Lesbian and Gay Parents and their Children: A Social Science Perspective

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At the current moment in history, the extent to which relationships among lesbian and gay parents and their children are recognized in law or respected in practice is in tremendous flux. For many years, the family relationships of lesbian and gay parents and their children were not legally recognized in most parts of the United States, or in most countries of the world. Today, these relationships are recognized in some jurisdictions, and the matter is under active debate in others. With regard to the social and legal status of lesbian and gay relationships, we are living in a time of tremendous and rapid change.

In view of the rapidly shifting legal and policy environments, my aims in this chapter are threefold. First, I hope to summarize the current status of legal and policy issues as well as conceptual and theoretical issues relevant to lesbian and gay parents and their children in the United States today. Second, I hope to provide an overview of research evidence about these families, with special emphasis on the development of children living within them. This overview will emphasize work I have undertaken in this area with colleagues and students over the last 15 years, but will also seek to place this work in the context of related research. Finally, I hope to summarize the implications of research findings for both theoretical concerns relevant to our conceptualizations of human socialization, and for practical concerns relevant to law and family policy.

Current Contexts of Sexual Minority Family Lives

Lesbian and gay parents and their children in the United States today are the subjects of considerable controversy. Thus, an overview of the legal and policy contexts in which these families live in the United States today will be a useful tool for understanding their situations. In this section, we consider very briefly the legal status of lesbian and gay parents and their children, with regard to legal recognition of couple relationships, child custody and visitation, adoption and foster care.
Legal Status of Lesbian and Gay Parents and their Children

Consideration of the legal status of lesbian and gay parents and their children involves three interrelated areas of law. The first involves legal recognition of same-sex couple relationships, which may take the form of marriage, civil union, or domestic partnership. The second involves the status of parental sexual orientation in disputes about custody of and visitation with minor children. The third involves the role of parental sexual orientation in adoption and foster care proceedings. Our review of the legal situation of lesbian and gay parents in different jurisdictions within the United States reveals a patchwork of varied legal arrangements and shows how rapidly situations are changing in many parts of the country.

Legal Recognition of Same-Sex Couples

Although the right to marry and the right to rear children as one sees fit are regarded by American law as fundamental, these rights have not been extended to lesbian or gay Americans. The rights to marry (Loving v. Virginia, 1967), to procreate (Skinner v. Oklahoma, 1942), and to rear children (Meyer v. Nebraska, 1923) have long been held by the United States Supreme Court to be fundamental, and as such, have been seen as guaranteed by the Constitution. However taken for granted these rights may be by the majority of Americans, they have often been denied to lesbian and gay Americans (Herek, 2006).

At the time of this writing, legal recognition of same-sex marriage has occurred in only one jurisdiction within the United States. Even in Massachusetts, where same-sex couples now have their marriages recognized under state law, they nevertheless must struggle with the fact that their marriages are not recognized under federal law. Under the mandates of the oddly named Defense of Marriage Act, same-sex marriages that are entirely legal in Massachusetts are not recognized at all in federal law. For this reason, same-sex couples are still subject to discrimination in taxation, social security, immigration, veterans’ benefits, and a host of other areas. In short, although a same-sex couple may be legally married in Massachusetts, they are not legally married in any other state, nor are they legally married under federal law.

In other states, civil unions or domestic partnerships may provide some or all of the rights and responsibilities of marriage under state (but again, not under federal) law. For instance, same-sex couples may undertake civil unions in Vermont, Connecticut, New Jersey, and New Hampshire. Same-sex couples may register domestic partnerships in California, Maine, Oregon, Washington, and the District of Columbia. They may also register as reciprocal beneficiaries in Hawaii. In some states, such as Vermont, many state-level rights and responsibilities accrue to those in civil unions or domestic partnerships; in other states, such as Maine, fewer rights and responsibilities are entailed. At the time of this writing, a number of cases are in the courts. In many states, the legal situation for same-sex couples is in rapid flux (Herek, 2006).

Child Custody and Visitation Involving Lesbian Mothers and Gay Fathers

The extent to which a parent’s sexual identity is considered relevant in deciding a child’s best interest, for purposes of child custody and visitation, varies from state to state. In many states, parental sexual orientation is considered relevant to custody and visitation disputes only if it can be shown to have an adverse impact on the child. Before parental sexual orientation can be considered as a factor relevant to the child’s best interests, in these states, a connection, or nexus, must be demonstrated between a person’s sexual orientation, on the one hand, and a negative outcome for the child, on the other. For instance, in S.N.E. v. R.L.B. (1985), an Alaska court awarded custody to a lesbian mother, noting that there was “no suggestion that [her sexual orientation] has or is likely to affect the child adversely.” Similar rulings have emerged recently in a number of states. For instance, in a Maryland visitation case (Boswell v. Boswell, 1998), the court refused to limit children’s visitation with their gay father in the presence of his same-sex partner because there was no evidence of harm to the children from such visitation.

