableness, and openness to experience. Contrary to our

prediction, gay fathers who became fathers via a heterosexual relationship did not differ from heterosexual fathers on life satisfaction.

The exploratory comparisons between the two studied pathways to gay fatherhood, namely gay fathers through surrogacy and gay fathers through a heterosexual relationship revealed that gay fathers through surrogacy did not differ on any of the psychological well-being indicators from gay fathers who had children through a previous heterosexual relationship. Thus, our research results mostly indicate similarities between the psychological well-being profiles of these two groups.

Our findings revealed greater parenthood satisfaction and general life satisfaction specifically among gay fathers through surrogacy, compared with heterosexual fathers, echo but also extend those of previous studies which suggested that gay fathers within the Israeli context generally indicated higher levels of subjective well-being than did heterosexual fathers (e.g., Erez and Shenkman, 2016). It was suggested that in a society that promotes parenthood as a major marker of social acceptance, yet imposes sociolegal restrictions on access, creates considerable challenge for gay men in their quest for fatherhood (e.g., Shenkman, 2012). Therefore, success in overcoming the difficulties in becoming a parent, may then result in a triumphant sense of personal achievement given the importance of this accomplishment (Armesto, 2002). Personal achievement could be manifested in enhanced well-being (Shenkman and Shmotkin, 2014; Erez and Shenkman, 2016), plus elevated levels of parenthood satisfaction. These findings of elevated parenthood satisfaction and life satisfaction also correspond to findings from studies of heterosexual women with fertility problems who experienced elevated levels of well-being and satisfaction with parenthood upon overcoming obstacles to become a mother (e.g., Taubman-Ben-Ari, 2014). Nevertheless, it could also be argued that gay men with greater well-being and life satisfaction may have more personal resources to pursue parenthood. In particular those with buoyant well-being may have the resilience to undergo the demanding process of surrogacy. Thus, the current differences between gay fathers through surrogacy and heterosexual fathers on life satisfaction may simply reflect these different selection factors. In the same vein self-selection may operate through

demographic variables which could in turn differentiate between fatherhood groupings on well-being and on extraversion. Here it should be noted that higher levels of education and income were also shown to associate with higher scores on extraversion (e.g., Viinikainen et al., 2010), and higher extraversion was also found to associate with higher levels of well-being (e.g., Diener et al., 1992). In our study, we aimed to ameliorate some of these issues by controlling multiple sociodemographic variables including economic status and education, when differences between fatherhood groups were found. A longitudinal study could shed further light on this issue.

The lack of difference between gay fathers through surrogacy, gay fathers through a heterosexual relationship, and heterosexual fathers on reported symptoms of depression is in line with those of a previous study showing no differences between gay fathers through surrogacy and heterosexual fathers on parental stress, depression, and anxiety (Van Rijn-van Gelderen et al., 2018). Similarly, the absence of difference between the fatherhood groups on most Big Five personality dimensions has echoed findings from previous studies suggesting no profound differences in general between gay and heterosexual men on personality traits (e.g., Greaves et al., 2017; Ifrah et al., 2018). However, in the current study we did find higher extraversion scores among Israeli gay fathers through surrogacy in comparison to those recorded by heterosexual fathers. This new finding may suggest that the unique pathway to gay fatherhood through surrogacy, could be associated with extraversion as characterized by an active stance when facing the world (Costa and McCrae, 1992), plausibly because the pathway entails very active coping strategies when contacting lawyers, doctors, and surrogates abroad (Ziv and Freund-Eschar, 2015).

Our exploratory comparisons between gay fathers through surrogacy and gay fathers through a previous heterosexual relationship did not detect any well-being differences between these groups, thus we conclude that these two groups are similar in terms of psychological well-being concomitants. This lack of difference is interesting as these two groups can be seen to represent two distinct sociocultural contexts. The gay men who became fathers through surrogacy represented a younger cohort, who grew up mainly in an Israeli society that acknowledged, at list to some extent, gay rights and several options to becoming fathers. In contrast, in our study gay fathers via a heterosexual relationship were representatives of middle aged and older Israeli gay men, who grew up when society proclaimed homosexuality as pathology and neither acknowledged nor offered multiple pathways to gay fatherhood (Morrow, 2001; Tasker and Patterson, 2007). It could be argued that gay fathers through a heterosexual relationship, who risked or endured possibly long lasting stigma, that in turn contributed to maintaining high levels of vigilance and secrecy over their sexual orientation (Kimmel, 2014), might experience adverse well-being outcomes, such as lower life satisfaction (Erdley et al., 2014). Similarly, it could be further argued that the path to gay fatherhood via a previous heterosexual relationship could pose additional difficulties for co-parenting with an ex-partner, that could potentially negatively impact upon life satisfaction and well-being in general (e.g., Tasker, 2013). Nevertheless, our

current results indicate that in spite of these potentially very different circumstances, no significant differences between the two groups of gay fathers were found.

Contrary to our prediction, gay fathers via a heterosexual relationship did not report greater life satisfaction than did heterosexual fathers. This was not in line with findings from a previous study that showed that gay fathers with children from a previous heterosexual relationship reported greater meaning in life, as indicated by a sense of personal growth, when compared with heterosexual fathers (Shenkman et al., 2018). It could be argued that personal growth, which is a core indicator for meaning in life, could be considered as a different, sometimes even orthogonal, component of well-being that significantly differs from life satisfaction *per se* (Keyes et al., 2002). Personal growth is representative of eudemonic well-being, namely a reflection upon existential challenges of life in relation to meaning restructuring (Ryff, 1995, 2014). However, life satisfaction is a representative of hedonic well-being, namely a reflection of pleasant and unpleasant affect in sizing up one's immediate experience (Lucas et al., 1996). Therefore, our findings may extend prior knowledge of Israeli gay fathers through a heterosexual relationship (Shenkman et al., 2018) by locating the difference between this group and heterosexual fathers in the eudemonic sphere, while suggesting no differences on the hedonic one.

Limitations and Strengths

Several limitations of this study should be noted. First, this study relied on self-reports, thus possibly suffering from biases of self-presentation. Secondly, the study groups were not created from random or representative sampling. Thirdly, the cross-sectional design of the study did not allow inferences about causality. Additionally, parenthood satisfaction was measured through a single item, which poses difficulties with assessing reliability and validity of this measure. It is also unclear whether a small number of participants' partners completed this survey thus introducing an in-accountable level of dependency within the data. Future research should ensure that this confounding variable is controlled. Finally, while the local viewpoint of the Israeli society may be seen as one of the strengths of this study, it may also entail culture-bound limitations on the generalizability of the results. All these methodological limitations echo prevalent complications in studying gay populations (McCormack, 2014).

Alongside these limitations, the current study has also a number of strengths. First, this was a pioneering examination of differences in psychological well-being between three pathways to parenthood, namely heterosexual fatherhood, gay fatherhood through a heterosexual relationship and gay fatherhood through surrogacy. While previous studies tended to combine several paths to gay fatherhood into one group of gay fathers due to difficulties in reaching a sufficient sample size for each path (e.g., Shenkman and Shmotkin, 2016), the current sample coherently presented the different routes, and avoided confounding effects relating to group compilation (Meyer and Wilson, 2009). Nevertheless, the entry route into heterosexual fatherhood was not explored, although the marital status of the heterosexual fathers was noted. Thus, the use of assisted reproductive

technology to achieve fatherhood was not controlled for, and could be a further possible confounding factor in making group comparisons between gay fathers via surrogacy and heterosexual fathers. Second, the study design systematically compared the study groups while controlling for the confounding effects of nine sociodemographic variables, such as the age of the fathers, relationship status, economic status, number of children and children's age. Another strength of this study lay in the fact that it was conducted in Israel, which presents an interesting sociocultural setting for studies of gay fatherhood by juxtaposing a society that cherishes child rearing and has a fairly liberal legal system, but which also has a traditional religious base enshrining many heterosexist and sometimes homonegative norms into the sociolegal system (Shenkman and Shmotkin, 2011). Findings concerning gay fathers from this society may expand our knowledge of cultural variation in the experiences of gay fathers.

CONCLUSION AND IMPLICATIONS FOR PRACTICE

This study was one of the first to compare three routes to fatherhood, namely heterosexual fathers, gay fathers through a heterosexual relationship and gay fathers through surrogacy, on diverse psychological well-being concomitants. Our results mainly emphasize the psychological well-being of fathers and the similarities between the fatherhood groups. Nevertheless, some differences did appear, especially when comparing heterosexual fathers with gay fathers through surrogacy. These differences portray gay fathers through surrogacy as more extraverted and more satisfied with both their parenthood and their life in general. While minority stress theory (Meyer, 2003) usually sheds light on the adversities gay men may endure due to their minority status, the current findings suggest that gay fatherhood, at least within the Israeli context, can be interpreted as a resiliency factor, meaning that in such a familistic and pronatal society, success in becoming a gay father might ameliorate some of the adverse outcomes of minority stress, and therefore result in no differences or even more positive outcomes for gay fathers through surrogacy than for heterosexual fathers on psychological well-being indicators (Shenkman and Shmotkin, 2014, 2019). This interpretation echoes the theoretical framework regarding family systems (Cox and Paley, 1997) that guided our study, and which proposes that psychological outcomes of both children and parents are also influenced by the broader socio-cultural context, and in our current study, the Israeli familistic society.

An application of the current findings appears especially relevant to clinicians working with gay fathers, revealing the

potential benefits of fatherhood through surrogacy in regards to psychological well-being. Additionally, it seems that psycho-education focused both on the resiliency as well as the difficulties of gay life trajectories, could allow for a more integrative and perhaps optimistic outlook on gay fathers as a minority group.

Our current results also suggest that the novel comparison of two paths to gay fatherhood, namely through a previous heterosexual relationship or through surrogacy, revealed no differences in psychological well-being even when controlling for sociodemographic factors. Thus, future studies should further explore other variables, such as ones that relates to social and family support, when trying to pinpoint more similarities and differences between these two groups. Future studies should also explore bisexual and transgender fathers who were not included in the current study and are even less studied groups when comparing different routes to fatherhood.

DATA AVAILABILITY STATEMENT

The datasets generated for this study are available on request to the corresponding author.

ETHICS STATEMENT

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. The studies involving human participants were reviewed and approved by the Tel Aviv University and the Interdisciplinary Center Herzliya, Institutional Review Boards. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

All authors listed have made a substantial, direct and intellectual contribution to the work, and approved it for publication.

ACKNOWLEDGMENTS

We thankfully acknowledge the great help of Kfir Ifrah, Dov Shmotkin, and Chen Erez in collecting some of the data.

REFERENCES

- Armesto, J. C. (2002). Developmental and contextual factors that influence gay fathers' parental competence: a review of the literature. *Psychol. Men Masc.* 3, 67–78. doi: 10.1037/1524-9220.3.2.67
- Baiocco, R., Carone, N., Ioverno, S., and Lingiardi, V. (2018). Same-sex and different-sex parent families in Italy: is parents' sexual orientation associated with child health outcomes and parental dimensions? *J. Dev. Behav. Pediatr.* 39, 555–563. doi: 10.1097/DBP.0000000000000583
- Birenbaum-Carmeli, D. (2016). Thirty-five years of assisted reproductive technologies in Israel. *Reprod. Biomed. Soc.* 2, 16–23. doi: 10.1016/j.rbms.2016.05.004
- Bos, H. M., Kuyper, L., and Gartrell, N. K. (2018). A population-based comparison of female and male same-sex parent and different-sex parent households. *Fam. Process* 57, 148–164. doi: 10.1111/famp.12278

- Carneiro, F. A., Tasker, F., Salinas-Quiroz, F., Leal, I., and Costa, P. A. (2017). Are the fathers alright? A systematic and critical review of studies on gay and bisexual fatherhood. *Front. Psychol.* 8:1636. doi: 10.3389/fpsyg.2017.01636
- Carone, N., Baiocco, R., Ioverno, S., Chirumbolo, A., and Lingardi, V. (2017a). Same-sex parent families in Italy: validation of the coparenting scale-revised for lesbian mothers and gay fathers. *Eur. J. Dev. Psychol.* 14, 367–379.
- Carone, N., Baiocco, R., and Lingardi, V. (2017b). Single fathers by choice using surrogacy: why men decide to have a child as a single parent. *Hum. Reprod.* 32, 1871–1879. doi: 10.1093/humrep/dex245
- Carone, N., Baiocco, R., Manzi, D., Antonucci, C., Caricato, V., Pagliarulo, E., et al. (2018a). Surrogacy families headed by gay men: relationships with surrogates and egg donors, fathers' decisions over disclosure and children's views on their surrogacy origins. *Hum. Reprod.* 33, 248–257. doi: 10.1093/humrep/dex362
- Carone, N., Lingardi, V., Chirumbolo, A., and Baiocco, R. (2018b). Italian gay father families formed by surrogacy: parenting, stigmatization and children's psychological adjustment. *Dev. Psychol.* 54, 1904–1916. doi: 10.1037/dev0000571
- Carroll, M. (2018). Gay fathers on the margins: race, class, marital status, and pathway to parenthood. *Fam. Relat.* 67, 104–117. doi: 10.1111/fare.12300
- Clausell, E., and Roisman, G. I. (2009). Outness, big five personality traits, and same-sex relationship quality. *J. Soc. Pers. Relat.* 26, 211–226. doi: 10.1177/0265407509106711
- Costa, P. T., and McCrae, R. R. (1992). *Professional Manual: Revised NEO Personality Inventory (NEO PI-R) and NEO Five-Factor Inventory (NEO-FFI)*. Odessa, FL: Psychological Assessment Resources.
- Cox, M. J., and Paley, B. (1997). Families as systems. *Ann. Rev. Psychol.* 48, 243–267. doi: 10.1146/annurev.psych.48.1.243
- Diener, E., Emmons, R. A., Larsen, R. J., and Griffin, G. (1985). The satisfaction with life scale. *J. Pers. Assess.* 49, 71–75. doi: 10.1207/s15327752jpa4901_13
- Diener, E., Sandvik, E. D., Pavot, W., and Fujita, F. (1992). Extraversion and subjective well-being in a US national probability sample. *J. Res. Pers.* 26, 205–215. doi: 10.1016/0092-6566(92)90039-7
- Elizur, Y., and Mintzer, A. (2001). A framework for the formation of gay male identity: processes associated with adult attachment style and support from family and friends. *Arch. Sex. Behav.* 30, 143–167. doi: 10.1023/a:1002725217345
- Erdley, S. D., Anklam, D. D., and Reardon, C. C. (2014). Breaking barriers and building bridges: understanding the pervasive needs of older LGBT adults and the value of social work in health care. *J. Gerontol. Soc. Work* 57, 362–385. doi: 10.1080/01634372.2013.871381
- Erez, C., and Shenkman, G. (2016). Gay dads are happier: subjective well-being among gay and heterosexual fathers. *J. GLBT Fam. Stud.* 12, 451–467. doi: 10.1080/1550428X.2015.1102668
- Farr, R. H. (2017). Does parental sexual orientation matter? A longitudinal follow-up of adoptive families with school-age children. *Dev. Psychol.* 53, 252–264. doi: 10.1037/dev0000228
- Fish, J. N., and Russell, S. T. (2018). Queering methodologies to understand queer families. *Fam. Relat.* 67, 12–25. doi: 10.1111/fare.12297
- Goldberg, A. E., Smith, J. Z., and Kashy, D. A. (2010). Pre-adoptive factors predicting lesbian, gay, and heterosexual couples' relationship quality across the transition to adoptive parenthood. *J. Fam. Psychol.* 24, 221–232. doi: 10.1037/a0019615
- Greaves, L. M., Barlow, F. K., Huang, Y., Stronge, S., and Sibley, C. G. (2017). Personality across sexual identity and gender in a national probability sample in New Zealand. *Sex Roles* 77, 653–662. doi: 10.1007/s11199-017-0752-0
- Green, R. J., Rubio, R. J., Rothblum, E. D., Bergman, K., and Katuzny, K. E. (2019). Gay fathers by surrogacy: prejudice, parenting, and well-being of female and male children. *Psychol. Sex. Orientat. Gend. Divers.* 6, 269–283. doi: 10.1037/sgd0000325
- Gross, A. (2014). The politics of LGBT rights in Israel and beyond: nationality, normativity & queer politics. *Colomb. Hum. Rights Law Rev.* 46, 82–151.
- Hatzenbuehler, M. L., McLaughlin, K. A., Keyes, K. M., and Hasin, D. S. (2010). The impact of institutional discrimination on psychiatric disorders in lesbian, gay, and bisexual populations: a prospective study. *Am. J. Public Health* 100, 452–459.
- Ifrah, K., Shenkman, G., and Shmotkin, D. (2018). How does sexual orientation relate to openness to experience in adulthood? *Pers. Individ. Diff.* 131, 164–173. doi: 10.1016/j.paid.2018.04.030
- John, O. P., and Srivastava, S. (1999). "The big five trait taxonomy: history, measurement, and theoretical perspectives," in *Handbook of Personality: Theory and Research*, eds L. A. Pervin, and O. P. John, (New York, NY: Guilford), 102–138.
- Keyes, C. L. M., Shmotkin, D., and Ryff, C. D. (2002). Optimizing well-being: the empirical encounter of two traditions. *J. Pers. Soc. Psychol.* 82, 1007–1022. doi: 10.1037//0022-3514.82.6.1007
- Kimmel, D. (2014). Lesbian, gay, bisexual, and transgender aging concerns. *Clin. Gerontol.* 37, 49–63. doi: 10.1080/07317115.2014.847310
- Kinsey, A. C., Pomeroy, W. B., and Martin, C. E. (1948). *Sexual Behavior in the Human Male*. Philadelphia, PA: W. B. Saunders.
- Lippa, R. A. (2005). Sexual orientation and personality. *Ann. Rev. Sex Res.* 16, 119–153. doi: 10.1080/10532528.2005.10559831
- Litwin, H., and Sapir, E. V. (2009). Perceived income adequacy among older adults in 12 countries: findings from the survey of health, ageing, and retirement in Europe. *Gerontologist* 49, 397–406. doi: 10.1093/geront/gnp036
- Lucas, R. E., Diener, E., and Suh, E. (1996). Discriminant validity of well-being measures. *J. Pers. Soc. Psychol.* 71, 616–628. doi: 10.1037/00223514.71.3.616
- MacPhee, D., and Benson, J. (1986). Influences on maternal self-perceptions. *Infant Behav. Dev.* 9, 10–13. doi: 10.1016/S0163-6383(86)80239-9
- McCormack, M. (2014). Innovative sampling and participant recruitment in sexuality research. *J. Soc. Pers. Relatsh.* 31, 475–481. doi: 10.1177/0265407514522889
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychol. Bull.* 129, 674–697. doi: 10.1037/0033-2909.129.5.674
- Meyer, I. H., and Wilson, P. A. (2009). Sampling lesbian, gay, and bisexual population. *J. Couns. Psychol.* 56, 23–31. doi: 10.1037/a0014587
- Morrow, D. F. (2001). Older gays and lesbians: surviving a generation of hate and violence. *J. Gay Lesbian Soc. Serv.* 13, 151–169. doi: 10.1300/J041v13n01_11
- Patterson, C. J. (2017). Parents' sexual orientation and children's development. *Child Dev. Perspect.* 11, 45–49. doi: 10.1111/cdep.12207
- Pavot, W., and Diener, E. (1993). Review of satisfaction with life scale. *Psychol. Assess.* 5, 164–172. doi: 10.1037/1040-3590.5.2.164
- Prinz, P., Stams, G. J. J., Dekovic, M., Reijntjes, A. H., and Belsky, J. (2009). The relations between parents' big five personality factors and parenting: a meta-analytic review. *J. Pers. Soc. Psychol.* 97, 351–362. doi: 10.1037/a0015823
- Radloff, L. S. (1977). The CES-D Scale: a self-report depression scale for research in the general population. *Appl. Psychol. Meas.* 1, 385–401. doi: 10.1177/014662167700100306
- Reczek, C., and Umberson, D. (2012). Gender, health behavior, and intimate relationships: lesbian, gay, and straight contexts. *Soc. Sci. Med.* 74, 1783–1790. doi: 10.1016/j.socscimed.2011.11.011
- Roy, K., Zvonkovic, A., Goldberg, A., Sharp, E., and LaRossa, R. (2015). Sampling richness and qualitative integrity: challenges for research with families. *J. Marriage Fam.* 77, 243–260. doi: 10.1111/jomf.12147
- Ryff, C. D. (1995). Psychological well-being in adult life. *Curr. Dir. Psychol.* 4, 99–104. doi: 10.1111/1467-8721.ep10772395
- Ryff, C. D. (2014). Psychological well-being revisited: advances in the science and practice of eudaimonia. *Psychother. Psychosom.* 83, 10–28. doi: 10.1159/000353263
- Shenkman, G. (2012). The gap between fatherhood and couplehood desires among Israeli gay men and estimations of their likelihood. *J. Fam. Psychol.* 26, 828–832. doi: 10.1037/a0029471
- Shenkman, G. (2018). The association between basic need satisfaction in relationship and personal growth among lesbian and heterosexual mothers. *J. Soc. Pers. Relatsh.* 35, 246–262. doi: 10.1177/0265407516681192
- Shenkman, G., Ifrah, K., and Shmotkin, D. (2017). The association between negative attitudes towards aging and mental health among middle-aged and older gay and heterosexual men in Israel. *Aging Ment. Health* 22, 503–511. doi: 10.1080/13607863.2016.1274374
- Shenkman, G., Ifrah, K., and Shmotkin, D. (2018). Meaning in life among middle-aged and older gay and heterosexual fathers. *J. Fam. Issues* 39, 2155–2173. doi: 10.1177/0192513X17741922
- Shenkman, G., and Shmotkin, D. (2011). Mental health among Israeli homosexual adolescents and young adults. *J. Homosex.* 58, 97–116. doi: 10.1080/00918369.2011.533630

- Shenkman, G., and Shmotkin, D. (2014). "Kids are joy": psychological welfare among Israeli gay fathers. *J. Fam. Issues* 35, 1926–1939. doi: 10.1177/0192513X13489300
- Shenkman, G., and Shmotkin, D. (2016). The association between self-perceived parental role and meaning in life among gay and heterosexual fathers. *J. Fam. Psychol.* 30, 552–561. doi: 10.1037/fam0000213
- Shenkman, G., and Shmotkin, D. (2019). Self-perceived parental role and mental health concomitants among Israeli gay and heterosexual fathers. *J. Homosex.* 7, 1–21. doi: 10.1080/00918369.2018.1555392
- Shenkman, G., Stein, Y., and Bos, H. (2019). The mediating role of attachment avoidance in the association between sexual orientation and mental health. *J. Homosex.* 20, 1–15. doi: 10.1080/00918369.2019.1656507
- Stansbury, J. P., Ried, L. D., andVELOZO, C. A. (2006). Unidimensionality and bandwidth in the center for epidemiologic studies depression (CES-D) scale. *J. Pers. Assess.* 86, 10–22. doi: 10.1207/s15327752jpa8601_03
- Tasker, F. (2013). "Lesbian and gay parenting post-heterosexual divorce and separation," in *LGBT-Parent Families: Innovations in Research and Implications for Practice*, eds A. Goldberg, and K. Allen, (New York, NY: Springer), 3–20.
- Tasker, F., and Patterson, C. J. (2007). Research on gay and lesbian parenting: retrospect and prospect. *J. GLBT Fam. Stud.* 3, 9–34. doi: 10.1300/J461v03n02_02
- Taubman-Ben-Ari, O. (2012). "Becoming and developing: personal growth in the wake of parenthood and grandparenthood," in *Meaning, Mortality, and Choice – The Social Psychology of Existential Concerns*, eds P. R. Shaver, and M. Mikulincer, (Washington, D C: APA Press), 163–181.
- Taubman-Ben-Ari, O. (2014). "Well-being and personal growth in emerging motherhood: and what about meaning?" in *Meaning in Positive and Existential Psychology*, eds A. Batthyany, and P. Russo-Netzer, (New York, NY: Springer), 415–434.
- Teman, E. (2010). "The last outpost of the nuclear family: a cultural critique of Israeli surrogacy policy," in *Kin, Gen, Community: Reproductive Technologies Among Jewish Israelis*, eds D. Birenbaum-Carmeli, and Y. S. Carmeli, (New York, NY: Berghahn Books), 107–122.
- Tornello, S. L., Farr, R. H., and Patterson, C. J. (2011). Predictors of parenting stress among gay adoptive fathers in the United States. *J. Fam. Psychol.* 25, 591–600. doi: 10.1037/a0024480
- Tornello, S. L., and Patterson, C. J. (2015). Timing of parenthood and experiences of gay fathers: a life course perspective. *J. GLBT Fam. Stud.* 11, 35–56. doi: 10.1080/1550428X.2013.878681
- Tornello, S. L., Sonnenberg, B. N., and Patterson, C. J. (2015). Division of labor among gay fathers: associations with parent, couple, and child adjustment. *Psychol. Sex. Orientat. Gend. Divers.* 2, 365–375. doi: 10.1037/sgd0000109
- Tsfati, M., and Ben-Ari, A. (2019). Between the social and the personal: Israeli male gay parents, surrogacy and socio-political concepts of parenthood and gender. *J. GLBT Fam. Stud.* 15, 42–57. doi: 10.1080/1550428X.2017.1413475
- Van Rijn-van Gelderen, L., Bos, H. W. M., Jorgensen, T. D., Ellis-Davies, K., Winstanley, A., Golombok, S., et al. (2018). Wellbeing of gay fathers with children born through surrogacy: a comparison with lesbian-mother families and heterosexual IVF parent families. *Hum. Reprod.* 33, 101–108. doi: 10.1093/humrep/dex339
- Viinikainen, J., Kokko, K., Pulkkinen, L., and Pehkonen, J. (2010). Personality and labour market income: evidence from longitudinal data. *Labour* 24, 201–220. doi: 10.1111/j.1467-9914.2010.00477.x
- Watters, J. K., and Biernacki, P. (1989). Targeted sampling: options for the study of hidden populations. *Soc. Probl.* 36, 416–430. doi: 10.2307/800824
- Zheng, L., Lippa, R. A., and Zheng, Y. (2011). Sex and sexual orientation differences in personality in China. *Arch. Sex. Behav.* 40, 533–541. doi: 10.1007/s10508-010-9700-6
- Ziv, I., and Freund-Eschar, Y. (2015). The pregnancy experience of gay couples expecting a child through overseas surrogacy. *Fam. J.* 23, 158–166. doi: 10.1177/1066480714565107

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Shenkman, Siboni, Tasker and Costa. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Children's Exploration of Their Surrogacy Origins in Gay Two-Father Families: Longitudinal Associations With Child Attachment Security and Parental Scaffolding During Discussions About Conception

Nicola Carone^{1*}, Lavinia Barone¹, Demetria Manzi¹, Roberto Baiocco², Vittorio Lingiardi³ and Kathryn Kerns⁴

¹ Department of Brain and Behavioral Sciences, Lab Attachment and Parenting-LAG, University of Pavia, Pavia, Italy,

² Department of Developmental and Social Psychology, Sapienza University of Rome, Rome, Italy, ³ Department of Dynamic and Clinical Psychology, Sapienza University of Rome, Rome, Italy, ⁴ Department of Psychological Sciences, Kent State University, Kent, OH, United States

OPEN ACCESS

Edited by:

Hui Li,
Macquarie University, Australia

Reviewed by:

Jorge Gato,
Fundação para a Ciência e
Tecnologia, Portugal
Claudio Longobardi,
University of Turin, Italy
Francis Anne Teplitzky Carneiro,
William James Center for Research,
Portugal

*Correspondence:

Nicola Carone
nicola.carone@unipv.it

Specialty section:

This article was submitted to
Developmental Psychology,
a section of the journal
Frontiers in Psychology

Received: 17 November 2019

Accepted: 15 January 2020

Published: 31 January 2020

Citation:

Carone N, Barone L, Manzi D, Baiocco R, Lingiardi V and Kerns K (2020) Children's Exploration of Their Surrogacy Origins in Gay Two-Father Families: Longitudinal Associations With Child Attachment Security and Parental Scaffolding During Discussions About Conception. *Front. Psychol.* 11:112. doi: 10.3389/fpsyg.2020.00112

Evidence is lacking about the factors that are pivotal in enhancing the exploration of surrogacy origins in children of gay fathers during middle childhood. The present study examined the separate and combined influences of child attachment security and parental scaffolding (i.e., fathers' attempts to accept, encourage, and emotionally support their children's expression of thoughts and feelings) during discussions about conception on children's exploration of their surrogacy origins in 30 Italian children born to gay fathers through gestational surrogacy. Within each family, both father-child dyads ($n = 60$) participated in a 5-minute videotaped conversation regarding an aspect of the child's conception when children were mean aged 8.3 years (t_1). At this time, children were also administered the Security Scale Questionnaire to evaluate their attachment security. Approximately 18 months later (t_2 ; $M_{age} = 9.9$ years), children were interviewed about their surrogacy origins. Linear mixed models (LMMs) for longitudinal data indicated that, with higher levels of parental scaffolding, only children who perceived greater attachment security reported greater exploration of their surrogacy origins. The findings are the first to underscore the importance of conversations about surrogacy within the context of parent-child attachment relationships, as well as the importance of fathers sensitively supporting their children as they explore their origins during middle childhood. In doing so, it is expected that fathers will likely facilitate their children's positive integration of their surrogacy conception into a coherent sense of identity during adolescence.

Keywords: gay father family, surrogacy origins, attachment security, parental scaffolding, middle childhood

INTRODUCTION

An increasing number of gay men are having children via surrogacy (Norton et al., 2013; Blake et al., 2017; Carneiro et al., 2017)—a practice by which a woman (the “surrogate”) bears a child for the intended parent(s). Two types of surrogacy are possible: (1) *genetic* surrogacy, in which conception uses the sperm of one of the intended fathers and the egg of the surrogate, who carries the child to

term; and (2) *gestational* surrogacy, in which the surrogate has no genetic relationship to the child and fathers select an egg donor with whom they might have contact in the future (an open-identity donor) or one of whom they have no identifiable information (an anonymous donor)—although the possibility of achieving complete anonymity is in doubt (Harper et al., 2016). In Italy, where the present study was conducted—and similar to many other European countries (e.g., Spain, France, Sweden, Denmark)—both forms of surrogacy (i.e., genetic and gestational) are illegal; thus, those who wish to use surrogacy to conceive must do so transnationally (e.g., in California or Canada) (Carone et al., 2017; Sydsjö et al., 2019).

Similar to disclosure in lesbian and single parent families (Tallandini et al., 2016; Faccio et al., 2019), disclosure of a child's surrogacy origins in gay two-father families is thought to be relatively straightforward and to occur earlier than in heterosexual two-parent families, likely due to the visible absence of a mother and the child being raised by two fathers. However, to date, to the best of our knowledge, only two studies have investigated the manner in which disclosure of surrogacy conception occurs in this family type (Blake et al., 2016; Carone et al., 2018a). These studies found that almost all children were told (to different degrees) before the age of four about the involvement of a woman who carried them in her belly, though more sophisticated aspects related to the conception (e.g., the presence of another woman who donated an egg or the identity of the father who used his sperm to conceive) tended to be disclosed only when the children were older. Despite the significant contribution of these studies, however, evidence is lacking about the factors that are pivotal in enhancing exploration of surrogacy origins in children of gay fathers during middle childhood.

An investigation of this topic may be particularly appropriate when children are in middle childhood (aged 6–12 years), because, by the age of 6–8 years, children begin to grasp the significance of the biological concept of family and the implications of a lack of biological connections among family members (Solomon et al., 1996; Williams and Smith, 2010). For children born to gay fathers through surrogacy, such knowledge may raise questions about the nature of their family relationships (e.g., “Who is part of my family?”) and the role played by the surrogate and egg donor in their family arrangement (e.g., “Who am I genetically related to?” and “Whose body did I grow in?”). This pairs with the fact that, in middle childhood, children develop their social perspective-taking abilities and acquire new coping strategies, making them more capable of processing potentially stressful experiences (Compas et al., 2001).

At the beginning of middle childhood, in fact, children transition to primary school. For children of gay fathers, this transition may increase the likelihood that they will be confronted with family types that largely differ from theirs (e.g., heterosexual two-parent families through spontaneous conception) and this may lead them to examine what their family form means to them and to others. They may also be questioned by peers on the uniqueness of their family composition, in terms of both the absence of a mother and their conception through surrogacy. In this context, gay two-father families face a double task: fathers must create an

emotional atmosphere for their children to safely explore what surrogacy means to them and the implications of such conception; and children must have a family environment in which they are able to safely ask questions about their surrogacy conception whilst continuing to feel emotionally supported by their fathers.

In this regard, research with adoptive families (Wrobel et al., 1996, 2003; Brodzinsky, 2006; Skinner-Drawz et al., 2011; Farr et al., 2014) and assisted reproduction families (MacDougall et al., 2007; Isaksson et al., 2012; Tallandini et al., 2016; Van Parys et al., 2016a,b) has largely documented that communication about conception is a core task of families that have not been formed through spontaneous conception. Often, this communication is not a one-time event, but a dynamic process between parents and children that varies in intensity as children mature (Brodzinsky, 2005, 2006; MacDougall et al., 2007). Throughout this process, parental attitudes toward their children's conception may be even more important than the information disclosed or the frequency with which the subject is raised (Wrobel et al., 2003; Van Parys et al., 2016a,b).

One aspect which accounts for parental attitudes toward child's conception is *parental scaffolding*. Specifically, consistent with Leibowitz et al. (2002) definition, in the context of this study, parental scaffolding refers to parents' acceptance, encouragement, and emotional support of their children's expression of feelings about their surrogacy origins during discussions about conception. Translating both the findings of prior research (Wrobel et al., 2003; Van Parys et al., 2016a,b) and the idea of parental scaffolding in the context of gay two-father surrogacy families suggests that an open and sensitive exchange of surrogacy-related information and support of children's thoughts and feelings about their surrogacy conception should facilitate children's exploration of their unique origins. In this vein, one could expect that, when fathers facilitate open emotional discussions with their children and adapt to their changing needs for communication about surrogacy, the children are more likely to have positive feelings about their conception and feel free to explore their surrogacy origins. This prediction is supported by the literature on adoption (Grotevant, 1997; Kohler et al., 2002; Brodzinsky, 2005; Neil, 2012; Farr et al., 2014).

In addition to parental scaffolding during discussions about conception, from the perspective of attachment theory (Bowlby, 1988) the extent to which children feel free to explore their origins is also likely intertwined with their perceived attachment security to their fathers. The *secure base phenomenon* (Bowlby, 1988) is one of the key tenets of attachment theory and defines the purposeful balance between children's use of their parents as both a secure base from which to explore and learn about their surroundings and a safe haven to return to if a threat arises or fatigue or illness hits. In a similar vein, Grossmann et al. (2008) introduced the companion idea of *secure exploration* to refer to “a child's ability to organize emotions and behaviors open-mindedly, non-defensively, and with concentration when responding to “curious” events, and to do so with care; and the child's confidence in an attachment availability and helpfulness,

should help be needed” (p. 859). Both factors are then based on “attachment figure’s observable sensitivity and support during distressing situations, when the child’s attachment system or need to explore is aroused” (p. 859). In middle childhood—a period in which children begin to balance separateness from and connectedness to their parents (Bosmans and Kerns, 2015)—children may perceive any exploration of their surrogacy origins (e.g., exploring their thoughts and feelings toward the surrogate and/or egg donor; initiating conversations about their genetic origins and/or family structure) as threatening and intimidating, because it is new and unfamiliar, and because they do not know how their fathers will react to their curiosity (Lingiardi and Carone, 2019).

Preliminary indications that attachment theory is relevant for understanding children’s experiences of their origins in families formed by assisted reproduction stem from two studies conducted with children of lesbian and single mothers through donor insemination, during middle childhood (Zadeh et al., 2017) and adolescence (Slutsky et al., 2016). The findings of these studies showed that, across these developmental periods, donor-conceived children who reported secure-autonomous attachment to their mothers were more curious about their conception and felt more positive regarding their donor. However, both studies tested a linear association between attachment patterns and children’s exploration of their origins, and did not include parents’ own experiences of the assisted conception as, for example, parental scaffolding during discussions about conception. Specifically, the combined consideration of child attachment security and parental scaffolding seems crucial, as prior research with lesbian and single mother families through donor insemination have indicated that parents likely operate as “gatekeepers” who negotiate children’s relationship with their donor (Hertz, 2002). Furthermore, loyalty toward parents (especially the non-biological parent) may inhibit children from seeking information and expressing curiosity about their donor (Vanfraussen et al., 2003), and both parents and children may report discrepancies in the meaning and significance they attribute to the donor (Tasker and Granville, 2011).

By this perspective, individual variations in children’s explorations of their surrogacy origins may be best explained by considering how discussions about conception occur within the family and the extent to which the children feel secure in their attachment relationships with their fathers. Furthermore, these factors should be considered in conjunction, rather than separately. To this aim, the present study investigated the following research question: Does child attachment security longitudinally moderate the influence of parental scaffolding during discussions about conception on children’s exploration of their surrogacy origins? It was expected that, when fathers were emotionally supportive and encouraged their child’s expression of feelings and questions related to conception, children who reported greater attachment security to their fathers would be more likely to explore (i.e., to express interest in receiving more information/to show serious, reflective, or meaningful thinking about) their surrogacy origins than children with less secure attachment relationships.

MATERIALS AND METHODS

Participants

The sample comprised 30 children born through gestational surrogacy abroad and their 66 gay fathers. At time 1 (t1), children were mean aged 8.3 years ($SD = 1.8$; age range: 6–12 years), whereas at time 2 (t2; approximately 18 months later), children’s mean age was 9.9 years ($SD = 1.8$; age range: 7.5–13.5 years). In families with more than one child in the relevant age range, the oldest child was studied. At t1, families were recruited in the context of a larger, in-depth study of child adjustment and parenting in gay father surrogacy families (Carone et al., 2018b, 2019). Multiple strategies were used to include as diverse a sample as possible, through the main Italian association of same-sex parents ($n = 14$, 46.7%), same-sex parent Internet groups and forums ($n = 7$, 23.3%), events at which same-sex parents were in attendance ($n = 3$, 10.0%), and snowballing ($n = 6$, 20.0%). The inclusion criteria for gay father families were that the couple had lived together since the child’s birth, resided in Italy, and had conceived through surrogacy. **Table 1** presents socio-demographic details on the sample.

Procedure

Three researchers at t1 and one researcher at t2 visited families at home and administered the study measures (i.e., questionnaires, interviews, and observational tasks) to both fathers and children;

TABLE 1 | Descriptive statistics of socio-demographic information ($n = 30$ families).

	Gay two-father families ($n = 30$)
Child sex (male)	14 (46.7%)
Number of siblings	
0	10 (33.3%)
1	18 (60.0%)
2 or more	2 (6.7%)
Father ethnicity (Caucasian)	58 (96.7%)
Family residence	
Northern Italy	14 (46.7%)
Central Italy	15 (50.0%)
Southern Italy	1 (3.3%)
Father education (bachelor’s degree or higher)	49 (81.7%)
Father occupation (professional/managerial)	50 (83.3%)
Father work status (full-time)	60 (100%)
Length of couple relationship	
<10 years	8 (26.7%)
11–15 years	7 (23.3%)
> 15 years	15 (50.0%)
	<i>M (SD)</i>
Child age at t1 (months)	99.70 (20.01)
Child age at t2 (months)	117.87 (20.10)
Father age (years)	46.55 (6.61)
Annual household income	120,433.33 (55,138.66)

Where not otherwise specified, all information refers to t2. For the individual parent variables of ethnicity, education, occupation, work status, and age, the total n is 60, rather than 30.

all researchers had been trained in the study techniques. Study approval was obtained from the Ethics Committees of the Department of Developmental and Social Psychology, Sapienza University of Rome (at t1; Protocol Number: 4 VII/16), and the Department of Brain and Behavioral Sciences, University of Pavia (at t2; Protocol Number: 033/19). Written informed consent was obtained from all fathers, who also gave consent for their children to participate. Children gave verbal assent. All participants were reminded that their responses would be confidential and that participation in all or part of the study could be terminated at any time; such information was conveyed to the children in an age appropriate manner, both prior to and during the data collection. Of relevance, data for three children who took part in phase 1 of the study on their exploration of their surrogacy origins was not collected at t2 because their parents did not consent.

Measures

Child Attachment Security (at t1)

Children were administered the 21-item version of the Security Scale Questionnaire (Kerns et al., 2015; see also Carone et al., 2019) to assess their perceived attachment security to their fathers. In order to ensure that the youngest children (aged 6–7 years) understood the questions, each item was read aloud to them. Harter's (1982) "Some kids... Other kids..." format was used in administering this scale twice (one for each father) to each child in order to assess their safe haven (e.g., "Some kids feel their dad really understands them BUT Other kids feel like their dad really does not understand them") and secure base support constructs (e.g., "Some kids think their dad encourages them to be themselves BUT Other kids do not think their dad encourages them to be themselves")—which, together, define the secure base phenomenon (Bowlby, 1988). For each question, children indicated which statement was more characteristic of them and indicated whether the statement was *really true* (1) or *sort of true* (4) for them. In addition to generating two item scores (i.e., a safe haven score and a secure base score) for each parent, the scale also generates a total score of attachment security for each parent by averaging the item scores. Higher scores indicate higher levels of children's perceived attachment security. In the present study, only the total attachment security score for each father was used. The reliability and validity of the SS have been assessed in both child and adolescent samples, showing moderate stability over time and convergence with observations of children's interactions with their parents (Brumariu et al., 2018). In the present study, Cronbach's alpha was 0.78.

Parental Scaffolding During Surrogacy-Related Discussions (at t1)

Each father–child dyad was instructed to have a 5-minute conversation about an aspect of their child's surrogacy conception, with the researcher out of the room (he or she returned to the room once the 5 min had elapsed). The father–child dyads were not given any guidelines regarding a specific aspect of the surrogacy to discuss or how they should choose this aspect, because the manner in which they decided on an

aspect was considered indicative of their emotional openness (e.g., it was considered relevant if the child brought up an aspect and the father dismissed its significance or refused to talk about it); it was also thought that fathers' approaches to choosing an aspect to discuss would demonstrate meaningful parent–child differences in the discussion of emotionally charged events (Fivush, 1991). All 5-minute conversations were videotaped and later coded on both individual (i.e., parental scaffolding and children's emotional openness to discussing their feelings about their conception) and dyadic (i.e., the quality of the parent–child emotional conversation about the conception) dimensions. Only the individual coding of *parental scaffolding* (i.e., fathers' attempts to accept, encourage, and provide emotional support for their child's expression of feelings related to conception) was used, and this was rated on a 5-point Likert scale, with 1 describing fathers who simply noted the event without discussing it or engaged in an extremely short discussion without expressing any emotional support; and 5 describing fathers who asked their child to expand on his or her thoughts and feelings and helped the child to respond, and/or fathers who clearly acknowledged and encouraged their child to express his or her thoughts and feelings by validating and paraphrasing them, and/or fathers who elaborated on the emotional component of an event related to their child's conception. Scoring used the criteria indicated by Gentzler et al. (2005) and Leibowitz et al. (2002) for coding parent–child emotional communication. A second coder, blind to participant data, rated 30% of the interactions ($n = 18$); this resulted in an interrater reliability of $\kappa = 0.79$.

Children's Exploration of Their Surrogacy Origins (at t2)

Children were asked questions about their surrogacy conception information gap, including: "What more would you like to know about your surrogacy conception?" and "What information would you like?". Follow-up probes were used to determine the intensity of children's curiosity about the identified content. This interview format was adapted from the Minnesota/Texas Adoption Project (Grotevant and McRoy, 1997; Wrobel et al., 2013). The extent to which children were interested in and/or curious about their conception (shown, e.g., by questions about the surrogacy procedure or the egg donor's motivation, or by particular feelings expressed toward the surrogate) was considered an indicator of exploration of their surrogacy origins and was coded using a 4-point scale, on which (1) indicated children who expressed no interest in receiving additional information or children who showed no serious, reflective, or meaningful thinking about their surrogacy origins (no/minimal exploration); (2) indicated children who desired new information but claimed that knowing the information would not make a big personal difference to them, as well as children with low interest in the information (low exploration); (3) indicated children who wanted to gain particular information (moderate exploration); and (4) indicated children who stated an intense desire for particular information that was of high importance to them (great exploration). A second coder, blind to participant data, rated 30% of the interviews ($n = 9$); this resulted in an interrater reliability of $\kappa = 0.75$.

Data Analysis

To identify the likelihood that the data would detect the factors that best explained children's exploration of their surrogacy origins, given a set of parameters (Wagenmakers, 2007; van de Schoot et al., 2014), several linear mixed models (LMMs) for longitudinal data (Goldstein, 1988) were computed and compared. To overcome the possible limitations of the small sample size while maintaining predictive accuracy, LMMs were compared using the total coefficient of determination (TCD) and Bayesian information criterion (BIC) (Schwarz, 1978) methods. The TCD method shows the combined effect of model variables on the dependent variable; the BIC method measures the efficiency of the parameterized model in predicting data and penalizes according to model complexity (i.e., with respect to the number of unnecessary parameters). The higher the TCD (range 0–1), the more variance is explained by the model; the lower the BIC, the better the model fit. Consequently, the model with the highest TCD and lowest BIC can be said to best fit the data. The set of investigated predictors was comprised of parental scaffolding during discussions with their child about their child's conception, child attachment security, and children's and fathers' demographic information (i.e., child age and gender; parents' age, education, and annual household income), as well as the additive and interactive effects of these variables (with all variables centered in advance, in order to reduce multicollinearity).

To evaluate interactive effects, the Johnson–Neyman technique (Johnson and Neyman, 1936; Preacher et al., 2006) was used to inspect the range of values (i.e., regions of significance) of the moderator for which the independent and dependent variables were significantly associated. This technique was selected over simple slopes analysis because the latter probes significant interactions at two arbitrarily specified moderator levels (i.e., ± 1 SD), even though it is a continuous dimension without a natural break point (for a wider discussion, see Dearing and Hamilton, 2006). All analyses were performed using the statistical software R (R Development Core Team, 2018), with the lme4 package being used for mixed-effects model, the lmerTest being used for computing the p -values of main and interaction effects of the best model selected, and the effects package being used for exploring interaction effects.

RESULTS

Table 2 shows the associations between children's attachment security (at t1), parental scaffolding during discussions with their child about their child's conception (at t1), and children's

exploration of their surrogacy origins (at t2), after controlling for children's age (at t2).

Parental Scaffolding During Discussions About Conception and Child Attachment Security as Predictors of Children's Explorations of Their Surrogacy Origins

Table 3 displays fit indices and model comparisons. Only models with better fit than the null model (intercept only) were reported (i.e., models containing child gender; and parents' age, educational level, and household annual income were excluded). Model 4, containing children's age and the main and interactive effects of parental scaffolding and child attachment security as predictors, best explained children's exploration of their origins with the highest global variance (i.e., TCD = 0.34) and the lowest BIC (163.22). Specifically, greater attachment security, $\beta = 0.30$, $p = 0.009$, the interaction between child attachment security and parental scaffolding, $\beta = 0.23$, $p = 0.048$, and child age, $\beta = 0.02$, $p < 0.001$, predicted greater exploration in children, whereas the main effect of parental scaffolding was marginally significant, $\beta = 0.20$, $p = 0.072$.

The follow-up Johnson–Neyman technique identified the region of significance on the centered moderator (i.e., child attachment security) to range from -73.32 (lower bound) to 0.03 (upper bound), indicating that any given simple slope outside this range was statistically significant. Given that centered attachment security scores at t2 ranged from -1.19 to 0.86 (range of raw observed scores: 1.95 – 4.00) and the interactive term was positively associated with the outcome, it may be concluded that, in the presence of higher levels of parental scaffolding, only children who perceived greater attachment security (i.e., mean SS score ≥ 3.18 ; approximately 53.3% of children fell in this range) reported greater exploration of their surrogacy origins (for a graphical representation, see **Figure 1**).

DISCUSSION

This study was the first investigation of the longitudinal influence of child attachment security and parental scaffolding during parent–child discussions about the child's conception in predicting children's exploration of their surrogacy origins in gay two-father families during middle childhood. In line with expectations, in families in which fathers were particularly capable of remaining empathically attuned whilst supporting their children in elaborating upon their questions regarding

TABLE 2 | Mean scores and associations between child attachment security, parental scaffolding during discussions about conception, and children's exploration of their surrogacy origins, after controlling for child's age at t2.

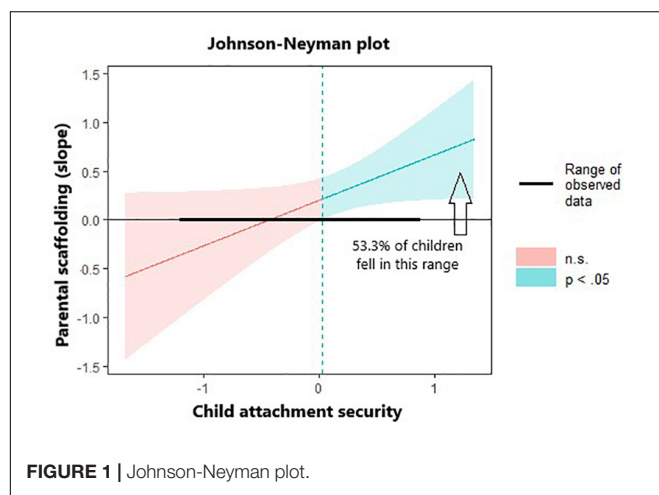
	1	2	3	M	SD	Observed values [expected values]
1. Attachment security (t1)	1.00			3.14	0.48	1.95–4.00 [1–4]
2. Parental scaffolding (t1)	0.16	1.00		3.57	1.00	2–5 [1–5]
3. Children's exploration of their surrogacy origins (t2)	0.42**	0.33**	1.00	2.97	1.00	1–4 [1–4]

t1 = time 1; t2 = time 2, approximately 18 months after t1. In each family, fathers' scores were averaged. ** $p < 0.01$.

TABLE 3 | Linear mixed model comparisons and model fit indices predicting children's exploration of their surrogacy origins at t2.

Outcome: Children's exploration of their surrogacy origins (t2)	CI				
	B (SE)	β	[25%–75%]	TCD	BIC
Model 0 (null model – intercept only)					176.36
Model 1				0.20***	168.96
Parental scaffolding (t1)	0.25 (0.12)	0.25*	[0.02–0.48]		
Child attachment security (t1)	0.76 (0.25)	0.37**	[0.28–1.25]		
Model 2				0.31***	163.41
Child age (t2)	0.02 (0.01)	0.36**	[0.01–0.03]		
Parental scaffolding (t1)	0.25 (0.11)	0.25*	[0.04–0.47]		
Child attachment security (t1)	0.71 (0.23)	0.35**	[0.27–1.16]		
Model 3				0.20**	171.76
Parental scaffolding (t1)	0.22 (0.12)	0.22†	[–0.02–0.46]		
Child attachment security (t1)	0.72 (0.26)	0.36*	[0.21–1.21]		
Parental scaffolding * Child attachment security (t1)	0.28 (0.26)	0.14	[–0.22–0.78]		
Model 4				0.34***	163.22
Child age (t2)	0.02 (0.11)	0.39***	[0.01–0.03]		
Parental scaffolding (t1)	0.20 (0.11)	0.20†	[–0.01–0.41]		
Child attachment security (t1)	0.61 (0.22)	0.30**	[0.17–1.05]		
Parental scaffolding * Child attachment security (t1)	0.47 (0.23)	0.23*	[0.01–0.92]		

CI = confidence interval. The emboldened model (i.e., Model 4) is the one that best fit the data, with the highest TCD and lowest BIC. † $p < 0.08$; * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$.



surrogacy, children expressed their thoughts and feelings toward the surrogate and/or egg donor and initiated conversations about their genetic origins and family structure to a greater extent only when they also reported greater attachment security to their fathers. Said differently, the degree of parental scaffolding observed in fathers during discussions with their children about their surrogacy conception longitudinally predicted children's greater exploration of their surrogacy origins only in more secure children.

In this vein, the findings contribute to the emerging literature about how individual differences in child attachment security to parents are fundamental in children's own exploration of their assisted conception (Slutsky et al., 2016; Zadeh et al., 2017), insofar as questions children ask to their fathers or to themselves

about the surrogacy procedure (e.g., "I was wondering whether both dad and daddy, or only daddy, put their seed in the [surrogate's name]'s tummy because daddy and I are blonde, whereas dad is not") or reflections children make upon different motivations egg donors and surrogates might have in helping their fathers in creating their family (e.g., "I cannot understand why [egg donor's name] helped us if she then disappeared. . .") are a form of exploration facilitated by greater father-child attachment security.

Two considerations—one methodological and one theoretical—may be relevant for interpreting this finding. First, on a methodological level, it should be noted that most fathers were rated as quite open and sensitive in encouraging children to express their thoughts and feelings about surrogacy; furthermore, the number of children who scored at the low to medium end of the attachment security scale was very small (Table 2). Interpreted in the context of the small sample size, this finding suggests that the potential effect of both child attachment insecurity and fathers' limited scaffolding when children were interested in exploring their origins more deeply may have gone undetected.

Second, on a theoretical level, attachment theory (Bowlby, 1988; Grossmann et al., 2008) provides an in-depth explanation for why children may perceive or even experience any exploration of their surrogacy origins as stressful and generative of uncertain outcomes, as well as why a secure father-child relationship, in combination with high parental scaffolding, may support such an exploration. Children might wonder how their fathers will react to their interest in knowing more about their egg donor or having more frequent contact with their surrogate (Lingiardi and Carone, 2019). The vast geographical distance between gay father families and their surrogate, as well as an egg donor's

anonymity or limited contact between fathers and children with the egg donor (Blake et al., 2016; Carone et al., 2018a) may further contribute to making both the surrogate and the egg donor “unfamiliar” and probably undefined to the child.

In addition, vital to attachment theory (Bowlby, 1980) is the conviction that individuals are guided by prototypes of their earliest relationships (i.e., internal working models), which shape their expectations of self and other and serve as guides for interpreting and managing negative emotions. Salient to the present study, in middle childhood, children who are securely attached to their parents rely on a representation of both fathers as secure bases who consistently support their exploration and safe havens who protect them when their attachment system is activated (e.g., by a threatening situation); however, they also rely on a representation of the self as a person who is comfortable with both intimacy and autonomy (Bosmans and Kerns, 2015). In this perspective, it is perhaps unsurprising that fathers who supported and acknowledged their children in expressing their thoughts and feelings related to their conception had children who were more likely to be engaged in the challenging task of exploring their surrogacy origins when they also perceived greater attachment security.

When interpreting these findings, caution should be exercised for several reasons. First, the small sample size, the convenience nature of the sampling, and the rarefied high socio-economic status of the families restricted the representative nature of the sample. Second, a further aspect of selectivity relates to the ways in which the fathers, themselves, came to terms with their surrogacy conception and the information they disclosed to their children, as they were likely to have relatively high levels of emotional support and an overall positive experience of the surrogacy conception. Third, the limited sample size for each cell prevented a larger investigation of whether children’s exploration of their origins differed due to gender and/or their level of understanding about their surrogacy conception. As the number of gay two-father surrogacy families grows, future studies should address these issues, as there is evidence that, in these families, children’s understanding of and questions about their surrogacy conception (with respect to, e.g., the different roles of the surrogate and the egg donor and the genetic parent–child relationship) may influence parental disclosure (Blake et al., 2016; Carone et al., 2018a). In addition, the results of adoption studies (Neil, 2012) suggest that girls may be more advanced in expressing their feelings toward conception than boys, possibly due to gender-typic emotional socialization by parents (Morris et al., 2007). Whether this finding also applies to gay two-father families, in which extra efforts might be required for fathers to engage in conversation with their son about his feelings related to his surrogacy conception, is worthy of exploration within a larger sample.

Fourth, as the Security Scale does not detect different types of attachment insecurity, the present study was not able to verify for the present sample prior findings with donor-conceived children that preoccupied and dismissing children differ in their experiences of their conception (Slutsky et al., 2016), with insecure-dismissing children being less likely to express curiosity in donor conception. Fifth, children’s participation and

concentration during the home visits were quite variable, and thus their understanding of the questions may have reflected their mood on the day. In the same vein, as noted by Van Parys et al. (2016b), it cannot be ruled out that, given the one-to-one interview context with an adult interviewer whom the child had only just met for the first time, the children might have been selective regarding the material they disclosed. Finally, it may be meaningful to consider that the children were being asked about a topic (i.e., their surrogacy conception) that was unlikely to have been discussed in their daily communication (Carone et al., 2018a).

Notwithstanding these limitations, the study presented a number of strengths. The longitudinal design and the attachment framework (Bowlby, 1988; Grossmann et al., 2008) enabled insights from the adoption (Grotevant, 1997; Kohler et al., 2002; Brodzinsky, 2006; Farr et al., 2014) and donor conception literature (Slutsky et al., 2016; Zadeh et al., 2017) to be extended to children born through surrogacy in gay two-father families, who must navigate unique challenges when processing their surrogacy origins (especially from middle childhood onward, when they enter primary school and confront their family diversity on a daily basis). The task of dealing with one’s surrogacy origins may be even more thorny for gay fathers and children living in countries such as Italy, where surrogacy is a highly contentious path to parenthood, same-sex couples have no domestic access to assisted reproduction, and legislation does not recognize the relationship between the non-genetic (non-legal) parent and the child (Lingiardi and Carone, 2016a,b). Further strengths of the study were the inclusion of children’s voices, which are generally underrepresented in studies with assisted conception families, even though children are “full” research participants, rather than objects of research (Mason and Hood, 2011). In addition, use of the extended version of the Security Scale (Kerns et al., 2015; Carone et al., 2019) was particularly valuable, as it covered both components (i.e., safe haven and secure base support) of the secure base phenomenon (Bowlby, 1988), which characterizes parent–child attachment in middle childhood (Bosmans and Kerns, 2015).

Prior to this study, it was not known how discussions about surrogacy conception in gay two-father families relate to parents’ own experiences of the assisted conception and children’s attachment relationships with their fathers. The present study is thus particularly informative, because the rationale for disclosing to one’s child his or her surrogacy origins and the choice of what to disclose is never straightforward, given that it touches upon the meaning of social and genetic ties (Haimes and Weiner, 2000). Through the lens of attachment theory (Bowlby, 1988; Grossmann et al., 2008), it may be said that the quality of the parent–child attachment relationship is crucial in helping children freely and safely explore the unfamiliar topic of their conception, especially when this may be perceived as a threatening and uncomfortable process.

By the same token, insofar as mental health professionals and relevant scientific societies (e.g., Ethics Committee of the American Society for Reproductive Medicine, 2018) are increasingly encouraging the disclosure of assisted conception,

the findings underscore the importance of conversations about surrogacy within the context of parent–child attachment relationships, as well as fathers’ sensitive support for their child’s exploration of his or her origins. To a wider extent, the findings also suggest that fathers should be prepared to talk with their children about their surrogacy conception, as children’s need for information likely change over the life course; and fathers should also respect their children’s curiosity toward aspects related to their story, break down barriers to information, and, in so doing, prevent future adjustment problems. Consistent with prior studies in the fields of adoption (Grotevant, 1997) and donor insemination (Slutsky et al., 2016), it is thus expected that fathers’ enhancement of their children’s secure exploration of their origins in middle childhood will facilitate children’s positive integration of surrogacy conception into a coherent sense of identity during adolescence.

DATA AVAILABILITY STATEMENT

The datasets generated for this study are available upon reasonable request to the corresponding author.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Ethics Committee of the Department of Developmental and Social Psychology, Sapienza University of Rome; Ethics Committee of the Department of Brain and

Behavioral Sciences, University of Pavia. Written informed consent to participate in this study was provided by the participants’ legal guardian/next of kin.

AUTHOR CONTRIBUTIONS

NC conceived and designed the study, collected data at time 1 and time 2, performed the statistical analysis, and drafted the manuscript. LB and KK contributed in the interpretation of the results. DM collected data at time 1, organized the database, coded data, and assisted in data analysis. RB and VL supervised the first phase of the project. All authors contributed to manuscript revision, read and approved the submitted version.

FUNDING

This research was supported by funding from Sapienza University of Rome (Sapienza Starting Grant for Research, grant number AR11715C77EB56B2; wave 1) and the Society for the Psychological Study of Social Issues (Grants-in-Aid; wave 2) awarded to NC.

ACKNOWLEDGMENTS

We are grateful to the fathers and children who generously participated in the research.

REFERENCES

- Blake, L., Carone, N., Raffanelli, E., Slutsky, J., Ehrhardt, A. A., and Golombok, S. (2017). Gay fathers’ motivations for and feelings about surrogacy as a path to parenthood. *Hum. Reprod.* 32, 860–867. doi: 10.1093/humrep/dex026
- Blake, L., Carone, N., Slutsky, J., Raffanelli, E., Ehrhardt, A. A., and Golombok, S. (2016). Gay father surrogacy families: relationships with surrogates and egg donors and parental disclosure of children’s origins. *Fertil. Steril.* 106, 1503–1509. doi: 10.1016/j.fertnstert.2016.08.013
- Bosmans, G., and Kerns, K. A. (2015). “Attachment in middle childhood: progress and prospects,” in *Attachment in Middle Childhood: Theoretical Advances and New Directions In An Emerging Field. New Directions for Child and Adolescent Development*, 148, eds G. Bosmans, and K. A. Kerns (Hoboken, NJ: John Wiley & Sons), 1–14. doi: 10.1002/cad.20100
- Bowlby, J. (1980). *Attachment and Loss, vol. 3: Loss: Sadness and Depression*. London: Hogarth Press and Institute of Psycho-Analysis.
- Bowlby, J. (1988). *A Secure Base: Parent–Child Attachment and Healthy Human Development*. New York, NY: Basic Books.
- Brodzinsky, D. M. (2005). “Reconceptualizing openness in adoption: implications for theory, research, and practice,” in *Psychological Issues in Adoption: Research and Practice*, eds D. M. Brodzinsky, and J. Palacios (Westport, CT: Praeger), 145–166.
- Brodzinsky, D. M. (2006). Family structural openness and communication openness as predictors in the adjustment of adopted children. *Adopt. Q.* 9, 1–18. doi: 10.1300/J145v09n04_01
- Brumariu, L. E., Madigan, S., Giuseppe, K. R., Movahed Abtahi, M., and Kerns, K. A. (2018). The Security Scale as a measure of attachment: meta-analytic evidence of validity. *Attach. Hum. Dev.* 20, 600–625. doi: 10.1080/14616734.2018.143321
- Carneiro, F. A., Tasker, F., Salinas-Quiroz, F., Leal, I., and Costa, P. A. (2017). Are the fathers alright? A systematic and critical review of studies on gay and bisexual fatherhood. *Front. Psychol.* 8:1636. doi: 10.3389/fpsyg.2017.01636
- Carone, N., Baiocco, R., and Lingardi, V. (2017). Italian gay fathers’ experiences of transnational surrogacy and their relationship with the surrogate pre- and post-birth. *Reproduct. Biomed.* 34, 181–190. doi: 10.1016/j.rbmo.2016.10.010
- Carone, N., Baiocco, R., Lingardi, V., and Kerns, K. (2019). Child attachment security in gay father surrogacy families: parents as safe havens and secure bases during middle childhood. *Attach. Hum. Dev.* doi: 10.1080/14616734.2019.1588906 [Epub ahead of print].
- Carone, N., Baiocco, R., Manzi, D., Antonucci, C., Caricato, V., Pagliarulo, E., et al. (2018a). Surrogacy families headed by gay men: relationships with surrogates and egg donors, fathers’ decisions over disclosure and children’s views on their surrogacy origins. *Hum. Reprod.* 33, 248–257. doi: 10.1093/humrep/dex362
- Carone, N., Lingardi, V., Chirumbolo, A., and Baiocco, R. (2018b). Italian gay father families formed by surrogacy: parenting, stigmatization and children’s psychological adjustment. *Dev. Psychol.* 54, 1904–1916. doi: 10.1037/dev0000571
- Compas, B. E., Connor, J. K., Saltzman, H., Thomsen, A. H., and Wadsworth, M. E. (2001). Coping with stress during childhood and adolescence: problems, progress, and potential in theory and research. *Psychol. Bull.* 127, 87–127. doi: 10.1037/0033-2909.127.1.87
- Dearing, E., and Hamilton, L. C. (2006). Contemporary approaches and classic advice for analyzing mediating and moderating variables. *Monogr. Soc. Res. Child Dev.* 71, 88–104. doi: 10.1111/j.1540-5834.2006.00406.x
- Ethics Committee of the American Society for Reproductive Medicine (2018). Informing offspring of their conception by gamete or embryo donation: an

- Ethics Committee opinion. *Fertil. Steril.* 109, 601–605. doi: 10.1016/j.fertnstert.2018.01.001
- Faccio, E., Iudici, A., and Cipolletta, S. (2019). To tell or not to tell? Parents' reluctance to talking about conceiving their children using medically assisted reproduction. *Sex. Cult.* 23, 525–543. doi: 10.1007/s12119-019-09586-7
- Farr, R. H., Grant-Marsney, H. A., and Grotevant, H. D. (2014). Adoptees' contact with birth parents in emerging adulthood: the role of adoption communication and attachment to adoptive parents. *Fam. Process* 53, 656–671. doi: 10.1111/famp.12069
- Fivush, R. (1991). The social construction of personal narratives. *Merrill-Palmer Q.* 37, 59–82.
- Gentzler, A. L., Contreras-Grau, J. M., Kerns, K. A., and Weimer, B. L. (2005). Parent–child emotional communication and children's coping in middle childhood. *Soc. Dev.* 14, 591–612. doi: 10.1111/j.1467-9507.2005.00319.x
- Goldstein, H. (1988). Multilevel mixed linear modelling analysis using iterative generalized least squares. *Biometrika* 73, 43–56. doi: 10.1093/biomet/73.1.43
- Grossmann, K., Grossmann, K. E., Kindler, H., and Zimmermann, P. (2008). “A wider view of attachment and exploration: the influence of mothers and fathers on the development of psychological security from infancy to young adulthood,” in *Handbook of Attachment: Theory, Research, and Clinical Applications*, 2nd Edn, eds J. Cassidy, and P. R. Shaver (New York: Guilford Press), 857–879.
- Grotevant, H. D. (1997). Coming to terms with adoption: the construction of identity from adolescence into adulthood. *Adopt. Q.* 1, 3–27. doi: 10.1300/J145v01n01_02
- Grotevant, H. D., and McRoy, R. G. (1997). The Minnesota/Texas Adoption Research Project: implications of openness in adoption for development and relationship. *Appl. Dev. Sci.* 1, 168–186. doi: 10.1207/s1532480xads0104_2
- Haimes, E., and Weiner, K. (2000). ‘Everybody's got a dad..’. Issues for lesbian families in the management of donor insemination. *Sociol. Health Illness* 22, 477–499. doi: 10.1111/1467-9566.00215
- Harper, J. C., Kennett, D., and Reisel, D. (2016). The end of donor anonymity: how genetic testing is likely to drive anonymous gamete donation out of business. *Hum. Reproduct.* 31, 1135–1140. doi: 10.1093/humrep/dew065
- Harter, S. (1982). The perceived competence scale for children. *Child Dev.* 53, 87–97. doi: 10.2307/1129640
- Hertz, R. (2002). The father as an idea: a challenge to kinship boundaries by single mothers. *Symbol. Interact.* 25, 1–31. doi: 10.1525/si.2002.25.1.1
- Isaksson, S., Sydsjö, G., Skoog Svanberg, A., and Lampic, C. (2012). Disclosure behaviour and intentions among 111 couples following treatment with oocytes or sperm from identity-release donors: follow-up at offspring age 1–4 years. *Hum. Reproduct.* 27, 2998–3007. doi: 10.1093/humrep/des285
- Johnson, P. O., and Neyman, J. (1936). Test of certain linear hypotheses and the application to some statistical problems. *Stat. Res. Mem.* 1, 57–93.
- Kerns, K. A., Mathews, B. L., Koehn, A. J., Williams, C. T., and Siener-Ciesla, S. (2015). Assessing both safe haven and secure base support in parent–child relationships. *Attach. Hum. Dev.* 17, 337–353. doi: 10.1080/14616734.2015.1042487
- Kohler, J. K., Grotevant, H. D., and McRoy, R. G. (2002). Adopted adolescents' preoccupation with adoption: the impact on adoptive family relationships. *J. Marriage Fam.* 64, 93–104. doi: 10.1111/j.1741-3737.2002.00093.x
- Leibowitz, J., Ramos-Marcuse, F., and Arsenio, W. F. (2002). Parent–child emotion communication, attachment, and affective narratives. *Attach. Hum. Dev.* 4, 55–67. doi: 10.1080/14616730210123157
- Lingiardi, V., and Carone, N. (2019). Challenging Oedipus in changing families: gender identifications and access to origins in same-sex parent families created through third-party reproduction. *Int. J. Psychoanal.* 100, 229–246. doi: 10.1080/00207578.2019.1589381
- Lingiardi, V., and Carone, N. (2016a). Famiglie contemporanee: nuove concezioni, vecchi pregiudizi. Risposta ai commenti. *Giornale Italiano di Psicologia* 43, 181–191. doi: 10.1421/83638
- Lingiardi, V., and Carone, N. (2016b). Lesbian mothers, gay fathers: an inconceivable conception? *Giornale Italiano di Psicologia* 43, 57–79. doi: 10.1421/83618
- MacDougall, K., Becker, G., Scheib, J. E., and Nachtigall, R. D. (2007). Strategies for disclosure: how parents approach telling their children that they were conceived with donor gametes. *Fertil. Steril.* 87, 524–533. doi: 10.1016/j.fertnstert.2006.07.1514
- Mason, J., and Hood, S. (2011). Exploring issues of children as actors in social research. *Child. Youth Serv. Rev.* 33, 490–495. doi: 10.1016/j.childyouth.2010.05.011
- Morris, A. S., Silk, J. S., Steinberg, L., Myers, S. S., and Robinson, L. R. (2007). The role of the family context in the development of emotion regulation. *Soc. Dev.* 16, 361–387. doi: 10.1111/j.1467-9507.2007.00389.x
- Neil, E. (2012). Making sense of adoption: integration and differentiation from the perspective of adopted children in middle childhood. *Child. Youth Serv. Rev.* 34, 409–416. doi: 10.1016/j.childyouth.2011.11.011
- Norton, W., Hudson, N., and Culley, L. (2013). Gay men seeking surrogacy to achieve parenthood. *Reproduct. Biomed.* 27, 271–279. doi: 10.1016/j.rbmo.2013.03.016
- Preacher, K. J., Curran, P. J., and Bauer, D. J. (2006). Computational tools for probing interactions in multiple linear regression, multilevel modeling, and latent curve analysis. *J. Educ. Behav. Stat.* 31, 437–448. doi: 10.3102/10769986031004437
- R Development Core Team (2018). *R: A Language and Environment for Statistical Computing*. Vienna: R Development Core Team.
- Schwarz, G. E. (1978). Estimating the dimension of a model. *Ann. Stat.* 6, 461–464. doi: 10.1214/aos/1176344136
- Skinner-Drawz, B. A., Wrobel, G. M., Grotevant, H. D., and Von Korff, L. (2011). The role of adoption communicative openness in information seeking among adoptees from adolescence to emerging adulthood. *J. Fam. Commun.* 11, 181–197. doi: 10.1080/15267431003656587
- Slutsky, J., Jadva, V., Freeman, T., Persaud, S., Steele, M., Steele, H., et al. (2016). Integrating donor conception into identity development: adolescents in fatherless families. *Fertil. Steril.* 106, 202–208. doi: 10.1016/j.fertnstert.2016.02.033
- Solomon, G. E. A., Johnson, S. C., Zaitchik, D., and Carey, S. (1996). Like father, like son: young children's understanding of how and why offspring resemble their parents. *Child Dev.* 67, 151–171. doi: 10.1111/j.1467-8624.1996.tb01726.x
- Sydsjö, G., Skoog Svanberg, A., and Lampic, C. (2019). Cross-border surrogacy: experiences of heterosexual and gay parents in Sweden. *Acta Obst. Gynecol. Scand.* 98, 68–76. doi: 10.1111/aogs.13456
- Tallandini, M. A., Zanchettin, L., Gronchi, G., and Morsan, V. (2016). Parental disclosure of assisted reproductive technology (ART) conception to their children: a systematic and meta-analytic review. *Hum. Reproduct.* 31, 1275–1287. doi: 10.1093/humrep/dew068
- Tasker, F., and Granville, J. (2011). Children's views of family relationships in lesbian-led families. *J. GLBT Fam. Stud.* 7, 182–199. doi: 10.1080/1550428X.2011.540201
- van de Schoot, R., Kaplan, D., Denissen, J., Asendorpf, J. B., Neyer, F. J., and Aken, M. A. G. (2014). A gentle introduction to Bayesian analysis: applications to developmental research. *Child Dev.* 85, 842–860. doi: 10.1111/cdev.12169
- Van Parys, H., Provoost, V., Wyverken, E., De Sutter, P., Pennings, G., and Buysse, A. (2016a). Family communication about the donor conception: a multi-perspective qualitative study with lesbian parents and their children. *Qual. Health Res.* 26, 1998–2008. doi: 10.1177/1049732315606684
- Van Parys, H., Wyverken, E., Provoost, V., De Sutter, P., Pennings, G., and Buysse, A. (2016b). Family communication about donor conception: a qualitative study with lesbian parents. *Fam. Process* 55, 139–154. doi: 10.1111/famp.12112
- Vanfraussen, K., Ponjaert-Kristoffersen, I., and Brewaeys, A. (2003). Why do children want to know more about the donor? The experience of youngsters raised in lesbian families. *J. Psychosom. Obst. Gynecol.* 24, 31–38. doi: 10.3109/01674820309042798

- Wagenmakers, E.-J. (2007). A practical solution to the pervasive problems of p values. *Psychonom. Bull. Rev.* 14, 779–804. doi: 10.3758/BF03194105
- Williams, J. M., and Smith, L. A. (2010). Concepts of kinship relations and inheritance in childhood and adolescence. *Br. J. Dev. Psychol.* 28, 523–546. doi: 10.1348/026151009X449568
- Wrobel, G. M., Ayers-Lopez, S., Grotevant, H. D., McRoy, R. G., and Friedrich, M. (1996). Openness in adoption and the level of child participation. *Child Dev.* 67, 2358–2374. doi: 10.2307/1131628
- Wrobel, G. M., Grotevant, H. D., Samek, D. R., and Von Korff, L. (2013). Adoptees' curiosity and information-seeking about birth parents in emerging adulthood: context, motivation, and behavior. *Int. J. Behav. Dev.* 37, 441–450. doi: 10.1177/0165025413486420
- Wrobel, G. M., Kohler, J. K., Grotevant, H. D., and McRoy, R. G. (2003). The family adoption communication (FAC) model: identifying pathways of adoption-related communication. *Adopt. Q.* 7, 53–84. doi: 10.1300/J145v07n02_04
- Zadeh, S., Jones, C. M., Basi, T., and Golombok, S. (2017). Children's thoughts and feelings about their donor and security of attachment to their solo mothers in middle childhood. *Hum. Reproduct.* 32, 868–875. doi: 10.1093/humrep/dex016

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Carone, Barone, Manzi, Baiocco, Lingardi and Kerns. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Community Characteristics, Victimization, and Psychological Adjustment Among School-Aged Adopted Children With Lesbian, Gay, and Heterosexual Parents

Abbie E. Goldberg^{1*} and Randi Garcia²

¹ Department of Psychology, Clark University, Worcester, MA, United States, ² Smith College, Northampton, MA, United States

OPEN ACCESS

Edited by:

Nicola Carone,
University of Pavia, Italy

Reviewed by:

Francis Anne Teplitzky Carneiro,
William James Center for Research,
Portugal
Salvatore Ioverno,
Ghent University, Belgium
Loes Van Rijn - Van Gelderen,
University of Amsterdam, Netherlands

*Correspondence:

Abbie E. Goldberg
agoldberg@clarku.edu

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 08 November 2019

Accepted: 18 February 2020

Published: 10 March 2020

Citation:

Goldberg AE and Garcia R (2020)
Community Characteristics,
Victimization, and Psychological
Adjustment Among School-Aged
Adopted Children With Lesbian, Gay,
and Heterosexual Parents.
Front. Psychol. 11:372.
doi: 10.3389/fpsyg.2020.00372

Little research has examined victimization among school-aged children raised in lesbian/gay (LG) parent households and almost no work has attended to the school and community contexts that may impact their victimization risk. This study examined predictors of parent-reported child victimization and child adjustment, and parent responses to victimization, in 43 two-mother, 37 two-father, and 56 mother-father families, with adopted children (median age = 8.6 years). Predictors included parent (sexual orientation), school (climate, public versus private) and community (urbanicity, percentage voted Democrat) factors, with parent and child demographics included as controls. A total of 47% of parents reported one or more child victimization experiences in the past year; there were no differences by family type. An exploratory interaction between family type and urbanicity indicated that in large urban areas, children with LG parents were predicted to experience less victimization than children with heterosexual parents; in more rural regions, children with LG parents were predicted to experience more victimization than children with heterosexual parents. School climate was related to victimization: Parents who reported more negative school climate reported more child victimization. Children with higher levels of parent-reported victimization had higher levels of parent-reported internalizing and externalizing symptoms. In large urban areas, children with LG parents were predicted to have fewer internalizing symptoms than children with heterosexual parents; in more rural areas, children with LG parents were predicted to have more internalizing symptoms than children with heterosexual parents. Regarding parents' responses to victimization, LG parents were more likely to talk to school administrators, their children, and the bully, compared to heterosexual parents.

Keywords: adopted, bullying, gay, lesbian, psychological adjustment, same-sex, school-aged, victimization

INTRODUCTION

Over the past two decades, attitudes about lesbian and gay (LG) couples becoming parents have become more positive (Daugherty and Copen, 2016), although stigmas remain (Ioverno et al., 2018), such that some LG couples who seek to become parents still face hostility from reproductive (Wingo et al., 2018) and adoption (Goldberg et al., 2019) services. Despite such challenges,

LG couples are increasingly becoming parents, particularly through adoption (Goldberg, 2010). In turn, LG-parent families are now part of the social fabric of the communities in which they reside, including their neighborhoods and schools. Although research has gradually begun to address the experiences of LG-parent families (Goldberg, 2010), rarely has it considered their intersections with the school context. Studies of LG parents of young children have examined their school decisions (Goldberg et al., 2018) and school involvement (Goldberg and Smith, 2014; Goldberg et al., 2017) and several studies of LG-parent families with school-aged children have explored children's experiences with teasing and victimization (Bos and van Balen, 2008; Kosciw and Diaz, 2008; Rivers et al., 2008; Farr et al., 2016).

The current study aims to examine the role of child, family, school, and community factors in predicting LG¹ and heterosexual parents' reports of their school-aged adopted children's experiences of victimization, including overtly aggressive behaviors such as physical or verbal aggression (direct victimization) and behaviors such as rumor spreading, exclusion, and ignoring (indirect victimization). Our study is informed by an ecological perspective (Bronfenbrenner, 1988), which orients us to consider the family, school, and broader community contexts, and their intersections, in shaping children's development (Beveridge, 2005). For example, children are impacted directly by their family and school—two proximal contexts—as well as by distal contexts, such as local and state norms, policies, and laws, all of which may impact the child directly and indirectly (e.g., via their influence on school policies and practices).

Children whose parents are LG—and who are also adopted—may experience unique risk factors for victimization. As children enter middle childhood, they develop a greater awareness of what it means to have LG parents (Goldberg, 2010) and a greater sense of their adoptive identities (Brodzinsky, 2011) and may be increasingly vulnerable to stigma regarding these personal and family identities. Middle childhood is a developmental period marked by increased independence from parents and more time with peers, and is characterized by new challenges in navigating social hierarchies (Merrin et al., 2018). By extension, bullying in general and homophobic teasing specifically tend to peak in middle school (Merrin et al., 2018). In turn, some work suggests that elementary and middle school represent periods of more intense homophobic teasing for youth with LG parents (Kosciw and Diaz, 2008), while other work suggests that the number of children being teased for having LG parents is relatively low (8% in one study using parent reports for school-aged adopted youth; Farr et al., 2016). Unknown are what school and community factors are related to child victimization in LG-parent families, and how these interact with the family context to predict victimization.

Using a sample of 136 families (43 two-mother families, 37 two-father families, and 56 mother–father families, with adopted children; median age = 8.6), the main question this study seeks

to answer is: What parent factors (e.g., sexual orientation), child factors (e.g., race, gender), school factors (e.g., school climate; public vs. private) and community factors (e.g., urbanicity) predict parents' perceptions of their children's victimization? Two exploratory subquestions are: Are these factors related to children's reports of victimization? Is parent sexual orientation related to parents' responses to victimization? A second question we seek to answer is whether victimization is related to child psychological adjustment.

Family Structure as a Predictor of Victimization

Of interest is whether family structure matters in terms of predicting victimization: that is, whether LG parents of school-aged children report greater levels of victimization in their children than heterosexual parents. Research generally finds that overall levels of victimization may not differ between groups, but suggests that there may be differences in the nature of responses to victimization. Rivers et al. (2008) studied 18 youth ages 12–16 who were raised in same-sex parent families and compared them to a matched sample of students raised in different-sex parent families and found no differences in victimization between the two groups. Yet youth with same-sex parents were less likely to report that they would turn to school-based supports (e.g., school staff), which the authors hypothesized may reflect fears of encountering stigma from these sources. Similarly, Wainright and Patterson (2006) found that adolescents (12–18 years) in two-mother families reported no differences in victimization compared to adolescents in mother–father families, and Bos and van Balen (2008) reported low levels of teasing among 8- to 12-year-old children in two-mother families.

Overall levels of child victimization may not differ between LG- and heterosexual-parent families. Yet there is reason to believe that victimization might intersect with or vary according to where families live or the types of schools children attend—dimensions that have generally not been explored quantitatively. A qualitative study found that LG-parent families living in rural and politically conservative communities encountered unique challenges in school selection, amidst implicit and explicit biases against their families (Goldberg et al., 2018). Thus, it is worth considering community factors in exploring children's exposure to victimization.

Community Factors as Predictors of Victimization

Urbanicity is an important dimension of communities that may be related to victimization among youth with LG parents. Large cities tend to have more LGBTQ residents, as well as more services and resources for LGBTQ people, and are therefore often regarded as socially progressive and accepting of diversity (Holman and Oswald, 2011; Oswald and Holman, 2013). By contrast, LG-parent families in rural areas often lack access to LGBTQ inclusive services in health care, religious settings, schools, and other contexts, thereby reflecting and contributing to a more negative community climate (Oswald and Holman, 2013). Inasmuch as urbanicity is often associated with a more

¹ LG, or lesbian/gay-parent families, refers to families headed by female or male couples respectively. Not all individuals in these couples identified as lesbian/gay (a minority identified as bisexual or queer), but we refer to them as LG for brevity, whereby family structure as opposed to individual sexual identity is emphasized.

LGBTQ-friendly community climate (Oswald and Holman, 2013; Williams Institute, 2016), it follows that LG-parent families in cities may experience their communities as more affirming (less hostile) than those in more rural areas.

One study documented a link between urbanicity and victimization among children with LGBTQ parents. Power et al. (2014) studied 455 Australian LGBTQ parents of children of varying ages, and found that parents living in small or medium metro areas, and rural areas, were less likely than those in large metro areas (urban centers) to feel connected to their community, be “out” in community settings, and have contact with the LGBTQ community. According to parents, children in the former group were more likely to experience homophobic bullying at school, highlighting a potential relationship between community setting and victimization risk. This study is important, but limited in its reliance on a crude self-report measure of urbanicity, assessment of one type of bullying, use of one respondent report per family, and non-inclusion of heterosexual-parent families. Research on LGBTQ youth has found similar associations. A study of LGBTQ youth ages 14–18 documented greater levels of victimization among participants living in what they perceived as hostile and small towns (Paceley et al., 2017). And, research on LGBTQ youth (mean age = 15.9 years) found that youth living in rural communities reported higher levels of victimization (Kosciw et al., 2009).

The political affiliation or voting history of a region or county may also have implications for the social climate in which youth with LG parents live and attend school. Republicans overall are less accepting of homosexuality, gay adoption, and marriage equality, compared to Democrats (Pew Research Center, 2017), and countywide support for the Republican party is associated with support for gay marriage bans (Burnett and Salka, 2009). In turn, even amidst advancements in marriage and parenthood legislation, sexual minorities who reside in more conservative counties report lower social inclusion and belongingness (Metheny and Stephenson, 2018) and poorer health (Hatzenbuehler et al., 2017) than those in more progressive areas. Amidst evidence that residents of the Southern and Midwestern regions of the United States report less tolerant attitudes toward LGBTQ people than those in other regions (Baunach, 2012), it is perhaps unsurprising that LGBTQ youth living in the South and Midwest were found to report marginally higher levels of victimization in school related to their gender expression compared to LGBTQ youth in the Northeast (Kosciw et al., 2009), highlighting how schools may reflect (i.e., be infused by) the norms and attitudes of the regions in which they are located.

School Factors as Predictors of Victimization

Aspects of schools, which are embedded in communities, likely impact the nature, frequency, and targets of peer victimization. School climate—the overall or shared quality of school life—typically encompasses different aspects of the school environment, including social aspects (e.g., quality of teacher-student relationships), safety, and/or academic dimensions (e.g.,

emphasis on academic attainment) (Muijs, 2017). School climate is a key factor in promoting positive emotional, behavioral, and academic outcomes (Hendron and Kearney, 2016) and reducing negative risk factors (Thapa et al., 2013), including bullying (Bradshaw et al., 2009; Cook et al., 2010). For example, Attar-Schwartz (2009) studied 7th–11th graders and found that students with more negative perceptions of school climate were also more likely to report being victimized. Although school climate is most often measured via student and teacher reports, parent perceptions represent an arguably important viewpoint with regard to the school environment, especially in studies of younger children, who may be limited in their ability to provide reliable reports (Schueler et al., 2014).

Another factor that may relate to children’s victimization risk is school type. Private schools and public schools tend to differ in terms of the nature of school governance, as well as class size and teacher to student ratio (higher for public, lower for private; National Center for Education Statistics, 2019). In turn, private schools may, on average, be safer and healthier learning environments, and be associated with a reduced risk for victimization (Brinig and Garnett, 2012; Henkel and Slate, 2013). Research has generally found higher overall levels of bullying in public schools than private schools (Shujja et al., 2014; Waasdorp T. et al., 2018), although higher levels of cyberbullying specifically have been documented in private schools (Mark and Ratliffe, 2011; Waasdorp T. et al., 2018).

Child Demographic Characteristics as Predictors of Victimization

Card et al. (2008) consider risk for victimization within an ecological context, whereby they outline features of the child’s context as well as personal characteristics that operate as risk and protective factors. In turn, both social-ecological and individual (person-level) correlates of victimization risk have been identified in the literature.

Children’s personal characteristics (e.g., race, gender, age) are often examined in relation to victimization risk. Some scholars suggest that victimization risk is related to stigmatized characteristics or perceived group affiliations such as race or ethnicity (Garnett et al., 2014), yet such findings are mixed (Tippett et al., 2013), with some studies finding lower levels of victimization among youth of color, compared to White youth (Lleras, 2008), and others finding higher levels (Goldweber et al., 2013). Some work has found race to be unrelated to victimization (Morrow et al., 2014).

Regarding child gender, some work suggests higher levels of overall victimization in boys than girls, among middle schoolers (Cook et al., 2010). Other research on elementary and middle school students shows higher levels of indirect victimization among girls (Waasdorp et al., 2011) and higher levels of direct victimization among boys (Waasdorp et al., 2011). Other work has found few gender differences in victimization (Morrow et al., 2014).

Finally, child age may also predict victimization. Victimization rates appear to rise from elementary school to middle school, peaking in middle school as children enter adolescence, and

then tend to decline in high school (Cook et al., 2010; Espelage et al., 2018).

Little work has explored victimization among adopted children in general, although some research suggests more peer problems and lower psychosocial functioning among adopted children compared to non-adopted children (Pitula et al., 2019). A study of 9- to 15-year-old children adopted in the United States from Finland found that 19% reported being bullied, with boys being more likely to be victimized than girls (Raaska et al., 2012). A study of 5- to 13-year-old adopted children in the United Kingdom found that over half reported uncomfortable questions or teasing from peers about adoption specifically (Neil, 2012). Given the paucity of work on victimization among adopted children, our study makes a contribution to this literature as well.

Predictors of Parents' Responses to Victimization

Although much of the research on victimization has focused on children's experiences, there is growing attention to the role of parents with regard to how they respond to and help their children cope with victimization. Parents may respond to victimization by contacting the school, talking to their child, or talking to the perpetrator's parents (Waasdorp et al., 2011; Larrañaga et al., 2018; Lindstrom et al., 2019). Research with parents of victimized youth in elementary, middle, and high school suggests that most parents respond by talking to their child about victimization and/or contacting the school (Waasdorp et al., 2011; Lindstrom et al., 2019). Less frequently endorsed responses include talking to the bully's parents and controlling the child's internet access (Larrañaga et al., 2018). Although little work has examined the question of which of these represent the most ideal or effective responses, qualitative research suggests that children worry that parents contacting the bully or the bully's parents may make the bullying worse (Mishna et al., 2006).

School, child, and family factors may impact parents' responses to victimization. Some work shows that parents who view their child's school climate more positively are less likely to respond by contacting the school (Waasdorp et al., 2011; Lindstrom et al., 2019) or talking to their child (Waasdorp et al., 2011). Child age and gender may also impact parents' responses. A study of parents of 7th–10th graders found that parents of younger children were more likely to contact a teacher or school staff member or control internet/cellphone use in response to victimization, whereas parents of older children were more likely to encourage them to defend themselves (Larrañaga et al., 2018). Parents of girls were more likely to tell their children to ignore the problem or do nothing than parents of boys (Larrañaga et al., 2018).

Parent sexual orientation may also influence parent responses to victimization. As noted, Rivers et al. (2008) found that bullied youth with LG parents were less likely to turn to school-based supports. Perhaps LG parents also experience less trust that schools (which are frequently heteronormative in their policies and practices, and employ staff who lack comfort with LG-parent families; Goldberg and Smith, 2014) will effectively support their families, and are less likely to turn to them if their child is

mistreated. At the same time, research on LG parents of young children suggests that they are highly involved at school, in part because they hope that their proactive advocacy will facilitate more favorable treatment (Goldberg and Smith, 2014; Goldberg et al., 2017). In turn, LG parents may indeed turn to school-based supports amidst child victimization, especially if they are highly involved and therefore expect positive treatment.

Victimization as a Predictor of Externalizing/Internalizing Problems

In addition to enhancing knowledge of what factors place youth at risk for victimization, it is also important to understand how victimization impacts their well-being. Scholars have documented negative psychosocial outcomes associated with experiences of victimization in elementary, middle, and high school youth (Bradshaw et al., 2015; Waasdorp T. E. et al., 2018). Victimization is consistently linked to internalizing problems such as depression (Cook et al., 2010; Cillessen and Lansu, 2015; Waasdorp T. et al., 2018) and has sometimes been linked to externalizing problems (Cillessen and Lansu, 2015).

A small body of work has explored these associations in children with LG parents. In their study of adopted children raised in LG-parent families (mean age = 8 years), Farr et al. (2016) found that bullied children exhibited more behavioral problems than non-bullied children. Using a sample of 10- to 12-year-old children in two-mother families, Bos and van Balen (2008) found that higher levels of stigmatization were related to more problem behavior and lower self-esteem. Bos and Gartrell (2010) studied adolescents (mean age = 17 years) in two-mother families and found that greater stigmatization was associated with more problem behavior.

The Current Study

This study utilizes a sample of 136 same-sex and heterosexual couples (dyads) with school-aged adopted children to answer the following research questions:

1. What parent, child, school, and community factors predict parents' perceptions of their children's victimization experiences?
 - a. Hypothesis: We expect that higher victimization will be reported among parents who report less positive school climate, whose children attend public schools, who live in rural areas, and who live in Republican leaning communities. We expect no association between parent sexual orientation and victimization.
 - b. *Exploratory interaction*: Does parent sexual orientation interact with community context (i.e., urbanicity) to predict children's victimization experiences?
 - c. *Exploratory follow-up*: In a subsample of 80 children with available data, do these same factors predict children's reports of victimization experiences?

- d. *Exploratory follow-up*: Is parent sexual orientation related to parents' responses to victimization?
2. Are parents' reports of victimization related to children's psychological adjustment?
- a. Hypothesis: We expect that victimization will be related to adjustment, such that higher victimization will be associated with lower adjustment (more problems).

As we are primarily interested in the role of parents' sexual orientation, the school context, and the community context, we consider these as substantive predictors. We consider child demographics (age, gender, race) and parent demographics (income, education) as controls.

MATERIALS AND METHODS

Sample

The parents in this study were originally recruited through adoption agencies for a study on the transition to adoptive parenthood (Goldberg and Smith, 2013). Approximately 8 years post-adoption, they participated in a follow-up assessment focusing on their child's transition to elementary school. A total of 136 families participated: 43 two-mother, 37 two-father, and 56 mother-father families, all with adopted children. Child age ranged from 8 to 16 years old with a median age of 8.6 years. A total of 67% of the children were children of color, and 52% were boys. The majority (73%) were attending public schools.

A total of 35% of families resided on the East Coast, 36.5% on the West Coast, 10.0% in the Midwest, and 18.5% in the South. About 47% of participants resided in large central metro areas (e.g., Chicago, IL, United States), 22% in large fringe metro areas (e.g., Austin, TX, United States), 20% in medium metro areas (e.g., Lancaster, PA, United States), 7.8% in small metro areas (e.g., Missoula, MT, United States), and 3% in micropolitan/non-core areas (e.g., Greenfield, MA, United States). Participants lived in relatively Democratic communities, such that examination of the voting records in participants' counties revealed that 63% of community members on average had voted Democrat in the last presidential election ($SD = 15.8\%$). The sample was somewhat more affluent than national samples of adoptive parents (e.g., annual income is about \$10K higher; Gates et al., 2007). Family income ranged from \$15K to \$750K with a median of \$134K. The sample was well-educated, with 57% having master's degrees or higher, 30% up to a college degree, and 13% a high school diploma/GED or lower. See **Table 1** for sample demographics by family structure. Same-sex parents adopted a greater percentage of children of color than heterosexual parents. In addition, they tended to have higher family incomes and to live in communities with a higher Democratic voting percentage than heterosexual parents.

Procedure

Ethical approval for this study was obtained from Clark University's Institutional Review Board. Participants, all of whom provided informed consent, were assessed 8 years after becoming

TABLE 1 | Demographics by family type.

Variable	Family type		<i>t</i> or χ^2
	Heterosexual <i>M</i> (<i>SD</i>) or % (<i>n</i>)	Same-sex <i>M</i> (<i>SD</i>) or % (<i>n</i>)	
Child variables			
Child of color	58.76% (57)	73.61% (106)	5.18*
Child's age	8.74 (1.32)	9.12 (1.78)	−1.89 ⁺
Preteen (8–12)	98.97% (96)	93.75% (135)	
Teenage (13–16)	1.03% (1)	6.25% (9)	
Child gender (% male)	48.45% (47)	54.86% (79)	0.68
Parent/family variables			
Parent's education			1.62
High school diploma or GED	1.03% (1)	0.69% (1)	
Some college or associate's degree	12.37% (12)	11.81% (17)	
College (bachelor's) degree	28.87% (28)	29.17% (42)	
Master's degree	44.33% (43)	38.19% (55)	
Professional (PhD/JD/MD) degree	13.40% (13)	18.75% (27)	
Family income (in thousands)	\$130.8 (\$75.0)	\$169.1 (\$114.5)	−3.14**
School variables			
School climate	4.16 (0.5)	4.18 (0.46)	−0.37
Public school	75.26% (73)	72.22% (104)	0.14
Community variables			
Urbanicity (1 = large metro to 6 = non-core)	2.04 (1.17)	1.92 (1.12)	0.78
Democratic voting percentage	60.4 (15.64)	64.78 (15.66)	−2.13*

⁺ $p < 0.10$, * $p < 0.05$, ** $p < 0.01$.

first-time parents via adoption. Inclusion criteria for the original study were that both partners must be first-time parents, and adopting. Parents were originally recruited from adoption agencies and LGBTQ organizations in the United States for a study of the transition to adoptive parenthood. They participated in several follow-up assessments (e.g., when their children were transitioning to kindergarten). Eight years post-adoption, they were invited to participate in a follow-up online survey focusing on their eldest adopted child's transition to elementary school; data are drawn from this assessment. Questions about child behavior and experiences focused on the target (i.e., oldest) child. Although 59 families (43% of the current sample) had adopted additional children, these children were not the focus of the study.

Parents were also asked whether they were interested and willing in having the target child be interviewed over the telephone. One of the instruments that was administered to children was the victimization measure. Of the 136 families in the study, 95 (69.9%) agreed to have their child be interviewed (M age = 8.82, 56.6% boys). When parents declined their children's participation, we inquired as to why. Among those declining, reasons given included: parental concerns that interview might upset the child [e.g., by emphasizing difference (25%) or bringing up sensitive topics such as adoption and peer difficulties (4%)]; parents' sense that the child was too shy (15%) or immature (2%) to fully participate; the child has developmental delays such as autism (13%) or other socioemotional/behavioral issues (12%), or

is under a lot of stress (12%); and, the child was too busy (13%) or not interested (13%). Sixteen percent of those who declined provided no reason as to why; 26% gave multiple reasons. There was no statistically significant difference by family type in the number of reasons given, $\chi^2(1) = 0.158, p = 0.691$.

Measures

Controls

Child variables

Child gender (0 = male, 1 = female) was included as a predictor. Child race (1 = of color, 0 = not of color²) and age in years were also included as predictors.

Parent variables

Family income in tens of thousands of dollars, and parent education (1–6 scale; 1 = less than high school and 6 = PhD/MD/JD) were entered as continuous predictors.

Study Variables

Victimization

Parents' perceptions of peer victimization/bullying (Waasdorp et al., 2011) were obtained using a 9-item scale.³ The original items referred to the last month (i.e., "Within the last month, has someone repeatedly tried to hurt your child or make your child feel bad by..."); we altered this to refer to the past year to capture a broader time frame. The response options included five forms of *direct victimization* (i.e., threatened to hurt or hit your child; pushing or shoving your child; hitting, slapping, or kicking your child; teasing, picking on, or making fun of your child; stealing your child's things) and four forms of *indirect victimization* (i.e., e-mailing/e-messaging your child or posting something online about your child; spreading rumors or lies about your child; ignoring or leaving your child out on purpose; making sexual comments or gestures to your child).⁴ We used the sum of direct and indirect victimization as the outcome. The overall mean for victimization was 1.05 ($SD = 1.44$).

The relationship between parents' perceptions of victimization experiences is measured by the intraclass correlation (ICC). This dependence in victimization scores requires the use of multilevel modeling (MLM) for analyses predicting victimization. Parents' reports of victimization were moderately correlated, $ICC = 0.52$ (the ICCs were 0.73, 0.27, and 0.51 for lesbian, gay male, and heterosexual parents respectively), and thus MLM was used.

The subset of children who were asked the same set of questions were presented with the query, "During the past year,

²Children who were not White (i.e., children who were Latina/o/x, African American, Asian, or were biracial or multiracial) were categorized as children of color. The term "person of color" is primarily used in the United States and Canada to describe any person who is not considered White.

³One item was dropped ("called your child bad words") from the 10-item scale, as pilot participants viewed this item as redundant with "teasing, picking on, or making fun of your child."

⁴Due to the small overall number of victimization experiences (see Table 2), the low Cronbach's alpha for indirect victimization (0.34, compared to 0.69 for direct), and because the direction of key results was the same across the two forms of victimization, the sum of direct and indirect victimization was used as the outcome (Cronbach's alpha for all 9-items = 0.68). Of note is that although we report the alphas for the interested reader, we do not expect these items to measure a singular construct and/or correlate to one another.

TABLE 2 | Parent-reported victimization by family type.

Variable	Family type	
	Heterosexual % (n)	Same-sex % (n)
Threatening to hurt or hit your child	10.31% (10)	13.19% (19)
Pushing or shoving your child	22.68% (22)	13.19% (19)
Hitting, slapping, or kicking your child	9.28% (9)	11.11% (16)
Teasing, picking on, or making fun of your child	34.02% (33)	27.78% (40)
Stealing your child's things	6.19% (6)	5.56% (8)
Emailing/e-messaging your child or posting something about your child on the internet	0% (0)	0.69% (1)
Spreading rumors or lies about your child	4.12% (4)	4.17% (6)
Ignoring or leaving your child out on purpose	25.77% (25)	19.44% (28)
Making sexual comments or gestures to your child	3.09% (3)	3.47% (5)

has anyone tried to hurt you or make you feel bad by...". A total of 80 children were interviewed over the phone and responded to these items.

Responses to victimization

Parents' responses to different types of peer victimization were evaluated (Waasdorp et al., 2011). Parents who endorsed at least one type of victimization were asked to indicate which of the following seven actions they had taken in response (yes = 1, no = 0): talk to the bully, talk to the bully's parents, talk to the child, talk to the child's teacher, talk to the school counselor, talk to a school administrator, and ignore it/do nothing.

Psychological adjustment

Parents completed the Child Behavioral Checklist (CBCL/6-18), which is one of the most widely used measures of children's behavior and has solid validity and reliability (Achenbach and Rescorla, 2000). Parents rate 112 child behaviors (e.g., "argues a lot") as 0 ("not true" of the child), 1 ("somewhat or sometimes true"), or 2 ("very true or often true"). Higher scores indicate more problems. The CBCL assesses internalizing behaviors (which reflect mood disturbance, including anxiety, depression, and social withdrawal) and externalizing behaviors (which reflect conflict with others and violation of social norms). Raw scores are summed for each subscale and then transformed into *t*-scores. The standard scores are scaled so that 50 is average for the youth's age and gender, with a standard deviation of 10 points. Higher scores indicate greater problems. The $ICC = 0.39$ for internalizing ($M = 50.79, SD = 10.54$; ICC 's were 0.38, 0.36, and 0.25 for lesbian, gay male, and heterosexual parents respectively) and $ICC = 0.58$ for externalizing ($M = 52.94, SD = 10.88$; ICC 's were 0.84, 0.78, and 0.39 for lesbian, gay male, and heterosexual parents respectively).

Family type

A variable indicating whether parents were in a same-sex (1) versus different-sex (0) relationship was included.

School climate

We used a four-item measure of school social climate (Schueler et al., 2014). Parents respond to each item using a 5-point scale (1 = not at all, 5 = a tremendous amount). These items were: To what extent do you think that the children at your child's school enjoy going to school there? Overall, how much respect do you think the children at your child's school have for the staff? Overall, how much respect do you think the teachers at your child's school have for the children? How much does the school value the diversity of children's backgrounds? Cronbach's alpha for the measure was 0.75.

Public vs. private school

We included school type (public = 1; private = 0) as a predictor.

Urbanicity

We used participants' city and state to determine their county of residence, which can be mapped onto United States Census designations for urbanicity. Level of urbanicity, measured (using United States Census designations) as 0 = large central metro, 1 = large fringe metro, 2 = medium metro, 3 = small metro, 4 = micropolitan, and 5 = non-core, was used in the model as a continuous predictor (U.S. Census Bureau, 2013, 2016). Large central metro counties are counties in metropolitan statistical areas (MSA) of one million or more population that (1) contain the entire population of the largest principal city of the MSA, (2) are completely contained in the largest principal city of the MSA, or (3) contain at least 250,000 residents of any principal city of the MSA. Large fringe metro counties are counties in MSAs of one million or more population that do not qualify as large central. Medium metro counties are counties in MSAs of 250,000 to 999,999 population. Small metro counties are counties in MSAs of less than 250,000 population. Micropolitan counties are counties in micropolitan statistical areas, and non-core counties (i.e., rural) are non-metropolitan counties that are not in a micropolitan statistical area (Centers for Disease Control, 2019).

Community political leaning

Percentage of residents in the participants' county who voted Democrat in the last election was included as a predictor, main effect only.⁵

Data Analysis

Of the 261 parents who participated in the study, 241 (105 dyads and 31 individuals) had information on the important variables for the current study (e.g., perceptions of the child's victimization experiences, information about the urbanicity of

their residence) and were parents of children aged 17 years old or younger (ultimately, there were no youth older than 16 included in the sample). Of these 241 parents, 65 were gay male parents, 79 were lesbian parents, and 97 were heterosexual parents (a total of 46 men and 51 women representing 136 families).

Generalized Linear Mixed Modeling (GLMM) was used to predict parents' reports of victimization due to the observations from parents within a family not being independent. Specifically, random intercept models were used to estimate the variance in victimization across families, thus producing correct standard errors. Non-independence in dyadic data is normally modeled as a correlation between partners' residuals, allowing for the possibility of negative non-independence; however, because there is a positive relationship in parents' accounts of victimization, random intercept models are appropriate (Kenny et al., 2006). Adding random slopes to dyadic models is generally not advised because there are only two observations per cluster. Further, victimization was recorded as a sum of experiences, with most parents reporting that their children experienced no victimization. This type of data (small counts with a large amount of zeros) is most appropriately modeled with a Poisson distribution allowing for over-dispersion, or the quasi-Poisson⁶ and Penalized Quasi-Likelihood Estimation with the *MASS* package (Version 7.3.51.1; Venables and Ripley, 2002) in R (Version 3.5.2; R Core Team, 2018). All analyses were conducted in R using the R-packages *lme4* (Version 1.1.17; Bates et al., 2015), *lmerTest* (Version 3.0.1; Kuznetsova et al., 2017), *nlme* (Version 3.1.137; Pinheiro et al., 2018) and *psych* (Version 1.8.4; Revelle, 2018). Figures were created with the *ggplot2* (Version 3.1.0; Wickham, 2016) package. For the same reasons, a single-level GLM quasi-Poisson model is also used to model children's self-reported victimization, but MLM assuming a normal distribution is used when modeling parent-reported child internalizing/externalizing symptoms. More detail is given about these analyses in each of the corresponding sub-sections of the results section.

Key predictors of each outcome variable included family type (same- vs. different-sex⁷), school climate, school type (public vs. private), urbanicity, community political leaning, and the interaction of family type and urbanicity. Control variables included the child's age, gender, and race (of color vs. not), and the parents' family income and education.

⁵Urbanicity and community political leaning were moderately negatively correlated in this sample, $r = -0.46$, $p < 0.001$, as would be expected. Due to this association and the multicollinearity it introduces into the model, when the urbanicity \times family type and political leaning \times family type interactions are both included in the model, neither interaction is significant, but both are significant on their own. The choice was made to include only the urbanicity \times family type interaction in the final model, in part because Power et al. (2014) examined urbanicity specifically. The main effect of political leaning is still included, and thus the effects of urbanicity reported in the main text are *controlling* for the percentage of the community voting Democratic.

⁶There are virtually no changes to the results when using a Poisson distribution instead of a quasi-Poisson distribution, aside from the loss of the dispersion parameter. The choice was made to use the quasi-Poisson due to the differences between the estimates for the SD (= 1.44) and mean (= 1.05) of victimization. Further, performing a test for overdispersion also indicates that this parameter is needed (Cameron and Trivedi, 1990).

⁷Models treating the family type variable as a three-level (lesbian, gay male, heterosexual) categorical variable were also fit to the data. There were no differences in victimization or the effect of urbanicity between lesbian and gay male parent groups, and further, the effects for these two groups were in the same direction and of similar size; thus, it was decided that models defining family type as same-sex versus heterosexual were adequate.

RESULTS

Parents' Reports of Child Victimization

First, we examined predictors of parents' reports of child victimization using GLMM. A model with only main effects and then the full model with the exploratory interaction of family type and urbanicity were fit to the data. In the main effects only model, there were no significant effects of family type, $b = -0.34$, $\exp(b) = 0.71$, $SE = 0.26$, $p = 0.183$, $95\% CI = [-1.83, 3.05]$, nor urbanicity, $b = -0.13$, $\exp(b) = 0.88$, $SE = 0.13$, $p = 0.292$, $95\% CI = [-0.38, 0.11]$. The only significant main effect was school climate, which had a negative relationship with parent-reported victimization, $b = -0.42$, $\exp(b) = 0.65$, $SE = 0.18$, $p = 0.024$, $95\% CI = [-0.78, -0.07]$: that is, parents who viewed their children's school climate more positively also tended to report their children as having lower levels of victimization.

In the full model (Table 3), with all control and predictor variables listed above, there was an interaction of family type (same-sex = 1 versus different-sex = 0) and urbanicity, $b = 0.47$, $\exp(b) = 1.60$, $SE = 0.22$, $p = 0.033$, $95\% CI = [0.05, 0.89]$, such that in large central metro areas, children in LG-parent families were, according to parents, experiencing less victimization than children in heterosexual-parent families, $b = -0.80$, $\exp(b) = 0.45$, $SE = 0.33$, $p = 0.016$, $95\% CI = [-1.43, -0.17]$ (vertical distance between black and gray lines at the far left most point seen in Figure 1)⁸; whereas, in non-core (rural) regions, children with LG parents were experiencing more victimization compared to children with heterosexual parents, $b = 1.09$, $\exp(b) = 2.98$, $SE = 0.71$, $p = 0.125$, $95\% CI = [-0.27, 2.45]$ (vertical distance between black and gray lines at the far right most point seen in Figure 1), although this latter simple effect estimate had a large amount of uncertainty as one can see by the relative paucity of data collected from rural areas. In sum, our model predicts that

⁸The interaction between family type and urbanicity remains statistically significant after removing the few cases of same-sex parent families in rural (non-core) areas, $p = 0.043$.

to the extent that a family lives in a more urban community, children with LG parents are, according to parents, victimized less than children with heterosexual parents, and the opposite may be true in more rural areas.⁹ School climate maintained a negative relationship with parent-reported victimization in the full model, $b = -0.44$, $\exp(b) = 0.65$, $SE = 0.18$, $p = 0.020$, $95\% CI = [-0.79, -0.08]$. No controls or other predictors were significant in the main effects or full models.

Exploratory Analysis of Child Victimization Reports

Among those children with child follow-up survey data who were under age 18, there were 67 who reported any victimization experiences and 16 who reported no victimization, while three were missing.¹⁰ However, of the 241 parents in the analyses reported above, 138 had data from children's reports of victimization (74 families) and 103 (62 families) were missing child's reports. It is quite possible that the children who were missing self-reports of victimization were indeed those children who experience more victimization, in which case the data is missing not at random (MNAR) and any interpretations gleaned from the data would be seriously limited. First, before analyzing child victimization reports, in hopes of providing evidence that the data are not MNAR, we assessed whether the missingness on the child's victimization reports were not associated with the parents' reports of victimization by including an indicator of child missingness (missing = 1, not missing = 0) as a predictor of parent-reported victimization in a model by itself alone

⁹The significant interaction of community political leaning \times family type when included in the model without the urbanicity \times family type interaction is such that heterosexual parents report more victimization of their children than same-sex parents in more progressive communities while same-sex parents report more victimization than heterosexual parents in more conservative communities ($b = -0.03$, $SE = 0.02$, $p = 0.026$).

¹⁰The number of children with usable data was reduced to 80, because three were missing data on victimization, and three were excluded because they had a sibling (adopted at the same time) who (a) completed the victimization measure, and (b) was the child about whom the parents completed the victimization measure.

TABLE 3 | Estimates from main effects only and full models.

Variable	Main effects only model					Full model				
	<i>b</i>	<i>Exp(b)</i>	<i>df</i>	<i>t</i>	<i>95% CI</i>	<i>b</i>	<i>Exp(b)</i>	<i>df</i>	<i>t</i>	<i>95% CI</i>
Intercept	0.61	1.83	132	0.48	[-1.83, 3.05]	1.09	2.98	132	0.87	[-1.34, 3.52]
Family type	-0.34	0.71	132	-1.34	[-0.84, 0.15]	-0.80	0.45	132	-2.43*	[-1.43, -0.17]
Urbanicity	-0.13	0.88	95	-1.06	[-0.38, 0.11]	-0.42	0.66	94	-2.29*	[-0.78, -0.06]
Percent voting Democratic	0.00	1.00	95	-0.28	[-0.02, 0.01]	0.00	1.00	94	-0.51	[-0.02, 0.01]
Child of color	0.11	1.12	132	0.41	[-0.41, 0.63]	0.06	1.06	132	0.22	[-0.45, 0.57]
Child age	0.13	1.14	132	1.68 ⁺	[-0.02, 0.28]	0.13	1.14	132	1.71 ⁺	[-0.02, 0.28]
Gender (male = 1)	0.07	1.07	95	0.30	[-0.39, 0.54]	0.03	1.04	94	0.15	[-0.42, 0.49]
Education	0.01	1.01	95	0.13	[-0.16, 0.19]	0.01	1.01	94	0.09	[-0.17, 0.18]
Family income (in \$10k)	-0.01	0.99	95	-0.49	[-0.03, 0.02]	-0.01	0.99	94	-0.36	[-0.03, 0.02]
School social climate	-0.42	0.65	95	-2.30*	[-0.78, -0.07]	-0.44	0.65	94	-2.36*	[-0.79, -0.08]
Public school	0.03	1.03	95	0.11	[-0.46, 0.52]	0.06	1.06	94	0.25	[-0.42, 0.55]
Family type \times urbanicity	-	-	-	-	-	0.47	1.6	94	2.16*	[0.05, 0.89]

⁺ $p < 0.10$, * $p < 0.05$. For family type, LG parent families are coded as 1 and heterosexual parent families are coded as 0. For urbanicity, 0 equals large central metro.

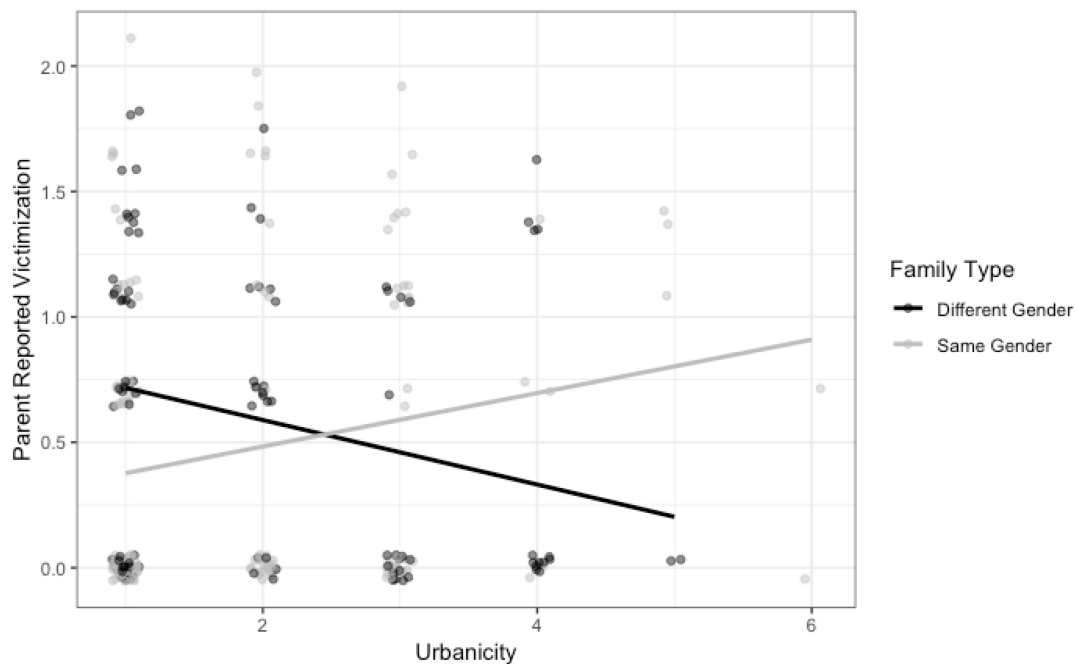


FIGURE 1 | This figure depicts the interaction between urbanicity and family type on parent-reported victimization experiences. Note that points have been jittered horizontally and vertically for visibility purposes in the figure only.

($p = 0.990$) and as an addition in the models reported above (all controls included, $p = 0.937$). Parents' reports of victimization were not associated with whether or not their child participated. Second, to assess if missingness on child victimization reports were associated with any of the study variables (MNAR), we ran a logistic regression model with missingness on victimization as the outcome variable and the following predictors: family type, school climate, school type, urbanicity, community political leaning, child race, child gender, child age, parent education, and family income. Only child gender was significantly associated with missingness $\exp(b) = 2.20$, $p = 0.048$, with girls 2.20 times as likely to be missing as boys. We took these two analyses as evidence that the data were missing at random (MAR). The choice was made to simply control for the child's gender in all analyses reported in the main results section for the analysis of child's victimization reports, instead of attempting to impute such a large portion of missing data.

In a model including the same predictors and control variables as in the parent-reported victimization models fit above, we tested the relationship between family type, urbanicity, and child-reported victimization ($n = 80$). Children's reports did not follow a normal distribution, as was the case with parent's reports; thus, a generalized linear model (single-level GLM) assuming a quasi-Poisson distribution was used. This was a single-level model because we included only one child from each family in the analysis. There were no statistically significant associations with children's reports of victimization in this full model nor in a model including only family type ($p = 0.934$), urbanicity ($p = 0.141$), and the interaction of the two ($p = 0.457$). See **Table 4** for a correlation matrix of child reports of victimization and

all study variables. Notably, child reports of victimization were correlated positively with parent reports of victimization, $r = 0.23$, $p = 0.044$, but were uncorrelated with family type, $r = 0.13$, $p = 0.287$.

Parents Responses to Victimization

There were various ways that parents could respond to victimization experiences, including to talk to the bully, talk to the bully's parents, talk to their child, talk to the child's teacher, talk to the school counselor, talk to the school administrator, and ignore it/do nothing. Parents who indicated that their children had never been victimized were missing all of the responses to victimization variables: they had no victimization to respond to. Among those who endorsed *any* victimization ($n = 113$; 46.9%), we used chi-square tests to assess whether there were differences between family types (same-sex vs. different-sex) in their likelihood of responding in each of the seven ways. Many of the expected cell counts were very small, less than five, and thus p -values based on Fisher exact tests are reported. **Table 5** presents the n and % for each type of response to victimization, for the total sample and by family type.

There was no evidence of an association between family type and talking to the bully's parents, $p = 0.748$, nor talking to the child's teacher, $p = 0.123$, nor talking to the school counselor, $p = 0.372$, nor ignoring/doing nothing, $p = 0.679$. There was an association between family type and responding by talking to the bully, $p = 0.003$, with 2.27% (only one) heterosexual parents reporting talking to the bully and 14% of LG parents reporting talking to the bully. There was also an association between family type and talking to their child, $p = 0.023$, with

TABLE 4 | Correlations among child reports of victimization and study variables ($n = 73$ to 80).

	1	2	3	4	5	6	7	8	9	10	11	12	13
1. Child reports of victimization	1												
2. Parent reports of victimization ^a	0.28*	1											
3. Family type (1 = LG)	0.13	−0.20 ⁺	1										
4. Urbanicity	−0.22 ⁺	−0.01	−0.05	1									
5. CBCL total score ^a	0.29*	0.43***	−0.14	−0.11	1								
6. Percent voting Democrat	0.21 ⁺	0.01	0.24*	−0.39**	0.06	1							
7. Child of color	−0.16	<0.01	0.14	0.02	−0.08	−0.03	1						
8. Child's age	−0.03	0.13	−0.08	0.17	−0.06	0.02	0.13	1					
9. Child gender (1 = male)	−0.05	0.09	−0.10	0.03	−0.20 ⁺	0.15	−0.02	−0.11	1				
10. Parent education ^a	0.03	−0.09	0.15	0.03	0.13	−0.05	0.14	−0.10	−0.08	1			
11. Family income	0.05	−0.07	0.24*	−0.04	−0.12	0.37**	0.01	−0.09	0.04	0.23 ⁺	1		
12. School social climate ^a	−0.12	−0.18	0.08	−0.19 ⁺	−0.32**	0.17	0.16	0.08	−0.12	0.02	0.11	1	
13. Public school	0.03	0.10	−0.10	0.03	0.17	−0.22 ⁺	−0.08	−0.21 ⁺	−0.10	−0.06	−0.30*	−0.31**	1

⁺ $p < 0.10$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$. ^aThe parents' data was averaged for this correlation matrix. Correlations are provided for the child data only because a full reporting of relationships was not included in the main text, as it was for the parent data.

84.8% of heterosexual parents and 98.2% of LG parents reporting this response; and talking to a school administrator, $p = 0.036$, with only 29.6% of heterosexual parents reporting talking to an administrator and 52.0% of LG parents reporting this response.

Psychological Adjustment

Next, we explored the relationship between victimization and child adjustment. Given the findings that emerged in predicting victimization, we tested whether family type and urbanicity were related to children's internalizing and externalizing scores, as reported by parents on the CBCL, and whether there was evidence for mediation of this relationship by victimization. In other words, we wondered whether children with LG parents might experience poorer psychological adjustment than children with heterosexual parents to the extent that they are in more rural areas, and if this relationship could be explained, in part, by increased victimization.

TABLE 5 | Percentage and number of parents reporting each type of responses to child's victimization experiences by family type.

Response	Family type		Full sample
	Heterosexual <i>n</i> (%)	Same-sex <i>n</i> (%)	
Talk to the bully	1 (2.27)	7 (14.00)	8 (8.51)
Talk to the bully's parents	4 (9.09)	6 (11.76)	10 (10.53)
Talk to their child	39 (84.78)	53 (98.15)	92 (92.00)
Talk to the child's teacher	28 (62.22)	41 (77.36)	69 (70.41)
Talk to the school counselor	11 (25)	18 (35.29)	29 (30.53)
Talk to the school administrator	13 (29.55)	26 (52)	39 (41.49)
Ignore/do nothing	2 (4.55)	4 (8.33)	6 (6.52)

Parents could have reported more than one type of response or have been missing on any one response (12.39% reported none of the responses, 19.47% one response, 25.66% two responses, 23.89% three responses, 13.27% four responses, 3.54% five responses, and 1.77% of parents reported six responses). Percentages are percentages of non-missing on that response type.

Child Behavioral Checklist t -scores for internalizing and externalizing symptoms were normally distributed; thus, the final models reported here assume normality. MLM, with a random intercept model for dyads, was again used due to parents' reports on the CBCL being dependent. Urbanicity, family type, and the interaction of urbanicity and family type were included as predictors. Predictors and controls were the same as in the model for victimization. Due to complexities resulting from differing distributional assumptions for victimization, the mediator (quasi-Poisson), and the outcome variable (normal), the presence of indirect effects were inferred simply by testing the paths from the family type by urbanicity to victimization and from victimization to CBCL (controlling for the family type by urbanicity interaction), separately.

Internalizing

As predicted, and consistent with the pattern observed for victimization, there was a significant interaction between family type and urbanicity, $b = 2.83$, $SE = 1.41$, $p = 0.046$, 95% $CI = [0.14, 5.48]$ (see **Figure 2**), such that in large central metro areas, children in LG-parent families had fewer internalizing symptoms than children in heterosexual-parent families, $b = -3.09$, $SE = 2.17$, $p = 0.157$, 95% $CI = [-7.18, 1.03]$, and in non-core (rural) regions, children with LG parents had more symptoms than children with heterosexual parents, $b = 8.24$, $SE = 4.54$, $p = 0.072$, 95% $CI = [-0.44, 16.80]$. School climate also had a negative effect on internalizing symptoms, $b = -5.75$, $SE = 1.43$, $p < 0.001$, 95% $CI = [-8.46, -2.95]$: Parents who reported less positive school climates reported more child internalizing symptoms. When parent-reported victimization was included in this model, the interaction of urbanicity and family type was reduced slightly and no longer significant, $b = 2.27$, $SE = 1.39$, $p = 0.106$, 95% $CI = [-0.40, 4.88]$, providing evidence for mediation. As expected, there was a significant positive relationship between victimization and internalizing symptoms, $b = 1.21$, $SE = 0.50$, $p = 0.017$, 95% $CI = [0.26, 2.20]$: Children with higher levels of parent-reported victimization also had

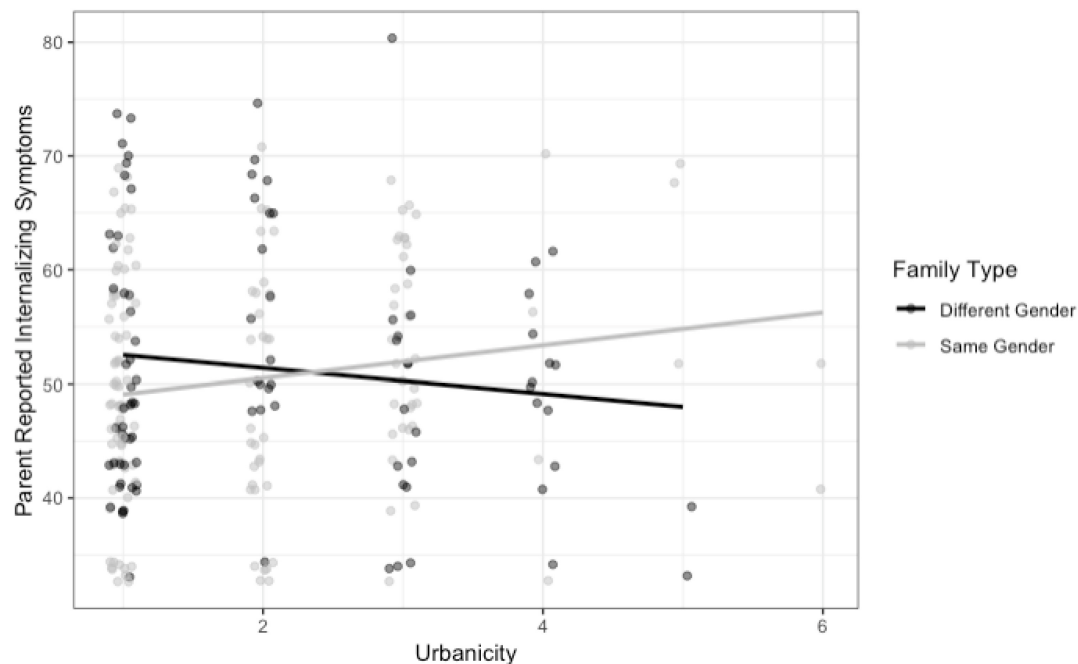


FIGURE 2 | This figure depicts the interaction between urbanicity and family type on parent-reported internalizing symptoms. Note that points have been jittered horizontally and vertically for visibility purposes in the figure only.

higher levels of parent-reported internalizing symptoms. No other predictors or controls were significant.

Externalizing

In contrast to the results for internalizing symptoms, for externalizing symptoms, there was no interaction of family type and urbanicity, $b = 1.99$, $SE = 1.49$, $p = 0.183$, 95% $CI = [-0.85, 4.81]$ ¹¹, although it was in the same direction as above. Only school climate was significantly related to externalizing symptoms, $b = -6.01$, $SE = 1.35$, $p < 0.001$, 95% $CI = [-8.65, -3.43]$, such that children who attended schools that were rated less positively by parents also had higher levels of parent-reported externalizing symptoms. As with internalizing symptoms, there was a significant positive relationship between parents' reports of victimization and externalizing symptoms (controlling for family type and urbanicity, and their interaction), $b = 1.39$, $SE = 0.49$, $p = 0.005$, 95% $CI = [0.47, 2.39]$. None of the other predictors or controls were significant.

DISCUSSION

This study contributes to a small but growing literature on victimization experiences of children with LG parents. Consistent with prior work (Wainright and Patterson, 2006; Rivers et al., 2008), there were no differences overall in the level

of victimization that children reportedly experienced, by family type. However, our investigation of community level variables that have rarely been explored (Power et al., 2014) suggests that the relationship between family structure and victimization may depend on where families live.

We found that in large cities, children in LG-parent families experienced less victimization than children in heterosexual-parent families, according to parent reports, whereas in more rural regions, children with LG parents experienced more victimization than children with heterosexual parents (albeit non-significantly so). This finding dovetails with work on LGBTQ youth which documented greater victimization among youth living in rural communities (Kosciw et al., 2009) and youth living in self-described hostile and small towns (Paceley et al., 2017). The current study—which included both parents' reports, used a comparison sample of heterosexual parents, and looked at victimization more broadly—also builds on and echoes Power et al. (2014) study of Australian LGBTQ parents, which found that parents living in less urban areas were more likely to report that their children experienced homophobic bullying or discrimination at school. Parents in rural areas were characterized by less of a sense of “connection” to their communities; they were also less “out” and had less contact with LGBTQ people, compared to parents in more urban areas (Power et al., 2014). Perhaps the finding that we observed reflects the reality that families living in more urban areas are more likely to be connected to a visible LGBTQ community and to have LGBTQ friends and neighbors—and to have access to LGBTQ-affirming community service providers, which are more likely in urban settings (Holman and Oswald, 2011; Oswald and Holman, 2013).

¹¹Sensitivity analysis confirmed that the interaction between family type and urbanicity remained statistically significant for internalizing symptoms ($p = 0.013$), and is statistically significant for externalizing symptoms ($p = 0.028$), after removing the cases of same-sex parent families in rural areas.

Perhaps too, rural families are surrounded by less progressive neighbors and parents—which is supported by the fact that the interaction between family type and community political leaning was in the same direction as the interaction between family type and urbanicity. This finding highlights the need to consider contextual factors, such as geographic location and community climate, in studying psychosocial outcomes within LG-parent families in particular. Of course, given the small number of participants living in rural areas in particular, our findings related to urbanicity must be viewed with caution; more research on LG-parent families in diverse contexts is needed.

Prior work has established the importance of school climate, such that schools characterized by positive teacher-student relationships, respect for students, and respect for diversity tend to have lower rates of bullying (Cook et al., 2010). In turn, consistent with some prior work (Attar-Schwartz, 2009), school climate was related to victimization, such that, across family types, parents who reported more negative climate also reported more victimization. Perhaps there is an unexplored mediator of this relationship. Parents' impressions of school climate may impact their school involvement, such that parents who feel more positively about their children's schools engage more directly in volunteering, serving on committees, etc. (Beveridge, 2005). LG parents may be especially motivated to actively engage with school communities to ensure that their children are treated fairly (Goldberg et al., 2017), and such involvement may serve to reduce children's risk of victimization. Future research can examine this possibility. Future work can also seek to establish whether certain aspects of school climate (e.g., the dimension of 'respect for diversity') are differentially related to victimization risk within LG- versus heterosexual parent-families, as well as adopted versus non-adopted children.

Some research has documented associations between victimization and mental health (Cook et al., 2010). Research on victimization and adjustment among children with LG parents has been limited by the absence of heterosexual parent comparison groups (Bos and van Balen, 2008; Bos and Gartrell, 2010) and exclusive focus on homophobic, as opposed to general, victimization (Farr et al., 2016). Yet this work has found evidence that LG parent- and teacher-reported victimization is associated with more problem behavior (Bos and van Balen, 2008; Bos and Gartrell, 2010; Farr et al., 2016) and lower self-esteem (Bos and van Balen, 2008) in children. In the current study, we found that children who had higher levels of parent-reported victimization also had higher levels of parent-reported internalizing and externalizing symptoms, controlling for where they lived and the interaction of family structure and urbanicity. And, following the pattern observed in predicting victimization, we also found that in large urban areas, children with LG parents had fewer internalizing symptoms than children with heterosexual parents, whereas in more rural areas, children with LG parents had slightly more internalizing symptoms than children with heterosexual parents. Victimization only partly mediated the relationship between urbanicity and family structure and internalizing symptoms: Children in LG-parent households who resided in less urban settings were reportedly

victimized more, and this partly explained their elevated risk for internalizing symptoms.

Parents who reported less positive school climates also reported more internalizing and externalizing symptoms in their children, consistent with prior work documenting the role of positive school climate in reducing mental health and behavioral issues among students (Hendron and Kearney, 2016). Thus, the importance of school climate to child adjustment appears to extend to adopted children and children with LG parents, although more work is needed to explore how specific features of school climate may impact child adjustment in these families. Bos and Gartrell (2010), for example, found that greater stigmatization was associated with more problem behavior in adolescents with LG parents—but this effect was buffered by the presence of LGBTQ curricula, such that stigmatized youth whose schools taught about LGBTQ people and events were less likely to demonstrate problem behavior than stigmatized youth whose schools lacked LGBTQ-inclusive curricula.

Few notable findings emerged in predicting children's reports of victimization, likely in part because of the much smaller sample of children who provided data. We documented only modest concordance between parents' and children's reports of victimization, echoing prior work showing that there is far from perfect agreement between children and parents regarding whether or not children have been bullied (Holt et al., 2009; Larrañaga et al., 2018), thus underscoring the need for future work on LG-parent and adoptive families to consider child reports of victimization. The fact that so many parents declined their children's participation is a finding in and of itself. Children's adoptive status likely conferred on some parents a heightened awareness of how participating in a research study might suggest to children that they were different or unique—an impression that some parents acknowledged wanting to avoid. And, given that children were between 8 and 9 on average, some parents may have felt uneasy about allowing their relatively young children to participate in research (Geller et al., 2003; Hoberman et al., 2013). Parents are less likely to decline participation for older (e.g., teen-aged) children, perhaps in part because parents feel more comfortable allowing their teens, who can better comprehend the risks and benefits of research, to decide whether to participate themselves (Hoberman et al., 2013).

There were few differences in parents' responses to victimization by family type—although this is in part related to the very low base rates and thus small cell sizes for most types of responses. First, somewhat in contrast with Rivers et al. (2008) finding that youth with LG parents were less likely to report that they would turn to school-based supports, we found that LG parents were more likely to talk to administrators than were heterosexual parents. This difference may in part reflect differences in perspective. LG parents may feel more empowered and/or well-positioned to approach school personnel to advocate for their children than youth with LG parents—a stance that may be enhanced by parents' high levels of education and income, which can represent important sources of social capital, particularly in light of other marginalized status(es) (Goldberg et al., 2018). We also found that among parents who reported victimization, LG parents were more likely to talk to their

children about such victimization than heterosexual parents, echoing prior work showing that LG adoptive parents are often highly aware of their children's potential for victimization surrounding multiple marginalized identities, and may engage in socialization around how to handle and respond to bias (Goldberg and Smith, 2016). Finally, LG parents were more likely to report talking to the bully—which is a concern given evidence that this is an undesired response by youth (Mishna et al., 2006) and may be especially upsetting to youth with LG parents, who may, because of their family structure, realistically fear backlash to this type of intervention. These data are intriguing and highlight the need for qualitative research in this area, to better understand parents' motivations for this approach, and how they engage in it (e.g., how are parents approaching the perpetrator of victimization?)—as well as the perceived consequences of employing this strategy. Notably, the most frequently endorsed responses—talking to the child, and talking to a teacher—were also the most frequently endorsed responses in Waasdorp et al. (2011). And, parents of victimized children endorsed two responses on average ($M = 2.24$), consistent with Waasdorp et al. (2011)—although notably, our study inquired about the past school year, and Waasdorp et al. (2011) asked about the past month, such that the findings are not directly comparable.

School type was unrelated to child victimization. This is interesting amidst prior work suggesting that attending private school may be associated with lower levels of victimization (Brinig and Garnett, 2012; Henkel and Slate, 2013). Given the high levels of education and income among the parents in the sample as a whole, perhaps those who sent their children to public school did so because these were at least moderately safe and/or high in quality, and thus not appreciably different than the private schools that other children in the sample attended. Likewise, the main effect of community political leaning was not significant. Yet the interaction with family type—when tested alone—followed the same pattern as urbanicity, highlighting the interconnectedness of community political leaning and urbanicity, as well as the significance of community context to victimization experiences of children with same-sex parents.

Limitations and Future Directions

A major limitation of this study is that the data are cross-sectional. Future longitudinal research should seek to determine whether the associations we documented hold up over time. Another major limitation is that we did not include teacher reports and we only had data on child reports from a subset of families. Undoubtedly, the study would be enhanced by the inclusion of both child and teacher reports. In studies of elementary school students, both parents (Holt et al., 2009; Rupp et al., 2018) and teachers (Rupp et al., 2018) report a lower incidence of victimization/bullying than youth themselves. Further, some work suggests that at least some children with LG parents may avoid telling their parents about bullying they experience at school, especially if it is related to parental sexual orientation (Goldberg, 2007, 2010). Thus, children's reports do represent a unique, important perspective that could be expected to deviate in meaningful ways from parent reports, under

some conditions. Furthermore, research that obtains reports of victimization from multiple informants (teachers, peers, self, parents) may enhance prediction of some youth outcomes (Wienke Totura et al., 2009). For example, in one study, higher teacher-youth concordance about victimization was associated with youth academic issues, whereas lower levels were associated with youth moodiness (Wienke Totura et al., 2009).

Given that we relied on parent reports for our main analyses, we have no way of knowing whether, for example, the associations between victimization and child problems might reflect reporting bias. That is, parents with a more negative outlook may have tended to report more negative outcomes in both domains, and, likewise parents with a more positive outlook may have provided more positive assessments of both. Another limitation relates to our modification of Waasdorp et al. (2011) measure of victimization to reflect the past school year. Because of this, our findings are not directly comparable to other studies that inquired about the past month.

We also did not find statistically significant differences between gay father and lesbian mother families. Future work with larger samples should explore whether risk for or processes related to victimization differ for children in gay father versus lesbian mother families. Attitudes toward sexual minority men tend to be more negative than attitudes toward sexual minority women (Costa and Davies, 2012); likewise, attitudes toward gay fathers are more negative than attitudes toward lesbian mothers (Gato and Fontaine, 2016; Webb et al., 2017), whereby, for example, children are believed to be at greater risk for non-normative sexuality development in gay-father households as compared to lesbian-mother households (Gato and Fontaine, 2016). In turn, children with gay fathers may be more vulnerable to peer victimization. Because of the simplistic nature of our child race variable, future work should seek to explore how victimization experiences might vary based on specific racial/ethnic categories. For example, due to the specificity of stigmas and stereotypes related to race and sexuality, a Black male child with two White gay fathers might have a different experience than an Asian male child with two White gay fathers; or a Black male child with two White lesbian mothers.

Children's psychological adjustment may also be influenced by a variety of factors that we did not assess in the current study. All of the children in the study were adopted, and prior work has documented associations between pre-adoptive history (including adverse experiences and age of the child at placement) and psychological adjustment (Jones and Morris, 2012). Likewise, post-placement adoption-related processes, such as parents' level of preparation for the adoption (Goldberg and Smith, 2013) and level of communication within the family about the adoption (Brodzinsky, 2006), have also been linked to children's adjustment.

Future work should explore resiliency factors that might mediate the association between victimization and well-being, such as strong LG parent-child relationships (Bos and Gartrell, 2010; van Gelderen et al., 2012), peer relationships (van Gelderen et al., 2012), and contact with other children with LG parents (Bos and van Balen, 2008). Indeed, future work should assess

not only risk factors but protective factors for victimization in LG-parent families.

Finally, qualitative work that examines experiences of victimization among youth with LG parents is needed. Children of LG parents face a distinct set of stereotypes and assumptions surrounding their parents' sexuality and its supposed impact on them. For example, Clarke et al. (2004) point out that the issue of homophobic bullying is frequently used to undermine LG-parent families. Children are deemed to be "at risk" for bullying related to their parents' sexuality, and this is in turn used as a justification for why LGBTQ people should not be parents. Caught in a "web of accountability" (Clarke et al., 2004, p. 531), children may minimize the bullying that is perpetrated upon them, in part to protect their parents and families (Goldberg, 2007). Research that aims to illuminate not only how children with LG parents experience victimization, but how they balance concerns about their family's image and safety in sharing information about victimization with others (e.g., therapists and school staff), is needed.

CONCLUSION

Lesbian and gay parents and their children live throughout the United States and beyond, in communities that vary in their urbanicity, dominant political orientation, and numerous other factors. This study highlights the importance of attending to the proximal and distal contexts, including school, community, state, and national domains, that shape the lives of LG-parent families. Even more specifically, the findings of this study suggest that urbanicity may be an important community feature that directly and indirectly impacts youth and parents through its effects on schools (e.g., via trickle down of community attitudes, values, and practices; Bronfenbrenner, 1988). Living in an area that is less urban—and, in turn, contains fewer LGBTQ residents and services for those residents—may present a risk factor for LG-parent families, a possibility that is supported by prior work as well and deserves more attention by researchers, policy advocates, and school professionals. Yet much more work is needed to understand how LG-parent families and their children in diverse community and school settings seek to prevent and intervene with regards to victimization. Additionally, research is needed that explores the experiences of educators in different

regions and settings with regard to LG-parent families, including their differing training needs, in order to best understand and support these families.

Educators and practitioners who seek to support LG-parent families and adoptive families must recognize the importance of school and community context in shaping these families' vulnerabilities and resiliencies. They should consider how state, community, and school politics and policies may impact children with LG parents in subtle ways that are difficult to discern (e.g., via the impact of climate, or the availability of LG parent-family inclusive resources) as well as in settings that are rarely considered (e.g., the bus stop; the cafeteria; recess). Educators and practitioners working in less urban areas in particular should carefully evaluate the ways in which diverse families and children may be implicitly excluded and victimized. Finally, all educators and family practitioners should seek ways to engage in social and political advocacy on behalf of diverse and potentially marginalized families, including LG-parent families.

DATA AVAILABILITY STATEMENT

The datasets generated for this study are available on request to the corresponding author.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Clark University. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

AG wrote the literature review, methods, portions of the results, and discussion. RG wrote the majority of the results, and portions of the methods and discussion.

FUNDING

This study was funded by a Small Grant from the Spencer Foundation.

REFERENCES

- Achenbach, T., and Rescorla, L. (2000). *Manual for ASEBA Preschool Forms & Profiles*. Burlington, VT: UVM.
- Attar-Schwartz, S. (2009). Peer sexual harassment victimization at school: the role of student characteristics, cultural affiliation, and school factors. *Am. J. Orthopsychia.* 79, 407–420. doi: 10.1037/a0016553
- Bates, D., Mächler, M., Bolker, B., and Walker, S. (2015). Fitting linear mixed-effects models using lme4. *J. Statist. Softw.* 67, 1–48.
- Baunach, D. M. (2012). Changing same-sex marriage attitudes in America from 1988 through 2010. *Public Opin. Q.* 76, 364–378. doi: 10.1093/poq/nfs022
- Beveridge, S. (2005). *Children, Families, And Schools: Developing Partnerships for Inclusive Education*. London: Routledge Falmer.
- Bos, H., and Gartrell, N. (2010). Adolescents of the USA national longitudinal family study: can family characteristics counteract the negative effects of stigmatization? *Fam. Process* 49, 559–572. doi: 10.1111/j.1545-5300.2010.01340.x
- Bos, H., and van Balen, F. (2008). Children in planned lesbian families: stigmatisation, psych-ological adjustment and protective factors. *Cult. Health Sex.* 10, 221–236. doi: 10.1080/13691050701601702
- Bradshaw, C. P., Sawyer, A. L., and O'Brennan, L. M. (2009). A social disorganization perspective on bullying-related attitudes and behaviors: the influence of school context. *Am. J. Commun. Psychol.* 43, 204–220. doi: 10.1007/s10464-009-9240-1
- Bradshaw, C. P., Waasdorp, T. E., and Johnson, S. L. (2015). Overlapping verbal, relational, physical, and electronic forms of bullying in adolescence: influence

- of school context. *J. Child Adolesc. Psychol.* 44, 494–508. doi: 10.1080/15374416.2014.893516
- Brinig, M. F., and Garnett, N. (2012). Catholic schools, charter schools, and urban neighborhoods. *Univ. Chicago Law Rev.* 87, 31–57.
- Brodzinsky, D. (2006). Family structural openness and communication openness as predictors in the adjustment of adopted children. *Adopt. Q.* 9, 1–18. doi: 10.1300/j145v09n04_01
- Brodzinsky, D. (2011). Children's understanding of adoption: developmental and clinical implications. *Prof. Psychol. Res. Pract.* 42, 200–207. doi: 10.1037/a0022415
- Bronfenbrenner, U. (1988). "Interacting systems in human development: research paradigms: present and future," in *Human Development in Cultural and Historical Contexts. Persons in Context: Developmental Processes*, eds N. Bolger, A. Caspi, G. Downey, and M. Moorehouse, (New York, NY: Cambridge University Press), 25–49. doi: 10.1017/cbo9780511663949.003
- Burnett, R., and Salka, W. (2009). Determinants of electoral support for anti-gay marriage constitutional amendments: an examination of 2006 votes on ballot issues in the states. *J. Homosex.* 56, 1071–1082. doi: 10.1080/00918360903275476
- Cameron, A. C., and Trivedi, P. K. (1990). Regression-based tests for overdispersion in the Poisson model. *J. Econometr.* 46, 347–364. doi: 10.1016/0304-4076(90)90014-k
- Card, N., Isaacs, J., and Hodges, E. (2008). "Multiple contextual levels of risk for peer victimization: a review with implications for prevention and intervention efforts," in *School Violence and Primary Prevention*, ed. T. Miller, (New York, NY: Springer), 125–153. doi: 10.1007/978-0-387-77119-9_7
- Centers for Disease Control, (2019). *NCHS Urban-Rural Classification Scheme For Counties*. Available at: https://www.cdc.gov/nchs/data_access/urban_rural.htm (accessed September 19, 2019).
- Cillessen, A. H. N., and Lansu, T. A. M. (2015). Stability, correlates, and time-covarying associations of peer victimization from grade 4 to 12. *J. Clin. Child Adolesc. Psychol.* 44, 456–470. doi: 10.1080/15374416.2014.958841
- Clarke, V., Kitzinger, C., and Potter, J. (2004). "Kids are just cruel anyway": lesbian and gay par-ents' talk about homophobic bullying. *Br. J. Soc. Psychol.* 43, 531–550. doi: 10.1348/0144666042565362
- Cook, C. R., Williams, K., Guerra, N. G., Kim, T. E., and Sadek, S. (2010). Predictors of bullying and victimization in childhood and adolescence: a meta-analytic investigation. *Sch. Psychol. Q.* 25, 65–83. doi: 10.1037/a0020149
- Costa, P., and Davies, M. (2012). Portuguese adolescents' attitudes toward sexual minorities: transphobia, homophobia, and gender role beliefs. *J. Homosex.* 59, 1424–1442. doi: 10.1080/00918369.2012.724944
- Daugherty, J., and Copen, C. (2016). Trends in attitudes about marriage, childbearing, and sexual behavior: United States, 2002, 2006–2010, and 2011–2013. *Natl. Health Stat. Rep.* 92, 1–10.
- Espelage, D., Van Ryzin, M., and Holt, M. (2018). Trajectories of bully perpetration across early adolescence: static risk factors, dynamic covariates, and longitudinal outcomes. *Psychol. Viol.* 8, 141–150. doi: 10.1037/vio0000095
- Farr, R. H., Oakley, M. K., and Ollen, E. W. (2016). School experiences of young children and their lesbian and gay adoptive parents. *Psychol. Sex. Orient. Gender Divers.* 3, 442–447. doi: 10.1037/sgd0000187
- Garnett, B. R., Masyn, K., Austin, S. B., Miller, M., Williams, D. R., and Viswanath, K. (2014). The intersectionality of discrimination attributes and bullying among youth: an applied latent class analysis. *J. Youth Adolesc.* 43, 1225–1239. doi: 10.1007/s10964-013-0073-8
- Gates, G., Badgett, M. V. L., Macomber, J. E., and Chambers, K. (2007). *Adoption and Foster Care By Gay And Lesbian Parents In The United States*. Washington, DC: The Urban Institute.
- Gato, J., and Fontaine, A. M. (2016). Attitudes toward adoption by same-sex couples: effects of gender of the participant, sexual orientation of the couple, and gender of the child. *J. GLBT Fam. Stud.* 12, 46–67. doi: 10.1080/1550428x.2015.1049771
- Geller, G., Tambor, E., Bernhardt, B., Fraser, G., and Wissow, L. (2003). Informed consent for enrolling minors in genetic susceptibility research: a qualitative study of at-risk children's and parents' views about children's role in decision-making. *J. Adolesc. Health* 32, 260–271. doi: 10.1016/s1054-139x(02)00459-7
- Goldberg, A. E. (2007). How does it make a difference? Perspectives of adults with lesbian, gay, and bisexual parents. *Am. J. Orthopsychiatr.* 77, 550–562. doi: 10.1037/0002-9432.77.4.550
- Goldberg, A. E. (2010). *Lesbian and Gay Parents and their Children: Research On The Family Life Cycle*. Washington, DC: American Psychological Association.
- Goldberg, A. E., Allen, K. R., Black, K., Frost, R., and Manley, M. (2018). "There is no perfect school": the complexity of school decision-making among lesbian and gay adoptive parents. *J. Marriage Fam.* 80, 684–703. doi: 10.1111/jomf.12478
- Goldberg, A. E., Black, K., Manley, M., and Frost, R. (2017). "We told them that we are both really involved parents": sexual minority and heterosexual adoptive parents' engagement in school communities. *Gen. Educ.* 5, 614–631. doi: 10.1080/09540253.2017.1296114
- Goldberg, A. E., Frost, R. F., Miranda, L., and Kahn, E. (2019). LGBTQ individuals' experiences with delays and disruptions in the foster care and adoption process. *Child. Youth Serv. Rev.* 106. doi: 10.1016/j.childyouth.2019.104466
- Goldberg, A. E., and Smith, J. Z. (2013). Predictors of psychological adjustment in early placed adopted children with lesbian, gay, and heterosexual parents. *J. Fam. Psychol.* 27, 431–442. doi: 10.1037/a0032911
- Goldberg, A. E., and Smith, J. Z. (2014). Perceptions of stigma and self-reported school engagement in same-sex couples with young children. *Psychol. Sex. Orient. Gen. Divers.* 1, 202–212. doi: 10.1037/sgd0000052
- Goldberg, A. E., and Smith, J. Z. (2016). Predictors of race, adoption, and sexual orientation related socialization among adoptive parents of young children. *J. Fam. Psychol.* 30, 397–408. doi: 10.1037/fam0000149
- Goldweber, A., Waasdorp, T. E., and Bradshaw, C. P. (2013). Examining the link between forms of bullying behaviors and perceptions of safety and belonging among secondary school students. *J. Sch. Psychol.* 51, 469–485. doi: 10.1016/j.jsp.2013.04.004
- Hatzenbuehler, M. L., Flores, A. R., and Gates, G. J. (2017). Social attitudes regarding same-sex marriage and LGBT health disparities: results from a national probability sample. *J. Soc. Issues* 73, 508–528. doi: 10.1111/josi.12229
- Hendron, M., and Kearney, C. A. (2016). School climate and student absenteeism and internalizing and externalizing behavior problems. *Child. Sch.* 38, 109–116. doi: 10.1093/cs/cdw009
- Henkel, B. L., and Slate, J. R. (2013). Differences in what public and private school principals emphasize in their schools. *J. Educ. Res.* 7, 103–110.
- Hoberman, A., Shaikh, N., and Bhatnagar, S. (2013). Factors that influence parental decisions to participate in clinical research: consenters versus nonconsenters. *JAMA Pediatr.* 167, 561–566.
- Holman, E. G., and Oswald, R. F. (2011). Nonmetropolitan GLBTQ parents: when and where does their sexuality matter? *J. GLBT Fam. Stud.* 7, 436–456. doi: 10.1080/1550428x.2011.623937
- Holt, M., Kantor, D. K., and Finkelhor, D. (2009). Parent/child concordance about bullying involvement and family characteristics related to bullying and peer victimization. *J. Sch. Viol.* 8, 42–63. doi: 10.1080/15388220802067813
- Ioverno, S., Carone, N., Lingardi, V., Nardelli, N., Pagone, P., and Baiocco, R. (2018). Assessing prejudice toward two-father parenting and two-mother parenting: the beliefs on same-sex parenting scale. *J. Sex Res.* 55, 654–655.
- Jones, A., and Morris, T. (2012). Psychological adjustment of children in foster care: review and implications for best practice. *J. Public Child Welf.* 6, 129–148. doi: 10.1080/15548732.2011.617272
- Kenny, D., Kashy, D., and Cook, W. (2006). *Dyadic Data Analysis*. New York, NY: Guilford.
- Kosciw, J. G., and Diaz, E. M. (2008). *Involved, Invisible, Ignored: The Experiences of Lesbian, Gay, Bisexual, and Transgender Parents and their Children in our Nation's K-12 Schools*. New York, NY: GLSEN.
- Kosciw, J. G., Greytak, E. A., and Diaz, E. M. (2009). Who, what, where, when, and why: demographic and ecological factors contributing to hostile school climate for lesbian, gay, bisexual, and transgender youth. *J. Youth Adolesc.* 38, 976–988. doi: 10.1007/s10964-009-9412-1
- Kuznetsova, A., Brockhoff, P. B., and Christensen, R. H. B. (2017). lmerTest package: tests in linear mixed effects models. *J. Statist. Softw.* 82, 1–26.
- Larrañaga, E., Yubero, S., and Navarro, R. (2018). Parents' responses to coping with bullying: variations by adolescents' self-reported victimization and parents' awareness of bullying involvement. *Soc. Sci.* 7, 1–11. doi: 10.3390/socsci7080121
- Lindstrom, J. S., Waasdorp, T. E., Gaias, L. M., and Bradshaw, C. P. (2019). Parental responses to bullying: understanding the role of school policies and practices. *J. Educ. Psychol.* 111, 475–487. doi: 10.1037/edu0000295

- Lleras, C. (2008). Hostile school climates: explaining differential risk of student exposure to disruptive learning environments in high school. *J. Sch. Viol.* 7, 105–135. doi: 10.1080/15388220801955604
- Mark, L., and Ratliffe, K. (2011). Cyber worlds: new playgrounds for bullying. *Comput. Sch.* 28, 92–116. doi: 10.1080/07380569.2011.575753
- Merrin, G. J., Espelage, D., and Hong, J. (2018). Applying the social-ecological framework to associations of bullying perpetration among high school students: a multilevel analysis. *Psychol. Viol.* 8, 43–56. doi: 10.1037/vio0000084
- Metheny, N., and Stephenson, R. (2018). Political environment and perceptions of social inclusion after nationwide marriage equality among partnered men who have sex with men in the USA. *Sex. Res. Soc. Policy* 16, 521–528. doi: 10.1007/s13178-018-0357-6
- Mishna, F., Pepler, D., and Wiener, J. (2006). Factors associated with perceptions and responses to bullying situations by children, parents, teachers, and principals. *Vict. Offend.* 1, 255–288. doi: 10.1080/15564880600626163
- Morrow, M., Hubbard, J., and Swift, L. (2014). Relations among multiple types of peer victimization, reactivity to peer victimization, and academic achievement in fifth-grade boys and girls. *Merrill Palmer Q.* 60, 302–327.
- Muijs, D. (2017). Can schools reduce bullying? The relationship between school characteristics and the prevalence of bullying behaviours. *Br. J. Educ. Psychol.* 87, 255–272. doi: 10.1111/bjep.12148
- National Center for Education Statistics, (2019). *Fast Facts: Private and Public School Comparison*. Available at: <https://nces.ed.gov/fastfacts/display.asp?id=55> (accessed September 19, 2019).
- Neil, E. (2012). Making sense of adoption: integration and differentiation from the perspective of adopted children in middle childhood. *Child. Youth Serv. Rev.* 34, 409–416. doi: 10.1016/j.childyouth.2011.11.011
- Oswald, R. F., and Holman, E. G. (2013). “Place matters: LGB families in community context,” in *LGBT-Parent Families: Innovations in Research and Implications For Practice*, eds A. E. Goldberg, and K. R. Allen, (New York, NY: Springer), 193–208. doi: 10.1007/978-1-4614-4556-2_13
- Paceley, M., Goffnett, J., and Gandy-Guedes, M. (2017). Impact of victimization, community climate, and community size on mental health of sexual and gender minority youth. *J. Commun. Psychol.* 45, 658–671. doi: 10.1002/jcop.21885
- Pew Research Center, (2017). *Homosexuality, Gender, And Religion*. Available at: <http://www.people-press.org/2017/10/05/5-homosexuality-gender-and-religion/> (accessed September 19, 2019).
- Pinheiro, J., Bates, D., DebRoy, S., Sarkar, D., and R Core Team, (2018). *Nlme: Linear And Nonlinear Mixed Effects Models*. Available at: <https://CRAN.R-project.org/package=nlme> (accessed September 19, 2019).
- Pitula, C. E., DePasquale, C. E., Mliner, S. B., and Gunnar, M. R. (2019). Peer problems among post-institutionalized, internationally adopted children: relations to hypocortisolism, parenting quality, and ADHD symptoms. *Child Dev.* 90:e0339-55.
- Power, J., Brown, R., Schofield, M., Pitts, M., McNair, R., and Bickerdike, A. (2014). Social connectedness among lesbian, gay, bisexual, and transgender parents living in metropolitan and regional and rural areas of Australia and New Zealand. *J. Commun. Psychol.* 42, 869–889. doi: 10.1002/jcop.21658
- R Core Team, (2018). *R: A Language and Environment For Statistical Computing*. Vienna: R Foundation for Statistical Computing.
- Raaska, H., Elovainio, M., Sinkkonen, J., Matomaki, J., Makipaa, S., and Lapinleimu, H. (2012). Internationally adopted children in Finland: parental evaluations of symptoms of reactive attachment disorder and learning difficulties-FINADO study. *Child Care Health Dev.* 38, 607–705.
- Revelle, W. (2018). *Psych: Procedures for Psychological, Psychometric, and Personality Research*. Evanston, IL: Northwestern University.
- Rivers, I., Poteat, V. P., and Noret, N. (2008). Victimization, social support, and psychosocial functioning in same-sex and opposite-sex couples in the United States. *Dev. Psychol.* 44, 127–134. doi: 10.1037/0012-1649.44.1.127
- Rupp, S., Elliott, S., and Gresham, F. (2018). Assessing elementary students' bullying and related social behaviors: cross-informant consistency across school and home environments. *Child. Youth Serv. Rev.* 93, 458–466. doi: 10.1016/j.childyouth.2018.08.028
- Schueler, B., Capotosto, L., Bahena, S., McIntyre, J., and Gehlbach, H. (2014). Parent perceptions of school climate. *Psychol. Assess.* 26, 314–320. doi: 10.1037/a0034830
- Shuja, S., Att, M., and Shujat, J. M. (2014). Prevalence of bullying and victimization among sixth graders with reference to gender, socioeconomic status and type of schools. *J. Soc. Sci.* 38, 159–165. doi: 10.1080/09718923.2014.11893246
- Thapa, A., Cohen, J., Guffey, S., and Higgins-D'Alessandro, A. (2013). A review of school climate research. *Rev. Educ. Res.* 83, 357–385. doi: 10.3102/0034654313483907
- Tippett, N., Wolke, D., and Platt, L. (2013). Ethnicity and bullying involvement in a national UK youth sample. *Jo. Adolesc.* 36, 639–649. doi: 10.1016/j.adolescence.2013.03.013
- U.S. Census Bureau, (2013). *Metropolitan and Micropolitan Statistical Areas*. Available at: www.census.gov/population/metro/ (accessed September 19, 2019).
- U.S. Census Bureau, (2016). *Urban and Rural*. Available at: <https://www.census.gov/geo/reference/urbanrural.html> (accessed September 19, 2019).
- van Gelderen, L., Gartrell, N., Bos, H. M. W., and Hermanns, J. (2012). Stigmatization and promotive factors in relation to psychological health and life satisfaction of adolescents in planned lesbian families. *J. Fam. Issues* 34, 809–827. doi: 10.1177/0192513x12447269
- Venables, W. N., and Ripley, B. D. (2002). *Modern Applied Statistics With S (Fourth.)*. New York, NY: Springer.
- Waasdorp, T., Berg, J., Debnam, K., Stuart, E., and Bradshaw, C. (2018). Comparing social, emotional, and behavioral health risks among youth attending public versus parochial schools. *J. Sch. Viol.* 17, 381–391. doi: 10.1080/15388220.2017.1387130
- Waasdorp, T., Bradshaw, C., and Duong, J. (2011). The link between parents' perceptions of the school and their responses to school bullying: variation by child characteristics and the forms of victimization. *J. Educ. Psychol.* 103, 324–335. doi: 10.1037/a0022748
- Waasdorp, T. E., Mehari, K., and Bradshaw, C. P. (2018). Obese and overweight youth: risk for experiencing bullying victimization and internalizing symptoms. *Am. J. Orthopsychiatr.* 88, 483–491. doi: 10.1037/ort0000294
- Wainright, J. L., and Patterson, C. J. (2006). Delinquency, victimization, and substance use among adolescents with female same-sex parents. *J. Fam. Psychol.* 20, 526–530. doi: 10.1037/0893-3200.20.3.526
- Webb, S., Chonody, J., and Kavanagh, P. (2017). Attitudes toward same-sex parenting: an effect of gender. *J. Homosex.* 64, 1583–1595. doi: 10.1080/00918369.2016.1247540
- Wickham, H. (2016). *Ggplot2: Elegant Graphics For Data Analysis*. New York, NY: Springer-Verlag.
- Wienke Totura, C. M., Green, A. E., Karver, M. S., and Gesten, E. L. (2009). Multiple informants in the assessment of psychological, behavioral, and academic correlates of bullying and victimization in middle school. *J. Adolesc.* 32, 193–211. doi: 10.1016/j.adolescence.2008.04.005
- Williams Institute, (2016). *The LGBT Divide in California*. Available at: <https://williamsinstitute.law.ucla.edu/wp-content/uploads/California-LGBT-Divide-Jan-2016.pdf> (accessed September 19, 2019).
- Wingo, E., Ingraham, N., and Roberts, S. (2018). Reproductive health care priorities and barriers to effective care for LGBTQ people assigned female at birth: a qualitative study. *Women Health Issues* 28, 350–357. doi: 10.1016/j.whi.2018.03.002

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Goldberg and Garcia. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Understanding Parenting Intentions Among Childfree Gay Men: A Comparison With Lesbian Women and Heterosexual Men and Women

Joke T. van Houten^{1*}, Samantha L. Tornello², Peter J. Hoffenaar¹ and Henny M. W. Bos¹

¹ Department of Child Development and Education, University of Amsterdam, Amsterdam, Netherlands, ² Human Development and Family Studies, Pennsylvania State University, University Park, PA, United States

OPEN ACCESS

Edited by:

Katherine Louise Appleford,
Kingston University London,
United Kingdom

Reviewed by:

Abbie Goldberg,
Clark University, United States
Jessica Pistella,
Sapienza University of Rome, Italy

*Correspondence:

Joke T. van Houten
j.t.vanhouten@uva.nl

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 30 November 2019

Accepted: 24 February 2020

Published: 24 March 2020

Citation:

van Houten JT, Tornello SL,
Hoffenaar PJ and Bos HMW (2020)
Understanding Parenting Intentions
Among Childfree Gay Men:
A Comparison With Lesbian Women
and Heterosexual Men and Women.
Front. Psychol. 11:430.
doi: 10.3389/fpsyg.2020.00430

Introduction: There is a growing interest in the parenting intentions of gay men. Prior research has found that gay men are less likely to become parents compared to their heterosexual and lesbian peers, but we know very little about why this discrepancy exists. Our first aim was to investigate whether the strength of parenting intentions is similar or different among childfree gay men compared to lesbian women, and heterosexual men and women. Our second aim was to explore the extent to which the theory of planned behavior (TPB) model (attitude, subjective norms, and self-efficacy) is universal in predicting the strength of parenting intentions across gender and/or sexual orientation.

Methods: The study was based on a United States cross-sectional, internet-based survey of childfree people who want to become parents in the future. The sample consisted of 58 gay men, 66 lesbian women, 164 heterosexual people (128 women and 36 men).

Results: A Bayesian ANCOVA showed no support for a gender difference in the strength of parenting intentions. Moderate evidence was provided for gay men and lesbian women reporting a similar strength of parenting intentions compared to their heterosexual peers. Bayesian linear regression analyses showed that perceived positive and negative life changes were stronger predictors of the strength of parenting intentions for men than for women. Perceived positive life changes predicted the strength of parenting intentions similarly across sexual orientations. For gay men and lesbian women, perceived parental acceptance of future parenthood was a weaker predictor of the strength of parenting intentions compared to heterosexual people.

Conclusion: Those who perceived parenthood as bringing positive life changes, especially for men, expressed stronger parenting intentions.

Keywords: gay men, childfree, parenting intentions, theory of planned behavior, intended parents

INTRODUCTION

Becoming a parent is a universal desire for many young people (Purewal and Van den Akker, 2007), however, parenthood is not always possible for sexual minority people, especially gay men. Gay men who want to become parents experience a number of legal (Kazyak et al., 2018) and financial barriers (Smietana, 2018), along with greater experiences of stigmatization (e.g., Berkowitz and Marsiglio, 2007; Baiocco et al., 2012; Goldberg et al., 2012; Carone et al., 2017). In addition, gay men more often face greater complexities when deciding how to become a parent (surrogacy, adoption, co-parenting, and foster care; Murphy, 2013; Smietana et al., 2014; Carone et al., 2017; Smietana, 2018). Nevertheless, many gay men want to become parents in the future (Gates et al., 2007; Goldberg et al., 2012; Scandurra et al., 2019). Yet little is known about the decision-making process of childfree gay men toward becoming parents in the future (Mezey, 2013; Gato et al., 2017; Riskind and Tornello, 2017; Scandurra et al., 2019). The present study focuses on the parenting intentions of childfree gay men, compared to their lesbian and heterosexual peers.

For childfree gay men, there is a gap between future parenthood desires and intentions compared to heterosexual men. Riskind and Patterson (2010) examined parenting desires and intentions among a United States representative sample [2002 National Survey of Family Growth (NSFG)] and found that gay men (54%) were significantly less likely to desire future parenthood compared to their heterosexual peers (75%). Among men who desired future parenthood, gay men (75%) were significantly less likely to intend to become parents in the future compared to their heterosexual peers (90%; Riskind and Patterson, 2010). Riskind and Patterson (2010) found that for men, but not for women, sexual orientation was a significant predictor of future parenting intentions. In a replication a few years later (2011–2013), researchers found the same patterns among gay men, with gay men reporting lower parenthood desires and intentions compared to their heterosexual, bisexual, and lesbian peers (Riskind and Tornello, 2017). These findings have been replicated in a number of other countries, such as in Israel (Shenkman, 2012) and Italy (Baiocco and Laghi, 2013).

A theoretical model that is often used to understand the decision-making process of becoming a parent among childfree people is the theory of planned behavior (TPB). According to the TPB (Ajzen, 1991), an individual's attitudes, subjective norms, and perceived behavioral control or self-efficacy (Bandura, 1997) are important factors in all decision-making processes. Previous studies have demonstrated the TPB could be useful in understanding parenting intentions generally not necessarily in terms of gender or sexual orientation (Ajzen and Klobas, 2013) and among gay and heterosexual men (Kranz et al., 2018). Based on the TPB, parenting intentions would be predicted by an individual's perceived life changes of future parenthood (attitudes), along with his or her personal desire to conform to these social expectations (subjective norms), and perceived control or belief that he or she can become a parent in the future (self-efficacy; Ajzen and Klobas, 2013).

Previous studies using the TPB as a model to examine future parenthood have focused on whether or not people

intend to become parents (Billari et al., 2009; Ajzen and Klobas, 2013; Kranz et al., 2018), both in the short term and longer term (Dommermuth et al., 2011). A Bulgarian representative study suggested that attitudes and subjective norms, but not perceived behavioral control, predict whether men and women intend to become parents within two years (Billari et al., 2009). Interestingly, subjective norms were found to be a stronger predictor of parental intentions among women than men. In addition, a Norwegian representative study suggested that subjective norms, but not attitudes, predicted short-term parenting intentions among childfree people, although self-efficacy was not measured in this study (Dommermuth et al., 2011).

There has been limited research using the TPB among sexual minority childfree people. In a study of childfree heterosexual and gay men researchers found that attitudes and perceived behavioral control, but not subjective norms, were strong predictors of future parenting intentions among men regardless of sexual orientation (Kranz et al., 2018). In this study, the perceived benefits and costs of parenthood (attitudes), the attitudes of others toward future parenthood (subjective norms), and parenthood self-efficacy were directly associated with fathering intentions of gay men and heterosexual men. These direct associations were significant, albeit weak. However, fathering desires mediated on the relationship between attitudes and fathering intentions and between self-efficacy and fathering intentions. For gay and heterosexual men attitudes and self-efficacy predicted fathering desires, and fathering desires in turn predicted fathering intentions. Despite the fact that gay men reported lower levels of self-efficacy and less acceptance from others compared to heterosexual men, there was no difference in the extent to which components of the TPB predicted parenting intentions for men regardless of sexual orientation.

Although these studies showed support for the TPB model regarding general parenting intentions, these studies did not examine the strength of these intentions. We know that gay (intended) fathers express a deep-rooted, strong desire to becoming parents (Gianino, 2008; May and Tenzek, 2016; Fantus and Newman, 2019). Due to their sexual minority status, gay men, like lesbian women, are highly exposed to stigma (Meyer et al., 2011) and receive less social support compared to heterosexual people (Frost et al., 2016), this is particularly true when it comes to gay parenthood among gay men (Berkowitz and Marsiglio, 2007). When gay men intend to fulfill their deeply rooted parenting desire, they venture traditional role patterns (Carneiro et al., 2017). Parenthood is regarded as the natural domain of women, with women often assumed of being the primary caregiver (Wells, 2011; Henderson et al., 2016). Gay men who plan to have a child may feel stigmatized that they would be below par as parents compared to women (Wells, 2011). It therefore seems likely that men who intend to fulfill their parenting desire are highly motivated as they have already experienced parenting related stigmas and other barriers. Additionally, gay men who already plan to have children might have similar determination regarding these intentions compared to women. With this in mind, there may be a conceptual difference between having or not having parenting intentions. In

a study of gay and bisexual men and women researchers found no gender differences in the strength of parenting intentions (Costa and Bidell, 2017). However, this study did not use the TPB model as a predictive pathway, only explored the strength of the parenting intentions. No prior work, to date, has used the TPB model to examine the strength of parenting intentions across both sexual orientation and gender. Due to this gap in the research, it is unknown to what extent the TPB predicts the strength of parenting intentions among those who want to become parents in the future and whether this varies across both gender and sexual orientation.

In order to understand the relevance of the TPB across gender and sexual orientation among those who intend to becoming parents, the present study focuses on the strength of parenting intentions among childfree gay men, lesbian women, and heterosexual men and women who want to become parents in the future. Similar to Kranz et al. (2018), we combined a level-oriented (comparing variables across groups) with a structure-oriented approach (comparing associations across groups) to investigate whether associations between variables differed based on gender and sexual orientation. Unique to this study, we also investigated the TPB among lesbian and heterosexual women.

In some of the studies discussed, the effect of the TPB predictors has been examined in separate models for groups based on gender (see e.g., Billari et al., 2009) or sexual orientation (Kranz et al., 2018). Such an analytic strategy is limited in that the comparison of two effects should be accompanied by a report of the statistical significance of their difference (Nieuwenhuis et al., 2011). Others may have failed to determine the strength of evidence for the null or alternative hypothesis, but at least statistically compared the magnitude of effects. For example, Kranz et al. (2018) did not find a significant difference in the effect of the TPB components on fathering intentions between gay and heterosexual men using equality constraints in a SEM model, although, they did not test for similarity. We along with Sakaluk (2019) note that their use of frequentist statistics did not allow for a conclusion that the evidence favors the hypothesis that sexual orientation is not a factor (for more information see the fallacy of negative proof: absence of evidence is not evidence of absence). In general, only calculating classical frequentist *p*-values seems ill-suited to determine whether groups based on gender and sexual orientation show similarities or differences in parenting intentions. We therefore followed recent recommendations made by Sakaluk (2019) to use Bayes Factors to also test similarities in groups, because according to the gender similarities hypothesis (Hyde, 2005) it is a misconception that groups differ mainly on psychological variables and predictive pathways across gender and sexual orientation (Sakaluk, 2019).

The first aim of this study was to examine whether the strength of parenting intentions was the same across gender and/or sexual orientation. Although prior research has found that gay men are less likely to intend to become parents, those studies included gay men regardless of whether they believed they would become parents in the future. Due to the focus of the present study being on the magnitude of parenting intentions, we do not expect childfree gay men to report lower parenting intentions compared to lesbian women and heterosexual men and women.

The second aim of the study was to explore the extent to which the TPB model (attitude, subjective norms, and self-efficacy) is universal or varies based on gender and/or sexual orientation, in predicting the strength of parenting intentions. We hypothesized that the TPB-predictors of attitude and self-efficacy regarding future parenthood, but not subjective norms, would be universal for childfree gay men, lesbian women, and heterosexual men and women in predicting the strength of parenting intentions. Prior research has found no differences in the extent to which attitudes predict the strength of parenting intentions among men and women (Billari et al., 2009). In addition, as with the study by Kranz et al. (2018), we expected components of the TPB to predict the strength of parenting intentions for gay men and heterosexual men to a similar extent. In contrast to the hypothesis regarding self-efficacy and attitudes, we hypothesized that the association between subjective norms and the strength of parenting intentions would be weaker for gay men and lesbian women compared to their heterosexual peers. As sexual minority people, gay men, like lesbian women, often have prior exposure to stigma (Meyer et al., 2011) and lack of social support (Frost et al., 2016), especially when it comes to gay parenthood (Berkowitz and Marsiglio, 2007).

MATERIALS AND METHODS

Participants and Procedure

The study sample consisted of 288 childfree gay, lesbian, and heterosexual intended parents (cisgender women and men) who participated in 2015 in an internet-based study. Participants were recruited through targeted advertisements on social media and search engines. People who were interested in participating would contact the PI (Second Author), and if eligible to participate, they would receive a personalized password-protected link to the online consent form and survey. At the time of survey completion participants were provided the option to enter a raffle for 1 out of 24 twenty-five-dollar gift cards for Target stores. Participation in this study was voluntary and was approved by the Institutional Research Board of the Pennsylvania State University.

Since the focus of this study was on childfree cisgender gay men, lesbian women, and heterosexual men and women in the US who intended to become parents in the future, we excluded participants based on specific criteria. Of the 582 completed surveys, in order to preserve data independence, only one member of a couple participated ($n = 43$), we removed all participants who did not currently reside in the US ($n = 67$), who did not identify their sexual orientation as heterosexual, lesbian, or gay ($n = 160$), not identifying themselves or their partner as cisgender ($n = 19$), were in a polyamorous relationship ($n = 1$), and described their ideal number of children as zero ($n = 4$) resulting in a final sample of 288 self-identified childfree intended parents. Gender and sexual orientation breakdown of the sample was as follows: 58 gay men (20.1%), 66 lesbian women (22.9%), 36 heterosexual men (12.5%), and 128 heterosexual women (44.4%). Participants were 18 to 52 years old ($M = 27.82$, $SD = 5.87$). Most participants self-identified as White/European

American (79.9%), reported receiving a bachelor's degree or higher (64.6%), and worked an average of 32.83 h per week in paid employment ($SD = 17.26$). The majority of the participants were in a committed relationship (74.7%) for an average for 5.17 years.

A few significant group differences in demographic characteristics were found. Gay men were significantly less likely to identify as White/European American (62%) compared to the other groups [82–91%; $X^2(3) = 15.80, p < 0.01$]. In addition, gay men were more likely to be single (65%) compared to lesbian women (18%), and heterosexual men (6%) and women [16%; $X^2(3) = 64.11, p < 0.001$]. A one-way analysis of variance (ANOVA) for educational level showed a significant gender by sexual orientation interaction [$F(1,284) = 3.92, p = 0.05$], suggesting group differences.

Measures

Demographics

Participants were asked to provide demographic details about themselves and their partner (if applicable). Information included age, gender, race/ethnic identity, sexual orientation, educational attainment, hours per week in paid employment, relationship status, and relationship length.

Strength of Parenting Intentions

One single item (Van Balen and Trimbos-Kemper, 1995) measured the strength of the intentions to become a parent: "What are you willing to give up to have children?" (1 = *it does not matter whether or not I become a parent* to 6 = *I will do everything to become a parent*). A high score on this item indicated stronger intentions to become a parent.

Attitudes

Beliefs about emotional benefits of parenthood were measured using *Idealization of parenthood*, an 8-item scale (Eibach and Mock, 2011). In order to obtain a good reliability of the scale, the 3 negatively formulated items, which had a negative influence on the reliability after recoding, were excluded, leaving a 5-item scale ($\alpha = 0.82$). Items for this measure included "Parents experience a lot more happiness and satisfaction in their lives compared to people who have never had children" and "There is nothing more rewarding in this life than raising a child" (−2 = *strongly disagree* to 2 = *strongly agree*). Scores of the 5 items were summed, with higher scores indicating a stronger belief that parenthood offers emotional benefits.

Expected possible consequences of parenthood were measured using *Perceived life changes in connection with becoming a parent*, a 14 item-scale (Lampic et al., 2006). Participants were asked to what extent they agreed with possible consequences of future parenthood. Responses were measured using a 5-point Likert scale (1 = *disagree* to 5 = *entirely agree*). To be able to distinguish between positive and negative expectations, we divided this scale into two subscales: *perceived positive life changes* and *perceived negative life changes*. The *perceived positive life changes* contained 9 items, including "I will develop as a person" and "Everyday life will be more enjoyable." This scale had good reliability ($\alpha = 0.80$). The *perceived negative life changes* included 5 items, like "Less time to devote to work and a career" and "Less time for my

own interests." This scale had sufficient reliability ($\alpha = 0.77$). A total score was calculated for each sub-scale, with higher scores indicating more positive or negative (respectively) expectations of future parenthood.

Family Acceptance

Participants were asked a series of questions regarding family members' acceptance of potential future parenthood. Participants answered the question "How accepting are the people below regarding your wish to become a parent?" for their parents, siblings, and extended family members (0 = *not accepting at all* to 5 = *fully accepting*). Due to the data being highly skewed (among heterosexual men, the values 0 and 1 did not occur for parental acceptance), we dummy recoded this variable with participant responses of 1 thru 4 to 0 (*not accepting*) and 5 to 1 (*accepting*).

Self-Efficacy

Participant's self-efficacy regarding future parenthood was measured using the *Parenting Competence scale* (Johnston and Mash, 1989). This scale consisted of 7 items, for example "I think that being a parent is manageable, and any problems are easily solved" and "I think I will meet my personal expectations for expertise in caring for my baby," and were answered using a 1 (*strongly disagree*) to 6 (*strongly agree*) scale. Scores were summed, with higher scores indicating a higher level of self-efficacy. This scale had good reliability ($\alpha = 0.82$).

Inferential Statistics

The data analysis was carried out using the JASP software version 0.8.6.0 (JASP Team, 2020). This program offers standard statistical procedures in Bayesian form. Because traditional forms of null hypothesis significance testing do not allow one to determine the relative strength of the evidence for a null or alternative hypothesis, they seem ill-suited to determine whether groups based on gender and sexual orientation show similarities or differences in parenting intentions (Sakaluk, 2019). Similarly, null hypothesis significance testing might be appropriate when anticipating differences among sexuality-related groups in the relative explanatory power of attitudes, norms and control, but it is not possible to infer equivalence of regression slopes based on non-significant interaction effects. In order to address the question whether TPB factors are universal or specific in predicting the strength of parenting intentions among childfree intended gay, lesbian and heterosexual intended parents, we chose to test with Bayesian alternatives. More specifically, we used the Bayes factor (BFs; Rouder et al., 2018). The BF indicates whether the data would be more likely under an alternative hypothesis (group difference or differential effects) than under the null hypothesis (equivalence or invariance). Generally, BFs greater than three are taken as evidence in favor of the alternative over the null hypothesis (BF_{10}) or in favor of the null over the alternative hypothesis (BF_{01}). Bayes Factors below the threshold of 3 were interpreted as representing weak evidence. In a Bayesian perspective, weak (or anecdotal) evidence indicates that we hesitate or are reluctant to change our beliefs based on the difference between what we predicted and what we observed (Jarosz and Wiley, 2014). Alternatively, weak evidence can make

one decide that there was not enough information to make a conclusive decision in favor of the null or alternative hypothesis.

RESULTS

Strength of Parenting Intentions

Using Bayesian versions of a 2 (men vs. women) \times 2 (gay and lesbian participants (men and women) vs. heterosexual participants) ANCOVA, we tested whether the strength of parenting intentions differed between childfree gay, lesbian and heterosexual intended parents. Due to significant differences in race/ethnicity, educational attainment, and relationship status, these demographic variables were included as covariates. In the Bayesian ANCOVA, two models including main effects of gender or sexual orientation, a model with both main effects and a model with both main effects and an interaction effect were compared against the null model, which only contained the set of control variables (race/ethnicity, educational attainment, and relationship status). The default JASP priors for fixed effects were used. Bayesian model comparison revealed that the model with only the main effect of gender was the best model. Women scored higher on the strength of parenting intentions ($M = 4.32$, $SD = 0.13$) than men ($M = 3.90$, $SD = 0.15$), see **Figure 1**. The support for favoring the model with only the main effect of gender over the null model was weak ($BF_{10} = 1.29$), meaning that the data were 1.29 times more likely to be observed under the alternative hypothesis (gender difference) than under the null hypothesis (similarity across groups) and that it is not possible to falsify the gender similarities hypothesis. With regard to sexual orientation, the Bayesian model comparison showed moderate evidence for similarity across groups ($BF_{01} = 3.45$), which means that the data were more than 3.45 times less likely under the alternative hypothesis (sexual orientation differences) than under the null hypothesis (similarity across groups).

TPB-Predictors of Parenting Intentions

Using Bayesian linear regression analyses, we explored to what extent the TPB-predictors: (1) attitudes (idealization of parenthood, perceived positive and negative life changes in connection with becoming a parent), (2) subjective norms (acceptance of parents, siblings, and extended family members), and (3) self-efficacy were universal or different for childfree gay, lesbian and heterosexual intended parents in predicting the strength of parenting intentions. In the Bayesian linear regression analyses, two models including interaction effects of gender or sexual orientation on the TPB predictor, and a model with both interaction effects of gender and sexual orientation on a TPB predictor were compared against the null model, which contained the set of control variables (race/ethnicity, relationship status, and educational attainment) and the variables gender, sexual orientation and a TPB predictor. The default JASP priors for fixed effects were used.

Attitudes

Although model comparisons showed that a regression model including an interaction effect between gender and idealization

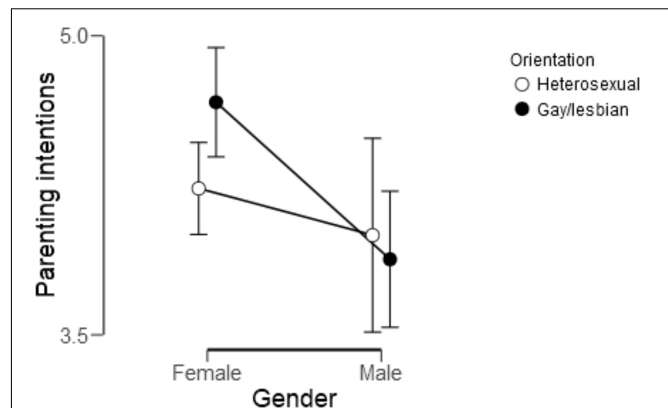


FIGURE 1 | The strength of parenting intentions among gay men, lesbian women and heterosexual men and women. Points represent group averages, $n = 281$. Responses were on 6-point Likert scale with higher scores indicating a stronger intent to become a parent.

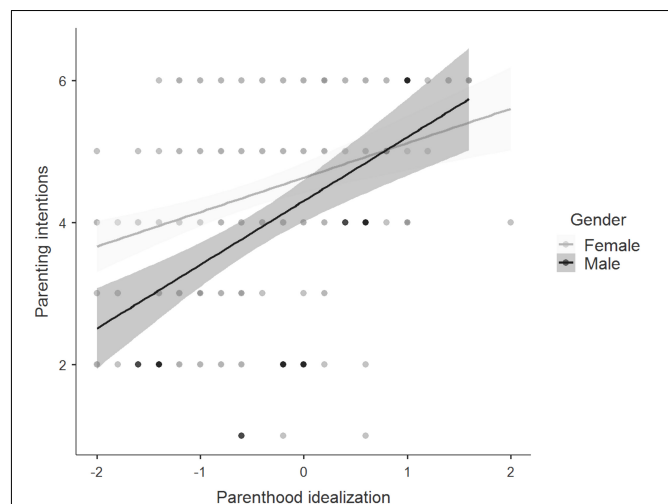


FIGURE 2 | Regression plot showing the relationship between idealization of parenthood and the strength of parenting intentions among men and women. Points represent individual responses, $n = 264$ and the gray shaded region represents the 95% confidence region. For idealization, responses were on 5-point Likert scale with higher scores indicating a stronger belief that parenthood offers emotional benefits. For the strength of parenting intentions, responses were on 6-point Likert scale with higher scores indicating a stronger intent to become a parent.

was the best model, Bayesian analysis indicated weak evidence for an interaction effect between gender and idealization of future parenthood ($BF_{10} = 1.72$), see **Figure 2**. The data were 1.72 times more likely to be observed under the alternative hypothesis (gender difference) than under the null hypothesis (similarity across groups). Adding the interaction effects increased the variance explained from 20 to 22%. With regard to sexual orientation, the Bayesian model comparison showed weak evidence for similarity across groups ($BF_{01} = 2.50$). The data were 2.5 times more likely under the null hypothesis compared to the alternative hypothesis.

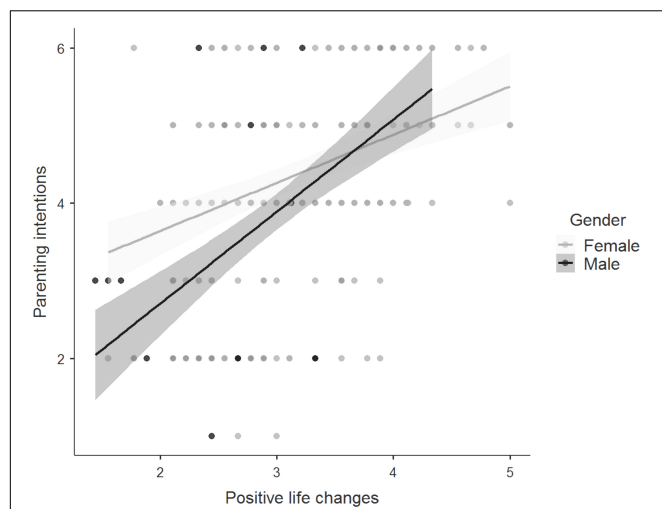


FIGURE 3 | Regression plot showing the relationship between perceived positive life changes in connection with becoming a parent and the strength of parenting intentions among men and women. Points represent individual responses, $n = 269$ and the gray shaded region represents the 95% confidence region. For perceived positive life changes, responses were on 5-point Likert scale with higher scores indicating more positive expectations of future parenthood. For the strength of parenting intentions, responses were on 6-point Likert scale with higher scores indicating a stronger intent to become a parent.

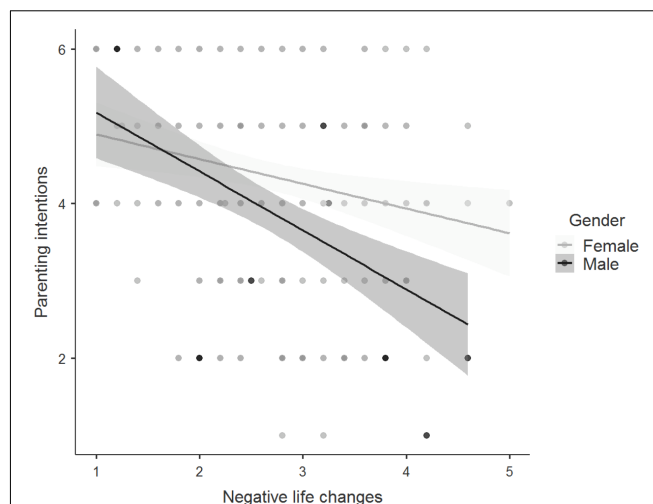


FIGURE 4 | Regression plot showing the relationship between perceived negative life changes in connection with becoming a parent and the strength of parenting intentions among men and women. Points represent individual responses, $n = 269$, and the gray shaded region represents the 95% confidence region. For perceived negative life changes, responses were on 5-point Likert scale with higher scores indicating more negative expectations of future parenthood. For the strength of parenting intentions, responses were on 6-point Likert scale with higher scores indicating a stronger intent to become a parent.

The association between perceived positive life changes in connection with becoming a parent and the strength of parenting intentions was greater for men than for women (see **Figure 3**). The model comparison showed that the model with only an interaction effect between gender and perceived positive life changes was the best model, providing moderately stronger evidence in favor of the model including the interaction against the null model ($BF_{10} = 9.97$). The data were 9.97 times more likely to be observed under the alternative hypothesis (gender differences) than under the null hypothesis (similarity across groups). The amount of variance explained increased from 25% to 27% by including the interaction effects. Next to this, Bayesian analysis indicated moderate evidence in favor of invariance across sexual orientation, i.e., the null model against a model including the interaction effect ($BF_{01} = 3.72$). The data were 3.72 times less likely under the alternative hypothesis compared to the null hypothesis.

The association between perceived negative life changes in connection with becoming a parent and the strength of parenting intentions was also greater for men than for women (see **Figure 4**). The Bayesian model comparison revealed moderate evidence that the model with an interaction effect between gender and perceived negative life changes was the best model and had to be preferred over the null model ($BF_{10} = 3.78$). The data were 3.78 times as likely under the alternative hypothesis than under the null hypothesis. Including the interaction effects increased the variance explained from 12 to 14%. Weak evidence was shown for sexual orientation similarity across groups ($BF_{01} = 2.34$). The data were 2.34 times as likely under the null hypothesis.

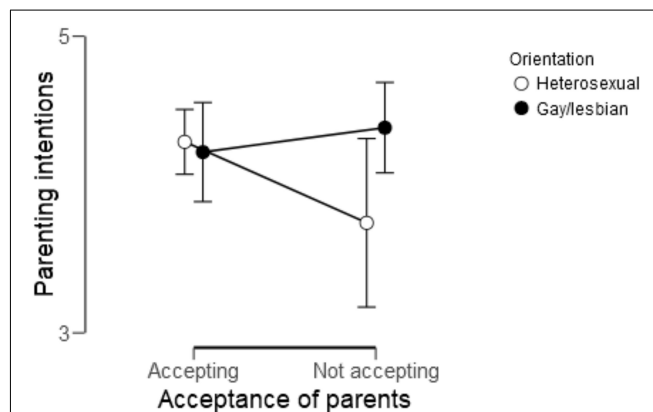


FIGURE 5 | Regression plot showing the relationship between the acceptance of parents regarding potential future parenthood and the strength of parenting intentions among gay men and lesbian women vs. heterosexual men and women. Points represent group averages, $n = 287$. Acceptance of parents was dummy recoded with responses of 1 thru 4 to 0 (not accepting) and 5 to 1 (accepting). For the strength of parenting intentions, responses were on 6-point Likert scale with higher scores indicating a stronger intent to become a parent.

Subjective Norms

The association between the acceptance of parents regarding potential future parenthood and the strength of parenting intentions was weaker for lesbian women and gay men compared to heterosexual women and men (see **Figure 5**). The Bayesian model comparison provided moderate evidence that the model with an interaction effect of sexual orientation on acceptance of

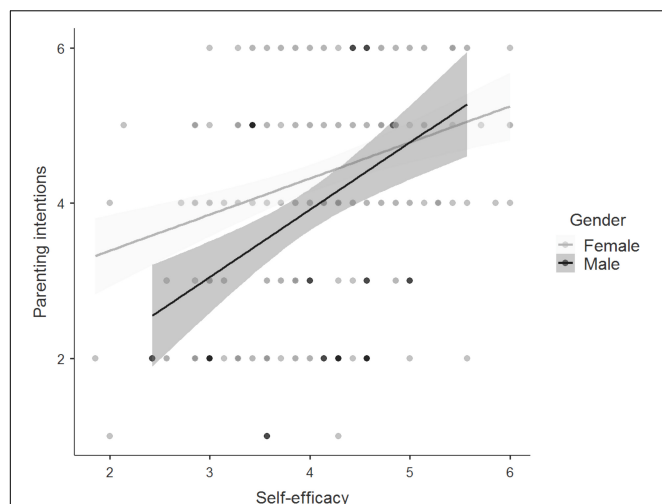


FIGURE 6 | Regression plot showing the relationship between self-efficacy regarding future parenthood and the strength of parenting intentions among men and women. Points represent individual responses, $n = 262$, and the gray shaded region represents the 95% confidence region. Responses were on 6-point Likert scales. Higher scores on self-efficacy indicated a higher level of self-efficacy regarding future parenthood. Higher scores on the strength of parenting intentions indicated a stronger intent to become a parent.

parents was the best model ($BF_{10} = 4.91$). It was 4.91 as likely to find the data under the alternative hypothesis than under the null hypothesis. The variance explained increased by 1% by adding the interaction effects with the total variance explained becoming 9%. The analyses provided weak support for gender similarity across groups ($BF_{01} = 2.61$). The data were 2.61 times as likely under the null hypothesis. With regard to the associations between the acceptance of siblings or extended family members and the strength of parenting intentions, the null model was the best model ($BF_{10} = 1.00$), which means that no evidence was found to verify or falsify the gender similarities hypothesis.