At the other end of the spectrum, some states have in place presumptions against lesbian or gay parents. Even though these may not any longer rise to the level of per se rule against parental fitness among lesbian and gay adults, they may nevertheless remain influential. In the Bottoms v. Bottoms (1995) case, for example, the Virginia Supreme Court reiterated its earlier holding that a lesbian mother is not per se unfit, but included the mother’s sexual orientation among factors considered to make her an undesirable parent (Bottoms v. Bottoms, 1995, p. 108).

The legal standards for custody in a number of states fall somewhere between these two extremes. In one recent case (Burgess v. Burgess, 1999), the Indiana Supreme Court denied a gay father’s request for review of a lower court’s decision that denied him custody of his son. Indiana law does not allow parental sexual orientation to be considered as a determinative factor in placement of a child, but the court noted in its decision that the father’s sexual orientation “raises the specter of an aberrant lifestyle” (Burgess v. Burgess, 1999). In another recent North Carolina case, a gay father was denied custody of his two sons because of the court’s concern about his long-term relationship with a male partner, who was helping to care for the boys (Pulliam v. Smith, 1998). Despite legal progress in many states, child custody and visitation for lesbian and gay parents after the break-up of heterosexual marriages continue, in some jurisdictions, to be adjudicated in an atmosphere of antigay prejudice.

Adoption and Foster Care

Legal adoptions of minor children by lesbian and gay adults can be seen as falling into one of two types (Patterson, 1995c). When biological parents are unable or unwilling to care for a child, and an adoptive parent who is not related to the biological
parents offers to provide that child with a home, the result is called a stranger adoption. In such cases, the courts dissolve existing legal bonds, and create a new legal relationship between the child and the adoptive parent. Second-parent adoptions are pursued by lesbian and gay couples who raise a child together, although only one member of the couple — the biological parent or legal adoptive parent — is viewed as a parent in law. These couples seek legal recognition of the relationship between the other parent and the child. In recent years, both types of adoptions have been completed by openly lesbian and gay individuals in the United States (Polikoff, 1990; Patterson, 1995c).

Like laws on custody and visitation, those governing adoption vary considerably across the states (Patterson, 2007). At the time of this writing, adoption of minor children by lesbian or gay adults is specifically barred by statute in Arkansas, Florida, Mississippi, and Utah. New Hampshire had a statute barring lesbian and gay individuals from becoming adoptive parents until recently, but the Legislature repealed it in 1999. In other states, such as New York and Massachusetts, the law allows adoptions by openly lesbian and gay prospective adoptive parents. For example, in a landmark New York second-parent adoption case, In re Adoption of Evan (1992), the court noted that “the fact that the petitioners here maintain an open lesbian relationship is not a reason to deny adoption... A parent’s sexual orientation or sexual practices are presumptively irrelevant...” (In re Adoption of Evan, 1992, pp. 1001–1002).

Even though state adoption laws vary, both stranger adoptions and second-parent adoptions by openly lesbian and gay adults have occurred in numerous jurisdictions. Openly lesbian or gay adults have completed stranger adoptions in many states, including California, Ohio, and the District of Columbia. Many more strange adoptions have no doubt been accomplished by lesbian or gay adults in other states without their sexual orientation becoming a topic of public discussion. Second-parent adoptions have been granted in 17 states and in the District of Columbia. State supreme courts in Massachusetts, Vermont, and Wisconsin have ruled on the legality of second-parent adoptions, and two of the three — Massachusetts (Adoption of Tammy, 1993) and Vermont (Adoptions of B.L.V.B. & E.L.V. B., 1993) have affirmed them.

Summary

Across the United States today, the legal and policy landscape for lesbian and gay parents and their children is remarkably varied. At one end of the spectrum, in a state such as Massachusetts — in which same-sex marriage is legally recognized, in which parental sexual orientation is considered irrelevant to child custody and visitation proceedings, and in which the State Supreme Court has affirmed the legality of second-parent adoptions — the legal climate for lesbian and gay parents and their children is generally positive. At the other end of the spectrum, in a state such as Virginia — in which same-sex marriages are not recognized by the law, in which lesbian and gay parents are disadvantaged in custody and visitation proceedings by negative presumptions about their parental fitness, and in which second-parent adoptions have not yet been reported — the legal atmosphere for lesbian and gay parents and their children is less desirable. Although the pace of change may vary from state to state, the direction of movement over time during the last 50 years is clearly toward provision of greater legal recognition of the many different family types formed by lesbian and gay adults.