Self-Efficacy

Bayesian analyses yielded the model with an interaction effect of gender on self-efficacy to be the best model, suggesting the association between self-efficacy and the strength of parenting intentions was the strongest for men (see **Figure 6**). Support for this finding was weak ($BF_{10} = 1.27$), which means that the data were 1.27 times less likely to be observed under the alternative hypothesis (gender differences) than under the null hypothesis (similarity across groups). Adding the interaction effects increased the variance explained from 17 to 18%. Weak evidence was shown for sexual orientation similarity across groups ($BF_{01} = 1.88$). The data were 1.88 times as likely under the null hypothesis.

DISCUSSION

The first aim of this study was to gain insight into whether the strength of parenting intentions was similar or different across the groups as a function of gender and sexual orientation. In

line with our expectations, no support was found that men would be less willing to give up different aspects of their lives to have children compared to women. Also in line with our expectations, sexual orientation was not a predictor of the strength of parenting intentions. Gay men and lesbian women expressed a similar strength of parenting intentions compared to their heterosexual peers.

The similarity in the strength of parenting intentions among lesbian women and gay men and heterosexual people is not in line with prior research that has found that gay men express less often the intention to have a child compared to heterosexual men (e.g., Riskind and Patterson, 2010; Shenkman, 2012; Baiocco and Laghi, 2013; Riskind and Tornello, 2017). This discrepancy might support the premise of this study that there is a conceptual difference between having or not having parenting intentions. Given the experienced barriers to becoming parents (Baiocco et al., 2012; Kazyak et al., 2018; Smietana, 2018), it is plausible that gay men do not convert their desire to have a child into parenting intentions as often as heterosexual men do. Although, once gay men plan to have children, they seem to have experienced a change in their procreative consciousness and see opportunities to overcome barriers and to fulfill their desire to have children (Smietana, 2018). As a consequence, gay men seem to be willing to give up as much as heterosexual men in order to fulfill their desire to have children.

To the best of our knowledge, this was the first study to explore whether TPB-predictors attitude, subjective norms and self-efficacy are universal or specific for childfree gay, lesbian and heterosexual intended parents, in predicting the strength of parenting intentions, which was the second aim of the present study. Overall, the analyses often gave a similar picture across groups, although, some important group differences were found. Contrary to our expectations and previous research (Billari et al., 2009), we found two meaningful effects of gender. For men, both expected positive and negative life changes in connection with becoming a parent were stronger predictors of the strength of parenting intentions compared to women. These gender differences might be reflective of the heteronormative perspective on parenthood. From this perspective, women are expected to become mothers and primary caregiver but expectations for men about the parental role are often different (Wells, 2011; Henderson et al., 2016). As a result, intrinsic motivations like expected life changes in connection with becoming a parent might be more important for man than for women. According to our findings those who showed stronger parenting intentions also saw greater positive life changes and less negative life changes. This was particularly true for men.

In line with our expectations and previous research that has found that stigmatization of sexual minorities undermines feelings of being accepted (Meyer et al., 2011), the acceptance of parents regarding potential future parenthood was a stronger predictor of the strength of parenting intentions for heterosexual people than for gay men and lesbian women. Contrary to our expectations, no gender effect was found on subjective norms. These findings might reflect the well-developed gay identity, along with a future parent identity of the gay men in this study with all having intentions to become

parents in the future. Gay men who plan parenthood have to deal with hardships like biological (Mezey, 2013), financial (Smietana, 2018), legal barriers (Kazyak et al., 2018), and internalized and externalized stigmas because they belong to a sexual minority status and challenge traditional parenting patterns (e.g., Goldberg et al., 2012; Carneiro et al., 2017). In facing these hardships, gay men who intend to become fathers generally lack a role model of a father being gay and being the primary caregiver, coping with similar hardships (Gianino, 2008). As a consequence, gay men planning to become parents in the future have to reconsider their meaning of fatherhood and think about their identity in the context of parenthood (Shenkman and Shmotkin, 2016). Prior research among gay fathers has found that in the process of planning parenthood, gay men were able to conquer negative stereotypes about gay fathers (Gianino, 2008). Despite all these barriers, the gay men who participated in the current study intended to have children and their parenting intentions were not weaker than lesbian women.

In line with our expectations and the gender similarities hypothesis (Hyde, 2005), no support was found for the TPB factor self-efficacy to be a stronger predictor for men or for women in predicting the strength of parenting intentions. In line with prior research (Kranz et al., 2018), no difference based on sexual orientation was found. The extent to which self-efficacy predicted the strength of parenting intentions did not differ between gay men and their heterosexual peers. However, contrary to our expectations, no support was found that self-efficacy predicted the strength of parenting intentions to the same extent for gay men and heterosexual men.

Noteworthy, the TPB predictors were not equally relevant in predicting the strength of parenting intentions. Consistent with previous research among men (Kranz et al., 2018), the intrinsic motivational TPB predictors attitudes and self-efficacy were more relevant in predicting the strength of parenting intentions than the more extrinsic predictor subjective norms. The attitude component expecting positive life changes in connection with becoming a parent was the most relevant predictor in the TPB model, explaining 27% of the variance in the strength of parenting intentions. The subjective norms component (acceptance of parents) regarding potential future parenthood explained no more than 9% of the variance in people's strength of parenthood intention did not seem to predict the strength of parenting intentions.

Certain limitations of this study should be taken into account. First of all, the current study focused on TPB-factors to understand the decision-making process of becoming a parent among childfree gay men. There could be a number of other relevant factors in this decision-making process like internalized and externalized stigmas due to the sexual minority status of gay men (Goldberg et al., 2012; Carone et al., 2017). We recommend that future research take these factors related to minority stress into account. Such research can be embedded in the theoretical framework of the minority stress theory (see Meyer, 2003). Secondly, we only included people in the sample who intended to have children in the future. Those who had

no parenting intentions were not part of this study. Therefore, the current study does not provide any insight into predicting who will or will not have parental intentions. The purpose of the study was to gain insight into differences in and predictors of the strength of parenting intentions of those who already intend to become. Thirdly, only cisgender gay men, lesbian women and heterosexual men and women were included in the study. Future research should also include bisexual or gender minority people. Fourthly, this study did not take into account the role of partners in the participants' parenting intentions, which is important to address since the decision to become a parent is often made at a couple level rather than on an individual level (Shreffler et al., 2017). Partners could influence the parenting intentions of each other, similarly to the findings that partners can influence each other in how they think about internalized stigmas (Goldberg et al., 2012). Nevertheless, based on the TPB, we were interested in predictors of the strength of parenthood intention at the individual level. Therefore, the couple level was not taken into account in the current study. Further research is needed in order to gain insight into the extent to which partners reinforce each other's strength of parenthood intention and to determine the extent to which partners affect the TPB model for childfree gay, lesbian, and heterosexual intended parents. Finally, it should be mentioned that the strength of parenting intentions was measured with a single item as was done in prior research (e.g., Van Balen and Trimbos-Kemper, 1995; Bos et al., 2003) and is common when measuring parenting intentions (e.g., Riskind and Patterson, 2010; Riskind and Tornello, 2017). In addition, a study on the validity of single-item life satisfaction measures showed that single items provided almost equal information compared to a multiple-item scale (Cheung and Lucas, 2014).

This study was unique in that it examined not only differences but also similarities based on gender and/or sexual orientation, using statistical analyses not used in previous research in predicting the strength of parenting intentions. This study showed that the strength of parenting intentions was similar across groups based on sexual orientation. Gay men expressed a similar strength compared to their heterosexual peers. In predicting the strength of parenting intentions, the attitudes regarding future parenthood were the most relevant TPB predictor of the strength of parenting intentions. Those who expressed stronger parenting intentions, expected more positive life changes. This was similar across groups based on sexual orientation but was different based on gender. The extent to which positive life changes predicted the strength of parenting intentions was stronger for men compared to women. In addition, the stronger the intention to become parents, the less negative life changes men and women expected from becoming parents. This was also particularly true for men. Finally, this study showed moderate evidence for a difference based on sexual orientation. Although the TPB predictor subjective norms was not a strong predictor of the strength of parenting intentions, the acceptance of parents regarding future parenthood predicted to a greater extent the parenting intentions of heterosexual people than of gay men and lesbian women.

Overall, the TPB model seemed not to differ much across groups based on sexual orientation in predicting the strength of parenthood intention. However, the possibilities for gay and lesbian couples to convert their parenting intentions into behavior that can result in parenthood are not the same compared to their heterosexual peers (Riskind and Patterson, 2010; Riskind and Tornello, 2017). If the intention and underlying factors are largely the same for intended parent regardless of sexual orientation, law, and policy makers should make all pathways to becoming parents equally accessible to sexual minority people. When counseling gay men and lesbian women, reproductive health-care professionals should discuss how to arrange support during and after the transition to parenthood, because gay men and lesbian women cannot always count on acceptance and support from their own parents. In addition, men who intend to become parents have to overcome a number of obstacles to make these intentions a reality. Importantly, reproductive health professionals and adoption agencies should pay special attention to men, when it comes to the benefits and costs of future parenthood. Men in need of reproductive assistance have to overcome a number of obstacles to become parents. Assisting these men in keeping the benefits of future parenthood in mind could help support and motivate them to become fathers.

DATA AVAILABILITY STATEMENT

The datasets analyzed in this article are not publicly available because it is an ongoing study. Requests

to access the datasets should be directed to ST at SLT35@psu.edu.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Institutional Research Board of the Pennsylvania State University. Participants read consent and checked that they had informed consent before participating in the study.

AUTHOR CONTRIBUTIONS

ST was responsible for recruiting the participants as Principal Investigator and assisted editing the manuscript. HB was Co-investigator. JH took the lead in writing the article and was responsible for the method of analysis. PH gave advice on the method of analysis and conducted the statistical analyses. All authors made substantial intellectual contributions to the work, revised the manuscript, and approved it for publication.

FUNDING

This study received funding support through the Research Development Grant at Pennsylvania State University, Altoona.

REFERENCES

- Ajzen, I. (1991). The theory of planned behavior. *Organ. Behav. Hum. Decis. Process.* 50, 179–211. doi: 10.1016/0749-5978(91)90020-T
- Ajzen, I., and Klobas, J. (2013). Fertility intentions: an approach based on the theory of planned behavior. *Demogr. Res.* 29, 203–232. doi: 10.4054/DemRes.2013.29.8
- Baiocco, R., Argalia, M., and Laghi, F. (2012). The desire to marry and attitudes toward same-sex family legalization in a sample of Italian lesbians and gay men. *J. Fam. Issues.* 35, 181–200. doi: 10.1177/0192513x12464872
- Baiocco, R., and Laghi, F. (2013). Sexual orientation and the desires and intentions to become parents. *J. Fam. Stud.* 19, 90–98. doi: 10.5172/jfs.2013.19.1.90
- Bandura, A. (1997). *Self-Efficacy: The Exercise of Control*. New York, NY: Freeman.
- Berkowitz, D., and Marsiglio, W. (2007). Gay men: negotiating procreative, father, and family identities. *J. Marriage Fam.* 69, 366–381. doi: 10.1111/j.1741-3737.2007.00371.x
- Billari, F. C., Philipov, D., and Testa, M. R. (2009). Attitudes, norms and perceived behavioural control: explaining fertility intentions in Bulgaria. *Eur. J. Popul.* 25:439. doi: 10.1007/s10680-009-9187-9
- Bos, H. M. W., Van Balen, F., and Van den Boom, D. C. (2003). Planned lesbian families: their desire and motivation to have children. *Hum. Reprod.* 18, 2216–2224. doi: 10.1093/humrep/deg427
- Carneiro, F. A., Tasker, F., Salinas-Quiroz, F., Leal, I., and Costa, P. A. (2017). Are the fathers alright? A systematic and critical review of studies on gay and bisexual fatherhood. *Front. Psychol.* 8:1636. doi: 10.3389/fpsyg.2017.01636
- Carone, N., Baiocco, R., and Lingardi, V. (2017). Single fathers by choice using surrogacy: why men decide to have a child as a single parent. *Hum. Reprod.* 32, 1871–1879. doi: 10.1093/humrep/dex245
- Cheung, F., and Lucas, R. E. (2014). Assessing the validity of single-item life satisfaction measures: results from three large samples. *Qual. Life Res.* 23, 2809–2818. doi: 10.1007/s11136-014-0726-4
- Costa, P. A., and Bidell, M. (2017). Modern families: parenting desire, intention, and experience among Portuguese lesbian, gay, and bisexual individuals. *J. Fam. Issues* 38, 500–521. doi: 10.1177/0192513x16683985
- Dommermuth, L., Klobas, J., and Lappegård, T. (2011). Now or later? The theory of planned behavior and timing of fertility intentions. *Adv. Life Course Res.* 16, 42–53. doi: 10.1016/j.alcr.2011.01.002
- Eibach, R. P., and Mock, S. E. (2011). Idealizing parenthood to rationalize parental investments. *Psychol. Sci.* 22, 203–208. doi: 10.1177/0956797610397057
- Fantus, S., and Newman, P. A. (2019). Motivations to pursue surrogacy for gay fathers in Canada: a qualitative investigation. *J. GLBT Fam. Stud.* 15, 342–356. doi: 10.1080/1550428X.2018.1546156
- Frost, D. M., Meyer, I. H., and Schwartz, S. (2016). Social support networks among diverse sexual minority populations. *Am. J. Orthopsychiatry* 86, 91–102. doi: 10.1037/ort0000117
- Gates, G. J., Badgett, M. V. L., Macomber, J. E., and Chambers, K. (2007). *Adoption and Foster Care by Gay and Lesbian Parents in the United States*. Los Angeles: The Williams Institute.
- Gato, J., Santos, S., and Fontaine, A. M. (2017). To have or not to have children? That is the question. Factors influencing parental decisions among lesbians and gay men. *Sex. Res. Soc. Policy* 14:2318. doi: 10.1007/s13178-016-0268-3
- Gianino, M. (2008). Adaptation and transformation: the transition to adoptive parenthood for gay male couples. *J. GLBT Fam. Stud.* 4, 205–243. doi: 10.1080/15504280802096872
- Goldberg, A. E., Downing, J. B., and Moyer, A. M. (2012). Why parenthood, and why now? Gay men's motivations for pursuing parenthood. *Fam. Relat.* 61, 157–174. doi: 10.1111/j.1741-3729.2011.00687.x
- Henderson, A., Harmon, S., and Newman, H. (2016). The price mothers pay, even when they are not buying it: mental health consequences of idealized motherhood. *Sex Roles* 74, 512–526. doi: 10.1007/s11199-015-0534-5
- Hyde, J. S. (2005). The gender similarities hypothesis. *Am. Psychol.* 60, 581–592. doi: 10.1037/0003-066X.60.6.581

- Jaros, A. F., and Wiley, J. (2014). What are the odds? A practical guide to computing and reporting bayes factors. *J. Probl. Solving* 7, 2–9. doi: 10.7771/1932-6246.1167
- JASP Team (2020). *JASP (Version 0.8.6) [Computer software]*. Available online at: <https://jasp-stats.org/>
- Johnston, C., and Mash, E. J. (1989). A measure of parenting satisfaction and efficacy. *J. Clin. Child Psychol.* 18, 167–175. doi: 10.1207/s15374424jccp1802_8
- Kazyak, E., Woodell, B., Scherrer, K., and Finken, E. (2018). Law and family formation among LGBTQ-parent families. *Fam. Court Rev.* 56, 364–373. doi: 10.1111/fcre.12353
- Kranz, D., Busch, H., and Niepel, C. (2018). Desires and intentions for fatherhood: a comparison of childless gay and heterosexual men in Germany. *J. Fam. Psychol.* 32, 995–1004. doi: 10.1037/fam0000439
- Lampic, C., Svanberg, A. S., Karlström, P., and Tydén, T. (2006). Fertility awareness, intentions concerning childbearing, and attitudes towards parenthood among female and male academics. *Hum. Reprod.* 21, 558–564. doi: 10.1093/humrep/dei367
- May, A., and Tenzek, K. (2016). 'A gift we are unable to create ourselves': uncertainty reduction in online classified ads posted by gay men pursuing surrogacy. *J. GLBT Fam. Stud.* 12, 430–450. doi: 10.1080/1550428X.2015.1128860
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychol. Bull.* 129, 674–697. doi: 10.1037/0033-2909.129.5.674
- Meyer, I. H., Ouellette, S. C., Haile, R., and McFarlane, T. A. (2011). We'd be free": narratives of life without homophobia, racism, or sexism. *Sex. Res. Soc. Policy* 8, 204–214. doi: 10.1007/s13178-011-0063-0
- Mezey, N. J. (2013). "How lesbians and gay men decide to become parents or remain childfree," in *LGBT-Parent Families: Innovations in Research and Implications for Practice*, eds A. E. Goldberg and K. R. Allen (New York, NY: Springer Science Business Media), 59–70. doi: 10.1007/978-1-4614-4556-2_4
- Murphy, D. A. (2013). The desire for parenthood: gay men choosing to become parents through surrogacy. *J. Fam. Issues* 34, 8.
- Nieuwenhuis, S., Forstmann, B. U., and Wagenmakers, E. J. (2011). Erroneous analyses of interactions in neuroscience: a problem of significance. *Nat. Neurosci.* 14, 1105–1107. doi: 10.1038/nn.2886
- Purewal, S., and Van den Akker, O. (2007). The socio-cultural and biological meaning of parenthood. *J. Psychosom. Obstet. Gynaecol.* 28, 79–86. doi: 10.1080/01674820701409918
- Riskind, R. G., and Patterson, C. J. (2010). Parenting intentions and desires among childless lesbian, gay, and heterosexual individuals. *J. Fam. Psychol.* 24, 78–81. doi: 10.1037/a0017941
- Riskind, R. G., and Tornello, S. L. (2017). Sexual orientation and future parenthood in a 2011–2013 nationally representative United States sample. *J. Fam. Psychol.* 31, 792–798. doi: 10.1037/fam0000316
- Rouder, J. N., Haaf, J. M., and Van de kerckhove, J. (2018). Bayesian inference for psychology, part IV: parameter estimation and Bayes factors. *Psychon. Bull. Rev.* 25, 102–113. doi: 10.3758/s13423-017-1420-7
- Sakaluk, J. K. (2019). Expanding statistical frontiers in sexual science: taxometric, invariance, and equivalence testing. *J. Sex Res.* 56, 475–510. doi: 10.1080/00224499.2019.1568377
- Scandurra, C., Bacchini, D., Esposito, C., Bochicchio, V., Valerio, P., and Amodeo, A. L. (2019). The influence of minority stress, gender, and legalization of Civil Unions on parenting desire and intention in lesbian women and gay men: implications for social policy and clinical practice. *J. GLBT Fam. Stud.* 15, 76–100. doi: 10.1080/1550428X.2017.1410460
- Shenkman, G. (2012). The gap between fatherhood and couplehood desires among Israeli gay men and estimations of their likelihood. *J. Fam. Psychol.* 26, 828–832. doi: 10.1037/a0029471
- Shenkman, G., and Shmotkin, D. (2016). The association between self-perceived parental role and meaning in life among gay and heterosexual fathers. *J. Fam. Psychol.* 30, 552–561. doi: 10.1037/fam0000213
- Shreffler, K. M., Tiemeyer, S., McQuillan, J., Greil, A. L., and Spierling, T. (2017). Partner congruence on fertility intentions and values: implications for birth outcomes. *J. Soc. Pers. Relat.* 36, 2307–2322. doi: 10.1177/0265407518787232
- Smietana, M., Jennings, S., Herbrand, C., and Golombok, S. (2014). "Family relationships in gay father families with young children in Belgium, Spain and the United Kingdom," in *Relatedness in Assisted Reproduction: Families, Origins and Identities*, eds T. Freeman, F. Ebtehaj, S. Graham, and M. Richards (Cambridge: Cambridge University Press), 192–211. doi: 10.1017/cbo9781139814737.014
- Smietana, M. (2018). Procreative consciousness in a global market? Gay men's paths to surrogacy in the US. *Reprod. Biomed. Online* 7, 1–9. doi: 10.1016/j.rbms.2019.03.001
- Van Balen, F., and Trimbos-Kemper, T. C. (1995). Involuntarily childless couples: their desire to have children and their motives. *J. Psychosom. Obstet. Gynaecol.* 16, 137–144. doi: 10.3109/01674829509024462
- Wells, G. (2011). Making room for daddies: male couples creating families through adoption. *J. GLBT Fam. Stud.* 7, 155–181. doi: 10.1080/1550428X.2011.537242

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 van Houten, Tornello, Hoffenaar and Bos. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Stigma Experiences, Mental Health, Perceived Parenting Competence, and Parent–Child Relationships Among Lesbian, Gay, and Heterosexual Adoptive Parents in the United States

Rachel H. Farr* and Cassandra P. Vázquez

Department of Psychology, University of Kentucky, Lexington, KY, United States

OPEN ACCESS

Edited by:

Nicola Carone,
University of Pavia, Italy

Reviewed by:

Gabriela Misca,
University of Worcester,
United Kingdom
Abbie Goldberg,
Clark University, United States
Salvatore Ioverno,
Ghent University, Belgium

*Correspondence:

Rachel H. Farr
rachel.farr@uky.edu

Specialty section:

This article was submitted to
Developmental Psychology,
a section of the journal
Frontiers in Psychology

Received: 19 November 2019

Accepted: 26 February 2020

Published: 30 March 2020

Citation:

Farr RH and Vázquez CP (2020)
Stigma Experiences, Mental Health,
Perceived Parenting Competence,
and Parent–Child Relationships
Among Lesbian, Gay,
and Heterosexual Adoptive Parents
in the United States.
Front. Psychol. 11:445.
doi: 10.3389/fpsyg.2020.00445

Adoptive parents often face stigma related to “non-traditional” family structures. Lesbian and gay (LG) adoptive parents often face additional stigmatization based on sexual identity, which in turn may negatively affect parents’ mental health. Despite controversy about LG parenting, research demonstrates that family processes are more strongly associated with individual outcomes than family structure. Thus, family systems and minority stress theories provided our conceptual foundation in examining how adoptive LG parents’ stigma experiences were associated with mental health, parenting competence, and parent–child relationships. Participating families ($N = 106$; $n = 56$ LG parent families) were originally recruited from five US domestic private infant adoption agencies and completed two waves of data collection (W1, W2; 91% retention) when children were preschool-age ($M_{\text{age}} = 3.01$ years) and school-age ($M_{\text{age}} = 8.36$ years), respectively. Data for the current study are largely drawn from W2. Via Qualtrics, parents completed assessments of mental health symptoms, adoption stigma, and perceived childcare competence. LG parents also reported on their experiences of homonegative microaggressions, and children responded to a measure about their relationships with parents. No significant differences emerged as a function of parental sexual orientation and gender except that lesbian mothers, heterosexual mothers, and gay fathers all reported higher parenting competence than heterosexual fathers. Although parents’ mental health did not significantly predict parent–child relationship quality, parents’ perceived competence and LG parents’ current homonegative microaggression experiences did (e.g., greater competence, greater closeness; more microaggressions, lower closeness). Consistent with our conceptual framework, our results—derived from parent and child reports—demonstrate that although adoptive and LG parent families experience stigma, family processes (rather than structure) are most associated with individual outcomes. Researchers, policy makers, and practitioners should work together to employ identity-affirming practices to reduce stigma and support adoptive family functioning and well-being.

Keywords: adoption stigma, homonegative microaggressions, lesbian and gay, mental health symptoms, parent–child relationships, parenting competence

INTRODUCTION

Despite controversy, lesbian and gay (LG) adoptive parents in the United States (US) have increased in number and visibility; in fact, same-gender couples appear up to seven times more likely to have adopted children than different-gender couples (Goldberg and Conron, 2018). Regardless of ongoing debate about LG parenting, research supports that family processes (e.g., relationship dynamics between family members) are more strongly associated with individual outcomes than family structure (e.g., the number of parents, relationship status, etc.), including LG adoptive parent families (Lamb, 2012; Farr, 2017). Even so, in the US, adoptive parents often face stigma (e.g., concerns about parenting ability; Miall, 1987) related to “non-traditional” family structures (i.e., differing from married heterosexual parents with biologically related children), and LG adoptive parents often face additional stigma based on sexual identity (Goldberg, 2009; Herek, 2010; Goldberg and Smith, 2014; Lo et al., 2019). For example, the question of whether same-gender couples could raise children as effectively as do different-gender couples was a central debate in the ruling for marriage equality in the US, a ruling that held important legal implications about whether (married) same-gender couples could jointly adopt children (American Psychological Association [APA], 2015; *Obergefell v. Hodges*, 135 S. Ct. 2584, 2015).

Stigma felt by parents about their family composition may in turn negatively affect their mental health as well as perceived competence in parenting through internalized homophobia (Herek and Garnets, 2007; Herek, 2009; Newcomb and Mustanski, 2010; Robinson and Brewster, 2014). Research has also demonstrated that internalized stigma and stress may affect relationship quality among same-gender couples (Otis et al., 2006; Frost and Meyer, 2009), so it is possible that stigma could also be relevant to other family relationships, such as between parents and children in LG adoptive parent families. As such, family systems theory (Cox and Paley, 1997) and minority stress theory (Meyer, 2003) provided our conceptual foundation to examine how adoptive and LG parents’ stigma experiences were associated with mental health, parenting competence, and parent–child relationships. From family and minority stress perspectives, it is not surprising that contextual effects from both adoption stigma and homophobia can negatively affect parents’ mental health (Battle and Ashley, 2008; Frost and Meyer, 2009; Boss et al., 2016; Calzo et al., 2019; Goldberg et al., 2019). Our purpose here was to examine how stigma related to adoption and sexual orientation experienced by adoptive LG parents in the US may be associated with parent adjustment and their young children’s reports of parent–child relationship quality. Utilizing both parent and child reports is a major strength of this study and a unique contribution to the literature. This unique sample of families diverse in parental sexual orientation (i.e., lesbian, gay, and heterosexual parents), yet all with young adopted children, provided us an opportunity to investigate who might be more at risk or protected from experiences of stigma.

There is overwhelming consensus in the scholarly literature that children in LG parent families (including those formed through adoption) are well-adjusted and show high-quality

parent–child relationships (Erich et al., 2009a,b; Patterson, 2017; Calzo et al., 2019; McConnachie et al., 2019). Indeed, few differences in outcomes have been uncovered in comparing children in LG parent families versus those in heterosexual parent families (Bos et al., 2016; Farr, 2017; Patterson, 2017; Calzo et al., 2019). LG parents, including LG adoptive parents, demonstrate high levels of effectiveness and competence in their roles as parents and healthy psychological adjustment as compared with their cisgender heterosexual parent counterparts (Bos et al., 2004a; Goldberg and Smith, 2009; Golombok et al., 2014, 2018; Farr, 2017; Calzo et al., 2019). Moreover, studies of LG parents (including adoptive parents specifically) have described relatively few mental health symptoms and low psychological distress, below clinical cutoffs, and often failed to uncover differences in comparison to heterosexual parents (Goldberg and Smith, 2011; Lavner et al., 2014; Calzo et al., 2019).

Despite the abundance of research on children’s and parents’ outcomes in LG parent families, we know relatively little about LG-specific family processes and comparatively less about LG adoptive parent families (Farr et al., 2019a; Reczek, 2020). More recently, research has increasingly emphasized unique family processes in sexual minority parent families (Golombok et al., 2014; Farr et al., 2019a,b). One factor to consider, potentially affecting adjustment and family relationships among LG adults as well as adoptive parents, is stigma. Herek (2016, p. 397), referring to Goffman’s (1963, p. 5) description of stigma as “undesired differentness” within and across social interactions, goes on to describe *sexual stigma* more specifically “to refer broadly to all facets of stigma associated with same-sex desires, sexual behaviors, and relationships, as well as sexual minority communities.”

In this paper, we also focus on *adoption stigma*¹, which we describe as stigma based on the absence of biological ties within families and the cultural prioritizing of biological parenthood (Freeark et al., 2005; Goldberg et al., 2011; Baden, 2016; Morgan and Langrehr, 2019). From minority stress theory, we expect that marginalized groups such as LG adults as well as adoptive families may experience some negative psychological effects (i.e., stress, emotional dysregulation, social or interpersonal difficulties, rumination, etc.) resulting from stigma and discrimination (Bos et al., 2004b; Hatzenbuehler, 2009). Thus, we sought to contribute to research in these areas specifically among LG adoptive parents. In the sections that follow, we review literature relevant to individual mental health outcomes, parenting competence, as well as parent–child relationships, particularly among LG and adoptive family systems. We specifically focused on adoptive families with young children (i.e., early and middle childhood), given that these developmental periods are characterized by heightened awareness among children about different family types (i.e., based on biological and adoptive ties) and increased understanding about adoption (Brodzinsky, 2011).

¹Although we are not the first to use the term adoption stigma (e.g., Goldberg et al., 2011; Baden, 2016; Morgan and Langrehr, 2019), we purposefully provide a definition of how we conceptualize it. Baden (2016, p. 1) describes adoption stigma specifically as all the ways (i.e., everyday communication, media messages, books, fairy tales, etc.) that “societal discomfort and judgment about adoption” are conveyed.

We incorporate specific lenses of family systems theory, and specifically, family stress theory, cultural stigma surrounding adoption, and minority stress theory.

FAMILY SYSTEMS THEORY AND FAMILY STRESS THEORY

Family systems theory posits that a comprehensive understanding of individual development necessitates consideration of the family context (Minuchin, 1988; Cox and Paley, 1997; Feinberg, 2003). From a family systems perspective, processes within the family, such as relationship dynamics, are often more important to individual outcomes than is the structure of the family. Indeed, these principles are applicable to a variety of diverse family structures, including adoptive families and those headed by LG parents (Lamb, 2012; Patterson et al., 2015; Farr et al., in press). Contextual models of family stress describe how families contend with crises and why some families demonstrate better adaptation than others (Patterson, 1988; Boss et al., 2016). McCubbin and Patterson's (1983) double ABCX model (adapted from Hill, 1949) posits that family stressors (and their pileup over time; A) interact with family coping skills through available resources (B) and perceptions and meaning-making (C) to produce outcomes in terms of family adaptation or maladaptation to the stress (or crisis; X). Family stress is influenced by a variety of internal and external factors such as place in the developmental life cycle, family structure, culture, genetics, values, and beliefs (Boss et al., 2016). While internal factors may be modifiable, external ones may be outside of families' control. One external context that is particularly relevant for adoptive families and those headed by sexual minority parents is the role of societal and interpersonal stigma and resulting minority stress. Indeed, Prendergast and MacPhee (2018) describe a theoretical model of family resilience among LG parent families, building from minority and family stress theories, in which effects of stigma and discrimination on individual adjustment and family relationships may be buffered or exacerbated by how well families respond to these adverse experiences.

ADOPTION STIGMA

In the US, prevailing cultural norms about "the family" reflect heteronormativity and biological connections (i.e., bionormativity) between parents and children, as well as among siblings within families (Wegar, 2000; Fisher, 2003; Freeark et al., 2005; Baker, 2008). These "master narratives" (i.e., broad societal, cultural, and historical scripts; Hammack and Cohler, 2011) can result in stigma toward families not defined by biological ties, such as adoptive families (Miall, 1987, 1996; Baden, 2016). American women who hold greater pronatalist beliefs (e.g., valuing procreation and motherhood) may be more likely to consider adoption only after first seeking fertility treatment (Park and Wonch Hill, 2014). Indeed, willingness for some American families to adopt a child may increase after unsuccessful

attempts to conceive biologically (Bausch, 2006), and infertility is often a motivator for heterosexual parent families to adopt (Farr and Patterson, 2009; Malm and Welte, 2010). As such, adoptive parents may experience grief related to their loss of not having biologically related children, which may be particularly salient during the transition to parenthood (Pinderhughes and Brodzinsky, 2019). Relatedly, many (heterosexual) adoptive parents describe feeling as if they are illegitimate, second-rate, or inferior as compared to parents with biologically related children (Miall, 1987; Wegar, 2000). Adoptive parents face stigma from others indicating that adoption is a "second-best" option for parenthood, less permanent or authentic, and that their adopted children are not their "natural" or "real" children (March, 1995; Freeark et al., 2005; Brodzinsky, 2011; Baden, 2016; Morgan and Langrehr, 2019). For example, some adoptive parents have reported that receiving family support was conditional on the biological relatedness of their child to that family member (Patterson et al., 1998).

Feelings of perceived and internalized adoption stigma have also been demonstrated among LG couple samples across their transition to adoptive parenthood and have been linked to greater depressive symptoms (Goldberg et al., 2011). Some LG couples report experiencing discrimination (Goldberg et al., 2007; Mallon, 2011; Goldberg, 2012) and additional legal complexities (e.g., living in an area without anti-discriminatory policies protecting LG adoptive parent candidates; Farr and Goldberg, 2018) when trying to adopt due to their sexual identity. Thus, the transition to parenthood is often a vulnerable time for newly formed LG adoptive parent families to face additional experiences of stigma because of the already heightened levels of stress and depressive symptoms that adoptive parents may feel when becoming parents (McKay et al., 2010; Goldberg and Smith, 2011). Indeed, LG adoptive parents face stigma not only on the basis of adoption but also on the basis of sexual orientation. It is to this topic of minority stress resulting from sexual stigma that we turn to next.

MINORITY STRESS THEORY AND LESBIAN AND GAY ADOPTIVE PARENT FAMILY OUTCOMES

Meyer's (2003) minority stress theory is based on the premise that sexual minority individuals experience often chronic levels of psychosocial stress resulting from stigma, prejudice, and discrimination. Minority stress can specifically result from microaggressions, defined as somewhat subtle or more covert slights or insults (Sue et al., 2007). Minority stress resulting from more overt discrimination as well as from microaggression experiences is associated with negative health outcomes among sexual minority adults (Wright and Wegner, 2012; Nadal, 2013; Wegner and Wright, 2016). LG individuals are often affected by homophobic microaggressions—those that are based on sexual minority group membership (e.g., overhearing derogatory epithets like "that is so gay" or assumptions that one's sexual orientation is heterosexual; Wright and Wegner, 2012; Nadal, 2013, 2019). Such microaggressions can also be specifically

directed toward same-gender parent families (e.g., asking a child with two gay fathers where their “mother” is; Farr et al., 2016a). Stigma and prejudice directed toward LG individuals may also operate differently for men and women (Herek, 2009). For example, gay men often face additional unique barriers when attempting to become parents (e.g., inability to bear children; Goldberg, 2012) and scrutiny related to their parenthood (Tornello and Patterson, 2015; Carneiro et al., 2017)—which may in part be attributable to cultural stigma and negative attitudes toward fatherhood (McCutcheon and Morrison, 2015). Thus, it is important to consider how intersecting identities such as gender and sexual orientation may affect experiences of stigma and homophobic microaggressions in parents. Although research regarding microaggressions experienced by sexual and gender minority persons is advancing (Fisher et al., 2019; Nadal, 2019), homophobic microaggressions and their possible associations with individual and family outcomes have not been specifically examined (to our knowledge) among a sample of LG parents, let alone LG adoptive parents. Thus, research in this area would provide greater understanding about the potentially unique experiences of LG adoptive parent families and how to support healthy and successful adoptive placements in the context of minority stress.

What we know from existing research is that children and their (adoptive) sexual minority parents do face stigma, overt discrimination, and microaggressions based on parental sexual orientation (Bos and Gartrell, 2010; Vyncke et al., 2014; Farr et al., 2016a; Haines et al., 2018; Green et al., 2019). Moreover, these minority stress experiences have been associated with a variety of negative outcomes among sexual minority parent family members, such as lower behavioral adjustment, negative health outcomes, lower well-being, and less positive parenting and coparenting (Tornello et al., 2011; Lick et al., 2013; Crouch et al., 2014, 2015; Carone et al., 2017, 2018; Golombok et al., 2018; Calzo et al., 2019; Goldberg et al., 2019; Green et al., 2019). In terms of understanding associations between individual adjustment and homonegative microaggressions in particular, research has demonstrated that it is important to include consideration of past and current experiences, as well as perceptions of their impact (and how this interacts with past or current experiences; Wright and Wegner, 2012).

Moreover, LG parents may encounter additional or particularly salient experiences of stigma related to their parenting ability and sexual orientation during their transition to parenthood (e.g., discrimination from adoption agency workers; Mallon, 2011). Indeed, examining the presence and perceived impact of past and current homonegative microaggressions is important in understanding the contextual factors that may influence parent adjustment and family relationships. Connecting with family stress theory, some scholarship in this area has highlighted how the negative consequences of minority stress are often a product of broader familial stress resulting from stigma rather than, or in addition to, overt individual experiences (Crouch et al., 2017; Prendergast and MacPhee, 2018). Thus, from minority and family stress perspectives, we sought to examine how stigma related to adoption and sexual orientation might be differentially associated with mental

health and perceptions of parenting competence among LG and adoptive parents, as well as with children’s reports of parent–child relationship quality.

THE CURRENT STUDY

Among a sample of approximately 100 adoptive families headed by lesbian, gay, and heterosexual parents, we explored associations at two points (about 5 years apart; when children were preschool-age and school-age, respectively) among parent mental health symptoms, perceived parenting competence, perceived adoption stigma, homonegative microaggressions, and quality of parent–child relationships. We also examined whether any of these variables of interest differed as a function of parental sexual orientation and parent gender identity (i.e., lesbian women, gay men, heterosexual women, and heterosexual men), as well as family type (i.e., those headed by lesbian mothers, gay fathers, and heterosexual parents).

AIMS, RESEARCH QUESTIONS, AND HYPOTHESES

1. The first aim was to examine possible differences in variables of interest as a function of parent gender and sexual identity as well as family type (i.e., lesbian, gay, or heterosexual parent families). Would differences emerge in mental health symptoms, perceived parenting competence, or adoption stigma as functions of parent gender and/or sexual identity? Given distinct experiences of stigma between lesbian mothers and gay fathers (Herek, 2009; Goldberg, 2012; Tornello and Patterson, 2015; Carneiro et al., 2017), would there be differences as a function of parent gender in homonegative microaggression experiences? Finally, would there be differences by family type in children’s perceptions of parent–child relationship quality? We generally anticipated few differences as a function of family type but queried whether we might find differences based on parent gender in parenting competence, given previous literature (Freeark et al., 2005; Goldberg and Smith, 2009; Calzo et al., 2019). In contrast, we also considered a competing hypothesis based on family stress and minority stress theories. Related to possible pileup effects of stress (McCubbin and Patterson, 1983) resulting from both adoption and sexual stigma, we explored whether outcomes in our variables of interest among LG adoptive parent families might be distinct from those among heterosexual adoptive parent families.
2. The second aim was to investigate associations across time among parent mental health symptoms and perceived parenting competence, both assessed when children were in preschool, with experiences of adoption stigma, homonegative microaggressions, and parent–child relationship quality, all evaluated 5 years later. Given some previous research examining similar linkages between mental health, parenting, and adoptive family relationships

(Goldberg and Smith, 2009; Brodzinsky, 2011; Goldberg et al., 2011), we hypothesized that greater mental health symptoms and lower perceived parenting competence would be linked to perceptions of greater adoption stigma and lower relationship quality, respectively. Based on our theoretical frameworks of family and minority stress as well as some relevant existing research regarding sexual stigma and homonegative microaggressions as related to LG individual and parent outcomes (Goldberg et al., 2011, 2019; Tornello et al., 2011; Wright and Wegner, 2012; Carone et al., 2017; Green et al., 2019), we also anticipated that greater mental health symptoms and lower competence, respectively, would be associated with more microaggressions.

- The third and final aim was to investigate whether stigma and microaggressions would be concurrently associated with parent-child relationship quality, all assessed during middle childhood. Based on existing research on parallel constructs (e.g., Goldberg et al., 2011), and building from minority stress and family stress theories, we predicted that adoption stigma described by parents would predict children's reports of lower parent-child relationship quality (accounting for parent mental health and perceived competence). Aligned with some research indicating associations between greater sexual stigma, family stress, and child outcomes (Bos and Gartrell, 2010; Vyncke et al., 2014; Crouch et al., 2017; Carone et al., 2018; Calzo et al., 2019), we also expected that homonegative microaggressions experienced by LG parents would predict reports of lower parent-child relationship quality (accounting for parent mental health symptoms, competence, and adoption stigma) among their children.

MATERIALS AND METHODS

Participants

Data presented here are from the first (W1) and second (W2) waves of an ongoing longitudinal study examining lesbian, gay, and heterosexual parent adoptive families in the US (Farr, 2017). Parents in this study were recruited for W1 from five private adoption agencies across the US that offered options for domestic infant adoptive placements. These agencies were in areas where LG couples could legally adopt in the mid-2000s. Parents were eligible to participate if they had completed a private domestic infant adoption. A total of 106 two-parent families (27 lesbian, 29 gay, 50 heterosexual couples) and their eldest adopted child (in the age range of 1–5 years old; i.e., the target child) participated at W1. In W2, 96 families participated (26 lesbian, 29 gay, 41 heterosexual couples) in some capacity. Not all participants, however, fully completed every measure at each time point (see section “Measures” below for more details about missingness). The retention rate between W1 and W2 for this sample was 90.6% (26 lesbian, 29 gay, 41 heterosexual parent families). Families lived across the US (but predominantly the US South, East Coast, and West Coast), and most participants (74.5%) lived in an urban

(versus rural) area as defined by US Census population sizes; there were no changes in geographic regions among participating families from W1 to W2.

Of the families represented in the measures used in this paper at W2, almost half (45.3%) of the children were transracially adopted, with children being more racially diverse than their parents. Most children were described by their parents as white/Caucasian (37.8%), followed by Black/African American (31.1%), Multi-Ethnic/Multi-Racial (25.6%), Latino/Hispanic (3.3%), Asian American (1.1%), and Native American/American Indian (1.1%). Parents self-reported their racial/ethnic identities, and most identified as white/Caucasian (84.8%), followed by Black/African American (10.7%), Latino/Hispanic (1.7%), Multi-Ethnic/Multi-Racial (1.1%), Other (1.1%), and Asian American (0.6%). Gender was almost equally split among children (52.2% female) and parents (48.3% female); all identified as cisgender. At the time of data collection during W2, children were 8.36 years of age on average ($SD = 1.66$), and parents were about 47.56 years old ($SD = 5.87$). Parents had a median annual total household income of \$160,000 ($SD = 110,976$) and were well-educated with 89.2% holding at least a college degree. Additional participant demographic information from W2 can be found in **Table 1** (see Farr, 2017 for sample demographics at W1).

Procedure

To recruit participants for W1, researchers collaborated with five domestic private infant adoption agencies in the US mentioned previously. Agency directors then forwarded a study invite to

TABLE 1 | Demographic information wave 2 (W2) by family type.

Variable	N = 96 families			
	Lesbian parents	Gay parents	Heterosexual parents	Sample
Family				
Household income (\$K) ^a	146 (129)	192 (107)	150 (86.76)	160 (111)
Transracial adoptions	48%	58.6%	34.1%	45.3%
Parents				
Age (years)	48.51 (5.01)	46.85 (6.06)	47.48 (6.18)	47.56 (5.87)
Race (% white)	84.4%	83%	86.3%	84.8%
Education (% at least college degree)	97.7%	88.5%	82.7%	89.2%
Work status (% full-time)	75%	75%	63.5%	70.9%
Children				
Gender (% female)	65.2%	40.7%	52.5%	52.2%
Age (years)	8.48 (1.73)	8.26 (1.51)	8.35 (1.76)	8.36 (1.66)
Race (% white)	39.1%	29.6%	42.5%	37.8%

^aMedian annual income. SDs are given in parentheses. W2 = wave 2. Aside from household income, $F(2,85) = 6.61$, $p < 0.01$, there were no significant differences by family type in any of these demographic variables. Demographic information for this sample at W2 was also originally reported in Farr, 2017.

families with whom children had been placed recently or within the past few years. Interested participants contacted the research team, and the first author conducted 2-h home visits with each participating family ($N = 106$) to collect observational and survey data (e.g., Farr et al., 2019a). Both parents individually completed a demographic questionnaire and other measures *via* paper-and-pen surveys during the visit.

Participants in W1 were recontacted by the research team about 5 years later and invited to participate in W2. Some measures below were administered only during W2, and some were administered in both waves—all were self-report. Questionnaires at W2 were administered via the online survey platform Qualtrics. Parents independently completed surveys at their leisure. Children were assisted with completing the child-level questionnaire [i.e., the Inventory of Parent and Peer Attachment (IPPA), described below] by the first author during a scheduled home visit. Participants were not compensated, and participation was voluntary. Informed consent was provided by parents for their own and their children's participation; assent was obtained from children. All study materials and procedures were approved by the Institutional Review Boards of the University of Virginia, the University of Massachusetts Amherst, and the University of Kentucky. Data were collected between 2007–2009 (W1) and 2013–2014 (W2).

Measures

Demographic Characteristics

Both parents individually completed questionnaires related to their and their children's demographic information at both waves. Parents were asked about their racial/ethnic background and the racial/ethnic background of the target child. Transracial adoption in this sample was defined as the target child's race being different than at least one of the parents—this operationalization of transracial adoption has been used in other studies (Zhang and Lee, 2011; Jacobson et al., 2012; Marr, 2017). Parents were also asked for their date of birth and that of the target child to assess their age at the time of data collection during both waves. Child and parent gender, total household income, parent education status, and parent sexual orientation were also assessed.

In W1, parents were provided with the options of “straight/heterosexual,” “lesbian,” “gay,” “bisexual,” or “questioning/uncertain” and asked to select the one that best represented their sexual orientation. In W2, parents were provided with an additional “other/self-describe” write-in option. In W1, eight of the mothers in female-partnered couples and two of the mothers with male partners identified as bisexual. One male parent with a female partner identified as bisexual in W1. In W2, five of the mothers in the female-partnered couples identified as bisexual, and two mothers in the female-partnered couples self-identified as queer. One male parent with a male partner identified as questioning/uncertain. Given the small cell sizes in our analyses, we include individuals in different-gender couples as heterosexual and participants in same-gender couples as lesbian or gay—a method used in other studies examining sexual minority and heterosexual adoptive parents (e.g., Brodzinsky and Goldberg, 2016; Wyman Battalen et al., 2019). This collapsing of individual sexual minority identities (e.g., bisexual) into broader groups (e.g., lesbian) may contribute

to identity erasure (e.g., bi-erasure; Hackl et al., 2013) as it is inconsistent with how participants self-identify. This generalized categorization may also overlook variability across individual identities (Brodzinsky and Goldberg, 2016). Despite these limitations, we utilize this method of classifying participants to preserve power for our analyses.

Mental Health Symptoms

To assess the presence of mental health symptoms and psychological distress, parents completed the Brief Symptom Inventory (BSI; Derogatis and Melisaratos, 1983) at both W1 and W2. This widely used clinical measurement survey contains 53 items across nine domains each with corresponding subscales: depression, anxiety, somatization, obsession–compulsion, interpersonal sensitivity, hostility, phobic anxiety, paranoid ideation, and psychoticism. Participants were asked, “*In the past 7 days, how much were you distressed by?*” and then presented with the list of items (e.g., *Feeling hopeless about the future*). Items are scored on a Likert scale ranging from 0 (*not at all*) to 4 (*extremely*). All 53 items² were summed and averaged to create a Global Severity Index (GSI)—higher scores indicate higher levels of overall psychological distress. In W1, 208 parents (four one-parent reports) completed this measure and had a Cronbach's alpha (α) of 0.94. At W2, 175 parents completed this measure ($\alpha = 0.92$). We note that high α values (e.g., $\alpha > 0.90$) can result from alpha inflation from the large number of items (Streiner, 2003; Tavakol and Dennick, 2011).

Parenting Competence

The childcare competence subscale from the Who Does What? Measure (WDW-C; Cowan and Cowan, 1990) was completed by parents at both W1 and W2 to assess their perceived competence in parenting the target child. There are 20 items (e.g., *Disciplining our child*) on a Likert scale ranging from 1 (*not at all competent*) to 5 (*very competent*). All 20 items are summed and averaged to create a total competence score. Higher scores indicate higher perceived parenting competence. In W1, 210 parents completed this measure ($\alpha = 0.91$). At W2, 171 completed this measure ($\alpha = 0.92$).

Adoption Stigma

The Feelings About Adoption Scale (FAAS; Goldberg et al., 2011) was used to measure how aware adoptive parents are about adoption stigma (*perceived stigma subscale*) and if they internalize this stigma (*internalized stigma subscale*). The internalized stigma subscale had low reliability ($\alpha = 0.47$) in the scale validation analysis (Goldberg et al., 2011) and in our sample ($\alpha = 0.17$). Thus, we only used the perceived stigma subscale (sample $\alpha = 0.81$). This subscale contains five items assessing participants' perceptions of adoptive stigma (e.g., *People in society value biological ties over everything else in creating a family*). This scale was only administered in W2 with 177 parents completing the scale.

²In W1, five items were inadvertently dropped from the measure administered to participants. As such, we computed a mean score of the remaining 48 items to use in our analyses.

Homonegative Microaggressions

Only LG parents ($n = 94$) completed the Homonegative Microaggressions Scale (HMS; Wright and Wegner, 2012), which contains 45 items assessing experiences of homonegative microaggressions (e.g., *How often have people conveyed that it is your choice to be gay?*). The scale was validated in individuals identifying as cisgender and lesbian, gay, or bisexual. There are three subscales (past, current, and impact); each asks for a rating on all 45 items. The past subscale (HMS-P; $\alpha = 0.92$) asks participants to think about their experiences growing up, the current subscale (HMS-C; $\alpha = 0.88$) asks about the last 6 months, and the impact subscale (HMS-I; $\alpha = 0.96$) asks participants to rate how much the event bothered or impacted them. The items are scored on a Likert scale ranging from 1 (*hardly ever/never/not at all*) to 5 (*constantly/a great deal*), and there is an option for participants to indicate if the question is not applicable to them. Means were calculated for each subscale. Higher scores indicate more frequent experiences or greater impact. Additionally, as recommended by Wright and Wegner (2012) for the HMS scale, interaction variables were created for past and impact subscale scores (HMS-PI) as well as current and impact subscale scores (HMS-CI). In the scale validation study, experiencing a past homonegative microaggression was significantly moderated by impact in predicting self-esteem (Wright and Wegner, 2012). Individuals who experienced greater past homonegative microaggressions were more likely to report having lower self-esteem when those experiences were highly impactful for the participant. As such, these interaction terms (i.e., HMS-PI and HMS-CI) were included in all analyses using this measure. This measure was only administered during W2.

Parent–Child Relationship Quality

Children ($n = 90$) completed the IPPA (Armsden and Greenberg, 1987) at W2 only. The IPPA assesses children's feelings of closeness and overall relationship quality with their parents (e.g., *I feel my parent does a good job as my parent*). Children completed one report for each parent (28 items each; $\alpha = 0.85^3$). The IPPA consists of three subscales: trust, communication, and alienation. We created a composite score that provides a mean of all items, averaged across both parents. Higher scores indicate better relationship quality.

Data Analytic Plan

Hierarchical linear modeling (HLM) was used (with HLM7 software; Raudenbush et al., 2011) to account for shared variance and interdependent responses within families (often two parents reporting from the same family or children reporting on their two parents within families) for dependent variables of interest (Raudenbush and Bryk, 2002). First, we examined unconditional models with no predictors and only the outcome variables of interest (i.e., mental health symptoms, parenting competence, adoption stigma, homonegative microaggressions, parent–child relationship quality). HLM is warranted only when intraclass correlation coefficients (ICCs) exceed the cutoff value of 25% (Guo, 2005). ICCs were below this cutoff for outcome

variables of parent mental health symptoms, perceived parenting competence, perceived adoption stigma, and homonegative microaggressions, but HLM was warranted for parent–child relationship quality with an ICC of 58%. The basic equations for the HLM models are: Level 1: $Y_{ij} = \beta_{0j} + e_{ij}$ and Level 2: $\beta_{0j} = \gamma_{00} + u_{0j}$. Level 1 represents the calculation for parent–child relationship quality, Y_{ij} . β_{0j} represents the random intercept, and e_{ij} represents the error term. Level 2 represents a comparison of averages for the outcome variable. Interdependence of responses within families is controlled by the u_{0j} coefficient.

Missing Data

As recommended, we examined the data for possible patterns of missingness to explain non-participation (Acock, 2005; Widaman, 2006; Jeličić et al., 2009; Johnson and Young, 2011). Missingness in terms of item non-response on key variables (mental health symptoms, perceived parenting competence, perceived adoption stigma, parent–child relationship quality, all five homonegative microaggression variables) was low for W1 variables (averaging 1.4%) and moderate (between 10 and 20%; Widaman, 2006) for W2 variables (averaging 17%). To account for missingness, we used full information maximum likelihood (FIML) in the HLM models, an approach that is both widely recommended and appropriate for managing missing data in multilevel models (Acock, 2005; Widaman, 2006; Johnson and Young, 2011). We made use of listwise deletion for other analyses; this “traditional” technique has been demonstrated as robust when predictor variables show low missingness and as related to the type of missingness that frequently characterizes data in studies of families (Jeličić et al., 2009; Johnson and Young, 2011).

Power Analyses

Power analyses were conducted using G*Power (Faul et al., 2007) for analyses of interest with alpha set to $\alpha = 0.05$ with the sample size of $N = 96$ families represented at W2. For bivariate correlations among variables of interest, achieved power was 0.99 for large, 0.85 for medium, and 0.16 for small effects. For one-way ANOVA with four groups (lesbian mothers, gay fathers, heterosexual mothers, heterosexual fathers), achieved power was 0.91 for large, 0.50 for medium, and 0.11 for small effects. For multiple regression (three predictors), achieved power was 0.99 for large, 0.89 for medium, and 0.18 for small effects. Thus, analyses were mostly powered to detect medium to large effects.

RESULTS

Preliminary Analyses

Preliminary analyses (i.e., bivariate Pearson two-tailed correlations) were run to assess the presence of significant associations between all variables of interest (Table 2). Preliminary analyses were also conducted to explore the role of possible covariates in analyses for all variables of interest (parent mental health symptoms, perceived parenting competence, perceived adoption stigma, homonegative microaggression experiences, and children's perceptions of parent–child relationship quality). Given previous research indicating

³This reflects the average alpha of child reports for each parent.

TABLE 2 | Preliminary correlations for all variables of interest.

Variable	1	2	3	4	5	6	7	8	9	10
1. Parent–child relationships	–									
2. Mental health (W1)	–0.04	–								
3. Mental health	0.04	0.52***	–							
4. Competence (W1)	0.11	–0.33***	–0.26***	–						
5. Competence	0.27***	–0.28***	–0.54**	0.57***	–					
6. Adoption stigma	0.08	0.16*	0.08	–0.02	–0.12	–				
7. Past homonegative microaggressions	–0.08	0.09	0.28**	–0.02	–0.13	0.23*	–			
8. Current homonegative microaggressions	–0.05	0.14	0.18	0.01	–0.04	0.35**	0.58***	–		
9. Impact of homonegative microaggressions	–0.02	0.13	0.19	–0.07	–0.04	0.45***	0.57***	0.51***	–	
10. Past*impact homonegative microaggressions	–0.07	0.12	0.23*	–0.04	–0.10	0.38***	0.82***	0.63***	0.91***	–
11. Current*impact homonegative microaggressions	–0.02	0.15	0.16	0.001	–0.02	0.41***	0.60***	0.86***	0.83***	0.86***

* $p < 0.05$. ** $p < 0.01$. *** $p < 0.001$. W1 = wave 1. All other measures administered at wave 2.

the relevance to parent adjustment and family relationships of each of the following variables—child age (Farr, 2017), child gender (Freeark et al., 2005), presence of siblings (Farr et al., 2016b), birth/age order of children (Barth and Brooks, 1997), parent socioeconomic status (e.g., income, education; Neiss and Rowe, 2000; Johnson et al., 2007), geographic location (i.e., urbanicity; Kinkler and Goldberg, 2011), and transracial adoption status (Baden, 2016) among samples of adoptive families (including those with LG parents)—we considered all as possible covariates. As we conducted a series of dependent variables and demographic covariates, we applied a Bonferroni correction ($\alpha = 0.01$). These analyses revealed no significant associations among covariates and variables of interest, so no demographic variables were included in subsequent analyses.

Descriptive Results and Group Differences

A one-way ANOVA was conducted to assess differences by parent gender and sexual identity (four groups; lesbian mothers, gay fathers, heterosexual mothers, heterosexual fathers) in mental health symptoms, perceived parenting competence, and adoption stigma (Table 3). No significant differences were found by parent gender or sexual identity in mental health symptoms at W1 (child $M_{age} = 3.01$) or W2 (child $M_{age} = 8.36$). Significant differences were found, however, in perceived parenting competence at W1 and W2. A Tukey *post hoc* analysis revealed that heterosexual fathers were significantly different at W1 from lesbian mothers ($p < 0.001$), gay fathers ($p = 0.001$), and heterosexual mothers ($p < 0.001$). At W2, heterosexual fathers were also significantly different from lesbian mothers ($p < 0.001$), gay fathers ($p < 0.001$), and heterosexual mothers ($p < 0.001$). In both waves, heterosexual fathers reported feeling less competent in their parenting ability than all other groups (see Table 3 for descriptive information). No significant differences were found among the remaining three groups for perceived parenting competence. Finally, no significant differences were found in perceived adoption stigma at W2 by parent gender or sexual identity.

Five separate independent samples *t*-tests were conducted to assess differences between LG parents on the five homonegative

microaggression variables at W2. No significant differences were found between LG parents among any of the five homonegative microaggression variables (Table 4). HLM was used to assess differences by family type (three groups: lesbian, gay, and heterosexual parent families) in child-reported scores of parent–child relationships. Specifically, to compare by family type, the Level 2 equation provides a comparison of averages across family type, e.g., Level 2: $\beta_{0j} = \gamma_{00} + \gamma_{01}(\text{Lesbian}) + \gamma_{01}(\text{Gay}) + u_{0j}$. As in previous HLM research involving indistinguishable dyads (e.g., same-gender couples; Smith et al., 2013), the Level 2 coefficients reflect the effects of being “lesbian versus heterosexual” and “gay versus heterosexual” on parent–child relationship quality. No significant differences were found in this variable among lesbian, gay, or heterosexual parent families. We also conducted these same analyses a second time with gay father families as the reference group such that comparisons were directly made between gay father families and lesbian mother families and between gay father families and heterosexual parent families. The pattern of results was the same regardless of whether lesbian or gay parent families were the reference group.

Associations Across Wave 1 and Wave 2

First, paired samples *t*-tests were conducted to assess differences between W1 and W2 for parents’ mental health symptoms and perceived parenting competence. A significant difference was found between W1 and W2 for mental health symptoms, $t(172) = 11.73$, $p < 0.001$; parents’ mental health symptom scores were significantly higher at W1 than W2 (see Table 3 for descriptive information). No significant difference was found, however, between W1 and W2 means for perceived parenting competence. Next, we regressed adoption stigma at W2 onto parents’ feelings of parenting competence and their mental health symptoms at W1. The omnibus model was not significant so we did not interpret the individual predictors (see Supplementary Material). We also used HLM to see if parents’ mental health symptoms and feelings of parenting competence at W1 predicted child-reported parent–child relationship quality at W2. Neither parents’ mental health symptoms nor feelings of parenting competence at W1 significantly predicted parent–child relationship quality. Finally,

TABLE 3 | Means, standard deviations, and ANOVA by family type and parent gender.

Variable	Lesbian mothers	Gay fathers	Heterosexual mothers	Heterosexual fathers	Heterosexual parents	Total			
	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>	<i>F(df)</i>	<i>p</i>	η^2
Parent-child relationships ^a	<i>n</i> = 45 4.56 (0.40)	<i>n</i> = 54 4.33 (0.52)	<i>n</i> = 40 4.48 (0.43)	<i>n</i> = 40 4.50 (0.52)	<i>n</i> = 80 4.49 (0.47)	<i>n</i> = 179 4.46 (0.47)	–	–	–
Mental health (W1)	<i>n</i> = 52 0.58 (0.34)	<i>n</i> = 58 0.57 (0.41)	<i>n</i> = 50 0.54 (0.34)	<i>n</i> = 49 0.55 (0.38)	<i>n</i> = 99 0.54 (0.36)	<i>N</i> = 209 0.56 (0.37)	0.14 (3, 208)	0.936	0.002
Mental health (W2)	<i>n</i> = 43 0.29 (0.24)	<i>n</i> = 52 0.30 (0.28)	<i>n</i> = 41 0.23 (0.15)	<i>n</i> = 39 0.34 (0.29)	<i>n</i> = 80 0.29 (0.24)	<i>N</i> = 175 0.29 (0.25)	1.30 (3, 171)	0.275	0.02
Competence (W1)	<i>n</i> = 54 4.68 (0.30)	<i>n</i> = 58 4.60 (0.43)	<i>n</i> = 48 4.78 (0.27)	<i>n</i> = 49 4.29 (0.61)	<i>n</i> = 97 4.53 (0.53)	<i>N</i> = 209 4.59 (0.46)	12.25 (3, 205)	<0.001	0.15
Competence (W2)	<i>n</i> = 41 4.69 (0.34)	<i>n</i> = 52 4.65 (0.36)	<i>n</i> = 39 4.70 (0.34)	<i>n</i> = 39 4.24 (0.63)	<i>n</i> = 78 4.47 (0.56)	<i>N</i> = 171 4.58 (0.46)	10.17 (3, 167)	<0.001	0.15
Adoption stigma	<i>n</i> = 46 2.24 (0.92)	<i>n</i> = 52 2.06 (0.73)	<i>n</i> = 40 2.34 (0.94)	<i>n</i> = 39 2.22 (0.81)	<i>n</i> = 79 0.28 (0.88)	<i>N</i> = 177 2.21 (0.85)	0.85 (3, 173)	0.470	0.01

The four groups included in the ANOVA analyses were lesbian mothers, gay fathers, heterosexual mothers, and heterosexual fathers. A Tukey post hoc test revealed that heterosexual fathers had significantly lower scores than all other groups in competence (W1) and competence. W1 = wave 1. All other measures administered at wave 2.

^aThis variable was assessed via hierarchical linear modeling (HLM) rather than ANOVA. Descriptive information presented here only.

TABLE 4 | Homonegative microaggressions: means, standard deviations, *t*-tests, and effect sizes for lesbian mothers and gay fathers.

Variable	Lesbian mothers (<i>n</i> = 43)	Gay fathers (<i>n</i> = 51)	Total (<i>n</i> = 94)	<i>t(df)</i>	<i>p</i>	<i>d</i>
	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>			
Past homonegative microaggressions	2.24 (0.71)	2.48 (0.73)	2.37 (0.73)	−1.6 (92)	0.935	0.33
Current homonegative microaggressions	1.67 (0.61)	1.64 (0.41)	1.65 (0.50)	0.30 (92)	0.155	0.06
Impact of homonegative microaggressions	2.12 (0.96)	2.16 (0.82)	2.14 (0.88)	−0.19 (92)	0.871	0.04
Current*impact Homonegative microaggressions	3.82 (3.47)	3.71 (2.20)	3.76 (2.83)	0.19 (92)	0.605	0.04
Past*impact homonegative microaggressions	5.11 (3.43)	5.72 (3.43)	5.44 (3.65)	−0.81 (92)	0.736	0.18

Asterisks refers to interaction terms.

we regressed all five homonegative microaggression variables at W2 onto parents' mental health symptoms and feelings of parenting competence at W1 for LG parents. Given the large number of statistical tests, we applied a Bonferroni correction with alpha set to $p = 0.01$. All five omnibus models were not significant, so we did not interpret the individual predictors (see **Supplementary Material**).

Cross-Sectional Associations Within Wave 2

For our research questions pertaining to the entire sample, we regressed adoption stigma at W2 onto parents' mental health symptoms and perceived parenting competence at W2. The omnibus model was not significant, so we did not interpret the individual predictors (see **Supplementary Material**). Using HLM, results indicated that only perceived parenting competence was a significant predictor of parent-child relationship quality—parents' mental health symptoms and adoption stigma were not significant predictors of parent-child relationship quality (**Table 5**).

For our research questions pertaining to LG parent families, we regressed the five individual homonegative microaggression

variables at W2 onto parents' mental health symptoms and perceived parenting competence at W2. None of the five homonegative microaggression variables were significantly predicted by parents' mental health symptoms or perceived

TABLE 5 | Hierarchical linear modeling (HLM): inventory of parent and peer attachment from wave 2 (W2) variables (whole sample).

Variable	Coefficient	SE	<i>t</i>	<i>df</i>	<i>p</i>
Intercept β_0					
Intercept γ_{00}	4.45	0.04	102.59	86	<0.001
Competence β_1					
Intercept γ_{10}	0.25	0.07	3.79	72	<0.001
Mental health β_2					
Intercept γ_{20}	0.16	0.13	1.27	72	0.208
Adoption stigma β_3					
Intercept γ_{30}	0.02	0.04	0.45	72	0.652
Random effect	SD	Variance	<i>df</i>	χ^2	<i>p</i>
Intercept, u_0	0.36	0.11	86	280.67	<0.001
level1, r	0.31	0.09			

parenting competence at W2 (i.e., only one omnibus model was significant with a Bonferroni correction applied, with greater W2 mental health symptoms statistically predicting greater past homonegative microaggressions; see **Supplementary Material**). We then included all five homonegative microaggression variables, parents' mental health symptoms, perceived parenting competence, and adoption stigma in an HLM model to assess if any of those W2 variables predicted parent–child relationship quality at W2 (**Table 6**). Only current experiences (i.e., within the last 6 months) of homonegative microaggressions significantly predicted parent–child relationship quality such that when parents experienced more microaggressions, child-reported parent–child relationship quality was lower.

DISCUSSION

In this study, findings revealed a generally high-functioning sample of adoptive families headed by lesbian, gay, and heterosexual parents of school-age children, with few differences uncovered as a function of parents' gender and sexual identities. First, parents were well-adjusted overall in terms of mental health and in reporting generally high levels of parenting competence. Parents also reported relatively low adoption stigma and children described high-quality parent–child relationships on average. LG parents also described few homonegative microaggressions overall. Aligned with general predictors from both family stress (i.e., pileup effects) and minority stress theories (Patterson, 1988; Meyer, 2003), however, we did uncover several significant associations between stigma experiences and family dynamics.

While LG parents in this sample did not appear to face greater mental health challenges than did heterosexual parents, current homonegative microaggression experiences were significantly connected with children's perceptions of lower parent–child relationship quality. From a strengths-based perspective, greater parenting competence was linked with better parent–child relationship quality for all in the sample (on average), and LG parents described themselves as particularly competent in their parenting roles. In this way, our findings did not suggest any additional vulnerabilities for LG adoptive parents as compared to heterosexual adoptive parents in terms of mental health, parenting competence, or parent–child relationships, as might have been expected from family and minority stress theories; rather, our study pointed to possibly unique dynamics of resilience among these families. Our study may be the first to reveal parenting competence as a distinct strength among LG adoptive parents, aligned with family resilience theories among same-gender parent families (Prendergast and MacPhee, 2018), especially in sharing associations with children's perceptions of closeness with their parents and despite experiences of stigma.

Our first hypothesis regarding differences as a function of parental sexual orientation and gender was generally supported. There were no significant differences in this regard in parent-reported mental health symptoms at either time point (W1, W2), supporting earlier research with LG parents (Calzo et al., 2019), LG adoptive parents specifically (Goldberg and Smith, 2011; Calzo et al., 2019; Goldberg et al., 2019), and across two time points (Lavner et al., 2014). Although there were no differences by parents' sexual and gender identities in mental health symptoms at W1 and W2, all parents described fewer average symptoms

TABLE 6 | Hierarchical linear modeling (HLM): inventory of parent and peer attachment from wave 2 (W2) variables in lesbian and gay (LG) parent families.

Variable	Coefficient	SE	t	df	p
Intercept β_0					
Intercept γ_{00}	4.41	0.06	71.19	46	<0.001
Competence β_1					
Intercept γ_{10}	0.17	0.14	1.20	30	0.238
Mental health β_2					
Intercept γ_{20}	0.13	0.19	0.68	30	0.499
Adoption stigma β_3					
Intercept γ_{30}	0.05	0.06	0.84	30	0.410
Current homonegative microaggressions β_4					
Intercept γ_{40}	−0.68	0.31	−2.21	30	0.035
Past homonegative microaggressions β_5					
Intercept γ_{50}	0.32	0.19	1.71	30	0.097
Impact of homonegative microaggressions β_6					
Intercept γ_{60}	0.07	0.19	0.38	30	0.707
Past*impact homonegative microaggressions β_7					
Intercept γ_{70}	−0.11	0.07	−1.54	30	0.133
Current*impact homonegative microaggressions β_8					
Intercept γ_{80}	0.16	0.08	1.97	30	0.058
Random effect	SD	Variance	df	χ^2	p
Intercept, u_0	0.35	0.13	46	191.36	<0.001
level-1, r	0.27	0.07			

when their children were in middle childhood as compared to 5 years earlier during early childhood. This may reflect the particularly demanding responsibilities of parenting young children (Goldberg and Smith, 2009, 2011; Lavner et al., 2014), especially considering that for many families in this sample, the target children represented the parents' first child. There were no differences as a function of parent sexual and gender identity in reports of perceived adoption stigma, consistent with Goldberg et al.'s (2011) study of LG and heterosexual adoptive parents. Finally, there were also no differences between LG parents in their reports of homonegative microaggression experiences, which is aligned with earlier work, at least among LG individuals without children (Wright and Wegner, 2012). It is important, however, to consider that gay fathers may experience additional stigma related to the intersection of their gender and sexual identity during the transition to parenthood when compared to lesbian mothers given the cultural importance placed on motherhood and general devaluation of fatherhood (e.g., McCutcheon and Morrison, 2015; Tornello and Patterson, 2015; Carneiro et al., 2017). Future research is warranted to further explore the intersections of gender and sexual identity-related stigma and parenting.

Children also did not differ as a function of family type (lesbian, gay, or heterosexual parents) in their reports of parent-child relationship quality when they were in middle childhood (W2); children generally described high-quality relationships with their adoptive parents. Our finding aligns with the broader literature on child outcomes, parenting, and family relationships among LG parent families indicating healthy and close parent-child relationships with no differences as compared to heterosexual parent families, further underscoring the greater significance of family processes over family structure to individual and family adjustment (Erich et al., 2009b; Golombok et al., 2014, 2018; Carone et al., 2018; McConnachie et al., 2019). Previous studies, however, have generally assessed parent-child relationships from parents' perspectives or via video-recorded observations of parent-child interaction (with the exception of McConnachie et al.'s interview-based study with children in middle childhood—average age of 11 years). Erich et al. (2009a,b) did use the same assessment tool among a sample of adolescent children adopted by lesbian, gay, and heterosexual parents. To our knowledge, however, ours is the first study to include a quantitative, self-reported assessment of the perspectives of adopted preadolescent children with LG parents about their parent-child relationships. As such, these findings represent contributions to literatures about both sexual minority and adoptive parent families.

The only significant group difference uncovered in variables of interest was with regard to parenting competence, as expected. Heterosexual fathers rated themselves as significantly less competent than the three other groups of parents (lesbian mothers, gay fathers, and heterosexual mothers) at both time points (i.e., when their children were in early and middle childhood, respectively). The broader family literature, which has largely examined the parenting experiences of heterosexual adults and sometimes as adoptive parents, has also demonstrated differences (that often reflect differential caregiving experiences) between mothers and fathers in perceived competence (e.g.,

Freeark et al., 2005; Lamb, 2012). In addition, in our sample, there were no significant differences in parenting competence when children were in early or middle childhood; all parents on average felt relatively competent at both time points. The generally high levels of competence may reflect that our sample is comprised of adoptive parents who undergo a rigorous screening process to evaluate their potential to be effective parents (Pinderhughes and Brodzinsky, 2019).

Related to parenting competence and sexual orientation, some earlier research comparing lesbian and heterosexual (non-adoptive) mothers has similarly demonstrated relatively high levels of parenting competence with no differences based on mothers' sexual identities (Bos et al., 2004b). Despite previous work indicating that gay men may hold lower levels of perceived parenting efficacy because of contextual factors such as homonegative microaggressions and the stigma related to fatherhood broadly (Armesto, 2002; Robinson and Brewster, 2014), the gay fathers in our sample did not report significantly lower levels of perceived parenting competence than any other group. These results are also somewhat aligned with Goldberg and Smith's (2009) findings regarding parenting competence among LG and heterosexual parents. Although they did find some initial differences with lesbian and heterosexual women reporting greater competence than gay and heterosexual men prior to the adoptive placement of their child, by 3 months post-placement, gay fathers in particular were characterized by the greatest increases in perceived competence as compared to the other parent groups. Taken together, how our results support and differ from prior research (e.g., Armesto, 2002; Goldberg and Smith, 2009) underscore the importance of examining how intersecting identities (e.g., gender, sexual orientation) relate to aspects of family functioning, such as perceived parenting competence. Moreover, our results demonstrate that family functioning can reflect both structure and processes. In these ways, our findings support and extend earlier research about parenting competence among a more diverse sample of both adoptive and sexual minority parents.

Our second hypothesis that earlier mental health symptoms and parenting competence would be associated with later adoption stigma, homonegative microaggressions, and parent-child relationship quality was not supported. Although it is not entirely clear why there was a lack of significant associations among these variables over time, one possibility reflects that the overall levels of mental health symptoms as well as stigma and microaggression experiences were low in this sample. Overall positive adjustment and low levels of stigma and microaggression experiences could also reflect the characteristics of this particular adoptive family sample as being well-resourced in terms of social and practical support, on average (Pinderhughes and Brodzinsky, 2019). Additionally, most of the adoptive parents in this sample lived in urban areas and therefore may have greater access to LG-affirming services (Kinkler and Goldberg, 2011; Goldberg et al., 2013), which may explain why no significant differences emerged in stigma or homonegative microaggressions by coast (East versus West) or urbanicity (rural versus urban). Another possibility is that it is not necessarily the stigma or microaggressions *per se* that relate to individual health and parenting outcomes, but rather the internalization of stigma

and the appraisal of microaggression experiences that may have greater impact, as supported by previous research among LG adults, including those who are parents (Goldberg and Smith, 2011; Tornello et al., 2011; Trub et al., 2017). Indeed, the roles of appraisal and internalization of stigma have been posited as among key mechanisms for how minority stress may negatively affect individual adjustment as well as interpersonal relationships (Hatzenbuehler, 2009; Prendergast and MacPhee, 2018), and experiences of stigma represent one external context that could contribute to family stress that spills over into parenting roles and family relationships (Boss et al., 2016). Interestingly, however, greater mental health symptoms were associated with lower perceived parenting competence at both waves, which is consistent with earlier research with adoptive lesbian, gay, and heterosexual parent families (Goldberg and Smith, 2009) and points to underlying connections between individual adjustment and parenting experiences that could have important ramifications for children's development.

Our third hypothesis related to concurrent associations during middle childhood (W2) among all variables of interest was partially supported by our results. We uncovered positive associations between perceived parenting competence and parent-child relationship quality, assessed at the same time point (W2). This finding is supported by earlier research among heterosexual parent families with biologically related children indicating that parents' perceived skills have important implications for children's development (e.g., Martínez-González and Iglesias-García, 2018) and extends it to the first time among an adoptive family sample that includes parents diverse in sexual identity. Parent mental health symptoms and adoption stigma were not significant in statistically predicting parent-child relationship quality assessed at the same time point. This is aligned with our results above and again may reflect the generally low levels of mental health symptoms and adoption stigma among parents in this sample. It could also be that parents are effective in buffering their relationships with their children from their own individual experiences of difficulty or challenge (e.g., Golombok et al., 2018; Green et al., 2019), reflecting family resilience among minority (i.e., adoptive and LG parent) families (Prendergast and MacPhee, 2018); future research could explore these possibilities further.

There was one significant finding related to connections between parents' homonegative microaggression experiences and children's perceptions of parent-child relationship quality, both of which were assessed when children were in middle childhood. Among children with LG parents specifically, when parents reported greater current (i.e., within last 6 months) homonegative microaggressions, children described lower quality parent-child relationships. This result emerged even in the context of simultaneous consideration of parent mental health symptoms, parenting competence, and adoption stigma, none of which emerged as significant statistical predictors of parent-child relationship quality at the same time point. This finding is aligned with predictions from family and minority stress theories (McCubbin and Patterson, 1983; Meyer, 2003), indicating connections between sexual minority parents' experiences of stigma and possible ramifications for the parent-child relationship (Prendergast and MacPhee, 2018). It is possible

that LG parents who are experiencing current homonegative microaggressions are also experiencing greater stress and emotional dysregulation as a result, which could interfere with the quality of parents' relationships with their children; indeed, Hatzenbuehler (2009) describes how interpersonal relationships are one domain in which minority stress may have negative consequences through the effects of resulting psychological distress, cognitive load, and physiological stress. Our finding is also aligned with some related research among children and their LG parents (Bos and Gartrell, 2010; Vyncke et al., 2014; Crouch et al., 2017; Carone et al., 2018; Golombok et al., 2018; Calzo et al., 2019) but extends this work in its theoretical and empirical applications to a sample of adoptive sexual minority parent families and their preadolescent children.

Limitations, Future Research Directions, and Practice and Policy Implications

Although several strengths of our study include the use of data assessed at two time points as well as multiple informants (i.e., parents and children), it was the case that not all measures were administered at both time points. This limited our ability to assess direction of effects over time. Research incorporating rigorous mixed method longitudinal designs would be advantageous. It is also unclear how well our results would generalize to other samples of adoptive and/or sexual minority parent families. For instance, despite their relevance in previous studies of outcomes among LG and adoptive families, numerous demographic characteristics (i.e., presence of siblings, socioeconomic status, child age) were not found to share statistically significant associations with our variables of interest in this study. This lack of association could reflect the general homogeneity in these demographic variables among this particular sample. Future research is needed to understand more about under what circumstances these variables do serve as important covariates.

Stigma related to sexual orientation and adoption may also operate differently depending on the cultural and sociopolitical context and geographic region in which it occurs (Farr et al., *in press*), clearly connected with the importance of considering broader external contexts that could contribute to family stress (Boss et al., 2016). For example, LG parent adoptive families living in areas or countries with generally favorable attitudes and policies related to same-gender couples may be provided some protection from the negative effects of stigma—whereas those living in areas characterized by less LG-affirming attitudes or outright discriminatory policies may exacerbate such effects (Kinkler and Goldberg, 2011; Patterson et al., 2013). While our sample is largely representative of other adoptive family samples who pursue private, domestic infant adoption in the US (Pinderhughes and Brodzinsky, 2019), future research would benefit from larger and more diverse samples in terms of geographic location, country of residence, race/ethnicity, socioeconomic status, and pathway to parenthood, among other factors (Fish and Russell, 2018).

Taken together, our findings indicate the value of examining unique contributions of LG-specific processes, such as the role of discrimination and sexual stigma (in this case, parents' homonegative microaggression experiences) to family outcomes

(in this case, quality of parent–child relationships reported by children). Future research would benefit from the incorporation of strong theoretical frameworks, such as combining attention to theories such as family and minority stress, as well as considering a strengths-based approach to processes and outcomes related to resilience among LG parent families (Meyer, 2015; Prendergast and MacPhee, 2018).

These results may be informative to both practices and policies that are supportive of LG parent families in mitigating discrimination and, in turn, supporting individual adjustment of parents and their children. Research has indicated that structural stigma (i.e., governmental, institutional, religious, or other social policies, practices, or laws, as well as cultural and societal norms, community or neighborhood-level attitudes, hate crime rates, etc.) toward sexual minority adults is associated with negative mental health outcomes among sexual minority individuals (Hatzenbuehler, 2014; Herek, 2016), including parents and specifically adoptive parents (Battle and Ashley, 2008; Goldberg and Smith, 2011; Reczek, 2020). With specific regard to clinical, health, and educational practices, our results point to the importance of support from practitioners in cultivating parenting competence among parents in adoptive and sexual minority parent families, especially as parents' perceptions of their own competence were linked to their children's perceptions of parent–child relationship quality. Furthermore, our findings underscore the importance of reducing the occurrence and impact of homonegative microaggressions, especially as these were also found to be related to children's perceptions of closeness with their parents. Practitioners who work with LG parent families could support individual members in learning skills to navigate experiences of stigma in efforts to minimize any harmful effects.

With specific regard to policy implications, there are currently 11 US states with “religious freedom” or “religious exemption” laws that create barriers to fostering and adoption for lesbian, gay, bisexual, transgender, and queer (LGBTQ) prospective or current parents (as well as for LGBTQ children and youth in the foster care system awaiting placement; Movement Advancement Project, 2020). As of November 2019, there is also a proposed rule that would extend these obstacles at the federal level via the US Department of Health and Human Services (Taylor, 2019). Clearly, empirical evidence supports the ability of LG parents to provide loving and effective care to adoptive and foster children (Lavner et al., 2012; Farr, 2017; Patterson, 2017), directly contrasting with existing anti-LGBTQ legislation related to parenting. Our results provide further support regarding the health and well-being of LG adoptive parents and their children, despite facing adversity in the forms of homonegative stigma and discrimination. Rather, our results point to the importance of policies and practices that support LG parent families in managing experiences of discrimination and promoting individual adjustment.

CONCLUSION

Consistent with our conceptual framework, our results—derived from both parent and child reports—demonstrate that although

adoptive and LG parent families experience stigma, family processes (rather than structure) are most associated with individual outcomes. As recommended by other scholars (e.g., Lo et al., 2019), researchers, policy makers, and practitioners should work together to employ identity-affirming practices to reduce stigma and support adoptive and sexual minority parent family functioning and well-being.

DATA AVAILABILITY STATEMENT

The datasets generated for this study will not be made publicly available for confidentiality reasons to protect participants. Requests to access the datasets should be directed to the corresponding author.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Institutional Reviews Boards of the University of Virginia, the University of Massachusetts Amherst, and the University of Kentucky. Written informed consent to participate in this study was provided by the participants' legal guardian/next of kin.

AUTHOR CONTRIBUTIONS

RF and CV both made substantial contributions to the conception and design of this work, organized the dataset, contributed to the data analyses and interpretation of results, and read and approved this submitted version. RF collected the data. RF and CV each wrote sections of the manuscript.

FUNDING

This research was supported by funding from the American Psychological Foundation's Wayne F. Placek Grant awarded to RF (Wave 2) and the Williams Institute at UCLA to Dr. Charlotte J. Patterson (Wave 1). RF was also supported (Wave 2) by funds from the Rudd Family Foundation Chair in Psychology at the University of Massachusetts Amherst.

ACKNOWLEDGMENTS

We offer our thanks to all the adoptive families who generously shared their experiences and made this research possible.

SUPPLEMENTARY MATERIAL

The Supplementary Material for this article can be found online at: <https://www.frontiersin.org/articles/10.3389/fpsyg.2020.00445/full#supplementary-material>

REFERENCES

- Acock, A. C. (2005). Working with missing values. *J. Marriage Fam.* 67, 1012–1028. doi: 10.1111/j.1741-3737.2005.00191.x
- American Psychological Association [APA] (2015). *Amicus brief in Obergefell v. Hodges*. Washington, DC: American Psychological Association.
- Armesto, J. C. (2002). Developmental and contextual factors that influence gay fathers' parental competence: a review of the literature. *Psychol. Men Masc.* 3, 67–78. doi: 10.1037/1524-9220.3.2.67
- Armsden, G. C., and Greenberg, M. T. (1987). The Inventory of Parent and Peer Attachment: individual differences and their relationship to psychological well-being in adolescence. *J. Youth Adolesc.* 16, 427–454. doi: 10.1007/BF02202939
- Baden, A. L. (2016). "Do you know your real parents?" and other adoption microaggressions. *Adopt. Q.* 19, 1–25. doi: 10.1080/10926755.2015.1026012
- Baker, K. K. (2008). Bionormativity and the construction of parenthood. *Georgia Law Rev.* 42, 649–716.
- Barth, R. P., and Brooks, D. (1997). A longitudinal study of family structure and size and adoption outcomes. *Adopt. Q.* 1, 29–56. doi: 10.1300/j145v01n01_03
- Battle, J., and Ashley, C. (2008). Intersectionality, heteronormativity, and Black lesbian, gay, bisexual, and transgender (LGBT) families. *Black Women Gend. Fam.* 2, 1–24.
- Bausch, R. S. (2006). Predicting willingness to adopt a child: a consideration of demographic and attitudinal factors. *Sociol. Perspect.* 49, 47–65. doi: 10.1525/sop.2006.49.1.47
- Bos, H., and Gartrell, N. (2010). Adolescents of the USA national longitudinal lesbian family study: Can family characteristics counteract the negative effects of stigmatization? *Fam. Process* 49, 559–572. doi: 10.1111/j.1545-5300.2010.01340.x
- Bos, H. M. W., Knox, J. R., van Rijn-van Gelderen, L., and Gartrell, N. K. (2016). Same-sex and different-sex parent households and child health outcomes: findings from the National Survey of Children's Health. *J. Dev. Behav. Pediatr.* 37, 179–187. doi: 10.1097/DBP.0000000000000288
- Bos, H. M. W., van Balen, F., and van den Boom, D. C. (2004a). Experience of parenthood, couple relationship, social support, and child-rearing goals in planned lesbian mother families. *J. Child Psychol. Psychiatry* 45, 755–764. doi: 10.1111/j.1469-7610.2004.00269.x
- Bos, H. M. W., van Balen, F., and van den Boom, D. C. (2004b). Minority stress, experience of parenthood and child adjustment in lesbian families. *J. Reprod. Infant Psychol.* 22, 291–304. doi: 10.1080/02646830412331298350
- Boss, P., Bryant, C. M., and Mancini, J. A. (2016). *Family Stress Management: A Contextual Approach*, 3rd Edn. Thousand Oaks, CA: SAGE.
- Brodzinsky, D. M. (2011). Children's understanding of adoption: developmental and clinical implications. *Prof. Psychol. Res. Pract.* 42, 200–207. doi: 10.1037/a0022415
- Brodzinsky, D. M., and Goldberg, A. E. (2016). Contact with birth family in adoptive families headed by lesbian, gay male, and heterosexual parents. *Child. Youth Serv. Rev.* 62, 9–17. doi: 10.1016/j.chldyouth.2016.01.014
- Calzo, J. P., Mays, V. M., Björkenstam, C., Björkenstam, E., Kosidou, K., and Cochran, S. D. (2019). Parental sexual orientation and children's psychological well-being: 2013–2015 National Health Interview Survey. *Child Dev.* 90, 1097–1108. doi: 10.1111/cdev.12989
- Carneiro, F. A., Tasker, F., Salinas-Quiroz, F., Leal, I., and Costa, P. A. (2017). Are the fathers alright? A systematic and critical review of studies on gay and bisexual fatherhood. *Front. Psychol.* 8:1636. doi: 10.3389/fpsyg.2017.01636
- Carone, N., Baiocco, R., Ioverno, S., Chirumbolo, A., and Lingiardi, V. (2017). Same-sex parent families in Italy: validation of the Coparenting Scale-Revised for lesbian mothers and gay fathers. *Eur. J. Dev. Psychol.* 14, 367–379. doi: 10.1080/17405629.2016.1205478
- Carone, N., Lingiardi, V., Chirumbolo, A., and Baiocco, R. (2018). Italian gay father families formed by surrogacy: parenting, stigmatization, and children's psychological adjustment. *Dev. Psychol.* 54, 1904–1916. doi: 10.1037/dev0000571
- Cowan, C. P., and Cowan, P. A. (1990). "Who does what?" in *Handbook of Family Measurement Techniques*, eds J. Touliatos, B. F. Perlmutter, and M. A. Straus, (Beverly Hills, CA: Sage), 447–448.
- Cox, M. J., and Paley, B. (1997). Families as systems. *Annu. Rev. Psychol.* 48, 243–267. doi: 10.1146/annurev.psych.48.1.243
- Crouch, S. R., McNair, R., and Waters, E. (2017). Parent perspectives on child health and wellbeing in same-sex families: heteronormative conflict and resilience building. *J. Child Fam. Stud.* 26, 2202–2214. doi: 10.1007/s10826-017-0796-3
- Crouch, S. R., Waters, E., McNair, R., and Power, J. (2015). The health perspectives of Australian adolescents from same-sex parent families: a mixed methods study. *Child Care Health Dev.* 41, 356–364. doi: 10.1111/cch.12180
- Crouch, S. R., Waters, E., McNair, R., Power, J., and Davis, E. (2014). Parent-reported measures of child health and wellbeing in same-sex parent families: a cross-sectional survey. *BMC Public Health* 14:635. doi: 10.1186/1471-2458-14-635
- Derogatis, L. R., and Melisaratos, N. (1983). The Brief Symptom Inventory: an introductory report. *Psychol. Med.* 13, 595–605. doi: 10.1017/S0033291700048017
- Erich, S., Hall, S. K., Kanenberg, H., and Case, K. (2009a). Early and late stage adolescence: adopted adolescents' attachment to their heterosexual and lesbian/gay parents. *Adopt. Q.* 12, 152–170. doi: 10.1080/10926750903330462
- Erich, S., Kanenberg, H., Case, K., Allen, T., and Bogdanos, T. (2009b). An empirical analysis of factors affecting adolescent attachment in adoptive families with homosexual and straight parents. *Child. Youth Serv. Rev.* 31, 398–404. doi: 10.1016/j.chldyouth.2008.09.004
- Farr, R. H. (2017). Does parental sexual orientation matter? A longitudinal follow-up of adoptive families with school-age children. *Dev. Psychol.* 53, 252–264. doi: 10.1037/dev0000228
- Farr, R. H., Bruun, S. T., and Patterson, C. J. (2019a). Longitudinal associations between coparenting and child adjustment among lesbian, gay, and heterosexual adoptive parent families. *Dev. Psychol.* 55, 2547–2560. doi: 10.1037/dev0000828
- Farr, R. H., Bruun, S. T., and Simon, K. A. (2019b). Family conflict observations and outcomes among adopted school-age children with lesbian, gay, and heterosexual parents. *J. Fam. Psychol.* 33, 965–974. doi: 10.1037/fam0000576
- Farr, R. H., Crain, E. E., Oakley, M. K., Cashen, K. K., and Garber, K. J. (2016a). Microaggressions, feelings of difference, and resilience among adopted children with sexual minority parents. *J. Youth Adolesc.* 45, 85–104. doi: 10.1007/s10964-015-0353-6
- Farr, R. H., Flood, M. E., and Grotevant, H. D. (2016b). The role of siblings in adoption outcomes and experiences from adolescence to emerging adulthood. *J. Fam. Psychol.* 30, 386–396. doi: 10.1037/fam0000173
- Farr, R. H., and Goldberg, A. E. (2018). Sexual orientation, gender identity, and adoption law. *Fam. Court Rev.* 56, 374–383. doi: 10.1111/fcre.12354
- Farr, R. H., and Patterson, C. J. (2009). Transracial adoption by lesbian, gay, and heterosexual parents: Who completes transracial adoptions and with what results? *Adopt. Q.* 12, 187–204. doi: 10.1080/10926750903313328
- Farr, R. H., Vázquez, C. P., and Patterson, C. J. (in press). "LGBTQ adoptive parents and their children," in *LGBTQ-Parent Families: Possibilities for New Research and Implications for Practice*, 2nd Edn, eds A. E. Goldberg, and K. R. Allen, (New York, NY: Springer).
- Faul, F., Erdfelder, E., Lang, A.-G., and Buchner, A. (2007). G*Power 3: a flexible statistical power analysis program for the social, behavioral, and biomedical sciences. *Behav. Res. Methods* 39, 175–191. doi: 10.3758/BF03193146
- Fish, J. N., and Russell, S. T. (2018). Queering methodologies to understand queer families. *Fam. Relat.* 67, 12–25. doi: 10.1111/fare.12297
- Fisher, A. P. (2003). Still "not quite as good as having your own"? Toward a sociology of adoption. *Annu. Rev. Sociol.* 29, 335–361. doi: 10.1146/annurev.soc.29.010202.100209
- Fisher, C. M., Woodford, M. R., Gartner, R. E., Sterzing, P. R., and Victor, B. G. (2019). Advancing research on LGBTQ microaggressions: a psychometric scoping review of measures. *J. Homosex.* 66, 1345–1379. doi: 10.1080/00918369.2018.1539581
- Freeark, K., Rosenberg, E. B., Bornstein, J., Jozefowicz-Simbeni, D., Linkevich, M., and Lohnes, K. (2005). Gender differences and dynamic shaping the adoption life cycle: review of the literature and recommendations. *Am. J. Orthopsychiatry* 75, 86–101. doi: 10.1037/0002-9432.75.1.86
- Frost, D. M., and Meyer, I. H. (2009). Internalized homophobia and relationship quality among lesbians, gay men, and bisexuals. *J. Couns. Psychol.* 56, 97–109. doi: 10.1037/a0012844
- Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity*. Englewood Cliffs, NJ: Prentice-Hall.

- Goldberg, A. E. (2009). "Lesbian, gay, and bisexual family psychology: a systemic, life-cycle perspective," in *Wiley-Blackwell Handbook of Family Psychology*, eds J. H. Bray, and M. Stanton, (Chichester: Wiley-Blackwell), 576–587. doi: 10.1002/9781444310238.ch40
- Goldberg, A. E. (2012). *Gay Dads: Transitions to Adoptive Fatherhood*. New York, NY: NYU Press.
- Goldberg, A. E., Downing, J. B., and Sauck, C. C. (2007). Choices, challenges, and tensions: perspectives of lesbian prospective adoptive parents. *Adopt. Q.* 10, 33–64. doi: 10.1300/J145v10n02_02
- Goldberg, A. E., Kinkler, L. A., and Hines, D. A. (2011). Perception and internalization of adoption stigma among gay, lesbian, and heterosexual adoptive parents. *J. GLBT Fam. Stud.* 7, 132–154. doi: 10.1080/1550428X.2011.537554
- Goldberg, A. E., Moyer, A. M., Weber, E. R., and Shapiro, J. (2013). What changed when the gay adoption ban was lifted: perspectives of lesbian and gay parents in Florida. *Sex. Res. Soc. Policy* 10, 110–124. doi: 10.1007/s13178-013-0120-y
- Goldberg, A. E., and Smith, J. Z. (2009). Perceived parenting skill across the transition to adoptive parenthood among lesbian, gay, and heterosexual couples. *J. Fam. Psychol.* 23, 861–870. doi: 10.1037/a0017009
- Goldberg, A. E., and Smith, J. Z. (2011). Stigma, social context, and mental health: lesbian and gay couples across the transition to adoptive parenthood. *J. Couns. Psychol.* 58, 139–150. doi: 10.1037/a0021684
- Goldberg, A. E., and Smith, J. Z. (2014). Perceptions of stigma and self-reported school engagement in same-sex couples with young children. *Psychol. Sex. Orientat. Gend. Divers.* 1, 202–212. doi: 10.1037/sgd0000052
- Goldberg, A. E., Smith, J. Z., McCormick, N. M., and Overstreet, N. M. (2019). Health behaviors and outcomes of parents in same-sex couples: an exploratory study. *Psychol. Sex. Orientat. Gend. Divers.* 6, 318–335. doi: 10.1037/sgd0000330
- Goldberg, S. K., and Conron, K. J. (2018). *How Many Same-Sex Couples in the U.S. are Raising Children*. Los Angeles, CA: The Williams Institute.
- Golombok, S., Blake, L., Slutsky, J., Raffanelli, E., Roman, G. D., and Ehrhardt, A. (2018). Parenting and the adjustment of children born to gay fathers through surrogacy. *Child Dev.* 89, 1223–1233. doi: 10.1111/cdev.12728
- Golombok, S., Mellish, L., Jennings, S., Casey, P., Tasker, F., and Lamb, M. E. (2014). Adoptive gay father families: parent-child relationships and children's psychological adjustment. *Child Dev.* 85, 456–468. doi: 10.1111/cdev.12155
- Green, R.-J., Rubio, R. J., Rothblum, E. D., Bergman, K., and Katuzny, K. E. (2019). Gay fathers by surrogacy: prejudice, parenting, and well-being of female and male children. *Psychol. Sex. Orientat. Gend. Divers.* 6, 269–283. doi: 10.1037/sgd0000325
- Guo, S. (2005). Analyzing grouped data with hierarchical linear modeling. *Child. Youth Serv. Rev.* 27, 637–652. doi: 10.1016/j.childyouth.2004.11.017
- Hackl, A. M., Boyer, C. R., and Galupo, M. P. (2013). From "gay marriage controversy" (2004) to "endorsement of same-sex marriage" (2012): framing bisexuality in the marriage equality discourse. *Sex. Cult.* 17, 512–524. doi: 10.1007/s12119-012-9159-9
- Feinberg, M. E. (2003). The internal structure and ecological context of coparenting: a framework for research and intervention. *Parent Sci. Pract.* 3, 95–131. doi: 10.1207/S15327922PAR0302_01
- Haines, K. M., Boyer, C. R., Giovanazzi, C., and Galupo, M. P. (2018). "Not a real family": microaggressions directed toward LGBTQ families. *J. Homosex.* 65, 1138–1151. doi: 10.1080/00981369.2017.1406217
- Hammack, P. L., and Cohler, B. J. (2011). Narrative, identity, and the politics of exclusion: social change and the gay and lesbian life course. *Sex. Res. Soc. Policy* 8, 162–182. doi: 10.1007/s13178-011-0060-3
- Hatzenbuehler, M. L. (2009). How does sexual minority stigma "get under the skin"? A psychological mediation framework. *Psychol. Bull.* 135, 707–730. doi: 10.1037/a0016441
- Hatzenbuehler, M. L. (2014). Structural stigma and the health of lesbian, gay, and bisexual populations. *Curr. Dir. Psychol. Sci.* 23, 127–132. doi: 10.1177/0963721414523775
- Herek, G. M. (2009). "Understanding sexual stigma and sexual prejudice in the United States: a conceptual framework," in *Contemporary Perspectives on Lesbian, Gay and Bisexual Identities: The 54th Nebraska Symposium on Motivation*, ed. D. Hope, (New York, NY: Springer), 65–111. doi: 10.1007/978-0-387-09556-1_4
- Herek, G. M. (2010). Sexual orientation differences as deficits: science and stigma in the history of American Psychology. *Perspect. Psychol. Sci.* 5, 693–699. doi: 10.1177/1745691610388770
- Herek, G. M. (2016). A nuanced view of stigma for understanding and addressing sexual and gender minority health disparities [Editorial]. *LGBT Health* 3, 397–399. doi: 10.1089/lgbt.2016.0154
- Herek, G. M., and Garnets, L. D. (2007). Sexual orientation and mental health. *Annu. Rev. Clin. Psychol.* 3, 353–375. doi: 10.1146/annurev.clinpsy.3.022806.091510
- Hill, R. (1949). *Families Under Stress*. Westport, CT: Greenwood.
- Jacobson, C. K., Nielsen, L., and Hardeman, A. (2012). Family trends and transracial adoption in the United States. *Adopt. Q.* 15, 73–87. doi: 10.1080/10926755.2012.681591
- Jeličić, H., Phelps, E., and Lerner, R. M. (2009). Use of missing data methods in longitudinal studies: the persistence of bad practices in developmental psychology. *Dev. Psychol.* 45, 1195–1199. doi: 10.1037/a0015665
- Johnson, D. R., and Young, R. (2011). Toward best practices in analyzing datasets with missing data: comparisons and recommendations. *J. Marriage Fam.* 73, 926–945. doi: 10.1111/j.1741-3737.2011.00861.x
- Johnson, W., McGue, M., and Iacono, W. G. (2007). Socioeconomic status and school grades: placing their association in broader context in a sample of biological and adoptive families. *Intelligence* 35, 526–541. doi: 10.1016/j.intell.2006.09.006
- Kinkler, L. A., and Goldberg, A. E. (2011). Working with what we've got: perceptions of barriers and supports among small-metropolitan-area same-sex adopting couples. *Fam. Relat.* 60, 387–403. doi: 10.1111/j.1741-3729.2011.00654.x
- Lamb, M. E. (2012). Mothers, fathers, families, and circumstances: factors affecting child adjustment. *Appl. Dev. Sci.* 16, 98–111. doi: 10.1080/10888691.2012.667344
- Lavner, J. A., Waterman, J., and Peplau, L. A. (2012). Can gay and lesbian parents promote healthy development in high-risk children adopted from foster care? *Am. J. Orthopsychiatry* 82, 465–472. doi: 10.1111/j.1939-0025.2012.01176.x
- Lavner, J. A., Waterman, J., and Peplau, L. A. (2014). Parent adjustment over time in gay, lesbian, and heterosexual parent families adopting from foster care. *Am. J. Orthopsychiatry* 84, 46–53. doi: 10.1037/h0098853
- Lick, D. J., Patterson, C. J., and Schmidt, K. M. (2013). Recalled social experiences and current psychological adjustment among adults reared by gay and lesbian parents. *J. GLBT Fam. Stud.* 9, 230–253. doi: 10.1080/1550428X.2013.781907
- Lo, A. Y. H., Grotevant, H. D., and McRoy, R. G. (2019). Ethical considerations in adoption research: navigating confidentiality and privacy across the adoption kinship network. *Adopt. Q.* 22, 75–93. doi: 10.1080/10926755.2018.1488328
- Mallon, G. P. (2011). The home study assessment process for gay, lesbian, bisexual, and transgender prospective foster and adoptive families. *J. GLBT Fam. Stud.* 7, 9–29. doi: 10.1080/1550428X.2011.537229
- Malm, K., and Welti, K. (2010). Exploring motivations to adopt. *Adopt. Q.* 13, 185–208. doi: 10.1080/10926755.2010.524872
- March, K. (1995). Perception of adoption as social stigma: motivation for search and reunion. *J. Marriage Fam.* 57, 653–660. doi: 10.2307/353920
- Marr, E. (2017). U.S. transracial adoption trends in the 21st century. *Adopt. Q.* 20, 222–251. doi: 10.1080/10926755.2017.1291458
- Martínez-González, R.-A., and Iglesias-García, M.-T. (2018). Validation of the Parenting Competence Scale for Parents with Young Children (PCS-YC). *Early Child Dev. Care* 188, 1593–1605. doi: 10.1080/03004430.2018.1490897
- McConnachie, A. L., Ayed, N., Jadv, V., Lamb, M., Tasker, F., and Golombok, S. (2019). Father-child attachment in adoptive gay father families. *Attach. Hum. Dev.* doi: 10.1080/14616734.2019.1589067 [Epub ahead of print].
- McCubbin, H. I., and Patterson, J. M. (1983). The family stress process: the double ABCX model of adjustment and adaptation. *Marriage Fam. Rev.* 6, 7–37. doi: 10.1300/J002v06n01_02
- McCutcheon, J., and Morrison, M. A. (2015). The effect of parental gender roles on students' attitudes toward lesbian, gay, and heterosexual adoptive couples. *Adopt. Q.* 18, 138–167. doi: 10.1080/10926755.2014.945702
- McKay, K., Ross, L. E., and Goldberg, A. E. (2010). Adaptation to parenthood during the post-adoption period: a review of the literature. *Adopt. Q.* 13, 125–144. doi: 10.1080/10926755.2010.481040

- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychol. Bull.* 129, 674–697. doi: 10.1037/0033-2909.129.5.674
- Meyer, I. H. (2015). Resilience in the study of minority stress and health of sexual and gender minorities. *Psychol. Sex. Orientat. Gend. Divers.* 2, 209–213. doi: 10.1037/sgd0000132
- Miall, C. E. (1987). The stigma of adoptive parent status: perceptions of community attitudes toward adoption and the experience of informal social sanctioning. *Fam. Relat.* 36, 34–39. doi: 10.2307/584644
- Miall, C. E. (1996). The social construction of adoption: clinical and community perspectives. *Fam. Relat.* 45, 309–317. doi: 10.2307/585503
- Minuchin, P. (1988). "Relationships within the family: a systems perspective on development," in *Relationships within Families: Mutual Influences*, eds R. A. Hinde, and J. Stevenson-Hinde, (New York, NY: Oxford University Press), 7–26.
- Morgan, S. K., and Langrehr, K. J. (2019). Transracially adoptive parents' colorblindness and discrimination recognition: adoption stigma as moderator. *Cultur. Divers. Ethnic Minor. Psychol.* 25, 242–252. doi: 10.1037/cdp0000219
- Movement Advancement Project, (2020). *Religious Exemption Laws: Services*. Available online at: <https://www.lgbtmap.org/equality-maps/religious-exemption-laws> (accessed February 05, 2020)
- Nadal, K. L. (2013). *That's So Gay! Microaggressions and the Lesbian, Gay, Bisexual, and Transgender Community*. Washington, DC: American Psychological Association.
- Nadal, K. L. (2019). A decade of microaggression research and LGBTQ communities: an introduction to the special issue. *J. Homosex.* 66, 1309–1316. doi: 10.1080/00918369.2018.1539582
- Neiss, M., and Rowe, D. C. (2000). Parental education and child's verbal IQ in adoptive and biological families in the National Longitudinal Study of Adolescent Health. *Behav. Genet.* 30, 487–495. doi: 10.1023/A:1010254918997
- Newcomb, M. E., and Mustanski, B. (2010). Internalized homophobia and internalizing mental health problems: a meta-analytic review. *Clin. Psychol. Rev.* 30, 1019–1029. doi: 10.1016/j.cpr.2010.07.003
- Obergefell v. Hodges, 135 S. Ct. 2584 (2015).
- Otis, M. D., Rostosky, S. S., Riggle, E. D., and Hamrin, R. (2006). Stress and relationship quality in same-sex couples. *J. Soc. Pers. Relat.* 23, 81–99. doi: 10.1177/0265407506060179
- Park, N. K., and Wonch Hill, P. (2014). Is adoption an option? The role of importance of motherhood and fertility help-seeking in considering adoption. *J. Fam. Issues* 35, 601–626. doi: 10.1177/0192513X13493277
- Patterson, C. J. (2017). Parental sexual orientation and Child development. *Child Dev. Perspect.* 11, 45–49. doi: 10.1111/cdep.12207
- Patterson, C. J., Farr, R. H., and Hastings, P. D. (2015). "Socialization in the context of family diversity," in *Handbook of Socialization*, 2nd Edn, eds J. E. Grusec, and P. D. Hastings, (New York, NY: Guilford Press), 202–227.
- Patterson, C. J., Hurt, S., and Mason, C. D. (1998). Families of the lesbian baby boom: children's contact with grandparents and other adults. *Am. J. Orthopsychiatry* 68, 390–399. doi: 10.1037/h0080348
- Patterson, C. J., Riskind, R. G., and Tornello, S. L. (2013). "Sexual orientation, marriage and parenthood: a global perspective," in *Contemporary Issues in Family Studies: Global Perspectives on Partnerships, Parenting and support in a Changing World*, eds A. Abela, and J. Walker, (Oxford: Wiley-Blackwell), 189–202. doi: 10.1002/9781118320990.ch13
- Patterson, J. (1988). Families experiencing stress: I. The Family Adjustment and Adaptation Response Model: II. Applying the FAAR Model to health-related issues for intervention and research. *Fam. Syst. Med.* 6, 202–237. doi: 10.1037/h0089739
- Pinderhughes, E. E., and Brodzinsky, D. M. (2019). "Parenting in adoptive families," in *Handbook of Parenting: Children and Parents*, 3rd Edn, Vol. 1, ed. M. H. Bornstein, (New York, NY: Routledge), 322–367. doi: 10.4324/9780429440847-10
- Prendergast, S., and MacPhee, D. (2018). Family resilience amid stigma and discrimination: a conceptual model for families headed by same-sex parents. *Fam. Relat.* 67, 26–40. doi: 10.1111/fare.12296
- Raudenbush, S. W., and Bryk, A. S. (2002). *Hierarchical Linear Models: Applications and Data Analysis Methods*, 2nd Edn. Thousand Oaks, CA: Sage.
- Raudenbush, S. W., Bryk, A. S., Cheong, Y. F., Congdon, R., and du Toit, M. (2011). *HLM7*. Lincolnwood, IL: Scientific Software International, Inc.
- Reczek, C. (2020). Sexual- and gender-minority families: a 2010 to 2020 decade in review. *J. Marriage Fam.* 82, 300–325. doi: 10.1111/jomf.12607
- Robinson, M. A., and Brewster, M. E. (2014). Motivations for fatherhood: examining internalized heterosexism and gender-role conflict with childless gay and bisexual men. *Psychol. Men Masc.* 15, 49–59. doi: 10.1037/a0031142
- Smith, J. Z., Sayer, A. G., and Goldberg, A. (2013). "Multilevel modeling approaches to the study of LGBT-parent families: methods for dyadic data analysis," in *LGBT-Parent Families: Innovations in Research and Implications for Practice*, eds A. E. Goldberg, and K. R. Allen, (New York, NY: Springer), 307–323. doi: 10.1007/978-1-4614-4556-2_20
- Streiner, D. L. (2003). Starting at the beginning: an introduction to coefficient alpha and internal consistency. *J. Pers. Assess.* 80, 99–103. doi: 10.1207/S15327752JPA8001_18
- Sue, D. W., Capodilupo, C. M., Torino, G. C., Bucceri, J. M., Holder, A. M. B., Nadal, K. L., et al. (2007). Racial microaggressions in everyday life: implications for clinical practice. *Am. Psychol.* 62, 271–286. doi: 10.1037/0003-066X.62.4.271
- Tavakol, M., and Dennick, R. (2011). Making sense of Cronbach's alpha. *Int. J. Med. Educ.* 2, 53–55. doi: 10.5116/ijme.4d8f.8d8d
- Taylor, D. B. (2019). *Adoption Groups Could Turn Away L.G.B.T. Families Under Proposed Rule*. *New York Times*. Available online at: <https://www.nytimes.com/2019/11/02/us/trump-hhs-lgbtq-rule.html> (accessed February 05, 2020).
- Tornello, S. L., Farr, R. H., and Patterson, C. J. (2011). Predictors of parenting stress among gay adoptive fathers in the United States. *J. Fam. Psychol.* 25, 591–600. doi: 10.1037/a0024480
- Tornello, S. L., and Patterson, C. J. (2015). Timing of parenthood and experiences of gay fathers: a life course perspective. *J. GLBT Fam. Stud.* 11, 35–56. doi: 10.1080/1550428X.2013.878681
- Trub, L., Quinlan, E., Starks, T. J., and Rosenthal, L. (2017). Discrimination, internalized homonegativity, and attitudes toward children of same-sex parents: Can secure attachment buffer against stigma internalization? *Fam. Process* 56, 701–715. doi: 10.1111/famp.12255
- Vyncke, J. D., Julien, D., Jouvin, E., and Jodoin, E. (2014). Systemic heterosexism and adjustment among adolescents raised by lesbian mothers. *Can. J. Behav. Sci.* 46, 375–386. doi: 10.1037/a0034663
- Wegar, K. (2000). Adoption, family ideology, and social stigma: bias in community attitudes, adoption research, and practice. *Fam. Relat.* 49, 363–370.
- Wegner, R., and Wright, A. J. (2016). A psychometric evaluation of the Homonegative Microaggressions Scale. *J. Gay Lesbian Ment. Health* 20, 299–318. doi: 10.1080/19359705.2016.1177627
- Widaman, K. F. (2006). III. Missing data: What to do with or without them. *Monogr. Soc. Res. Child Dev.* 71, 42–64. doi: 10.1111/j.1540-5834.2006.00404.x
- Wright, A. J., and Wegner, R. T. (2012). Homonegative microaggressions and their impact on LGB individuals: a measure validity study. *J. LGBT Issues Couns.* 6, 34–54. doi: 10.1080/15538605.2012.648578
- Wyman Battalen, A., Farr, R. H., Brodzinsky, D. M., and McRoy, R. G. (2019). Socializing children about family structure: perspectives of lesbian and gay adoptive parents. *J. GLBT Fam. Stud.* 15, 235–255. doi: 10.1080/1550428X.2018.1465875
- Zhang, Y., and Lee, G. R. (2011). Intercountry versus transracial adoption: analysis of adoptive parents' motivations and preferences in adoption. *J. Fam. Issues* 32, 75–98. doi: 10.1177/0192513X10375410

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Farr and Vázquez. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Life Finds a Way: Young Adults With Lesbian Mothers Reflect on Their Childhood Prior to Legal Recognition of Same-Sex Parents in Sweden

Anna Malmquist*, Sandra Andersson and Julia Salomonsson

Department of Behavioural Sciences and Learning, Linköping University, Linköping, Sweden

OPEN ACCESS

Edited by:

Fiona Tasker,
Birkbeck, University of London,
United Kingdom

Reviewed by:

Jorge Gato,
Fundação para a Ciência e
a Tecnologia, Portugal
Marco Salvati,
University of Rome "La Sapienza,"
Italy

*Correspondence:

Anna Malmquist
anna.malmquist@liu.se

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 29 October 2019

Accepted: 20 March 2020

Published: 15 April 2020

Citation:

Malmquist A, Andersson S and
Salomonsson J (2020) Life Finds
a Way: Young Adults With Lesbian
Mothers Reflect on Their Childhood
Prior to Legal Recognition
of Same-Sex Parents in Sweden.
Front. Psychol. 11:690.
doi: 10.3389/fpsyg.2020.00690

The strapline “life finds a way,” from the classic movie Jurassic Park, referred to how the all-female dinosaurs in a theme park had been able to reproduce, despite the laws of nature. Similarly, the participants in the present study described how their lesbian mothers had shown that “life finds a way,” when having children and forming a family, prior to the legal recognition of same-sex parents in Sweden. The study draws on interviews with eight young Swedish adults, aged 17–30 (average age 25). They had been raised by lesbian couples but were born prior to the legal recognition of same-sex parenthood. Prior to a legal change in 2003, a same-sex couple could not share legal parenthood. Further, female couples were excluded from Swedish assisted reproduction programs until 2005. The interviews have been analyzed thematically, and the article presents the results in four themes. The first theme, *circumvent, oppose, or adapt to legal obstacles*, shows the participants’ reflections on how their parents navigated legal obstacles in order to have children and to live together as a family. The second theme, *legal obstacles do not affect everyday life*, depicts a common experience of how a lack of legal recognition seldom mattered to the participants during their childhood. Rather, they explained how their parents had been able to form parenthood and close relations without legal recognition. In contrast, the third theme describes *occasions when legal parenthood matters*. This theme highlights occasions when the lack of legal parenthood was problematic or devastating for the participants, such as when parents divorced, or one parent died. The final theme, *the meaning of legal parents in adulthood*, explores the participants’ reflections on the meaning and impact of legal ties (or lack of legal ties) between themselves as young adults and their parents. The findings are discussed in relation to previous research on children and young adults with same-sex parents.

Keywords: lesbian parents, female same-sex parents, young adults, legal recognition, family law

INTRODUCTION

This article focuses on Swedish young adults whose lesbian mothers made huge efforts to be able to have and raise children, because of legal and social constraints, including lack of access to assisted reproduction. Parallel with changing societal attitudes, reformed legislation and technical advances in assisted reproduction, parenting has become more accessible to those living outside of

heterosexual normativity (Evertsson et al., forthcoming; Golombok, 2015; Reczek, 2020). However, the participants in this study were born before many of these changes came into force. Their parents had to seek paths to parenthood outside public health care and gained no legal recognition of the non-biological mother's parenthood. These families' experiences of and perspectives on parenthood and origin are important to capture in order to understand the constraints that heteronormative attitudes and exclusionary legislation may create. Further, their narratives shed light on how people find ways to form a family and practice parenting despite obstacles. Contemporary Swedish legislation allows same-sex couples to share legal parenthood (Mägi and Zimmerman, 2015). Similar legal recognition has been established in many Western countries but remains uncommon in large parts of the world (ILGA, 2019). For example, same-sex parents in most Eastern European countries today experience similar lack of recognition and may experience problems similar to those described in the present study (Štambuk et al., 2019).

Previous research on lesbian families has had a major focus on the parents' experiences and perspectives (for overviews, see Golombok, 2015; Reczek, 2020). However, the views and perspectives of offspring may not always correspond to those of parents. The present study is concerned with the perspectives of young adults with lesbian mothers and focused on their experiences of and reflections on family legislation in relation to their family of origin. First, we describe how family law on same-sex parenting has changed during the past decades in Sweden. Thereafter we will provide a brief overview of previous research on offspring in lesbian families, followed by an overview of offspring views of parenting and family in general.

Lesbian Families in Swedish Family Law

Female same-sex parenting couples were for a long time unrecognized by Swedish law (Malmquist, 2015; Mägi and Zimmerman, 2015). Marriage and assisted reproduction treatments were exclusively reserved for different-sex couples, and adoption was only allowed for single people and married couples. In 1995 male and female same-sex couples earned the right to register their partnership. The partnership law can be described as a copy-paste of the marriage law – with two major exceptions, namely that registered partners were explicitly excluded from both fertility treatment and adoption. In the high-pitched debate that preceded the law, opponents of the registered partnership law expressed their fears that if gays and lesbians were allowed to 'marry', they would claim rights to parenting too (Malmquist and Zetterqvist Nelson, 2008). Such rights were indeed soon claimed by LGBTQ organizations, and a public investigation was set out in 1999 to investigate the possibility of inclusive legislation on adoption (SOU, 2001:10). Following the recommendations of the investigation, registered partners gained the right to apply for joint adoption and second-parent adoption in 2003. This legal change enabled, for the first time, Swedish same-sex couples to share legal parenthood and guardianship. Joint adoptions have remained uncommon among Swedish same-sex couples (Malmquist and Spånberg Ekholm, 2020), but second-parent adoption was utilized primarily by

lesbian couples who had had children through self-insemination or at fertility clinics abroad (Malmquist, 2015). Two years later, in 2005, female same-sex couples were given access to assisted reproduction treatment through the Swedish health care system, and in 2009 a gender-neutral marriage law replaced the registered partnership law.

The present Swedish law enables most lesbian couples to share legal parenthood of their children. The birth mother is automatically registered as legal parent at birth, while the non-birth mother can be established as legal parent through a signed confirmation or second-parent adoption.

Lesbian couples' pathways to parenthood have changed in parallel with the law. Those who had children in the 1990s and early 2000s most often conceived through self-insemination, as this was one of few options available (Zetterqvist Nelson, 2007; Ryan-Flood, 2009). Unlike lesbian women in many other western countries, Swedish women often chose to involve a man or a male couple as fathers, rather than simply use a donor. Since lesbian couples gained access to second-parent adoption (in 2003) and fertility treatment in public health care (in 2005), the number of children born into lesbian-led families has grown steadily (Evertsson et al., forthcoming). Conceiving at a fertility clinic, and raising children in a two-mother-family without a father, has become by far the most common route to having a child among lesbian couples (Malmquist, 2016). In Swedish law, a child can only have two legal parents, a limitation that leaves remaining legal obstacles for families formed with more than two plausible parents (Malmquist and Spånberg Ekholm, 2020). Thus, the two-mother-family is now legally recognized, while families with more than two social parents are not.

Offspring in Lesbian Families

Research exploring lesbian family forms has its origins in the late 1970s and has expanded steadily thereafter (Golombok, 2015). Early studies in the field commonly engaged with the question of the children's psychological outcome (Golombok et al., 1983, 1997). Offspring outcomes were measured in terms of psychological wellbeing, social skills, gender conformity, etc., and were compared to standardized test norms or those of matched groups of children with heterosexual parents. Early studies often concerned children born within heterosexual marriages, who came to grow up in a lesbian family when their parents divorced and the mother entered a same-sex relationship. Later studies have often focused on children born into a lesbian family, as a result of assisted reproduction (e.g., Bos and Van Balen, 2008; Gartrell et al., 2019). Generally, results from offspring outcome studies show that differences between those raised by same-sex and different-sex parents are few and small (Biblarz and Stacey, 2010).

Some researchers have turned their interest to offspring in lesbian families, not to measure their psychological outcome, but to capture their narratives. Several studies have focused on experiences of openness, disclosure, and stigmatization among young people with lesbian parents (e.g., Epstein et al., 2013; Lick et al., 2013; Kuvalanka et al., 2014; van Rijn-van Gelderen et al., 2015; Cocker et al., 2019). Experiences of stigmatization are not uncommon among children in lesbian

families, and studies delineate how they find strategies to respond to prejudicial or diminishing comments (Epstein et al., 2013; van Rijn-van Gelderen et al., 2015). However, children in lesbian families seem no more exposed to bullying compared to other children (Vanfraussen et al., 2002). Another explored issue has been images of and curiosity about anonymous sperm donors (Goldberg and Allen, 2013; Slutsky et al., 2016; Zadeh et al., 2018). It has been shown that offspring tend to hold far more negative attitudes than their parents toward anonymous gamete donation (Skoog Svanberg et al., 2019). Most studies of offspring in LGBTQ families include adolescents and/or young adults as participants, but some studies have focused on younger children (Tasker and Granville, 2011; Malmquist et al., 2014; Frisk Kockum and Grönback, 2018).

Two previous studies have focused on the situation of lesbian families in Sweden prior to legal recognition, from an offspring perspective (Zetterqvist Nelson, 2001; Nordén, 2018). The earliest study focused on the perspectives of young people who had experienced one of their parents coming out as lesbian or gay post-divorce (Zetterqvist Nelson, 2001). The study focused on the participants' feelings about the parent's un-normative sexuality and indicated predominantly positive attitudes and good parent-child relations within families. The second study focused on young adults who had grown up with LGBT-parents prior to legal recognition (Nordén, 2018). Most of the participants had been conceived within a heterosexual relationship, while some had been born as a result of a planned lesbian and/or gay family. The study focused on the participants' experiences of school and leisure time, showing how heteronormativity gave rise to different kinds of social conflicts in relation to teachers, classmates, and friends, with such conflicts sometimes becoming a major issue for the children and had an impact on their education. None of these previous studies focused directly on how legislation affected the families.

Offspring Views on Parenting and Family

Research on parenting and family has over decades been conducted within a range of disciplines, e.g., anthropology, sociology, and psychology (James, 1999). However, most studies have primarily investigated parenting from a parent's perspective (Dannesboe, 2016). The lack of offspring perspective on family and parenthood has often been motivated by the opinion that children's stories are incomplete and unreliable (Pascal and Bertram, 2009; Dannesboe, 2016). Children have not been seen as actors in parent-child relationships in the same way as parents have thus, parents have been considered more suitable as informants to understand parenting (Bäck-Wiklund and Bergsten, 1997; James, 1999). When the perception of the child's role in the family changed – from a passive figure formed by the parents' care, to an active agent who, together with the parents, creates family life – offspring experiences of parenthood have gained more attention in parental and family research (Bäck-Wiklund and Bergsten, 1997). Similarly, the understanding of the concept of “family” has changed to become more dynamic, which has meant a shift in the focus of family research from “being a family” to “doing family” (Morgan, 2011). All family members, including the children, contribute to the “doing” of

family. In the expanding research on parenting from an offspring perspective, it has been shown that children see themselves as active actors in parenting and family (James, 1999). Children talk about parenting as a reciprocal process in which they are active agents (Rigg and Pryor, 2007; Tinnfält et al., 2015).

How offspring conceptualize family can be expected to change over time, both on a societal level (as discourses on families change) and on an individual level (as cognitive and socioemotional skills develop, and personal experiences change over time). Studies have shown that younger children emphasize cohabitation and shared activities in their definitions of family, whereas teenagers and young adults define family more on the basis of emotional ties (Andersson and Högstedt, 2002; Anyan and Pryor, 2002).

Researchers have also identified how variation in the conceptualization of family is related to an individual's own experiences of family. Those who have experienced a transformation in their family, or grown up in a non-normative family, tend to have a broader definition of what a family is, in that their image of family is somewhat more likely to include family members they do not have genetic ties to, as well as family members they do not share housing with (Anyan and Pryor, 2002; Bergcróna and Krantz, 2014).

The Present Study

In 2018, a public investigation suggested that Swedish family law should introduce a “parental assumption” for the female spouse of a birth parent, equivalent to the paternity assumption valid for male spouses of birth mothers (i.e., that the female spouse of a birth parent would be registered as legal parent and guardian automatically). This suggestion has not yet been legislated. As part of the investigation that foregone the suggestion, AM, a researcher within the field of same-sex parenting, was requested to do an interview study on children, youths and young adults who had grown up with lesbian mothers and/or been conceived through gamete donation. The study aimed to provide knowledge of the offspring's perspective on family formation, genetics, and legal parenthood. A full report of the results from this study was published as an appendix to the public investigation (Malmquist, 2018) and as two master dissertations in psychology (Andersson and Salomonsson, 2018; Frisk Kockum and Grönback, 2018).

The present article explores in more detail a limited part of this collected data, focusing on the adult participants' (i.e., those over 17 years of age) reflections concerning their family of origin in relation to family legislation. The aim of the article is to explore how young adults with lesbian mothers have experienced legal restrictions and obstacles encountered in their family of origin.

MATERIALS AND METHODS

The present article presents findings from interviews with eight young people (aged 17–30 years) who grew up with lesbian mothers. These interviews were conducted as part of a larger data collection in which a total 18 children, adolescents, and young adults participated. All participating offspring in the study were

conceived by gamete donation and/or had grown up with same-sex parents. Two different studies were designed. The first study had a focus on children and adolescents (aged 10–15 years), and the second on adolescents and adults (those above 16 years of age). Both studies were approved by the regional ethics board at Linköping University and were funded by the public investigation that had commissioned them.

Procedure

Participants were recruited through advertising in social media forums aimed at LGBTQ families, children of LGBTQs and people conceived through gamete donation. Those who contacted the researchers were sent an information letter describing the aim of the study and the interview procedure. The letter emphasized that participants would remain anonymous, and that they had the option to withdraw from the study at any time.

A total of 15 young adults contacted the researchers. Three of these young adults decided not to participate after receiving the information letter, and a further two did not participate due to problems scheduling an interview. In total ten participants, aged 17–32, were interviewed. Of the interviewed group two were conceived by donor insemination to heterosexual couples, thus the remaining eight, who had grown up with lesbian mothers, are the focus of the present analysis.

Participants

Five of the eight participants identified as men and three as women. All lived in, or near to, larger cities in Sweden. Four of them were full-time students, one studied part-time and worked part-time, and the other three were employed. Four participants reported high school as their highest finished education and two had finished tertiary studies. One was currently in high school and one had finished high school without completing grades.

The participants were born between 1988 and 2001. Two participants had grown up with two mothers and had no contact with their respective sperm donors. Two participants had been raised by two mothers but had had a close relationship with their sperm donor and described him as their father. One participant had been raised by two fathers and two mothers in two separate households. Three participants were born as a result of a heterosexual relationship but had been raised in a lesbian-led family after parental divorce.

Interviews

The interviews followed a semi-structured interview guide that included questions about three main areas: *parenthood, knowing (or not knowing) one's genetic origins and regulation of legal parenthood*. Tjora (2012) describes semi-structured interviews as a useful method for data collection to capture reflections, opinions, and experiences of specific subjects. The majority of the questions were open-ended to allow the participants to raise potentially rich new issues not previously considered (Tjora, 2012).

The interviews were conducted in places which the participants had requested or approved of following the researchers' suggestions, e.g., libraries. SA and JL conducted

the interviews. Participants were informed that they could take a break or stop the interview at any time. All interviews were audio-recorded and transcribed verbatim. The duration of the interviews varied from 30 min to 1 h and 44 min, with an average duration of 1 h and 2 min. Any identifying information such as personal names, locations, etc., was changed to maintain anonymity.

Analysis

The transcribed data was analyzed thematically. In a thematic analysis, the researchers search for patterns within a qualitative dataset, and describe the themes they identify (Braun and Clarke, 2006). This study is based on a social constructive epistemology (Burr, 2003), as it is assumed that the participants' understandings of family, genetic origin and legal recognition are subjective and contextualized by their social situation and personal experiences, as well as by the broader historical and social context of Swedish lesbian families. Further, the way their narratives are presented must be understood in relation to the context of an interview study.

As a first analytical step, the entire dataset was coded by Andersson and Salomonsson separately. Codes were kept close to the data and then compared across interviews, to find a high level of concurrency between interviews. Then the codes were organized into candidate themes by Andersson and Salomonsson separately. The researchers' candidate themes were similar but not identical. The candidate themes were compared and discussed with Malmquist, until the researcher's agreed on how to present the result. For this article, candidate themes that concerned experiences of legal restrictions and obstacles in the family of origin were selected for further analysis. In the next step, all transcripts were re-read and relevant excerpts for each candidate theme were selected by Malmquist. The candidate themes were revised by the researchers jointly during this phase until the final four themes were established.

The excerpts presented below have been edited somewhat to make them easier to read, i.e., grammar has been corrected and filler-words removed. The convention of using [...] in transcripts where parts of the excerpt have been removed, has also been utilized. When the interviewers are cited, the letter "I" for "Interviewer" has been used. When participants are cited, they are represented by the first letter of their pseudonym.

RESULTS

Four themes reflect how participants described their thoughts and experiences of family legislation in relation to their lesbian-led family of origin: *Circumvent, oppose, or adapt to legal obstacles*, *Legal obstacles do not affect everyday life*, *Occasions when legal parenthood matters*, and *The meaning of legal parents in adulthood*.

Circumvent, Oppose, or Adapt to Legal Obstacles

When describing how their parents were able to have and raise children, most participants acknowledged that during the period

they were conceived, there were obstacles for same-sex couples to become parents. They described how their parents had searched and found a pathway to parenthood and family life, and depicted a process that had involved circumventing, opposing or adapting to the legal obstacles their parents had encountered.

At the time of the participants' conception, female same-sex couples had no right to assisted reproductive treatment in Swedish health care, nor had they the right to adopt. Thus, self-insemination at home and fertility treatment abroad were reported as the main option considered by their parents. For example, Amanda, described the circumstances surrounding her conception and how these affected how her mothers became parents:

Yes, they decided that they wanted kids, and started looking into possibilities, even at that time I think there were possibilities to travel abroad, but [...] that possibility didn't exist for them at least, because they had no money and no training and no jobs and nothing. So they couldn't afford, like, to pay to get a kid. And they would never have, like, been approved for adoption or anything like that, the only way was to ask a friend. (Amanda, 30, two mothers)

According to Amanda, financial factors and legal obstacles had affected her mothers' options for having children. Traveling to a country where assisted reproduction was accessible for female couples (e.g., Denmark) was a possibility for same-sex female couples to conceive children without the risk of a biological father being able to claim legal parenthood (Zetterqvist Nelson, 2007). However, self-insemination with the help of a friend was the only remaining option for couples who couldn't afford such travel. Self-insemination may have been the most preferred option for some couples, but in Amanda's narrative it was depicted as the only option, as adoption and fertility clinics were not accessible. Thus Amanda's mothers had adapted to the legal restrictions and found a path that was feasible.

Another participant, Fredrik, described how his mothers had found strategies to circumvent legal obstacles to have children. Both his mothers had adopted children before they had Fredrik, who was born after self-insemination. Because adoption had been available for single people and different-sex couples, although not for same-sex couples, Fredrik described how his mothers had "divorced and remarried repeatedly, to be able to adopt from other countries."

Besides having to navigate the law to be able to have children, some participants also described how their parents circumvented legislation on legal parenthood. Because Swedish law considers a private sperm donor to be the legal father, some participants described how their parents had concealed the identity of the donor from the sociolegal authorities. Amanda said:

They [the mothers] had prepared a story to tell the family court and, like, what's it called, the Social Insurance Agency. Because they were forced to lie to them, otherwise they wouldn't have been able to live their lives the way they wanted to. [...] there was a paternity inquiry, so she [the birth mother] went to the family court and said she had been on a cruise I think it was, and had gotten pregnant, had no idea who the father was, and then they closed it and so she was sole guardian and parent, father unknown. (Amanda, 30, two mothers)

Like Amanda's mothers, a few participants described how their parents chose to let their child grow up with only one legal parent, rather than reveal the donor and risk him claiming legal fatherhood. This was done to avoid a donor having the right to make legal decisions about the child and can be understood as a strategy to circumvent a legal obstacle. As a same-sex spouse was not able to second-parent adopt until 2003, the non-biological mother could not become a second guardian and thus prevent the donor making parental claim. However, some participants described situations where their non-legal mother had indeed acted as a legal guardian, for example, by signing papers intended for guardians. This can be interpreted as attempting to oppose limitations that arise when a social parent raises a child without being the legal parent.

Legal Obstacles Do Not Affect Everyday Life

As previously described, social and legal parenthood were incongruent during each participant's childhood. Despite this obstacle, most participants claimed that this had not caused any specific problems in their everyday lives. In their experience, their non-legal parents had not been any "less" a parent because of being perceived as having performed all aspects of parenting. Some participants could not think of any situation where legal parenthood had mattered, whereas others described events in which non-legal parents had made decisions that were formally intended for legal guardians. All participants emphasized that the absence of legal ties had not led to weaker emotional or social bonds. Rather, they reported that their non-legal parents, who had been present since birth, had had just as much responsibility and authority as their legal parents. One participant, Nora, depicted legal parent status as irrelevant to her experience of family:

I: So you have actually lived, that is, most of your life with one guardian, right?

N: Yes, I mean, if you check the documents it has always been like that, I've always had one mom and then we've had another person who has been there, but it hasn't been like that in real life, both have been my parents, equally always. (Nora, 24, two mothers)

While Nora acknowledged the formal legal differences between her mothers, she claimed that this difference did not correspond to her experience of their parenting. Rather, she had thought of them as being her parents "equally always." Later on, Nora explained that her parents had each had an equal say in making decisions about her. Nora, and several other participants, experienced their parents as being equal decision makers, highlighting how non-legal parents can in fact exert authority over their child without having the formal rights that legal parenthood entails. It was often presented as a self-evident or taken for granted fact that a social parent had the authority regardless of legal ties.

In contrast, a participant who was born within the context of his birth mother's heterosexual relationship, but who had grown up with his mother and her female partner, did not portray his stepmother as an authority; she was not seen as an actual parent. Rather, this participant claimed that all the

parental decisions made about him were made by his parents of origin. However, when his stepmother later gave birth to a child, the participant considered his brother to be the child of both mothers. Thus, parental authority seems to depend on the social bond, and intended parenthood at birth, rather than actual legal guardianship.

Just as the participants did not experience legal parenthood as making a real distinction between their parents as they experienced this, several also thought that parents never distinguished between siblings based on legal ties. Several participants had siblings they lacked legal ties to and also again pointed out that this had not affected the social bond between them.

In addition, several participants explained that their non-legal parents had for the most part been acknowledged as parents by people outside the family. Further, several participants gave examples of situations where non-legal parents' signatures on documents had been accepted by their school. Non-legal parents also had usually been invited to parent-teacher meetings. Patrik explained:

Everyone has probably been invited, but it has been either Louise or Hanna for now, but I had a meeting this spring when both Harald and Björn were there but not my moms, so it varies. It depends on who can make it. (Patrik, 17, two mothers and two fathers)

Patrik had four social parents and had grown up in two households. He described how practical considerations, rather than legal parenthood, determined who would participate at parent-teacher conferences. Thus, although only the biological parents were legal parents, all four had been invited to the school. The majority of the participants said that schools had been relatively forthcoming in this regard.

According to the participants' accounts, legal obstacles to same-sex couples' parenthood had rarely been noticeable in everyday family life. Non-biological parents were perceived as exerting an all-compassing parental influence despite not being legal parents. Some participants reflected that legal obstacles might have been problematic for their parents, even though these did not affect them as children, at least not in their everyday lives.

Occasions When Legal Parenthood Matters

As shown in the previous theme, most participants explained that legal parenthood had little or no impact on their everyday lives when growing up. However, a few participants shared narratives where the absence of a legal tie between themselves and their non-biological parents had led to serious consequences for them on a specific occasion. These narratives concerned events where the family had been transformed, when the parents had separated or when one parent had died. Amanda described what happened after her parents broke up:

I: Did you notice at all that your biological mom was your guardian but not your other mom?

A: No, I mean, not when I was small, I noticed it later when they... That is, yes, I have to say now, because I noticed it when they moved far away from each other and couldn't have me alternating weeks

as they had in the beginning. Then it became legally difficult to do anything other than split the kids up, which normally isn't done, because legally they only had the right to one kid each, so we have grown up with one mom each, and apart from each other, which is unusual for siblings. (Amanda, 30, two mothers)

Amanda described how her parents had moved far away from each other after their separation. In this situation Amanda and her sister had been separated from each other, and from their respective non-legal parent. The lack of legal ties had meant that her bond to one parent had been neglected, and had led to the situation where she and her sister grew up in separate homes. Amanda reported that her mothers took legal restrictions into account when solving the issue of where the children would live. Her comment "Then it became legally difficult to do anything other," shows how legislation had limited everyday relations between family members.

In addition to separations between the mothers, legal parenthood also had been actualized in conflicts between legal and non-legal parents. Gustav explained:

I know there was an occasion where my moms and my dad had a fight, and he [the father] insisted that at the parent-teacher meeting in school, that Oskar, my dad, and Elna [attend]. Doris was, like, she had to wait outside [...] I think it was hard for her [Doris]... um, it wasn't hard for me, I had two parents there and I mean, meetings were never really important (Gustav, 23, two mothers and a father)

In a conflict between the mothers and the father, Gustav described how the father had used his authority as a legal parent and forbade the non-legal mother's participation at the parent-teacher conference. Gustav acknowledged that the event might have been hard for his non-legal mother, but stressed that it had not mattered to him, rather the issue was downplayed as he claimed that "meetings were never really important." The narrative can be understood as a way for him as child to keep himself outside the parental conflict, by claiming that it did not reflect anything important.

For another participant, Fredrik, inheritance legislation was a reason for him to desire to be formally adopted by his non-legal mother. Fredrik described how his non-legal mother also wanted to ensure that he would be her direct heir:

When I was growing up, Vanessa expressed that, like, she would like to adopt me so that I actually would be a legal – her legal child, so there wouldn't be any problems with inheritances and stuff when she passes away, but with my dad the inheritance has been a protracted matter as well, so there's that. We have put it off, in order to not complicate the legal process. (Fredrik, 20, two mothers and a father)

When Fredrik was born, same-sex partners were not allowed to second-parent adopt. The law changed in 2003, when Fredrik was 5 years old, and he explained that his non-biological mother had wanted to adopt him. However, Fredrik grew up with three social parents: two mothers and a father. Since by Swedish law a person can only have two legal parents, an adoption by the non-biological mother would have erased the legal tie between Fredrik and his father. The death of his father had reopened the question, but as Fredrik explained, there had been a drawn-out inheritance

dispute after his father passed away, and therefore the desired second-parent adoption had not yet occurred.

The situations of parental separations and deaths show how legal parenthood does become relevant in certain instances for people whose social and legal parenting situation does not coincide, despite the more common experience among the participants that legal parenthood had been irrelevant. These narratives further show how lack of legal ties may continue to affect participants into adulthood.

The Meaning of Legal Parents in Adulthood

All participants explained that absence of legal parenthood had not affected their emotional relationship with their non-legal parents in adulthood. Rather than focusing on legal or genetic ties, they emphasized the meaning of social bonds, care and closeness. Fredrik stressed how his adult relationship to his parents was primarily grounded in the social bonds formed during childhood:

Then it's much more important in my opinion that you – that you express the value of you growing up with me, in that way you are my child, and that you show that parenthood and childhood and things, are so much more than just genetics. (Fredrik, 20, two mothers and a father)

Some participants described how they felt closer to one of their parents than the other(s), but this was never attributed to legal ties, but rather to similarities in personal qualities, such as personality or a shared sense of humor. Several participants had not previously reflected on their parents' legal status, and some of them were unaware of the fact that according to Swedish law, a person cannot have more than two legal parents. Thus, they had not realized that all their social parents were actually not their legal parents and had not been their legal guardians. Despite the fact that same-sex couples have had access to second-parent adoption since 2003, only one of the participants, Nora, had been adopted by her non-biological mother. In the quote below she reflected on what the adoption had meant to her:

My reality agrees with, like I don't know, how can I say it in a good way, I mean, I've been... I've always had my reality, it has always been, I have my moms, both are equally my parents. And now it also says so on paper so that, well like we were talking about the inheritance, I also have the right to inherit from my other mom, also things like that. And my brother and I have suddenly become proper siblings too, in that case we weren't siblings either (laughs). (Nora, 24, two mothers)

Nora was adopted at the age of 22 by her non-biological mother. Her experience shows how a congruence between social and legal parenthood can be validating for the young adult. The adoption reflected her reality, both in relation to her non-biological mother and to her brother. Nora had grown up with two mothers and had no contact with the sperm donor. However, more than 10 years had passed since the law allowed her non-biological mother to apply for adoption, before they eventually went through the process.

For some participants, second-parent adoption had not been actualized, because they had three or four social parents, and Swedish law admits only two legal parents (Mägi and Zimmerman, 2015). For a few participants their parents' separation made a second-parent adoption impossible, because Swedish law only allows the spouse or cohabitant of the legal parent to adopt as a second-parent. Thus, the social family situation of these young adults will continue to be at variance with the legal situation. Although they stress the irrelevance of this, or are even unaware of the legal limitations, it must be pointed out that they will not inherit their non-legal parents unless a valid testament is legally filled. Thus, if it has not already, the lack of legal ties will become evident when they lose a parent.

DISCUSSION

The strapline “life finds a way,” from the classic movie Jurassic Park, referred to how the all-female dinosaurs in a theme park had been able to reproduce, despite the laws of nature (Crichton et al., 1993). Likewise, the participants in the present study showed, through their narratives of their own becoming, how “life finds a way.” Of course, their lesbian mothers did not challenge the laws of nature to have children, but they did find pathways to have and raise children despite huge obstacles presented by the laws of society.

Several participants indicated that self-insemination was the only available option for their parents to have children, since assisted reproduction treatment and adoption were not allowed for same-sex couples in Sweden at the time they were conceived (Mägi and Zimmerman, 2015). Moreover, options of going abroad for fertility treatment were limited for many, because of personal financial and practical resources. These findings echo those of previous studies of Swedish lesbian parent families from this time, where self-insemination is described generally as the most common path to parenthood, aside from having children from previous heterosexual relationships (Zetterqvist Nelson, 2007; Ryan-Flood, 2009; Nördén, 2018). Similar findings are also shown in contemporary studies of lesbian families from countries where female couples are still excluded from assisted reproduction treatment (e.g., Štambuk et al., 2019).

Self-insemination was not conducted without risks or obstacles though, as a private sperm donor could be registered as a legal parent, regardless of the wishes of the involved parties (Mägi and Zimmerman, 2015). Some participants stated that their parents had limited this risk by lying in paternity investigations. Others reported instead that their parents had chosen a donor whom they could accept as a legal parent, and some had shared a social parenthood with him as an involved father. Similar strategies have previously been shown common among lesbian parents in Sweden and elsewhere (Park et al., 2016; Côté and Lavoie, 2019). The participants' parents had navigated the legal landscape to find pathways to have and raise children, a process that included circumventing, adapting to, and also opposing legal obstacles.

The narrative of overcoming huge obstacles to have children has also been prominent in previous studies, in which lesbian

parents who had children prior to legal recognition were interviewed (Zetterqvist Nelson, 2007; Ryan-Flood, 2009). The participants of these studies described how they had encountered practical, social, and legal obstacles. They presented themselves as pioneers, and recent Swedish statistics confirm that only a few women in registered partnerships became parents at that time (Evertsson et al., forthcoming). Thus, even though it is true that “life finds a way” sometimes, it is also the case that many other lesbian couples did not have children. With changed legislation, the options open to lesbian couples have increased, and the number of married female same-sex couples who have children has grown rapidly (Evertsson et al., forthcoming).

For the participants in the present study, overcoming legal obstacles was the point of departure in their narratives of how they were conceived. In contrast, when they talked about how they experienced growing up in an un-normative family, their narratives contained only few descriptions of legal obstacles. Social and legal parenthood were not congruent during their childhood, as the participants had at least one social parent who was excluded from legal parenthood during their childhood. However, the participants generally emphasized that the absence of legal ties had not affected their everyday lives. Elsewhere there have been descriptions of how parents in similar situations have drawn up wills and powers of attorney in order to secure their child's right to inherit them, or to be able to make decisions about their child (Zetterqvist Nelson, 2007; Park et al., 2016; Malmquist and Spänberg Ekholm, 2020). One participant in the present study had been second-parent adopted, and additionally one mentioned his social parent's wish to adopt him, but the remaining participants in the present study did not describe any such strategies. However, it is possible that they were not entirely aware of efforts potentially made by their parents to exert their parenthood. Indeed a few participants did mention that some situations might have been hard for their non-legal parent, but claimed that this had not affected them as children. In contrast, studies that focus on parental perspectives, and particularly those that focus on non-legally recognized gay or lesbian parents, generally depict non-legal parents' huge frustration over not being able to achieve legitimate status as parent (Zetterqvist Nelson, 2007; Malmquist, 2015; Malmquist and Spänberg Ekholm, 2020). For the parents, being legally unrecognized may also lead to a feeling of being less of a parent (Bjärenstam and Dahlstedt, 2014; Henrikson and Sarelid, 2014).

It is interesting that the participants did not report inequalities between their parents as a result of differences in legal status. Rather, they emphasized the similarities in their emotional and social relationships with each of their parents. Further, they depicted parental authority as being unaffected by a lack of legal parenthood and guardianship. In contrast, previous studies of lesbian parents show that non-biological/non-legal parents often experience difficulties when negotiating their role both within the close family and in relation to society (Zetterqvist Nelson, 2007; Malmquist, 2015). That participants in the present study seldom reported such experiences could indicate that parents have been able to circumvent or compensate for potential deficiencies associated with the lack of legal parenthood to such

an extent that these limitations were not noticeable to their children. Another potential interpretation is that the young adults were loyal toward their parents and, therefore, diminished any experiences of differences, as they did not want to hurt their non-biological parent(s). In fact several of the participants were uncertain which of their parents was a legal guardian, which further emphasized the limited role legal parenthood played in their experiences of growing up with same-sex parents.

An additional reason why legal parenthood had not been experienced as important is the common experience that people outside the family often did recognize social parenthood, e.g., all social parents had been invited to parent-teacher meetings. This highlights how schools can operate to legitimize social parenthood and normalize a variation of families, which in turn helps to make everyday life easier in these families. The finding contradicts Nordén's (2018) interview study with young adults who grew up with LGBT parents during the same period as the current study. In Nordén's study, problematic school interactions were prominent. These different findings may be a result of different samples or methodology. Nordén conducted in-depth interviews with a major focus on school experience and may therefore have been able to explore deficiencies in school to a larger degree. In contrast, our study had a primary focus on legislation, and contained no specific questions about school situations during childhood.

Despite the general experience that legal parenthood had had little impact, some participants recounted events where absence of legal parenthood had become strikingly apparent, such as in parental separations or deaths. These specific events pinpoint the cruciality of legal parenthood. Without the security of a legal tie, children may lose contact with their social parents, in the case of a conflictual divorce (e.g., Aylward and Alvelin, 2013; Gahan, 2019). One study of planned lesbian families in the United States showed how the likelihood of maintaining a relationship with the non-biological mother increased if the relationship had been legally secured through a second-parent adoption (Gartrell et al., 2011). None of the participants in the present study had lost contact with a parent, but one participant described how her mothers' separation had led to her growing up far away from her non-legal mother and her sibling. This experience echoed the findings of Goldberg and Allen (2013), who found that several young adults whose lesbian mothers had separated had subsequently had only infrequent contact with their non-legal parent.

The death of a non-legal parent can present huge difficulties for offspring who have no right to inherit from that parent, or when siblings realize their different legal positions. Another type of event where legal parenthood had mattered was described by one participant who recounted an experience when his parents were in a conflict situation and their legal parent had been able to limit their non-legal parent's position.

Limitations and Implications

The present article reports results from a small-scale interview study. It is possible that a larger number of participants would have enriched the data and provided a deepened understanding

of the topic. Another limitation of the study is that the adult participants' reflections are most likely influenced by their own experiences in adulthood, thus, we do not know how they actually experienced legal parenthood while growing up.

While Swedish law today recognizes female same-sex parenting couples, this is still not the case in many other countries (ILGA, 2019). The present study sheds light on the social consequences of legally unrecognized parent-child relations, which are important to acknowledge when legal reforms are called for elsewhere. The study also shows how previous lack of legal recognition continues to influence a cohort of people who were born prior to legislative changes, not the least by the time when life ends for their non-legal parents and inheritance is considered.

CONCLUSION

The participants in the present study were born prior to the legal recognition of same-sex parenthood in Sweden. They depicted their own conception as the result of their parents' navigating legal obstacles to find a pathway to parenthood, and indicated that "life had found its way" despite the limiting legislation. Although they had grown up with one or more non-legal parents, the lack of legal ties had, for most, not been experienced as problematic from their point of view as children. Only when the parents had divorced, or when one parent had passed away, had legal parenthood become crucial. Thus, most obstacles that legal limitations may have led to seem to have been handled by the adults without affecting the children. Lack of legal ties can be manageable, as long as good relationships are maintained and parents are still alive, but in the event of these difficult

life events, (absence of) legal parenthood becomes a critical complicating factor.

DATA AVAILABILITY STATEMENT

The datasets generated for this study will not be made publicly available because of confidentiality.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Regionala etikprövningsnämnden, Linköping University. Written informed consent to participate in this study was provided by the participants' legal guardian/next of kin. Requests to access the datasets should be directed to the corresponding author.

AUTHOR CONTRIBUTIONS

SA and JS have jointly constructed the interview guide, collected the data, transcribed the interviews, coded the data, made the initial analysis, and contributed to the writing of the final manuscript. AM planned the study, supervised SA and JS in their work, developed the analysis for the manuscript, and led the writing of the manuscript.

FUNDING

Funding for this work was granted by the Government offices of Sweden.

REFERENCES

- Andersson, K., and Högestedt, S. (2002). *Familj i Barnaögon, Sjätteklassares åsikter om Familj och Familjebildning*. Candidate thesis, Lunds universitet, Socialhögskolan vid Lunds universitet, Lund.
- Andersson, S., and Salomonsson, J. (2018). *Ungas Perspektiv på Föräldraskap och Ursprung: Reflektioner från Unga Vuxna Tillkomna Genom Könscelesdonation och/eller uppvuxna i regnbågsfamiljer*. Masters' thesis, Linköping University, Linköping.
- Anyan, S. E., and Pryor, J. (2002). What is in a family? Adolescent perceptions. *Child. Soc.* 16, 306–317. doi: 10.1002/chi.716
- Aylward, A., and Alvelin, C. (2013). *Förlorande Barn*. Gothenburg: Copula Förlag.
- Bäck-Wiklund, M., and Bergsten, B. (1997). *Det Moderna Föräldraskapet: En Studie av Familj och kön i Förändring*. Stockholm: Natur & kultur.
- Bergcröna, L., and Krantz, M. (2014). *En Familj är två eller en vuxna. Och sen barn: En Tematisk Analys av hur barn till Frivilligt Ensamstående Mammor och Barn till Olikkönade Sammanboende Föräldrar Pratar om Familj*. Masters' thesis, Linköpings universitet, Institutionen för beteendevetenskap och lärande, Linköping.
- Biblarz, T., and Stacey, J. (2010). How does the gender of parents matter? *J. Marriage Fam.* 72, 3–22. doi: 10.1111/j.1741-3737.2009.00678.x
- Bjärenstam, N., and Dahlstedt, E. (2014). *"Att Ansöka om en Adoption till Sitt Eget Barn." - En Kvalitativ Studie om Samkönat Föräldraskap och Närsändeadoption*. Candidates' thesis, Lund university, Lund.
- Bos, H. M., and Van Balen, F. (2008). Children in planned lesbian families: Stigmatisation, psychological adjustment and protective factors. *Cult. Health Sex.* 10, 221–236. doi: 10.1080/13691050701601702
- Braun, V., and Clarke, V. (2006). Using thematic analysis in psychology. *Qual. Res. Psychol.* 3, 77–101. doi: 10.1191/1478088706qp0630a
- Burr, V. (2003). *Social Constructionism*. London: Routledge.
- Cocker, C., Hafford-Letchfield, T., Ryan, P., and Barran, C. (2019). Positioning discourse on homophobia in schools: what have lesbian and gay families got to say? *Qual. Soc. Work* 18, 800–817. doi: 10.1177/1473325018767720
- Côté, I., and Lavoie, K. (2019). A child wanted by two, conceived by several: lesbian-parent families negotiating procreation with a known donor. *J. GLBT Fam. Stud.* 15, 165–185. doi: 10.1080/1550428x.2018.1459216
- Crichton, M., Koepp, D., Kennedy, K., Molen, G. R., and Spielberg, S. (1993). *Jurassic Park [Motion Picture]*. Amblin Entertainment: United States.
- Dannesboe, K. I. (2016). "Ambiguous involvement: children's construction of good parenthood," in *Doing Good Parenthood Ideals and Practices of Parental Involvement*, eds A. Sparrman, A. Westerling, J. Lind, and K. I. Dannesboe (Basingstoke: Palgrave macmillan), 65–75. doi: 10.1007/978-3-319-46774-0_6
- Epstein, R., Idems, B., and Schwartz, A. (2013). Queer spawn on school. *Confero* 1, 173–209.
- Evertsson, M., Jaspers, E., and Moberg, Y. (forthcoming). "Parentalization of same-sex couples: family formation and leave rights in five northern European countries," in *The Palgrave Handbook of Family Policy*, eds R. Nieuwenhuis and W. Van Lancker (Basingstoke: Palgrave Macmillan).

- Frisk Kockum, K., and Grönback, M. (2018). *Kärlek är tjockare än blod* – Regnbågs- och donatorbarn reflekterar kring föräldraskap, biologiskt ursprung. (och) familjejuridik. Masters' thesis, Gothenburg University, Gothenburg.
- Gahan, L. (2019). Separation and post-separation parenting within lesbian and gay co-parenting (guild parented) families. *Aust. New Zealand J. Fam. Ther.* 40, 98–113. doi: 10.1002/anzf.1343
- Gartrell, N., Bos, H., and Koh, A. (2019). Sexual attraction, sexual identity, and same-sex sexual experiences of adult offspring in the U.S. National Longitudinal Lesbian Family Stud. *Arch. Sex. Behav.* 48, 1495–1503. doi: 10.1007/s10508-019-1434-5
- Gartrell, N., Bos, H., Peyser, H., Deck, A., and Rodas, C. (2011). Family characteristics, custody arrangements, and adolescent psychological well-being after lesbian mothers break up. *Fam. Relat.* 60, 572–585. doi: 10.1111/j.1741-3729.2011.00667.x
- Goldberg, A. E., and Allen, K. R. (2013). Donor, dad, or...? Young adults with lesbian parents' experiences with known donors. *Fam. Process* 52, 338–349.
- Golombok, S. (2015). *Modern Families: Parents and Children in New Family Forms*. Cambridge: Cambridge University Press.
- Golombok, S., Spencer, A., and Rutter, M. (1983). Children in lesbian and single-parent households: Psychosexual and psychiatric appraisal. *J. Child Psychol. Psychiatry* 24, 551–572. doi: 10.1111/j.1469-7610.1983.tb00132.x
- Golombok, S., Tasker, F., and Murray, C. (1997). Children raised in fatherless families from infancy: Family relationships and the socioemotional development of children of lesbian and single heterosexual mothers. *J. Child Psychol. Psychiatry Allied Discipl.* 38, 783–791. doi: 10.1111/j.1469-7610.1997.tb01596.x
- Henrikson, M., and Sarelid, C. (2014). *Kanske, eventuellt, får jag vara förälder till mitt eget barn*. Candidates' thesis, Malmö university, Malmö.
- ILGA (2019). *Map: Sexual Orientation Laws in the World*. Geneva: ILGA.
- James, A. (1999). "Parents: A children's perspective," in *What is a Parent: A Socio-Legal Analysis*, eds A. Bainham, S. D. Sclater, and M. Richards (Oxford: Hart), 181–196.
- Kuvalanka, K., Leslie, L., and Radina, R. (2014). Coping with sexual stigma: emerging adults with lesbian parents reflect on the impact of heterosexism and homophobia during their adolescence. *J. Adolesc. Res.* 29, 241–270. doi: 10.1177/0743558413484354
- Lick, D., Patterson, C., and Schmidt, K. (2013). Recalled social experiences and current psychological adjustment among adults reared by gay and lesbian parents. *J. GLBT Fam. Stud.* 9, 230–253. doi: 10.1080/1550428x.2013.781907
- Mägi, E., and Zimmerman, L. (2015). *Stjärnfamiljejuridik: Svensk Familjelagstiftning ur ett Normkritiskt Perspektiv*. Malmö: Gleerups Utbildning.
- Malmquist, A. (2015). *Pride and Prejudice: Lesbian Families in Contemporary Sweden*. Doctoral thesis, Linköping university, Linköping.
- Malmquist, A. (2016). *Lesbiska småbarnsföräldrar: Utmaningar i en tid av möjligheter*. Gothenburg: Makadam.
- Malmquist, A. (2018). "Bilaga 2. Barn och ungas perspektiv på föräldraskap och ursprung: Underlag för utredningen om faderskap och föräldraskap," in *SOU 2018:68 Nya regler om faderskap och föräldraskap*, ed. S. Jungstedt (Stockholm: Nordstedts Juridik), 367–390.
- Malmquist, A., and Spånberg Ekholm, A. (2020). Swedish gay men's pursuit of fatherhood: legal obstacles and strategies for coping with them. *Lambda Nordica* 24, 53–80. doi: 10.34041/ln.v24.580
- Malmquist, A., and Zetterqvist Nelson, K. (2008). Diskursiv diskriminering av regnbågsfamiljer: en analys av argument mot likställande av homo- och heterosexuella föräldraskap. *Socialvetenskaplig Tidskrift* 15, 315–331.
- Malmquist, A., Möllerstrand, A., Wikström, M., and Zetterqvist Nelson, K. (2014). 'A daddy is the same as a mummy': Swedish children in lesbian households talk about fathers and donors. *Childhood* 21, 119–133. doi: 10.1177/0907568213484342
- Morgan, D. (2011). *Rethinking Family Practices*. Basingstoke: Palgrave Macmillan.
- Nordén, P. (2018). *Regnbågsungar: Familj, Utbildning, Fritid*. Doctoral thesis, Gothenburg University, Gothenburg.
- Park, N. K., Kazyak, E., and Slauson-Blevins, K. (2016). How law shapes experiences of parenthood for same-sex couples. *J. GLBT Fam. Stud.* 12, 115–137. doi: 10.1080/1550428x.2015.1011818
- Pascal, C., and Bertram, T. (2009). Listening to young citizens: the struggle to make real a participatory paradigm in research with young children. *Eur. Early Childh. Educ. Res. J.* 17, 249–262. doi: 10.1080/13502930902951486
- Reczek, C. (2020). Sexual- and gender-minority families: a 2010 to 2020 decade in review. *J. Marriage Fam.* 82, 300–325. doi: 10.1111/jomf.12607
- Rigg, A., and Pryor, J. (2007). Children's perceptions of families: what do they really think? *Child. Soc.* 1, 17–30.
- Ryan-Flood, R. (2009). *Lesbian Motherhood: Gender, Families and Sexual Citizenship*. Basingstoke: Palgrave Macmillan.
- Skoog Svanberg, A., Sydsjö, G., and Lampic, C. (2019). Psychosocial aspects of identity-release gamete donation: Perspectives of donors, recipients, and offspring. *Uppsala J. Med. Sci.* (in press).
- Slutsky, J., Jadv, V., Freeman, T., Persaud, S., Steele, M., Steele, H., et al. (2016). Integrating donor conception into identity development: adolescents in fatherless families. *Fertil. Steril.* 106, 202–208. doi: 10.1016/j.fertnstert.2016.02.033
- SOU (2001). *2001:10. Barn i homosexuella familjer. Public report from Swedish ministry of Justice*. Gujarat: SOU.
- Štambuk, M., Tadić Vujčić, M., and Maričić, M. (2019). Pathways to parenthood among LGBTIQ people in Croatia: who wants to become a parent and how? *Revija za sociologiju.* 49, 175–203. doi: 10.5613/rzs.49.2.3
- Tasker, F., and Granville, J. (2011). Children's views of family relationships in lesbian-led families. *J. GLBT Fam. Stud.* 7, 182–199. doi: 10.1080/1550428x.2011.540201
- Tinnfält, A., Jensen, J., and Eriksson, C. (2015). What characterises a good family? Giving voice to adolescents. *Int. J. Adolesc. Youth* 20, 429–441. doi: 10.1080/02673843.2015.1018283
- Tjora, A. (2012). *Från Nyfikenhet till Systematisk Kunskap: Kvalitativ Forskning i Praktiken*. Lund: Studentlitteratur.
- van Rijn-van Gelderen, L., Bos, H. M. W., and Gartrell, N. K. (2015). Dutch adolescents from lesbian-parent families: how do they compare to peers with heterosexual parents and what is the impact of homophobic stigmatization? *J. Adolesc.* 40, 65–73. doi: 10.1016/j.adolescence.2015.01.005
- Vanfraussen, K., Ponjaert-Kristoffersen, I., and Brewaeys, A. (2002). What does it mean for youngsters to grow up in a lesbian family created by means of donor insemination? *J. Reproduct. Infant Psychol.* 20, 237–252. doi: 10.1080/0264683021000033165
- Zadeh, S., Ilioi, E. C., Jadv, V., and Golombok, S. (2018). The perspectives of adolescents conceived using surrogacy, egg or sperm donation. *Hum. Reprod.* 33, 1099–1106. doi: 10.1093/humrep/dey088
- Zetterqvist Nelson, K. (2001). *Döttrar, söner och Homosexuella Föräldrar: En Studie av Homosexualitet sett ur barns och Föräldrars Perspektiv. Appendix 4, in SOU 2001:10. Barn i homosexuella familjer. Public report from Swedish ministry of Justice*. Gujarat: SOU.
- Zetterqvist Nelson, K. (2007). *Mot Alla Odds: Regnbågsföräldrars Berättelser om att Bilda Familj och få barn*. Malmö: Liber.

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Malmquist, Andersson and Salomonsson. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Gender Identity and Future Thinking About Parenthood: A Qualitative Analysis of Focus Group Data With Transgender and Non-binary People in the United Kingdom

Fiona Tasker^{1*} and Jorge Gato²

¹ Department of Psychological Sciences, Birkbeck, University of London, London, United Kingdom, ² Faculty of Psychology and Education Sciences, University of Porto, Porto, Portugal

OPEN ACCESS

Edited by:

Esther Lopez-Zafra,
University of Jaén, Spain

Reviewed by:

Damien W. Riggs,
Flinders University, Australia
David Cohen,
Université Pierre et Marie Curie,
France

*Correspondence:

Fiona Tasker
f.tasker@bbk.ac.uk

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 26 November 2019

Accepted: 07 April 2020

Published: 06 May 2020

Citation:

Tasker F and Gato J (2020)
Gender Identity and Future Thinking
About Parenthood: A Qualitative
Analysis of Focus Group Data With
Transgender and Non-binary People
in the United Kingdom.
Front. Psychol. 11:865.
doi: 10.3389/fpsyg.2020.00865

The idea that people who are transgender or non-binary are not interested in becoming parents has been refuted by several studies. However, both medical unknowns and cisnormativity surround the process of becoming a parent for transgender or non-binary people, with little known about the psychosocial impact on the family formation dilemmas of transgender and non-binary adults. Employing Life Course Theory as our theoretical framework, three focus group interviews were conducted with eleven transgender or non-binary adults. Qualitative data analysis of focus group interview transcripts was conducted through Thematic Analysis. Four overarching interlinked themes were identified concerning the dilemmas perceived by the nine participants who contemplated future parenthood: (i) Balancing a desire for parenthood and desires for other life goals; (ii) Feeling that who I am doesn't fit into the cisgender system of accessing fostering, adoption or fertility services; (iii) Experiencing the conjoined challenges of gender and fertility embodiment as I see them; (iv) Searching for a non-binary or gender appropriate self and the need for flexible future planning centered on reproductive capacity. Overall, thoughts about gender transition were often interwoven with parenthood plans and in a dialectical fashion the desire and intention to have, or not have, children was implicated in satisfaction with gender transition. The significance of these themes is discussed in relation to how hopes for parenthood could be realized without jeopardizing gender identity and the need for a future focused, flexible, and open-minded approach on the part of fertility and adoption services.

Keywords: adoption, assisted reproduction, future parenthood, gender non-conforming, life course theory, thematic analysis, transgender

INTRODUCTION

Gender transition has been frequently considered incompatible with parenthood, for example, sterilization is still often considered as a pre-requisite for gender-affirming treatments in many countries (Gunarsson-Payne and Erbenius, 2018). However, empirical studies have consistently revealed that many transgender and gender diverse individuals are already parents

(Stotzer et al., 2014). Furthermore, post-gender transition parent–child relationships can be positive and child well-being unaffected, especially in the absence of wider family conflict or stigmatization over parental gender transition (see Freedman et al., 2002; White and Ettner, 2007; Hafford-Letchfield et al., 2019; Zadeh et al., 2019). Notably, studies have shown that a considerable number of those engaged in gender transition desire to have children in the future (De Sutter et al., 2002; Wierckx et al., 2012; von Doussa et al., 2015; Riggs et al., 2016; Cipres et al., 2017; Tornello and Bos, 2017; Marinho et al., 2020).

Transgender and gender diverse individuals are those whose gender is different from that normatively expected from their assigned sex at birth (Riggs et al., 2016; Ellis et al., 2020). While transgender individuals usually have a different gender from the sex they were assigned at birth, those who are gender diverse, non-conforming, genderqueer and/or non-binary take on a questioning or performative stance and hold a fluid conceptualization of gender. Thus, the experience of non-binary or other non-cisgender individuals may be crucially different from that of those who are transgender (Factor and Rothblum, 2008) and this distinction may particularly apply to considerations of parenthood (Stotzer et al., 2014). As the participants in our United Kingdom study primarily identified themselves as either transgender or non-binary we use these terms in the present paper when referring to the participants in our sample and use the terms transgender, non-binary, and gender diverse in reviewing the wider research field.

According to Riggs and Bartholomaeus (2018) previous research on reproduction and parenting has overlooked or subsumed the experiences of non-binary people within a focus predominantly on transgender parenthood. In fact, studies suggest that relative to transgender individuals, non-binary people are both less likely to undertake medical treatments to affirm their gender (Clark et al., 2018) and less likely to receive counseling prior to making decisions regarding fertility preservation (Riggs and Bartholomaeus, 2018).

Parenting Plans of Transgender and Gender Diverse People

Two pioneering studies concerning the parenting desires of transgender adults found that about half of transgender men (Wierckx et al., 2012) and transgender women (De Sutter et al., 2002) desired a genetically related child. Furthermore, over one third of transgender men said they would have considered cryopreserving gametes had techniques been available previously (Wierckx et al., 2012). Over three quarters of transgender women thought that sperm freezing should be routinely offered before hormonal treatment (De Sutter et al., 2002). However, only half of the participants in De Sutter et al.'s (2002) study indicated that they would have preserved their own gametes had this been possible. More recent studies also have found that while the large majority of transgender individuals agree that fertility preservation should be offered to all transgender and non-binary people, prior to undergoing gender affirming hormonal treatments very few participants actually store gametes (Auer et al., 2018; Riggs and Bartholomaeus, 2018; Marinho et al., 2020).

In sum, a low level of fertility preservation among transgender persons is puzzling given the high level of expressed desire for parenthood. However, as most surveys were conducted among attendees of gender clinics (e.g., De Sutter et al., 2002; Wierckx et al., 2012), a further in-depth qualitative investigation with a community sample of those without children may cast light upon the prospective parenthood decision making processes of transgender and non-binary people.

Besides parenthood either through sexual intercourse, via fertility preservation, or via donated gametes to a partner or surrogate, transgender and gender diverse individuals also consider other parenting options, such as adoption or fostering (von Doussa et al., 2015; Nahata et al., 2017; Tornello and Bos, 2017; Marinho et al., 2020). Choices of adoption or fostering appear to be associated with an altruistic desire to help children in need (Tornello and Bos, 2017) and were connected with valuing the formation of socioemotional bonds over and above biological relatedness (Marinho et al., 2020). While a clear picture of preference for genetic parenthood or adoption is yet to emerge, studies to date have indicated that preference rates do differ in different groups. For instance, Chen et al. (2018) reported that 70% of their survey sample of over 150 transgender and non-binary young people considered future parenthood via adoption or foster care. Nevertheless, when genetically related parenthood was considered it was preferred by more non-binary than transgender people. In another United States sample Tornello and Bos (2017) found that transgender women more often expressed a preference for adoption (75%) whereas transgender men were more inclined to seek parenthood through sexual intercourse or pregnancy (58%). Preference rates for future parenthood via fostering or adoption were more evenly split among the Australian transgender and non-binary people in the exploratory survey by Riggs et al. (2016). Over half the sample wanted to pursue biological parenthood (mostly through their partner giving birth) while the remainder planned to explore long-term foster care or adoption.

Sociodemographic, Psychosocial, and Structural Factors Associated With Transgender People's Parenthood Decision Making

Prior research has implicated several factors associated with the uptake of fertility preservation and parenthood decision making among transgender and gender diverse individuals including sociodemographic characteristics, psychosocial factors (e.g., personal motivations, family support, narrative resources) and structural barriers (e.g., quality of services and cultural competency of professionals).

Sociodemographic Factors

Regarding gender, Auer et al. (2018) investigated the desire for children and the use of fertility preservation options among German transgender women and men in different stages of gender transition. Prior to undergoing gender affirming treatments, transgender men expressed greater desire for parenthood than did transgender women. However, among those

who had already initiated treatments, the level of expressed interest in having children in the future was higher among transgender women than transgender men. In Auer et al.'s (2018) most of the transgender men questioned indicated that insemination of a female partner with a sperm from an unrelated donor would be an acceptable route to having children, suggesting that this might be another explanation for transgender men's relatively low level of interest in oocyte preservation. Consistent with Auer et al.'s findings, other studies have found that transgender women were more likely to undertake fertility preservation than were transgender men (Jones et al., 2016; Chen et al., 2017). The greater complexity of oocyte retrieval and storage for those who were assigned female at birth may account for the fact that transgender men are less prone to preserve their fertility than transgender women. Yet other authors have emphasized the psychologically distressing nature of giving a semen sample, which makes fertility preservation challenging for transgender women (Riggs and Bartholomaeus, 2020, Online First).

Some research teams have found that the level of expressed desire for children and the use of fertility preservation were both particularly low for young transgender young people, even when fertility counseling and fertility preservation options were available (Chen et al., 2017; Nahata et al., 2017; Nahata et al., 2018; Strang et al., 2018). Two other studies have indicated that transgender individuals' desire to have children may decrease with age (von Doussa et al., 2015; Auer et al., 2018). Reflecting on the difference between the relatively high levels of parenting desire recorded by transgender adults and the low levels of desire (and uptake of fertility preservation) found among transgender youth, Nahata et al. (2017) raised the question as to whether transgender youth might change their perspectives about fertility later in life, particularly after transitioning to their affirmed gender. Strang et al. (2018) also reported that although relatively few transgender youth expressed desire to have their own genetically related child, many speculated or said that they did not know whether their feelings about having a genetically related child could change in the future. Aside from potential discomfort associated with the use of reproductive body parts and gametes that are not embodied in gender identity, Nahata et al. (2017) further speculated that other factors may affect desire for parenthood and contribute to lower rates of fertility preservation utilization among transgender youth, namely, family disruption and rejection and mental health issues (e.g., low self-esteem, depression, self-harm and suicidality).

Psychosocial Factors

The psychosocial factors investigated in prior research have involved exploring transgender and gender diverse people's personal motivations to have children, reporting the extent of social endorsement and support received from within close social networks, and considering how a transgender parent can narratively present themselves to others. Transgender and gender diverse individuals' motivations for parenthood are quite similar to those of cisgender individuals. These include valuing genetic relatedness and seeking to achieve such relatedness to a child by conceiving of them via intercourse or surrogacy or providing

a loving home for a child through adoption (Tornello and Bos, 2017; Marinho et al., 2020). In terms of social support received, support from family of origin has been revealed as an important factor in promoting the well-being of transgender and gender diverse people, including those who are themselves parents (von Doussa et al., 2015; Riggs et al., 2015; Marinho et al., 2020). In fact, in Riggs et al., 2016 study discrimination from family of origin was negatively associated with reports of support for parenting, while support from family of origin was positively associated with the desire of transgender and gender diverse people to have children in the future. Parenting is a highly gender related process within cisheteronormative society and various authors have pointed to the absence of affirmative cultural scripts for transgender parenting (e.g., Haines et al., 2014; von Doussa et al., 2015). Consequently, transgender and gender diverse individuals seeking to become parents have to make sense of and present a coherent psychosocial narrative largely within the mainstream discourses of cisheteronormative societies. In this regard, it was not surprising that participants in von Doussa et al.'s (2015) study tended to shift their narratives between presenting either traditional ideals of heterosexual marriage and parenthood or more radical non-binary approaches to relationships and parenthood.

Structural Factors

Aspects that are usually beyond the personal control of transgender and gender diverse individuals when they negotiate parenthood include: (i) obstacles to biological parenting derived from gender affirming treatments and the invasiveness of fertility preservation procedures, (ii) quality of services and cultural competency of professionals, and (iii) the financial costs involved in Assisted Reproduction Techniques (ART).

Transgender and gender diverse individuals who undertake hormonal or surgical gender transition may face specific obstacles that challenge their reproductive capacity and ability to preserve their fertility. Presently, cryopreservation of sperm offers the most viable fertility preservation option for transgender women (De Sutter, 2009; Snyder and Pearce, 2011 in James-Abra et al., 2015). Options available to transgender men who wish to preserve genetic material include cryopreservation of ovarian tissue or more established techniques involving oocyte or embryo storage (James-Abra et al., 2015). However, past research has revealed that transgender individuals perceive these medical procedures as negatively affecting their well-being as these disrupt their gender identity, as participation in them involves sex and gender associated internal or external anatomy (including pregnancy) and interrupts gender affirming treatments (e.g., testosterone usage) that they would rather not delay (Riggs et al., 2015; von Doussa et al., 2015; Armuand et al., 2017; Chen et al., 2017; Nahata et al., 2017; Tornello and Bos, 2017; Petit et al., 2018; Riggs and Bartholomaeus, 2018; Marinho et al., 2020).

Transgender and gender diverse individuals often have to negotiate parenthood options with diverse social institutions such as health and social service providers (Pyne et al., 2015). According to the guidelines published by the Endocrine Society (Hembree et al., 2017), the World Professional Association for Transgender Health (Coleman et al., 2012), and the American

Society for Reproductive Medicine (Ethics Committee of the American Society for Reproductive Medicine, 2015) health providers should address potential infertility risk and fertility preservation options with transgender adults and transgender youth and their families before starting gender affirming treatments. While an occasional study of transgender people has revealed both positive and negative experiences within health services (Marinho et al., 2020), most research predominantly reported negative ones (James-Abra et al., 2015; Gunarsson-Payne and Erbenius, 2018; Wingo et al., 2018). These negative encounters in the health care context include having to cope with normative assumptions (e.g., regarding use of gender-related terminology) (James-Abra et al., 2015; Gunarsson-Payne and Erbenius, 2018; Marinho et al., 2020), discriminatory comments (Wingo et al., 2018), and being refused service (James-Abra et al., 2015). Lack of lesbian, gay, bisexual, transgender and queer health competency relevant to reproductive health priorities and treatment also has been reported (Riggs and Bartholomaeus, 2018; Wingo et al., 2018; Marinho et al., 2020). Financial costs are a further factor that might hinder transgender and gender diverse individuals parental projects, especially if public funded fertility preservation procedures are not available (Marinho et al., 2020 in Tornello and Bos, 2017; Riggs and Bartholomaeus, 2018).

Life Course Theory (LCT)

According to Stotzer et al. (2014) “A more nuanced approach to studying family formation among transgender people will provide better understanding of how transgender people are becoming parents and what their needs may be” (p. 3). Thus, we employed Life Course Theory (LCT) (Elder, 1998; Benson and Elder, 2011) as the guiding theoretical lens for our qualitative research project to consider the subtle and multi-layered contextual influences on personal ideas and decision making regarding gender identity and future family formation with or without children. Life Course Theory has been successfully employed to focus previous qualitative research projects on transgender parenting; for example, Petit et al. (2018) considered both similarities and differences in Canadian pre- and post-gender transition parents.

Five key principles of LCT were considered in forming our research questions (Elder et al., 2003; Allen and Henderson, 2017). First, in LCT all of human development is considered as a life span process (Elder, 1998). Thus, in our study we would expect to see participant's future thinking about parenthood or remaining childfree reflecting earlier formative or turning point experiences both in childhood and adulthood, notwithstanding that thoughts about parenthood at any one point in time may later change again.

The second LCT concept we considered was cohort: an ever-changing sociohistorical context with regard to both gender transition and decisions about parenthood can be seen to create different social climates for different cohorts of young people making these decisions. The United Kingdom, as elsewhere in the United States, Canada, Australia and Western Europe, has seen a rise in the numbers of young people seeking the help of gender identity services and an increasing differentiation of gender

diversity (Twist and de Graff, 2019). Furthermore, emergent adulthood has postponed both partnership and parenthood (Arnett, 2007) which also have been affected by changing socioeconomic circumstances and the increased uptake of college education and training opportunities beyond high school (Côté and Bynner, 2008). Reproductive choice, the need to build up economic resources to provide for children, and later engagement with an increasing variety of fertility services have increasingly characterized entry into parenthood particularly among college educated adults (Umberson et al., 2010; Roberts et al., 2011). These sociohistorical contextual factors can be seen in the decision making of LGB adults too (Goldberg et al., 2012; Bergstrom-Lynch, 2016). Thus, we considered how sociocultural context (cohort and socioeconomic factors) might impact future thinking around parenthood for transgender and gender diverse people.

The third LCT principle we considered was the timing of societal developments in the United Kingdom – specifically regarding biotechnology developments and policy changes with respect to ART and adoption – which may be of greater or lesser significance to any one individual depending upon their chronological age and overall life course agenda. Petit et al. (2018) have highlighted how difficulties in negotiating compatible services have differentially affected distinct cohorts of pre- and post- transition parents depending upon their individual biographies.

In the United Kingdom, as elsewhere in the United States, Canada, Australia and Western Europe, the landscape of parenthood possibilities for transgender and gender diverse people has been changed by developments in medical knowledge and practice around gender transition and in assisted reproduction (Golombok, 2015; Wylie et al., 2016; Condat et al., 2018; Baram et al., 2019). Condat et al. (2018) draw attention to the ethical aspects involved in biotechnologies that facilitate transgender individuals access to parenthood, both at individual (e.g., effects of hormone suppression) and social (e.g., challenging conservative norms) levels. This way, taking into account ethical principles of beneficence and non-maleficence, autonomy, and justice (Beauchamp and Childress, 2013), these authors consider that while technical advances allow transgender persons to self-actualize as individuals, partners, spouses and parents, research on these issues should nevertheless continue. With regard to accessing ART, research studies with Australian transgender and non-binary people (Bartholomaeus and Riggs, 2020) and healthcare professionals (Riggs and Bartholomaeus, 2020, Online First) have pointed to the role of healthcare professionals, not only in providing information, but also in gatekeeping access to fertility preservation either by pushing a pronatalist fertility preservation agenda or by implicitly or explicitly placing obstacles. In the United Kingdom funding decisions concerning publically funded National Health Service (NHS) provision for fertility preservation procedures are made regionally and at present there are no national guidelines on providing fertility treatments and storage for transgender or non-binary people (Human Fertilisation and Embryology Authority, 2020).

Parenthood possibilities also have expanded through the opening up of both fostering and adoption to same-gender couples (Mallon, 2011; Brown et al., 2015). However, foster care and adoption agencies generally have been slow to recognize the rights of transgender and gender diverse people to be assessed as potential parents, such that transgender people who wish to adopt may experience discrimination in these services (Stotzer et al., 2014; Riggs et al., 2016; Tornello and Bos, 2017). In the United Kingdom legislative change has opened up adoption to lesbian and gay couples but placement rates have remained low (Tasker and Bellamy, 2019) and services have been slow to consider transgender people as potential adoptive parents or foster care providers (Brown et al., 2018; Brown and Rogers, 2020).

The fourth LCT concept that we have considered is the perception of human agency. Life course theory considers that agency or “free will” can operate within the limits of the social and cultural world as this is interpreted and re-interpreted by the individual over time: “within the constraints of their world, people are planful and make choices among options that construct their life course” (Elder, 1994 p. 6). Unlike most cisgender people, transgender and gender diverse people may well become gradually aware of various potential obstacles to gender identity fulfilment and future parenthood early on in life and over their life course actively make plans to navigate around these. We expected that participants in our focus group study would be keen to tap into other transgender and non-binary people’s knowledge about the implications of a childfree lifestyle or about future parenthood options via fertility preservation or adoption.

The fifth LCT concept we considered in relation to future thinking about parenthood concerned the importance of social connections established and maintained with others (i.e., the role of linked lives in experiences) particularly with respect to family of origin and partnership (Wong, 2018). Thus, for our participants we anticipated that both gender transition and parenthood plans may also be impeded or assisted by significant other people in their lives, such as, considerations with respect to family of origin. For example, Riggs and Bartholomaeus (2020, Online First) found that while some parents seemed to support the decisions the young transgender or non-binary person themselves made concerning accessing hormonal and surgical procedures and their choices about fertility preservation, other parents acknowledged either insisting or encouraging their child to do so. Further, perceived obstacles to having or not having children (and the personal choices made regarding these obstacles) are also likely to be influenced by partnership choices and a partner’s potential reproductive capacity (Petit et al., 2018).

Research Aims

In our exploratory study we aimed to sample a range of views and rationales within the transgender and non-binary community as to whether parenthood was desired or whether participants would prefer to remain childfree. If parenthood was considered, we also wanted to examine the routes to parenthood (via ART or via adoption and fostering) that participants desired and thought to be possible. Previously, the careful and sensitive

juxtaposition of different views about parenthood and routes to parenthood within a single study have highlighted common or distinct positions within a sexual or gender minority sample, as seen for example in Bergstrom-Lynch’s wide ranging study of childfree and LGB parents (Bergstrom-Lynch, 2016; Tasker, 2020). Therefore, we judged data collection via focus group interviews within the context of a community group setting to be a useful method for gathering a range of viewpoints from transgender and gender diverse groups. Focus group methodology also had the added benefit of providing direct opportunities for community empowerment via the interchange of knowledge and experience at the point of data collection (Krueger and Casey, 2015; Wilkinson, 1999).

MATERIALS AND METHODS

Participants

A total of 11 participants contributed to the discussion in one or two of the three focus groups organized: seven participants contributed to one focus group and four participants attended two focus groups. None of the participants were living in the gender they had been assigned at birth. Participants described themselves in the following ways on a brief demographic questionnaire: four participants identified as men or as transgender men; one participant identified sometimes as a man and sometimes as non-binary; two participants identified as women or as transgender women; four participants identified as non-binary. Eight participants had undergone hormone therapy at the time of the study and seven participants had received upper (chest) surgery but only two participants had undergone both upper and lower (genital) surgery.

Participants ages ranged between 20 to 45 years old: seven were aged between 20 and 29 years while two were aged between 30 and 39 and two were 40 years plus. All participants were living in the United Kingdom, residing in and around the London area at the time of data collection. All participants except for one identified as white English or Irish. Eight participants reported no disabilities. Three participants reported having a mild level of disability with an effectively managed impact on daily life (these included dyslexia, mild ADHD, and issues related to anxiety). Regarding professional occupations, five were undergraduate students and the remaining worked in the following areas: teaching or academic, care or customer related, external relations or information technology. One participant did not report an occupation. As for annual income level, two participants declined to disclose information, two reported no income, two participants reported incomes of £10,400 up to £15,999, one participant reported £26,000 up to £31,199, three participants reported £31,200 to 36,399 and one participant reported £46,000 up to £51,999.

Procedure

Participants were recruited through Gendered Intelligence a charitable organization based in London in the United Kingdom, which was established as a Community Interest Company in 2008. Gendered Intelligence’s mission aims to increase awareness

and understanding of gender diversity and works with the transgender community with a particular focus on young people's needs. Through the authors' prior discussions with Gendered Intelligence a common interest had been established in the need for more research into the views and experiences of people on the transgender spectrum in relation to future parenthood. Thus, the focus of data collection was on hearing the viewpoints of transgender and non-binary people concerning fertility and parenthood, whether or not parenthood was desired.

Recruitment to the focus groups was mostly done through Gendered Intelligence. Staff at Gendered Intelligence electronically mailed out an advert to their online mailing list inviting transgender and non-binary people to contribute to research-based focus group discussions run by the authors, who were identified by their university affiliations. Initial details mailed out included the dates for the first two groups and the venue. Additional publicity was distributed through the authors' networks and those who received the initial information were asked to distribute publicity materials within their own networks. The number of people who received the introductory distribution was unknown, thus in common with other studies employing convenience sampling techniques we have no method of calculating a response rate or the reasons for non-response (Jager et al., 2017). Recipients could then request further details about the research from either Gendered Intelligence, or by contacting the authors, and were sent an information sheet about the project, the main questions to be addressed in the focus group (as specified below), research consent forms, and brief academic biographies of the authors.

Three inclusion criteria were employed in establishing eligibility for focus group participation: participants had to be 18 years old or more, be transgender or non-binary, and not already have genetically related children or children who lived with them. The main questions tabled for group discussion were as follows and interviewers encouraged participants to expand upon their answers: Have you thought about becoming a parent? Have you thought about different ways of becoming a parent? Have you decided not to become a parent? What are the most important aspects involved in bringing up a child? Is partnership important for parenting? What are society's views on queer or transgender parenting? What would be your family's views on queer or transgender parenting?

For the convenience of participants focus group discussions were held at the central London premises of Gendered Intelligence. The first two focus groups were held in February 2016 (one in the afternoon at the weekend and the other on a week-day evening). Four participants attended the first focus group and seven people participated in the second focus group discussion (including one person who had previously attended the first group and additionally wanted to attend the second). Each of these focus groups lasted approximately 2 h.

At the start of the focus group participants were handed the information sheets about the research, consent forms, and the brief demographic questionnaires that yielded the sample details given above. The authors also verbally briefed those attending the focus group on the information sheets and consent forms at the start of each focus group. The briefing included a discussion of

the ground-rules for the focus group discussion to ensure that participants were respectful and supportive regarding different views or gender positions and that any identifying information shared during the discussion was kept confidential within the focus group (Breen, 2006). Participants also were invited to say as much or as little as they felt comfortable with and reminded that they were able to leave the discussion at any point if they wanted to do so (one of the focus group interviewers was ready to individually debrief a participant if this had occurred). As interviewers we were mindful of the balance between the risks of over-disclosure in a group setting versus facilitating supportive discussion (see Sim and Waterfield, 2019). Participants were told that they should choose a pseudonym with which they should identify themselves at the start of the discussion and give their preferred pronouns. Pseudonyms have been re-assigned in the transcript extracts presented below. For the ease of assigning speakers during the transcription process, we also requested that each participant add in a neutral piece of information, such as a favorite food, color, plant or animal together with a reason why they liked it. Prior to the start of the audio recorded discussion, participants were asked to sign their consent form and to complete a quick questionnaire to give demographic details. Participants also were told that they had the opportunity to review their consent to their data being included in the research at the end of the discussion and were informed that they had a further 2-week period during which they could withhold their individual data from the focus group transcript by contacting the authors. Thus, all participants gave their informed consent and none withdrew from the study either during an interview session or subsequently.

A third focus group was conducted in September 2017, using the same procedure as the initial two focus groups. The purpose of the third focus group was largely to facilitate thematic verification and then further refine the themes with additional information or comments. Participants were shown the researcher derived subthemes and themes from the first two focus groups and invited to discuss them. For the third focus group we specifically invited those who attended the first two focus groups and also welcomed comments from any new participants, who had inquired about the study, met criteria for participation, and wanted to attend. The third focus group was approximately 1.5 h in length. The third focus group began with participants reviewing the list of twelve preliminary themes and subthemes generated from the thematic analysis of the data from the two initial focus groups.

The entire procedure for the study was approved by an Institutional Review Board. All three focus groups were transcribed by a professional transcriber and the transcripts then checked by the first author. In the verbatim transcript extracts that appear below minor edits have been made to preserve confidentiality, condense length, and improve readability.

Thematic Analysis

Qualitative analyses of interview data were conducted using the Thematic Analysis (TA) approach delineated by Braun and Clarke (2006, 2013). The main focus of TA was to identify meaningful patterns within the data not only to summarize

content but also to elucidate the overall meaning that participants sought to convey.

In the first phase of the analysis the first author open-coded data from the initial two focus groups. Specifically, each focus group transcript was read several times by the first author, who then began the process of open-coding the data. Boyatzis explained the qualitative process of open-coding as noting: “the most basic segment, or element, of the raw data or information that can be assessed in a meaningful way regarding the phenomenon” (Boyatzis, 1998, p. 63). These open-codes were then reviewed *in situ* on the transcripts of the initial focus groups by the second author who made modifications and additions in discussion with the first author. The first author then grouped the agreed upon open-codes in terms of their perceived similarity and difference and labeled each grouping, either nominating an existing open code as a sub-theme exemplifying the grouping or by writing a new sub-theme label. The first author then grouped and re-grouped sub-themes together in terms of how these cohered into themes (which conveyed a meaningful interpretation of different facets or aspects of the focus group data). After undertaking a review process involving further iterations of the subthemes, the list of themes and subthemes together with their contributing open codes were shared with the second author and thus reviewed again to derive twelve preliminary themes.

In the second phase of analysis we employed two different approaches and techniques to audit and then further refine the initial set of twelve preliminary themes (Burnard et al., 2008). One technique involved participant or member checking (Morse et al., 2002; Birt et al., 2016). Here, we recognized that the original focus groups could not be re-created at a later point, or possibly even in practical terms reconvened, to establish the veracity of themes. Furthermore, we acknowledged that member-checking has been critically evaluated by some qualitative researchers on epistemological grounds (e.g., Ashworth, 1993). Therefore, we sought to establish the credibility of our qualitative findings in different ways (Yilmaz, 2013). We adapted Birt et al.’s synthesized member checking procedure to our focus group setting keeping in mind the particular ethical constraints of confidentiality in relation to the original focus group generated data (transcript). Thus, participants in the third focus group reviewed and commented upon the twelve themes and associated subthemes generated from the analysis of data from the first and second focus groups. After giving their initial endorsement of the twelve themes, participants in the third focus group then further discussed these themes in relation to their own experiences. After reviewing the transcript from focus group three the authors retained the twelve themes with only minor modifications.

The second technique was deployed to establish the credibility of our qualitative findings via independent audit. In this audit the twelve preliminary themes were used as a focused coding framework (Charmaz, 2006) for a fresh analysis of the original transcript data from the first and second focus groups in a secondary analysis by an undergraduate student research assistant, who had not been involved in research design or data collection. When the same transcript extract was coded under the same theme in both the initial and secondary data

analyses the theme was seen to be independently endorsed. Then the nine themes that had received independent endorsement were used in the focused coding of data generated by the third focus group (again completed by the undergraduate student research assistant). After peer review and discussion between the authors, one theme was split into two and these ten themes were re-grouped together under the four overarching themes detailed below.

RESULTS

Thematic Analysis of interview data generated four overarching themes across all three focus group discussions: Balancing a desire for parenthood and desire for other life goals; feeling that who I am doesn’t fit into the cisgender system of accessing fostering, adoption, or fertility services; experiencing the conjoined challenges of gender and fertility embodiment as I see them; searching for a non-binary or gender appropriate self and the need for flexible future planning centered on reproductive capacity (see **Table 1**).

Balancing a Desire for Parenthood and Desire for Other Life Goals

Of the 11 people attending the focus groups two participants stated that they were committed to remaining childfree, although one of these participants identified as a stepparent to their partner’s adolescent and young adult offspring who did not live in their home. For example, Stephen said that becoming a parent had never really appealed as he humorously commented: “I somehow feel like I kind of missed the class at school, you know, where they go into [it] and they say okay, you know, human beings are attracted to each other and then some of them reproduce!” (FG2 line 419). Stephen also elaborated upon the practical downsides of having young children who would not be able to fit in with his lifestyle. Stephen explained that his decision to remain childfree was not to do with being transgender, but something he probably would have done anyway:

“and to me the practical thought of, you know, when I go home at the end of the evening I’m knackered . . . and the thought of having little people, you know, tugging at my legs, or whatever, and me having to, you know, get up early in the morning. It just is really not attractive. And I was beginning to think is it due to [me] being *trans* or not? And I’ve come to the conclusion it’s probably not, um, that, you know, if I wasn’t I’d probably still. you know, feel the same way.” (Stephen FG2 lines 430–443).

The remaining nine participants were to varying degrees potentially interested in becoming a parent in the near to distant future, but some also seemed somewhat cautious and concerned: “I’ve always kind of wanted to be a parent, er wanted to be to a scary extent. Um, yes, it’s always been kind of you know always been my motivation to do anything” (Mars, FG2, line 485). One aspect of being cautious was seen in concerns participants divulged about having certain prerequisites in place for parenthood, such as being financially prepared, having

suitable living accommodation for a child, or having a career path ahead: “I was like ‘Oh my God, I really want babies! (laughs) So maybe I should do it now?’ But then I realized that, actually I started to think about more important things, like then I hadn’t started my career and stuff, so the emotions died down” (Seth FG2, line 675). Other participants wondered as Ethan did about the enormity of taking on responsibility for a child’s life and whether personally were up to the challenge: “it’s just such a massive decision, and such a life changing decision, and um have I really got it in me to become a parent and become a dad?” (Ethan FG2, line 114).

Participants did not necessarily see partnership as a prerequisite to parenthood, although views on this varied. The participants in Focus Group 1 seemed to agree tacitly with Rain who said: “I think the probably the best way for children to grow up is to have a whole range of people that they are close to [...] You have that whole range of experience and background um and positive influence from people.” (Rain, FG1, line 684). In Focus Group 2 Seth also said: “The idea of having a nuclear family with two parents is no longer – it doesn’t really feel like that’s actually important. We’re just told it is.” (Seth, FG2 line 800). In contrast, Ethan stated that in terms of his own situation: “I’ve always been clear that I don’t want to be a single parent, neither biologically, or through other means” (Ethan FG2, line 1490). For Ethan parenthood was connected to realizing his gender identity (thinking of himself as a dad) and then made possible through partnership and his partner’s desire to become a mum:

“In my mind’s eye I think I’ve always had a fantasy of having a family and seeing myself as a parent, and specifically of being a dad, but it’s been kind of wishful thinking and I never thought I would come close to it becoming a real potential. But since falling in love with a woman, who is very keen to become a mum, [then] I think one reason why I’ve decided to come to this focus group is to try and articulate these thoughts in my mind.” (Ethan, FG2, line 0089).

Having at least some extended family members who endorsed participants’ plans for parenthood was perceived as helpful and supportive, but not necessarily a decisive factor. Seth said:

“[My mum’s] just that kind of person that thinks having babies is so cool! [laughs of appreciation from other FG members]. That was a really positive influence and I kind of always knew that she’d be okay with it. And when I had that little freak out before going on T [testosterone], whether I should do this now or -, she was right there saying if you do want to then that’s fine I will help you, you know, whatever that entails. If I didn’t have a partner she would help with care all that sort of thing, pretty much anything. So yeah kind of practical helping, but also just never questioning, never sort of saying to me well if you feel this way [i.e., wanting to have a baby], you know, does that mean that you’re not really-? You know, those kind of questions that I think a lot of people would think if they didn’t know what it’s like to be trans, I guess. But the rest of my family aren’t necessarily supportive. I haven’t actually told them, or spoken to them, about it.” (Seth, FG2, line 0749).

Feeling That Who I Am Doesn’t Fit Into the Cisgender System of Accessing Fostering, Adoption, or Fertility Services

For focus group participants who identified as non-binary future parenting presented a psychosocial challenge in terms of the social and cultural issues they faced in reaching future parenthood, yet often achieving parenthood was less complicated medically. As Rain explained in the interview quotes below: how would they identify themselves as a parent? If they applied to foster or adopt were there additional legal obstacles that they would face? However, for Rain and their partner, becoming a co-parent could be relatively easily accomplished by following the well-trodden pathway with their female partner’s donor insemination.

“My partner’s biologically female and I’m biologically female, so well (...) I assumed because I identified as gender queer and

TABLE 1 | Overarching themes and contributing themes from thematic analysis of focus group data.

Overarching theme	Contributing themes
Balancing a desire for parenthood and desires for other life goals	<ul style="list-style-type: none"> (a) Is having children a priority worth sacrificing other life goals for? (b) Desire to have children but need to get ready to have children (c) Diverse family forms can support parenthood, but which suits me? (d) Having support from extended family is important for deciding to have children, especially if no partner, but if you do not have it, you just plan and get on with it
Feeling that who I am doesn’t fit into the cisgender system of accessing fostering, adoption or fertility services	<ul style="list-style-type: none"> (a) If you don’t conform to the gender binary then parenting is a social challenge but not necessarily a medical one (b) But if you’re <i>trans</i> it’s relatively straightforward socially but complicated medically and often blocked by ignorance and/or prejudice
Experiencing the conjoined challenges of gender and fertility embodiment as I see them	<ul style="list-style-type: none"> (a) Problem with lack of biological fertility for appropriate parenthood is that this challenges to your non-cisgender sense of self (b) The opportunity to preserve own fertility is worth having, aside from whether or not you ultimately have a baby
Searching for a non-binary or gender appropriate self and the need for flexible future planning centered on reproductive capacity	<ul style="list-style-type: none"> (a) Worth keeping fertility under review, because feeling happier with your gender makes you feel more like pursuing life goals like parenthood (b) Taking a pragmatic approach: avoid reading reproductive parts as gender parts, but that’s really difficult to do when others misread them

wasn't planning on like physically transitioning and undergoing hormone therapy, at least not at present, that it would just be seen more like well essentially a lesbian relationship and go through that process of like having children [i.e., with donor sperm insemination], which would potentially be easier. But obviously I'm not entirely happy with that because I don't identify as female I identify as gender queer and gender fluid, so I guess for me it's well less the physical situation and more the social situation." (Rain FG1, line 0169).

As Rain explained further later in the focus group discussion:

"Because I don't identify as um female, my [biologically female] partner (. . .) kind of just assumed that she would be the one who would be the biological mother if we went down that route [to parenthood]. So, um, yeah, but there's still the social issue of well, what would I call myself as a parent? I'd be happy with just being a parent, or just come up with a new word for parent, um, so not mom or dad, but something else entirely. Um and then in terms of [adoption] and fostering, I don't know if there's additional legal stuff to work around, yeah, if you're *trans* and wanting to adopt but non-binary." (Rain, FG1 line 0410).

Other participants pointed to societal barriers to parenthood highlighting the likelihood of encountering prejudice or ignorance when applying to foster or adopt children. For example, Pete drew contrasts between his perception that United Kingdom adoption services had become accepting of cisgender same-gender couples, while a transgender same-gender couple or a queer family would press at and likely exceed these boundaries.

"There's less of a sort of stigma about kids being adopted by gay couples, but I think with *trans* people there's still that sort of suspicion. I mean it's further complicated sort of by, you know, if you've got a nice you know male/female couple and like one of them happens to be *trans* then that's more or less okay. But when you get into sort of queerer families or one of them being non-binary then it's just -, you know, the people who set kids up with foster parents don't want anything to be controversial" (Pete, FG1 line 432).

Nevertheless, concerns about the likelihood of an application to foster or adopt being accepted were not the only reasons given for not pursuing adoption or foster care. This route to parenthood raised further doubts for some participants who were concerned that any future child would be affected negatively by the legacy of foster care or adoption. Toyah said: "I always assumed that fostering was almost identical to adoption, except that maybe the child was in a rough situation. [...] But that's really why I would avoid fostering personally because I see it as something where that's more of a challenge to do it." (Toyah, FG1 line 403). While Pete pointed out the potential for extended family members to be less accepting of an adopted child than one who had a genetic connection: "My mum's quite anti-adoption, she just thinks that every child that's up for adoption is just going to end up some crazy mess!" (Pete, FG1 line 1372).

Much of the focus group discussion and interchange of information focused upon accessing appropriate fertility services. While none of the transgender or non-binary people who had been assigned female at birth had undertaken oocyte storage,

sperm storage had been successfully carried out by Kim one of the transgender women. The dilemmas for transgender men and transgender women were different because of the distinctly different roles played by female and male reproductive organs. Transgender men could only preserve the capacity for genetic and gestational parenthood by retaining their uterus, the return of menstruation and/or oocyte collection for cryopreservation (involving coming off testosterone supplements and artificially boosting undesired estrogen levels). Thus, both of these factors presented transgender men with surgical intervention and the expense of this. For transgender women, sperm retrieval was often expected to be through the ejaculation of a semen sample, which presented transgender women with considerable psychological challenges around embodiment. No one in the focus groups mentioned the possibility of the surgically aspirating sperm directly from the body. Both transgender men and transgender women faced potential hormonal treatment disruption and financial expense for gamete storage.

Several of the conflicting issues involved in the challenge of accessing fertility preservation services were voiced by Pete. Pete's preferred route to parenthood would be first to cryopreserve his eggs, subsequently to use *in vitro* fertilization with his male partner's sperm, and then to have a surrogate carry the pregnancy. Pete found contemplating all this quite stressful: "I have to think of it now because in terms of surgery and hormones and stuff, it's forcing me to make [fertility] decisions now [about egg storage] that most people don't have to make until they're much older." (Pete FG1, line 0066). Pete also thought that his choices had been severely limited by a combination of ignorance and prejudice on the part of health professionals.

I've actually been to fertility clinics and done all the testing and stuff and I didn't actually get the funding for it, just because [their guidelines] on transgender patients and egg freezing and that sort of stuff are a bit blurred. They said because, erm, currently [commercial] surrogacy isn't legal in the United Kingdom and I don't have a willing surrogate right here now, they weren't going to do it. Erm but I was kind of with the view that you're [planning on] taking them out, so, like why? Like I didn't quite understand it, because if I was a cancer patient you would store them. Because it's not really that different because a cancer patient is not going to be able to carry her own eggs. So, yeah, I was a little bit-, I thought well that was [...] well transphobic really. (Pete, FG1 line 0095).

Transgender participants also were faced with health care professionals' assumptions that being transgender meant either not wanting to have children or forgoing parenthood for gender enhancement. One consequence of this was that not only was hormonal support for gender identity withdrawn while conception and pregnancy were pursued, but also simply initiating a discussion about pursuing fertility treatment could mean risking the loss of psychological support too. Phil told Focus Group 3:

More recently when I told the consultant at the gender clinic that I was planning on coming off T [testosterone] to try and conceive, he was really shocked because I think he thought that I was this kind of classic *trans* man and I was like professionally successful and ticked all these boxes and well I just shattered all his illusions

[Group laughs] like he's got really weird ideas about stuff! And then he said [that] because I wasn't pursuing surgery at that point he was going to discharge me from the gender clinic. I felt like I don't know if that's the right thing right now. And like a year later I can definitely say it wasn't the right thing, because I could have done with some counseling, some support from the gender clinic (Phil, FG3 line 0617).

In summary, focus group discussions often indicated the lack of fit between the varied needs of transgender and non-binary people as they sought parenthood and the systems set up to assist cisgender people to achieve parenthood. Nonetheless, some participants were hopeful that at least discussions about fertility options were starting to happen. Stephen, who was happy living a childfree life, said: "When I started my transition it was never even put to me. You know I was just told: if you want to transition then start testosterone. But well it sounds like people who have transitioned a bit more recently are beginning to have these conversations with medical professionals, you know, hopefully" (Stephen, FG2 line 1875). And as Kim said: "Nothing was explained. I had to do my own research, yeah, I had to fight hard, but I finally got there [sperm storage] and it was worth it!" (FG2, line 0280).

Experiencing the Conjoined Challenges of Gender and Fertility Embodiment as I See Them

For transgender participants in particular attaining biological parenthood was complicated because reproduction emphasized the presence of body-parts that contradicted gender identity. The challenging clash between fertility embodiment and gender were movingly voiced by Pete. Pete identified as a gay man with a cisgender gay partner and explained his discomfort in the following dialog:

Pete: I identify as a gay man, so technically we could have like a child in the normal way, but I would never carry a child, because that would -, that's weird to me because I'm not female. So yeah that's something I would never do.

Interviewer: So carrying a child would feel like -

Pete: That would be weird to me

Interviewer: A woman's bit?

Pete: Yeah it's just something that I don't feel comfortable with (FG1 line 0214)

In a parallel fashion, making difficult decisions affecting future fertility opportunities was further complicated by the urgency of making progress with gender-appropriate hormone supplements to assist gender embodiment. Ocean's conversation with Pete illustrated the psychological experience of pressure to postpone egg storage in favor of going on testosterone. The lack of medical clarity about the effects of taking testosterone supplements on the viability of oocytes further added to the complexity of how to manage what appeared to be competing priorities.

Ocean: When I went on hormones when I think I was like 19 or 20 um they [medical professionals] said "Do you want to stash your eggs?" and explained that you have to go on estrogen hormones for a while and then it would take ages. I said no I need to get the

testosterone in me, so it was a snap decision, but one that yeah that's going to have like quite a lot of consequences though.

Pete: I mean you can go back from that. I mean just because you're taking testosterone doesn't mean that you can't . . .

Ocean: Yeah, but I think it makes it sort of riskier with the eggs and so on

Pete: They've said to me that it's fine (FG1, line 0076).

Searching for a Non-binary or Gender Appropriate Self and the Need for Flexible Future Planning Centered on Reproductive Capacity

The nine participants who were keen to explore the idea of becoming a parent in the future had previously had at least some earlier thoughts about becoming a parent when they themselves were still at school. Nevertheless, during the focus groups participants described how their thoughts about becoming a parent in the future came and went over time. As seen in Ocean's quotes above, and in Ethan's extract below, participants put thoughts of parenthood aside in favor of accessing hormonal supplements when discomfort with assigned gender peaked. However, actively wanting to pursue parenthood seemed to be prompted by feeling happier about achieving an appropriate gender or non-binary sense of self. Thus, some participants felt caught in a paradox of feeling psychologically ready for parenthood yet further away from attaining biological parenthood. Ethan explained the dilemma:

So now that I'm much more, erm, at ease in my body and can barely remember the anguish of pre-T, erm, I have regret: Why didn't I do it? [egg storage]. But I just need to try and remember how awful that felt. I immediately know that I just couldn't have done it. But it would be nice now to have. But it was just mentally -, it was never a possibility. I just could not have entertained that. (Ethan, FG2 line 976).

One solution put forward in Focus Group 2 was to take a pragmatic approach to having a baby: use available reproductive body parts without thinking of these as embodying gender. Nevertheless, as Seth expanded upon the idea of taking a pragmatic approach it became clear that difficulties could be potentially posed when pregnancy became visible since others could start to misinterpret gender causing personal anguish.

"Pregnancy itself doesn't feel inherently female anymore. I'm at a point now I've thought about it so long and so hard. I've always wanted kids and I've never identified as female, so for me having kids isn't a female thing it's a mechanical thing - they just aren't tied to each other. But if I start to be read as female then it's going to mess with my head [...] you know I'll just go and hide or something for 9 months!" [focus group laughs] (Seth, FG2 line 0712).

DISCUSSION

To a greater or lesser extent parenthood was clearly part of a future life plan for most of transgender and non-binary people who participated in our focus group interviews (De Sutter et al., 2002; Wierckx et al., 2012; von Doussa et al., 2015;

Riggs et al., 2016; Cipres et al., 2017; Tornello and Bos, 2017; Marinho et al., 2020). From accessing various online resources our participants were knowledgeable about fertility possibilities after beginning hormonal or surgical gender transition and in some cases participants said that they were informing the health care professionals with whom they came into contact (Twist and de Graff, 2019). In our study gender identity fulfillment and parenthood aspirations often appeared to be complexly interwoven: childhood fantasies about future parenting may have alerted a young person to their gender identity; the need to make progress with gender transition may have put thoughts of parenthood on hold; attaining comfort with gender identity could promote the desire to become a parent.

Other authors employing an LCT framework have noted the reciprocity of gender transition appreciation and parenthood decisions when interviewing transgender pre- and post-transition parents. For instance, Petit et al. (2018) noted that gender transition appreciation was an integral part of a life course agenda concerning decisions to have or not to have children and likewise thoughts about future parenthood in turn informed the process of achieving comfort in a transgender or non-binary identity. In a similar fashion in our study, the first theme – the balancing of a desire for parenthood or not having children and the desires for gender identity fulfillment and other life goals – was derived from qualitative data on the perspective of transgender and non-binary adults who do not have children but who were making decisions about future parenthood or remaining childfree and who also were sometimes simultaneously deciding upon hormonal and surgical interventions to assist gender presentation. Previous prospective parenthood studies of transgender people's views have not been framed explicitly within a developmentally focused LCT framework and generally have not considered the particular perspective of non-binary people. While our investigation of development has been hampered by a cross-sectional approach and also by our small sample size, like Petit et al. (2018) we also found evidence of changing views on having children and on gender related processes over time.

As Petit et al. (2018) found the LCT concept of human agency with respect to decision making and future goals played a crucial role. In practice, for the participants in our study this meant that if parenthood was desired then a key aspect was also developing a flexible future plan to run alongside a quest for a non-binary or gender appropriate self (theme four).

Nonetheless, parenthood was seen as a daunting project. While adoptive parenting was rarely ruled out completely (von Doussa et al., 2015; Nahata et al., 2017; Tornello and Bos, 2017; Marinho et al., 2020), participants judged that applications to adopt made by transgender or non-binary people would be very unlikely to succeed. Although the United Kingdom has been at the forefront of legislative change to allow same-gender couples to adopt, adoption is still a contested topic (Tasker and Bellamy, 2019) and opening up foster care and adoption to transgender and non-binary applicants is only just beginning (Brown and Rogers, 2020). In relation to LCT, the current sociohistorical context in the United Kingdom thus favored consideration of fertility preservation upon which focus group

participants had already garnered knowledge. Furthermore, older participants in our focus groups noted that younger participants were having conversations with health care professionals that they themselves had not had, thus highlighting the importance of the LCT concept of timing (age and life course agenda) in relation to contextual changes. Discussions in all three focus groups concentrated on biological parenthood via ART, but as other authors have noted professional “gatekeeping” pertained here too (Riggs and Bartholomaeus, 2020 Online First). Our participants were faced with a contradictory series of service gateways: some gateways were beginning to open up to fertility preservation (gender clinic services). But participants might then find further gateways closed, perhaps through lack of personal finance to circumvent the absence of designated transgender and non-binary appropriate state funding at ART clinics. Thus, the underlying theme that echoed as a refrain through the conversations was one of our participants not feeling able to present a good enough fit to unlock the cisgender or binary social systems that governed services (theme two).

In contemplating genetically related parenthood, transgender and non-binary people were faced with uncomfortable reminders of the reproductive organs and gametes associated with their birth-assigned sex. In turn these reminders raised concerns about being able to realize biological parenthood without jeopardizing the security of the gender identity position that participants had worked so extremely hard to attain (Riggs et al., 2015; von Doussa et al., 2015; Armuand et al., 2017; Chen et al., 2017; Nahata et al., 2017; Tornello and Bos, 2017; Petit et al., 2018; Riggs and Bartholomaeus, 2018; Marinho et al., 2020). Participants particularly anticipated the reactions of other people to their fertility: would others read them as a father-to-be if they were carrying a child? Would others read them as a mother-to-be if they provided the sperm and were not pregnant? Hence our underlying theme of gender and fertility embodiment challenges (theme three). These thoughts that interlinked twin concerns of gender identity and fertility substantially added to the usual concerns also experienced by cisgender people undergoing ART, namely, anxious uncertainty about the chances of successfully having a baby (Purewal et al., 2018), the physical and psychological challenges of the procedures (Moura-Ramos et al., 2012; Dornelles et al., 2016) and the financial costs of ART in the United Kingdom as in many countries (Culley et al., 2011). Nevertheless, despite these multiple challenges to achieving parenthood, our transgender and non-binary participants spoke of the psychological value of preserving fertility possibilities even if these were not activated in the future.

Participants framed their decision making around having children or remaining childfree within the personal context of their own life story: Was parenthood desired? And if parenthood was sought after, could parenthood be accommodated sooner or later within their life course? The two participants who had decided not to have children thus framed their decision in terms of never seriously wanting to have their *own* children and being satisfied with their existing relationships with children in their networks. For example, participants thought of themselves as stepparents to their partner's children, described avuncular but gender-neutral relationships with their siblings' children

(niblings), and/or had worked in a paid or voluntary capacity with children. None of our sample wanted a completely childfree life.

The nine participants who to a greater or lesser extent placed a priority upon parenthood for themselves saw the desire for parenthood as an evolving part of their overall life course story that was intimately connected with their gender journey (Petit et al., 2018). For some an important aspect of recognizing their gender identity during childhood or adolescence had been the reflection that they wanted to be a mother or a father or simply a parent and specifically not a parent of the gender they had been assigned at birth. Nevertheless, other participants recounted that the desire to parent preceded gender questioning and was independent from it, except that hormonal or surgical plans to assist gender transition might impinge upon fertility.

Participants foregrounded concerns regarding their own fertility over other routes to parenthood within the focus group discussions. Both transgender and non-binary participants varied in their commitment to having children who were genetically related to them, not only because of their own desire for progeny, but also because of the perceived societal and social obstacles they anticipated encountering on other routes to parenthood. When interviewers specifically asked about adoption, focus group participants indicated that they thought it unlikely that adoption services would support an application to adopt made by a transgender or non-binary person. Previously authors such as Bergstrom-Lynch have pointed to the more affirmative assisted reproduction service based approach conducive to the LGB couples (comprising mostly of cisgender individuals) that Bergstrom-Lynch interviewed and contrasted this with the (hetero)normative lens of providing a family life for children in need that has characterized adoption agencies in the United States (Bergstrom-Lynch, 2016). Thus, our participants also perhaps judged that commercially driven fertility services would be more open to their inquiries than would statutory adoption services in the United Kingdom. Some of our participants expressed additional concerns that an adopted child would potentially have to deal with the double challenge of societal prejudices against both adoption and having a transgender or non-binary parent, potentially on top of placement in a same-gender couple headed household when a participant did not identify as heterosexual.

Congruent with findings from studies that have focused on sexual identity (Stacey, 2006; Roberts et al., 2011; Goldberg et al., 2012; Bergstrom-Lynch, 2016) partnership sometimes contextualized parenthood plans for our transgender and non-binary participants, but in varied ways for different individuals. For some participants in our study dormant early childhood thoughts of becoming a parent had been rekindled by entry into a same-gender or different-gender partnership that made shared parenthood feasible and desirable. But for other participants LCT principles of agency, life span and linked lives worked differently since parenthood was not contingent upon partnership. Instead parenthood was envisaged as a distinct personal project with single parenting (albeit surrounded by supportive others). Extended family support for having children was mentioned by some focus group participants in conjunction with their parenthood plans, but this was seen as desirable rather than a necessary prerequisite. Nonetheless, participants were mindful

of views within their wider family with some participants pointing out that members of their extended family would be less supportive of adoption than they would of genetically related parenthood, which in turn influenced their own preference for exploring fertility treatment.

Planning for parenthood involved participants weighing up whether they (on their own, or in conjunction with other linked lives) had sufficient access to the financial and accommodation resources that children needed: Were they secure in their occupational career pathway? Did they have the right type of home for a child? Here, as in previous studies that focused on (cisgender) LGB and heterosexual people, an intention to have children might be put on hold when career plans were being pursued (Umberson et al., 2010; Bergstrom-Lynch, 2016). In fact, economic considerations potentially seemed to loom larger for the transgender and non-binary people interviewed in our study than they apparently had for participants in other studies. One reason for this was that the financial costs of accessing ART were often higher for those undergoing a physical transition because of the need to budget for cryopreservation of their own cells (Tornello and Bos, 2017; Riggs and Bartholomaeus, 2018; Marinho et al., 2020). Furthermore, participants were having to make decisions about cryopreservation in their late teens and early twenties while still at college or just as their career was beginning with limited financial reserves. In the United Kingdom gender clinics have begun to open up fertility discussions and prepare leaflets to direct clients to fertility services. However, unlike the UK National Health Service funding of gamete extraction and storage prior to cancer treatment, public funding was not generally available for those seeking services for reasons of gender transition. Thus, hopes were raised but then dashed by lack of funding.

Strengths and Limitations

Undoubtedly, the findings derived from our study remain limited by the small number of participants sampled most of whom were white, middle class, people without disabilities. Our recruitment was through a community organization and those who attended the focus groups came from in and around a large capital city (although some had moved to London from other parts of the United Kingdom and Ireland). Thus, we note that participants might perhaps have been more aware of, and empowered to voice, a transgender and gender diverse equality rights agenda in a community group setting, than if they had been recruited in other ways, for instance via gender identity clinics. In particular, we emphasize a caution that our restricted sampling limited consideration of parenthood by transgender and non-binary people who were assigned male at birth and we would recommend further research specifically aimed at this group.

Notwithstanding the limitations above, our small sample size facilitated an in-depth consideration of the qualitative data gathered to interpret thematic patterns within the data and not simply label content domains (Braun and Clarke, 2013). Furthermore, the sample encompassed people who had not had any hormonal or surgical interventions in relation to gender fulfilment, others who had been prescribed hormones, and those who had undertaken surgery of various kinds. Through the

conversations generated in the focus groups we also glimpsed the development of a range of different viewpoints within the transgender and non-binary communities (Vicsek, 2010) and factors, such as the wide age range of participants with different personal circumstances, highlighted cohort and contextualizing factors within the group. The views presented in the groups varied both in favor of future parenthood, or in favor of remaining childfree; thus, we were pleased to have facilitated a safe space for a face-to-face exchange of information and thoughts (Wilkinson, 1999). In addition, our findings are based upon an independent audit and the consideration of focus group data from three separate groups, one of which provided an opportunity for some verification of the preliminary findings from thematic analysis of the first two focus groups.

CONCLUSION

Our mixed focus groups of transgender and non-binary people have highlighted the complexity of issues faced by transgender and non-binary people living beyond cisnormativity who delineated an interwoven set of life course considerations in deciding whether to try for parenthood or remain childfree. While considerations of gender identity were involved in plans for parenthood or remaining childfree, it was also apparent that considerations of parenthood or not had reciprocal implications for the realization of gender identity. The challenges of parenthood emphasized by transgender participants were first and foremost medical or societal compounded by possible ignorance, discrimination, and prejudice, for example, in the absence of appropriate funding for fertility treatment or anticipated difficulties in being approved for adoption. Non-binary people highlighted the social challenges they faced in achieving recognition of their gender fluid or gender neutral parenting intentions. Our findings highlight the need for more open discussion, both within the transgender and non-binary community and among professionals working in these fields, of the possibilities of fertility preservation after hormonal or surgical treatments and also of the opportunities for transgender and non-binary people to foster or adopt children.

REFERENCES

- Allen, K. R., and Henderson, A. C. (2017). *Family Theories: Foundations and Applications*. Chichester: Wiley.
- Armund, G., Dhejne, C., Olofson, J. I., and Rodriguez-Wallberg, K. A. (2017). Transgender men's experiences of fertility preservation: a qualitative study. *Hum. Reprod.* 32, 383–390. doi: 10.10193/humrep/dew323
- Arnett, J. J. (2007). Emerging adulthood: What is it, and what is it good for? *Child Dev. Perspect.* 1, 68–73. doi: 10.1111/j.1750-8606.2007.00016.x
- Ashworth, P. (1993). Participant agreement in the justification of qualitative findings. *J. Phenomenol. Psychol.* 24, 3–16. doi: 10.1163/156916293x00017
- Auer, M. K., Fuss, J., Nieder, T. O., Briken, P., Biedermann, S. V., Stalla, G. K., et al. (2018). Desire to have children among transgender people in Germany: a cross-sectional multicenter study. *J. Sex. Med.* 15, 757–767. doi: 10.1016/j.jsxm.2018.03.083

DATA AVAILABILITY STATEMENT

The datasets for this article are not publicly available in order to protect the participants' confidentiality. Requests to access the datasets should be directed to FT, f.tasker@bbk.ac.uk.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Department of Psychological Sciences Research Ethics Committee of Birkbeck, University of London, United Kingdom. The participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

FT and JG designed the study, constructed the focus group interview schedule, and collected and curated the data. FT conducted the initial analysis of the data and led to write up of the manuscript which was refined by JG.

FUNDING

The research expenses were funded by the Birkbeck, University of London research development funding to FT.

ACKNOWLEDGMENTS

We would like to thank staff at the Gendered Intelligence who helped us to advertise the research project to potential participants and who provided the venue for the focus groups. We also thank Isobel Hewitt for her technical help. We also thank the reviewers for their thoughtful reflections on the manuscript in the peer review process. We particularly appreciated the insights and openness of our participants who patiently explained, listened, and took the time to attend our focus group discussions. We are grateful to an undergraduate research assistant (Annalisa Pantella) who audited the analysis for us.

- Baram, S., Myers, S. A., Yee, S., and Librach, C. L. (2019). Fertility preservation for transgender adolescents and young adults: a systematic review. *Hum. Reprod.* 25, 694–716. doi: 10.1093/humupd/dmz026
- Bartholomaeus, C., and Riggs, D. W. (2020). Transgender and non-binary Australians' experiences with healthcare professionals in relation to fertility preservation. *Cult. Health Sex.* 22, 129–145. doi: 10.1080/13691058.2019.1580388
- Beauchamp, T. L., and Childress, J. F. (2013). *Principles of Biomedical Ethics (7e)*. Oxford: Oxford University Press.
- Benson, J. E., and Elder, G. H. (2011). Young adult identities and their pathways: a developmental and life course model. *Dev. Psychol.* 47, 1646–1657. doi: 10.1037/a0023833
- Bergstrom-Lynch, C. (2016). *Lesbians, Gays, and Bisexuals Becoming Parents or Remaining Childfree: Confronting Social Inequalities*. Lanham, MD: Lexington Books.

- Birt, L., Scott, S., Cavers, D., Campbell, C., and Walter, F. (2016). Member checking: A tool to enhance trustworthiness or merely a nod to validation? *Qual. Health Res.* 26, 1802–1811. doi: 10.1177/1049732316654870
- Boyatzis, R. E. (1998). *Transforming Qualitative Information: Thematic Analysis and Code Development*. Thousand Oaks, CA: Sage.
- Braun, V., and Clarke, V. (2006). Using thematic analysis in psychology. *Qual. Res. Psychol.* 3, 77–101. doi: 10.1191/1478088706qp0630a
- Braun, V., and Clarke, V. (2013). *Successful Qualitative Research: A Practical Guide for Beginners*. London: Sage.
- Breen, R. L. (2006). A practical guide to focus-group research. *J. Geogr. High. Educ.* 30, 463–475. doi: 10.1080/03098260600927575
- Brown, C., Andrew, C., and Adams, P. (2018). *Assessing and supporting transgender foster carers and adopters*. London: CoramBAAF.
- Brown, C., and Rogers, M. (2020). Removing gender barriers: promoting inclusion for trans and non-binary carers in fostering and adoption. *Child Fam. Soc. Work* doi: 10.1111/cfs.12731
- Brown, H. C., Sebba, J., and Luke, N. (2015). *The Recruitment, Assessment, Support and Supervision of Lesbian, Gay, Bisexual and Transgender Foster Carers: An International Literature Review*. Oxford: Rees Centre.
- Burnard, P., Gill, P., Stewart, K., Treasure, E., and Chadwick, B. (2008). Analysing and presenting qualitative data. *Br. Dent. J.* 204, 429–432. doi: 10.1038/sj.bdj.2008.292
- Charmaz, K. (2006). *Constructing Grounded Theory: A Practical Guide Through Qualitative Analysis*. Thousand Oaks, CA: Sage.
- Chen, D., Matson, M., Macapagal, K., Johnson, E. K., Rosoklija, I., Finlayson, C., et al. (2018). Attitudes toward fertility and reproductive health among transgender and gender-nonconforming adolescents. *J. Adolesc. Health* 63, 62–68. doi: 10.1016/j.jadohealth.2017.11.306
- Chen, D., Simons, L., Johnson, E. K., Lockart, B. A., and Finlay, C. (2017). Fertility preservation for transgender adolescents. *J. Adolesc. Health* 61, 120–123. doi: 10.1016/j.jadohealth.2017.01.022
- Cipres, D., Seidman, D., Cloniger, C., Nova, C., O'Shea, A., and Obedin-Maliver, J. (2017). Contraceptive use and pregnancy intentions among transgender men presenting to a clinic for sex workers and their families in San Francisco. *Contraception* 95, 186–189. doi: 10.1016/j.contraception.2016.09.005
- Clark, B. A., Veale, J. F., Townsend, M., Frohard-Dourlent, H., and Saewyc, E. (2018). Non-binary youth: access to gender-affirming primary health care. *Int. J. Transgend.* 19, 158–169. doi: 10.1080/15532739.2017.1394954
- Coleman, E., Bocking, W., Botzer, M., Cohen-Kettenis, P. T., De Cuypere, G., Feldman, J. L., et al. (2012). Standards of care for the health of transsexual, transgender and gender non-conforming people, version 7. *Int. J. Transgend.* 13, 165–232. doi: 10.1080/15532739.2011.700873
- Condat, A., Mendes, N., Drouineaud, V., Gründler, N., Lagrange, C., Chiland, C., et al. (2018). Biotechnologies that empower transgender persons to self-actualize as individuals, partners, spouses, and parents are defining new ways to conceive a child: psychological considerations and ethical issues. *Philos. Ethics Humanit. Med.* 13:1. doi: 10.1186/s13010-018-0054-3
- Côté, J., and Bynner, J. M. (2008). 'Changes in the transition to adulthood in the UK and Canada: the role of structure and agency in emerging adulthood'. *J. Youth Stud.* 11, 251–268. doi: 10.1080/13676260801946464
- Culley, L., Hudson, N., Rapport, R., Blyth, E., Norton, W., and Pacey, A. A. (2011). Crossing 3 borders for fertility treatment: motivations, destinations and outcomes of UK fertility 4 travellers. *Hum. Reprod.* 26, 2373–2381. doi: 10.1093/humrep/der191
- De Sutter, P. (2009). Reproductive options for transpeople: recommendations for revision of the WPATH's standards of care. *Int. J. Transgend.* 11, 183–185. doi: 10.1080/15532730903383765
- De Sutter, P., Verschuur, A., Hotimsky, A., and Kira, K. (2002). The desire to have children and the preservation of fertility in transsexual women: a survey. *Int. J. Transgend.* 6, 97–103.
- Dornelles, L. M. N., MacCallum, F., Lopes, R. C. S., Piccinini, C. A., and Passos, E. P. (2016). The experience of pregnancy resulting from Assisted Reproductive Technology (ART) treatment: a qualitative Brazilian study. *Women Birth* 29, 123–127. doi: 10.1016/j.wombi.2015.08.012
- Elder, G. H. (1994). Time, human agency, and social change: perspectives on the life course. *Soc. Psychol. Q.* 57, 4–15. doi: 10.2307/2786971
- Elder, G. H. (1998). Life course as developmental theory. *Child Dev.* 69, 1–12. doi: 10.2307/1132065
- Elder, G. H., Johnson, M. K., and Crosnoe, R. (2003). "The emergence and development of life course theory," in *Handbook of the Life Course*, eds J. T. Mortimer and M. J. Shanahan (New York, NY: Kluwer Academic), 3–19. doi: 10.1007/978-0-306-48247-2_1
- Ellis, S. J., Riggs, D. W., and Peel, E. (2020). *Lesbian, Gay, Bisexual, Trans, Intersex, and Queer Psychology: An Introduction*, 2nd Edn. Cambridge: Cambridge University Press.
- Ethics Committee of the American Society for Reproductive Medicine (2015). Access to fertility services by transgender persons: an ethics committee opinion. *Fertil. Steril.* 104, 1111–1115. doi: 10.1016/j.fertnstert.2015.0
- Factor, R., and Rothblum, E. (2008). Exploring gender identity and community among three groups of transgender individuals in the United States: MTFs, FTMs, and genderqueers. *Health Sociol. Rev.* 17, 235–253. doi: 10.5172/hesr.451.17.3.235
- Freedman, D., Tasker, F., and di Ceglie, D. (2002). Children and adolescents with transsexual parents referred to a specialist gender identity development service: a brief report of key developmental features. *Clin. Child Psychol. Psychiatry* 7, 423–432. doi: 10.1177/1359104502007003009
- Goldberg, A. E., Downing, J. B., and Moyer, A. M. (2012). Why parenthood, and why now? Gay men's motivations for pursuing parenthood. *Fam. Relat.* 61, 157–164. doi: 10.1111/j.1741-3729.2011.00687.x
- Golombok, S. (2015). *Modern Families: Parents and Children in New Family Forms*. Cambridge: Cambridge University Press.
- Gunarsson-Payne, J., and Erbenius, T. (2018). Conceptions of transgender parenthood in fertility care and family planning in Sweden: from reproductive rights to concrete practices. *Anthropol. Med.* 25, 329–343. doi: 10.10180/13648470.2018.1507485
- Hafford-Letchfield, T., Cocker, C., Rutter, D., Tinarwo, M., McCormack, K., and Manning, R. (2019). What do we know about transgender parenting?: Findings from a systematic review. *Health Soc. Care Community* 27, 1111–1125. doi: 10.1111/hsc.12759
- Haines, B. A., Ajayi, A. A., and Boyd, H. (2014). Making trans parents visible: intersectionality of trans and parenting identities. *Femin. Psychol.* 24, 238–247. doi: 10.1177/0959353514526219
- Hembree, W. C., Cohen-Kettenis, P. T., Gooren, L., Hannema, S. E., Meyer, W. J., Murad, M. H., et al. (2017). Endocrine treatment of gender dysphoric/gender-incongruent persons: an endocrine society clinical practice guideline. *J. Clin. Endocrinol. Metab.* 102, 3869–3903. doi: 10.1210/je.2017-01658
- Human Fertilisation & Embryology Authority (2020). *Information for Trans and Non-Binary People Seeking Fertility Treatment*. Available at: <https://www.hfea.gov.uk/treatments/fertility-preservation/information-for-trans-and-non-binary-people-seeking-fertility-treatment/> (accessed March 4, 2020).
- Jager, J., Putnick, D. L., and Bornstein, M. H. (2017). More than just convenient: the scientific merits of homogeneous convenience samples. *Monogr. Soc. Res. Child Dev.* 82, 13–30. doi: 10.1111/mono.12296
- James-Abra, S., Tarasoff, L. A., Green, D., Epstein, R., Andersson, S., Marvel, S., et al. (2015). Trans people's experiences with assisted reproduction services: a qualitative study. *Hum. Reprod.* 30, 1365–1374. doi: 10.10193/humrep/dev087
- Jones, C. A., Reiter, L., and Greenblatt, E. (2016). Fertility preservation in transgender patients. *Int. J. Transgend.* 17, 76–82. doi: 10.1080/15532739.2016.1153992
- Krueger, R. A., and Casey, M. A. (2015). *Focus Groups: A Practical Guide for Applied Research*. Thousand Oaks, CA: Sage.
- Mallon, G. P. (2011). The home study assessment process for gay, lesbian, bisexual, and transgender prospective foster and adoptive families. *J. GLBT Fam. Stud.* 7, 9–29. doi: 10.1080/1550428X.2011.537229
- Marinho, I., Gato, J., and Coimbra, S. (2020). Parenthood intentions, pathways to parenthood, and experiences in the health services of trans people: An exploratory study in Portugal. (in press).
- Morse, J. M., Barrett, M., Mayan, M., Olson, K., and Spiers, J. (2002). Verification strategies for establishing reliability and validity in qualitative research. *Int. J. Qual. Methods* 1, 13–22. doi: 10.1177/160940690200100202
- Moura-Ramos, M., Gameiro, S., Canavaro, M. C., and Soares, I. (2012). Assessing infertility stress: re-examining the factor structure of the Fertility Problem Inventory. *Hum. Reprod.* 27, 496–505. doi: 10.1093/humrep/der388
- Nahata, L., Curci, M. B., and Quinn, G. P. (2018). Exploring fertility preservation intentions among transgender youth. *J. Adolesc. Health* 62, 123–125. doi: 10.1016/j.jadohealth.2017.11.288
- Nahata, T., Tishelman, A. C., Caltabellotta, N. M., and Quinn, G. P. (2017). Low fertility preservation utilization among transgender youth. *J. Adolesc. Health* 61, 40–44. doi: 10.1016/j.jadohealth.2016.12

- Petit, M.-P., Julien, D., and Chamberland, L. (2018). Interlinkages between parental and trans trajectories: a life course perspective. *Psychol. Sex. Orient. Gen. Divers.* 5, 371–386. doi: 10.1037/sgd0000280
- Purewal, S., Chapman, S. E., and van den Akker, O. (2018). Depression and state anxiety scores during assisted reproductive treatment are associated with outcome: a meta-analysis. *Reprod. Biomed. Online* 36, 646–657. doi: 10.1016/j.rbmo.2018.03.010
- Pyne, J., Bauer, G., and Bradley, K. (2015). Transphobia and other stressors impacting trans parents. *J. GLBT Fam. Stud.* 11, 107–126. doi: 10.1080/1550428X.2014.941127
- Riggs, D., von Doussa, H., and Power, J. (2015). The family and romantic relationships of trans and gender diverse Australians: an exploratory survey. *Sex. Relat. Ther.* 30, 243–255. doi: 10.1080/14681994.2014.992409
- Riggs, D. W., and Bartholomaeus, C. (2018). Fertility preservation decision amongst Australian transgender and non-binary adults. *Reprod. Health* 15:181. doi: 10.1186/s12978-018-0627-z
- Riggs, D. W., and Bartholomaeus, C. (2020). Toward trans reproductive justice: a qualitative analysis of views on fertility preservation for Australian transgender and non-binary people. *J. Soc. Issues*. doi: 10.1111/josi.12364
- Riggs, D. W., Power, J., and von Doussa, H. (2016). Parenting and Australian trans and gender diverse people: an exploratory survey. *Int. J. Transgend.* 17, 59–65. doi: 10.10180/155532739.2016.1149539
- Roberts, E., Metcalfe, A., Jack, M., and Tough, S. C. (2011). Factors that influence the childbearing intentions of Canadian men. *Hum. Reprod.* 26, 1202–1208. doi: 10.1093/humrep/der007
- Sim, J., and Waterfield, J. (2019). Focus group methodology: some ethical challenges. *Qual. Quant.* 53, 3003–3022. doi: 10.1007/s11135-019-00914-5
- Snyder, K. A., and Pearse, W. (2011). Discussing fertility preservation options with cancer patients. *JAMA* 306, 202–203. doi: 10.1001/jama.2011.973
- Stacey, J. (2006). Gay male parenthood and the decline of paternity as we knew it. *Sexualities* 9, 27–55. doi: 10.1177/1363460706060687
- Stotzer, R. L., Herman, J. L., and Hasenbush, A. (2014). *Transgender Parenting: A Review of Existing Research*. Los Angeles, CA: The Williams Institute.
- Strang, J. F., Jarin, J., Call, D., Clark, B., Wallace, G. L., Anthony, L. G., et al. (2018). Transgender youth fertility attitudes questionnaire: measure development in nonautistic and autistic transgender youth and their parents. *J. Adolesc. Health* 62, 128–135. doi: 10.1016/j.jadohealth.2017.07.022
- Tasker, F. (2020). Cara Bergstrom-Lynch, lesbians, gays, and bisexuals becoming parents or remaining childfree: confronting social inequalities. *Sexualities* 23, 467–469. doi: 10.1177/1363460719872731
- Tasker, F., and Bellamy, C. (2019). Adoption by same-sex couples – reaffirming evidence: could more children be placed? *Fam. Law* 49, 171–179.
- Tornello, S. L., and Bos, H. (2017). Parenting intentions among transgender individuals. *LGBT Health* 4, 115–120. doi: 10.1089/lgbt.2016.0153
- Twist, J., and de Graff, N. M. (2019). Gender diversity and non-binary presentations in young people attending the United Kingdom's National Gender identity Development Service. *Clin. Child Psychol. Psychiatry* 24, 277–290. doi: 10.1177/13591045/8804311
- Umberson, D., Pudrovska, T., and Reczek, C. (2010). Parenthood, childlessness, and well-being: a life course perspective. *J. Marriage Fam.* 72, 612–629. doi: 10.1111/j.1741-3737.2010.00721.x
- Vicsek, L. (2010). Issues in the analysis of focus groups: Generalisability, quantifiability, treatment of context and quotations. *Qual. Rep.* 15, 122–141.
- von Doussa, H., Power, J., and Riggs, D. (2015). Imagining parenthood: the possibilities and experiences of parenthood among transgender people. *Cult. Health Sex.* 17, 1119–1131. doi: 10.1080/13691058.2015.1042919
- White, T., and Ettner, R. (2007). Adaptation and adjustment in children of transsexual parents. *Eur. Child Adolesc. Psychiatry* 16, 215–221. doi: 10.1007/s00787-006-0591-y
- Wierckx, K., Van Caenegem, E., Pennings, G., Elaut, E., Dedeker, D., Van de Peer, F., et al. (2012). Reproductive wish in transsexual men. *Hum. Reprod.* 27, 483–487. doi: 10.1093/humrep/der406
- Wilkinson, S. (1999). Focus groups: a feminist method. *Psychol. Women Q.* 23, 231–244. doi: 10.1111/j.1471-6402.1999.tb00355.x
- Wingo, E., Ingraham, N., and Roberts, S. C. M. (2018). Reproductive health care priorities and barriers to effective care for LGBTQ people assigned female at birth: a qualitative study. *Womens Health Issues* 28, 350–357. doi: 10.1016/j.whi.2018.03.002
- Wong, J. S. (2018). Toward a theory of gendered projectivity and linked lives in the transition to adulthood. *J. Fam. Theory Rev.* 10, 126–140. doi: 10.1111/jftr.12253
- Wylie, K., Knudson, G., Khan, S. I., Bonierbale, M., Watanyusakul, S., and Baral, S. (2016). Serving transgender people: clinical care considerations and service delivery models in transgender health. *Lancet* 388, 401–411. doi: 10.1016/S0140-6736(16)00682.6
- Yilmaz, K. (2013). Comparison of Quantitative and Qualitative Research Traditions: epistemological, theoretical, and methodological differences. *Eur. J. Educ.* 48, 311–325. doi: 10.1111/ejed.12014
- Zadeh, S., Imrie, S., and Golombok, S. (2019). Stories of sameness and difference: the views and experiences of children and adolescents with a trans* parent. *J. GLBT Fam. Stud.* doi: 10.1080/1550428X.2019.1683785

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Tasker and Gato. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Anticipating Parenthood Among Lesbian, Gay, Bisexual, and Heterosexual Young Adults Without Children in Portugal: Predictors and Profiles

Jorge Gato^{1*}, Daniela Leal¹, Susana Coimbra¹ and Fiona Tasker²

¹ Faculty of Psychology and Education Sciences, University of Porto, Porto, Portugal, ² Department of Psychological Sciences, Birkbeck, University of London, London, United Kingdom

OPEN ACCESS

Edited by:

Rachel H. Farr,
University of Kentucky, United States

Reviewed by:

Marco Salvati,
Sapienza University of Rome, Italy
Rachel Riskind,
Guilford College, United States
Doyle Tate,
University of Virginia, United States

*Correspondence:

Jorge Gato
jorgegato@fpce.up.pt

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 15 January 2020

Accepted: 27 April 2020

Published: 10 June 2020

Citation:

Gato J, Leal D, Coimbra S and
Tasker F (2020) Anticipating
Parenthood Among Lesbian, Gay,
Bisexual, and Heterosexual Young
Adults Without Children in Portugal:
Predictors and Profiles.
Front. Psychol. 11:1058.
doi: 10.3389/fpsyg.2020.01058

Parenthood is a highly valued life goal, independent of one's sexual orientation. However, the majority of studies exploring young adults' parenthood plans have relied exclusively on samples of heterosexual individuals. This study aimed (i) to explore differences in parenthood intentions as a function of sexual orientation, (ii) to investigate to what extent sociodemographic and psychological characteristics predict parenthood intentions of lesbian, gay, bisexual (LGB), and heterosexual individuals, (iii) to test the mediating effect of stigma between sexual orientation and parenthood intentions, and (iv) to identify and characterize profiles of prospective parenthood (through cluster analysis). Data were gathered using an online survey from 375 self-identified LGB and heterosexual young adults without children in Portugal, with a mean age of 25.83 years old ($SD = 4.49$). Findings indicated that LGB individuals were less likely to intend to have children than heterosexual individuals; furthermore, among LGB individuals, lesbian women expressed stronger intentions to have children than did gay men. Similarities between heterosexual and LGB young adults were observed concerning the psychological determinants of parenthood intentions. Four distinctive profiles of prospective parenthood were identified: aspiring parents not anticipating stigma, aspiring parents anticipating stigma, childfree intent, and childfree ambivalent. Lesbian and bisexual women mostly populated the childfree ambivalent cluster; in contrast, the aspiring parents anticipating stigma cluster contained an overrepresentation of men, including sexual minority men. Professionals may want to attend to communalities and specificities of prospective parenthood as a function of sexual orientation, in order to provide unbiased and culturally competent support to sexual minority individuals.

Keywords: parenthood intentions, lesbian women, gay men, bisexual individuals, stigma, predictors, cluster analysis

INTRODUCTION

The process of family formation usually begins during young adulthood (McGoldrick et al., 2015). In the few last decades, the process of transition to adulthood has undergone profound changes in Portugal, converging with that of other western societies: concomitant with a longer educational pathway into adulthood there have been delays in the assumption of both conjugal and parental roles (Oliveira et al., 2014; PORDATA, 2019a). In spite of these changes, parenthood is still a highly desired and anticipated life goal, seen by many people as an important developmental milestone in their adult life course, independent of their sexual orientation (Goldberg et al., 2012; Gato et al., 2017).

Parenthood aspirations have been operationalized in various ways, such as desires, intentions, likelihood estimations, attitudes toward childlessness, or even a parenting continuum (for a review see Gato et al., 2017). Parenting desires correspond to the extent to which one wishes or wants to have children, whereas intentions are related to decisions or plans concerning parenthood (Riskind and Patterson, 2010). Intentions are usually a consequence of the deliberation of wishes and desires and mark the transition to the pre-action phase (Baiocco and Laghi, 2013).

Most studies exploring young adults' parenthood plans have relied exclusively on samples of heterosexual individuals (Cohler and Michaels, 2013). In fact, given prevailing societal prejudice and discrimination against sexual minority individuals, the interest in the parenthood plans of lesbian, gay, and bisexual (LGB) individuals is quite recent. Sexual minority persons face many barriers when they envisage parenthood (Gato et al., 2017) and that may explain why they express fewer desires, intentions, and expectations of having children than do heterosexual persons (e.g., Patterson and Riskind, 2010; Riskind and Patterson, 2010; Goldberg et al., 2012; Shenkman, 2012; Baiocco and Laghi, 2013; Riskind et al., 2013; Riskind and Tornello, 2017; Simon et al., 2018; Gato et al., 2019; Leal et al., 2019b; Salinas-Quiroz et al., 2019; Tate and Patterson, 2019a,b). Parenthood among bisexual individuals is also relatively understudied. In one U.S. study, bisexual individuals' parenthood intentions generally seemed to be closer to those of heterosexual individuals than to the ones of lesbian women and gay men (Riskind and Tornello, 2017). However, in a previous study conducted in Portugal, no differences were found between lesbian and bisexual women's parenthood intentions (Gato et al., 2019). Furthermore, studies have suggested that bisexual women who are partnered with women in fact have similar desires and intentions to those of lesbian women (Ross et al., 2012; Delvoye and Tasker, 2016; Riskind and Tornello, 2017).

One of the barriers to the parenthood aspirations of LGB individuals relates to the experience or anticipation of stigma upon parenthood (Gartrell et al., 2005; Bos and van Balen, 2008; Eady et al., 2009; Riskind et al., 2013; Bauermeister, 2014; Gato et al., 2017, 2019; Scandurra et al., 2019; Simon et al., 2019). Institutional heterosexism can be observed in many legislatures which explicitly prohibit adoption by sexual minority individuals or same-sex couples and/or obstruct these individuals' access to Assisted Reproductive Technology (ART)

services (Gato et al., 2017). For instance, the lesbian and gay participants in Riskind et al.'s (2013) study who were generally living in more favorable social climates in the United States regarding the rights of sexual minorities were also more likely to express confidence that they could become parents in the future. Bauermeister (2014) also verified that the existence of legal restrictions (e.g., same-sex marriage, adoption, etc.) moderated the relation between the fatherhood aspirations of gay men and their psychological well-being. Fatherhood aspirations were associated with fewer depressive symptoms and higher self-esteem scores among participants living in U.S. states without discriminatory policies, whereas the opposite was true in states with discriminatory policies. Besides discriminatory laws, gate-keeping processes and the personal biases of professionals working in adoption agencies, reproductive health services, or in human services in general may also hinder the progression of LGB individuals' future parenthood projects (e.g., Hicks, 2000; Matthews and Cramer, 2006; Yager et al., 2010; Mellish et al., 2013; Kimberly and Moore, 2015; Tasker and Bellamy, 2019). Among the LGBT community (lesbian, gay, bisexual, and transgender individuals), parenthood might be considered as "heteronormative" and, thus, result in the exclusion of LGBT parents in this community (Simon et al., 2019). In this regard, Salinas-Quiroz et al. (2019) conceptualized the "homonormative family model" which includes a same-sex monogamous couple with children.

In Portugal, bills in favor of LGB individuals' parental rights are very recent: adoption by same-sex couples and public funded access to ART for all women, irrespective of their sexual orientation, relational status, and infertility status were only approved in 2016. Furthermore, moderate to high levels of prejudice against LGB persons have been noted in this country (FRA, 2014; Eurobarometer, 2019).

Investigating attitudes toward same-sex adoptive families among Portuguese students from the helping professions, Gato and Fontaine (2016, 2017) found an association between heterosexism and negative attitudes toward adoption by lesbian women and gay men. Also in Portugal, Xavier et al. (2017) identified continuing reservations concerning same-sex couples' access to parenthood, particularly among lawyers/attorneys with experience in the area of family and parenting. More recently, Gato et al. (submitted) aimed to understand how Portuguese adoption professionals conceptualized and prepared to work with LGB parents and verified that the discourses of these professionals oscillated between awareness of the existing stigma in Portugal against sexual minorities and heteronormative stances regarding same-sex couple adoption. Thus, there are reasons to believe that both experienced and anticipated stigma may interfere with sexual minority persons' parental decisions.

Our knowledge of the factors shaping parenthood intentions of LGB individuals is still scarce (e.g., Baiocco and Laghi, 2013; Riskind et al., 2013; Costa and Bidell, 2017; Gato et al., 2017, 2019; Salinas-Quiroz et al., 2019; Scandurra et al., 2019; Tate et al., 2019). The current study aims to contribute to fill in this gap, by characterizing parenthood intentions amongst LGB and heterosexual young adults without children. More specifically, we aimed (i) to investigate differences in parenthood

intentions as function of sexual orientation, (ii) to explore the role of sociodemographic and psychological characteristics in parenthood intentions, (iii) to test if stigma mediated the effect of sexual orientation on parenthood intentions, and (iv) to identify profiles of prospective parenthood, by describing the characteristics of those who belong to distinct groups who differ with respect to their views on becoming a parent in the future.

Psychological Predictors of Parenthood Aspirations

In common with any other psychological construct, parenthood aspirations depend upon many contextual and individual variables. Thus, research has considered the influence of sociodemographic and psychological factors on parenthood intentions – and, whenever applicable, on associated concepts such as desires or expectations – of both LGB and heterosexual individuals. The association between psychological variables and parenthood intentions remains relatively understudied, especially among LGB individuals (Tate et al., 2019). Psychological factors have been conceptualized in different ways, such as motivations for pursuing parenthood (Goldberg et al., 2012), attitudes toward infants, children, and parenthood (Tate and Patterson, 2019b), or perceptions of parenting (Lawson, 2004; Baiocco and Laghi, 2013; Gato et al., 2019; Leal et al., 2019b).

Different psychological approaches have been used to investigate attitudes toward parenthood. For instance, Hoffman (1987) examined the perceived value of children to prospective parents. Other perspectives sought to examine appeal of parenthood by looking at the relationship between parenting desire and psychological and demographic factors (e.g., Gerson, 1986). According to Lawson (2004), examinations of the perceptions of the parenthood experience need to go beyond both the needs that children can fulfill for adults and the intensity of the desire for a child to encompass an investigation of the complex interplay between what can be gained and what can be lost in various domains central to life satisfaction (personal, relational, etc.) through parenthood. In essence, such a perspective is organized around the central construct of the anticipated or lived experience of parenthood. In the present work, we adopt Lawson's (2004) approach – perceptions of the parenting experience – as our psychological framework for parenthood intentions.

Perceptions of the parenting experience encompass many facets of parenthood situations that are salient to individuals' lives, namely the perceived emotional enrichment brought by children, perceptions of continuity or generativity, commitment associated with parenthood, anticipated social support from family or the community, feelings of isolation upon parenthood, and the instrumental, emotional, and physical costs associated with having a child. Next, we will review evidence of the association between these (or similar) perceptions of the parenting experience and the parenthood intentions of LGB individuals.

Enrichment

Children are mainly seen as a source of personal satisfaction and a major emotional investment (Giddens, 2005). Not surprisingly,

the appreciation of children as an enriching factor in one's life is an important parental motivation factor identified both among heterosexual persons (Dion, 1995; Langridge et al., 2005; Cassidy and Sintrovani, 2008) and lesbian women and gay men (Siegenthaler and Bigner, 2000; Bos et al., 2003; Goldberg et al., 2012). Consistently, on a subscale measuring the enrichment a child would bring to the lives of their parents, Lawson (2004) found that individuals whose stated intentions were to have children had higher scores than those whose did not state an intention to have children.

Comparative studies nevertheless have revealed that sexual minority individuals without children anticipate lower levels of emotional benefits of the parent-child bond and enjoyment of children than do their heterosexual peers (Baiocco and Laghi, 2013; Leal et al., 2019b). In the same way, Tate and Patterson (2019b) verified that lesbian women reported that they had fewer favorable experiences with infants and/or children than did heterosexual women.

Continuity

The perception that a child can guarantee the continuity of the family line and can provide support later in life also has been described as a motivator for parenthood (Lawson, 2004; Langridge et al., 2005; Goldberg et al., 2012). Interestingly, heterosexual men in Langridge et al.'s (2005) study were more likely than women to identify "continuing the family name" as a motivator for parenthood. However, lesbian women seemed less focused on generativity and passing on of family tradition than heterosexual women (Siegenthaler and Bigner, 2000). To our knowledge, published studies have not yet examined lineage consideration as a factor for gay men or bisexual people.

Social Support

The availability of people within personal social networks who can offer comfort, love, and encouragement is of the utmost important for the well-being of all individuals (Sarason et al., 1983). Regarding sexual minority individuals, some studies reported that they may be disadvantaged regarding social support, especially within their families (e.g., Tate et al., 2019). Lacking this type of support, LGB persons sometimes depend upon other relational networks, such as friends or former partners (Weston, 1991; Lyons et al., 2013; Knauer, 2016; Leal et al., 2019a). Other studies suggest that after becoming parents, lesbian women and gay men report, on the one hand, enhancement of the relational bonds with their parents (DeMino et al., 2007; Bergman et al., 2010; Goldberg and Smith, 2011) and, on the other hand, an increased distance toward the LGBT community (Gabb, 2004; Mallon, 2004; Gianino, 2008; Simon et al., 2019). Somewhat of a paradox is the observation that while access to parenthood is widely regarded as a universal right among the LGBT community, becoming a parent is still often considered as a heteronormative act. In this regard, sexual minority women in Simon et al. (2019) study expected less support from friends when they had children.

Different aspects of social support have been associated with both heterosexual and LGB individuals' parenthood intentions. Regarding the former, those who feel close to parents and

other family members, who are involved in long-term romantic partnerships, and who have supportive social networks are more likely than others to report intending to become parents (Starrels and Holm, 2000; Lawson, 2004; Langridge et al., 2005). As for sexual minority individuals, the lesbian women and gay men without children in Baiocco and Laghi's (2013) study reported being less confident about receiving social support as parents in the future than did heterosexual counterparts. According to the authors, these results seemed to reflect the social and legal climate in Italy, where negative attitudes toward lesbian and gay parenthood prevailed, and where it seemed unlikely in the near future for same-sex couples to access rights to civil partnerships and legal marriage, foster care, or adoption. Also in Italy, Scandurra et al. (2019) verified that support from family, or that of significant people, could act as a buffer against the effect of stigma on parenthood desires and intentions. Leal et al. (2019b) found that, irrespective of sexual orientation, individuals without children in Portugal anticipated more social support in parenthood and less stigma if they decided to have children, compared to their counterparts from the United Kingdom. This seemed to apply to heterosexual and to LGB persons equally, with the more familistic culture of Portugal acting as a centripetal force pulling family members together across the generations (Hofstede, 2011; McGoldrick et al., 2015; Steinbach et al., 2016; Tanaka and Johnson, 2016). Regarding the predictive power of social support aspects on parenthood intentions, Tate et al. (2019) found that having more favorable parental relationships and more close friends were associated with greater likelihood of parenthood intentions, irrespective of a participant's sexual orientation.

Financial, Emotional, and Physical Costs

Most reviewed studies have shown that perceptions of costs are negatively associated with parenthood intentions. Regarding financial aspects, during the last decade high youth unemployment rates and the precariousness of existing jobs have led to financial instability and to the postponement of family projects by Portuguese young adults (Oliveira et al., 2014; PORTDATA, 2019a). In the case of sexual minority persons, both the stigma and costs associated with adoption and assisted reproduction (Mezey, 2008; Downing et al., 2009; Goldberg et al., 2012; Riskind et al., 2013; Blanchfield and Patterson, 2015; Simon et al., 2018; Tate et al., 2019) make entry into parenthood a more costly social and economic undertaking than for heterosexual persons (Riskind et al., 2013; Blanchfield and Patterson, 2015; Simon et al., 2018; Tate et al., 2019). In fact, Tate and Patterson (2019b) found that lesbian women perceived parenthood as having a considerable cost and that this alone largely accounted for differences in parenthood aspirations between them and their heterosexual counterparts.

Nevertheless, like other parenting perceptions (e.g., social support), differences in anticipated social and economic costs seem to be moderated by factors such as culture. Thus, Leal et al. (2019b) noted more sizeable differences between sexual minority and heterosexual persons without children in the United Kingdom than in Portugal. In the United Kingdom, LGB individuals perceived parenthood to be less of a source

of psychological enrichment, anticipated greater isolation upon parenthood, and also perceived higher costs involved in parenthood compared to their heterosexual counterparts. Not so in Portugal where a Southern European culture favored a more pronatalist and familistic cultural outlook than in the United Kingdom (Hofstede, 2011; Steinbach et al., 2016; Tanaka and Johnson, 2016). Lawson (2004) found no association between the evaluation of costs associated with parenting and parenthood intentions. According to Lawson these costs may be perceived simply as an inherent part of the parenting experience by all individuals, regardless of their parenthood intentions (Lawson, 2004). But a plausible alternative is that this may be a facet of Lawson's sample characteristics. Although recognized, the costs of parenting may not yet have been salient to the reproductive decisions of studied young adults without children, many of whom may be weighing up parenthood as a distant future possibility.

Commitment and Isolation

The level of commitment associated with parenting a child and the imposition of a child upon daily life are both negative perceptions of parenthood that apparently were not related to stated intent to become a parent in Lawson's (2004) study. In addition Leal et al. (2019b) did not find any differences in these aspects between heterosexual and LGB individuals studied in the United Kingdom or Portugal.

Anticipation of Stigma Upon Parenthood

Although not considered in Lawson's original framework of intent to parent, there are reasons to believe that anticipated stigma may affect decision making (Hicks, 2000; Gartrell et al., 2005; Matthews and Cramer, 2006; Bos and van Balen, 2008; Eady et al., 2009; Yager et al., 2010; Mellish et al., 2013; Riskind et al., 2013; Bauermeister, 2014; FRA, 2014; Kimberly and Moore, 2015; Gato and Fontaine, 2016, 2017; Gato et al., 2017, 2019; Xavier et al., 2017; Eurobarometer, 2019; Scandurra et al., 2019; Tasker and Bellamy, 2019). In this regard, using a general measure of anticipated stigma upon parenthood (i.e., eliciting unfavorable reactions from others as a parent), Gato et al. (2019) found that lesbian women considered themselves at a higher risk of becoming a victim of social stigma as a mother than did either bisexual or heterosexual women in Portugal. In addition, anticipated stigma upon parenthood negatively predicted women's parenthood intentions, independently of their sexual orientation.

Sociodemographic Predictors of Parenthood Aspirations

Sociodemographic predictors of parenthood aspirations can include factors such as gender, age, income, professional status, educational level, relationship status, and religion.

Gender is one of the most studied predictors of parenthood aspirations among LGB individuals (Gato et al., 2017). Some studies have shown that lesbian women and gay men differ in their parenthood intentions: lesbian women reported both greater desire for parenthood and more intent than did their male peers (Riskind and Patterson, 2010; Baiocco and Laghi,

2013). Furthermore, gay men who desired to become a parent were less likely than heterosexual men to intend to have children, whereas this discrepancy was not observed among lesbian women (Riskind and Patterson, 2010; Baiocco and Laghi, 2013). Furthermore, gender was notable as a significant predictor of parenthood aspirations among monosexual and plurisexual persons in Mexico (Salinas-Quiroz et al., 2019). A gap between desire and likelihood estimations of having children also was found among Israeli gay men (Shenkman, 2012). In contrast, two studies conducted in the Portuguese context (Costa and Bidell, 2017; Leal et al., 2019b) revealed no significant gender difference in parenthood aspirations among LGB individuals.

Several factors could contribute to gender differences in parenthood aspirations. First, being able to gestate a child would ostensibly give women more options for achieving parenthood compared with men. As women, lesbian individuals also are likely to be influenced by normative gender roles. As an expression of these traditional feminine gender roles, women tend to be perceived as more committed to family life and more “maternal” (Wall, 2007). Concurrently, independent of their sexual orientation, women are more pressured to parent than men. Second, parenthood without the presence of a different gender person is still seen as contesting the heteropatriarchal definition of masculinity (Benson et al., 2005; Hicks, 2013) and also femininity (Dalton and Bielby, 2000; Epstein, 2002; Pelka, 2009). Furthermore, gay men are perceived as not only challenging the stereotype of men within mainstream culture but also within the norms surrounding gay culture, which until recently has been free of parenthood concerns (Mallon, 2004; Schacher et al., 2005; Stacey, 2006; Salvati et al., 2019). Moreover, the inaccurate association between male homosexuality and child abuse has posed an additional challenge of suspicion directed at gay men’s parenthood aspirations (Gross, 2012). Patterson and Riskind (2010) further have suggested that a lack of familiarity with alternate paths to parenthood could be involved in the reticence of gay men compared to lesbian women.

Age

In the United States, younger individuals are more likely to report that they intend to become parents (Williams et al., 1999). Regarding Portugal, the situation is paradoxical. On the one hand, Portuguese individuals (irrespective of sexual orientation) seem to report high levels of parenthood desires and intentions, at least when compared to their counterparts from the United Kingdom (Leal et al., 2019b). On the other hand, Portugal presently has one of the lowest fertility indexes in Europe (PORDATA, 2019a), and Portuguese women’s age at the birth of their first child has been increasing steadily in the recent years from 26.5 years in 2000 to 30.4 years in 2018 (PORDATA, 2019b). Given that fertility among women is associated with age, it is expected that younger women without children would express more intention for parenthood than older women in the same circumstances.

Individual lives are shaped by the historical times and places experienced across the life course (Elder, 1998). Not surprisingly, there is a cohort effect pertaining to the parenthood aspirations

of LGB individuals (Gato et al., 2017). Older sexual minority individuals appear to have been exposed to discourses that equate homosexuality with childlessness (Mallon, 2004). Younger LGB individuals without children are thus more likely to desire and intend to have children than their older peers (D’Augelli et al., 2008; Rabun and Oswald, 2009; Riskind and Patterson, 2010; Riskind et al., 2013; Costa and Bidell, 2017; Gato et al., 2019). Thus, while parenthood desires and intentions might be greater in a familistic society, such as the Portuguese one, both practical and economic complexities apparently play a role in the postponement of this project (Leal et al., 2019b).

Professional and Educational Status

Having a job and a source of income are usually seen as instrumental precursors to having children (Umberson et al., 2010). As mentioned before, these aspects may be particularly relevant to sexual minority individuals’ parenthood decisions, given the costs associated to adoption and assisted reproduction (Mezey, 2008; Downing et al., 2009; Goldberg et al., 2012; Riskind et al., 2013; Blanchfield and Patterson, 2015; Simon et al., 2018; Tate et al., 2019). In this regard, Simon et al. (2018) found that, compared to their heterosexual and bisexual peers, lesbian women were more likely to want a permanent professional position before having children. Educational level is usually associated with higher income earning power, and it is to be expected that individuals who reach a higher level of education would also be more proficient in attaining parenthood. In fact, Tate et al. (2019) verified that education was positively associated with the parenthood intent of individuals who were without children, irrespective of their sexual orientation.

Relational Status

May influence decisions about future parenthood in diverse ways. Single parents usually have lower income levels than couples and this may hinder the parenthood intentions of any single individual (Maldonado, 2017). However, sexual minority people may be less vulnerable to the heteronormative narrative of having a child inside the marriage and be more willing to consider single parenthood or create a family of choice (Riggle et al., 2008). Nevertheless other research evidence appears to be contradictory perhaps with interacting cultural manifestations. Gato et al. (2019) found that relational status predicted only Portuguese heterosexual women’s parenthood desire, with partnered heterosexual participants being more likely to want to have children than their single counterparts. Relational status was not associated with Portuguese lesbian women’s desire for parenthood nor their intent to parent. Conversely, in the United States, Tate et al. (2019) showed that having a greater expectation about relationship permanence was associated with a greater likelihood of intent to become a parent irrespective of sexual orientation.

Religion

Individuals that are more religious are more likely to report the intention to become a parent (Hayford and Morgan, 2008). In fact, Tate et al. (2019) verified that greater religiosity was associated with a greater likelihood of parenthood intentions,

irrespective of participants' sexual orientation. Although Portugal is usually viewed as a Catholic country, this religion no longer appears to exert a prevailing influence on social values: "In a modern way, Portugal is simultaneously a secularized, religious and catholic country" (Dix, 2010, p. 25).

Research Aims

Taking into account the literature reviewed above, we devised the following two research questions and two hypotheses (when applicable):

Research question 1: How do parenthood intentions vary as a function of sexual orientation and gender?

H1: We expected heterosexual individuals to intend more to become parents than LGB individuals (Patterson and Riskind, 2010; Riskind and Patterson, 2010; Goldberg et al., 2012; Shenkman, 2012; Baiocco and Laghi, 2013; Riskind et al., 2013; Riskind and Tornello, 2017; Simon et al., 2018; Gato et al., 2019; Leal et al., 2019b; Tate and Patterson, 2019a,b).

Research question 2: Which demographic and psychological factors are predictive of parenthood intentions, and is the nature or strength of these predictions associated with sexual orientation?

H2: We expected anticipated stigma upon parenthood to mediate the relationship between sexual orientation and parenthood intentions, i.e., the effect of stigma will affect mostly LGB individuals' parenthood intentions (Hicks, 2000; Gartrell et al., 2005; Matthews and Cramer, 2006; Bos and van Balen, 2008; Eady et al., 2009; Yager et al., 2010; Mellish et al., 2013; Riskind et al., 2013; Bauermeister, 2014; FRA, 2014; Kimberly and Moore, 2015; Gato and Fontaine, 2016, 2017; Gato et al., 2017, 2019, Gato et al., submitted; Xavier et al., 2017; Eurobarometer, 2019; Scandurra et al., 2019; Tasker and Bellamy, 2019).

Research question 3: Taking into account the sociodemographic and psychological characteristics of participants, what profiles of prospective parenthood can be found and how are these characterized?

MATERIALS AND METHODS

Participants

Our convenience sample was composed of 375 young adults without children, ranging from 18 to 35 years of age ($M = 25.8$; $SD = 4.49$). Sexual orientation was assessed with a categorical measure that asked participants to identify as heterosexual, bisexual, lesbian, or gay: 44 defined themselves as lesbian women, 78 as gay men, 59 as bisexual women, 7 as bisexual men, 113 as heterosexual women, and 73 as heterosexual men. Thus, 47.3% of the participants identified themselves as LGB individuals. Concerning race/ethnicity, participants answered an open-ended question and the large majority (96.5%) considered themselves to be Caucasian/European/white, while the remaining identified as

"Mixed ethnicity" or "Asian." Regarding education level, 69.1% had completed or were completing a university degree. Most participants (61.1%) reported being in a committed relationship, with a mean duration of 41.5 months ($SD = 37.2$). Differences were observed in relationship duration as function of sexual orientation, $t(224) = 2.54$, $p = 0.012$, $d = 0.34$, with heterosexual individuals having longer relationships ($M = 47.33$; $SD = 40.08$) than LGB individuals ($M = 34.88$; $SD = 32.58$). Approximately half of the sample (47.4%) were students, 7.3% were unemployed, and the remainder had a full-time or part-time job. Sample characteristics are presented in **Table 1** and grouped by sexual orientation (LGB or heterosexual). The groups, as defined by sexual orientation, did not differ in age, education level, employment status, and relational status. However, the groups did differ with respect to the importance of religion in their life, with LGB persons reporting lower levels when compared to heterosexual persons.

To calculate the adequacy of our sample size we used *G Power Software* (version 3.1) (Faul et al., 2007). A power analysis, with an $\alpha = 0.05$ and power = 0.95, showed that the projected minimum sample size needed to detect an effect size of $f = 0.15$ is $n = 189$ (for a Linear Multiple Regression, fixed model, 13 predictors). In turn, a power analysis, with an $\alpha = 0.05$ and power = 0.95, showed that the projected minimum sample size needed to detect an effect size of $f = 0.15$ is $n = 178$ (for a Linear Multiple Regression, fixed model, 11 predictors).

Procedure

Data were collected on-line from April to June 2015, as part of a larger study, "Lesbian, gay, and bisexual parenthood: Psychological determinants and experiences in the social context," and given ethical approval by the institutional review board of the host institution. At the time of data collection, Portuguese law did not allow same-sex couples to adopt and only infertile women in a different-sex relationship had access to ART.

Recruitment procedures were the same for LGB and heterosexual participants and the study was advertised in general and in LGB oriented websites and social media (e.g., Facebook). The following recruitment text was used: "To have or not to have (more) children? This is a question many people ask themselves. Would you be able to help us make a difference in awareness and understanding of what influences people's decision to parent or, if you are already a parent, what influences your decision whether or not to have more children? To participate you must be over at least 18 years of age and we are interested in your opinion regardless of your gender, sexual identity or parental status. By clicking the following link, you will find more information about this survey which is being conducted at (host institution)." The research was conducted in three countries and given the goal of the present study our sample focused on participants without children from Portugal aged under 35 years old. The age of 30 years is usually the upper limit when studying young adulthood (e.g., Oliveira et al., 2014). In this study, we opted for 35 years old, given the following specificities of the Portuguese context. In 2019, Portugal was one of the countries with the highest average age of leaving parental home (29 years) (Eurostat, 2020). In 2018, women's age at the birth of their first child was

TABLE 1 | Sample characteristics and differences between LGB and heterosexual individuals in sociodemographic variables.

	LGB persons (<i>n</i> = 189)		Heterosexual persons (<i>n</i> = 186)		
Variable	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	
Age	26.2	4.94	25.5	3.97	$t(358.671) = -1.458, p = 0.146, d = 0.15$
Educational level	1.68	0.47	1.70	0.46	$t(373) = 0.342, p = 0.732, d = 0.04$
Religious values	2.02	1.13	2.72	1.37	$t(354.815) = 5.352, p < 0.001, d = 0.56$
	n	%	n	%	
Gender					
Female	103	54.5%	113	60.8%	$\chi^2(1) = 1.502, p = 0.251, \Phi = 0.06$
Male	86	45.5%	73	39.2%	
Work status					
Work	89	47.1%	79	43.6%	$\chi^2(1) = 0.442, p = 0.532, \Phi = 0.04$
Don't work	100	52.9%	102	56.4%	
Relational status					
In a relationship	107	56.6%	122	65.6%	$\chi^2(1) = 3.178, p = 0.090, \Phi = -0.09$
Not in a relationship	82	43.4%	64	34.4%	

30.4 years (PORDATA, 2019b), and mean age on first marriage was 32.1 years for women and 33.6 years for men (PORDATA, 2019c). Furthermore, a traditionally high youth unemployment rate and low social expenditure targeted at young adults (e.g., housing), allied with high familistic values have an impact on the postponement of adult roles in Portugal (Oliveira et al., 2014). Finally, taking in consideration the barriers of parenthood faced by sexual minority individuals (Gato et al., 2017), it seems reasonable to assume that the transition to parenthood in this population may happen even later when compared to heterosexual individuals.

The confidentiality and anonymity of data was guaranteed with a survey link hosted on a server of the host institution which did not allow for the identification of the IP addresses. There were no mandatory answers and an “exit” or “withdraw” button on each page permitted participants who chose to do so to withdraw from the survey at any given time. Contact details for the principal researcher were provided should participants have any concerns or questions. Informed consent was presented electronically on the first page of the survey and participants indicated that they had read and understood consent information by checking boxes at the start of the questionnaire. Completing the questionnaire took no longer than 15–20 min and participation was without monetary compensation.

Measures

Sociodemographics

To examine the sociodemographic composition of our sample, we asked participants about their age, gender, sexual orientation, education level, relational status, duration of relationship, and employment status. Gender was assessed as follows: 1 = Female, 2 = Male, 3 = Transgender, 4 = Transsexual, 5 = Other (Please specify). Considering sexual orientations, participants faced the following options: 1 = Heterosexual, 2 = Lesbian woman, 3 = Gay man, 4 = Bisexual, 5 = Other (please specify). In turn, educational level was assessed considering: 1 = 4 years

of school, 2 = 6 years of school, 3 = 9 years of school, 4 = 12 years of school, 5 = Graduation, 6 = Master Degree, 7 = PhD. Importance of religious values was assessed using a Likert-type scale ranging from 1 (*Not important at all*) to 6 (*Extremely important*). Participants reported themselves to be in a committed relationship with a *yes* or *no* answer and the duration of the relationship was reported in months. Lastly, employment status was assessed through: 1 = Full-time job, 2 = Part-time job, 3 = Unemployed, 4 = Student, 5 = Student Worker.

Parenthood Intentions

To assess this variable we relied on the work of Riskind and Patterson (2010), who used a single item from the 2002 USA National Survey of Family Growth. We added to the original item, two additional items. Participants read the instruction, “Sometimes what people want and what they intend are different because they are not able to do what they want. Looking to the future. . .,” and were confronted with the following items, (i) “. . . I intend to have a child at some point” (original item), (ii) “. . . I have already decided that I’m going to be a parent,” and (iii) “. . . having a child is part of my future plans.”

Response options formed a 5-point Likert type scale, from 1 (*definitely no*) to 5 (*definitely yes*). The adaptation of the original items to the Portuguese language included a process of translation/retroversion. Subsequently, the facial validity of this version was ensured based on a cognitive interview with a group of Portuguese young adults. Small semantic adjustments to the items were made taking into account the obtained suggestions. The internal consistency value (Cronbach’s alphas) of this measure is presented in **Table 2**.

Perceptions of Parenting

Attitudes toward parenthood were assessed using an adaptation of the Perception of Parenting Inventory (POPI; Lawson, 2004). This instrument comprises 28 items and measures dimensions of the parenting experience salient to individuals’

TABLE 2 | Internal consistency of parenthood intentions and parenting perceptions.

	Total	Lesbian, gay, and bisexual persons	Heterosexual persons
Parenthood intentions	0.95	0.95	0.94
Enrichment	0.88	0.88	0.89
Isolation	0.76	0.75	0.76
Commitment	0.62	0.58	0.65
Continuity	0.38	0.33	0.44
Costs	0.65	0.64	0.66
Social support	0.80	0.82	0.82
Anticipation of stigma upon parenthood	0.78	0.77	0.74

lives (Lawson, 2004). Considering the instructions used by Lawson (2004), participants were asked to think about what parenting a child would be like. Beyond measuring the extent to which respondents value (or disvalue) these aspects of being a parent, the instrument assesses the extent to which respondents perceive that each aspect would be (or is) personally experienced in a parenting situation. The *Enrichment* subscale was composed of eight items, and evaluates the benefits that a child would bring to the lives of their parents (e.g., “Caring for the child would bring me happiness”); *Continuity* consisted of four items assessing perceptions of generativity and continuity of the family (e.g., “The child would carry on my family line”); *Commitment* also made up of four items and tapped into the level of commitment associated with the decision to have a child (e.g., “The child would be dependent on me for the rest of my life”); *Social support*, was composed of three items to assess the perception of social support from the family or the community (e.g., “My friends and family would help me to care for the child”). The subscale *Instrumental costs* included five items and evaluated the difficulties associated with having children (e.g., “I would worry about the child’s future”). Since this subscale included instrumental costs (e.g., financial), as well as emotional and physical costs, we decided to omit the “Instrumental” qualifier. Finally, the subscale *Isolation*, composed of four items, evaluated the interference of a child with a parent’s free time (e.g., “I would have less time to spend doing what I enjoy”). We also added five items that aimed to measure the anticipation of stigma upon parenthood: (i) “The child could be treated unfairly by people”; (ii) “My friends would find it strange if I had a child”; (iii) “Other people would find it strange if I had a child”; (iv) “People would have doubts about my parenthood skills”; and (v) “My family would find it strange if I had a child.”

Items were assessed using a Likert scale from 1 (*strongly disagree*) to 6 (*strongly agree*), with higher scores reflecting a greater endorsement that a dimension characteristic would be personally experienced. The adaptation of the instrument to the Portuguese language included a process of translation/retroversion by a qualified professional. Subsequently, the face validity of this version was ensured based on the same methodology as used with the previously described

instrument. The internal consistency values (Cronbach’s alphas) of all the perceptions measured are presented in **Table 2**. The subscale Continuity revealed low internal consistency and was abandoned in the remainder of the present study.

Data Analysis Procedure

To eliminate confounding effects regarding gender, age, education level, employment status, relational status, and duration of relationship from our consideration of sexual orientation on parenthood intentions, we used *t*-tests and chi-square tests to inspect group differences (LGB vs. heterosexual persons) regarding these variables. An independent samples *t*-test was used to explore the differences between LGB and heterosexual persons in parenthood intentions. As an exception to two-group comparisons (LGB vs. heterosexual persons), a Kruskal-Wallis test was conducted to inspect differences between lesbian women, bisexual women, gay men, bisexual men, heterosexual women, and heterosexual men, regarding parenthood intentions.

Hierarchical regression models on parenthood intentions were run separately for LGB and heterosexual participants. The first block of predictors included sociodemographic features such as gender (0 = female; 1 = male), age, educational level, work status (0 = not working; 1 = working), relational status (0 = not in a relationship 1 = in a relationship), and religiosity. The second block comprised the dimensions of parenting perceptions that correlated with parenthood intentions.

Sobel’s test is the most commonly used and recommended test to analyze the significance of simple mediation effects (Preacher, 2019). Indicators needed for Sobel’s test were calculated using SPSS and an interactive tool available online was used for the calculation of the Sobel test itself (Preacher, 2019).

To identify profiles of prospective parenthood, hierarchical cluster analysis was performed, using parenthood intentions, anticipation of stigma, and enrichment as variables. Kruskal-Wallis enabled the exploration of the different clusters. In order to further characterize the obtained clusters, associations between the different clusters and the sociodemographic characteristics (gender, sexual orientation and relational status) of the sample were explored sequentially (one demographic characteristic at a time) using the Chi-square statistic with the Monte Carlo simulation correction applied (Marôco, 2011).

RESULTS

We began our analyses by looking at the distribution of the continuous variables used in the study and values were within the normality range regarding both skewness (−0.390 to 1.364) and kurtosis (−0.522 to 3.99) (**Table 3**; Byrne, 2010; Hair et al., 2014). Next, we report results regarding: (i) differences in parenthood intentions, (ii) predictors of parenthood intentions among LGB and heterosexual individuals, (iii) mediation effects of anticipated stigma on parenthood intentions, and (iv) profiles of prospective parenthood.

TABLE 3 | Correlations between independent variables and parenthood intentions.

Variables	Sk	Ku	M	SD	1	2	3	4	5	6	7
1. Parenthood intentions	−0.77	−0.52	3.63	1.31	—						
2. Enrichment	−1.58	4.00	5.57	1.00	0.64***	—					
3. Isolation	−0.39	0.30	4.59	1.21	−0.27***	−0.30***	—				
4. Commitment	−0.55	−0.19	5.71	0.88	0.004	0.09	0.18***	—			
5. Costs	−0.81	0.99	5.62	0.85	−0.22***	−0.23***	0.66***	0.31***	—		
6. Social support	−1.17	2.48	5.49	1.11	0.19***	0.33***	0.03	0.03	−0.02	—	
7. Anticipation of stigma upon parenthood	0.42	−0.52	3.36	1.34	−0.38***	−0.21***	0.27***	0.16**	0.27***	−0.23***	—

** $p < 0.01$; *** $p < 0.001$.

Parenthood Intentions as a Function of Sexual Orientation and Gender

Considering the effect of sexual orientation on parenthood intentions, groups differed significantly, $t(358.8) = 5.38$, $p < 0.001$, $d = 0.56$, with LGB persons reporting lower levels of parenthood intentions ($M = 3.47$; $SD = 1.32$) when compared to their heterosexual counterparts ($M = 4.13$; $SD = 1.06$). In terms of background variables, participants differed only regarding religious values (Table 1). When we controlled for the effect of the importance of religious values on parenthood intentions, no interaction effects between sexual orientation and religious values were found, $F(5, 345) = 0.573$, $p = 0.721$, $\eta^2 = 0.008$. Hypothesis 1 was thus confirmed.

To further inspect differences in parenthood intentions as function of all groups considered (lesbian women, bisexual women, gay men, bisexual men, heterosexual women, and heterosexual men), and given imbalances in the number of participants in each group, we employed the Kruskal-Wallis non-parametric test to evaluate differences among the six groups on median change in parenthood intentions. The test, which was corrected for tied ranks, was significant and parenthood intentions were thus significantly associated with sexual orientation and gender, $\chi^2(5, N = 375) = 37.8$, $p \leq 0.001$, $\eta^2 = 0.23$. Pairwise comparisons revealed differences between (i) lesbian women and gay men, (ii) gay men and heterosexual men, and (iii) gay men and heterosexual women (a Bonferroni correction was applied controlling for Type I error across tests). Bisexual individuals were not significantly different from any of the other groups. When compared to gay men, lesbian women were more likely to express the intention to have children. In turn, gay men showed lower levels of parenthood intention when compared to heterosexual individuals (Figure 1).

Predictors of Parenthood Intentions

We first examined the significant bivariate correlations between perceptions of parenting and parenthood intentions in the entire sample (see Table 3). All parenting perceptions significantly correlated with parenthood intentions, except for Commitment. We excluded this variable from further analyses in the interest of parsimony and to maximize statistical power.

We then conducted a hierarchical regression analysis with two steps: (a) sociodemographic variables and (b) parenting perceptions. We used Tolerance and VIF as multicollinearity indexes; the most common cutoff employed is a tolerance

value > 0.10 corresponding to a $VIF < 10$. In order to assume the absence of multicollinearity, it is also important that correlations among independent variables are below 0.70 and/or below the correlation between each independent variable and the dependent variable (Hair et al., 2014). All indicators in our regression analyses yielded results within the established cutoff values for multicollinearity ($r \leq 0.66$, $p < 0.001$; LGB individuals' subsample: tolerance > 0.44 ; $VIF < 2.26$; heterosexual individuals' subsample: tolerance > 0.48 , $VIF < 2.01$). Regression models regarding parenthood intentions among LGB and heterosexual participants were significant, explaining respectively 48 and 46% of the outcome variable (Table 4). Concerning sociodemographic features, gender was the only significant and weak predictor of LGB participants' parenthood intentions, suggesting that being a lesbian or bisexual woman was a predictor of planning to parent, among non-heterosexual participants. Among heterosexual participants, work and relational status were also both significant and weak predictors of parenthood intentions, such that being in a relationship and unemployed increased the likelihood of wanting to become a parent. Regarding the second block of predictors, a similar pattern of significant predictors was observed for both LGB and heterosexual samples: enrichment was a positive and moderate predictor and anticipation of stigma was a negative and weak predictor of parental intentions.

Given that we had previously detected differences in relationship duration as a function of sexual orientation, we further scrutinized whether relationship duration was associated with parenthood intent in the two subsamples. No significant correlations were detected either for heterosexual participants ($r = -0.17$, $p = 0.069$), or LGB ones ($r = -0.13$, $p = 0.183$).

Mediation Effect of Stigma in the Relationship Between Sexual Orientation and Parenthood Intentions

Anticipated stigma upon parenthood differed as a function of sexual orientation, $t(354.12) = -7.41$, $p < 0.001$, $d = 0.77$, with LGB individuals reporting higher levels ($M = 3.87$; $SD = 1.36$) than their heterosexual peers ($M = 2.88$; $SD = 1.19$). A mediation effect can occur when an independent variable affects a dependent variable through a mediating variable. As may be observed in Figure 2, anticipated stigma partially mediated the relationship between sexual orientation and parenthood intentions, as the direct effect of the sexual orientation on

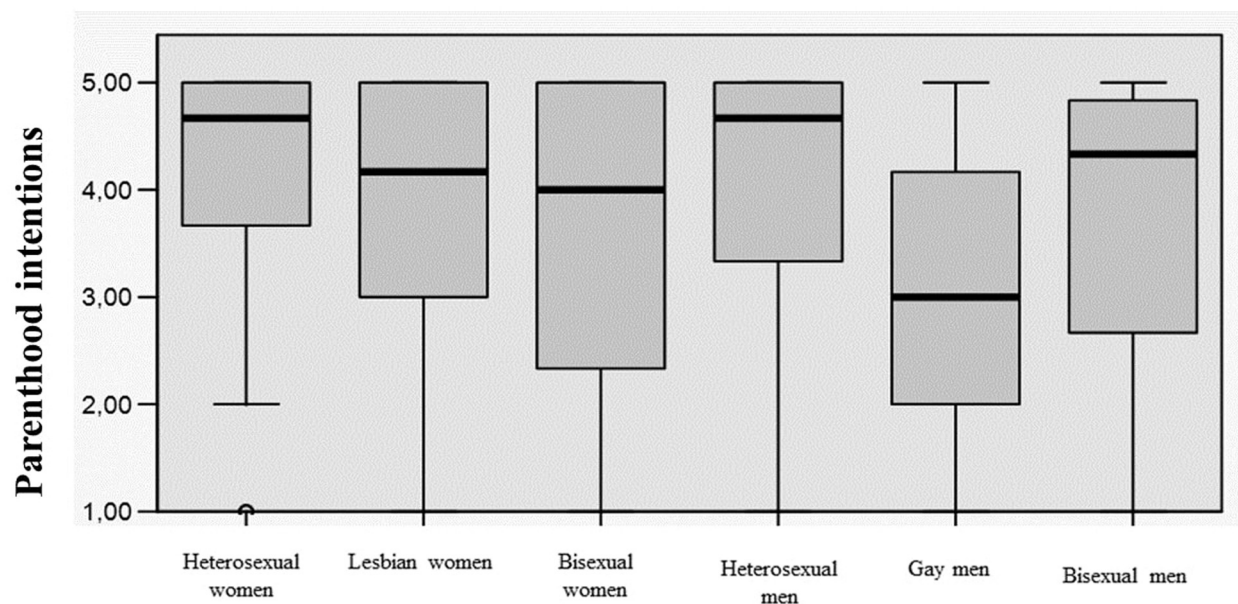


FIGURE 1 | Box plot of the distribution of parenthood intentions among heterosexual women, lesbian women, bisexual women, heterosexual men, gay men, and bisexual men.

TABLE 4 | Summary of hierarchical regression analysis for variables predicting parenthood intentions among LGB and heterosexual individuals.

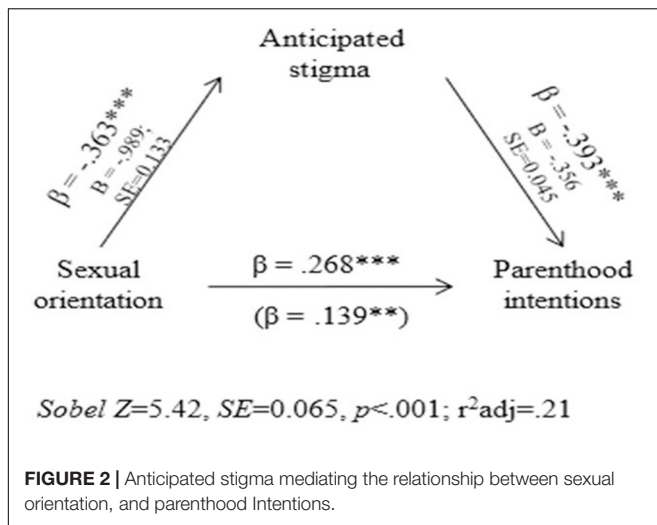
Variable	LGB persons (n = 158)								Heterosexual persons (n = 175)							
	R ²	ΔR ²	B	SE B	95% CI	β	t	P	R ²	ΔR ²	B	SE B	95% CI	β	t	p
Step 1	0.04	0.04							0.07	0.07						
Gender			−0.36	0.16	[−0.67;−0.05]	−0.14	−2.28	0.024			0.15	0.12	[−0.09;0.39]	0.07	1.23	0.220
Age			0.003	0.02	[−0.04;0.04]	0.01	0.13	0.900			0.001	0.02	[−0.04;0.04]	0.003	0.04	0.972
Educational level			0.12	0.09	[−0.05;0.30]	0.10	1.41	0.160			0.09	0.08	[−0.07;0.24]	0.07	1.08	0.281
Work status			−0.09	0.18	[−0.43;0.25]	−0.04	−0.52	0.605			−0.34	0.15	[−0.63;−0.06]	−0.16	−2.35	0.020
Relational status			0.27	0.15	[−0.04;0.57]	0.10	1.75	0.083			0.42	0.12	[0.18;0.66]	0.19	3.42	0.001
Religiosity			−0.14	0.07	[−0.27;0.001]	−0.12	−1.96	0.052			0.06	0.04	[−0.03;0.15]	0.08	1.40	0.164
Step 2	0.52	0.48							0.53	0.46						
Enrichment			0.84	0.09	[0.69;1.01]	0.61	9.76	<0.001			0.62	0.07	[0.48;0.76]	0.58	8.73	<0.001
Isolation			−0.14	0.09	[−0.31;0.04]	−0.13	−1.56	0.121			−0.02	0.07	[−0.16;0.11]	−0.02	−0.32	0.751
Costs			−0.04	0.13	[−0.29;0.20]	−0.03	−0.35	0.725			−0.09	0.10	[−0.28;0.11]	−0.07	−0.89	0.377
Support			−0.06	0.07	[−0.20;0.07]	−0.06	−0.90	0.372			0.04	0.06	[−0.09;0.16]	0.04	0.59	0.558
Stigma			−0.14	0.06	[−0.26;−0.02]	−0.15	−2.34	0.020			−0.16	0.06	[−0.27;−0.05]	−0.18	−2.86	0.005

parenthood intentions ($\beta = 0.268$) decreased ($\beta = 0.139$) when it was mediated by anticipated stigma (48.1% of the total effect of sexual orientation on parenthood intentions was accounted for by anticipated stigma). This model explained 20% of the variance and was statistically significant (*Sobel* $Z = 5.42$, $SE = 0.065$, $p < 0.001$). Thus, anticipated stigma mediated parenthood intentions particularly among LGB individuals and hypothesis 2 was thus confirmed.

Profiles of Prospective Parenthood

Given the exploratory nature of this aim, hierarchical clustering was employed. Hierarchical clustering has been the preferred approach when there are no previous hypotheses or expectations

regarding the number of clusters that could be observed. Furthermore, it is also the most suitable method for a moderate sample size (under 400, not exceeding 1,000) and thus is congruent with the current study (Hair et al., 2014). Entered variables were parenthood intentions and its strongest psychological predictors (enrichment and anticipated stigma). A range between two and four clusters were requested as possible solutions, and the chosen solution followed the criteria of psychological intelligibility associated with the greatest increase of explained variance (Hair et al., 2014). Thus, the hierarchical cluster analysis revealed that the best solution for the data was a four-group clustering solution, explaining 54% of the variance (preferred over the 22.4% of two-group and the 24.8%



three-group clustering solutions). These clusters were statistically distinct from each other. The results of the Kruskal-Wallis test are presented in **Table 5**, together with the means of the four clusters in the selected dimensions.

Participants in the first and largest cluster presented the highest levels of parenthood intent, the lowest levels of anticipated stigma, and were among those anticipating the highest levels of enrichment through parenthood; this cluster was named as *aspiring parents not anticipating stigma*. The *childfree intent* cluster comprised the residual number of participants who endorsed among the lowest levels of parenthood intentions and thoughts of enrichment through parenthood in the sample, alongside a close to mean level of anticipated stigma associated with parenthood. The third cluster was similar to the previous one in terms of parenthood intentions and anticipated stigma, but participants in this group presented close to mean levels of thoughts of enrichment; this cluster was named as *childfree ambivalent*. Finally, the fourth cluster, *aspiring parents anticipating stigma*, comprised participants highly motivated to become parents who anticipated both the highest levels of enrichment through parenthood but also thought they would experience high levels of stigma when performing this role.

As expected, the first cluster – the aspiring parents not anticipating stigma – was significantly populated by heterosexual women with partners. Conversely, aspiring parents anticipating stigma were mostly men and mostly non-heterosexual. The childfree ambivalent cluster was significantly associated with being a lesbian or bisexual woman. Finally, the least populated cluster – the childfree intent grouping – was mostly composed of participants who were not currently in a relationship (**Table 6**). Significant associations were observed between clusters and gender, $\chi^2(3, N = 347) = 8.79, p = 0.032, \Phi = 0.159$, with women populating more the *aspiring parents not anticipating stigma* cluster and men the *aspiring parents anticipating stigma* cluster. A significant association was also found for sexual orientation, $\chi^2(3, N = 347) = 34.0, p < 0.001, \Phi = 0.313$, with heterosexual persons over represented in the *aspiring parents not anticipating stigma* cluster and LGB persons over represented in the *aspiring parents anticipating stigma* cluster. The same was true for the interaction between gender and sexual orientation, $\chi^2(9, N = 347) = 46.8, p < 0.001, \Phi = 0.367$, with sexual minority women predominant in the *childfree ambivalent* cluster, sexual minority men prevailing in the *aspiring parents anticipating stigma* cluster, heterosexual women predominating in the *aspiring parents not anticipating stigma* cluster, and heterosexual men underrepresented in the *aspiring parents anticipating stigma* cluster. Finally, individuals who were in a relationship were predominant in the *aspiring parents not anticipating stigma* cluster and individuals who were not in a relationship predominant in the *childfree intent* cluster, $\chi^2(3, N = 347) = 8.04, p = 0.045, \Phi = 0.152$. No significant differences were observed regarding age $\chi^2(3, N = 347) = 7.25, p = 0.064, \eta^2 = 0.02$; educational level, $\chi^2(3, N = 347) = 5.29, p = 0.152, \eta^2 = 0.02$; or professional status, $\chi^2(3, N = 342) = 4.60, p = 0.204, \Phi = 0.116$.

DISCUSSION

The main aim of this research was to characterize parenthood intentions of young adults who were without children at the time of the study, taking into account their sexual orientation. Globally, we found that LGB individuals expressed less intent to have children than did heterosexual individuals and that lesbian

TABLE 5 | Means and standard deviations of parenthood intentions, anticipation of stigma, and enrichment for each cluster.

Dimensions	Cluster 1 (n = 228) Aspiring parents not anticipating stigma	Cluster 2 (n = 7) Childfree intent	Cluster 3 (n = 30) Childfree ambivalent	Cluster 4 (n = 82) Aspiring parents anticipating stigma	$\chi^2(3, N = 347)$
Parenthood intentions					
M (SD)	4.32 ^a (0.83)	1.14 ^c (0.38)	2.02 ^c (0.75)	3.41 ^b (1.23)	114.986***
Anticipation of stigma					
M (SD)	2.61 ^d (0.85)	4.00 ^{b,c} (0.91)	3.69 ^c (1.02)	5.13 ^{a,b} (0.75)	195.816 ***
Enrichment					
M (SD)	5.92 ^a (0.61)	1.80 ^b 0.61	4.09 ^b (0.59)	5.75 ^a (0.71)	94.705 ***

Different letters represent statistically significant differences (**p < 0.001) and are ordered to show the increase/decrease of values. Due to an imbalance in the distribution of participants among the four clusters, we resorted to the Kruskal-Wallis test. Means and standard deviations are presented to increase readability of results, instead of ranks.

TABLE 6 | Socio-demographic characteristics' percentages in the different clusters of prospective parenthood.

	Aspiring parents not anticipating stigma (<i>n</i> = 228)	Childfree intent (<i>n</i> = 7)	Childfree ambivalent (<i>n</i> = 30)	Aspiring parents anticipating stigma (<i>n</i> = 82)	% of cases
Gender					
Female	63.2 ¹	42.9	60	45.1 ⁰	58.2
Male	36.8 ⁰	57.1	40	54.9 ¹	41.8
Sexual orientation					
LGB	36.4 ⁰	42.9	63.3	72 ¹	47.3
Heterosexual	63.6 ¹	57.1	36.7	28 ⁰	52.7
Gender × Sexual orientation					
LB women	22.8	14.3	43.3 ¹	29.3	25.9
GB men	13.6 ⁰	28.6	20	42.7 ¹	21.3
Heterosexual women	40.4 ¹	28.6	16.7 ⁰	15.9 ⁰	32.3
Heterosexual men	23.2	28.6	20	12.2 ⁰	20.5
Relational status					
Not in a relationship	31.6 ⁰	71.4 ¹	43.3	42.7	36
In a relationship	68.4 ¹	28.6 ⁰	56.7	57.3	64

0, 1 Significant association (chi-square statistics): 0 = inferior frequency of cases observed/expected; 1 = superior frequency of cases observed/expected.

women were more likely to intend to have children than were gay men. Parenthood intentions of both LGB and heterosexual individuals seemed to be best predicted by similar psychological motivations, that is, by anticipating the emotional enrichment children will bring. Anticipation of stigma upon parenthood partially mediated the relationship between sexual orientation and parenthood intentions: in comparison to their heterosexual peers, LGB individuals who anticipated more stigma upon parenthood were less likely to intend to have children. In turn, four profiles of prospective parenthood were identified: aspiring parents not anticipating stigma, aspiring parents anticipating stigma, childfree intent, and childfree ambivalent. Lesbian and bisexual women were mostly represented in the childfree ambivalent cluster, while sexual minority men predominated in the aspiring parents anticipating stigma cluster.

Consistent with existent literature, LGB individuals reported lower levels of parenthood intentions than did their heterosexual counterparts (Patterson and Riskind, 2010; Riskind and Patterson, 2010; Goldberg et al., 2012; Baiocco and Laghi, 2013; Riskind and Tornello, 2017; Simon et al., 2018; Gato et al., 2019; Leal et al., 2019b; Tate and Patterson, 2019a,b). The barriers still faced by sexual minority people envisaging parenthood may be responsible for this situation (Gato et al., 2017). However, the hypothesis that sexual minority individuals may not feel as socially pressured to have children should also not be discarded as a potential explanation of these results.

In common with studies in Italy and the United States, Portuguese lesbian women in the current study reported higher levels of parenthood intent than did gay men (Riskind and Patterson, 2010; Baiocco and Laghi, 2013). However, this finding is not in accord with previous research conducted in Portugal, which was unable to detect gender differences among sexual minority individuals' parenthood intentions (Costa and Bidell, 2017; Leal et al., 2019b). This discrepancy might stem from sample characteristics, such as age. For instance, Leal et al. (2019b) used the same instrument as we did to assess parenthood

intentions, but sampled a wider age range of participants (18–45 years). As mentioned before, the absence of difference in parenting intentions as a function of gender in older sexual minority individuals might stem from a cohort effect (Elder, 1998; Mallon, 2004; Gato et al., 2017). Future research should therefore continue to investigate this issue. The fact that lesbian women reported higher levels of parenthood intent than did gay men may be attributed to the biological possibility of pregnancy and perhaps gendered views of parenting as a feminine domain (Dalton and Bielby, 2000; Epstein, 2002; Benson et al., 2005; Wall, 2007; Pelka, 2009; Hicks, 2013), prejudice against gay men as candidates for parenthood (Mallon, 2004; Schacher et al., 2005; Stacey, 2006; Berkowitz and Marsiglio, 2007; Gross, 2012), and a lack of familiarity with alternate routes to parenthood in the case of gay men (Patterson and Riskind, 2010).

Finally, bisexual individuals were not different from lesbian women or gay men, nor from heterosexual individuals regarding their parenthood intentions, a result which partially contradicts Gato et al.'s (2019) study, in which differences in parenting intentions were found between bisexual and lesbian women, and heterosexual women. However, the results from the present study are in line with those of Riskind and Tornello (2017) where differences between lesbian and bisexual women were detected. Again, these contradictory findings merit further investigation. Here particular attention should be given to the gender of the partner of bisexual individuals as perhaps being in a relationship with a different gender person might be associated with higher levels of desire for parenthood (Delvoye and Tasker, 2016; Riskind and Tornello, 2017).

The composition and strength of predictive factors for parenthood intentions were similar for both sexual orientations. Tate et al. (2019) likewise found that demographic and sociocontextual variables similarly predicted parenthood intentions among all participants, irrespective of sexual orientation. Again confirming results obtained previously, in the present study, gender predicted LGB participants'

parenthood intentions, which may be explained by the above-mentioned biological and social factors (Dalton and Bielby, 2000; Epstein, 2002; Mallon, 2004; Benson et al., 2005; Schacher et al., 2005; Stacey, 2006; Berkowitz and Marsiglio, 2007; Wall, 2007; Pelka, 2009; Patterson and Riskind, 2010; Gross, 2012; Hicks, 2013).

Notwithstanding the similarities across sexual orientation, some factors were stronger predictors for both lesbian women's and gay men's parenthood intentions whereas other factors were stronger for heterosexual individuals. Parenthood has historically been viewed in the context of relationships that are considered to be more permanent even if these relationships are non-marital. However, relational status predicted only the parenthood intent of heterosexual persons (Gato et al., 2019). This finding suggests that LGB persons may be more immune to heteronormative pressures to have a child within the context of marriage and more willing to create a family of choice or to have children on their own (Riggle et al., 2008). However, as Tate and Patterson (2019b) noted, although lesbian and gay people seem as likely as heterosexual individuals to desire marriage, they also seem less likely to expect that they will marry. Thus, the finding that relational status is not predictive of LGB individuals' parenthood intent may also be interpreted as a realistic appraisal of future life circumstances.

Not having a job increased intent to become a parent among heterosexual, but not among LGB, individuals. This result apparently contradicts the fact that having a job and a source of income are usually seen as necessary instrumental conditions to have children. Participants in our study correspond to a profile of Portuguese emergent adults who are not in paid employment, yet are investing in their education, and who are probably still residing with their parents (Oliveira et al., 2014; PORDATA, 2019a). A tempting explanation would be the following: because these individuals have not entered the job market yet and lack experience of personal life-family work reconciliation difficulties, they may have idealized parenthood. However, this hypothesis needs to be further explored. The fact that employment status did not seem to matter to LGB individuals' parenthood intentions also contradicted previous results (Mezey, 2008; Downing et al., 2009; Goldberg et al., 2012; Simon et al., 2018). We wonder if this may be connected with the period of data collection, when no laws protecting parenthood among LGB individuals had yet been approved in Portugal and the actual possibility of parenthood might still have been seen as too distant.

Psychological predictors explained the major portion of the variance in parenthood intent in the current study, that is, to have children generally seemed to be more dependent upon individuals' cognitive and emotional resources than on structural characteristics. This pattern is understandable within the modern individualization process taking place in the so-called highly industrialized societies (Beck and Beck-Gernsheim, 2002), in which emotional fulfillment and individual well-being tend to be perceived as more important determinants of individual action than do structures such as social class or kinship.

The appreciation of children as an enriching factor in one's future life was the most significant predictor of parenthood intentions, which is consistent with the contemporary view

of children as a source of personal satisfaction and a major emotional investment (Giddens, 2005). Furthermore, this pattern was independent of sexual orientation (Dion, 1995; Siegenthaler and Bigner, 2000; Bos et al., 2003; Lawson, 2004; Langridge et al., 2005; Cassidy and Sintrovani, 2008; Goldberg et al., 2012).

Similarly to Lawson's (2004) findings, in our study it was a positive aspect of parenting (enrichment) and not negative ones (such as isolation or costs) that emerged as predictive of parenthood intentions. As Lawson stated, negative perceptions of the parenting experience, although recognized, may not yet be salient to the reproductive decisions of young adults without children. Thus, it may be the expectation of more positive aspects of parenting that distinguishes those who are motivated to be a parent from those who are not. Furthermore, in Lawson's (2004) study, perceptions of parenting were more predictive of parenthood intentions within a general community sample than within a sample of young individuals without children, most of whom were highly educated. We concur with Lawson's explanation for this result: attitudes, intentions, and behavioral outcomes are most strongly related when the behavior is immediate and more weakly related in the case of a potential future behavior (Ajzen and Madden, 1986). In brief, it is likely that these young people had very tentative parenting motivations at this time in their lives.

Anticipation of stigma upon parenthood mediated the relationship between sexual orientation and parenthood intentions, suggesting that this perception is indeed a deterrent to LGB individuals' parenthood plans (Gartrell et al., 2005; Bos and van Balen, 2008; Eady et al., 2009; Gato et al., 2017, 2019; Scandurra et al., 2019). This is not surprising if we take into account the high levels of prejudice perceived by LGBT individuals in Portugal (FRA, 2014; Eurobarometer, 2019).

Nonetheless, the anticipation of stigma upon parenthood negatively predicted participants' parenthood intentions in both LGB and heterosexual groups. In order to allow for group comparisons, the subscale "anticipated stigma upon parenthood" was composed of items that probably did not effectively capture the specificities of stigma directed at sexual minority individuals. Nevertheless, there may be various reasons for perceiving stigma upon parenthood, and these appeared to influence parenthood intent for heterosexual individuals too. Still, the fact that stigma significantly mediated the relationship between sexual orientation and parenthood intentions is indicative that this variable affects LGB individuals more than heterosexual individuals in terms of intent to parent.

The fact that heterosexual individuals mostly populated the aspiring parents not anticipating stigma group, and LGB individuals the aspiring parents anticipating stigma and childfree ambivalent groups, is illustrative of the barriers that the latter may face regarding parenthood. Clearly, parenthood is still a domain more positively considered by heterosexual individuals, in particular by heterosexual women. As we mentioned before, biological and social factors converge to possibly explain these results (Dalton and Bielby, 2000; Epstein, 2002; Mallon, 2004; Benson et al., 2005; Schacher et al., 2005; Stacey, 2006; Berkowitz and Marsiglio, 2007; Wall, 2007; Pelka, 2009; Patterson and Riskind, 2010; Gross, 2012; Hicks, 2013). When societal

discrimination and stigma interfere with the aspirations of LGB individuals to have children, this might in turn have negative consequences in terms of their well-being and mental health (Hatzenbuehler et al., 2010; Shenkman, 2012; Bauermeister, 2014). Thus, the overrepresentation of LGB individuals in the childfree ambivalent and aspiring parents anticipating stigma profiles is a concerning result. More specifically, sexual minority women were overrepresented in the childfree ambivalent cluster while sexual minority men were overrepresented in the aspiring parents anticipating stigma cluster. This way, gendered views of parenting as a feminine domain (Dalton and Bielby, 2000; Epstein, 2002; Benson et al., 2005; Wall, 2007; Pelka, 2009; Hicks, 2013) as well as prejudice against gay male (prospective) parents (Mallon, 2004; Schacher et al., 2005; Stacey, 2006; Berkowitz and Marsiglio, 2007; Gross, 2012) might account for gender differences in the parenthood intent of sexual minority individuals.

Limitations, Future Directions, and Implications for Practice

Notwithstanding its contributions, this study was not without some caveats. Our convenience sample was highly educated and thus not representative of the Portuguese population in general. In this respect, it is worth noting that while 69.1% of our participants had completed (or were completing) a university degree, in 2016 only 17.8% of the Portuguese population had attained this educational level (PORDATA, 2020). Neither age, education, nor religiosity predicted parenthood intentions in the present study and this may have been because homogeneity within the study sample restricted variation in these respects. Thus, future studies should recruit more diverse samples in terms of their social and demographic composition. Moreover, there was an imbalance within the LGB group regarding the number of bisexual men, which prevents us from drawing conclusions regarding this group. Given the nature of how the research was advertised (i.e., about attitudes to parent or not parent), the study might have drawn the attention of participants who were interested in parenthood which also imposes limitations to the generalizability of results.

The specificity of stigma directed at sexual minorities and the harmful impact it may have on parenthood intentions is an important area for future research. In particular, an examination of the mediating role of minority stress (Meyer, 2003) variables could be a fruitful research paradigm. In fact, stigma processes seem to partly explain parenthood desires and intentions of lesbian women and gay men without children (e.g., Scandurra et al., 2019).

Although previous studies have reported differences in anticipated costs, isolation, and social support as a function of participants' sexual orientation (Baiocco and Laghi, 2013; Leal et al., 2019b; Tate et al., 2019), these were not associated with parenthood intentions in the present sample and future research should continue to investigate these factors. In the case of LGB individuals, more nuanced aspects of these motivators merit attention. Given financial costs associated with some parenthood options for LGB individuals (Riskind et al., 2013),

the perception of costs associated to LGB individuals' access to parenthood should be assessed. In the case of social support, it would be important to know specifically whether family of origin is a source of support or stigma for future family formation with children. In particular this may become more important for the present generation of young adults who are likely to be dependent upon their parents for longer compared to previous cohorts (Oliveira et al., 2014). Furthermore, young adult dependency may operate differently in familistic cultures, such as the Portuguese one (Hofstede, 2011; Steinbach et al., 2016; Tanaka and Johnson, 2016).

Our psychological predictors explained a considerable portion of the variance in both LGB and heterosexual groups. Nonetheless, other psychological variables could be evaluated in future investigations. More nuanced aspects of relationship status could also be considered in forthcoming works, such as relationship duration, expectations of relationship permanence or expectation of marriage, or whether bisexual individuals are involved in a current same-gender or different-gender partnership (Tate and Patterson, 2019a; Tate et al., 2019). Other variables that could be taken into account in future studies as predictors of parenthood intentions among LGB individuals include adherence to gender roles (Salvati et al., 2018), beliefs on children's adjustment in same-gender parented families (Ioverno et al., 2018), or self-efficacy in the achievement of parenthood (Riskind et al., 2013; Simon et al., 2019). Furthermore, considering that sexual minority individuals may not feel as socially pressured to have children as their heterosexual peers, assessing this would also be advisable. Problems regarding the internal consistency of the subscale continuity should also be addressed.

It would be interesting to have other informants, such as partners and/or parents, to triangulate information and run interdependent analyses. These data could also enable the construction of more complex profiles of prospective parenthood (including profiling couples/families). Finally, given that the present study was conducted before the approval of laws facilitating LGB individuals' access to parenthood, it would be interesting to investigate to what extent parenthood intentions (and their predictors) of sexual minority individuals have changed in Portugal, after these legal modifications occurred in 2016. Another important area of further study could involve the exploration of the relationship between the perceptions of parenting prior to parenthood and the actual experience of parenting both among heterosexual and LGB individuals.

Notwithstanding the limitations of our investigation, some of the strengths of this study warrant mention. First, by including both LGB and heterosexual individuals, we identified both similarities and differences in prospective parenthood that allowed for a more refined understanding of this complex process. Second, we used a multifaceted psychological framework of attitudes toward parenthood to investigate predictors and profiles of prospective parenthood. Third, we included some consideration of bisexual participants, who have often been neglected in previous prospective parenthood research. Finally, one of the major strengths of this study was the inclusion of a cluster analysis which, to our knowledge, has not been used

in previous research about this topic. Cluster analysis is an exploratory analysis that tries to identify homogenous groups of cases not previously known. It is a specifically useful tool to identify different profiles resulting from the combination of different variables; these profiles include the ones that are more represented in society, but also other emergent minority profiles that also need to be considered, in both research and intervention. This assumption perfectly fitted the aims of the current study which sought to underline the heterogeneity of parenting profiles, deconstructing heteronormative stereotypes regarding parenthood.

Our results have important consequences for practice. First, there is a clear need for culturally competent professional practices that both affirm LGB individuals' rights (American Psychological Association [APA], 2012; Moleiro et al., 2017) and consider the specificities of LGB individuals' parenthood plans as identified in this study. Second, anti-discrimination policies protective of sexual minority persons' parenting rights should be enacted or reinforced. Findings may be particularly important for professionals who work with sexual minority individuals in different contexts, such as schools or healthcare services (e.g., family planning consultations in primary healthcare services) (Gato et al., 2019). These professionals should be able to provide scientifically validated information about LGB parenthood and give accurate information about legal support and public services for parents and future parents.

CONCLUSION

The present work has contributed to the emergent field of international research looking at the psychology of family formation in an inclusive and affirmative way. Motivations to have children are apparently similar for heterosexual and LGB individuals; nevertheless, LGB young adults reported lower levels of parenthood intent, which in turn was mediated by higher levels of anticipated stigma upon parenthood. Parenthood

remains a heteronormative and feminine dominated domain, and sexual minority individuals are in a more disadvantaged position regarding parenthood aspirations.

DATA AVAILABILITY STATEMENT

The datasets for this article are not publicly available in order to protect the participants' confidentiality. Requests for datasets should be sent to the corresponding author.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Comissão de Ética da Faculdade de Psicologia e de Ciências da Educação da Universidade do Porto. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

JG designed the study and took the lead in writing the manuscript. DL and SC helped with the literature review and the statistical analyses. FT collaborated in the writing of the manuscript and reviewed its contents. All authors made substantial intellectual contributions to the work, revised the manuscript, and approved it for publication.

FUNDING

This work was funded by the Center for Psychology at the University of Porto, Portuguese Science Foundation (FCT UID/PSI/00050/2013) and EU FEDER through COMPETE 2020 program (POCI-01-0145-FEDER-007294).

REFERENCES

- Ajzen, I., and Madden, T. J. (1986). Prediction of goal-directed behavior: attitudes, intentions, and perceived behavioral control. *J. Exp. Soc. Psychol.* 22, 453–474. doi: 10.1016/0022-1031(86)90045-4
- American Psychological Association [APA] (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *Am. Psychol.* 67, 10–42. doi: 10.1037/a0024659
- Baiocco, R., and Laghi, F. (2013). Sexual orientation and the desires and intentions to become parents. *J. Fam. Stud.* 19, 90–98. doi: 10.5172/jfs.2013.19.1.90
- Bauermeister, J. A. (2014). How statewide LGB policies go from “under our skin” to “into our hearts”: fatherhood aspirations and psychological well-being among emerging adult sexual minority men. *J. Youth Adoles.* 43, 1295–1305. doi: 10.1007/s10964-013-0059-6
- Beck, U., and Beck-Gernsheim, E. (2002). “A life of one's own in a runaway world: individualization, globalization and politics,” in *Individualization*, eds U. Beck and E. Beck-Gernsheim (London: Sage).
- Benson, A. L., Silverstein, L. B., and Auerbach, C. F. (2005). From the margins to the center: gay fathers reconstruct the fathering role. *J. GLBT Fam. Stud.* 1, 1–29. doi: 10.1300/J461v01n03_01
- Bergman, K., Rubio, R. J., Green, R. J., and Padrón, E. (2010). Gay men who become fathers via surrogacy: The transition to parenthood. *J. GLBT Fam. Stud.* 6, 111–141. doi: 10.1080/15504281003704942
- Berkowitz, D., and Marsiglio, W. (2007). Gay men: negotiating procreative, father, and family identities. *J. Marriage Fam.* 69, 366–381. doi: 10.1111/j.1741-3737.2007.00371.x
- Blanchfield, B. V., and Patterson, C. J. (2015). Racial and sexual minority women's receipt of medical assistance to become pregnant. *Health Psychol.* 34, 571–579. doi: 10.1037/hea0000124
- Bos, H. M., and van Balen, F. (2008). Children in planned lesbian families: stigmatisation, psychological adjustment and protective factors. *Cult. Health Sex.* 10, 221–236. doi: 10.1080/13691050701601702
- Bos, H. M., Van Balen, F., and Van den Boom, D. C. (2003). Planned lesbian families: their desire and motivation to have children. *Huma. Reprod.* 18, 2216–2224. doi: 10.1093/humrep/deg427
- Byrne, B. M. (2010). *Structural Equation Modeling With AMOS: Basic Concepts, Applications, and Programming*. Abingdon: Routledge.
- Cassidy, T., and Sintrovani, P. (2008). Motives for parenthood, psychosocial factors and health in women undergoing IVF. *J. Reprod. Infant Psychol.* 26, 4–17. doi: 10.1080/02646830701691392

- Cohler, B. J., and Michaels, S. (2013). "Emergent adulthood in lesbian and gay lives: individual development, life course, and social change," in *Handbook of Psychology and Sexual Orientation*, eds C. J. Patterson and A. R. D'Augelli (Oxford: Oxford University Press), 102–117. doi: 10.1093/acprof:oso/9780199765218.003.0008
- Costa, P. A., and Bidell, M. (2017). Modern families: parenthood desire, intention, and experience among Portuguese lesbian, gay, and bisexual individuals. *J. Fam. Issues* 38, 500–521. doi: 10.1177/0192513X16683985
- Dalton, S. E., and Bielby, D. D. (2000). That's our kind of constellation" Lesbian mothers negotiate institutionalized understandings of gender within the family. *Gen. Soc.* 14, 36–61. doi: 10.1177/089124300014001004
- D'Augelli, A. R., Grossman, A. H., and Starks, M. T. (2008). Gender atypicality and sexual orientation development among lesbian, gay, and bisexual youth: prevalence, sex differences, and parental responses. *J. Gay Lesbian Ment. Health* 12, 121–143. doi: 10.1300/J529v12n01_08
- Delvoye, M., and Tasker, F. (2016). Narrating self-identity in bisexual motherhood. *J. GLBT Fam. Stud.* 12, 1–20. doi: 10.1080/1550428X.2015.1038675
- DeMino, K. A., Appleby, G., and Fisk, D. (2007). Lesbian mothers with planned families: a comparative study of internalized homophobia and social support. *Am. J. Orthopsych.* 77, 165–173. doi: 10.1037/0002-9432.77.1.165
- Dion, K. K. (1995). Delayed parenthood and women's expectations about the transition to parenthood. *Int. J. Behav. Dev.* 18, 315–333. doi: 10.1177/016502549501800208
- Dix, S. (2010). As esferas seculares e religiosas na sociedade portuguesa [The secular and the religious spheres in Portuguese Society]. *Anál. Soc.* 45, 5–27.
- Downing, J., Richardson, H., Kinkler, L., and Goldberg, A. (2009). Making the decision: factors influencing gay men's choice of an adoption path. *Adopt. Q.* 12, 247–271. doi: 10.1080/10926750903313310
- Eady, A., Ross, L. E., Epstein, R., and Anderson, S. (2009). "To bi or not to bi: bisexuality and disclosure in the adoption system," in *Who's Your Daddy? And Other Writings on Queer Parenthood*, ed. R. Epstein (Toronto, ON: Sumach Press), 124–132.
- Elder, G. H. Jr. (1998). The life course as developmental theory. *Child Dev.* 69, 1–12. doi: 10.1111/j.1467-8624.1998.tb06128.x
- Epstein, R. (2002). Butches with babies: reconfiguring gender and motherhood. *J. Lesbian Stud.* 6, 41–57. doi: 10.1300/J155v06n02_06
- Eurobarometer (2019). *The Social Acceptance of LGBTI People in the Europe*. Available online at: http://ec.europa.eu/info/sites/info/files/ebs_493_data_fact_lgbti_eu_en-1.pdf (accessed November 15, 2019).
- Eurostat (2020). *Estimated Average Age of Young People Leaving the Parental Household by Sex*. Available online at: http://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=yth_demo_030&lang=en (accessed April 23, 2020).
- Faul, F., Erdfelder, E., Lang, A. G., and Buchner, A. (2007). G* Power 3: a flexible statistical power analysis program for the social, behavioral, and biomedical sciences. *Behav. Res. Methods* 39, 175–191. doi: 10.3758/BF03193146
- FRA (2014). *LGBT survey: European Union Lesbian, Gay, Bisexual and Transgender Survey. EU LGBT Survey European Union Lesbian, Gay, Bisexual and Transgender Survey Main Results*. Available online at: http://fra.europa.eu/sites/default/files/eu-lgbt-survey-results-at-a-glance_en.pdf (accessed November 2, 2019).
- Gabb, J. (2004). Critical differentials: querying the incongruities within research on lesbian parent families. *Sexualities* 7, 167–182. doi: 10.1177/1363460704042162
- Gartrell, N., Rodas, C., Deck, A., Peyser, H., and Banks, A. (2005). The national lesbian family study: 4. Interviews with the 10-year-old children. *Am. J. Orthopsych.* 75, 518–524. doi: 10.1037/0002-9432.75.4.518
- Gato, J., and Fontaine, A. M. (2016). Predicting psychology students' attitudes toward the psychological development of children adopted by lesbians and gay men. *J. Homosex.* 63, 1–17. doi: 10.1080/00918369.2016.1223316
- Gato, J., and Fontaine, A. M. (2017). Predicting attitudes toward lesbian and gay parent families among portuguese students from helping professions. *Int. J. Sex. Health* 29, 187–201. doi: 10.1080/19317611.2016.1268232
- Gato, J., Leal, D., and Tasker, F. (2019). Parenthood desires, parenthood intentions, and anticipation of stigma upon parenthood among lesbian, bisexual, and heterosexual women in Portugal. *J. Lesbian Stud.* 23, 451–463. doi: 10.1080/10894160.2019.1621733
- Gato, J., Santos, S., and Fontaine, A. M. (2017). To have or not to have children? That is the question. Factors influencing parental decisions among lesbians and gay men. *Sex. Res. Soc. Policy* 14, 310–323. doi: 10.1007/s13178-016-0268-3
- Gerson, M. (1986). The prospect of parenthood for men and women. *Psycho. Women Q.* 10, 49–62. doi: 10.1111/j.1471-6402.1986.tb00736.x
- Gianino, M. (2008). Adaptation and transformation: the transition to adoptive parenthood for gay male couples. *J. GLBT Fam. Stud.* 4, 205–243. doi: 10.1080/15504280802096872
- Giddens, A. (2005). "The global revolution in family and personal life," in *Family in Transition*, 13th Edn, eds A. S. Skolnick and J. H. Skolnick (Boston: Pearson), 26–31.
- Goldberg, A. E., and Smith, J. Z. (2011). Stigma, social context, and mental health: lesbian and gay couples across the transition to adoptive parenthood. *J. Counsel. Psychol.* 58, 139–150. doi: 10.1037/a0021684
- Goldberg, A. E., Downing, J. B., and Moyer, A. M. (2012). Why parenthood, and why now? Gay men's motivations for pursuing parenthood. *Fam. Relat.* 61, 157–174. doi: 10.1111/j.1741-3729.2011.00687.x
- Gross, M. (2012). *Choisir la Paternité Gay [To choose gay Parenthood]*. Toulouse: Editions Érès.
- Hair, J. F., Anderson, R. E., Babin, B. J., and Black, W. C. (2014). *Multivariate data Analysis: A Global Perspective*, 7th Edn. Edinburgh: Pearson.
- Hatzenbuehler, M. L., McLaughlin, K. A., Keyes, K. M., and Hasin, D. S. (2010). The impact of institutional discrimination on psychiatric disorders in lesbian, gay, and bisexual populations: a prospective study. *Am. J. Public Health* 100, 452–459. doi: 10.2105/AJPH.2009.168815
- Hayford, S. R., and Morgan, S. P. (2008). Religiosity and fertility in the United States: the role of fertility intentions. *Soc. Forces* 86, 1163–1188. doi: 10.1353/sof.0.0000
- Hicks, S. (2000). Good lesbian, bad lesbian regulating heterosexuality in fostering and adoption assessments. *Child Fam. Soc. Work* 5, 157–168. doi: 10.1046/j.1365-2206.2000.00153.x
- Hicks, S. (2013). "Lesbian, gay, bisexual, and transgender parents and the question of gender," in *LGBT-Parent Families. Innovations in Research and Implications for Practice*, eds A. E. Goldberg and K. R. Allen (New York, NY: Springer), 149–162. doi: 10.1007/978-1-4614-4556-2_10
- Hoffman, L. W. (1987). The value of children to parents and childrearing patterns. *Social Behaviour* 2, 123–141.
- Hofstede, G. (2011). Dimensionalizing cultures: the hofstede model in context. *Online Read. Psychol. Cult.* 2:8. doi: 10.9707/2307-0919.1014
- Ioverno, S., Carone, N., Lingardi, V., and Nardelli, N. (2018). Assessing prejudice toward two-father parenting and two-mother parenting: the beliefs on same-sex parenting scale. *J. Sex Res.* 55, 654–665. doi: 10.1080/00224499.2017.1348460
- Kimberly, C., and Moore, A. (2015). Attitudes to practice: national survey of adoption obstacles faced by gay and lesbian prospective parents. *J. Gay Lesbian Soc. Services* 27, 436–456. doi: 10.1080/10538720.2015.1085347
- Knauer, N. J. (2016). LGBT older adults, chosen family, and caregiving. *J. Law Religion* 31, 150–168. doi: 10.1017/jlr.2016.23
- Langridge, D., Sheeran, P., and Connolly, K. (2005). Understanding the reasons for parenthood. *J. Reprod. Infant Psychol.* 23, 121–133. doi: 10.1080/02646830500129438
- Lawson, K. L. (2004). Development and psychometric properties of the perceptions of parenthood inventory. *J. Psychol.* 138, 433–455.
- Leal, D., Gato, J., and Coimbra, S. (2019a). How does sexual orientation influence intergenerational family solidarity? An exploratory study. *J. Prevent. Intervent. Commun.* 19, 1–12. doi: 10.1080/10852352.2019.1627081
- Leal, D., Gato, J., and Tasker, F. (2019b). Prospective parenthood: sexual identity and intercultural trajectories. *Cul. Health Sex.* 21, 757–773. doi: 10.1080/13691058.2018.1515987
- Lyons, A., Pitts, M., and Grierson, J. (2013). Factors related to positive mental health in a stigmatized minority: an investigation of older gay men. *J. Aging Health* 25, 1159–1181. doi: 10.1177/0898264313495562
- Maldonado, L. C. (2017). *Doing Better for Single-Parent Families: Poverty and Policy Across 45 Countries*. UCLA. Available online at: <http://escholarship.org/uc/item/49w2b8gg> (accessed April 3, 2020).
- Mallon, G. P. (2004). *Gay men Choosing Parenthood*. New York, NY: Columbia University Press.
- Marôco, J. (2011). *Análise Estatística Com o SPSS Statistics [Statistical Analysis With SPSS Statistics]*. Pero Pinheiro: ReportNumber.
- Matthews, J. D., and Cramer, E. P. (2006). Envisaging the adoption process to strengthen gay- and lesbian-headed families: recommendations for Adoption Professionals. *Child Welfare* 85, 317–340.

- McGoldrick, M., Preto, N. A. G., and Carter, B. A. (2015). *The Expanding Family life cycle: Individual, Family, and Social Perspectives*. Harlow: Pearson.
- Mellish, L., Jennings, S., Tasker, F., Lamb, M., and Golombok, S. (2013). *Gay, Lesbian, and Heterosexual Adoptive Families: Family Relationships, Child Adjustment, and Adopters' Experiences*. London: British Association for Adoption and Fostering.
- Meyer, I. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychol. Bull.* 129, 674–697. doi: 10.1037/0033-2909.129.5.674
- Mezey, N. J. (2008). The privilege of coming out: race, class, and lesbians' mothering decisions. *Int. J. Soc. Fam.* 34, 257–276. doi: 10.1111/soin.12004
- Moleiro, C., Raposo, C. S., Moita, G., Pereira, H., Gato, J., Silva, M., et al. (2017). *Guia Orientador da Intervenção Psicológica com Pessoas Lésbicas, Gays, Bissexuais e Trans (LGBT)*. [Guidelines for Psychological Intervention With Lesbian, Gay, Bisexual, and Trans Individuals]. Lisboa: Ordem dos Psicólogos Portugueses.
- Oliveira, J. E., Mendonça, M., Coimbra, S., and Fontaine, A. M. (2014). Family support in the transition to adulthood in Portugal—Its effects on identity capital development, uncertainty management and psychological well-being. *J. Adolesc.* 37, 1449–1462. doi: 10.1016/j.adolescence.2014.07.004
- Patterson, C. J., and Riskind, R. G. (2010). To be a parent: issues in family formation among gay and lesbian adults. *J. GLBT Fam. Stud.* 6, 326–340. doi: 10.1080/1550428X.2010.490902
- Pelka, S. (2009). Sharing motherhood: maternal jealousy among lesbian co-mothers. *J. Homosex.* 56, 195–217. doi: 10.1080/00918360802623164
- PORDATA (2019a). *Índice sintético de fecundidade*. Available online at: <http://www.pordata.pt/en/Portugal/Fertility+indicators+total+fertility+rate+and+gross+reproduction+rate-416> (accessed November 23, 2019).
- PORDATA (2019b). *Idade média da mãe ao nascimento do primeiro filho*. Available online at: <https://www.pordata.pt/en/Portugal/Mean+age+of+the+mother+at+birth+of+first+child-805> (accessed November 23, 2019).
- PORDATA (2019c). *População residente com 15 e mais anos por nível de escolaridade completo mais elevado (%)*. Available online at: <https://www.pordata.pt/en/Portugal/Mean+age+on+first+marriage+by+sex-421> (accessed March 13, 2019).
- PORDATA (2020). *Resident Population Aged 15 and Over by Level of Highest Educational Qualifications Obtained (%)*. Available at: [http://www.pordata.pt/en/Portugal/Resident+population+aged+15+and+over+by+level+of+highest+educational+qualifications+obtained+\(percentage\)-884](http://www.pordata.pt/en/Portugal/Resident+population+aged+15+and+over+by+level+of+highest+educational+qualifications+obtained+(percentage)-884)
- Preacher, K. J. (2019). *Calculation for the Sobel Test: An Interactive Calculation Tool for Mediation Tests [Computer Software]*. Available online at: <http://quantpsy.org/sobel/sobel.htm> (accessed November 2, 2019).
- Rabun, C., and Oswald, R. (2009). Young gay men's visions of fatherhood: a sample of emerging adults. *Fathering* 7, 269–328.
- Riggle, E. D., Whitman, J. S., Olson, A., Rostosky, S. S., and Strong, S. (2008). The positive aspects of being a lesbian or gay man. *Profess. Psychol. Res. Pract.* 39, 210–217. doi: 10.1037/0735-7028.39.2.210
- Riskind, R. G., and Patterson, C. J. (2010). Parenthood intentions and desires among childless lesbian, gay, and heterosexual individuals. *J. Fam. Psychol.* 24, 78–81. doi: 10.1037/a0017941
- Riskind, R. G., and Tornello, S. L. (2017). Sexual orientation and future parenthood in a 2011–2013 nationally representative United States sample. *J. Fam. Psychol.* 31, 792–798. doi: 10.1037/fam0000316
- Riskind, R. G., Patterson, C. J., and Nosek, B. A. (2013). Childless lesbian and gay adults' self-efficacy about achieving parenthood. *Couple Fam. Psychol. Res. Pract.* 2, 222–235. doi: 10.1037/a0032011
- Ross, L. E., Siegel, A., Dobinson, C., Epstein, R., and Steele, L. S. (2012). "I don't want to turn totally invisible": mental health, stressors, and supports among bisexual women during the perinatal period. *J. GLBT Fam. Stud.* 8, 137–154. doi: 10.1080/1550428X.2012.660791
- Salinas-Quiroz, F., Costa, P. A., and Lozano-Verduzco, I. (2019). parenting aspiration among diverse sexual orientations and gender identities in Mexico, and its association with internalized homo/transnegativity and connectedness to the LGBTQ community. *J. Fam. Issues* 41, 759–783. doi: 10.1177/0192513X19881675
- Salvati, M., Pistella, J., and Baiocco, R. (2018). Gender roles and internalized sexual stigma in gay and lesbian persons: a quadratic relation. *Int. J. Sex. Health* 30, 42–48. doi: 10.1080/19317611.2017.1404542
- Salvati, M., Piumatti, G., Giacomantonio, M., and Baiocco, R. (2019). Gender stereotypes and contact with gay men and lesbians: the mediational role of sexism and homonegativity. *J. Commun. Appl. Soc. Psychol.* 29, 461–473. doi: 10.1002/casp.2412
- Sarason, I. G., Levine, H. M., Basham, R. B., and Sarason, B. R. (1983). Assessing social support: the social support questionnaire. *J. Personal. Soc. Psychol.* 44, 127–139. doi: 10.1037/0022-3514.44.1.127
- Scandurra, C., Bacchini, D., Esposito, C., Bochicchio, V., Valerio, P., and Amodeo, A. L. (2019). The influence of minority stress, gender, and legalization of civil unions on parenthood desire and intention in lesbian women and gay men: implications for social policy and clinical practice. *J. GLBT Fam. Stud.* 15, 76–100. doi: 10.1080/1550428X.2017.1410460
- Schacher, S. J., Auerbach, C. F., and Silverstein, L. B. (2005). Gay fathers expanding the possibilities for us all. *J. GLBT Fam. Stud.* 1, 31–52. doi: 10.1300/J461v01n03_02
- Shenkman, G. (2012). The gap between fatherhood and couplehood desires among Israeli gay men and estimations of their likelihood. *J. Fam. Psychol.* 26, 828–831. doi: 10.1037/a0029471
- Siegenthaler, A. L., and Bigner, J. J. (2000). The value of children to lesbian and non-lesbian mothers. *J. Homosex.* 39, 73–91. doi: 10.1300/J082v39n02_04
- Simon, K. A., Tornello, S. L., and Bos, H. M. (2019). Sexual minority women and parenthood: perceptions of friendship among childfree and new parents. *J. Lesbian Stud.* 23, 476–489. doi: 10.1080/10894160.2019.1634994
- Simon, K. A., Tornello, S. L., Farr, R. H., and Bos, H. M. (2018). Envisioning future parenthood among bisexual, lesbian, and heterosexual women. *Psychol. Sex. Orientat. Gender Divers.* 5, 253–259. doi: 10.1037/sgd0000267
- Stacey, J. (2006). Gay parenthood and the decline of paternity as we knew it. *Sexualities* 9, 27–55. doi: 10.1177/1363460706060687
- Starrels, M. E., and Holm, K. E. (2000). Adolescents' plans for family formation: is parental socialization important? *J. Marriage Fam.* 62, 416–429. doi: 10.1111/j.1741-3737.2000.00416.x
- Steinbach, A., Kuhnt, A. K., and Knüll, M. (2016). The prevalence of single-parent families and stepfamilies in Europe: can the Hajnal line help us to describe regional patterns? *History Fam.* 21, 578–595. doi: 10.1080/1081602X.2016.1224730
- Tanaka, K., and Johnson, N. (2016). Childlessness and mental well-being in a global context. *J. Fam. Issues* 37, 1027–1045. doi: 10.1177/0192513X14526393
- Tasker, F., and Bellamy, C. (2019). "Adoption by same-sex couples – reaffirming evidence: could more children be placed?" in *Family Law*, ed. R. Lamont (Oxford: Oxford University Press), 171–179.
- Tate, D. P., and Patterson, C. J. (2019a). Desire for parenthood in context of other life aspirations among lesbian, gay, and heterosexual young adults. *Front. Psychol.* 10:2679. doi: 10.3389/fpsyg.2019.02679
- Tate, D. P., and Patterson, C. J. (2019b). Sexual minority women's attitudes toward infants, children, and parenthood. *J. Lesbian Stud.* 23, 464–475. doi: 10.1080/10894160.2019.1629807
- Tate, D. P., Patterson, C. J., and Levy, A. J. (2019). Predictors of parenthood intentions among childless lesbian, gay, and heterosexual adults. *J. Fam. Psychol.* 33, 194–202. doi: 10.1037/fam0000499
- Umberson, D., Pudrovska, T., and Reczek, C. (2010). Parenthood, childlessness, and well-being: a life course perspective. *J. Marriage Fam.* 72, 612–629. doi: 10.1111/j.1741-3737.2010.00721.x
- Wall, K. (2007). "Atitudes face à divisão familiar do trabalho em Portugal e na Europa," in *Família e Género em Portugal e na Europa*, eds K. Wall, and L. Amâncio (Lisboa: Imprensa de Ciências Sociais), 211–225.
- Weston, K. (1991). *Families We Choose: Lesbians, Gays, kinship*. New York, NY: Columbia University Press.

- Williams, L., Abma, J., and Piccinino, L. J. (1999). The correspondence between intention to avoid childbearing and subsequent fertility: a prospective analysis. *Fam. Plann. Perspect.* 31, 220–227. doi: 10.2307/2991569
- Xavier, P., Alberto, I., and Mendes, F. (2017). Same-sex parenting: identification of social representations in a sample of portuguese professionals. *J. Homosex.* 66, 1–23. doi: 10.1080/00918369.2017.1400314
- Yager, C., Brennan, D., Steele, L. S., Epstein, R., and Ross, L. E. (2010). Challenges and mental health experiences of lesbian and bisexual women who are trying to conceive. *Health Soc. Work* 35, 191–200. doi: 10.1093/hsw/35.3.191

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Gato, Leal, Coimbra and Tasker. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Determinants of Non-paid Task Division in Gay-, Lesbian-, and Heterosexual-Parent Families With Infants Conceived Using Artificial Reproductive Techniques

Loes Van Rijn - Van Gelderen^{1*}, Kate Ellis-Davies², Marijke Huijzer-Engbreghof¹, Terrence D. Jorgensen³, Martine Gross⁴, Alice Winstanley⁵, Berengere Rubio⁶, Olivier Vecho⁷, Michael E. Lamb⁵ and Henny M. W. Bos¹

¹ Preventive Youth Care, Research Institute of Child Development and Education, University of Amsterdam, Amsterdam, Netherlands, ² Department of Psychology, Swansea University, Swansea, United Kingdom, ³ Research Institute of Child Development and Education, University of Amsterdam, Amsterdam, Netherlands, ⁴ UMR 8216 Centre d'Etudes en Sciences Sociales du Religieux, Paris, France, ⁵ Division of Social and Developmental Psychology, University of Cambridge, Cambridge, United Kingdom, ⁶ Institut Français des Sciences et Technologies des Transports, de l'Aménagement et des Réseaux, Paris, France, ⁷ Département de Sciences Psychologiques, Université Paris Nanterre, Nanterre, France

OPEN ACCESS

Edited by:

Magdalena Zadkowska,
University of Gdańsk, Poland

Reviewed by:

Jorge Gato,
Fundação para a Ciência e
Tecnologia, Portugal
Victor Figueroa,
Universidad del Desarrollo, Chile

*Correspondence:

Loes Van Rijn - Van Gelderen
L.vanRijn-vanGelderen@uva.nl

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 08 January 2020

Accepted: 14 April 2020

Published: 13 May 2020

Citation:

Van Rijn - Van Gelderen L,
Ellis-Davies K, Huijzer-Engbreghof M,
Jorgensen TD, Gross M,
Winstanley A, Rubio B, Vecho O,
Lamb ME and Bos HMW (2020)
Determinants of Non-paid Task
Division in Gay-, Lesbian-,
and Heterosexual-Parent Families
With Infants Conceived Using Artificial
Reproductive Techniques.
Front. Psychol. 11:914.
doi: 10.3389/fpsyg.2020.00914

Background: The division of non-paid labor in heterosexual parents in the West is usually still gender-based, with mothers taking on the majority of direct caregiving responsibilities. However, in same-sex couples, gender cannot be the deciding factor. Inspired by Feinberg's ecological model of co-parenting, this study investigated whether infant temperament, parent factors (biological relatedness to child, psychological adjustment, parenting stress, and work status), and partner relationship quality explained how first-time gay, lesbian, and heterosexual parents divided labor (childcare and family decision-making) when their infants were 4 and 12 months old. We also tested whether family type acted as a moderator.

Method: Participants were drawn from the new parents study. Only those who provided information about their biological relatedness to their child ($N = 263$ parents) were included. When infants were 4 months (T1), parents completed a password-protected online questionnaire exploring their demographic characteristics including work status and standardized online-questionnaires on task division (childcare and family decision-making), infant temperament, parental anxiety, parental depression, parental stress, and partner relationship satisfaction. When infants were 12-months-old (T2), parents provided information about task division and their biological relatedness to their children.

Results: Linear mixed models showed that no factor explained the division of family decision making at T1 and T2. For relative time spent on childcare tasks at T1, biological relatedness mattered for lesbian mothers only: biologically related mothers appeared to spend more time on childcare tasks than did non-related mothers. Results showed that, regardless of family type, parents who were not working or were working part-time at

T1 performed more childcare tasks at T1. This was still true at T2. The other factors did not significantly contribute to relative time spent on childcare tasks at T2.

Conclusion: We had the opportunity to analyze the division of non-paid tasks in families where parenting was necessarily planned and in which gender could not affect that division. Although Feinberg's model of co-parenting suggests that various factors are related to task division, we found that paid work outside the home was most important during the first year of parenthood in determining caregiving roles.

Keywords: non-paid task division, parenting, gay, lesbian, heterosexual, first-time parents, infants, determinants

INTRODUCTION

During the transition to parenting, new parents need to make decisions about how parenting roles will be shared (Cao et al., 2016). Dissatisfaction with this division is a major source of parenting stress which undermines partner relationship satisfaction and parental well-being (Patterson, 1988) and which in turn might be related to how children fare (e.g., Stone et al., 2016). Since research on how parents divide and share co-parenting responsibilities and roles has mainly focused on heterosexual couples and their biological children, gender is often conflated with caregiving role. We thus know little about how parents decide caregiving roles when gender is the same for both parents, such as when same-sex parents use artificial reproductive techniques to conceive (Goldberg, 2010). In these families, only one parent is biologically related to the child. The present study focused on the division of non-paid tasks during the first year of parenthood within three different family types: gay-father families with infants who were conceived through surrogacy procedures, lesbian-mother families whose infant offspring were conceived by means of insemination with donor sperm (DI), and heterosexual-parent families whose infants were conceived through *in vitro fertilization* (IVF).

When looking at the division of non-paid tasks, three subgroups can be identified. The first group comprises household tasks including all the (non-paid) tasks that need to be done to maintain family members and/or a home (Coltrane, 2000) such as laundry, cooking, taking care of plants or yard, and car maintenance (Cowan and Cowan, 1988). Childcare comprises the second set of non-paid tasks and includes feeding, dressing, bathing, arranging for childcare or babysitting (Cowan and Cowan, 1988). The third group of non-paid tasks includes family decisions such as planning for vacations, deciding how to arrange finances (e.g., taxes, insurance), and deciding about community involvement (Cowan and Cowan, 1988).

After the birth of a child, parents need to divide both non-paid and paid tasks. Even though the participation of women in paid labor in Western societies has increased, different-sex parents' division of non-paid parenting tasks has largely remained unequal, with women doing more of the non-paid tasks than men (Baxter et al., 2008, 2015; Bianchi et al., 2012). It is often assumed that this pattern can be explained by gendered roles (i.e., roles that are seen as appropriate to gender in accordance with prevailing cultural norms) and gender ideology (i.e., normative ideas about accepted roles and inherent features of human females and males)

on a societal level (Geist, 2005; Greenstein, 2009; Nyman et al., 2013). Gender inequality persists and is represented through daily interactions 'doing gender,' which "involves a complex of socially guided perceptual, interactional, and micropolitical activities that cast particular pursuits as expressions of masculine and feminine nature" (West and Zimmerman, 1987, p. 126). An example of doing gender might involve women affirming their femininity by showing their competence as nurturers or household organizers or men affirming their masculinity by avoiding housework. Men may not incorporate the caregiver role into their self-concepts to the same extent as mothers (Hall et al., 1995), while some men also see their involvement in paid employment as an important contribution to the caregiving of the child (Chan et al., 1998).

This traditional pattern of the non-paid labor division in different-sex families does not appear susceptible to change when maternal education increases. Recent studies have demonstrated that while childless women often aspire to more equitable divisions of caregiving, after the transition to parenting both men and women revert to more traditional models of caregiving roles (Baxter et al., 2015). Thus, the division of non-paid labor is usually still gender-related (Goldberg and Perry-Jenkins, 2004). However, in same-sex couples, gender cannot be the deciding factor. Therefore, it may be revealing to investigate how same-sex families divide their non-paid tasks.

Previous research on same-sex parents has indicated that lesbian and gay couples share household and childcare tasks in a more egalitarian way than heterosexual couples do (e.g., Vecho et al., 2011; Goldberg et al., 2012; Farr and Patterson, 2013). However, heterogeneity exists *within* same-sex families with regard to their division of household- and childcare tasks (i.e., not all families report an egalitarian division; Tornello et al., 2015) and thus it is valuable to investigate how these differences come about. With the exception of one study with lesbian-mother families (Goldberg and Perry-Jenkins, 2007), no studies on this topic have focused on the first year of parenthood. That is surprising, because most transitions in parenthood are made in this period (Durtschi et al., 2017) when co-parent relationships are developed (Van Egeren, 2004). Since infancy provides a valuable period to gain insight into how parents divide their paid and non-paid tasks, we decided to focus on the division of tasks by same-sex and different-sex parents with infants.

Feinberg (2003) provides a helpful model for determining which factors could influence the way parents divide their non-paid tasks within their families during the first year of their children's lives. In this ecological model of

co-parenting, co-parenting consists of four components (support/undermining, childrearing agreement, division of labor, and joint family management). These components do not function on their own but are directly and indirectly influenced by the child, parent, and interpersonal factors. Therefore, we sought to investigate which child (i.e., infant temperament), individual parent (i.e., biological relatedness to child, gender, work status, psychological adjustment, parenting stress), and interparental factors (i.e., partner relationship quality) explained how first-time gay, lesbian, and heterosexual parents divided labor when their infants were 4- and 12-months-old.

The link between infant temperament and non-paid task division is emphasized in family systems theory which argues that systems within the family are interdependent (Minuchin, 1985) and thus that it is important to examine the possible link between infant temperament and task division. In general, infant temperament (i.e., biologically based individual differences in reactivity and the ability to self-regulate; Rothbart and Bates, 1998) influences the way parents feel and act. For example, parents with highly irritable infants experience more parenting stress than parents with less irritable infants (Mulsow et al., 2004). Another study showed that parents of infants who are easily distressed, fearful, and sad reported higher levels of depressive symptoms and stress, and lower parental efficacy than parents with infants who had more positive temperaments (Solmeyer and Feinberg, 2011). However, associations between child temperament and co-parenting are not consistently found. Some researchers found no evidence for direct relations (e.g., McHale et al., 2004) while others did (e.g., Burney and Leerkes, 2010). For task division specifically, Burney and Leerkes (2010) found that for mothers (but not fathers), infants' distress to novelty at 6 months was negatively related to a sum score of three aspects of task division, including parents' perception of their partners as doing more childcare tasks, satisfaction with how they were sharing parenting tasks, and whether the division met their prior expectations.

One of the parent factors we studied was biological relatedness. Social structural theory (Eagly and Wood, 1999) argues that "the roles people occupy – which may be due to individual choice, sociocultural pressures, or biological potentials – lead them to develop psychological qualities and, in turn, behavior to fit those roles" (Katz-Wise et al., 2010, p. 2). Biological factors such as experiencing pregnancy, giving birth and being able to breastfeed are thought to increase the time spent in childcare. This has indeed been supported by empirical research on families with infants showing that fathers participate less in childcare when mothers are breastfeeding (Gamble and Morse, 1993; Earle, 2000). In addition, the only study on task division by lesbian couples with infants showed that biological mothers tended to spend more time on childcare than non-biological mothers when their children were 3 months old (Goldberg and Perry-Jenkins, 2007). However, studies on lesbian families with older children have reported mixed findings; some studies showed no differences between biological and non-biological mothers in time spent in childcare (Chan et al., 1998; Gartrell et al., 1999, 2000) while other studies found differences (Bos et al., 2007; Downing and Goldberg, 2011; Vecho et al.,

2011). These varying findings may suggest that lesbian mothers have a more flexible caregiving role division with caregiving roles flexibly changing over time.

In addition, Hamilton's (1964) theory of selection (also known as the theory of inclusive fitness) assumes that altruistic behavior in humans is adaptive when it increases the genetic fitness of individuals. Raising a child has economic, physical, and mental costs. Investment in these costs would be particularly efficient for parents who know that they share genetic material with a child. Thus, biologically related parents should invest more in their children than non-biological parents do because unrelated children offer few reproductive benefits to their parents, which make it less profitable for them to invest valuable resources. Extending this idea to same-sex families might mean that biological parents in same-sex families would spend more time in childcare than non-biological parents. The only study on the relation between gay fathers' biological relatedness and division of labor found that the amount of household and childcare labor that men reported doing was unrelated to biological relatedness (Tornello et al., 2015). However, the age range of the children in this study of 52 gay men was very broad (0–12 years). We sought to determine whether results were the same in a study involving same-sex parents with young infants.

As a second parent factor, we focused on time spent on paid work outside the home as a possible determinant of non-paid task division. The time-constraint theory of Artis and Pavalko (2003) argued that there are only a finite number of hours in the day to perform unpaid and paid labor and, if one partner is working more outside the home, that partner has less time to participate in unpaid labor at home. Empirical evidence from studies among same-sex and different-sex parent families showed that partners who spent more time outside the home indeed spent less time doing household and childcare tasks (Downing and Goldberg, 2011; Goldberg et al., 2012; Tornello et al., 2015). In their study of different-sex families and lesbian-mother families, Patterson et al. (2004) found that the lesbian mothers spent the same number of hours in paid employment and were equally involved in childcare tasks. Within different-sex families, on the other hand, fathers spent twice as many hours in paid employment as did mothers, resulting in mothers being more intensively involved in childcare tasks than fathers. In contrast, a recent study of parental involvement (including perception of level of involvement in childcare and upbringing) by adoptive gay fathers with children between 1 and 9 years old showed no relation between parental involvement and number of hours devoted to paid work (Feuge et al., 2019). We investigated whether this was true in same-sex families with infants only.

It is also important to consider whether parental psychological wellbeing affects task division in the first year of parenthood (Feinberg, 2003). Even though the anticipation and the birth of a child are often associated with positive emotions, there is also the risk of developing psychological problems, such as depression (Gross and Marcussen, 2017) and anxiety (Heron et al., 2004). Empirical studies focusing on the division of non-paid tasks and parental psychological adjustment suggested that these concepts are related. For example, when the

distribution of household tasks is experienced as fair, mothers display few symptoms of depression, but when it is perceived as unfair, mothers show more such symptoms (Glass and Fujimoto, 1994; Lennon and Rosenfield, 1994). However, these studies included parental wellbeing as an outcome variable rather than as a predictor. This study was the first to investigate whether parental psychological adjustment also predicted how same-sex and different-sex parents divide non-paid tasks.

The last individual parent factor investigated as a predictor was parenting stress (i.e., feelings of stress caused by the fact that parenting demands are higher than the personal and social resources available; Cooper et al., 2009). Mothers appear to experience more parenting stress than fathers do (Ostberg, 1998). Musick et al. (2016) found that this difference might be due to the difference in how fathers and mothers spend time with their children. Mothers performed more household- and childcare tasks, had a lower quality of sleep and less leisure time than did fathers, whereas fathers spent more time with the children in activities that were high in enjoyment and low in stress (e.g., play and leisure). Ehrenberg et al. (2001) also found that mothers in dual-earning families performed more childcare tasks than fathers. They suggested that mothers may feel the need to bear the greater responsibilities for taking care of their children to feel like “good” mothers (Ehrenberg et al., 2001). Perhaps this feeling contributes to higher feelings of parenting stress. We sought to explore these issues in same-sex families.

Parental relationship quality (an interparental factor) is often deemed the most important family factor influencing co-parenting relations (Feinberg, 2003). However, with regard to the division of childcare and household tasks it is known that perceptions of fairness about family work are often more related to relationship quality than the actual division of labor (Grote et al., 2002; Claffey and Mickelson, 2009): Parents rate their relationship quality more positively when they think that the family work has been distributed fairly. Ehrenberg et al. (2001), on the other hand, found that, even though mothers spent a significantly greater proportion of time on childcare tasks than fathers did, as long as both parents were equally involved in performing the “fun” tasks (e.g., planning and executing family outings together), both parents felt satisfied in their relationship. We explored whether there was a relation between relationship quality and the division of childcare and household tasks in same- and different-sex families with infants.

In sum, this study aimed to investigate whether child temperament, individual parent characteristics (i.e., biological relatedness to child, work status, psychological adjustment, parenting stress), and partner relationship quality explained how first-time gay, lesbian, and heterosexual parents divided labor (family decisions making and childcare) when their infants were 4 and 12 months old. In addition, we sought to investigate whether significant factors worked the same way in gay, lesbian, and heterosexual parents by testing whether family type acted as a moderator. In general, we hypothesized that all factors are related to non-paid task division. For two factors, based upon prior theoretical and empirical research, we had two specific

hypotheses: (1) Parents who were biologically related to their children would spend more time on childcare tasks, and (2) Parents who spent more time working outside the home would spend less time on family decision making and childcare tasks.

MATERIALS AND METHODS

Participants

The participants for the current study were drawn from the new parents study (NPS). The NPS sample ($N = 140$ families) consists of 38 gay-father families, 61 lesbian-mother families, and 41 heterosexual-parent families from the United Kingdom (23.6%), the Netherlands (33.6%), and France (42.9%). For the current study, data were only used when parents provided information about their biological relatedness to their child (answer possibilities were yes or no). Six gay couples from the United Kingdom and one gay couple from France did not provide biological relatedness information. In addition, in two lesbian couples from the United Kingdom and one lesbian couple from France, only one lesbian mother provided information about their biological relatedness. This led to an analytic sample of 263 parents from 133 families.

At the start of the study (T1; when infants were around 4 months old), the mean age of the parents in the analytic sample was 34.74 years (ages ranged from 22 to 59 years old). On average at T1, the parents had been together for 7.95 years ($SD = 3.47$) and most of them were married or in civil partnerships (79.5%). A small number of the parents lived in rural areas (6.5%), while the remaining parents lived in small- (33.5%), medium- (32.3%), or large-sized cities (27.8%). Most parents were highly educated (83.1% had obtained a college degree or higher) and their yearly income was above average: 69.7% earned over 42,365 US dollars per year. The majority of the parents worked full-time (62.4%). The majority of the British and Dutch parents were White (94.5%); we did not have permission to obtain information about the ethnic background of the French parents. Almost all parents (93.2%) experienced good to excellent health. Most parents had singletons (85.2%) and they had slightly more girls (59.7%) than boys. The mean age of the children was 3.32 months ($SD = 0.61$).

There were no significant differences between the family types with regard to parental ethnic identity and the infants' gender (see **Table 1**). However, there were significant differences between gay fathers, lesbian mothers, and heterosexual parents with regard to parental age, relationship duration, having twins or singletons, working status, family income, and where families lived (residency).

Additional analyses were performed to identify the source of the significant differences. The family wise Type 1 error rate due to multiple testing was controlled for by using a Bonferroni-corrected $\alpha = 0.05/30 = 0.001$ as the criterion for statistical significance. Tukey HSD *post hoc* tests showed that gay fathers were significantly older than lesbian mothers ($p < 0.001$). Additional 2×2 chi-square analyses showed that gay fathers had twins more often than lesbian mothers did [$\chi^2(1) = 21.64$, $p < 0.001$]. Lesbian mothers more often worked part-time than

TABLE 1 | Demographic information about families headed by gay, lesbian, and heterosexual parents.

	Gay fathers (<i>n</i> = 76)	Lesbian mothers (<i>n</i> = 122)	Heterosexual parents (<i>n</i> = 82)	ANOVA or χ^2
Parents (<i>n</i> = 263)				
Mean age	37.61 (5.61)	33.21 (3.94)	34.85 (4.89)	$F(2,255) = 17.51, p < 0.001$
Ethnic identity, White	89.3%	95.9%	95.5%	$\chi^2(10) = 11.91, p = 0.291$
Length of relationship (in years)	6.42 (3.94)	6.75 (2.72)	8.56 (3.52)	$F(2,260) = 15.41, p < 0.001$
Twins, yes	35.5%	5.9%	12.2%	$\chi^2(2) = 28.94, p < 0.001, G > L$
Working status, fulltime				$\chi^2(4) = 18.71, p = 0.001$
Fulltime	62.9%	55.5%	72.0%	
Part-time	24.2%	37.0%	11.0%	L > H
Not working outside home	12.9%	7.6%	17.1%	
Family Income				$\chi^2(4) = 12.26, p = 0.016$
Under 12.706 dollar	0.0%	1.7%	2.4%	
12.706 – 42.356 dollar	12.9%	35.0%	31.7%	
Over 42.356 dollar	87.1%	63.2%	65.9%	
Residency				$\chi^2(6) = 24.08, p = 0.001$
Rural area	3.2%	4.2%	12.2%	
Small city	16.1%	37.0%	41.5%	
Medium city	35.5%	34.5%	26.8%	
Large city	45.2%	24.4%	19.5%	
Children (<i>n</i> = 146)				
Mean age (in months)	3.28 (0.59)	3.42 (0.59)	3.24 (0.64)	$F(2,143) = 1.27, p = 0.283$
Gender (% girls)	57.1%	56.5%	54.3%	$\chi^2(2) = 0.08, p = 0.962$

Standard deviations are given in parentheses. ANOVA, analysis of variance.

heterosexual parents did [$\chi^2(1) = 16.05, p < 0.001$]. Other differences were not statistically significant.

Procedure

Parents were recruited via specialist lawyers with expertise in surrogacy (for the recruitment of gay fathers), lesbian and gay parenting support groups, fertility clinics (for the recruitment of lesbian and heterosexual parents), and online forums and magazines for gay and lesbian people after ethical approval was granted by the appropriate committees at the three home institutes. Gay fathers were eligible when they had used surrogate carriers, lesbian mothers when they had used sperm donors, and heterosexual parents when they had used IVF without sperm or egg donation to conceive. Only two-parent families with children younger than 4 months and that provided active consent were permitted to participate.

Data were collected twice: when infants were between 3.5 and 4.5 months old (T1) and when they were around 12 months old (T2). The first assessment took place at home and the second assessments at the participating universities. Before the home visits at T1, all parents were queried about their demographic characteristics (including gender and work status) and their infants' temperament via a unique password protected website. During the home visits, both parents separately completed a password-protected online questionnaire on division of labor (i.e., childcare, household tasks, and family decision making), individual parent characteristics (i.e., depression, anxiety, and parental stress), and partner relationship quality. Before parents came to our institutions for T2, they were again queried

about the division of labor using a password-protected online questionnaire. During both visits, other data outside the scope of the current study were also collected (e.g., see Van Rijn - van Gelderen et al. (2018) for further information). The retention rate at T2 for the current analytic sample was 90.9%. In nine families (one Dutch, seven United Kingdom, and one French), both parents did not participate at T2 and in six families one partner dropped out (three Dutch parents, one British parent, and one French parent). Reasons for not participating at T2 included being too busy with a new baby on the way and excessive emotional burden.

Measures

Division of Labor

At both assessments, parents completed the "Who Does What" questionnaire (Cowan and Cowan, 1990) to report on their current experiences with the division of labor within their family. The questionnaire consists of 36 items equally divided over three subscales: household and family tasks (including planning and preparing meals, house cleaning, laundry, looking after the car), family decisions (including plans for social activities and vacations and deciding about the expected behavior of family members), and childcare tasks (including feeding, changing, playing, and doing the baby's laundry). Each parent was asked to show on a nine-point scale (1 = *I do it all*, 9 = *my partner does everything*) how these tasks were divided between the parents. All scores per subscale were averaged to calculate one score per scale. Internal consistency for the household and family task subscale was low at T1 (Cronbach's $\alpha = 0.33$) and T2 (Cronbach's

$\alpha = 0.31$) and thus we decided to focus on childcare tasks and family decisions only. Internal consistency was adequate for the family decisions (Cronbach's $\alpha = 0.65$) and high for the childcare tasks (Cronbach's $\alpha = 0.87$) sub-scales at 4 months. At 12 months, internal consistency was adequate for family decisions (Cronbach's $\alpha = 0.60$) and high for childcare tasks (Cronbach's $\alpha = 0.82$).

Child Temperament

The fussiness/difficulty subscale (nine items) of the Infant Characteristics Questionnaire (ICQ; Bates et al., 1979) was used to obtain information about the temperament of the infants. Parents rated the fussiness of their infant on a seven-point scale with a low score meaning easy and a high score meaning difficult. An example of the items is: "How easy or difficult is it for you to calm or soothe your baby when he/she is upset?" (1 = *very easy*, 7 = *difficult*). Again, scores were averaged. Internal consistency was high (Cronbach's $\alpha = 0.82$).

Individual Parent Factors

Parents were asked whether they were biologically related to their infants (0 = *no*, 1 = *yes*) and whether they worked outside the home (0 = *no*, *not at this moment*, 1 = *yes*). Those who did work outside the home were asked how much they worked (1 = *part-time*, 2 = *fulltime*). The two work-related questions were combined to create one scale to measure work status (0 = *not working outside the home*, 1 = *part-time*, 2 = *fulltime*). Dummy variables were created for not-working (0 = *no*, 1 = *yes*) and part-time (0 = *no*, 1 = *yes*). In addition, standardized questionnaires were used to measure parental psychological adjustment (parental depression, parental anxiety, and parental stress).

Parental depression

The Edinburgh Postnatal Depression Inventory (EPDS; Cox et al., 1987) was used to measure depressive symptoms in parents. Parents answered 10 items about their depressive feelings in the past seven days (e.g., "I have been so unhappy that I have been crying" with response categories ranging from 0 = *yes, very often* to 4 = *no, never*). After reversing scores on items reflecting a lack of depression, scores were summed (possible score range: 0 – 30 with scores > 10 indicating a possible major or minor depressive disorder; Cox et al., 1987). Internal consistency was adequate (Cronbach's $\alpha = 0.62$).

Parental anxiety

Parents' general level of anxiety was assessed using the Trait Anxiety Scale of the State-Trait Anxiety Inventory – adult version (STAI; Spielberger and Gorsuch, 1983). This scale consists of 20 feelings or emotions and parents rated the frequency of these items on a four-point scale (answer categories ranged from 1 = *almost never* to 4 = *almost always*). An example item is: "I feel nervous and restless." All item scores were summed after responses to items reflecting an absence of anxiety (e.g., "I am happy") were reversed. Scores ranged from 20 to 80, with higher scores reflecting a higher level of anxiety (scores > 44 indicate high anxiety). Internal consistency was high (Cronbach's $\alpha = 0.86$).

Parental stress

Parents completed the subscale Parental Distress of the short version of the Parenting Stress Index (PSI; Abidin, 2012) to report on their levels of parental stress. An example of the 12 items in this subscale is "I feel trapped by my responsibilities as a parent" with response categories ranging from 1 (*strongly agree*) to 5 (*strongly disagree*). Scores were summed to create a total score. Scores > 33 indicates high parental stress (Abidin, 2012). Internal consistency was high (Cronbach's $\alpha = 0.85$).

Partner Relationship Quality

Partner relationship quality was assessed using the Golombok Rust Inventory of Marital State (GRIMS; Rust et al., 1986). This questionnaire consists of 28 items (e.g., "I am dissatisfied with our relationship") and parents had to rate these items on a scale of 0 (*strongly agree*) to 3 (*strongly disagree*). Half of the items are positively formulated and the other half are negatively formulated. In accordance with the GRIMS manual, the sum of negative items was subtracted from the sum of positive items, and then 42 was added to create the raw GRIMS score. Higher scores indicate poorer relationship quality (scores > 42 indicate severe relationship problems) (Rust et al., 1986).

Statistical Analyses

Our first aim was to determine which factors (child temperament, individual parent characteristics, and partner relationship quality) were related to family decisions making and childcare tasks at 4 months and at 12 months. To do so, we performed four linear mixed models with child temperament, individual parent characteristics (i.e., biological relatedness to child, work status, psychological adjustment, parenting stress), and partner relationship quality as parameters. Our second aim was to see whether significant parameters were the same for each family type. We used Hayes' PROCESS module for SPSS (Hayes, 2017) to test whether the relation between significant parameters and the corresponding outcome variables were moderated by family type.

In the literature, missing values are often deleted in a pairwise way. However, such methods lead to the introduction of (unwanted) bias and reduce power (Enders, 2010; Graham, 2012). Modern treatments for missing data, such as multiple imputation, provide effective solutions to these problems (Little et al., 2014) and can be used for dichotomous data too (Wu et al., 2015). To minimize bias and optimize power, missing data in this study (both T2 drop-outs and single missing items; see note on **Table 2** for specific numbers) were therefore handled by multiple imputation. Analysis of multiply imputed data involves three steps. First, we estimated missing values m times, resulting in m plausible complete versions of the incomplete data set. We used $m = 20$ imputations, using the "fully conditional specification" available in IBM SPSS 25.0 (2017). Second, each imputed data set was analyzed using the same statistical analysis applicable for complete data. Third, the results from each of the $m = 20$ analyses were combined into a single set of "pooled" results, using Rubin's (1987) rules for pooling estimates and SEs across imputations. We used the SPSS macro provided by Van Ginkel (2010) to perform the analysis and pooling steps in IBM SPSS 25.0 (2017), which estimates the (denominator) degrees of freedom for t (or

F) statistics using the robust method described by Van Ginkel and Kroonenberg (2014, p. 80, eq. 7). When there were significant interactions, we probed the interaction by applying Hayes' (2017) PROCESS macro for SPSS to each imputed data set, and then pooled moderation results using Rubin's rules.

To distinguish between caregivers, we labeled them caregiver A and caregiver B. The answer to the question "During the past week, who spent the most time with [name infant(s)]?" (asked by the research assistant when arranging the home visit) was used to identify caregiver A. The other parent was automatically identified as caregiver B. Caregiver A and caregiver B were randomly assigned when parents stated that they spend equal time with the infant(s). In addition, we randomly selected one twin for each family with twins, to avoid using the same parental scores twice.

RESULTS

Preliminary Analyses

Descriptive statistics for the total group, as well as for the statistics by gender, family type, and by caregiver (A or B) are presented in **Table 2**. To give an overview of the amount of imputed data, this table also shows the number of incomplete cases per questionnaire for the total group. Correlations between variables are presented in **Table 3**. Prior to the hierarchical regression analyses, the assumptions for this test were checked¹.

The data for family decisions at T1 and T2, anxiety, parenting stress scores at T1 were slightly peaked and slightly skewed. These deviations from the normal distribution seemed to be caused by some outliers². Sensitivity analyses were conducted to see whether the results differed when outliers were excluded and the results were similar.

Parameters of Task Division at Four Months

Family Decision Making

No significant equation was found [$F(8,260.99) = 0.819$, $p = 0.586$] when we assessed a mixed linear model with family decision making as the dependent variable and with infant temperament, biological relatedness, parental depression, parental anxiety, parenting stress, work status (not working vs. fulltime), work status (part-time vs. fulltime), and parent relationship quality as parameters.

Childcare Tasks

The mixed linear model with childcare tasks as the dependent variable and with infant temperament, biological relatedness,

parental depression, parental anxiety, parenting stress, work status (not working), work status (part-time), and parent relationship quality as parameters showed that R^2 was significantly different from zero, $F(8,261.02) = 4.64$, $p < 0.001$. Results showed that biological relatedness and work status (both not working vs. fulltime and part-time vs. fulltime) significantly contributed to the equation (see **Table 4** for the estimates of the fixed effects of the parameters in the model). Parents who were biological related to their children scored lower on relative time spend on childcare tasks, indicating that they were doing more of the childcare tasks than their partners were doing. Results with regard to work status showed similar results: compared to those who worked full-time, parents working less (either not working outside the home or working part-time) reported lower scores on the childcare task sub-scale (indicating that they were doing more than their partner).

Parameters of Task Division at 12 Months

Family Decision Making

The same analysis was conducted with family decision making at 12 months as the dependent variable but also with the two work status variables at 12 months included. Again, no significant equation was found, $F(10,259.08) = 0.82$, $p = 0.609$.

Childcare Tasks

For childcare tasks at 12 months, R^2 was significantly different from zero, $F(10,260.08) = 4.63$, $p < 0.001$. The mixed linear model with childcare tasks at 12 months as the dependent variable showed that the division of childcare tasks at this time point was only related to work status at 4 months (not working vs. working fulltime) and work status at 12 months (not working vs. working fulltime and part-time working vs. working fulltime); see **Table 4** for the estimates of the fixed effects of the parameters in the model. Not working when the baby was 4 months old was related to spending more time on childcare tasks at 12 months than were parents who were working fulltime at 4 months. Not working and working part-time when the baby was 12 months old was related to spending more time on childcare tasks than parents who were working fulltime at 12 months.

Moderation Analyses

First, we checked whether the relation between biological relatedness and childcare tasks at 4 months was moderated by family type. We excluded heterosexual parents, because they were all biologically related to their children (see **Table 2**). Results showed that, for lesbian mothers, biological relatedness was related to spending more time on childcare tasks than their partners (*pooled estimate* = -0.95 , *pooled SE* = 0.49 ; 95% CI: $LL = -1.99$, $UL = 0.08$). For gay fathers, the relation between childcare task involvement and biological relatedness was not significant (*pooled estimate* = 0.26 , *pooled SE* = 0.19 ; 95% CI: $LL = -0.13$, $UL = 0.65$). Second, we analyzed whether family type also acted as a moderator for the relation between (a) not working vs. fulltime and (b) working part-time vs. fulltime and time spent on childcare tasks at 4 months. The moderation

¹Since the data were nested, we checked whether it was necessary to account for the dependency of the data. Null models with random effects for infants, parents, and couples indicated that no variance was explained by any of these levels.

²We found extreme scores on family decision making at T1 (two per dataset), anxiety (one per dataset), distress (two per dataset), not working (four per dataset), and family decision making at T2 (2 in the original dataset and 1 per imputed dataset) to be univariate outliers. Two cases in the original dataset and three cases in the imputation sets (including two from the same family) were identified through Mahalanobis distance as multivariate outliers with $ps < 0.001$.

TABLE 2 | Means and standard errors of division of labor, infant temperament, individual parent factors, and partner relationship quality by family type.

	Gay fathers (n = 62)	Lesbian mothers (n = 119)	Heterosexual parents (n = 82)	Females (n = 160)	Males (n = 103)	Parent A (n = 133)	Parent B (n = 130)	Total (n = 263)
<i>At four months</i>								
Division of labor								
Family Decisions ^a	4.91 (0.09)	4.99 (0.05)	5.07 (0.07)	5.00 (0.05)	5.00 (0.07)	4.95 (0.06)	5.05 (0.05)	5.00 (0.04)
Child Care Tasks ^{b,j,k,l}	4.88 (0.10)	4.92 (0.08)	4.94 (0.18)	4.61 (0.08)	5.41 (0.10)	4.20 (0.08)	5.66 (0.07)	4.92 (0.07)
Infant Temperament ^c	2.74 (0.10)	3.03 (0.07)	2.98 (0.08)	3.04 (0.06)	2.79 (0.07)	3.00 (0.06)	2.89 (0.07)	2.95 (0.05)
Individual Parent Factors								
Biological relatedness, yes	50%	52.9%	100%	65%	69.9%	89.5%	43.8%	66.9%
Parental Depression ^d	3.87 (0.34)	4.54 (0.27)	4.58 (0.32)	4.72 (0.23)	3.88 (0.26)	4.65 (0.26)	4.13 (0.24)	4.39 (0.18)
Parental Anxiety ^e	31.39 (0.87)	33.69 (0.66)	33.33 (0.85)	33.75 (0.59)	31.91 (0.69)	33.34 (0.68)	32.72 (0.59)	33.03 (0.45)
Parental Stress ^f	21.63 (1.15)	21.55 (0.57)	22.31 (0.58)	21.81 (0.47)	21.81 (0.78)	22.60 (0.60)	20.99 (0.57)	21.81 (0.41)
Partner relationship quality ^g	21.14 (1.27)	20.14 (0.75)	21.86 (0.84)	20.40 (0.64)	21.71 (0.89)	21.10 (0.75)	20.73 (0.72)	20.91 (0.52)
<i>At 12 months</i>								
Division of labor								
Family Decisions ^h	4.99 (0.08)	4.95 (0.05)	5.10 (0.08)	4.97 (0.05)	5.07 (0.06)	4.95 (0.05)	5.06 (0.05)	5.01 (0.04)
Child Care Tasks ^{i,j,k,l}	4.96 (0.10)	4.93 (0.08)	4.91 (0.14)	4.72 (0.08)	5.25 (0.09)	4.51 (0.08)	5.36 (0.07)	4.93 (0.06)

Calculated from dataset with imputations (pooled). Numbers of missing values in at least one of the questions in the questionnaire: ^an = 22 (8.4%), ^bn = 8 (3.0%), ^cn = 9 (3.4%), ^dn = 4 (1.5%), ^en = 15 (5.7%), ^fn = 4 (1.5%), ^gin first part of questionnaire: n = 8 (3.5%) and in second part of the questionnaire: n = 4 (1.5%), ^hn = 44 (16.7%), ⁱn = 27 (10.3%), ^jHeterosexual mothers spent on average more time on childcare tasks at 4 months and 12 months than lesbian mothers did, $p < 0.001$ on both waves, ^kGay fathers spent on average more time on childcare tasks at 4 months and 12 months than heterosexual fathers did, $p < 0.001$ on both waves. ^lMothers spent on average more time on childcare tasks at 4 and 12 months than fathers did, $p < 0.001$ on both waves.

TABLE 3 | Correlations between division of labor, infant temperament, individual parent factors, and interpersonal factors.

	1	2	3	4	5	6	7	8	9
(1) Family Decisions at 4 months	1								
(2) Childcare Tasks at 4 months	0.24**	1							
(3) Infant Temperament	0.05	-0.04	1						
(4) Parental Depression	-0.01	-0.07	0.15*	1					
(5) Parental Anxiety	0.06	-0.03	0.26**	0.65**	1				
(6) Parental Stress	0.02	-0.06	0.23**	0.36**	0.39**	1			
(7) Partner relationship quality	-0.06	0.01	0.06	0.31**	0.41**	0.33**	1		
(8) Family Decisions at 12 months	0.50**	0.25**	0.05	0.02	0.11	0.09	0.01	1	
(9) Childcare Tasks at 12 months	0.10	0.62**	0.02	-0.01	0.00	-0.05	0.04	0.24**	1

Calculated from dataset with imputations (pooled). * $p < 0.05$, ** $p < 0.001$.

results revealed that family type was not a significant moderator. Model results ranged from $R^2(2,257) = 0.01$, $p = 0.457$ to $R^2(2,257) = 0.01$, $p = 0.442$ for not working vs. full-time. For part-time vs. fulltime working, the model results ranged from $R^2(2,257) = 0.01$, $p = 0.244$ to $R^2(2,257) = 0.11$, $p = 0.236$. Likewise, family type did not act as a moderator for associations between the three parameters (not working vs. fulltime at 4 months, not working vs. fulltime at 12 months, and part-time vs. fulltime at 12 months) and time spent on childcare tasks at 12 months. Model results ranged from $R^2(2,257) = 0.01$, $p = 0.473$ to $R^2(2,257) = 0.01$, $p = 0.120$ for not working vs. full-time at 4 months. For not working vs. fulltime at 12 months the model results ranged from $R^2(2,257) = 0.00$, $p = 0.746$ to $R^2(2,257) = 0.01$, $p = 0.202$ and for part-time working vs. fulltime at 12 months from $R^2(2,257) = 0.00$, $p = 0.663$ to $R^2(2,257) = 0.01$, $p = 0.265$. Thus, for all parents, irrespective of family type, work status was related to relative time spend

on childcare tasks at 4 months and at 12 months in the same way (parents working less reported spending more time on childcare tasks).

DISCUSSION

In identifying the determinants of the division of non-paid tasks between parents, we drew from Feinberg's (2003) model of co-parenting. We investigated whether child temperament, individual parent characteristics (i.e., biological relatedness to child, work status, psychological adjustment, parenting stress), and partner relationship quality explained how first-time gay, lesbian, and heterosexual parents divided labor (family decision making and childcare tasks) when their infants were 4 and 12 months old. Results showed that none of the factors explained the division of family decision making at 4 and 12 months.

TABLE 4 | Fixed effects estimates of predictors of childcare tasks.

Parameter	Childcare Division at 4 months			Childcare Division at 12 months		
	Estimate (SE)	95% Confidence Interval		Estimate (SE)	95% Confidence Interval	
		LL	UL		LL	UL
Intercept	5.58 (0.41)**	4.79	6.38	5.13 (0.35)**	4.63	6.00
Infant temperament	−0.02 (0.09)	−0.20	0.16	−0.00 (0.08)	−0.16	0.16
Individual parent characteristics						
Biological relatedness	−0.41 (0.14)*	−0.69	−0.14	−0.15 (0.12)	−0.39	0.09
Parental Depression	−0.03 (0.03)	−0.09	0.03	−0.01 (0.03)	−0.06	0.05
Parental Anxiety	0.01 (0.01)	−0.02	0.03	0.01 (0.01)	−0.02	0.03
Parenting stress at 4 months	−0.01 (0.01)	−0.03	0.01	−0.01 (0.01)	−0.03	0.01
Work status at 4 months – not working vs. fulltime	−0.95 (0.21)**	−1.36	−0.54	−0.60 (0.20)**	−1.00	−0.21
Work status at 4 months- Part-time vs. fulltime	−0.44 (0.16)*	−0.75	−0.14	−0.05 (0.17)	−0.38	0.29
Work status at 12 months – not working vs. fulltime	n/a			−0.78 (0.22)**	−1.22	−0.34
Work status at 12 months- Part-time vs. fulltime	n/a			−0.38 (0.16)*	−0.70	−0.06
Partner relationship quality	−0.00 (0.01)	−0.02	0.02	0.00 (0.01)	−0.01	0.02

Calculated from dataset with imputations (pooled). * $p < 0.05$, ** $p < 0.001$.

For relative time spent on childcare tasks, we found that biological relatedness mattered: parents who were biologically related to their children appeared to spend more time on childcare tasks than did non-related parents. However, this was only true for the lesbian mothers, and, interestingly, only when their children were 4 months old. In addition, parents who were not working or were working part-time at 4 months performed more childcare tasks at 4 months while not working and working part-time when the baby was 12 months old was also related to spending more time on childcare tasks at 12 months relative to parents who were working fulltime at 12 months. This was true for all family types. Other factors were not related to the relative amounts of time parents spent on childcare tasks.

All heterosexual parents were biologically related to their children, so we were unable to investigate whether variance within this group was explained by biological relatedness. For gay fathers, biological relatedness did not predict relative involvement in childcare tasks. This is not in line with the theory of selection (Hamilton, 1964), which suggests that biologically related parents invest more in their children than non-biological parents do. A plausible explanation is that gay fathers have a very unique position in our society. It is still rare for men to be primary caregivers and it is commonly supposed that men are less nurturing (Golombok et al., 2014). Artificial reproductive techniques that were used by lesbian mothers and heterosexual parents in our study are much more available in current society, while surrogacy is not. For example, in the Netherlands at the time of the study, gestational surrogacy was only available for medical reasons –excluding gay couples (Boele-Woelki et al., 2011). Gay fathers therefore have to overcome more obstacles before they are able to conceive (Taubman-Ben-Ari and Spielman, 2014) which could make them highly motivated to take care of their children – irrespective of whether they are biologically related or not. Finally, a substantial number of gay fathers with twins were biologically related to one of the

twins. We only selected one twin for each family, and thus some gay fathers treated as non-biological fathers in the analyses were biologically related to the other infant in the family. This might have increased the amount of time spent on childcare tasks. More research is needed to see whether this idea is supported by data.

The results for lesbian mothers were slightly different; they were partially in line with both social structural theory (Eagly and Wood, 1999), which assumes that biological abilities are related to the roles people play, and earlier studies of lesbian mothers with infants (e.g., Goldberg et al., 2012). At 4 months, biological mothers were spending more time on childcare tasks than non-biologically related mothers. This sounds plausible because birth mothers usually have greater access to paid parental leave (Goldberg, 2010) and are more likely to breastfeed. After 12 months, the link between biological relatedness and relative investment in childcare tasks disappeared. This supports our notion that the relation between biological status and time spend on childcare at 4 months it not driven by biological status itself but more by factors related to giving birth. Another explanation might be that non-biological parents, because of the lack of a biological link to the infants, are more motivated to spend time caring for the infants when they are older, perhaps feeling that more work is needed to establish meaningful relationships with the children. The biologically related parents, on the other hand, may be particularly sensitive to the partners' position and may attempt to support the relationships between children and the non-biological related parents (Johnson and O'Connor, 2002), resulting in a more equitable division of childcare tasks. Future research should investigate this in more depth.

As hypothesized, childcare task division at 4 and 12 months was related to how much parents worked regardless of family type: those who worked less than full-time, spent more time on childcare tasks. This is in line with both the time-constraint theory (Artis and Pavalko, 2003), which states that there are

only a finite number of hours during the day and that those who spend more time at paid work have less time available for non-paid work, and empirical studies of same-sex and different-sex parent families (Downing and Goldberg, 2011; Goldberg et al., 2012; Tornello et al., 2015). It is not in line with the results of a study on adoptive gay fathers (Feuge et al., 2019). However, that study focused on a broader topic, namely parental involvement, measured using questions about emotional support, discipline, physical care, openness to work, physical play, and evocation (thinking about the child in his/her absence) (Feuge et al., 2019). Parental involvement thus included activities that can be performed while working outside the home, such as thinking about the child. This might explain the absence of a link between work hours and parental involvement in that study.

Interestingly, we did not find any evidence that Feinberg's (2003) model of co-parenting is also applicable to the division of family decision making, suggesting that the decision-making process is influenced by other factors. One explanatory factor might be the amount of time spent on household tasks. For example, Moore (2008) found that Black lesbian-headed stepmothers who were in charge of domestic duties also reported that they were more in charge of major household decisions. Bartley et al. (2005) studied family decision-making in a group of heterosexual dual-earner couples without children and found similar results. Wives tended to spend more time on household tasks and tended to perceive themselves as more influential in decision making than their husbands. Unfortunately, our measure of relative time spent on household tasks was not reliable so we could not test this idea. Future studies on gay fathers and lesbian mothers with infants could test whether family decision making in same-sex parent families with young infants is also related to time spent on household tasks.

Gender still affects the division of non-paid tasks. Females spend more time on non-paid tasks than males do (Baxter et al., 2008, 2015), presumably because of gendered roles and gender ideology on a societal level (Geist, 2005; Greenstein, 2009; Nyman et al., 2013). Although it was beyond the scope of our research, it would be interesting to know how lesbian mothers and gay fathers identify with such traditional and/or non-traditional gender roles or expressions. In addition, future qualitative research might address questions like: do gay fathers feel equally involved in parenting? Why do lesbian mothers perform more part-time jobs than heterosexual mothers?

This study was the first to provide information about non-paid task division by gay fathers, lesbian mothers, and heterosexual parents with infants. Also, it was the first to use a more general model (Feinberg's model of co-parenting) to investigate possible determinants of non-paid task division, although most factors in the model were not influential; only work status was related to relative time spent on childcare tasks at 12 months. Further, because we used data from two waves (4 months and at 12 months), it was possible to detect any changes in determinants across the first year of parenthood. Furthermore, we had information from both parents for most families ($n = 133$).

Of course, the study also had some limitations. Unfortunately, we did not have reliable data about the relative amounts of time spent on household tasks. A reason for the low internal consistency of our measure might be the mix of stereotypically feminine, masculine, and neutral tasks included in the household tasks scale (Sumontha et al., 2017). Another limitation concerning the sample is the relatively high socioeconomic status and White ethnic background. This limits the generalizability to the whole population of first-time parents from heterosexual, gay-father, and lesbian-mother families although it is noteworthy that most gay fathers who used surrogacy to conceive are similar to those we studied. Surrogacy is very costly (between \$90,000 and more than \$120,000 in the US) (Thompson and Dodge, 2018) and therefore only an option for couples with high incomes. The non-probability techniques that were used to recruit the families also hamper generalizability (Bryman, 2012). Unfortunately, due to the sample size we were not able to analyze data for the parents in the Netherlands, France, and the United Kingdom separately. In the future, larger studies should explore this because parental leave policies vary greatly internationally. For example, Dutch mothers can take up 10 weeks of maternity leave³, French mothers 20 weeks, and British mothers around 50 weeks (Van Belle, 2016) albeit with very different levels of income. Finally, it would have been interesting to have a comparison group of couples who naturally conceived to see whether the findings of the current study would be the same or are specific to families who had to use artificial reproductive techniques to conceive.

Notwithstanding these limitations, our study gave us the opportunity to examine the division of non-paid tasks in families where parenting is always planned, as well as in families wherein gender is not a factor in that division of labor. Although Feinberg's model of co-parenting suggests that various factors other than gender are related to task division, our results showed that paid work outside the home was of great importance. Indeed, work hours at 4 and 12 months were the only significant correlates of relative time spent at 12 months. Our findings might encourage counselors who guide gay, lesbian, or heterosexual parents who are candidates for artificial reproductive techniques by talking to prospective parents about the link between paid and non-paid tasks to help them decide how to divide roles in their future families. Also, to decrease the still existing gender gap, with women spending more time on childcare tasks than men (Baxter et al., 2015), governments might also give secondary caregivers the option to decrease their work hours at 4 months so that childcare tasks might be divided more equitably at 12 months.

DATA AVAILABILITY STATEMENT

The datasets generated for this study are available on request to the corresponding author.

³www.rijksoverheid.nl

ETHICS STATEMENT

Ethical approval was granted by the appropriate committees at the three home institutes, namely University of Cambridge, University of Amsterdam, and Centre Universitaire des Saints-Pères. Written informed consent to participate in this study was provided by the participants' legal guardian/next of kin.

AUTHOR CONTRIBUTIONS

ML, HB, and OV were responsible for the design of the study in collaboration with MG, KE-D, AW, LV, and BR. LV, HB, KE-D, AW, BR, OV, and MG collected the data. KD was overseen the management of the study. TJ and LV conducted the data analysis. LV and MH-E interpreted the results and drafted this manuscript.

All authors contributed to the final version and have approved the final version for submission.

FUNDING

This research was supported, under the auspices of the Open Research Area (Application BO 3973/1-1; Principal Investigator, ML), by grants from the UK Economic and Social Research Council (ESRC; Grant ES/K006150/1; Principal Investigator, ML), The Netherlands Organisation for Scientific Research (NWO; Grant NWO 464-11-001, Principal Investigator, HB), the French Agence Nationale de la Recherche (ANR; Grant ANR-12-ORAR-00005-01, Principal Investigator, OV), and the Jacobs Foundation (Grant 015 11 63 00 to KE-D) whose support is gratefully acknowledged.

REFERENCES

- Abidin, R. R. (2012). *Parenting Stress Index*. Lutz, FL: PAR.
- Artis, J. E., and Pavalko, E. K. (2003). Explaining the decline in women's household labor: Individual change and cohort differences. *J. Marriage Fam.* 65, 746–761.
- Bartley, S. J., Blanton, P. W., and Gilliard, J. L. (2005). Husbands and wives in dual-earner marriages: decision-making, gender role attitudes, division of household labor, and equity. *Marriage Fam. Rev.* 37, 69–94. doi: 10.1300/J002v37n04_05
- Bates, J. E., Bennett Freeland, C. A., and Lounsbury, M. L. (1979). Measurement of infant difficulty. *Child Dev.* 50, 794–803. doi: 10.2307/1128946
- Baxter, J., Buchler, S., Perales, F., and Western, M. (2015). A life-changing event: first births and men's and women's attitudes to mothering and gender divisions of labor. *Soc. Forc.* 93, 989–1014. doi: 10.1093/sf/sou103
- Baxter, J., Hewitt, B., and Haynes, M. (2008). Life course transitions and housework: marriage, parenthood, and time on housework. *J. Marriage Fam.* 70, 259–272.
- Bianchi, S. M., Sayer, L. C., Milkie, M. A., and Robinson, J. P. (2012). Housework: who did, does or will do it, and how much does it matter? *Soc. Forc.* 91, 55–63. doi: 10.1093/sf/sos120
- Boele-Woelki, K., Curry-Sumner, I., Schrama, W., and Vonk, M. (2011). *Draagmoederschap En Illegale Opnemng Van Kinderen [Commercial Surrogacy And The Unlawful Placement Of Children]*. The Hague: WODC.
- Bos, H. M. W., Van Balen, F., and Van den Boom, D. C. (2007). Child adjustment and parenting in planned lesbian-parent families. *Am. J. Orthopsychiatry* 77, 38–48. doi: 10.1037/0002-9432.77.1.38
- Bryman, A. (2012). *Social Research Methods*, 4th Edn, Oxford: Oxford University Press.
- Burney, R. V., and Leerkes, E. M. (2010). Links between mothers' and fathers' perceptions of infant temperament and coparenting. *Infant Behav. Dev.* 33, 125–135. doi: 10.1016/j.infbeh.2009.12.002
- Cao, H., Milles-Koonce, W. R., Wood, C., and Fine, M. A. (2016). Identity transformation during the transition to parenthood among Same-Sex couples: an ecological, stress-strategy-adaptation perspective. *J. Fam. Theor. Rev.* 8, 30–59. doi: 10.1111/jftr.12124
- Chan, R. W., Raboy, B., and Patterson, C. J. (1998). Psychosocial adjustment among children conceived via donor insemination by lesbian and heterosexual mothers. *Child Dev.* 69, 443–457.
- Claffey, S. T., and Mickelson, K. D. (2009). Division of household labor and distress: the role of perceived fairness for employed mothers. *Sex Roles* 60, 819–831. doi: 10.1007/s11199-008-9578-0
- Coltrane, S. (2000). Research on household labor: modeling and measuring the social embeddedness of routine family work. *J. Marriage Fam.* 62, 1208–1233.
- Cooper, C. E., McLanahan, S. S., Meadows, S. O., and Brooks-Gunn, J. (2009). Family structure transitions and maternal parenting stress. *J. Marriage Fam.* 71, 558–574. doi: 10.1111/j.1741-3737.2009.00619.x
- Cowan, C. P., and Cowan, P. A. (1990). "Who does what?" in *Handbook of Family Measurement Techniques*, eds J. Touliatos, B. F. Perlmutter, and M. A. Straus (Beverly Hills, CA: Sage), 447–448.
- Cowan, C. P., and Cowan, P. H. (1988). Who does what when partners become parents: Implications for men, women and marriage. *Marriage Fam. Rev.* 12, 105–131. doi: 10.1300/J002v12n03_07
- Cox, J. L., Holden, J. M., and Sagovsky, R. (1987). Detection of postnatal depression: development of the 10-item edinburgh postnatal depression scale. *Br. J. Psychiatry* 150, 782–786. doi: 10.1192/bjp.150.6.782
- Downing, J. B., and Goldberg, A. E. (2011). Lesbian mothers' constructions of the division of paid and unpaid labor. *Femin. Psychol.* 21, 100–120. doi: 10.1177/0959353510375869
- Durtschi, J. A., Soloski, K. L., and Kimmes, J. (2017). The dyadic effects of supportive coparenting and parental stress on relationship quality across the transition to parenthood. *J. Marit. Fam. Therapy* 43, 308–321. doi: 10.1111/jmft.12194
- Eagly, A. H., and Wood, W. (1999). The origins of sex differences in human behavior: evolved dispositions versus social roles. *Am. Psychol.* 54, 408–423. doi: 10.1037/0003-066X.54.6.408
- Earle, S. (2000). Why some women do not breast feed: bottle feeding and fathers' role. *Midwifery* 16, 323–330. doi: 10.1054/midw.2000.0222
- Ehrenberg, M. F., Gearing-Small, M., Hunter, M. A., and Small, B. J. (2001). Childcare task division and shared parenting attitudes in dual-earner families with young children. *Fam. Relat.* 50, 143–153. doi: 10.1111/j.1741-3729.2001.00143.x
- Enders, C. K. (2010). *Applied Missing Data Analysis*. New York, NY: Guilford.
- Farr, R. H., and Patterson, C. J. (2013). Coparenting among lesbian, gay, and heterosexual couples: Associations with adopted children's outcomes. *Child Dev.* 84, 1226–1240. doi: 10.1111/cdev.12046
- Feinberg, M. E. (2003). The internal structure and ecological context of coparenting: a framework for research and intervention. *Parent. Sci. Pract.* 3, 95–131. doi: 10.1207/S15327922PAR0302_01
- Feuge, E. A., Cossette, L., Cyr, C., and Julien, D. (2019). Parental involvement among adoptive gay fathers: associations with resources, time constraints, gender role, and child adjustment. *Psychol. Sex. Orient. Gender Divers.* 6, 1–10. doi: 10.1037/sgd0000299
- Gamble, D., and Morse, J. M. (1993). Fathers of breastfed infants: postponing and types of involvement. *J. Obstet. Gynecol. Neonat. Nurs.* 33, 358–365. doi: 10.1111/j.1552-6909.1993.tb01816.x
- Gartrell, N., Banks, A., Hamilton, J., Reed, N., Bishop, H., and Rodas, C. (1999). The national lesbian family study: 2. interviews with mothers of toddlers. *Am. J. Orthopsychiatry* 69, 362–369. doi: 10.1037/h0080410
- Gartrell, N., Banks, A., Reed, N., Hamilton, J., Rodas, C., and Deck, A. (2000). The national lesbian family study: 3. interviews with mothers of five-year-olds. *Am. J. Orthopsychiatry* 70, 542–548. doi: 10.1037/h0087823

- Geist, C. (2005). The welfare state and the home: regime differences in the domestic division of labour. *Eur. Sociol. Rev.* 21, 23–41.
- Glass, J., and Fujimoto, T. (1994). Housework, paid work, and depression among husbands and wives. *J. Health Soc. Behav.* 35, 179–191. doi: 10.2307/2137364
- Goldberg, A. E. (2010). *Lesbian and Gay Parents And Their Children: Research On The Family Life Cycle*. Washington, DC: American Psychological Association.
- Goldberg, A. E., and Perry-Jenkins, M. (2004). Division of labor and working-class women's well-being across the transition to parenthood. *J. Fam. Psychol.* 18, 225–236. doi: 10.1037/0893-3200.18.1.225
- Goldberg, A. E., and Perry-Jenkins, M. (2007). The division of labor and perceptions of parental roles: lesbian couples across the transition to parenthood. *J. Soc. Pers. Relationsh.* 24, 297–318. doi: 10.1177/0265407507075415
- Goldberg, A. E., Smith, J. Z., and Perry-Jenkins, M. (2012). The division of labor in lesbian, gay, and heterosexual new adoptive parents. *J. Marriage Fam.* 74, 812–828. doi: 10.1111/j.1741-3737.2012.00992.x
- Golombok, S., Mellish, L., Jennings, S., Casey, P., Tasker, F., and Lamb, M. E. (2014). Adoptive gay father families: parent–child relationships and children's psychological adjustment. *Child Dev.* 85, 456–468. doi: 10.1111/cdev.12155
- Graham, J. W. (2012). *Missing Data: Analysis And Design*. New York, NY: Springer.
- Greenstein, T. N. (2009). National context, family satisfaction, and fairness in the division of household labor. *J. Marriage Fam.* 71, 1039–1051. doi: 10.1111/j.1741-3737.2009.00651.x
- Gross, C. L., and Marcussen, K. (2017). Postpartum depression in mothers and fathers: the role of parenting efficacy expectations during the transitions to parenthood. *Sex Roles* 76, 290–305. doi: 10.1007/s11199-016-0629-7
- Grote, N. K., Naylor, K., and Clark, M. S. (2002). Perceiving the division of family work to be unfair: do social comparisons, enjoyment, and competence matter? *J. Fam. Psychol.* 16, 510–522. doi: 10.1037//0893-3200.16.4.510
- Hall, L. D., Walker, A. J., and Acock, A. C. (1995). Gender and family work in one-parent households. *J. Marriage Fam.* 57, 685–692.
- Hamilton, W. D. (1964). The genetical evolution of social behavior. I. *J. Theor. Biol.* 7, 1–16. doi: 10.1016/0022-5193(64)90038-4
- Hayes, A. F. (2017). *Introduction To Mediation Moderation And Conditional Process Analysis: A Regression-Based Approach*, 2nd. Edn, New York, NY: Guilford.
- Heron, J., O'Connor, T. G., Evans, J., Golding, J., Glover, V., and The ALSPAC Study Team (2004). The course of anxiety and depression through pregnancy and the postpartum in a community sample. *J. Affect. Disord.* 80, 65–73. doi: 10.1016/j.jad.2003.08.004
- Johnson, S. M., and O'Connor, E. (2002). *The Gay Baby Boom: The Psychology Of Gay Parenthood*. New York, NY: New York University Press.
- Katz-Wise, S. L., Priess, H. A., and Hyde, J. S. (2010). Gender-role attitudes and behavior across the transition to parenthood. *Dev. Psychol.* 46, 18–28. doi: 10.1037/a0017820
- Lennon, M. C., and Rosenfield, S. (1994). Relative fairness and the division of housework: the importance of options. *Am. J. Sociol.* 100, 506–531.
- Little, T. D., Jorgensen, J. D., Lang, K. M., and Moore, E. W. G. (2014). On the joys of missing data. *J. Pediatr. Psychol.* 39, 151–162. doi: 10.1093/jpepsy/jst048
- McHale, J. P., Kazali, C., Rotman, T., Talbot, J., Carleton, M., and Lieberman, R. (2004). The transition to coparenthood: parents' prebirth expectations and early coparental adjustment at 3 months postpartum. *Dev. Psychopathol.* 16, 711–733. doi: 10.1017/S0954579404004742
- Minuchin, P. (1985). Families and individual development: provocations from the field of family therapy. *Child Dev.* 56, 289–302. doi: 10.2307/1129720
- Moore, M. R. (2008). Gendered power relations among women: a study of household decision making in black, lesbian stepfamilies. *Am. Sociol. Rev.* 73, 335–356. doi: 10.1177/000312240807300208
- Mulsow, M., Caldera, Y. M., Pursley, M., Reifman, A., and Huston, A. C. (2004). Multilevel factors influencing maternal stress during the first three years. *J. Marriage Fam.* 64, 944–956.
- Musick, K., Meier, A., and Flood, S. (2016). How parents fare: mothers' and fathers' subjective well-being in time with children. *Am. Sociol. Rev.* 81, 1069–1095. doi: 10.1177/0003122416663917
- Nyman, C., Reinikainen, L., and Stocks, J. (2013). Reflections on a cross-national qualitative study of within-household finances. *J. Marriage Fam.* 75, 640–650. doi: 10.1111/jomf.12033
- Ostberg, M. (1998). Parental stress, psychosocial problems and responsiveness in help-seeking parents with small (2–45 months old) children. *Acta Psychiatr. Scand.* 87, 69–76. doi: 10.1080/08035259850157903
- Patterson, C. J., Sutfin, E. L., and Fulcher, M. (2004). Division of labor among lesbian and heterosexual parenting couples: correlates of specialized versus shared patterns. *J. Adult Dev.* 11, 179–189.
- Patterson, J. M. (1988). Families experiencing stress: I. the family adjustment and adaptation response model: II. applying the FAAR model to health-related issues for intervention and research. *Fam. Syst. Med.* 6, 202–237.
- Rothbart, M. K., and Bates, J. E. (1998). "Temperament," in *Handbook of Child Psychology: Vol. 3. Social Emotional And Personality Development*, 3rd Edn, eds N. Eisenberg and W. Damon (New York, NY: Wiley), 105–176.
- Rubin, D. B. (1987). *Multiple Imputation For Nonresponse In Surveys*. New York, NY: John Wiley.
- Rust, J., Bennun, I., Crowe, M., and Golombok, S. (1986). The golombok rust inventory of marital state (GRIMS). *J. Sex Marit. Therapy* 1, 55–60. doi: 10.1080/02674658608407680
- Solmeyer, A. R., and Feinberg, M. E. (2011). Mother and father adjustment during early parenthood: the roles of infant temperament and coparenting relationship quality. *Infant Behav. Dev.* 34, 504–514. doi: 10.1016/j.infbeh.2011.07.006
- Spielberger, C. D., and Gorsuch, R. L. (1983). *State-Trait Anxiety Inventory For Adults: Manual Instrument And Scoring Guide*. Redwood City, CA: Mind Garden.
- Stone, L. L., Mares, S. H. W., Otten, R., Engels, R. C. M. E., and Janssens, J. M. A. M. (2016). The co-development of parenting stress and childhood internalizing and externalizing problems. *J. Psychopathol. Behav. Assess.* 38, 76–86. doi: 10.1007/s10862-015-9500-3
- Sumontha, J., Farr, R. H., and Patterson, C. J. (2017). Children's gender development: associations with parental sexual orientation, division of labor, and gender ideology. *Psychol. Sex. Orient. Gender Divers.* 4, 438–450.
- Taubman-Ben-Ari, O., and Spielman, V. (2014). Personal growth following the first child's birth: a comparison of parents of pre- and full-term babies. *Soc. Work Res.* 38, 91–106. doi: 10.1093/swr/svu011
- Thompson, A. D., and Dodge, D. (2018). *The Cost Of Becoming A Gay Dad: The Ultimate Guide*. Available online at: <https://www.gayswithkids.com/the-cost-of-gay-becoming-a-gay-dad-2465969199.html?rebelltitem=1#rebelltitem1> (accessed October 16, 2018).
- Tornello, S. L., Sonnenberg, B. N., and Patterson, C. J. (2015). Division of labor among gay fathers: associations with parent, couple, and child adjustment. *Psychol. Sex. Orient. Gender Divers.* 2, 365–375. doi: 10.1037/sgd0000109
- Van Belle, J. (2016). Paternity and parental leave policies across the European Union. *Eur. Comm.* Available online at: https://www.rand.org/pubs/research_reports/RR1666.html (accessed July 13, 2019).
- Van Egeren, L. A. (2004). The development of coparenting relationship over the transition to parenthood. *Infant Ment. Health J.* 25, 453–477. doi: 10.1002/imhj.20019
- Van Ginkel, J. R. (2010). *MI-MUL2.SPS (Computer Code)*. Available online at: <https://www.universiteitleiden.nl/en/staffmembers/joost-van-ginkel/tab-1> (accessed November 12, 2019).
- Van Ginkel, J. R., and Kroonenberg, P. M. (2014). Analysis of variance of multiply imputed data. *Multiv. Behav. Res.* 49, 78–91. doi: 10.1080/00273171.2013.855890
- Van Rijn - van Gelderen, L., Bos, H. W. M., Jorgensen, T. D., Ellis-Davies, K., Winstanley, A., Golombok, S., et al. (2018). Wellbeing of gay fathers with children born through surrogacy: a comparison with lesbian-mother families and heterosexual IVF parent families. *Human Reprod.* 33, 101–108. doi: 10.1093/humrep/dex339
- Vecheo, O., Gross, M., and Poteat, V. (2011). Partage des tâches parentales au sein des couples de mères lesbiennes françaises ayant eu recours à une insémination artificielle avec donneur anonyme: division of parental labor in french lesbian mother families created by anonymous donor insemination. *Psychol. Franc.* 56, 1–18. doi: 10.1016/j.psfr.2010.11.002
- West, C., and Zimmerman, D. H. (1987). Doing gender. *Gender Soc.* 1, 125–151.

Wu, W., Jia, F., and Enders, C. (2015). A comparison of imputation strategies for ordinal missing data on likert scale variables. *Multiv. Behav. Res.* 50, 484–503. doi: 10.1080/00273171.2015.1022644

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Van Rijn - Van Gelderen, Ellis-Davies, Huijzer-Engbreghof, Jorgensen, Gross, Winstanley, Rubio, Vecho, Lamb and Bos. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



The Perceptions of New Zealand Lawyers and Social Workers About Children Being Adopted by Gay Couples and Lesbian Couples

Rhoda Scherman^{1*}, Gabriela Misca^{2*} and Tony Xing Tan^{3,4}

¹ Department of Psychology, Auckland University of Technology, Auckland, New Zealand, ² School of Psychology, University of Worcester, Worcester, United Kingdom, ³ Department of Educational and Psychological Studies, University of South Florida, Tampa, FL, United States, ⁴ Department of English, School of Foreign Studies, Xi'an Jiaotong University, Xi'an, China

OPEN ACCESS

Edited by:

Fiona Tasker,
Birkbeck, University of London,
United Kingdom

Reviewed by:

Pedro Alexandre Costa,
University Institute of Psychological,
Social and Life Sciences (ISPA),
Portugal
Nicola Carone,
Università di Pavia, Italy

*Correspondence:

Rhoda Scherman
rhoda.scherman@aut.ac.nz
Gabriela Misca
g.misca@worc.ac.uk

Specialty section:

This article was submitted to
Developmental Psychology,
a section of the journal
Frontiers in Psychology

Received: 16 December 2019

Accepted: 26 August 2020

Published: 25 September 2020

Citation:

Scherman R, Misca G and Tan TX
(2020) The Perceptions
of New Zealand Lawyers and Social
Workers About Children Being
Adopted by Gay Couples and Lesbian
Couples. *Front. Psychol.* 11:520703.
doi: 10.3389/fpsyg.2020.520703

Global trends increasingly appear to be legitimizing same-gender relationships, yet international research shows that despite statutory rights to marry—and by extension, adopt children—same-gender couples continue to experience difficulties when trying to adopt. Primary among these barriers are the persistent heteronormative beliefs, which strongly underpin the unfounded myths about parenting abilities of same-gender couples. Such biased beliefs are perpetuated by some adoption professionals who oppose placing children with lesbian or gay couples. In 2013, New Zealand passed the Marriage Equality Act, making it possible for same-gender couples to legally marry—and by extension, adopt. This provided an opportunity to investigate the perceptions of New Zealand professionals about children being placed with same-gender couples, in a country often perceived to be more tolerant of LGBT people. New Zealand social workers and lawyers (an under-studied group)—the professions most likely involved in adoption—were recruited via professional bodies. Because studying perceptions and beliefs on socially sensitive topics are highly susceptible to social desirability, we designed an instrument utilizing multiple methods to assess and corroborate participants' views about placing children for adoption with couples of the same gender. Administered online and anonymously, the survey included demographic questions, evaluation of negative-meaning and positive-meaning statements, and used a scenario describing a prospective adoptive couple whose gender was ambiguous, in the context of adopting children of varying needs. Overall, the study found that while New Zealand lawyers and social workers ($N = 314$) had generally favorable views of gay and lesbian adoption, they still reported a preference to see children adopted by heterosexual couples over same-gender couples, within which lesbian and gay couples were preferred equally. Moreover, being religious and politically conservative were characteristics associated with more negative views toward placing children with same-gender couples. We conclude that, despite winning the rights to marry (and adopt as couples), such legislative wins might be merely the first hurdle to be overcome;

normalizing same-gender parenting is what needs to happen next. Our study adds to the research focused on adoption professionals in various countries, with the ultimate aim to inform practices and policies supportive of families headed by same-gender couples and formed through adoption.

Keywords: same-gender parenting, lesbian and gay parents, adoption by same-gender couples, same-sex adoption, lawyers, social workers, adoption professionals' attitudes, New Zealand

INTRODUCTION

On 17th April, 2013, New Zealand became the 13th country to give same-gender couples the right to marry (Chapman, 2013). Commensurate and implicit in this law change, lesbian and gay couples also became eligible to adopt *as couples*, whereas prior to the law change, only married couples (i.e., heterosexual couples) although in some cases, single persons could adopt children in New Zealand (Gibbs and Scherman, 2013). These socio-political changes mirror similar trends that are increasingly legitimizing same-gender relationships in nearly 30 countries (Masci et al., 2019).

In this climate, a question arose: is the adoptive parenting by same-gender couples also being legitimized, given that the right to adopt as a couple is so often predicated on the requirement of being lawfully married? A look through the international research literature shows that despite numerous countries awarding statutory rights to marry—and by extension, adopt—lesbian and gay couples continue to report facing ongoing obstacles when trying to adopt, perpetrated mainly by individual adoption worker and agency biases (e.g., Brodzinsky, 2003; Ryan et al., 2004; Matthews and Cramer, 2006; Sullivan and Harrington, 2009; Kinkler and Goldberg, 2011; Messina and D'Amore, 2018).

Can we expect the same trend in New Zealand? Is the passage of laws allowing same-sex marriage seemingly reflective of positive perceptions of same-gender parenting? These are the overarching questions that incited the current study. While legislation might make it possible for lesbian and gay couples to adopt, it remains unclear how professionals feel about children being placed with lesbian couples or gay couples. Therefore, the present study set out to explore New Zealand professionals' perceptions of lesbian and gay couples adopting children. The paper first summarizes the prevailing myths—and refuting evidence—about same-gender parenting and adoption, in order to better understand the biases against adoptions by same-gender couples. This is followed by a review of the international research identifying the primary barriers experienced by prospective same-gender adopters. New Zealand's unique context is then considered, before describing the study.

Myths and Stereotypes Surrounding Same-Gender Parenting

Despite some progressive social changes that reflect more accepting attitudes toward gay and lesbian couples, doubts remain as to their ability to successfully parent or adopt (Montero, 2014). In short, same-gender parenting remains a contentious and polarizing issue, fuelled in large part by widespread hetero-normative assumptions that the “*married,*

two-parent, heterosexual couple [is] the norm against which all other kinds of couples are measured, evaluated, and judged” (Lubbe, 2008, p. 326). These heterosexist beliefs lead to (mis)perceptions that families headed by same-gender couples are different—if not dangerous. At the same time, a type of *homo-normative* representation is also reinforced, whereby the acceptable homosexual is one that most resembles the heterosexual (Appell, 2008; Riggs, 2012).

These residual homophobic attitudes and sexist beliefs are strongly underpinned by religious fundamentalism, Christian orthodoxy and political conservatism (Rowatt et al., 2006; Jonathan, 2008). Furthermore, religiosity (defined here as the *quality of being religious*; Dictionary.com, 2020) has a clear representation of what *family* should look like: a married man and women, with biologically related children—which fundamentally contradicts the model of families headed by same-gender couples (Brown et al., 2009; Rye and Meaney, 2010; Sohr-Preston et al., 2017). This brings sexual orientation to the forefront of the debate about what makes an appropriate family and suitable parents for children, and perpetuates long-standing myths and misperceptions, including that:

1. Children need both male and female role models, which parents of the same-gender do not provide.
2. Children raised by same-gender parents will be maladjusted and suffer stigma, social harm, and bullying.
3. Children of same-gender parents will become gay or suffer gender identity confusion.
4. Gay men (in particular) and lesbian women are more likely to sexually abuse their children.

Researchers Refute Myths and Stereotypes

In response to the myth that only when being raised by a mother and a father can children grow to be well-adjusted adults, research from the United Kingdom and United States reported that families headed by same-gender couples regularly engage with, and gain support from, large networks and communities of like-minded people—of both genders (Golombok et al., 2003; Erich et al., 2005; McCann and Delmonte, 2005; Gianino, 2008; Farr et al., 2010; Kinkler and Goldberg, 2011; Leddy et al., 2012). Moreover, children whose lesbian mothers or gay fathers were originally in heterosexual relationships, will also have both mothers and fathers in their lives in the same way—and with the same varying degree of contact—as children of heterosexual couples who divorce and remarry. According to Gates (2015), any disadvantage experienced by the children in families headed by same-gender couples can be explained by the instability

experienced in the divorce that proceeded the same-gender union, rather than the sexual orientation of the parents.

Moreover, some authors have reported that the psychological adjustment of children with same-gender parents is not merely on par with children raised by heterosexual parents, but that children raised by lesbian and gay parents had better psychological adjustment (Biblarz and Stacey, 2010; Fedewa et al., 2015). Adding further strength to the argument that families headed by same-gender couples offer something positive for children, Appell (2008) considered the normative and non-normative features of families headed by same-gender couples, and the implications of these types of families within the context of adoption. She suggested that same-gender couples are becoming more heteronormative, in that they are opting for monogamy and marriage, and in that context, forming nuclear two-parent families. On the surface, this might seem like a good move; however, Appel argues that this style of family runs the risk of becoming too much like the less-preferred “closed” adoptive family model. Whereas, when the families of same-gender parents are truer to their natural social kinship model, owing to the fact that many same-gender couples require others outside of the two-parent relationship to create their families, this style of family mirrors that of the preferable “open adoption” model.

To the extent that homosexual families are normative in their nuclear structure, they are in danger of falling into the trap of the closed adoption model. On the other hand, these lesbian and gay families who are not wedded to the nuclear structure are finding themselves and their children in larger genetic and social kinship networks... Adoption with contact is a model of community or shared parenting that may have lessons for these same-sex parent families. It undermines the heteronormative model of two-parent, exclusive parenting by recognizing the multiple people who have parental or parent-like relationships with children. (Appell, 2008, pp. 309–310).

Empirical studies have drawn similar conclusions about the openness of sexual minority adoptive parents, when compared to heterosexual adoptive parents. In both domestic (Brodzinsky and Goldberg, 2016) and international (Brodzinsky and Goldberg, 2017) adoptions, sexual minority adopters were reported to have more post-placement contact with birth families, likely due to having “a more expansive notion of family” (Brodzinsky and Goldberg, 2017, p. 122) and greater emphasis on social versus biological kinship relationships. It has also been reported that some birth parents intentionally select lesbian or gay prospective adopters due to the belief that sexual minority parents embody diversity and would be more tolerant (Farr et al., 2018b).

Opponents to same-gender parenting have also argued that children raised by lesbian and gay parents will suffer the risk of social harm (Black, 2005), due to being stigmatized, harassed, or bullied by peers. While children raised by same-gender parents may experience some stigma or bullying from their peers (Crouch et al., 2016), this has been found to occur no more frequently than it does to children from heterosexual families (Vanfraussen et al., 2003; Gartrell et al., 2005). Some authors support the notion that the stresses caused by stigmatization/bullying can result in

positive learning experiences for the children, enhancing their resilience and resulting in personal growth (Bos et al., 2008; Telingator, 2013; Titlestad and Pooley, 2013). Other researchers have determined that children’s well-being is more affected by *family processes* (e.g., quality of parenting) than *family structure* (e.g., number or sexual orientation of parents) (Short et al., 2007; Golombok and Tasker, 2015).

In the matter of children’s gender development, and fears that growing up with lesbian or gay parents will result in gender identity confusion, studies repeatedly refute this myth (e.g., Carone et al., 2020), finding instead that a child’s own gender, as opposed to parental sexual orientation, is a stronger influence on whether or not children engage in gender-conforming behaviors (Farr et al., 2018a). On the other hand, Gartrell et al. (2019), reporting on findings from their US longitudinal study spanning more than 20 years, did find a greater likelihood of same-sex attraction and sexual minority identity in the offspring of lesbian parents, suggesting that being raised by same-gender parents can lead to more diverse sexual expression. Importantly, it has also been suggested by other researchers that if the offspring of same-gender parents do turn out to be homosexual, the likelihood is extremely high that they will grow up in more accepting environments, than did many lesbian and gay individuals who grew up in heterosexual homes (Carastathis et al., 2017; VanderWaal et al., 2017). Regardless of the eventual sexual identity of children raised by lesbian and gay parents, the offspring are being raised in accepting environments that promote more tolerance of diversity, which many of the children/young adults themselves believe to be a beneficial by-product of their unique family life (Welsh, 2011).

Finally, one of the earliest and more denigrating myths about same-gender parenting is the notion that children raised by gay or lesbian parents are more likely to be sexually abused, which appears to stem from the belief that homosexuals are sexually deviant people (Hicks, 2006). A review of the scientific research shows no such support for these claims (Ryan and Cash, 2003; Herek, 2006; Tasker and Bellamy, 2019). Pedophilia, which is the sexual attraction of an adult to a child, is completely unrelated to the adult’s sexual orientation (Mallon, 2000). In fact, Jenny et al. (1994) reported that children are “over 100 times” (p. 44) more likely to be molested by a relative’s heterosexual partner than by an identifiably gay person.

Barriers to Same-Gender Parenting Still Remain: A Review of Literature

The evidence in support of same-gender parenting is persuasive. With so much empirical evidence discounting the myths, coupled with eroding legal/statutory barriers, it is surprising to find that lesbian and gay couples still battle to be considered as adoptive parents. Nonetheless, research demonstrates that negative attitudes and discriminatory treatment by *adoption professionals* continues to be another significant barrier to adoption and fostering for sexual minority individuals and couples (e.g., Brooks and Goldberg, 2001; Brodzinsky et al., 2002; Brodzinsky, 2003; Ryan et al., 2004; Matthews and Cramer, 2006; Mallon, 2007; Ryan and Whitlock, 2008; Anderssen and Hellesund, 2009;

Sullivan and Harrington, 2009; Kinkler and Goldberg, 2011; Goldberg et al., 2012).

Within this body of literature, reports of outright homophobia and/or deliberate discriminatory stances are rare. Instead, most of the studies reported some degree of acceptance of sexual minorities and a willingness (in principle, at least) to consider applications to adopt (or foster) by lesbian and gay individuals/couples. On the other hand, “... *there appears to be a level of subjectivity inherent in the approval process that is strongly suggestive of bias*” (Sullivan and Harrington, 2009, p. 243). Moreover, it has been reported that many agencies lack policies or guidelines for same-gender adoptions, resulting in placement decisions being made at the discretion of individual social workers, who may allow personal biases to unfairly influence the adoption process (Kenyon et al., 2003; Ryan et al., 2004). Consequently, in their bid to become adoptive parents, same-gender applicants face ongoing challenges related to religiosity, political ideology, hetero-normative biases, and differential treatment of sexual minorities by adoption workers. These barriers are briefly considered below.

Religiosity as a Barrier to Adoption by Same-Gender Couples

One of the strongest predictors of negativity toward same-gender adoption is religiosity (e.g., Ryan, 2000; Brodzinsky, 2003; Mallinger, 2010; McCutcheon and Morrison, 2014; Jäckle and Wenzelburger, 2015; Kimberly and Moore, 2015; Sohr-Preston et al., 2017). In this body of research, religiosity was sometimes measured in terms of the religious affiliation of the adoption agencies (e.g., Brodzinsky, 2003; Kimberly and Moore, 2015). Brodzinsky et al. (2002), for example, found that 100% of the Christian fundamentalist agencies and most Catholic-based agencies refused to work with same-gender applicants. In a subsequent study, Brodzinsky (2003) reported again that all of Christian fundamentalist and Baptist agencies (and a majority of Mormon, Catholic, and Methodist) refused to work with homosexual adopters. On the other hand, he found that Jewish-affiliated agencies and most Lutheran organizations were willing to place children with same-gender couples. More often, it has been the *religiousness* of individual staff that have been found to correlate with, or influence, placement decisions (Jäckle and Wenzelburger, 2015). For instance, Mallinger (2010) found that in a group of social workers in the United States, religious fundamentalism influenced individual attitudes toward lesbian and gay adopters, and reduced the likelihood of children being placed with same-gender prospective adopters (Mallinger, 2010).

The Relationship Between Political Ideology and Biases Against Adoptions by Same-Gender Couples

As noted earlier in the paper, often accompanying the Christian fundamentalist beliefs that underpin much of the homophobia experienced by prospective adopters, is a conservative or right-wing political ideology. It is a finding often seen in studies about attitudes toward homosexuality generally (e.g., Brown and Henriquez, 2008; Jäckle and Wenzelburger, 2015; Prusaczyk and Hodson, 2020), and as a barrier to the willingness of adoption professionals to work with sexual minority parents (e.g., Hall,

2010; Molina and Alarcón, 2015). For example, in their study of adoption agency directors in the United States, Kimberly and Moore (2015) reported that those who self-identified as republicans had more conflicted feelings about same-gender couples than those labeled as independent or democratic. Similarly, Jayaratne et al. (2008) from the United States, found that liberalism/conservatism was a significant predictor of whether or not the child welfare workers in that study would place children with lesbian and gay parents.

On the other hand, low religiosity and liberal political ideology, were found to accompany positive attitudes toward same-gender adoption in research from Portugal (Costa et al., 2014), and Spain (Molina and Alarcón, 2015). Finally, based on data from 28 European countries, Takács et al. (2016) also explored (among other variables and indices) the influence of political ideology and religiosity, reporting that the “*attitudes toward same-sex adoption were relatively positive among those . . . not bound to religious communities, . . . and who had a moderate left position on the right-left scale of political orientation.*” (2016, p. 1796). These studies suggest that while political conservatism may be another barrier to adoption for same-gender couples, liberal ideologies on the part of adoption professionals, may assist sexual minorities in their bid to become adoptive parents.

Hetero-Normative Biases Against Same-Gender Couples

Additional barriers have been reported by researchers, many of which involve what McCutcheon and Morrison (2014) refer to as *homonegativity*. This seems to reflect attitudinal alignment with stereotyped notions of lesbian and gay couples, on the part of social workers and other adoption professionals. Men, in particular, have been reported to hold the strongest homophobic or anti-gay attitudes (e.g., Ryan, 2000; Brodzinsky et al., 2002; Arnold et al., 2004; Costa et al., 2014; Kemper and Reynaga, 2015; Mirabito, 2014); however, the role of gender has not been as consistently considered across the research literature.

Social workers' negative attitudes appear to result in those *hetero-normative* biases described earlier, which preference straight couples and result in differential treatment of gay and lesbian adopters. Also described as *institutional discrimination* (Goldberg et al., 2013) and *professional homophobia* (Ryan et al., 2004), these placement biases are often subtle but sometimes manifest as more overt forms of discrimination by adoption agency staff (Kinkler and Goldberg, 2011). In their Canadian study of social workers' perceptions of biases at play when making placement decisions, Sullivan and Harrington (2009) illustrate this issue—as well as a type of duplicity taking place in the approval process. After initially reporting that same-gender couples were routinely being “approved,” the social worker participants in the study emphasized that “*approval does not guarantee a placement*” (Sullivan and Harrington, 2009, p. 243). The research respondents explained that while the lesbian and gay couples were regularly approved, their home study reports were being “*. . . written in such ways that nobody will ever accept them as adoptive families because there are enough issues identified in the study that people will not go forward and place children with them*” (p. 241). As they tried to make sense of

the duplicity occurring in the approval processes, Sullivan and Harrington (2009) argued against the idea that social workers are biased in general. The authors posited instead that the social workers are “*affected by stigma by association*” (p. 242), wherein social workers may be displaying a type of “*vicarious stigma*” (p. 244), as they act in the interests of biases they know or expect to exist. Whether occurring due to first-hand or vicarious biases, the study clearly showed that same-gender applicants are routinely being passed over for the more preferable heterosexual couples.

Differential Treatment of Same-Gender Applicants

Other studies show that the duplicity, bias and discrimination described by Sullivan and Harrington (2009) and others, is a source of considerable stress. Prospective adopters feel over-scrutinized (Brooks and Goldberg, 2001), and left with significant feelings of self-doubt (Messina and D’Amore, 2018). Ross et al. (2008), for example, in their qualitative study of the mental health outcomes of lesbian adoptive mothers in Canada, found that one of the most significant influences on the women’s sense of wellbeing was “*subtle, insidious homophobia and/or heterosexism*” (p. 260). The authors went on to report that as a group, their participants felt they were regularly the last choice, after all heterosexual couples were considered. This type of differential treatment of same-gender couples by North American agencies was also reported by Kenyon et al. (2003) who found that if agencies did select homosexual parents, they were often only offered children with special needs. Pressure to take special needs children was also reported by Brodzinsky et al. (2002), Matthews and Cramer (2006), Goldberg et al. (2007), and Averett et al. (2009), whose American participants reported feeling that their “*social workers persisted in ‘trying to give us the most damaged kids they know no one will take’*” (p. 53).

When considered separately, several authors suggest that prospective gay adopters are even more likely than lesbian women to experience resistance from adoption professionals. In his qualitative interviews with gay adoptive couples in the United States, Gianino (2008) described countless examples of how the men needed to negotiate their own type of duplicity that involved non-disclosure of their sexual orientation. On the other hand, to opt for openness and transparency, the gay couples risked anti-male gender biases from adoption professionals based on the belief that “*children need a mother*” (p. 216), as well as from some birth parents who rejected the idea of placing their children with a gay couple (Gianino, 2008).

Yet, while such omissions about being lesbian or gay may appear to some prospective adopters to increase their chances of successfully adopting, it will more than likely mean that only one parent will be recognized as the “legal” parent. Recall from the opening section of the paper that joint adoption by same-gender couples is almost always predicated on being legally wed. As such, in some countries, failing to disclose one’s relationship status (and therefore, one’s sexual orientation) means that only one member of the couple will be able to legally adopt. This leaves the other person as a silent, unacknowledged parent with potentially no legal standing (Blanks et al., 2004; Appell, 2008; Perrin et al., 2013).

The Legal Standing of Gay and Lesbian Adoptive Parents

Enter the lawyers, a whole new set of professionals that prospective adopters may need to work with in their bid to become/remain parents. The lawyers’ attitudes about seeing children placed with lesbian and gay couples is seemingly non-existent in the research literature. The lack of attitudinal research on lawyers, in regards to same-gender parenting, comes in stark contrast to what is otherwise an abundance of law literature about sexual minorities. This body of work has emphasized that within the criminal justice systems, lesbian women and gay men have long been the objects of negative stereotypes, prejudice, discrimination and even violence on the basis of their sexual orientation (Williams, 2015; Knight and Wilson, 2016). We also found no shortage of scholarship on the subject of same-gender marriage, the rights of same-gender couples, and the legal parentage of their children—which was, it is important to note, all from the United States. Within that body of literature, the “best interests of the child” was a dominant theme. Another repeating theme was the vulnerability of the children when one parent has no legal standing, especially if the same-gender union ends (e.g., Joslin, 2005; Graham, 2008; Barfield, 2014; Acosta, 2017; Mason, 2018). Without a legally protected parental relationship, children can miss out on inheritance rights, retirement benefits, and even health insurance, and they can lose access to the non-legal parent in the event that the parental relationship ends (Goldberg and Kuvalanka, 2012). The non-legal parent also runs the risk of not being able to travel with the child (Perrin et al., 2013), make medical decisions for an injured child, or worse, may not be able to maintain a relationship with the child in the event of divorce or death of the legal parent (Joslin, 2005).

The Relationship Between Marriage Rights and Parental Rights

After our review of the law literature, one question emerged. With the legal literature so focussed on the many risks associated with same-gender couples raising children when one parent is not legally recognized, would any of these statutory issues continue to exist in the aftermath of *Obergefell v. Hodges*—the 2015 Supreme Court ruling allowing for the nation-wide legalization of same-gender marriage in the United States. Surprisingly, the short answer seems to be a resounding yes. As Esser explains:

“Obergefell only addressed marriage rights—the relationship between the adults in a family. It did not specifically address the legal relationship of each of the parents to the children the family is raising” (2016, p. 1).

It seems that children remain at risk when both parents do not have legally sanctioned relationships with their children (e.g., Zarembka, 2015; Esser, 2016; Harris, 2017; Vaughn, 2017), and marriage equality laws do not address this parent/child relationship. Therein lies the rub: even though adoption by most same-gender couples cannot exist without first achieving statutory rights to marry, marriage equality laws do not necessarily concern themselves with subsequent parent-child relationships. Since marriage equality laws are about the relationships of adults, and not about adult relationships to

children/offspring or parenting, it may be that the legalization of same-gender marriage is not all that is needed in order to shift attitudes about same-gender parenting/adoption.

Summary of the International Literature and Rationale for New Zealand Study

In summary, there is a robust (yet predominately North American) body of social science research that almost uniformly finds same-gender couples to be capable and competent parents, whose children are not disadvantaged from being raised by parents in same-gender relationships (e.g., Crowl et al., 2008; Fedewa et al., 2015; Patterson, 2017). The international research also shows that despite hard-won statutory rights to marry—and by extension, adopt—lesbian and gay couples continue to encounter barriers when trying to adopt, perpetrated mainly by the biased attitudes of agencies and individual adoption workers (Ryan et al., 2004; Brodzinsky, 2003; Matthews and Cramer, 2006; Sullivan and Harrington, 2009). Concerns raised in the above literature about prospective adopters not disclosing their sexual orientation led us to the law literature. Despite a wealth of articles focussed on the statutory rights and challenges facing sexual minorities and same-gender couples wishing to adopt, the attitudes of lawyers, themselves, toward same-gender parenting/adoption remains uncertain, and empirically unexplored. Our interpretation of the law literature—as it informs the subject of adoptions by same-gender couples—is that a country's marriage-equality laws may be insufficient on their own to enable those couples to adopt. Hence, it may be that for lesbian and gay couples, winning the right to legally marry is merely the first hurdle; changing the attitudes of individual adoption workers—and lawyers—might be the next hurdle to overcome in their quest to become adoptive parents.

With the relatively recent passage of law in New Zealand, permitting lesbian and gay couples to marry—and adopt—we saw an opportunity to explore these issues outside of the dominant North American and European contexts, in a country perceived to be inclusive and progressive in its treatment of the LGBT community. Before introducing the current study, below we briefly describe New Zealand in terms of its attitudes toward sexual minorities, and describe some of the country's social welfare and adoption systems that also set it apart from the North American contexts that currently dominate the empirical literature.

The New Zealand Context

New Zealand is a relatively small country in the South Pacific, with a population of almost five million people (Statistics New Zealand, 2020). The country has a White European majority population as a result of colonization, and an Indigenous minority culture: the Māori. In terms of empirical research on the country's attitudes toward homosexuality, two studies (Kelley, 2001; Smith, 2011) found New Zealand to be in the middle range of scores, relative to the other 28 and 41 countries (respectively). Importantly, both studies reported that most of the countries (New Zealand included) showed bimodal distributions in their attitudes; if the majority of people in a country either approved

or disapproved of homosexuality, the second largest group often took the opposite stance. In this way, it is difficult to say what the majority of New Zealanders think about homosexuality.

In terms of prevalence of sexual minorities, Greaves et al. (2017) reported that out of a large national sample of more than 18,000 New Zealanders, 2.6% described their sexual orientation as lesbian/gay, with another 1.8% bisexual. However, the researchers used a novel approach to gather this data, offering the question of sexual orientation as an open-ended item. In so doing, the analysis began with an initial 49 different codes for how people described their sexual orientation, some of which could not be classed within the binary structure of heterosexual versus homosexual. The authors concluded that the diverse and nuanced ways that New Zealanders described their sexual orientation may reflect societal changes in how people see sexual orientation.

Regarding the status of sexual minorities in New Zealand more generally, there is evidence to suggest that New Zealand may be rather liberal when it comes to the LGBT communities. New Zealand was the first country in the world to see a transgender woman elected to the office of mayor, and shortly thereafter, she became the first openly transgender member of Parliament—both world firsts for New Zealand (Herkt, 2018; New Zealand Parliament, 2020). In fact, New Zealand has had openly gay and lesbian members of Parliament since 1993, and even the New Zealand Police and the Royal New Zealand Navy are said to have long had “gay-friendly” policies. Several online sites rank New Zealand quite high in terms of being “gay-friendly,” further illustrating how the country is perceived by LGBT people in other countries (Lemke et al., 2015; Lonely Planet (n.d.), 2020).

The country's ostensibly tolerant and accepting attitudes toward sexual minorities may be a reflection of beliefs and practices dating back to before the arrival of Western settlers. Māori of pre-colonial New Zealand were said to celebrate sexual diversity, including same-gender relationships (Aspin, 2005). At a time when the puritanical views of the West saw homosexuality as something deviant, Māori had the concept of *takatāpui*, “*companion of the same sex*,” which was a normal part of early Māori culture. In contemporary New Zealand, *takatāpui* has come to represent the intersection of sexual and gender *fluidity*, and being Māori (Kerekere, 2015; Rainbow Youth, 2020).

In terms of adoption, New Zealand has a relatively simple adoption structure, in that virtually all adoption decisions—whether domestic or international—are facilitated and approved by the social workers in the former Adoption Unit, of the Ministry for Children (referred to locally by its Māori name: *Oranga Tamariki*). Unlike the United States, for example, New Zealand does not have both public and private adoption agencies; however, private adoptions can be undertaken with the aid of lawyers, but *Oranga Tamariki* will still have to approve the placements. Similarly, there are only a very small number of not-for-profit agencies (fewer than 10), accredited by *Oranga Tamariki* to act on their behalf in the matter of *international adoptions*—none of which are faith-based. The people who run these organizations do not work for the government, nor are they likely to be social workers; in many cases, they will be members of

the adoption triangle, who became involved in order to help other New Zealanders become adoptive parents to overseas children. All adoptions facilitated by these accredited bodies, must still be vetted and approved by the social workers from Oranga Tamariki. New Zealand is also a signatory to the *Hague Convention on the Rights of the Child in Respect of Intercountry Adoption*.

New Zealand's primary adoption legislation, which dates back to 1955, calls for 'closed' adoption practices. Despite this antiquated law, which is still in effect, Oranga Tamariki has long been facilitating open adoptions (Scherman, 2012). New Zealand is also a nation with a large population of people affected first-hand by adoption: in the late 1960s, New Zealand had one of the highest domestic adoption rates of the Western world, wherein more than 6% of its children were being placed for adoption (Iwanek, 1997).

Traditionally, Māori have had their own child placement practices, referred to as *whāngai*—a word meaning 'to feed or nourish' (Griffith, 1996; McRae and Nikora, 2006). For Māori, children are considered *taonga* (highly valued treasures); in this context, *whāngai* are essentially 'gifted' to the *whāngai* parent whose role it is to look after the children and nurture them through to adulthood (Else, 1991). Built on the importance of *whānau* and *whakapapa* (family and genealogy), this customary system has always been open, enabling the children to remain in contact with their birth parents (Walker, 2006; Gibbs and Scherman, 2013).

For those seeking to adopt, while a male individual cannot adopt a female child, there are no other barriers preventing LGBT persons from adopting children domestically. However, it was not until the passage of the *2013 Marriage Equality Act* that sexual minorities could adopt *as couples*. International adoptions, on the other hand, are not available to lesbian or gay individuals or couples: "*No countries we work with accept applications from couples in de facto, civil union or same-sex relationships; this results from the overseas countries' legislation, policies and culture*" [ICANZ (Inter-Country Adoption New Zealand), 2020].

Aim of the Current Study

The aim of our study was to examine lawyers' and social workers' perceptions of gay couples and lesbian couples adopting children. While legislation might make it possible for gay and lesbian couples to adopt, it remains unclear how these professionals perceive placing children with lesbian couples or gay couples. We focused on lawyers and social workers because they work in the fields that facilitate or assist adoptions and foster care placements. We reasoned that social workers would be the most obvious professionals to potentially engage with same-gender couples looking to foster or adopt children. However, there is a big gap in the literature on lawyers' attitudes toward same-gender adoption. Because lawyers are often called on to facilitate private adoptions and are at the forefront of surrogacy arrangements, understanding their perceptions would be an important contribution to the literature. We guided our study with the following two research questions:

Research Question 1: What were New Zealand lawyers' and social workers' perceptions of same-gender adoption?

Research Question 2: How were the background characteristics of New Zealand lawyers and social workers related to their perceptions?

MATERIALS AND METHODS

Participants

Upon receiving Institutional Review Board (IRB) approval from the first author's university, participants were recruited via professional bodies and notices in professional newsletters. For social workers, we first approached their professional body, Aotearoa New Zealand Association of Social Workers, and asked them to pass along our invitation to participate. We also placed a small announcement in a monthly newsletter for social workers. In order to recruit lawyers, using the New Zealand Law Society website, we identified the practice areas with the greatest likelihood of potentially dealing with prospective adopters (e.g., family law), and then, with the aid of the law society, those lawyers were sent the study's invitation and information sheet. The use of a third-party recruitment approach—as a mandate of the IRB—resulted in not knowing how many recruitment invitations were originally distributed. By extension, this meant that it was impossible to ascertain 'response rates' for either group of participants. In total, 313 online surveys were completed. Among them, 116 were lawyers and 173 were social workers. The other 24 respondents were in other fields such as psychotherapy and were removed from data analysis because of small sample size. There was no discernible difference between those with and without missing data in terms of available demographic information such as age, gender, occupation and ethnicity.

Table 1 summarizes the lawyers' and the social workers' background information. Both lawyers and social workers, on average, were middle-aged professionals who leaned toward the liberal end of the political spectrum. Overall, the two groups were not statistically different on five of the nine background variables (age, ethnicity, sexual orientation, relationship status, and parenting experience). There were significant or marginally significant differences on four variables: social workers scored significantly or marginally significantly higher on education level and political ideology than the lawyers; there were proportionately more females in the social workers; and there were marginally significantly more lawyers than social workers who reported identifying with some religion.

Procedures

We used an online survey hosted by Survey Monkey to gather data on the participants' perceptions about placing children with same-gender couples. In all cases, invitations to participate directed interested persons to the Survey Monkey URL, wherein the first page of the survey explained that completion of the survey signaled consent. No one-on-one contact was made, nor was any identifying information collected, as dictated by the IRB. All participants completed the same survey.

TABLE 1 | Summary of demographic backgrounds between lawyers and social workers ($N = 289$).

Variable	Lawyers ($n = 116$)	Social workers ($n = 173$)	Chi-square			t-test		
			df	χ^2	p	df	t	p
Age	47.70 ($SD = 10.50$; $R = 23-69$)	49.50 ($SD = 11.0$; $R = 24-71$)				286	1.37	0.17
Education	5.47 ($SD = 0.80$; $R = 5-7$)	6.05 ($SD = 0.95$; $R = 5-7$)				287	5.43	0.00
Political ideology	4.80 ($SD = 1.5$; $R = 2-7$)	5.10 ($SD = 1.2$; $R = 2-7$)				287	1.96	0.06
Ethnicity			1	1.11	0.29			
European	105 (90.5%)	146 (86.4%)						
Non-European	11 (9.5%)	23 (13.6%)						
Gender			1	5.74	0.02			
Female	94 (81.0%)	157 (90.8%)						
Male	22 (19.0%)	16 (9.2%)						
Sexual orientation			1	2.53	0.11			
Heterosexual	108 (93.1%)	151 (87.3%)						
Non-heterosexual	8 (6.9%)	22 (12.7%)						
Religion			1	3.32	0.07			
No	62 (53.5%)	111 (64.2%)						
Yes	54 (46.7%)	62 (35.8%)						
Relationship status			1	1.61	0.20			
In a relationship	93 (80.2%)	126 (73.7%)						
Single	23 (19.8%)	45 (26.3%)						
Parenting experience			1	0.98	0.32			
Yes	87 (76.3%)	138 (81.2%)						
No	27 (23.7%)	32 (18.8%)						

Instrument

Demographic Background

The participants responded to common demographic questions such as age, gender, ethnicity, educational background, occupation, and relationship status (married/in a long-term relation, single). Additionally, the participants responded to questions that were pertinent to the aims of the current study such as their sexual orientation (heterosexual, bisexual, gay, and lesbian) and whether the participant was a parent (yes and no). Finally, because existing literature has shown that both religiosity and political views are related to social attitudes toward homosexuality (Brown and Henriquez, 2008; Jäckle and Wenzelburger, 2015) and adoption (Perry, 2010), the participants responded to an open-ended question asking if they identified with any particular religion (*yes* or *no*) and another question about their political views ($1 = \text{extremely conservative}$, $2 = \text{moderately conservative}$, $3 = \text{slightly conservative}$, $4 = \text{neither conservative nor liberal}$, $5 = \text{slightly liberal}$, $6 = \text{moderately liberal}$, $7 = \text{extremely liberal}$). In data analysis, these variables were treated as predictors of the participants' perceptions of gay and lesbian adoption.

Perceptions of Adoption and Parenting by Gay Couples and Lesbian Couples

The participants were asked to respond to 24 statements on a 6-point Likert scale ($1 = \text{Strongly Disagree}$, $2 = \text{Moderately Disagree}$, $3 = \text{Slightly Disagree}$, $4 = \text{Slightly Agree}$, $5 = \text{Moderately Agree}$, $6 = \text{Strongly Agree}$). This approach aimed to obtain information about the participants' perceptions of gay and lesbian

adoption (using heterosexual adoption as a "default" option), drawing inspiration for the statements from literature on lesbian women and gay men as sexual minorities, and current research focused on same-gender adoption and parenting. This section of the survey included both positive and negative statements. For example, *Same-gender relationships are as stable as heterosexual ones*; *If allowed to adopt, a lesbian or gay parent should only be allowed to adopt hard to place children*.

Post data collection inspection revealed that very few participants selected 1, 2, or 3 (strongly disagree, moderately disagree or slightly disagree). To reduce the imbalance, we truncated the response to be on a 3-point Likert scale by collapsing ratings of 1, 2, 3, and 4 into one category then rescaled the response to be on 0 (Strongly disagree, moderately disagree, slightly disagree, and slightly agree), 1 (moderately agree) and 2 (strongly agree). Exploratory factor analysis suggested that the items fell into three factors with high internal consistencies: *Equal Parenting Effectiveness* (12 items, $\alpha = 0.95$), *Equal Opportunity to Adopt* (8 items, $\alpha = 0.81$) and *Equal Treatment by Agency* (4 items, $\alpha = 0.80$). The first factor (Equal Parenting Effectiveness) describes how much the participants believed that gay couples and lesbian couples were equally effective as heterosexual couples in parenting adopted children. The second factor (Equal Opportunity to Adopt) describes how much the participants believed that gay couples and lesbian couples should be given the same opportunity as heterosexual couples to adopt children. The third factor (Equal Treatment by Agency) describes how much the participants believed that agencies that place children for adoption should treat gay couples and lesbian couples equally as they treat heterosexual couples. The three factors are

strongly correlated ($r_s = 0.66\text{--}0.78$, $p < 0.001$). The scores could range from 0 to 3, with a higher score indicating a stronger endorsement. In data analysis, the mean of each factor was used.

Perception of Gay Couples' and Lesbian Couples' Suitability to Adopt Children With Special Needs

Because children waiting for adoption often have special needs and characteristics, we assessed how participants perceived the suitability of gay couples and lesbian couples to meet the challenges. In this assessment, we also included heterosexual couples for comparison. The participants indicated their extent of agreement (1 = *Strongly Disagree*, 2 = *Moderately Disagree*, 3 = *Slightly Disagree*, 4 = *Slightly Agree*, 5 = *Moderately Agree*, 6 = *Strongly Agree*) on seven hypothetical cases. The seven hypothetical cases were created for their typicality within the New Zealand care system, spanning low to high risk, with age and/or gender as added elements. They included (1) a child who needed to be placed with siblings, (2) a child who was a 13-year old teenager, (3) a healthy 8-year old girl, (4) a healthy 8-year old boy, (5) a sexually abused child who was sexually acting out, (6) a child who had chronic medical needs, and (7) a child with emotional and behavioral problems. For each child, the participants were asked to indicate their level of agreement of suitability for the child to be placed with a gay couple, a lesbian couple, and a heterosexual couple. The couples were described to be identical except their sexual orientation. For each type of couple, the participants' responses to all the seven scenarios were averaged to reflect their perceptions. The internal consistency was 0.96 for the participants' perceptions of the gay couple, 0.97 for the lesbian couple and 0.96 for the heterosexual couple. In data analysis, the mean for each type was used, the scores could range from 1 to 7 with higher scores indicated a stronger endorsement.

RESULTS

Research Question 1: What Were New Zealand Lawyers' and Social Workers' Perceptions of Same-Gender Adoption?

As shown in Table 2, between-group comparisons using t -tests showed that the two groups did not score statistically differently on five of the six comparisons except that the lawyers scored lower than the social workers on whether gay couples and lesbian couples should have the same opportunity as heterosexual couples to adopt children.

Both lawyers and social workers scored relatively high on five of the six perceptions of gay and lesbian adoption, and on perceptions of whether gay couples, lesbian couples and heterosexual couples were suitable to adopted children with different needs. However, further within-group comparisons also showed significant differences. Specifically, in terms of general perceptions of gay and lesbian adoption, the lawyers scored an average of 1.57 ($SD = 0.56$) on whether they believed gay couples and lesbian couples were equally effective as heterosexual couples in raising adopted children, which is marginally higher than

their scores of 1.49 ($SD = 0.59$) on whether they believed that adoption agencies should treat gay and lesbian couples equally as they treated heterosexual couples, $t(115) = 1.86$, $p = 0.066$. The lawyers' average score of 0.85 ($SD = 0.51$) on whether gay and lesbian couples should have the same opportunity as heterosexual couples to adopt was significantly lower than their scores on whether the three types of couples were equally effective parents ($M = 1.57$, $SD = 0.56$), $t(115) = 19.6$, $p < 0.001$, and significantly lower than whether the three types of couples should be treated by the adoption agencies equally ($M = 1.49$, $SD = 0.59$), $t(115) = 14.36$, $p < 0.001$. Similarly, the social workers' average score of 1.02 ($SD = 0.58$) that the three types of couples should have the same opportunity to adopt was significantly lower than their average scores on whether the three types of couples were equally effective in raising adopted children ($M = 1.58$; $SD = 0.61$) or whether they should be treated equally by adoption agencies ($M = 1.58$, $SD = 0.60$), $t(172) = 15.27$, $p < 0.001$.

In terms of beliefs about the suitability to adopt children with different needs, the lawyers scored an average of 5.68 ($SD = 0.54$) for heterosexual couples, which was significantly higher than their average score for gay couples ($M = 5.10$, $SD = 1.33$), $t(97) = 4.02$, $p < 0.001$, and for lesbian couples ($M = 5.17$, $SD = 1.21$), $t(97) = 3.81$, $p < 0.001$. However, they did not score differently on their perception of gay couples and lesbian couples ($M = 5.10$, $SD = 1.33$ versus $M = 5.17$, $SD = 1.21$), $t(97) = 0.39$, $p = 0.70$. For the social workers, the findings are similar: their average score for the suitability for heterosexual couples in adopting children with different needs was 5.64 ($SD = 0.53$), which was significantly higher than their average score for gay couples ($M = 5.32$, $SD = 1.01$), $t(144) = 3.38$, $p < 0.001$, and for lesbian couples ($M = 5.17$, $SD = 1.21$), $t(144) = 3.07$, $p < 0.01$. They did not perceive gay couples and lesbian couples differently ($M = 5.32$ versus 5.36), $t(144) = 0.35$, $p = 0.73$.

Overall, based on these results, New Zealand lawyers and social workers in our study reported generally favorable perceptions of adoption by gay couples and lesbian couples, but they favored heterosexual couples over gay couples and lesbian couples. Neither professional group made a distinction between their attitudes toward gay or lesbian couples.

Research Question 2: How Were the Background Characteristics of New Zealand Lawyers and Social Workers Related to Their Perceptions?

To answer this question, we first obtained Pearson correlation coefficients between the participants' background characteristics that were continuous (e.g., their age and political view) and their scores on their perceptions, then we reported the participants' background characteristics that were categorical (e.g., male or female). The results are summarized in Tables 3–5.

As shown in Table 3, there were both similarities and differences. For both lawyers and social workers, more liberal political ideology was significantly and positively correlated with higher scores on most of the six perceptions. However, their educational level was mostly uncorrelated with their perceptions. Among the lawyers, being older was correlated with lesser belief

TABLE 2 | Summary of *t*-tests comparing means (SDs) of lawyers and social workers' perceptions toward adoption by gay couples and lesbian couples and perception on their suitability to adopt children with special needs.

Variable	Lawyers	Social workers	df	<i>t</i>	<i>p</i>
General perception toward gay and lesbian adoption	<i>N</i> = 116	<i>N</i> = 173			
Equal parenting effectiveness as heterosexual couples	1.57 (0.56; <i>R</i> = 0–2)	1.58 (0.61; <i>R</i> = 0–2)	287	0.22	0.82
Equal opportunity to adopt as heterosexual couples	0.85 (0.51; <i>R</i> = 0–2)	1.02 (0.58; <i>R</i> = 0–2)	287	2.56	0.01
Equal treatment by agency as heterosexual couples	1.49 (0.59; <i>R</i> = 0–2)	1.58 (0.60; <i>R</i> = 0–2)	287	1.22	0.22
Perception on suitability to adopt children with different needs	<i>N</i> = 98	<i>N</i> = 145			
Gay couple	5.10 (1.33; <i>R</i> = 1–6)	5.32 (1.01; <i>R</i> = 1–6)	241	1.49	0.14
Lesbian couple	5.17 (1.21; <i>R</i> = 1–6)	5.36 (0.96; <i>R</i> = 1–6)	241	1.37	0.17
Heterosexual couple	5.68 (0.54; <i>R</i> = 1–6)	5.64 (0.53; <i>R</i> = 1–6)	241	0.56	0.57

TABLE 3 | Correlations between participants' background characteristics and their perceptions about adoption and special needs adoption by gay, lesbian and heterosexual couples (*N* = 243–289).

Variable	Lawyers			Social workers		
	Age	Education	Political ideology	Age	Education	Political ideology
General perception toward gay and lesbian adoption						
Equal parenting effectiveness as heterosexual couples	–0.20*	–0.25**	0.39***	–0.15*	0.08	0.18*
Equal opportunity to adopt as heterosexual couples	–0.25**	–0.16~	0.41***	–0.12	0.06	0.21**
Equal treatment by agency as heterosexual couples	–0.18*	–0.17~	0.33***	–0.11	0.03	0.12
Perception on suitability to adopt children with different needs						
Gay couple	–0.14	0.03	0.39***	–0.18*	–0.06	0.26**
Lesbian couple	–0.13	0.03	0.39***	–0.16~	–0.05	0.27**
Heterosexual couple	–0.15	–0.03	0.14	–0.06	–0.03	0.08

~*p* < 0.10, **p* < 0.05, ***p* < 0.01, ****p* < 0.001.

in same-gender couples' parenting effectiveness; lesser belief in the same-gender couples getting equal opportunities to adopt; and lesser belief that the same-gender couples should get equal treatment by agencies.

As shown in **Tables 4, 5**, most of the background characteristics were not significant for either lawyers or social workers. However, several background variables such as the participants' sexual orientation and religiousness were related to the participants' scores on their perceptions (for details, see **Tables 4, 5**).

To determine how the background characteristics jointly affected the lawyers' and social workers' perceptions, we subsequently ran multiple regression analyses for scores of each of the six outcome measures using two regression models. In the initial model, all background variables were entered into the regression at once, in the final model, only significant predictors were retained to identify a parsimonious set of significant predictors. We additionally tested interactions but none were significant. The results are summarized in **Tables 6, 7**. When these variables were entered into the initial regression models simultaneously, more liberal political ideology and a lack of religion predicted more favorable perceptions. The participants' occupation, age and ethnicity were not significant in predicting any of the five outcome variables. Other variables such as gender, sexual orientation, relationship status, and parenting experiences were significant in predicting some aspects of the

participants' perceptions. In the final models, political ideology, sexual orientation and religiousness were the most consistent predictors of the participants' scores on whether they believed that gay couples, lesbian couples, and heterosexual couples were equally effective as adoptive parents, whether the three types of couples should have the opportunity to adopt and whether they should be treated equally by adoption agencies. Interestingly, political ideology and religiousness were significant in predicting the participants' scores on whether they believed that gay couples and lesbian couples were suitable to adopt children with different special needs, but none of the variables predicted the participants' scores on whether they believed that heterosexual couples were suitable to adopt children with different special needs (for details see **Tables 6, 7**).

Overall, our regression analyses suggest that a stronger liberal political ideology and a lack of religiousness were the two most consistent predictors of the participants' positive perceptions of lesbian and gay adoption.

DISCUSSION

The aim of this study was to examine the perceptions of lawyers and social workers about children being placed with same-gender adoptive parents. In choosing to carry out the study in New Zealand, we wanted to take advantage of relatively

TABLE 4 | Participants' background characteristics and means (SD) of their general perceptions on adoption by gay and lesbian couples ($N = 287$).

Variable	Equal parenting effectiveness		Equal opportunity to adopt		Equal treatment by agency	
	Lawyers	Social workers	Lawyers	Social workers	Lawyers	Social workers
Sex						
Female	1.60 (0.53)	1.59 (0.61)	0.90 (0.52)	1.04 (0.57)	1.50 (0.59)	1.58 (0.60)
Male	1.41 (0.67)	1.45 (0.61)	0.64 (0.38)	0.81 (0.58)	1.44 (0.59)	1.53 (0.62)
df	114	171	114	171	114	171
<i>t</i>	1.46	0.91	2.20	1.50	0.40	0.31
<i>p</i>	0.15	0.37	0.03	0.14	0.69	0.75
Ethnicity						
European	1.55 (0.57)	1.60 (0.60)	0.83 (0.50)	1.04 (0.57)	1.48 (0.60)	1.61 (0.59)
Non-European	1.65 (0.41)	1.44 (0.73)	1.01 (0.56)	0.82 (0.57)	1.55 (0.52)	1.36 (0.69)
df	114	167	114	167	114	167
<i>t</i>	0.54	1.12	1.12	1.78	0.33	1.87
<i>p</i>	0.59	0.27	0.27	0.08	0.74	0.06
Relationship status						
Single	1.68 (0.38)	1.67 (0.51)	0.92 (0.53)	1.10 (0.58)	1.59 (0.57)	1.62 (0.53)
In relationship	1.53 (0.59)	1.56 (0.63)	0.83 (0.51)	0.99 (0.57)	1.47 (0.60)	1.58 (1.69)
df	114	169	114	169	114	169
<i>t</i>	1.16	1.12	0.80	1.10	0.88	0.34
<i>p</i>	0.25	0.26	0.43	0.27	0.39	0.73
Sexual orientation						
Heterosexual	1.56 (0.56)	1.53 (0.64)	0.84 (0.50)	0.98 (0.59)	1.47 (0.60)	1.53 (0.63)
Non-heterosexual	1.63 (0.48)	1.89 (0.16)	0.97 (0.62)	1.30 (0.39)	1.81 (0.44)	1.89 (0.18)
df	114	171	114	171	114	171
<i>t</i>	0.32	2.61	0.69	2.51	1.61	2.62
<i>p</i>	0.75	0.01	0.49	0.01	0.11	0.01
Religiousness						
No	1.66 (0.49)	1.73 (0.45)	0.90 (0.49)	1.12 (0.52)	1.54 (0.54)	1.64 (0.52)
Yes	1.45 (0.61)	1.32 (0.77)	0.79 (0.53)	0.82 (0.62)	1.43 (0.65)	1.46 (0.71)
df	114	171	114	171	114	171
<i>t</i>	2.09	4.37	1.16	3.46	1.08	1.92
<i>p</i>	0.04	0.00	0.25	0.00	0.28	0.06
Parenting experience						
No	1.65 (0.59)	1.73 (0.48)	1.07 (0.58)	1.11 (0.51)	1.59 (0.59)	1.68 (0.55)
Yes	1.53 (0.55)	1.55 (0.63)	0.78 (0.47)	1.00 (0.59)	1.47 (0.57)	1.57 (0.60)
df	112	168	112	168	112	168
<i>t</i>	1.02	1.51	2.67	1.01	0.97	0.97
<i>p</i>	0.31	0.13	0.01	0.31	0.33	0.33

recent statutory changes that legalized same-gender marriage—which by extension, made it possible for same-gender couples to adopt. Additionally, with New Zealand being widely perceived as a progressive and inclusive country with regard to its LGBT communities, the location afforded us a unique opportunity to passively consider possible environmental influences. In short, carrying out the research here made us hopeful that we would see the country's egalitarian ideals mirrored in the professionals' perceptions. The findings paint a mixed picture that requires some teasing out.

The Persistent Influence of Religiosity and Political Ideology

When looking broadly across the demographic variables, we found a similar pattern of results to the international literature:

being religious and having conservative political leanings were characteristics associated with more negative perceptions toward placing children with same-gender couples. These findings lend support to the many studies that have identified religiosity as a key feature of more bias beliefs about lesbian and gay adopters (Brodzinsky, 2003; Jayaratne et al., 2008; Mallinger, 2010; McCutcheon and Morrison, 2014; Jäckle and Wenzelburger, 2015; Kimberly and Moore, 2015). Our findings on the relationship between biases against same-gender adoptions and the holding of conservative ideologies fit also with the many studies that have found political views to be related to social attitudes toward homosexuality (Brown and Henriquez, 2008; Jäckle and Wenzelburger, 2015) and adoption (Hall, 2010; Perry, 2010)—and studies that have found both attributes present in persons with more negative perceptions of adoptions by couples

TABLE 5 | Participants' background characteristics and means (SD) of their perceptions on the suitability for children with different characteristics to be adopted by gay, lesbian and heterosexual couples ($N = 243$).

Variable	Gay couple		Lesbian couple		Heterosexual couple	
	Lawyers	Social workers	Lawyers	Social workers	Lawyers	Social workers
Sex						
Female	5.21 (1.07)	5.36 (0.98)	5.28 (1.09)	5.40 (0.92)	5.66 (0.57)	5.64 (0.53)
Male	4.65 (1.52)	4.94 (1.29)	4.74 (1.54)	5.03 (1.27)	5.77 (0.39)	5.63 (0.51)
df	96	143	96	143	96	143
<i>t</i>	1.71	1.50	1.83	1.36	0.83	0.07
<i>p</i>	0.09	0.14	0.07	0.18	0.41	0.94
Ethnicity						
European	5.06 (1.35)	5.39 (0.94)	5.14 (1.24)	5.41 (0.93)	5.68 (0.55)	5.65 (0.51)
Non-European	5.37 (1.09)	4.80 (1.35)	5.41 (0.91)	4.99 (1.18)	5.71 (0.46)	5.54 (0.63)
df	96	139	96	139	96	139
<i>t</i>	0.73	2.41	0.71	1.74	0.22	0.86
<i>p</i>	0.46	0.02	0.48	0.08	0.83	0.39
Relationship status						
Single	5.16 (1.14)	5.34 (0.94)	5.27 (0.98)	5.37 (0.94)	5.59 (0.66)	5.59 (0.56)
In Relationship	5.08 (1.38)	5.31 (1.04)	5.14 (1.26)	5.35 (0.98)	5.70 (0.51)	5.66 (0.51)
df	96	142	96	142	96	142
<i>t</i>	0.22	0.15	0.43	0.09	0.84	0.68
<i>p</i>	0.82	0.88	0.67	0.93	0.40	0.50
Sexual orientation						
Heterosexual	5.09 (1.35)	5.25 (1.06)	5.17 (1.22)	5.30 (1.00)	5.70 (0.51)	5.62 (0.53)
Non-heterosexual	5.18 (1.18)	5.73 (0.54)	5.23 (0.99)	5.71 (0.54)	5.43 (0.85)	5.74 (0.53)
df	96	143	96	143	96	143
<i>t</i>	0.18	2.00	0.15	1.80	1.37	0.94
<i>p</i>	0.86	0.04	0.88	0.07	0.17	0.35
Religiousness						
No	5.34 (1.14)	5.49 (0.72)	5.36 (1.06)	5.51 (0.67)	5.73 (0.53)	5.65 (0.53)
Yes	4.83 (1.47)	4.98 (1.40)	4.96 (1.32)	5.05 (1.34)	5.63 (0.56)	5.62 (0.52)
df	96	143	96	143	96	143
<i>t</i>	1.96	3.82	1.67	2.78	0.95	0.29
<i>p</i>	0.05	0.00	0.10	0.01	0.34	0.77
Parenting experience						
No	5.49 (0.94)	5.66 (0.56)	5.51 (0.83)	5.63 (0.61)	5.66 (0.59)	5.78 (0.40)
Yes	4.98 (1.42)	5.24 (1.08)	5.06 (1.29)	5.29 (1.02)	5.69 (0.54)	5.60 (0.54)
df	94	141	94	141	94	141
<i>t</i>	1.58	1.95	1.54	1.66	0.17	1.55
<i>p</i>	0.12	0.05	0.13	0.10	0.86	0.12

of the same-gender (Costa et al., 2014; Molina and Alarcón, 2015; Takács et al., 2016).

Movement Toward More Positive Views, or Hidden Biases?

With regard to the exploratory factor analysis, and the three factors described in the Findings section, our data also mirrors much of the international research, but with some subtle caveats. As noted earlier, the main questionnaire fell into three factors: Parenting Effectiveness (belief that homosexual and heterosexual parents could be equally effective), Opportunity to Adopt (belief that gay and lesbian individuals should be given the same opportunities as heterosexual individuals to

adopt), and Placement Agency Treatment (belief that agencies should treat heterosexual and homosexual applicants equally). The findings show that collectively both lawyers and social workers felt strongly that gay and lesbian parenting is as effective as heterosexual parenting, and that placement agencies should treat prospective adopters in same-gender relationships as they would treat prospective adopters who are in heterosexual relationships—both positive and promising outcomes. However, in terms of the third factor, participants did not strongly endorse the idea that lesbian and gay couples should be given the same opportunities as heterosexual couples to adopt children. Why would the participants agree that same-gender couples parent on par with heterosexual couples, and that the lesbian and gay couples should not be treated differently to heterosexual couples,

TABLE 6 | Summary of regression analysis predicting lawyers and social workers' general perceptions on adoption by lesbian couples and gay couples ($N = 289$).

	Equal parenting effectiveness		Equal opportunity to adopt		Equal treatment by agency	
	Initial model	Final model	Initial model	Final model	Initial model	Final model
Intercept	1.63***	1.51***	0.54	0.34*	1.63***	1.37***
Age	0		0		−0.01	
Education level	−0.08*	−0.08*	0		−0.03	
Political ideology	0.09***	0.10***	0.09***	0.10***	0.07**	0.09***
Sex						
Female	0.11		0.17*	0.23**	0.03	
Male	Referent (0)		Referent (0)	Referent (0)	Referent (0)	
Ethnicity						
European	0.03		0.05		0.13	
Non-European	Referent (0)		Referent (0)		Referent (0)	
Relationship status						
Single	0.17*	0.14*	0.11		0.10	
In relationship	Referent (0)	Referent (0)	Referent (0)		Referent (0)	
Sexual orientation						
Heterosexual	−0.16*	−0.16*	−0.16~	−0.22*	−0.26***	−0.31***
Non-heterosexual	Referent (0)	Referent (0)	Referent (0)	Referent (0)	Referent (0)	Referent (0)
Religiousness						
No	0.23**	0.24***	0.14*	0.17**	0.04	
Yes	Referent (0)	Referent (0)	Referent (0)	Referent (0)	Referent (0)	
Parenting experience						
No	0.02		−0.09		0	
Yes	Referent (0)		Referent (0)		Referent (0)	
Profession						
Lawyers	−0.01		−0.11~		−0.08	
Social workers	Referent (0)		Referent (0)		Referent (0)	
<i>df</i>	(10, 277)	(5, 286)	(10, 277)	(4, 288)	(10, 277)	(2, 286)
<i>F</i>	4.59***	8.52***	7.18***	16.51***	5.13***	23.90***
<i>R</i> ²	0.17	0.15	0.17	0.15	0.10	0.07

~ $p < 0.10$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

but then say that the same-gender couples should not be given the same opportunities to adopt?

We found this outcome surprising, and speculated that the two affirmative factors could be described as more concrete ideas, enshrined as they are in research evidence (in terms of parenting abilities) and legislative mandates (requiring that sexual minorities not be discriminated against), which may represent more objective, modern thinking. On the other hand, believing that lesbian and gay individuals should be given the same *opportunities* as heterosexual individuals—or not, in the case of this study, may reflect more subjective beliefs, that are less concrete and more emotive in nature.

We wondered further if the incongruity of these three factors could be an example of *modern* prejudices against lesbian and gay couples wishing to adopt. This social psychological concept, originally identified in the context of racism (McConahay et al., 1981), is subtler and more covert, quite unlike old fashioned or traditional prejudices that were blatant, pejorative, and hostile. However, with modern prejudice, people frequently believe that they are not prejudice, even expressing more egalitarian views (something we saw with the first two factors), which suggests that modern prejudice may reflect unconscious attitudes. This

idea aligns somewhat with what Sullivan and Harrington (2009) described as *vicarious stigma*, when the social workers acted in the interests of biases they expected to exist.

Modern prejudice has also been theorized as an unintentional unwillingness to help. Banaji and Greenwald (2016) explained that this “not helping” can come in the form of in-group favoritism, but without necessarily realizing it; and since there is no overt prejudices, it can look innocent enough. Yet, this standard of not helping, then strengthens existing patterns of disadvantage (Banaji and Greenwald, 2016). Applying these theoretical ideas to the current study, the third less-endorsed factor measuring ideas about equal treatment by agency, could be perceived as a type of helping response; and according to modern prejudice, this not wanting to help can sit comfortably alongside the positive perceptions of the first two factors. Ultimately, however, we did not explicitly explore possible modern prejudices within the attitudes toward adoption by same-gender, so any further consideration will require additional research¹.

¹Incidentally, several researchers have already begun to explore modern prejudice toward lesbian women and gay men, and same-sex parenting (e.g., Morrison and Morrison, 2003; Massey et al., 2013).

TABLE 7 | Summary of regression analysis predicting lawyers and social workers' perceptions on the suitability of lesbian couples, gay couples and heterosexual couples in adopting children with different characteristics ($N = 243$).

	Gay couples		Lesbian couples		Heterosexual couples	
	Initial model	Final model	Initial model	Final model	Initial model	Final model
Intercept	3.88***	3.66***	4.02***	3.82***	5.78***	5.46***
Age	−0.01		0		0	
Education level	−0.01		−0.01		−0.02	
Political ideology	0.23***	0.25***	0.22***	0.23***	0.04	0.04~
Sex						
Female	0.40		0.37		−0.12	
Male	Referent (0)		Referent (0)		Referent (0)	
Ethnicity						
European	0.13		0.02		0.03	
Non-European	Referent (0)		Referent (0)		Referent (0)	
Relationship status						
Single	0.05		0.05		−0.06	
In relationship	Referent (0)		Referent (0)		Referent (0)	
Sexual orientation						
Heterosexual	−0.19		−0.16		0.02	
Non-heterosexual	Referent (0)		Referent (0)		Referent (0)	
Religiousness						
No	0.39*	0.37*	0.34*	0.31*	0	
Yes	Referent (0)	Referent (0)	Referent (0)	Referent (0)	Referent (0)	
Parenting experience						
No	0.23	0.32*	0.18	0.26*	0.05	
Yes	Referent (0)	Referent (0)	Referent (0)	Referent (0)	Referent (0)	
Profession						
Lawyers	−0.04		−0.02		0.03	
Social workers	Referent (0)		Referent (0)		Referent (0)	
<i>df</i>	(10, 233)	(3, 228)	(10, 233)	(3, 228)	(10, 233)	(1, 242)
<i>F</i>	4.05***	1.81***	3.40***	9.16***	0.76	2.70
<i>R</i> ²	0.18	0.15	0.17	0.15	0.03	0.01

A (Rare) Look at the Perceptions of Lawyers

As discussed in the review of research, lawyers are among the professionals that likely work with sexual minorities in their bid to become parents. For that reason, their perceptions are also important to explore, hence their inclusion in the current study. And although they have much to say about the topic of adoption by same-gender couples, and have published extensively on the subject, it still came as a surprise to find no attitudinal research with lawyers. The surprise was short-lived, however, as we quickly concluded (with a bit of a chagrin) that lawyers would be interested in the laws surrounding same-gender adoption; and while the law articles greatly concerned themselves with (e.g.) the “best interests of the children” and other human interests, as a profession, we suspect that lawyers are not as interested in the thoughts and feelings one might have toward adoptions by same-gender couples. It is for this reason that we were especially pleased to get such a good survey response ($n = 116$) from the lawyers.

When considered as a group, and compared to the social workers, the data showed that lawyers did not differ on any of the outcome measures. The one exception to this is that

lawyers scored lower than social workers on their beliefs that lesbian couples and gay couples should have the same opportunities as heterosexual couples to adopt when none of the covariates were considered (Table 4). When the covariates (age, education, political ideology, gender, and ethnicity) were considered (Table 6), the difference was reduced to a non-significant trend. In light of the above-consideration of this overall finding—that it might reflect the differences between objective and subjective beliefs. We cautiously speculate that legal training might influence lawyers to prioritize objective ideas over subjective ones, whereas social workers might instead prioritize feelings and subjectivity leading to subtle differences in perspective between the two professional groups.

In terms of the secondary speculation, that this lower score in the third factor might reflect modern prejudice, we have no reason to believe that lawyers would be any more (or less) prejudiced than social workers. However, when one considers the law literature on same-gender parenting, and the strong emphasis on ensuring the best interests of the children, lawyers might be more inclined to argue from the children's perspectives. This perspective might predispose the

lawyers to agree with some of the myths about children being harmed or disadvantaged, especially as there is research evidence that children being raised by same-gender parents do sometimes experience poorer outcomes (Crouch et al., 2016; Cenegy et al., 2018), but due to largely demographic and socioeconomic differences rather than exposure to a non-traditional family form (Misca and Smith, 2014). Lastly, it is the lawyers who are the most aware of the legal ramifications and complexities of same-gender adoption, including the risks associated with having a silent, non-legal parent, all of which could influence their beliefs about treating homosexual couples the same as heterosexual couples. Having no previous attitudinal literature to draw upon with regard to the perceptions of lawyers has necessarily limited our consideration of our findings. We argue strongly that much more research is needed on the attitudes, beliefs and perceptions of lawyers and others in the legal and criminal justice sectors, as pertains same-gender parenting.

As a final discussion point, we reflect on the consistency in the data from the hypothetical cases, in terms of the finding that regardless of the children's backgrounds and characteristics, both sets of participants collectively preferred to see children placed with heterosexual couples over same-gender couples. Neither New Zealand lawyers nor social workers appeared to distinguish between lesbian and gay couples applying to adopt children. Finding that the participants favored heterosexual couples over homosexual couples reflects the well-established hierarchy of preference seen in the literature, which places heterosexual couples first (Stacey, 2006). However, finding that the two groups did not differ in their preference between gay couples and lesbian couples, was incongruent with the literature, since, as part of that hierarchy of preference, lesbian couples are usually favored over gay couples (e.g., Gianino, 2008; Tuazon-McCheyne, 2010). Their violation of traditional gender roles, is thought to be why gay men as parents receive more criticism and suspicion, compared to lesbian women as parents (Carneiro et al., 2017). Thus, our finding that the New Zealand lawyers and social workers did not perceive gay couples and lesbian couples differently in their ability to adopt children of different needs, confirms that the New Zealand context might be unique in comparison to other places. We speculate that the proportionately fewer participants who follow a religion, and possible shifts in the perceptions and acceptance of gay couples in New Zealand might have played a role. More research is needed to confirm these speculations.

Strengths, Limitations and Future Research

The findings of our study need to be cautiously interpreted within its limitations. As a cross-sectional survey study, it has the typical limitation of relying on volunteers, which prevents us from generalizing findings to other professionals in New Zealand or in other countries. Moreover, the study was set up as an exploratory inquiry into the perceptions of a range of professionals involved in the adoption process. The exploratory stance allowed us to tap into a category of professionals not previously explored in this context—lawyers, and to examine their perceptions of

same-gender adoption, as compared to a cohort of social workers. As reported here, both groups held similar perceptions of adoption by same-gender and opposite-gender couples; yet subtle differences were reflected in the lawyers' stronger perceptions that same-gender couples should not be given the same opportunities to adopt as heterosexual couples. Findings like this warrant further investigation given the crucial role lawyers play in not only the adoption process, but also in other related domains like surrogacy—an alternative method of family formation also sought out by lesbian and gay couples wishing to start families.

On the other hand, the broad stance of our design did not allow for in-depth delving into what might be specific to this group of lawyers or what may influence their perceptions of same-gender adoptions. Thus, we believe that much more research with lawyers is needed, some of which takes an in-depth look at, for example, their perceptions, attitudes, and assumptions, leading to better understanding of the subtle differences seen between them and social workers in the current study.

Future research should also look to include more diverse groups of professionals who work with prospective adopters, such as clinicians, educators, or health professionals. Moreover, future studies would benefit from expanding into different cultural and legal contexts, where broader sociocultural and statutory influences might be more centrally explored. The present study took place in a country known to be more tolerant of lesbian and gay communities, but without explicitly testing those sampled for their degree of tolerance *per se*. Finally, continued research in this area of study would benefit from developing theoretical models of how implicit and explicit attitudes toward sexual identity and parenting develop; and how they then “overspill” into professional practice (Tan et al., 2017). Understanding such pathways, through which personal perceptions, beliefs and attitudes influence professionals, are crucial for improving training and professional practice, yet this understanding is still missing.

A notable contribution of our study is the development of an instrument designed to capture the beliefs of professionals in regards to same-gender prospective adopters and its initial validation analyses reported in this paper indicates good potential. The authors are interested in further validating the instrument in different countries/cultures and with different groups of professionals, and invite potential interested researchers to contact them (At the time of writing there are plans underway for the study to be replicated in Quebec, Canada and thus the instrument to be translated into French).

Implications

Adoption as a legal phenomenon, creates new parenthood but importantly, the children's needs drive the processes and determine the adoptive parents' suitability; thus prospective adoptive parents are being selected to meet the needs of a specific child (Scherman et al., 2016). This may suggest the need for training for lawyers, beyond following the letter of the law, but which also includes an understanding of ways in which different types of family can effectively support children. The law literature emphatically highlights the potential risks to

the parent/child relationship but the law articles do so from a statutory perspective. Understanding of the parental relationship from a socioemotional perspective would provide valuable insights and lead to improved practice to ensure the best interest of the child (Zarembka, 2015).

Furthermore, lawyers and social workers may potentially benefit from shared or integrated training and practice. In social work curriculum worldwide, law is a universal presence and important component of training social workers (Sewpaul and Jones, 2005); yet in law training, it is rarely the case that social science curriculum is incorporated, although sorely needed (AFCC Task Force on the Guidelines for the Use of Social Science in Family Law, 2019).

CONCLUSION

Returning to the question raised at the beginning of the paper, of whether the statutory changes allowing same-gender marriage will be enough on their own to shift the social norms about same-gender adoption, the answer would appear to be no— even though the former is required in New Zealand, as in some other countries, for the latter to occur. Winning the rights to marry appears to be just the first hurdle that must be overcome; normalizing same-sex parenting is what needs to happen next.

Taken together, our findings underscore the value of examining multiple perceptions about same-gender parenting in the adoption context; and point out that even in the context of a country with seemingly progressive attitudes and policies toward sexual minorities, there is still progress to be made in mitigating discrimination against same-gender couples seeking to adopt. Our study adds to the evidence from studies of professionals in other countries such as those in Spain, the United States, and

Canada, with the ultimate aim to inform practices and policies that support lesbian and gay couples seeking to form families through adoption.

DATA AVAILABILITY STATEMENT

The datasets generated for this study are available on request to the corresponding author.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by Auckland University of Technology Ethics Committee (approval number 14/404). Written informed consent for participation was not required for this study in accordance with the national legislation and the institutional requirements.

AUTHOR CONTRIBUTIONS

RS and GM developed the study and the instrument/survey. RS led the data collection, the literature review, and the writing of the manuscript. TXT analyzed the data. All authors contributed to and approved the final manuscript.

FUNDING

The initial work on this project was supported by an AUT URO PBRF FHES Contestable small project grant (Grant Number: SG 08/13) awarded to RS (PI) in collaboration with GM (Co-PI).

REFERENCES

- Acosta, K. L. (2017). In the event of death: Lesbian families' plans to preserve stepparent-child relationships. *Fam. Relat.* 66, 244–257. doi: 10.1111/fare.12243
- AFCC Task Force on the Guidelines for the Use of Social Science in Family Law. (2019). Guidelines for the use of social science research in family law. *Family Court Rev.* 57, 193–200. doi: 10.1111/fcre.12403
- Anderssen, N., and Hellesund, T. (2009). Heteronormative consensus in the Norwegian same-sex adoption debate? *J. Homosexual.* 56, 102–120. doi: 10.1080/00918360802551597
- Appell, A. R. (2008). The endurance of biological connection: Heteronormativity, same-sex parenting and the lessons of adoption. *BYU J. Pub. L.* 22:289.
- Arnold, O., Voracek, M., Musalek, M., and Springer-Kremser, M. (2004). Austrian medical students' attitudes towards male and female homosexuality: A comparative survey. *Wiener Klinische Wochenschrift* 116, 730–736. doi: 10.1007/s00508-004-0261-3
- Aspin, C. (2005). "The place of takatāpui identity within Māori society: reinterpreting Māori sexuality within a contemporary context," in *Paper presented at the paper presented at Competing Diversities: Traditional Sexualities and Modern Western Sexual Identity Constructions Conference*, (Mexico City), Available online at: www.tpt.org.nz/downloads/takatāpuiidentity.doc (accessed on June 5, 2005).
- Averett, P., Nalavany, B., and Ryan, S. (2009). An evaluation of gay/lesbian and heterosexual adoption. *Adopt. Q.* 12, 129–151. doi: 10.1080/10926750903313278
- Banaji, M. R., and Greenwald, A. G. (2016). *Blindspot: Hidden biases of good people*. New York: Random House Publishing.
- Barfield, A. (2014). The intersection of same-sex and stepparent visitation. *J. Law Pol.* 23, 257–304.
- Biblarz, T. J., and Stacey, J. (2010). How does the gender of parents matter? *J. Marr. Fam.* 72, 3–22. doi: 10.1111/j.1741-3737.2009.00678.x
- Black, N. (2005). *Gay Parents: You're Not Normal and Neither Are Your Kids'. The Stranger*. Available online at: <https://www.thestranger.com/seattle/gay-parents/Content?oid=21935>
- Blanks, V., Dockwell, B., and Wallace, G. J. (2004). *Adoption by gays and lesbians: A survey of the law in the 50 states and the District of Columbia*. Center for Adoption Policy. Available online at: <http://www.adoptionpolicy.org/pdf/gaysandlesbian.pdf>
- Bos, H. M., Gartrell, N. K., Peyser, H., and van Balen, F. (2008). The USA national longitudinal lesbian family study (NLLFS): Homophobia, psychological adjustment, and protective factors. *J. Lesb. Stud.* 12, 455–471. doi: 10.1080/10894160802278630
- Brodzinsky, D. (2003). *Adoption by Lesbian and Gays: A national Survey of Adoption Agency Policies, Practices, and Attitudes*. New York: Donaldson Adoption Institute.
- Brodzinsky, D. M., and Goldberg, A. E. (2016). Contact with birth family in adoptive families headed by lesbian, gay male, and heterosexual parents. *Child. Youth Ser. Rev.* 62, 9–17. doi: 10.1016/j.childyouth.2016.01.014
- Brodzinsky, D. M., and Goldberg, A. E. (2017). Contact with birth family in intercountry adoptions: Comparing families headed by sexual minority and

- heterosexual parents. *Child. Youth Serv. Rev.* 74, 117–124. doi: 10.1016/j.childyouth.2017.02.003
- Brodzinsky, D. M., Patterson, C. J., and Vaziri, M. (2002). Adoption agency perspectives on lesbian and gay prospective parents: A national study. *Adopt. Q.* 5, 5–23. doi: 10.1300/J145v05n03_02
- Brooks, D., and Goldberg, S. (2001). Gay and lesbian adoptive and foster care placements: Can they meet the needs of waiting children? *Soc. Work* 46, 147–157. doi: 10.1093/sw/46.2.147
- Brown, M. J., and Henriquez, E. (2008). Socio-demographic predictors of attitudes towards gays and lesbians. *Indiv. Diff. Res.* 6, 193–202.
- Brown, S., Smalling, S., Groza, V., and Ryan, S. (2009). The experiences of gay men and lesbians in becoming and being adoptive parents. *Adopt. Q.* 12, 229–246. doi: 10.1080/10926750903313294
- Carastathis, G. S., Cohen, L., Kaczmarek, E., and Chang, P. (2017). Rejected by family for being gay or lesbian: Portrayals, perceptions, and resilience. *J. Homosexual.* 64, 289–320. doi: 10.1080/00918369.2016.1179035
- Carneiro, F. A., Tasker, F., Salinas-Quiroz, F., Leal, I., and Costa, P. A. (2017). Are the fathers alright? A Systematic and critical review of studies on gay and bisexual fatherhood. *Front. Psychol.* 8:1636. doi: 10.3389/fpsyg.2017.01636
- Carone, N., Lingardi, V., Tanzilli, A., Bos, H. M., and Baiocco, R. (2020). Gender development in children with gay, lesbian, and heterosexual parents: Associations with family type and child gender. *J. Develop. Behav. Pediatr.* 41, 38–47. doi: 10.1097/DBP.0000000000000726
- Cenegy, L. F., Denney, J. T., and Kimbro, R. T. (2018). Family Diversity and Child Health: Where Do Same-Sex Couple Families Fit? *Famil. Relat.* 80, 198–218. doi: 10.1111/jomf.12437
- Chapman, K. (2013). *Jubilation as same-sex marriage legalised*. Stuff.co.nz, 18 April. Retrieved from <http://www.stuff.co.nz/national/politics/8565869/Jubilation-as-same-sex-marriage-legalised>
- Costa, P. A., Caldeira, S., Fernandes, I., Rita, C., Pereira, H., and Leal, I. (2014). Religious and political conservatism and beliefs about same-sex parenting in Portugal. *Psychol. Commun. Health* 3, 23–35. doi: 10.5964/pch.v3i1.94
- Crouch, S. R., McNair, R., and Waters, E. (2016). Impact of family structure and socio-demographic characteristics on child health and wellbeing in same-sex parent families: A cross-sectional survey. *J. Paediatr. Child Health* 52, 499–505. doi: 10.1111/jpc.13171
- Crowl, A., Ahn, S., and Baker, J. (2008). A meta-analysis of developmental outcomes for children of same-sex and heterosexual parents. *J. GLBT Fam. Stud.* 4, 385–407. doi: 10.1080/15504280802177615
- Dictionary.com. (2020). *Dictionary.com*. Retrieved from <https://www.dictionary.com/browse/religiosity?s=t>
- Else, A. (1991). *A question of adoption: Closed stranger adoption in New Zealand 1944-1974*. New Zealand: Bridget Williams Books.
- Erich, S., Leung, P., Kindle, P., and Carter, S. (2005). Gay and lesbian adoptive families: An exploratory study of family functioning, adoptive child's behavior, and familial support networks. *J. Famil. Soc. Work* 9, 17–32. doi: 10.1300/J039v09n01_02
- Esser, B. (2016). *Second-parent adoptions: Do I still need to do one after Obergefell?* Retrieved from <https://www.esserlawoffice.com/blog/2016/03/11/second-parent-adoptions-still-need-one-obergefell/>
- Evan, B., and Donaldson Adoption Institute (2006). *Expanding resources for children: Is adoption by gays and lesbians part of the answer for boys and girls who need homes?* Retrieved from <http://adoptioninstitute.org/publications/#gaylesbianadoption>
- Farr, R. H., Bruun, S. T., Doss, K. M., and Patterson, C. J. (2018a). Children's gender-typed behavior from early to middle childhood in adoptive families with lesbian, gay, and heterosexual parents. *Sex. Roles* 78, 528–541. doi: 10.1007/s11199-017-0812-5
- Farr, R. H., Ravvina, Y., and Grotevant, H. D. (2018b). Birth family contact experiences among lesbian, gay, and heterosexual adoptive parents with school-age children. *Famil. Relat.* 67, 132–146. doi: 10.1111/fare.12295
- Farr, R. H., Forssell, S. L., and Patterson, C. J. (2010). Parenting and child development in adoptive families: Does sexual orientation matter? *Appl. Develop. Sci.* 14, 164–178. doi: 10.1080/10888691.2010.500958
- Fedewa, A. L., Black, W. W., and Ahn, S. (2015). Children and adolescents with same-gender parents: A meta-analytic approach in assessing outcomes. *J. GLBT Fam. Stud.* 11, 1–34. doi: 10.1080/1550428X.2013.869486
- Gartrell, N., Bos, H., and Koh, A. (2019). Sexual attraction, sexual identity, and same-sex sexual experiences of adult offspring in the US National Longitudinal Lesbian Family Study. *Archiv. Sexual Behav.* 48, 1495–1503. doi: 10.1007/s10508-019-1434-5
- Gartrell, N., Deck, A., Rodas, C., Peyser, H., and Banks, A. (2005). The National Lesbian Family Study: 4. Interviews With the 10-Year-Old Children. *Am. J. Orthopsych.* 75, 518–524. doi: 10.1037/0002-9432.75.4.518
- Gates, G. (2015). Marriage and Family: LGBT Individuals and Same-Sex Couples. *Future Child.* 25, 67–87. doi: 10.1353/foc.2015.0013
- Gianino, M. (2008). Adaptation and transformation: The transition to adoptive parenthood for gay male couples. *J. GLBT Fam. Stud.* 4, 205–243. doi: 10.1080/15504280802096872
- Gibbs, A., and Scherman, R. (2013). Pathways to parenting in New Zealand: Issues in law, policy and practice. *Kotuitui N Zealand J. Soc. Sci.* 8, 13–26. doi: 10.1080/1177083X.2013.82107
- Goldberg, A. E., Downing, J. B., and Sauck, C. C. (2007). Choices, challenges, and tensions: Perspectives of lesbian prospective adoptive parents. *Adopt. Q.* 10, 33–64. doi: 10.1300/J145v10n02
- Goldberg, A. E., and Kuvalanka, K. A. (2012). Marriage (in) equality: The perspectives of adolescents and emerging adults with lesbian, gay, and bisexual parents. *J. Marr. Famil.* 74, 34–52. doi: 10.1111/j.1741-3737.2011.00876.x
- Goldberg, A. E., Moyer, A. M., Kinkler, L. A., and Richardson, H. B. (2012). “When you're sitting on the fence, hope's the hardest part”: Challenges and experiences of heterosexual and same-sex couples adopting through the child welfare system. *Adopt. Q.* 15, 288–315. doi: 10.1080/10926755.2012.731032
- Goldberg, A. E., Moyer, A. M., Weber, E. R., and Shapiro, J. (2013). What changed when the gay adoption ban was lifted? Perspectives of lesbian and gay parents in Florida. *Sexual. Res. Soc. Polic.* 10, 110–124. doi: 10.1007/s13178-013-0120-y
- Golombok, S., Perry, B., Burston, A., Murray, C., Mooney-Somers, J., Stevens, M., et al. (2003). Children with lesbian parents: a community study. *Develop. Psychol.* 39, 20–33. doi: 10.1037/0012-1649.39.1.20
- Golombok, S., and Tasker, F. (2015). “Socioemotional development in changing families,” in *Handbook of child psychology and developmental science: Socioemotional processes*, eds M. E. Lamb and R. M. Lerner (Hoboken NJ: Wiley), 419–463.
- Graham, K. T. (2008). Same-sex couples: Their rights as parents, and their children's rights as children. *Santa Clara Law Rev.* 48, 999–1037.
- Greaves, L. M., Barlow, F. K., Lee, C. H., Matika, C. M., Wang, W., Lindsay, C. J., et al. (2017). The diversity and prevalence of sexual orientation self-labels in a New Zealand national sample. *Arch. Sex. Behav.* 46, 1325–1336. doi: 10.1007/s10508-016-0857-5
- Griffith, K. (1996). *New Zealand adoption history and practice, social and legal: 1840-1996*. New Zealand: K.C. Griffith, MBA.
- Hall, S. J. (2010). Gauging the gatekeepers: how do adoption workers assess the suitability of gay, lesbian, or bisexual prospective parents? *J. GLBT Fam. Stud.* 6, 265–293.
- Harris, E. A. (2017). *Same-sex parents still face legal complications*. The New York Times. Available online at: <https://www.nytimes.com/2017/06/20/us/gay-pride-lgbtq-same-sex-parents.html>
- Herek, G. M. (2006). Legal recognition of same-sex relationships in the United States: A social science perspective. *Am. Psychol.* 61, 607–621. doi: 10.1037/0003-066X.61.6.607
- Herkt, D. (2018). *Georgina Beyer: From boy to woman to warrior*. New Zealand Herald. Available online at: https://www.nzherald.co.nz/lifestyle/news/article.cfm?c_id=6&objectid=12135676 (accessed on October 13, 2018).
- Hicks, S. (2006). Maternal men-perverts and deviants? Making sense of gay men as foster carers and adopters. *J. GLBT Fam. Stud.* 2, 93–114. doi: 10.1300/J461v02n01-05
- ICANZ (Inter-Country Adoption New Zealand) (2020). *Requirements for Adoption Parents: Who Can Adopt?* Available online at: <https://www.icanz.gen.nz/index.php/pages/requirements>
- Iwanek, M. (1997). “Adoption in New Zealand - Past, present and future,” in *Adoption and Healing: Proceedings of the international conference on Adoption and Healing*, Ed Edn, ed. K. Sprengers (Wellington: New Zealand Adoption Education), 62–73.
- Jäckle, S., and Wenzelburger, G. (2015). Religion, religiosity, and the Attitudes toward homosexuality—A multilevel analysis of 79 countries. *J. Homosexual.* 62, 207–241. doi: 10.1080/00918369.2014.969071

- Jayaratne, S., Faller, K. C., Ortega, R. M., and Vandervort, F. (2008). African American and white child welfare workers' attitudes towards policies involving race and sexual orientation. *Child. Youth Serv. Rev.* 30, 955–966. doi: 10.1016/j.childyouth.2007.11.018
- Jenny, C., Roesler, T. A., and Poyer, K. L. (1994). Are children at risk for sexual abuse by homosexuals? *Pediatrics* 94, 41–44.
- Jonathan, E. (2008). The influence of religious fundamentalism, right-wing authoritarianism, and Christian orthodoxy on explicit and implicit measures of attitudes toward homosexuals. *Int. J. Psychol. Relig.* 18, 316–329. doi: 10.1080/10508610802229262
- Joslin, C. G. (2005). The legal parentage of children born to same-sex couples: Developments in the law. *Fam. Law Q.* 39, 683–705.
- Kelley, J. (2001). Attitudes towards homosexuality in 29 nations. *Austr. Soc. Monit.* 4, 15–22.
- Kemper, C. N., and Reynaga, N. J. (2015). *Social workers' attitudes towards lesbian, gay, bisexual and transgender adoptions*. Ph D. thesis U.S.A: California State University.
- Kenyon, G., Chong, K. A., Enkoff-Sage, M., Hill, C., Mays, C., and Rochelle, L. (2003). Public adoption by gay and lesbian parents in North Carolina: Policy and practice. *Famil. Soc. J. Contemp. Soc. Serv.* 84, 571–575. doi: 10.1606/1044-3894.138
- Kerekere, E. (2015). *Takatāpui: Part of the Whānau*. Auckland: Tīwhanawhana Trust and Mental Health Foundation.
- Kimberly, C., and Moore, A. (2015). Attitudes to practice: National survey of adoption obstacles faced by gay and lesbian prospective parents. *J. Gay Lesb. Soc. Serv.* 27, 436–456. doi: 10.1080/10538720.2015.1085347
- Kinkler, L. A., and Goldberg, A. E. (2011). Working with what we've got: Perceptions of barriers and supports among small-metropolitan-area same-sex adopting couples. *Family Relat.* 60, 387–403. doi: 10.1111/j.1741-3729.2011.00654.x
- Knight, C., and Wilson, K. (2016). *Lesbian, Gay, Bisexual and Trans People (LGBT) and the Criminal Justice System*. London: Palgrave Macmillan.
- Leddy, A., Gartrell, N., and Bos, H. (2012). Growing up in a lesbian family: The life experiences of the adult daughters and sons of lesbian mothers. *J. GLBT Fam. Stud.* 8, 243–257. doi: 10.1080/1550428X.2012.677233
- Lemke, R., Tornow, T., and PlanetRomeo.com. (2015). *Gay Happiness Monitor — Results overview from a global survey on perceived gay-related public opinion and gay well-being*. Mainz: Johannes Gutenberg University.
- Lonely Planet (n.d.). (2020). *The Most Gay-Friendly Places on the Planet*. Available online at: <https://www.lonelyplanet.com/articles/most-gay-friendly-countries>
- Lubbe, C. (2008). Mothers, fathers, or parents: same-gendered families in South Africa. *Agenda Empow. Women Gender Equity* 22, 43–55. doi: 10.2307/27739398
- Mallinger, G. M. (2010). *Placing children in need with gay and lesbian couples: Influences on placement decisions*. Ph. D. dissertation America: University of Pittsburgh.
- Mallon, G. P. (2000). Gay men and lesbians as adoptive parents. *J. Gay Lesb. Soc. Serv.* 11, 1–22. doi: 10.1300/J041v11n04_01
- Mallon, G. P. (2007). Assessing lesbian and gay prospective foster and adoptive families: A focus on the home study process. *Child. Welf.* 86, 67–86.
- Masci, D., Sciupac, E., and Lipka, M. (2019). *Gay marriage around the world*. Available at: <http://www.pewforum.org/2015/06/26/gay-marriage-around-the-world-2019/>
- Mason, K. (2018). “Won’t someone think of the children?”: Reproductive futurism and same-sex marriage in US courts, 2003–2015. *Sexual. Res. Soc. Polic.* 15, 83–98. doi: 10.1007/s13178-017-0279-8
- Massey, S. G., Merriwether, A. M., and Garcia, J. R. (2013). Modern prejudice and same-sex parenting: Shifting judgments in positive and negative parenting situations. *J. GLBT Fam. Stud.* 9, 129–151. doi: 10.1080/1550428X.2013.765257
- Matthews, J. D., and Cramer, E. P. (2006). Envisaging the adoption process to strengthen gay-and lesbian-headed families: recommendations for adoption professionals. *Child. Welf.* 85, 317–340.
- McCann, D., and Delmonte, H. (2005). Lesbian and gay parenting: Babies in arms or babes in the woods? *Sexual Relat. Ther.* 20, 333–347. doi: 10.1080/14681990500141840
- McConahay, J. B., Hardee, B. B., and Batts, V. (1981). Has racism declined in America? It depends on who is asking and what is asked. *J. Confl. Resol.* 25, 563–579. doi: 10.1177/002200278102500401
- McCutcheon, J., and Morrison, M. A. (2014). The effect of parental gender roles on students' attitudes toward lesbian, gay, and heterosexual adoptive couples. *Adopt. Q.* 18, 138–167. doi: 10.1080/10926755.2014.945702
- McRae, K. O., and Nikora, L. W. (2006). *Whāngai: Remembering, understanding and experiencing*. MAI Review, 1, Intern Research Report 7. Available at: <http://www.review.mai.ac.nz/mrindex/MR/issue/view/1.html>, 1–18.
- Messina, R., and D'Amore, S. (2018). Adoption by lesbians and gay men in Europe: Challenges and barriers on the journey to adoption. *Adopt. Q. Accep. Manuscr.* 21, 1427641. doi: 10.1080/10926755.2018.1427641
- Mirabito, L. (2014). *Examining juror bias, defendant sexuality, and crime type*. Ph D. thesis Wilmington, U.S.A.: University of North Carolina.
- Misca, G., and Smith, J. (2014). “Mothers, Fathers, Families and Child Development,” in *Contemporary Issues in Family Studies*, eds A. Abela and J. Walker (New Jersey: Wiley), 151–165.
- Molina, M. F., and Alarcón, E. (2015). Adoption and LGTB families. *The attitudes of professionals in a Spanish sample. Acción Psicológ.* 12, 91–102. doi: 10.5944/ap.12.1.14269
- Montero, D. M. (2014). America's progress in achieving the legalization of same-gender adoption: Analysis of public opinion, 1994 to 2012. *Soc. Work* 59, 321–328. doi: 10.1093/sw/swu038
- Morrison, M. A., and Morrison, T. G. (2003). Development and validation of a scale measuring modern prejudice toward gay men and lesbian women. *J. Homosexual.* 43, 15–37. doi: 10.1300/J082v43n02_02
- New Zealand Parliament (2020). *Georgina Beyer*. Available online at: <https://www.parliament.nz/en/mps-and-electors/former-members-of-parliament/beyer-georgina/>
- Patterson, C. J. (2017). Parents' sexual orientation and children's development. *Child. Develop. Perspec.* 11, 45–49. doi: 10.1111/cdep.12207
- Perrin, E. C., Siegel, B. S., and Committee on Psychosocial Aspects of Child and Family Health. (2013). Promoting the well-being of children whose parents are gay or lesbian. *Pediatrics* 131, e1374–e1383. doi: 10.1542/peds.2013-0377
- Perry, S. L. (2010). The effects of race, religion, and religiosity on attitudes towards transracial adoption. *J. Comparat. Fam. Stud.* 41, 837–854. doi: 10.13138/jcfs.41.5.837
- Prusaczyk, E., and Hodson, G. (2020). The roles of political conservatism and binary gender beliefs in predicting prejudices toward gay men and people who are transgender. *Sex Roles* 82, 438–446. doi: 10.1007/s11199-019-01069-1
- Rainbow Youth (2020). *Takatāpui 101*. Available online at: <https://ry.org.nz/what-we-do/info/takatāpui-101>
- Riggs, D. W. (2012). ‘Paradoxes of visibility’: Lesbian and gay parents in the Australian print media. *Jindal Global Law Rev.* 4, 201–218.
- Ross, L., Epstein, R., Goldfinger, C., Steele, L., Anderson, S., and Strike, C. (2008). Lesbian and queer mothers navigating the adoption system: The impacts on mental health. *Health Sociol. Rev.* 17, 254–266. doi: 10.5172/hesr.451.17.3.254
- Rowatt, W. C., Tsang, J. A., Kelly, J., LaMartina, B., McCullers, M., and McKinley, A. (2006). Associations between religious personality dimensions and implicit homosexual prejudice. *J. Scient. Stud. Relig.* 45, 397–406. doi: 10.1111/j.1468-5906.2006.00314.x
- Ryan, S., and Whitlock, C. (2008). Becoming parents: Lesbian mothers' adoption experience. *J. Gay Lesb. Soc. Ser.* 19, 1–23. doi: 10.1080/10538720802131642
- Ryan, S. D. (2000). Examining social workers' placement recommendations of children with gay and lesbian adoptive parents. *Famil. Soc.* 81, 517–528. doi: 10.1606/1044-3894.1053
- Ryan, S. D., and Cash, S. (2003). Adoptive families headed by gay or lesbian parents: A threat... or hidden resource. *Univ. Flor. J. Law Public Policy* 15, 443–465.
- Ryan, S. D., Pearlmuter, S., and Groza, V. (2004). Coming out of the closet: Opening agencies to gay and lesbian adoptive parents. *Soc. Work* 49, 85–95. doi: 10.1093/sw/49.1.85
- Rye, B. J., and Meaney, G. J. (2010). Self-defense, sexism, and etiological beliefs: Predictors of attitudes toward gay and lesbian adoption. *J. GLBT Fam. Stud.* 6, 1–24. doi: 10.1080/15504280903472485
- Scherman, R. (2012). “Openness and intercountry adoption in New Zealand,” in *Intercountry Adoption: Policy, Practices and Outcomes*, eds J. Gibbons and K. Rotabi (USA: IAP) (283–291).

- Scherman, R., Misca, G., Rotabi, K., and Selman, P. (2016). Global commercial surrogacy and international adoption: Parallels and differences. *Adopt. Foster.* 40, 20–35. doi: 10.1177/0308575915626376
- Sewpaul, V., and Jones, D. (2005). Global standards for the education and training of the social work profession. *Int. J. Soc. Welf.* 14, 218–230. doi: 10.1111/j.1468-2397.2005.00362.x
- Short, E., Riggs, D. W., Perlesz, A., Brown, R., and Kane, G. (2007). *Lesbian, gay, bisexual and transgender (LGBT) parented families. A Literature Review prepared for The Australian Psychological Society.* Melbourne: The Australian Psychological Society.
- Smith, T. W. (2011). *Cross-National Differences in Attitudes towards Homosexuality.* California: The Williams Institute.
- Sohr-Preston, S. L., Kliebert, H., Moreno, O., Dugas, T., and Zepeda, D. (2017). Expectations of male and female adoptive parents of different marital status and sexual orientation. *Int. J. Psychol. Stud.* 9:92. doi: 10.5539/ijps.v9n3p92
- Stacey, J. (2006). Gay male parenthood and the decline of paternity as we knew it. *Sexualities* 9, 27–55. doi: 10.1177/1363460706060687
- Statistics New Zealand (2020). *Population statistics as at 30 June 2020.* Available online at: <https://www.stats.govt.nz/information-releases/national-population-estimates-at-30-june-2020>
- Sullivan, R., and Harrington, M. (2009). The politics and ethics of same-sex adoption. *J. GLBT Famil. Stud.* 5, 235–246. doi: 10.1080/15504280903035662
- Takács, J., Szalma, I., and Bartus, T. (2016). Social attitudes toward adoption by same-sex couples in Europe. *Arch. Sexual Behav.* 45, 1787–1798. doi: 10.1007/s10508-016-0691-9
- Tan, T. X., Jordan-Arthur, B., Garofano, J. S., and Curran, L. (2017). Mental health trainees' explicit and implicit attitudes toward transracial adoptive families headed by lesbian, gay, and heterosexual couples. *J. Homosexual.* 64, 1033–1051. doi: 10.1080/00918369.2016.1236593
- Tasker, F., and Bellamy, C. (2019). Adoption by same-sex couples – reaffirming evidence: Could more children be placed? *Family Law* 49, 171–179.
- Telingator, C. J. (2013). “Clinical work with children and adolescents growing up with lesbian, gay, and bisexual parents,” in *LGBT-ParentFamilies: Innovations in Research and Implications for Practice*, eds A. E. Goldberg and K. R. Allen (New York, NY: Springer), 261–274. doi: 10.1007/978-1-4614-4556-2_17
- Titlestad, A., and Pooley, A. J. (2013). Resilience in Same-Sex-Parented Families: The Lived Experience of Adults with Gay, Lesbian, or Bisexual Parents. *J. LGBT Famil. Stud.* 4, 329–353. doi: 10.1080/1550428X.2013.833065
- Tuazon-McCheyne, J. (2010). Two dads: Gay male parenting and its politicisation—A cooperative inquiry action research study. *Austr. N. Zeal. J. Famil. Ther.* 31, 311–323. doi: 10.1375/anft.31.4.311
- VanderWaal, C. J., Sedlacek, D., and Lane, L. (2017). The impact of family rejection or acceptance among LGBT+ millennials in the Seventh-day Adventist Church. *Soc. Work Christian.* 44, 72–95.
- Vanfraussen, K., Ponjaert-Kristoffersen, I., and Brewaeys, A. (2003). Family functioning in lesbian families created by donor insemination. *Amer. J. Orthopsych.* 73, 78–90. doi: 10.1037/0002-9432.73.1.78
- Vaughn, R. (2017). *2nd Parent Adoption Still Gold Standard to Secure LGBT Parental Rights.* Available at: <https://www.iflg.net/2nd-parent-adoption-needed-to-secure-lgbt-parental-rights/>
- Walker, S. W. (2006). *The Maatua Whangai Programme O Otepoti from a caregiver perspective Thesis, Master of Consumer and Applied Sciences.* Available online at: <http://hdl.handle.net/10523/8986>
- Welsh, M. G. (2011). Growing up in a same-sex parented family: The adolescent voice of experience. *J. GLBT Famil. Stud.* 7, 49–71. doi: 10.1080/1550428X.2010.537241
- Williams, J. R. (2015). I don't like gays, okay? Use of the “gay panic” murder defence in modern American courtrooms: The ultimate miscarriage of justice. *Albany Law Rev.* 78:1129.
- Zarembka, A. (2015). Advising same-sex couples after Obergefell and Windsor. *Am. Bar Assoc. GPSolo* 32:34.

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Scherman, Misca and Tan. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.



Familismo, Lesbophobia, and Religious Beliefs in the Life Course Narratives of Chilean Lesbian Mothers

Victor Figueroa^{1*} and Fiona Tasker²

¹ Facultad de Humanidades y Ciencias Sociales, Universidad UNIACC, Santiago, Chile, ² Department of Psychological Sciences, Birkbeck, University of London, London, United Kingdom

OPEN ACCESS

Edited by:

Jaime Barrientos,
Alberto Hurtado University, Chile

Reviewed by:

Dolores Frias-Navarro,
University of Valencia, Spain
Henrique Caetano Nardi,
Federal University of Rio Grande do
Sul, Brazil

*Correspondence:

Victor Figueroa
victor.figueroa@uniacc.cl

Specialty section:

This article was submitted to
Gender, Sex and Sexualities,
a section of the journal
Frontiers in Psychology

Received: 16 January 2020

Accepted: 25 September 2020

Published: 20 October 2020

Citation:

Figueroa V and Tasker F (2020)
Familismo, Lesbophobia,
and Religious Beliefs in the Life
Course Narratives of Chilean Lesbian
Mothers. *Front. Psychol.* 11:516471.
doi: 10.3389/fpsyg.2020.516471

This study aimed to explore the life course identity projects of Chilean lesbian mothers who conceived their children within the context of a previous heterosexual relationship. By exploring the case of Chile, this study examined the family lives of lesbian mothers within the context of a Latino heteronormative society with a Christian (mainly Catholic) heritage. Individual interviews were conducted with eight participants aged between 27 and 40 years old (mean age of 33 years) who were recruited through snowballing and social media. A Structural Narrative Analysis of participants' stories was conducted within a Life Course Perspective theoretical framework. The study found that participants initially followed a heterosexual path to conform to their family of origin and social expectations. After building their own heterosexual family projects and having their children with a man, most participants felt pressured to continue within a heterosexual path and postponed their transition to a lesbian identity trajectory despite a growing feeling that a lesbian identity would be personally fulfilling. Although participants felt proud of their identities, they struggled to express their same-gender feelings because lesbians were often seen as inappropriate models for children within Chilean society. Crucially, lesbian mothers continued to be able to count upon support for their parenting from their own mother despite intense disapproval from their family of origin and often continued opposition from ex-husbands/partners. The findings of this study revealed the strong impact of familismo, lesbophobia and Christian religious beliefs on the life course experiences of Chilean lesbian mothers. Implications for therapy and counselling with lesbian mothers living in Latino countries are reviewed.

Keywords: lesbian, mothers, Chile, familismo, familism, religiosity, lesbophobia

INTRODUCTION

The study of the family life of lesbian mothers (LM) has been well documented within developmental psychology (Tasker and Patterson, 2007; Patterson and Riskind, 2010). Notwithstanding, most research has been conducted in Western European and English-speaking countries (Golombok, 2015). Little is known about the challenges facing by LM in other socio-cultural contexts (Lubbe, 2013). In recent years, there has been growing interest in the study of

the family life of LM living in Latino countries (Sánchez et al., 2004; Pinheiro, 2006; Santos and Alves de Toledo, 2006; Libson, 2012; Palma et al., 2012; Uribe, 2014). These studies have revealed that lesbophobia and the legal/political context of Latino societies have played a crucial role in the ways in which LM experience their family life and navigate within the public domain. For example, studies conducted in Argentina, Brazil, Chile, and Mexico have indicated that some LM initially embark upon heterosexual relationships to conform to their family of origin's demands. Further, after defining as a lesbian, they often hide their sexual identity in the public domain and usually restrict disclosure to within the family context. Besides, when LM establish an intimate partnership they also begin to feel concerned because of the lack of socio-legal protection to respect their status as a couple (Sánchez et al., 2004; Pinheiro, 2006; Santos and Alves de Toledo, 2006; Herrera, 2009; Jara and Araujo, 2011; Palma et al., 2012).

Nevertheless, following the postcolonial framework, we pay attention to the complexity of examining cultural diversity (Coronil, 2015). While LM living in Latino societies share similar experiences (such as contending with strong lesbophobic element common to Latino culture) differences among countries can be identified. For example, previous studies have shown that some Brazilian LM live with the fear of being attacked because of the context of violence (in all its forms) and hate crimes against sexual minorities in which they live (Pinheiro, 2006; Santos and Alves de Toledo, 2006). Likewise, other studies have indicated that some Mexican LM taught their children not to express non-heterosexual behaviours, such as kissing another child of the same gender, to avoid homophobic reactions (Haces, 2006). In a parallel fashion previous studies focused on Chilean LM have indicated that lesbian women feared potentially losing custody of their children, being threatened by their heterosexual ex-partners, or even by their family of origin, during disputes related to separation or divorce (Herrera, 2009; Jara and Araujo, 2011).

Despite the insightful understanding of the family life of LM living in Latino countries previous studies have shown, the role of Christian religious beliefs and values on the family experiences of LM have received less attention. A study conducted with Catholic Hispanic LM in the United States found that religion produced an identity conflict given its potential incompatibility with the role of a "good mother" (Tuthill, 2016). Thus, it seems that Christian religious beliefs and values might have an important impact on the family life of LM within a Latino cultural context, even for the LM in Tuthill's study who were all Latina women living in the United States. The present study was conducted with LM who, at the time the study, were all living in Chile, a Latino country with a strongly Christian (mainly Catholic) religious heritage. For example, a study that explored discourses concerning lesbian and gay (LG) parenting in Chile indicated that some Christian heterosexual women expressed the view point that having LG parents could disrupt a child's gender and sexual identity development while other heterosexual women suggested 'no we're not culturally ready for that yet' (Figueroa and Tasker, 2019).

Furthermore, studies conducted with Latina lesbians (LL) in the United States have revealed that LL's parents holding Catholic

religious beliefs often portrayed homosexuality as a sin and thus an undesirable sexual orientation. For example, Acosta (2010) reported that LL in the United States often stated that their mothers used religion to protect their daughters from the sin of homosexuality by sending their daughter to talk to the priest. Another study conducted with lesbians in Chile found that family members' negative views of homosexuality based on Catholic beliefs influenced participants' self-rejection (Herrera, 2007).

In contrast, studies have shown that Latino families do not necessarily expel their lesbian daughter from the family circle (Espín, 1987; Herrera, 2007; Asencio, 2009; Acosta, 2010). Thus, in spite of a family's rejection of lesbianism, LL often receive support from their families after disclosure. This particular support has been described as an expression of Latino familism which implies a strong interdependence observed within Latino families (Muñoz-Laboy, 2008). Thus, Latino families make major efforts to preserve familial bonds by avoiding confrontation regardless of family heteronormative expectations (Acosta, 2010). Heteronormativity has been described as an ideology that promotes heterosexuality as the norm (Oswald et al., 2005; Nardi et al., 2013).

The Chilean Sociolegal Context

The homo/lesbophobic context existing in Chile, as in the rest of Latin America, has been largely associated with the historical rejection of homosexuality fostered by the Catholic Church (Akerlund and Cheung, 2000; Bozon et al., 2009). However, the Catholic Church has been seen to have a greater impact on law and policy in Chile than in other Latin American countries (Htun, 2003). Indeed, same-sex marriage and adoption by same-sex couples have been legalised in Argentina, Brazil, Colombia and Uruguay and recently in 2019 in Ecuador too. In contrast, in Chile, neither same-sex marriage nor adoption have not been legalised yet and there is a slow movement in favour of same-sex couples when compared to other South American countries.

Regarding Chilean legislation, in recent years important legal changes have been enacted in favour of LGBTQ people. These legal changes have included the decriminalisation of homosexuality (1999), the Law Against Discrimination (2012), the Civil Union for other- and same-sex couples (2015)¹, and the Gender Identity Law (2018). Furthermore, in Peña (2017) the Supreme Court of Justice granted a gay father and his male partner, the custody of their two children. In addition, recently in 2020, a Chilean Family Court recognised two women as the legal mothers of a child conceived through reproductive technologies. These rulings are very different from what happened in the case of Judge Karen Atala, who had her daughters removed from her custody by the Supreme Court of Justice in 2004 because the court considered that living with a lesbian couple was a risk to the girls' psychosexual development.

Despite the restrictive Chilean legal context toward LG parenting, Chilean people's approval of homosexuality seems to be at similar levels to that in other Latino countries with

¹The present study was conducted before the approval of the Civil Union. Thus, at the time of the interviews, the Chilean socio-legal context was more restrictive than nowadays.

less restrictive legislation toward same-sex couples. For example, one international survey found that 74% of Argentineans, 68% of Chileans, 61% of Mexicans, and 60% of Brazilians agreed that society should accept homosexuality (Pew Research Center, 2013). Another international survey found similar mean levels of approval of homosexuality in Argentina (5.6), Puerto Rico (5.6), Chile (5.0), and Brazil (5.0), in a scale ranging from “Never justifiable” (1) to “Always justifiable” (10) (World Values Survey, 2020).

Concerning public approval of same-gender parenting in Chile, a national survey of 1303 people revealed that 44% of the participants agreed or strongly agreed that “a couple of women (lesbians) can raise a child as well as a heterosexual couple can” (Instituto de Investigación en Ciencias Sociales, 2015). While 40% of the participants agreed or strongly agreed that “a couple of men (gays) can raise a child as well as a heterosexual couple can.” These data reveal that social approval particularly of same-sex parenting was still low in Chile despite that 63% of the participants in the same study agreeing or strongly agreeing “homosexuality is a sexual option as valid as any other.” The national survey conducted by Cadem (2018) revealed similar results: while only 44% of Chileans approved of adoption by same-sex couples, 60% approved of same-sex marriage.

Another Chilean national survey has indicated that religious affiliation might have an impact on people’s prejudice toward LG parenting. The study showed that 41% of participants who identified as Catholic, and 23% of those who identified as Evangelical, agreed with the right of homosexual couples to adopt children (Instituto de Investigación en Ciencias Sociales, 2014). Chilean people still report a high level of religiosity: 80% of people reported believing in God (Centro de Estudios Públicos, 2018) although the same survey indicating that Catholic Faith had declined from 73% (1998) to 55% (2018), while Evangelism had slightly increased from 14% to 16% during the same period.

The Chilean sociolegal context has been particularly complex for lesbians. “Homosexuality,” including “lesbianism,” has historically been portrayed as a sin and a transgression of moral norms (Contardo, 2011). Furthermore, although gay movements reached visibility during the 90s, lesbian women’s voices were less visible than gay men’s demands during this period. However, by the beginning of the 21st century, new lesbian-led movements emerged, such as “*Rompiendo el Silencio*” (Breaking the silence), giving visibility to lesbian voices. Further factors important in promoting Chilean social awareness and acceptance of lesbianism were the high-profile recognition of Nobel prize winner Gabriela Mistral’s relationship with Doris Palma and also the media coverage of Judge Karen Atala’s successful custody battle through the courts. Nevertheless, many Chilean people still see lesbianism as incompatible with motherhood and consider that it is not normal for children to be growing up in a lesbian-led household (Herrera, 2009; Figueroa and Tasker, 2019).

Research Aims

This contrasting context - continued legal restriction versus comparative public acceptance - seems to be interesting when exploring the family life of LM, especially, when we consider

that previous studies have indicated that lesbians and gay men in Chile still experience high levels stigmatisation and internalised homo/lesbophobia (Figueroa and Tasker, 2014; Cárdenas et al., 2018). Internalised homophobia has been defined as “the gay person’s direction of negative social attitudes toward the self, leading to a devaluation of the self and resultant internal conflicts and poor self-regard” (Meyer and Dean, 1998, p. 161). We used the term internalised lesbophobia when lesbians experienced negative feelings toward self (Guthrie, 2005; Fogaça et al., 2011). Just as Latinos live with machismo, so Latinas live with the negative emotional cognitions and sociocultural restrictions of Marianismo (Nuñez et al., 2016). We suggest that internalised homo/lesbophobia instilled by traditional Latino family values based in Christianity - particularly Catholicism - often keep sexual minority people from living more visible lives and that this is especially the case when they embody a direct challenge to a central figure in the Catholic family - the mother.

We employed Life Course Perspective as our main theoretical framework for the present study of Chilean LM since this helps to locate lesbian parented families both within a wider socio-cultural and historical context and locates an individual life within a developmental and family framework (Elder, 1998; Cohler, 2005). Relying on a life course perspective, sexual identity development could be understood as a process of narrative engagement throughout which individuals actively make sense of their same-gender desire in a particular historical and cultural context (Hammack and Cohler, 2009). Thus, we also used a narrative approach to analyse how these group of LM we interviewed made sense of their same-gender desire through narratives available to them as they grew into womanhood and as mothers within a Chilean cultural context.

Narratives can be understood as stories people tell about their own lives which are influenced by cultural conventions, language usage and historical circumstances (Bruner, 1987). According to Murray (2008), people define themselves through narratives that bring a sense of order and temporal continuity to events. Hammack (2008) has highlighted how the cultural psychology of sexual identity development can be enriched by employing a narrative approach. From this standpoint, personal narratives are constructed and re-constructed throughout the life course, and are embedded in social interaction and social practice (Hammack, 2008).

In particular, our study explored the life course experiences of a group of Chilean LM who conceived their children through a previous heterosexual relationship, a situation relevant in countries with or without legislations enabling same-gender couples to access adoption or assisted reproductive technology services (Tasker and Rensten, 2019). Our study also examined how sexual identity and motherhood were negotiated in the private and public domains.

Given this purpose, our research questions were: How does Chilean LM coming from a previous heterosexual relationship develop their sexual identities over their life courses? What are the particular ways in which Chilean LM negotiate their identities as mothers and lesbians with their family of origin? How does Chilean LM negotiate their identities and their children’s identities in mainstream society? How do Christian religious

beliefs and values shape the life course experiences of LM in Chile?

MATERIALS AND METHODS

Participants

Our initial screening sample in this study was 16 Chilean LM from different Chilean cities. Criteria for participants' inclusion were being a Chilean woman aged over 18 years old, currently identifying as lesbian, and being a mother of at least one child of any age. As this was an exploratory study due to scarcity of knowledge about Chilean LM, no other criteria were imposed by the initial sampling framework. Interviewees were aged between 27 and 56 years old, with a mean age of 37 years. After finishing data collection, the sixteen interviews were audio-analysed and six macro-narratives (overarching life stories) were identified across cases. Based on participants' demographics features and the more represented macro-narratives across cases, eight participants were selected for the purpose of systematically exploring self-identity construction and experience within a homogeneous sample. We aimed to conduct a detailed case-by-case analysis with a small and homogenous sample. Thus, we did not consider saturation to close data collection (Smith, 2008). The selected sample for the current study were eight self-identified lesbian women who had conceived and given birth to their first child within the context of a heterosexual relationship, had been involved in at least one lesbian couple relationship, and were currently parenting their biological children or adolescents who were living with them at the time of the interview or who had previously done so. Thus, from the initial screening sample, three LM who had conceived and given birth their first child in the context of a lesbian couple relationship, two LM who had adult offspring, and one self-identified lesbian mother who had never been involved in a lesbian relationship were excluded from the analysis. The eight selected participants were aged between 27 and 40 years old, with an average age of 33 years. Four participants had divorced their husband, and three had ended a cohabitation/relationship with their child's father. The last participant was a married woman who was living in a couple relationship with her husband at the time of her interview but who was actively considering leaving this relationship.

Seven participants identified as middle social class and one of a higher social class. The average family income was 1,037,500 CLP (1,348.75 USD) per month, ranging from 500,000 to 1,500,000 CLP. All eight participants were in paid occupations. One participant was finishing an MSc degree, and four had completed undergraduate studies. Another two participants had begun undergraduate studies but not yet completed them at the time of the study. The last participant had completed secondary education. Thus, the sample as a whole was relatively middle class and educated compared to Chilean national data.

Six participants lived in Santiago. One interviewee lived in Talcahuano, and another participant lived in Rancagua. Four participants did not participate in any religious activity or hold religious beliefs, two identified as Catholic, one as Christian, and one reported believing in God but holding no denominational

allegiance. A summary of each participant's details and the pseudonyms given to participants are listed in **Table 1**.

All eight participants were biological mothers. The mean age for the first pregnancy was 23.5 years, ranging from 22 to 30 years. Participants' children were seven girls and five boys, with a mean age of 10 years old, ranging from 4 to 16 years. All participants' children were enrolled in primary or secondary education as expected according to their chronological ages. Seven participants were living with their children (see **Table 2** containing participants' children's details).

Only one participant was not living with her children at the time of the study. All participants' children were in contact with their biological father and received support from him, whether through shared childrearing, economic support, or sharing time together. Seven participants were involved in a lesbian couple relationship at the time of the study. But only three women were cohabitating with their lesbian partner when interviewed.

Recruitment

Recruitment of volunteers for this study was initially conducted through collaboration with two widely known Chilean sexual minority organisations based in Santiago, the 'Movement of Homosexual Integration and Liberation' (MOVILH) and Equal Foundation (Iguales). Invitations for the present study were displayed at the premises of both MOVILH and Iguales and publicised through each organisation's internet network. In addition, a Facebook page was created for the study by the first author and invitations to participate were periodically published on this page. Five participants contacted the first author via Facebook and three via email. All interviewees were volunteers and none were paid for their participation.

Interview

A semi-structured interview was designed for the study's purpose (Gergen, 2010). Open-ended questions were constructed in advance and further prompts requests for clarification or expansion were requested during the interviews. Participants also were given the possibility at the end of the interview of raising other issues they thought relevant. The interview schedule began with an open question inviting participants to narrate their own life story about how they started to identify as a lesbian mother, a narrative life course interview opening question similar to the one suggested by Murray (2008). Further specific questions were constructed in advance as prompts in the case participants required a guide to address relevant topics according to the study's purpose. Examples of these questions were the following: Had you thought about becoming a parent before you actually did? How did your parenting come about? When did you first become aware or begin to define yourself as a lesbian? Has this definition changed over time? Have you told other people about you being lesbian? How do you manage your motherhood and your lesbianism in your everyday life? How do your mother and lesbian identities fit in with other areas such as your work, children's school, extended family, friends? In this way, the interviewer (first author) invited but did not focus attention solely on the role of family members in LM lives but instead opened questions areas. Encouraging participants to tell

TABLE 1 | Demographic information for participants.

Participant	Age	Education	Marital / Relationship Status	Socio-economic Level	Childhood Religion / Adult Religion
Teresa	36	Secondary school completed	Divorced	Middle	Catholic / No
Camila	29	MSc student	Separated	Middle	Catholic / No
Julia	35	Graduated	Divorced	High	Catholic / No
Carla	31	Graduated	Separated	Middle	Catholic / Belief in God
Paula	38	Graduated	Divorced	Middle	Catholic / No
Jimena	27	Undergraduate student	Separated	Middle	Not reported / Catholic
Marcela	32	Undergraduate student	Married	Middle	Christian / Catholic
Beatriz	40	Graduated	Divorced	Middle	Catholic / Catholic

TABLE 2 | Participants' children's details.

Participant	Sex	Age	Educational level	Religion	Living with	Since
Teresa	M	13	Primary, 8th year	No	Father	7 months
	M	10	Primary, 4th year	No	Father	7 months
Camila	F	7	Primary, 2nd year	No	Mother	Birth
Julia	F	6	Pre-School	Catholic	Mother	Birth
Carla	F	9	Primary, 3rd year	No	Mother	Birth
Paula	M	16	Secondary, 1st year	Catholic	Mother	Birth
	F	13	Primary, 7th year	Catholic	Mother	Birth
	M	9	Primary, 4th year	Catholic	Mother	Birth
Jimena	M	4	Pre-School	No	Mother	Birth
Marcela	F	10	Primary, 6th year	Catholic	Mother Father	Birth
Beatriz	F	15	Secondary, 2nd year	Buddhist	Mother	Birth
	F	10	Primary, 5th year	Catholic	Mother	Birth

their own stories in this way empowered them to highlight the features of their lives that mattered to them as opposed to simply referring to the interview focus (Riessman, 2008; Hollway and Jefferson, 2013).

Interview Procedure

After participants contacted the researcher to express their interest in taking part in the study, they were given further information on the study and a choice of venues for the interview. Participants were given the interview schedule, alongside additional information on the study to know in advance that the topic would be addressed via a life story style interview. Thus, participants had probably reflected to a greater or lesser extent on what they were going to say in advance of the interview, empowering participants as they organised and prepared to present their stories.

Interviews were conducted between September 2013 and January 2014. Face to face interviews were conducted with each participant in different locations of their choosing. Five interviews were carried out in different cafes, one at MOVILH premises, one at a participant's workplace, and another at a participant's home. Of these interviews, seven were conducted in Santiago and one in Talcahuano. All interviews were conducted in Spanish by the first author and each lasted between 40 and 70 min. With each participant's consent, interviews were audio-recorded.

Participants' questions were answered over email, telephone and before interview commencement. Participants were informed that they could withdraw their consent to participate in the study at any time up to their final consent to include the

checked transcript in the data set. Verbatim transcripts were encoded, and all participants' information and study's data were password protected and stored in the authors' personal files. Recordings were erased after transcriptions were completed. This study was approved by the ethics committee of the Institutional Review Board at the host university.

Verbatim transcripts were made in Spanish by the first author. Personal information was disguised in the transcripts and pseudonyms were assigned to ensure the confidentiality of participants. Other names or potentially identifying details mentioned by participants were also changed. Each participant was given access to their own transcript and was given the opportunity to withdraw it or to make any changes or comments over a 2-month period. Only minor details were changed or clarified and none of the participants withdrew from the study.

Ethical Considerations

Interview questions directly explored participants' personal stories of sexual identity and motherhood experiences. Thus, participants' emotional states were observed during the interview in order to stop if necessary. We also planned to provide a back-up preliminary psychological support if required. After the preliminary session, participants could then be referred on to MOVILH's support services for psychosocial counselling by one of two female psychologists, however no participants needed post-interview support.

Narrative Analysis

Narrative analysis is a procedure that has enabled social scientists to analyse and interpret personal stories through which people

make sense of their lived experiences (Riessman, 2008). In particular, the structural narrative analysis (SNA) focuses on narrative content, but with specific attention given to the narrative form, or how stories are told and organised by individuals. We followed Labov's model, which has drawn particular attention to the elements of a narrative's structure (Labov, 1972; Riessman, 2008). According to Labov (1972, p. 361), the "skeleton" of a narrative consists of a series ordered clauses which he called "narrative clauses." Namely, Labov (1972) identified six narrative elements to guide the structural analysis: Abstract (What was this about?), Orientation (Who, what, where?), Complicating action (then what happened?), Evaluation (so what?), Result (What finally happened?), and Coda (which returns the listener to present). These six elements are summarised in **Table 3** below, although not all six elements in order are necessary for a partial story to be narrated.

Structural Narrative Analysis Procedure

Relying on Riessman's (2008) propositions for conducting structural narrative analysis, the following steps were addressed in each transcript analysed. Firstly, each transcript was re-read several times in order to identify each participant's smaller personal stories which they used to illustrate their personal development: these episodes constituted individual mini-stories. Secondly, narrative clauses in the mini stories were thematically grouped, and emerging micro-narratives were constructed. Micro-narratives were later grouped into an overall life story (the macro-narrative). Thirdly, Labov's (1972) structural elements were identified after a detailed analysis of each micro-narrative's clauses. Fourthly, micro- and macro-narrative were re-organised into a life-course progression. The whole process was conducted individually with each participant's transcript following the idiographic case centred approach, as suggested by Riessman (2010). After completing each participant's final Labovian narrative, patterns of stories across cases were identified. Also, following Murray's (2008) suggestions for the chronological organisation of narrative accounts, we identified the beginning, the middle, and the end in each participant's macro narrative summary.

RESULTS

The themes that emerged from the structural narrative analysis reflected the coming out process of this group of Chilean LM from their early cognizance of their attraction to women until

their adult years. Four main themes emerged from the analysis of participants' narratives: (1) Conforming with the expected heterosexual path; (2) Experiencing a lesbian desire that needs to be expressed; (3) Conveying sexual identity to family of origin, friends and the child(ren)'s father; and (4) Conveying maternal sexual identity to the children. The first two themes focused on the processes through which participants developed their own understanding of their same-gender desire either when they were a childless woman or when they became mothers. The other two themes provided information about participants' coming out process within private and public domains. **Table 4** below contains the themes and sub-themes originated from the SNA.

Conforming With the Expected Heterosexual Path

All eight participants talked about their experiences of conforming to a heterosexual path during an initial period of their sexual identity life course. This theme split into two sub-themes: "*Lesbianism not expressed or selected as a life course project*" and "*Building a relationship and a family with a man.*"

Lesbianism Not Expressed or Selected as a Life Course Project

In spite of participants differences in the timing of their sexual identity life course, what characterised the accounts of all participants was that their lesbianism was not expressed or selected as life course plan during an initial stage of their sexual identity development. Some participants did not recognise lesbianism as a possibility for themselves (Camila, Julia and Jimena), while others (Carla, Marcela, and Beatriz) tried to hide their feelings because they feared the consequences of being seen as a lesbian because of their family pressures. Nevertheless, Teresa and Paula did consider lesbianism as an option for themselves

TABLE 4 | Themes and subthemes.

Themes and Sub-themes	
(1)	Conforming with the expected heterosexual path
(1.1)	<i>Lesbianism not expressed or selected as a life course project</i>
(1.2)	<i>Building a relationship and a family with a man</i>
(2)	Experiencing a lesbian desire that needs to be expressed
(2.1)	<i>Rethinking lesbianism as a life course identity project</i>
(2.2)	<i>Questioning the heterosexual family life project</i>
(3)	Conveying sexual identity to family of origin, friends and the child(ren)'s father
(3.1)	<i>Negotiating lesbian identity with family of origin</i>
(3.2)	<i>Negotiating lesbian identity with friends</i>
(3.3)	<i>Negotiating lesbian identity with the child(ren)'s father</i>
(4)	Conveying maternal sexual identity to the children
(4.1)	<i>Avoiding the disclosure of lesbian relationships to the children</i>
	Presenting lesbian partner as friend
	Hiding lesbian affectionate expressions
(4.2)	<i>Preparing the child for coming out as a lesbian mother</i>
	Teaching children to be tolerant
	(Planning) disclosure to the children

TABLE 3 | Labovian narrative analysis list of structural codes used.

Codes	Elements (Labov, 1972)
AB	Abstract
OR	Orientation
CA	Complicating action
EV	Evaluation
RE	Result
CD	Coda

during this first developmental period, but both opted for a heterosexual pathway at this point.

The three participants who tried to hide their same-gender feelings had assessed the negative consequences of being seen as a lesbian, mainly by their parents. Carla described the time when her mother realised about Carla's lesbianism when Carla was 16 years old. In Carla's evaluation below she decided she did care about her mother's reaction and decided to deny her lesbian feelings. Carla concealed her lesbian desire to avoid her mother's "suffering" ("sufrimiento" in Spanish), which seemed to be a strong family pressure for her. The word "suffering" used by Carla implied that lesbianism was a heavily undesired sexual expression within Chilean society when she was a youth:

Lab	Clause
EV	Carla: "so I said myself 'here I have two options,
EV	or I declare openly myself as lesbian and I see the
EV	suffering, because I saw the suffering of my mom,
EV	or I say no, that was a teenage foolishness which will
RE	pass',
RE	and that was what I did, we are talking about 15 years
CD	ago when this
CD	[being lesbian] was even worse [within Chilean society]"
	(Narrative [N]1, Episode [EP] 1, Lines [L]166:170)

Similarly, Marcela, who was from the southern and more traditional city of Talcahuano, narrated a short episode about her adolescent years when she decided to take a heterosexual path in trying to avoid any negative social consequences. Marcela heard her father talking negatively about if he had a gay or lesbian child, which then led Marcela to hide her early attraction to women. With her repetition of words Marcela also implied that she balanced hiding herself by emphasising being straight to herself and to her father and others. It seems that Marcela feared being "punished" by her "violent" and homo/lesbophobic father if she disclosed that she was lesbian:

Lab	Clause
CA	Marcela: "(...) He [Marcela's father] always said
RE	that if he had a gay or lesbian child, or black, or
CA	whatever, he killed him,
RE	then I had to hide, to hide, to hide.
CA	So what I did then was to date men..." (N1, EP 1;
RE	L 8:10)
RE	"I mean I tried to convince myself I was straight, I'm
EV	straight, I'm straight, I'm straight',
EV	to avoid problems, because my dad was so strict,
	and also was violent..." (N1, EP 1, L13:14)

Thus, participants' narrative revealed the intense family pressures to conform to a heterosexual path, even when

they were aware of their same-gender feelings. Participants' heteronormative family pressures were visible in all participants' accounts and they did not appear to question whether their parents were right to apply this pressure. Also, the lesbophobic family contexts were mainly portrayed as the main reason to avoid identifying as a lesbian by those participants who were aware of their same-gender feeling before becoming mothers.

Building a Relationship and a Family With a Man

Since participants considered that lesbianism was not an option for them, they all built relationships with men or tried to follow a socially expected heterosexual path. Furthermore, all participants tried to build a family with their child/children's father when they became mothers. While three participants (Camila, Paula and Jimena) had planned their first pregnancy, the other five (Teresa, Julia, Carla, Marcela and Beatriz) were not expecting to become mothers when they did. Paula, who had planned her pregnancy, narrated an episode that illustrated her desire to be a mother. In addition, Paula's account showed that she initially felt attracted to her children's father, as indicated in the narratives of Teresa and Julia also. However, Paula said that she had planned to form a "conventional family" with her male partner in order to avoid being discriminated against. Paula was aware of her lesbian desire, yet the expected rejection and the anticipated "suffering" of living out a lesbian identity was seen as risky for her. Paula's account revealed the minority stress she experienced as a young lesbian living in Chilean society, thus, heterosexual marriage was seen by Paula as a much safer place:

Lab	Clause
AB	Paula: "I was interested in making a family,
OR	I wanted to be a mom, have children and it would be
CA	difficult with a woman,
CA	so I met my future husband, and I said 'wow' I felt in
OR	love at that time..." (N1, EP 2, L 168:170)
OR	"I was 18, then I said actually, between having a
EV	relationship with a guy who I'm going to marry,
EV	I will have the expected family, the conventional
EV	family; or taking the risk in the life and suffering,
EV	having problems, because they might not understand
RE	me, they will discriminate me, they will reject me;
RE	I prefer to marry him, then I married..." (N1, EP 2, L
	175:178)

Like Paula at a similar point in her life course trajectory Beatriz, who was from another southern and traditional city, Rancagua, also opted for having a heterosexual relationship instead of expressing her lesbian feelings. Beatriz had a short lesbian relationship when she was younger, but Beatriz thought that God would "punish" her because of her forbidden non-heteronormative behaviour. The internalised lesbophobia experienced by Beatriz revealed the strong impact of religious discourses about prescriptive heterosexuality upon her identity formation. Thus, Beatriz's prior religious beliefs played a crucial

role in her decision to pursue a heterosexual relationship. Although Beatriz had not planned her pregnancy, she had thought previously about the idea of having a child. Then, when Beatriz met her daughters' father, she saw him as the prospective parent for her future children:

Lab	Clause
OR	Beatriz: "Before, I had had a relationship with this girl, as I told you, I was around fifteen..."
EV	I thought I had taken the wrong way, thinking that maybe God punishes you.
CA	Then I decided to take the right course, and he [the daughters' father] had been interested in me during the summer,
EV	so I decided to accept, I liked him,
EV	I had thought he could be sometime the father of my children, as I said to you,
RE	then we started a relationship and we agreed on many things..." (N1, EP 1-2, L 382:388)

Family heteronormative expectations pressured participants to have a relationship with a man and to get married in some cases. As participants' narrative revealed, lesbianism was associated with suffering for some interviewees and punishment for those who held Christian religious beliefs.

Experiencing a Lesbian Desire That Needs to Be Expressed

Participants' narratives revealed a renewed period in their lives during which they started to rethink their attraction to women and considered that identifying as a lesbian was the best life course identity project for them. Simultaneously, participants started to question the relationship they had with their child/children's father. For all participants, this process started during their trajectory as a mother. This theme was fed by two sub-themes: "Rethinking lesbianism as a life course identity project" and "Questioning the heterosexual family life project."

Rethinking Lesbianism as a Life Course Identity Project

During this time, participants began to view lesbianism as an available option for them and they then affirmed their lesbian identity. The three participants who had previously not identified a clear lesbian desire (Camila, Julia and Jimena) started to recognise their same-sex feelings as a stable feeling of attraction during this time. Camila previously had considered that having a relationship with a woman was not a possibility for her. Camila said that lesbians were not visible in Chilean society, therefore she had not represented in her mind what being a lesbian was. Camila narrated an episode to portray how and when she started to realise that lesbianism was an option for her and how she then finished her relationship with her daughter's father. As Camila's account unfolded, media representations of lesbian identities made a clear difference in helping her to recognise her lesbian feelings:

Lab	Clause
CA	Camila: "and some pictures of lesbian couples were shown on TV [She was watching TV with her daughter],
OR	I have never thought in my life that this existed...
EV	within my little world at that time it wasn't an option (...)
EV	so I stayed like with the doubt, and the doubt began to grow as more, more, and more,
EV	and I began to find out more, more and more, until I realised there were many lesbian series [on Internet]... (N1, EP 2, L 104:109)
RE	And a world began to be open to me,
CA	and at some point I said to my daughter's father, 'You know what, like something...'
EV	I didn't know what it was yet,
RE	but I told him 'I need time to be alone...' (N1, EP 2, L 123:130)

The five participants who previously had realised they had attractions to other women during their adolescent years (Teresa, Carla, Paula, Marcela, and Beatriz) began to re-examine their same-gender feelings during early motherhood. During this time, these participants became aware of the prominence of their lesbian desires and began to realise that they did not feel attracted to their male partner. The following episode within Teresa's account clearly illustrated the prominence of her erotic attraction to women and how she then began to affirm her lesbian identity:

Lab	Clause
EV	Teresa: "Before I felt it was normal, that was a normal process, that I could like men,
EV	but it was like fool me, because basically I was super clear that I didn't like men at all.
EV	Not now, if you ask me, I feel women are the only things that move me, I don't like men at all..." (N2, EP 1, L 328: 330)
EV	"I began to realise, it so funny,
CA	when I went to the gym and there was a teacher of gymnastics,
OR	the teacher of cardio kickboxing who I loved,
EV	so I said 'Ok, I love her', but because I really loved her, you know,
EV	I mean, it wasn't that I liked her because I found her cute, pretty, no,
EV	the girl shook all my hormones, I don't know, but I really loved her..." (N2, EP 1, L 354: 359)
EV	"Then I felt I was going into really heavy things,
RE	and by 2010, I definitely saw myself as lesbian..." (N2, EP 1, L 367: 368)

It is important to note that during this life course period, all participants (except Marcela) developed positive views about their own lesbian feelings. This contrasted with the mainly heteronormative expectations from their parents.

Questioning the Heterosexual Family Life Project

As noted above, during this period of growing awareness of their own lesbian feelings participants also noted their lack of attraction to their male partners, which had evaporated in those who previously had felt attracted to them. Consequently, participants started to question the heterosexual path they had trodden previously. However, breaking the heterosexual relationship they had built with the father of their child(ren) entailed a significant challenge for them as participants had a joint home with their male partner and had formed a family based upon it. Finishing the heterosexual relationship they saw as bringing the “destruction” of their heterosexual family life project. In spite of these challenges, seven participants had finished their relationship with their child(ren)’s father by the time they were interviewed for this study and had opted for having a relationship with a woman. Again, parental heteronormative expectations were apparent in participants’ life course stories. In some cases, parents’ religious beliefs portrayed heterosexual marriage as the desired goal for participants as Christian daughters. For example, in Carla’s account, heterosexual marriage was seen as a representation of “happiness” for her Christian parents. The narrative piece below revealed Carla’s varied attempts to maintain her heterosexual marriage over several years and the influence of Carla’s own mother’s and father’s religious expectations on Carla’s effort to do this:

Lab	Clause
OR	Carla: “I used to do everything [because Carla’s husband did not have a job], but I was persistent and I said ‘no, it has to work’
EV	because my mom was happy, because my dad was happy,
EV	because I had already made the decision to form a [heterosexual] family.
EV	I think that was very important for them,
EV	I mean, my mom always had told me that she was happy to see me get dressed in white to the church,
CA	and I say her ‘no mom, that’s not gonna happen’
EV	and I tried, I tried to be with him for 4 years, but no, I couldn’t, I couldn’t,
CA	and then in 2009 I made the decision, I said to him [her husband] ‘you know what, this will not work’... ” (N1, EP 3, L 39: 46)

In contrast to the rest of the participants, Marcela, had not finished her heterosexual relationship at the time of the interview with her. Nonetheless, she had been in a lesbian relationship for about 5 years before she was interviewed. Although, Marcela’s lesbian desire a prominent feature in her mind, she still believed that having a father and a mother was the best option for her

daughter and said that she could put up with her heterosexual marriage for this. Interestingly, as with Carla’s account above, Marcela’s account illustrated the influence of her mother and also Marcela’s husband who put emotional pressure on Marcela’s decision making. Marcela’s own daughter also put pressure on Marcela not to leave and end the parental couple relationship. Marcela’s own Christian religious beliefs and values made her feel guilty and scared because of God’s expected punishment. Marcela’s mother also avoided talking about Marcela’s lesbian feelings. It seems that some participants’ mothers (and also fathers) used silencing as a strategy to avoid acknowledging their daughter’s feelings making lesbianism something apparently non-existent with the effect that lesbian desire and happiness was rendered as an insufficient reason for dismantling the heteronormative family:

Lab	Clause
CA	Marcela: I tell her ‘Mom I want to talk to you’ and she says ‘Oh, no’ and she leaves,
EV	but she realises, but she prefers to look like silly, she doesn’t want to take it, she doesn’t want to assume it, she will not assume it” (N2, EP 3, L 50-52)
CA	“Once I told him [her husband] that I wanted to leave home, but I didn’t explain why to him
CA	so he said ‘how are you going to do that to your daughter?, Remember that you suffered when you were a child
CA	and I don’t think you want the same for her’
CA	and my daughter says, ‘I don’t want that you to leave my dad’
EV	So I have too many family pressures, and I can’t live my condition openly” (N2, EP 3, L 68-72)
RE	“And I always ask God for forgiveness [because of her lesbian relationship],
EV	I am scared that God punish me” (N2, EP 3, L 355-356)
CA	“I ask God: ‘please make the love I feel for her, the love for my husband’” (N2, EP 3, L 405)

As mentioned above, family pressures and expectations were seen at their strongest when participants started to think about leaving their male partner and break apart the heterosexual family project they had built. This process had taken years to do for participants who had separated from their male partners at the time of the interviews. In addition, when participants thought about expressing their lesbian desire, religious expectations were meaningful for those who held Christian beliefs and/or had Christian parents. Religious expectations were particularly prominent in Marcela’s and Beatriz’s narratives, the participants who came from Chilean regions other than Santiago.

Conveying Sexual Identity to Family of Origin, Friends, and the Child(ren)’s Father

Conveying sexual identity to others was a relevant aspect of participants’ coming out narratives. Nevertheless, participants

varied in the level of their disclosure to others. Despite individual variations in participants' coming out to others, the findings of this study revealed more instances of disclosure to people who were emotionally close to them like their family of origin and their close friends than to people who were distant. Although only a minority of participants had disclosed to their child(ren)'s father, the challenges participants encountered during this particular disclosure process were an important aspect within these participants' narrative accounts. This theme split into three related but distinctive sub-themes: "Negotiating lesbian identity with family of origin;" "Negotiating lesbian identity with friends;" and "Negotiating lesbian identity with the child(ren)'s father."

Negotiating Lesbian Identity With Family of Origin

While four participants mentioned that they had disclosed to at least one member of their family of origin, the other four interviewees reported that they had not disclosed to any of their family of origin members at the time of their interview. Nevertheless, three of the participants who had not disclosed to their family members thought that their parents had realised the participant's attraction to women in other ways.

All participants noted the importance of family support in their lives, or emphasised their desire to be accepted by family members, mainly by their parents. Disclosing participants reported at least one family member who was accepting of the participant's lesbian identity. Julia's main story conveyed how important the acceptance of her mother and grandparents was to her. She implied that their acceptance had improved over time after Julia's parents' initial adverse reaction to Julia's coming out. Julia's narrative further revealed her grandparents' beliefs that being a lesbian would be incompatible with Julia having more children and how much the lens of reproductive motherhood influenced family members' thoughts. In contrast to her careful focus on coming out to her family of origin, Julia only very briefly mentioned coming out to her friends and how she felt supported by them:

Lab	Clause
AB	Julia: "I came out publically right away,
CD	I mean, not publically, I didn't publish anywhere,
CA	but I told my family, I told my loved ones,
CA	and I told them that they had to accept me how I was..." (N 2, EP 1, L 29:32)
EV	Julia: "And I feel supported by the people that love me, my family, my friends..." (N 2, EP 1, L 71)
CA	Julia: "In the beginning it was hard for my mom, but after she realised it wasn't an issue for her.
EV	It was more difficult for my grandparents.
CA	They asked me if I would have more children,
EV	and I told them yes, that I could have more children. That it didn't mean that,
CD	Then, they relaxed. At the moment, it's not an issue [for Julia's parents and grandparents]..." (N 2, EP 1, L 471:475)

Camila, who also had disclosed to her family, still did not feel properly accepted by her mother. Camila had disclosed to her mother after she met her first lesbian partner. Her narrative showed how her mother had accepted neither the lesbian partnership nor Camila's lesbian identity since then. Camila's account also indicated her mother's traditional expectations of a married woman's role in the home and her mother's close interest (and policing) of this. Camila used the metaphor "*se le cayó el pelo*" ("her hair fell out") to portray how disappointed her mother felt about her lesbianism and Camila's transgression of the conventional gender norms. After the disclosure Camila's mother continued to attempt to silence Camila's lesbian identity by letting her disapproval and shame be known but not open for further discussion, as Camila explained with the evocative phrase in Spanish "*llorando por los rincones*" ("crying in corners"):

Lab	Clause
AB	Camila: "I told her [her mother] after 1 month I met Antonia [her first lesbian partner],
CA	because my mom realised 'so what's up? Why are you going out a lot, you haven't done that before'
CA	'ok, I'm dating someone' I told her,
CA	and my mom was so disgusted,
CA	but how you are dating someone? you, a woman, a married woman, that loves her home' according to her,
CA	and I said 'she is a woman'
CA	and then her hair fell out (laughs)" (N 2, EP 3, L 268:276)
CD	"Long time, I think she is still crying in the corners.
CD	Camila: Still nothing, nothing regarding the issue [her mother had not accepted Camila's lesbian identity]..." (N 2, EP 3, L 284)

Thus, participants found positive and negative reactions after their coming out to their parents. However, family heteronormativity and the rejection of lesbianism were mentioned by most participants. Sometimes these heteronormative expectations were expressed through criticism and emotional pain ("suffering," "crying," "disgust," disappointment and hopelessness). Nonetheless, participants' parents (particularly mothers) usually continued providing support for participants' parenting as Camila said "I used to leave her (Camila's daughter) at my mom's home after school" (L 595) "My mom is always there, supporting me" (L 884).

Negotiating Lesbian Identity With Friends

As was noted above in relation to Julia's account, disclosure to and acceptance by friends was a significant aspect within participants' sexual identity life course but this did not receive the same prolonged painstaking focus that participants gave to describing maternal and paternal reactions. All participants reported that they felt accepted by at least one friend. Participants'

friends' reactions contrasted with their family of origin's mainly negative reaction after coming out. Acceptance from friends was important for participants' lesbian identity affirmation within the lesbophobic context in which they lived. Carla's account illustrated how she had openly expressed her lesbianism with her closest friends. Carla used a Spanish equivalent of Weston's (1991) phrase "family of choice" to describe her friends as *"the family one chooses"* (*"la familia que yo escogi"*) to portray the importance these emotional ties had for her:

Lab	Clause
OR	Carla: <i>"but, for example, I have a group of friends, the friends of my life."</i>
OR	<i>We've been friends for about 20 years, since we were classmates</i>
CA	<i>And interestingly we were all gay,</i>
CA	<i>at that time nobody knew (...)" (N 2, EP 4, L 208:211)</i>
EV	<i>"And they all love my daughter, and my daughter loves them" (N 2, EP 4, L 214)</i>
CA	<i>"Actually, I must say that only my family, the closest one [her closest family members], don't know,</i>
EV	<i>the family I chose, who are my friends, they all know..." (N 2, EP 4, L 218:219)</i>

Negotiating Lesbian Identity With the Child(ren)'s Father

In contrast to their disclosure to family of origin and friends, at the time of interview only one participant had chosen to disclose to her child's father. Another four participants had been confronted by their ex-male partners to acknowledge their sexual identity because their children's father previously had begun to think that the participant might be attracted to other women. Thus, at the time of the interview, participants were often negotiating either how to convey or to conceal their sexual identity from their child's father.

Participants struggled when tried to convey their sexual identity to their child(ren)'s father. Within participants' life course narratives, these were the clearest example of lesbophobia and patriarchal attempts to subordination that were appreciated as such by participants themselves. In fact, the five participants whose their ex-male partner had acknowledged the participant's lesbian identity reported only encountering negative reactions from them. Camila, who had disclosed to her ex-male partner when he realised Camila was repeatedly meeting her first lesbian partner, described her daughter's father's negative reaction to Camila's attraction to women. Prior to this, Camila's daughter's father had expressed no concerns when Camila first dated a woman but perhaps the persistence of Camila's commitment to dating women emphasised to him that Camila was

not going to go back to her previous relationship with him:

Lab	Clause
AB	Camila: <i>"I had my first partner,</i>
AB	<i>and he obviously realised...</i>
CD	<i>but he... I think it's a problem for him until today,</i>
EV	<i>I think it must have been so strong for him...</i>
CA	<i>and he said 'ok, but do not worry, I am so open-minded, it doesn't matter for me.' (N2, EP 2, L 222-226)</i>
CA	Camila: <i>"The thing is that I told him... he asked me what I was doing in my life,</i>
CA	<i>and I told him 'ok, I'm dating a girl' [another partner]</i>
EV	<i>and then I remember that if he was been able to overturn the table</i>
EV	<i>with the juices we were drinking,</i>
EV	<i>I think he would have taken them [the juices] and thrown them like... so angry, with a face of rage,</i>
CA	<i>and I told him, 'but what's up with you?... but if you know, you know that I like women, and I will continue to like them',</i>
CA	<i>he told me 'no', and he was angry" (N2, EP 2, L 324-331)</i>

Three of the four participants, who had not disclosed, had hidden or denied their lesbian identity from their ex-male partner to avoid any possibility of losing the custody of their child(ren). Participants feared being manipulated or controlled by their ex-male partners as they thought they were in disadvantaged position within the Chilean lesbophobic legal context. Paula's story showed the fears Paula had about her children being taken away because she was a lesbian and how the children's father would be able to exercise his will and power in Chilean courts. Paula mentioned the case of Karen Atala (who lost custody of her children as mentioned above) to convey how restricted she felt in her local social context:

Lab	Clause
OR	Paula: <i>"My ex-husband didn't know about my inclination,</i>
CA	<i>and I always feared that he could realise and take away my children.</i>
EV	<i>At that time the case of Karen Atala was well known, then I lived with a great fear,</i>
RE	<i>so I had to live a double life" (N2, EP 2, L 22-25)</i>

Conveying Maternal Sexual Identity to the Children

As participants recognised their need to express their lesbianism, and from this began to build a lesbian relationship, they

started to re-think the way they conveyed their identity to their children. Participants' children had all been born in the context of a heterosexual, family, therefore participants needed to reformulate many aspects of themselves and their stories in order to come out to their children. This theme was fed by two sub-themes: "Avoiding the disclosure of lesbian relationships to the children" as often participants initially attempted to avoid disclosure only to find that they later began "Preparing the child for coming out as a lesbian mother."

Avoiding the Disclosure of Lesbian Relationships to the Children

Participants displayed two main strategies in concealing their same-gender relationships from their children. Firstly, each participant initially avoided disclosing her sexual identity to their children. Participants in all cases said they had subsequently presented their first female partner to their children as a "friend" in order to conceal their own sexual identity. It seems that within the Chilean lesbophobic context in which participants lived, being an open lesbian mother was not a possibility for them initially. Camila narrated an episode that showed how she presented her lesbian partner as friend to her daughter even when the three of them started to live together. Her account also illustrated how presenting her partner as friend necessitated Camila avoiding receiving or expressing affection from or to her partner:

Lab	Clause
CA	Camila: "and at some point, I didn't tell Fran [Camila's daughter] about it [that Camila was living with a female partner],
CA	it was like 'Marce is my friend, we sleep together, but she's my friend'...
OR	The flat had two bedrooms, one for the child and one for us, like now,
CA	and it wasn't like telling Fran, "look Francisca, Marce is my partner' I'm a lesbian."(...)
EV	But Fran, [was] a girl that after all was 2 or 3 years younger, some things [she] could understand and others things do not...
EV	we weren't affectionate between us in front of Fran, for the same reason, to avoid any conflict..." (N4, EP 2, L 609:615)

Secondly, it followed on from non-disclosure that some participants tried to hide their lesbian affective expressions, as was noted above in Camila's narrative. This strategy was closely associated with presenting a lesbian partner as "a friend." Both strategies contributed to concealing a participant's sexual identity from her children. Four participants (Teresa, Camila, Julia and Paula) explicitly reported attempts to hide lesbian affective expressions. Julia's account revealed why she opted to

hide affectionate expressions for her partner in front of her daughter: Julia had received this advice from the psychiatrist who she had been to see with her daughter's father. The following narrative passage illustrated how Julia conformed to conceal her affectionate expressions for her partner at this point in her life, mainly from Julia's continued concern to respect her ex-husband's wishes as in effect voiced by the professionals they had seen:

Lab	Clause
EV	Julia: "I found her [the psychiatrist] very prohibitive,
EV	like everything was abnormal, like I couldn't hold her hand [partner's hand] or
EV	I couldn't make visible any affection with my partner..." (N2, EP 3, L 157: 159)
CA	"she told me that we couldn't go to the beach together or
CA	that we couldn't sleep together, things like this...
EV	like prohibitive and restrictive" (N2, EP 3, L 165: 167)
RE	"I respected what she said anyway, because I went with my daughter's dad,
EV	and it has been very important to go to an specialist with him, either a psychiatrist or a psychologist..." (N2, EP 3, L 170: 171)

Julia's account also revealed that lesbianism was seen as something abnormal by others, in her case by a psychiatrist and that some family members were prepared to seek and also receive societal endorsement to enforce a heteronormative picture even if this was a facade. The pathologisation of homosexuality was a prejudice visible in all participants' accounts. As Julia did, other participants also heard that lesbian affectionate expressions were something inappropriate for children to see or hear about. Concealing any presentation of their lesbian identity from children also continued to fuel participants' concerns upon their own uncomfortable feelings about their lesbian identity. Thus, heteronormative expectations also pressured participants to avoid expressing their lesbian feelings or disclosing to their children.

Preparing the Child for Coming Out as a Lesbian Mother

Despite the pressure to conceal disclosure to their children remained a significant goal of participants' sexual identity life courses for reasons of authenticity but participants deemed it important prepare their children for any disclosure. One preparation strategy was the teaching of tolerance to their children (against the lesbophobic context). This strategy was identified in the narratives of six participants (Teresa, Julia, Paula, Jimena, Marcela, and Beatriz). Julia portrayed the strategy of teaching tolerance in her micro story concerning how she talked to her daughter in order to prepare her for disclosure:

Lab	Clause
AB	<i>Julia: "No, I don't [she had not disclosed], but I read tales to her every night,</i>
CA	<i>and many times I tell tales where tolerance is essential,</i>
EV	<i>tales that show family diversity, the rainbow and things like that,</i>
RE	<i>to make her know that she has to tolerate everyone, an Asian, a black person, an homosexual, anyone..."</i> (N2, EP 3, L 127: 131)
EV	<i>"I hope this [the disclosure] be as normal as possible for her [her child], the most natural thing,</i>
EV	<i>I want her to grow up with the tolerance impregnated in the blood..."("impregnada en la sangre" in Spanish)"</i> (N2, EP 3, L 508: 509)

Although only three participants (Camila, Paula, and Beatriz) had disclosed to their children at the time of their interviews, as other four interviewees (Teresa, Julia, Carla, and Jimena) planned to do this later. Only Marcela, still married, had not planned disclosing to her daughter because she feared negative consequences, as noted previously.

Paula narrated an episode about the time when she disclosed to her two sons and her daughter and how she had felt accepted by them. In the same narrative piece, Paula reported how previously she had felt fearful about the possibility of being rejected by her children. In particular, Paula noted that she felt afraid of her daughter's possible reaction, revealing Paula's ideas about gender impacting upon children's reactions her sexual identity disclosure. Paula carefully began her account by saying that she had prepared the children for "at least 2 years" before she told each of them individually. She implied that the lesbophobic context in which she and her children lived made it difficult for her in coming out as a lesbian mother:

Lab	Clause
EV	<i>Paula: "after many questions, I think at least for about 2 years,</i>
EV	<i>thinking about how telling them, and putting myself in the worst scenario of thinking how they would react,</i>
EV	<i>because although I had raised them alone, there is a social pressure, there are [sexual] prejudices that surround us,</i>
EV	<i>in the context, in the school, among friends, in the family, etc.</i>
EV	<i>you always have the fear of how they [the children] would react.</i>
EV	<i>One of those fears, the main was to be rejected by them, that they didn't love me,</i>
EV	<i>(...) in particular my daughter, that she didn't want to be touched by me... I was very afraid" (N2, EP 2, L 40:46)</i>
CA	<i>"However, when I decided to talk to each of them, I talked with them alone, I mean with each one,</i>
EV	<i>their response was amazing [because she felt accepted by them]..." (N3, EP 2, L 48:49)</i>

The disclosure to children was a challenging life course goal for participants, but not because of the participants' own transition to lesbian identity but the context of external prejudice. Participants thought that within Chilean society, a lesbian was not a good model for children, and feared that others' prejudices could impact their children's wellbeing.

DISCUSSION

The purpose of this study was to explore how sexual identity and motherhood were negotiated in the private and the public domains. We investigated the life course experiences of a group of Chilean LM who had conceived their children through a previous heterosexual relationship. We found that traditional family values and Christian religious beliefs played a significant role in the narrated stories of LM in Chile and that these were powerfully displayed by family of origin members when resisting their daughter's journey into lesbian motherhood yet family of origin mothers continued to play an important role in supporting their daughter's parenthood.

We found that Chilean LM undertook a long journey to reconcile with their own identities, and this was particularly hard for those LM who defined themselves as Catholic. Interestingly, the impact of the lesbian mother's own religious beliefs and values (or those held by her family of origin) on their own internalised lesbophobia appeared noticeably more pronounced among lesbian mothers from regions outside Santiago. This is a particular aspect of LM identity life course had not been described in previous studies with LM living in Latino countries, although Tuthill (2016) has identified a similar patterning among Catholic Hispanic LM living in the United States.

Another particular aspect of Chilean LM in the present study appeared to be the impact of Karen Atala's judicial case on some participants' fears of losing the custody of their children, something that has not been described in other studies with LM living in Latino countries. We neither observed that participants in our study lived in constant fear of being attacked as studies with Brazilian lesbian mothers have indicated (Pinheiro, 2006; Santos and Alves de Toledo, 2006) nor noted that Chilean lesbian mothers focused upon directing their children to avoid showing signs of affection for same-gender peers unlike Mexican lesbian mothers (Haces, 2006). Nevertheless, some participants in our study had feared physical violence on occasions or expressed some concern about how their child's behaviour might be interpreted by others. Our qualitative investigation, with a small non-randomly drawn sample, certainly precludes a definitive pronouncement regarding cross-cultural comparisons of lesbian motherhood.

Participants who had realised about their attraction to women during adolescent years considered this attraction as inconsistent with the socially expected heterosexuality as noted in other studies (Asencio, 2009; Jara and Araujo, 2011; Palma et al., 2012). Some of our participants tried to hide or deny their attraction to women to their parents (see also Acosta, 2010) because they feared the consequences of being seen as a lesbian by them. Participants often associated same-gender attraction

with anticipated “suffering,” “punishment,” and “rejection” which reflected the minority stress they experienced (Meyer, 2003). In our sample, participants’ parents’ heteronormative expectations and Christian beliefs and values underlay parental pressures. The association of heteronormativity with parental Christian religiosity in the socialisation of Latina lesbians also had been previously described by research conducted in the United States (Espín, 1987; Acosta, 2008, 2010; Asencio, 2009; Tuthill, 2016) and Chile (Herrera, 2007; Jara and Araujo, 2011).

All participants had become pregnant through having a heterosexual relationship. Then, the arrival of a child represented for most participants their reason for continuing the relationship with their male partner. Furthermore, participants’ parents’ expectations of heterosexual family formation, further supported participants’ attempts to maintain a “conventional” family. In a study with Puerto Rican lesbian migrants to the United States, Asencio (2009) also found that lesbians felt constrained by their family’s expectations to get married to a man and have children. Our study in a Chilean context has additionally emphasised how parental pressure can keep lesbians in a heterosexual marriage years after realising their love for another woman. This reflects how difficult it was for this group of Chilean LM to identify as a lesbian at that time, when the Chilean socio-legal context was considerably more restrictive than today.

Behind the themes in our data could be seen terrifying glimpses of Latino heteropatriarchal violence (Marcela’s father and Camila ex-male partner) and psychiatric oppression. Breaking the heterosexual relationship that they had previously built with their child(ren)’s father entailed significant challenges for participants. Those participants whose ex-male partner had acknowledged the participant’s lesbian identity reported only encountering adverse reactions from them. Further, finishing the heterosexual relationship brought the “destruction” of the heterosexual family life project they had built and also challenged the social approval of their parents. Thus, the process of separation was a long and painful process for most participants. Only two participants separated shortly after they acknowledged their lesbianism.

Another important goal for participants in this study was disclosing to significant others in their lives: their closest friends and their family of origin, in particular, their own parents. While all participants had disclosed to friends and had felt accepted by at least one of them, only half of the participants had disclosed to their parents. Participants’ narratives revealed that close friends were important for their own acceptance and lesbian identity affirmation and in the main they had encountered positive reactions from their friends which might have emboldened them. While some participants had received emotional support from heterosexual and non-heterosexual friends, others only had been open or had felt accepted by non-heterosexual gay or lesbian friends. One participant highlighted the importance of the emotional support she received from her non-heterosexual friends by describing them as “*the family one chooses*” or the “family of choice” as has been widely described in anthropological or sociological research on lesbian and gay families (Weston, 1991).

In contrast with participants’ friends’ mainly positive reactions, participants’ parents reacted in diverse ways. Of the four participants who had disclosed the sexual identity to their parents, three had felt in some respects still accepted by their parents (Lynch and Murray, 2000; Santos and Alves de Toledo, 2006). The other participant who had disclosed reported that her mother still rejected her lesbianism (Espín, 1987; Sánchez et al., 2004; Acosta, 2008, 2010; Asencio, 2009). Similarly, of those participants who had not deliberately disclosed their sexual orientation to their parents, three had encountered adverse reactions when their parents realised in other ways that their daughter was a lesbian. These participants stated that mothers were more active in stating their rejection of participants’ lesbianism than were fathers. One of the main strategies used by participants’ mothers was to avoid talking about, or acknowledging, any aspect of lesbian life with participants, yet participants knew that their mother was deeply upset and ashamed of their lesbian daughter or as Camila vividly described her mother as “crying in [the] corners” about it. Participants considered that their mothers used this strategy to try to render lesbianism as something that did not exist, did not happen, or make it invisible – to not mention it and carry on as normal. Acosta (2008), in her study with Latina lesbians, also found that some families tried to erase non-heterosexuality by using control and manipulation tactics. Interestingly, the four participants whose parents had rejected their lesbianism conveyed that religious values were held by their family of origin and that these were associated their family objections (see also Acosta, 2010; Jara and Araujo, 2011).

Despite parents’ negative attitudes toward their daughter’s lesbianism, all participants were still in contact with their family of origin and had received emotional support from their parents in other respects (Lynch and Murray, 2000; Sánchez et al., 2004; Jara and Araujo, 2011). Some participants also continued to receive help for childrearing or economic support from their parents. Even though most participants lived independently from their parents they continued to live close by, and their lives were intertwined (Lynch and Murray, 2000; Swainson and Tasker, 2005). For example, Camila’s mother, who was now silent on her daughter’s lesbianism, was regularly helping Camila out with childcare. Thus, parents continued to be an essential source of support for participants and this continued support probably weighed heavily in participants continued thinking about how to live as a lesbian mother. Previous studies with Latina lesbians also found that Latino families do not necessarily expel their daughter from the family circle (Espín, 1987; Acosta, 2008, 2010; Asencio, 2009) and the finding from our study give further insight into the complex working of acceptance and support in Latino families. The strong support participants received from their family of origin suggest that closeness and loyalty of Latino families, often described as *familismo*, possibly contributed to the wellbeing of participants despite the level of minority stress they experienced from their families (Ayón et al., 2010).

Participants initially avoided disclosing her sexual identity to their children and then displayed different strategies in conveying their same-gender relationships to their children. Thus, participants had introduced their first female partner to

their children as a “friend” and then avoided any demonstration of affection with their partner. However, some of our participants were teaching tolerance to their children with a view to preparing them for disclosure (Mitchell, 1998; Gartrell et al., 2000; Jara and Araujo, 2011). Again, our findings here are similar to findings in Jara and Araujo’s (2011) study in which some Chilean LM initially presented their lesbian partner as a friend to their children. Research studies conducted with Latina lesbians (Acosta, 2010) and LM (Palma et al., 2012) also have revealed that lesbians usually presented their same-gender partner as friends to their families. Those participants who had disclosed their sexual identity to their children, reported having felt accepted by them (Jara and Araujo, 2011). Some participants had decided to delay disclosure to their children following the advice of friends, their own beliefs regarding non-heterosexual disclosure, or the advice of a therapist.

Following a life course theoretical analysis (Allen and Henderson, 2016), it seemed that despite participants’ first attempts to conceal or hide their sexual orientation, most of them were able to subvert social forces that constrained them in identifying as a lesbian while being a mother. This indicates the crucial role of human agency (Allen and Henderson, 2016) in enabling participants to choose for their own life course pathway despite the lesbophobic and restrictive legal context in which they lived (Babbitt, 2013). Additionally, it seemed that acceptance from significant others, such friends and their own children, and latterly parental (mainly maternal) support helped to participants’ own self-acceptance and identity affirmation, revealing the powerful weight of interdependence and linked lives in shaping a lesbian identity pathway.

Strengths, Limitations, and Recommendations

This study provided an insightful understanding of the family life of Chilean LM post heterosexual relationship dissolution. A case-centred (Riessman, 2010) or the idiographic methodological approach contributed to this accomplishment as well as the careful selection of a homogeneous sample within which to explore a distinctive range of factors. As Smith and Osborn (2008) have noted, purposive and homogeneous sampling can allow for a detailed examination of participants’ accounts.

The findings of this study might have a limited generalisability and might be less applicable for Chilean LM who do not fit with features of the samples selected. Based on this limitation, it would be worth conducting research with LM who have children in the context of a lesbian relationship, and those who identify as working-class women. It may also be relevant to examine the experiences of children of Chilean LM and the extent to which they are exposed to discrimination and how such negative social forces might impact on children’s well-being.

The findings of this study also represented the narratives of lesbian motherhood within a particular socio-historical time and context. Thus, future generations of LM might encounter different experiences over their life courses by navigating in changing social contexts. The Chilean legal context is changing, and it is more supportive of LGBTQ people than at the time of the interview. Indeed, same-sex civil parenthood has already

been approved in Chile after our study was conducted. However, same-gender couples still encounter many legal restrictions in Chile. Additionally, narratives of lesbian motherhood might be substantially different in other Latino countries. Yet, considering the impact of heteronormativity and religious beliefs and values on the family life of Chilean LM, the findings of this study might also be applicable in Latino countries or indeed elsewhere when a strong influence of Christian Churches on gender, sexual and family values exists.

Clinical psychologists and social workers working with LG parents should help LM to become aware of the impact of internalised lesbophobia on their family decisions, plans, and/or expectations. Social and/or emotional support might help LM to cope with enacted or subtle forms of sexual stigma presented in Chilean society. Children of LM might also benefit if their mothers acknowledge the importance of family and community support in coping with an oppressive social context. It would also be worthwhile to train school teachers or health care providers about the impact of either discrimination or support on the family life of LM and their children.

CONCLUSION

The findings of this study have revealed the strong impact of lesbophobia on the life course experiences of LM living in Chilean society. Enacted forms of sexual stigma (Herek et al., 2009) seemed to be marginal in participants’ narratives. However, the lesbophobic context exerted a substantial influence on what LM felt they could reasonably do, revealing how participants had internalised the lesbophobia from Chilean society. Furthermore, anticipated discrimination of their children seemed to be a major concern for LM in this study. Nevertheless, despite LM’s concerns relating to the anticipated discrimination of their children, no participant in this study reported that their child had encountered experiences of discrimination. Additionally, all the participants reported at least one experience of acceptance by a significant other such as a family member or friend, revealing the polarisation of participants’ experiences and/or expectations, and the tensions between oppressive and supportive social forces.

DATA AVAILABILITY STATEMENT

The datasets presented in this article are not readily available because participants signed a consent protecting their privacy, and only pseudonymized extracts of transcriptions were authorised to be published. Requests to access the datasets should be directed to victor.figuerola@uniacc.cl.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Departmental Ethics Committee, Department of Psychological Sciences, Birkbeck University of London. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

VF contributed the literature review, data collection, and analysis. Both authors contributed equally to the design of the work, the drafting, and revising of the manuscript.

FUNDING

This study was funded by a scholarship program of CONICYT Chile, Becas Chile, to complete a doctoral research at Birkbeck University of London.

REFERENCES

- Acosta, K. L. (2008). Lesbians in the borderlands: shifting identities and imagined communities. *Gender Soc.* 22, 639–659. doi: 10.1177/0891243208321169
- Acosta, K. L. (2010). “How could you do this to me?”: how lesbian, bisexual, and queer latinas negotiate sexual identity with their families. *Black Women Gender Fam.* 4, 63–85. doi: 10.5406/blacwomegendfami.4.1.0063
- Akerlund, M., and Cheung, M. (2000). Teaching beyond the deficit model: Gay and lesbian issues among African Americans, Latinos, and gay Asian Americans. *J. Soc. Work Educ.* 36, 279–293. doi: 10.1080/10437797.2000.10779008
- Allen, K. R., and Henderson, A. C. (2016). *Family Theories: Foundations and Applications*. West Sussex: John Wiley and Sons, Inc.
- Asencio, M. (2009). Migrant puerto rican lesbians: negotiating gender, sexuality, and ethnonationality. *NWSA J.* 21, 1–23. doi: 10.2307/20628192
- Ayón, C., Marsiglia, F. F., and Bermudez–Parsai, M. (2010). Latino family mental health: exploring the role of discrimination and familismo. *J. Commun. Psychol.* 38, 742–756. doi: 10.1002/jcop.20392
- Babbitt, L. G. (2013). An intersectional approach to black/white interracial interactions: the roles of gender and sexual orientation. *Sex Roles* 68, 791–802. doi: 10.1007/s11199-011-0104-4
- Bozon, M., Gayet, C., and Barrientos, J. (2009). A life course approach to patterns and trends in modern Latin American sexual behavior. *J. Acquir. Immune Defic. Syndr.* 51(Suppl. 1), 4–12. doi: 10.1097/QAI.0b013e3181a2652f
- Bruner, J. (1987). Life as narrative. *Soc. Res.* 54, 11–32. doi: 10.2307/40970444
- Cadem (2018). *Encuesta Cadem N° 217*. Available online at: <https://www.cadem.cl/wp-content/uploads/2018/03/Track-PP-217-Mar-S2-VF.pdf>
- Cárdenas, M., Barrientos, J., Meyer, I., Gómez, F., Guzmán, M., and Bahamondes, J. (2018). Direct and indirect effects of perceived stigma on posttraumatic growth in gay men and lesbian women in Chile. *J. Traum. Stress* 31, 5–13. doi: 10.1002/jts.22256
- Centro de Estudios Públicos (2018). *Estudio Nacional de Opinión Pública, Octubre–Noviembre 2018*. Santiago: Centro de Estudios Públicos.
- Cohler, B. J. (2005). Life course social science perspectives on the GLBT family. *J. GLBT Family Stud.* 1, 69–95. doi: 10.1300/J461v01n01_06
- Contardo, O. (2011). *Raro, Una Historia Gay de Chile*. Santiago: Editorial Planeta.
- Coronil, F. (2015). “Latin American postcolonial studies and global decolonization,” in *Postcolonial Studies: An Anthology*, ed. P. K. Nayar (Malden, MA: John Wiley and Sons), 221–240. doi: 10.1017/ccol0521826942.012
- Elder, G. H. (1998). The life course as developmental theory. *Child Dev.* 69, 1–12. doi: 10.2307/1132065
- Espín, O. (1987). “Issues of identity in the psychology of Latina lesbians: explorations and challenges,” in *Lesbian Psychologies*, ed. Boston Lesbian Psychology Collective (Urbana, IL: University of Illinois Press), 35–51.
- Figuerola, V., and Tasker, F. (2014). “I always have the idea of sin in my mind. . . .”: family of origin, religion, and Chilean young gay men. *J. GLBT Family Stud.* 10, 269–297. doi: 10.1080/1550428X.2013.834424
- Figuerola, V., and Tasker, F. (2019). “No, We’re not culturally ready for that yet”: chilean heterosexual women’s discourses on lesbian and gay parenting. *Psykhé* 28, 1–15. doi: 10.7764/psykhé.28.2.1505

ACKNOWLEDGMENTS

We wish to thank all of the participants who generously took part in this study and gave us their time by sharing their stories, experiences and thoughts. We would like to express our deep gratitude to the two Chilean LGBTQ organisations that supported the recruitment and data collection process: MOVILH and Iguales. Our appreciation is also extended to the researchers who generously and carefully audited the analyses: Paulina Reyes from the Universidad del Desarrollo and Irene Salvo from the Universidad Alberto Hurtado.

- Fogaça, L., Sandrine, P., and Nardi, H. (2011). From the closet to the shield: women’s strategies to fight against homophobia and heterosexism. *Polis Psique* 1, 112–139.
- Gartrell, N., Banks, A., Reed, N., Hamilton, J., Rodas, C., and Deck, A. (2000). The National lesbian family study: 3. Interviews with mothers of five-year-olds. *Am. J. Orthopsychiatry* 70, 542–548. doi: 10.1037/h0087823
- Gergen, M. (2010). “Qualitative inquiry in gender studies,” in *Handbook of Gender Research in Psychology*, eds J. Chrisler and D. McCreary (London: Springer), 103–132. doi: 10.1007/978-1-4419-1465-1_6
- Golombok, S. (2015). *Modern Families Parents and Children in New Family Forms*. Cambridge: Cambridge University Press.
- Guthrie, S. R. (2005). “Following the straight and narrow”: an exploratory study of lesbophobia and eating disorder symptomatology among lesbian athletes. *Women Sport Phys. Act. J.* 14, 6–23. doi: 10.1123/wspaj.14.1.6
- Haces, M. (2006). *¿Maternidad Lésbica, Paternidad Gay? Del Autorreconocimiento Homoerótico al Ejercicio Parental. Una Aproximación Antropológica a las Homofamilias*. Doctoral Thesis, Centro de investigaciones y Estudios superiores en Antropología social, Ciudad de México.
- Hammack, P. L. (2008). Narrative and the cultural psychology of identity. *Pers. Soc. Psychol. Rev.* 12, 222–247. doi: 10.1177/1088868308316892
- Hammack, P. L., and Cohler, B. J. (2009). *The Story of Sexual Identity Narrative Perspectives On the Gay and Lesbian Life Course*. Oxford: Oxford University Press.
- Herek, G. M., Gillis, J. R., and Cogan, J. C. (2009). Internalized stigma among sexual minority adults: Insights from a social psychological perspective. *J. Counsel. Psychol.* 56, 32–43. doi: 10.1037/a0014672
- Herrera, F. (2007). Construcción de la identidad lésbica en Santiago de Chile. *Universum* 22, 151–163. doi: 10.4067/S0718-23762007000200010
- Herrera, F. (2009). Tradition and transgression: lesbian motherhood in Chile. *Sex. Res. Soc. Policy* 6, 35–51. doi: 10.1525/srsp.2009.6.2.3
- Hollway, W., and Jefferson, T. (2013). *Doing Qualitative Research Differently: A Psychosocial Approach*. Thousand Oaks, CA: SAGE.
- Htun, M. (2003). *Sex and the State: Abortion, Divorce, and the Family Under Latin American Dictatorships and Democracies*. New York, NY: Cambridge University Press.
- Instituto de Investigación en Ciencias Sociales (2014). *Religión y Política en Chile: Tendencias Encuesta Nacional UDP 2005–2015*. Santiago: Universidad Diego Portales.
- Instituto de Investigación en Ciencias Sociales (2015). *Encuesta Nacional UDP 2005–2015. (Capítulo 5)*. Santiago: Universidad Diego Portales.
- Jara, M., and Araujo, K. (2011). *Nuevas Configuraciones Familiares en la Sociedad Chilena. La Familia Lesboparental, Escenarios de Constitución y Producción Subjetiva*. Ph. D. Thesis, Universidad Academia de Humanismo Cristiano, Santiago.
- Labov, W. (1972). *Language in the Inner City: Studies in the Black English Vernacular*. Philadelphia: University of Pennsylvania Press.
- Libson, M. C. (2012). Parentalidades gays y lesbianas. Varones y mujeres en familias no heteronormativas. *La Ventana* 35, 292–321.

- Lubbe, C. (2013). "LGBT parents and their children: non-western research and perspectives," in *LGBT-Parent Families*, eds A. E. Goldberg and K. R. Allen (New York: Springer), 209–223. doi: 10.1007/978-1-4614-4556-2_14
- Lynch, J. M., and Murray, K. (2000). For the love of the children. *J. Homosex.* 39, 1–24. doi: 10.1300/J082v39n01_01
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychol. Bull.* 129, 674–697. doi: 10.1037/0033-2909.129.5.674
- Meyer, I. H., and Dean, L. (1998). "Internalized homophobia, intimacy, and sexual behavior among gay and bisexual men," in *Stigma and Sexual Orientation: Understanding Prejudice Against Lesbians, Gay Men, and Bisexuals*, ed. G. M. Herek (Thousand Oaks, CA: Sage), 160–186. doi: 10.4135/9781452243818.n8
- Mitchell, V. (1998). The birds, the bees... and the sperm banks: how LM talk with their children about sex and reproduction. *Am. J. Orthopsychiatry* 68, 400–409. doi: 10.1037/h0080349
- Muñoz-Laboy, M. A. (2008). Familism and sexual regulation among bisexual Latino Men. *Arch. Sex. Behav.* 37, 773–782. doi: 10.1007/s10508-008-9360-y
- Murray, M. (2008). "Narrative psychology," in *Qualitative Psychology: A Practical Guide to Research Methods*, ed. J. A. Smith (London: SAGE Publications), 111–132.
- Nardi, H. C., Silveira, R. S., and Machado, P. S. (2013). *Diversidade Sexual, Relações de Gênero e Políticas Públicas*. Porto Alegre: Sulina.
- Núñez, A., Gozález, P., Talavera, G. A., Sanchez-Johnsen, L., Roesch, S. C., Davis, S., et al. (2016). Machismo, marianismo, and negative cognitive-emotional factors: findings from the hispanic community health study/ study of Latinos sociocultural ancillary study. *J. Latinx Psychol.* 4, 202–217. doi: 10.1037/lat0000050
- Oswald, R. F., Blume, L. B., and Marks, S. R. (2005). "Decentering heteronormativity: a model for family studies," in *Sourcebook of Family Theory and Research*, eds V. Bengtson, A. Acock, K. Allen, P. Dilworth-Anderson, and D. Klein (Thousand Oaks, CA: SAGE Publications, Inc.), 143–165. doi: 10.4135/9781412990172.n6
- Palma, Y. A., Strey, M. N., and Krügel, G. (2012). ¿Mami. y mami? Los relatos de las familias homomaternales. *Revist. Iberoam. Psicol. Ciencia Tecnol.* 5, 81–90.
- Patterson, C. J., and Riskind, R. G. (2010). To be a parent: issues in family formation among gay and lesbian adults. *J. GLBT Family Stud.* 6, 326–340. doi: 10.1080/1550428X.2010.490902
- Peña, J. (2017). *Los Argumentos de la Suprema en el Fallo Que le Otorgó el Cuidado de Dos Hermanos a Pareja Gay*. Available online at: <http://www.emol.com/noticias/Nacional/2017/08/08/870223/Los-argumentos-de-la-Corte-Suprema-en-el-fallo-que-otorgo-el-cuidado-de-dos-hermanos-a-hombre-con-pareja-del-mismo-sexo.html> (accessed March 1, 2018).
- Pew Research Center (2013). *The Global Divide on Homosexuality. Greater Acceptance in More Secular and Affluent Countries*. Washington, DC: Pew Research Center.
- Pinheiro, C. (2006). "Uma família de mulheres": ensaio etnográfico sobre homoparentalidade na periferia de São Paulo. *Estudos Feministas* 14:535. doi: 10.1590/S0104-026X2006000200013
- Riessman, C. K. (2008). *Narrative Methods for the Human Sciences*. Los Angeles: Sage Publications.
- Riessman, C. K. (2010). "What's different about narrative inquiry? Cases, categories and contexts," in *Qualitative Research*, ed. D. Silverman (London: SAGE Publications), 310–330.
- Sánchez, Á., Espinosa, S., Ezcurdia, C., and Torres, E. (2004). Nuevas maternidades o la desconstrucción de la maternidad en México. *Debate Feminista* 30, 55–86.
- Santos, C., and Alves de Toledo, M. (2006). *A Homoparentalidade Em Questão: A Voz De Gays E Lésbicas Com Filhos*. Available online at: <http://www.redalyc.org/resumen.oa?id=357735505007> (accessed July 24, 2016)
- Smith, J. A. (2008). *Qualitative Psychology: A Practical Guide to Research Methods*. Thousand Oaks, CA: SAGE Publications.
- Smith, J. A., and Osborn, M. (2008). "Interpretative phenomenological analysis," in *Doing Social Psychology Research*, 2nd Edn, ed. G. M. Breakwell (London: SAGE Publications), 53–80. doi: 10.1002/9780470776278.ch10/summary
- Swainson, M., and Tasker, F. (2005). Genograms redrawn. Lesbian couples define their families. *J. GLBT Family Stud.* 1, 3–27. doi: 10.1300/J461v01n02_02
- Tasker, F., and Patterson, C. J. (2007). Research on gay and lesbian parenting. Retrospect and prospect. *J. GLBT Family Stud.* 3, 9–34. doi: 10.1300/J461v03n02_02
- Tasker, F., and Rensten, K. (2019). "Social science research on heterosexual relationship dissolution and divorce where one parent comes out as LGB," in *LGBTQ Divorce and Relationship Dissolution: Psychological and Legal Perspectives and Implications for Practice*, eds A. E. Goldberg and A. Romero (Oxford: Oxford University Press).
- Tuthill, Z. (2016). Negotiating religiosity and sexual identity among hispanic LM. *J. Homosex.* 63, 1194–1210. doi: 10.1080/00918369.2016.1151691
- Uribe, J. (2014). Paternidad y maternidad en hombres y mujeres con prácticas homoeróticas. *Trabajo Soc. Problemas Soc.* 16, 111–126.
- Weston, K. (1991). *Families We Choose: Lesbians, Gays and Kinship*. New York, NY: Columbia University Press.
- World Values Survey (2020). *Official Data File*. Stockholm: World Values Survey.

Conflict of Interest: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Copyright © 2020 Figueroa and Tasker. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

Advantages of publishing in Frontiers



OPEN ACCESS

Articles are free to read
for greatest visibility
and readership



FAST PUBLICATION

Around 90 days
from submission
to decision



HIGH QUALITY PEER-REVIEW

Rigorous, collaborative,
and constructive
peer-review



TRANSPARENT PEER-REVIEW

Editors and reviewers
acknowledged by name
on published articles

Frontiers

Avenue du Tribunal-Fédéral 34
1005 Lausanne | Switzerland

Visit us: www.frontiersin.org

Contact us: frontiersin.org/about/contact



REPRODUCIBILITY OF RESEARCH

Support open data
and methods to enhance
research reproducibility



DIGITAL PUBLISHING

Articles designed
for optimal readership
across devices



FOLLOW US

@frontiersin



IMPACT METRICS

Advanced article metrics
track visibility across
digital media



EXTENSIVE PROMOTION

Marketing
and promotion
of impactful research



LOOP RESEARCH NETWORK

Our network
increases your
article's readership