Theoretical Issues Relevant to Lesbian and Gay Parents and their Children

Theories of psychological development have traditionally emphasized distinctive contributions of both mothers and fathers to the healthy personal and social development of their children. As a result, many theories predict negative outcomes for children who are raised in environments that do not provide these two kinds of inputs. An important theoretical question thus concerns the extent to which such predictions are sustained by results of research on children of gay and/or lesbian parents.

For instance, psychoanalytic theory places heavy weight on the Oedipal drama, in which children experience very different reactions to their mothers and to their fathers (Bronfenbrenner, 1960). From the psychoanalytic perspective, healthy psychological development is believed to require the child’s eventual resolution of Oedipal issues. Factors which inhibit or distort this process are therefore thought to be detrimental to the child’s development. Some writers in the psychoanalytic tradition (e.g., Chodorow, 1978) also emphasize different influences of male and female parents in the socialization of children. From psychoanalytic perspectives, then, when one or more parents are either absent and/or homosexual oriented, disruptions of personality development for their children could be anticipated.

From the point of view of social learning approaches to personality development (e.g., Huston, 1983), children are seen as learning distinctive lessons from the examples and the rewards offered by both male and female parents. For example, fathers are thought to model and reward masculine behavior among sons, and mothers to model and reward feminine behavior among daughters. Predictions based on social learning suggest negative outcomes for children brought up in families that do not provide conventional models or rewards for the acquisition of sexual identities.

There have been significant challenges to these theoretical positions, especially from cognitive developmental theory (Kohlberg, 1966) and from gender schema theory (Bem, 1983), neither of which in principle requires that a child’s home environment include both heterosexual male and heterosexual female parents in order to support favorable development. Advocates of cognitive developmental and gender schema theory have not, however, discussed the assumption that children’s development is best fostered in families that contain both male and female parents, nor have they challenged the premise that development is optimal in families where the parents are heterosexual.
In short, psychoanalytic and social learning theories of personal and social development during childhood emphasize the importance of children having both heterosexual male and heterosexual female parents, and they predict generally negative outcomes for children whose parents do not exemplify these qualities. Although cognitive developmental theory and gender schema theory do not require such assumptions, proponents of these views have not challenged them. As a result, these perspectives on individual differences in personal and social development are commonly believed to predict difficulties in development among children of lesbian and gay parents. Empirical research with such children thus provides an opportunity to evaluate anew these theoretical assumptions.

Social Science Research on Lesbian and Gay Parents and their Children

How do the results of social science research address legal and policy issues raised by child custody, visitation, and adoption by lesbian and gay parents? And how do they bear on the theoretical issues? In this section, we provide an overview of studies focused on children of lesbian and gay parents. For other recent reviews of this material, see Patterson (2000, 2005, 2006), Perrin (2002), Stacey and Biblarz (2001) and Tasker and Patterson (2007).

Early Research

The most visible group of nonheterosexual parents may be lesbian mothers. Many lesbian mothers conceived and gave birth to children within the context of heterosexual relationships, but assumed a lesbian identity later in life (Kirkpatrick, 1996). More recently, observers have commented upon the growing numbers of women who have chosen to have children after assuming a lesbian identity, and this trend has sometimes been referred to as a "lesbian baby boom" (e.g., Patterson 1994; Weston, 1991). Similar trends can be observed among gay fathers, but perhaps because of their prominence in child custody cases (Patterson, Fulcher, & Wainright, 2002), lesbian mothers have generally drawn more attention from researchers.

To determine if being reared by lesbian parents results in different outcomes for children, as has often been assumed in the legal system, researchers designed studies that examined the social and personality development of such children. A few studies have focused on the normative development of children born to or adopted by women who already identified as lesbians (Flaks, Fischer, Masterpasqua, & Joseph, 1995; Gartrell et al., 1996, 1999; Gartrell, Banks, Reed, Hamilton, & Deck, 2000; Gartrell, Deck, Rodas, Peyser, & Banks, 2005; McCandlish, 1987; Patterson, 1995a,b; Patterson, Hurt, & Mason, 1998; Steckel, 1987). Overall, these studies indicated that children of lesbian mothers were developing much like children of heterosexual mothers.

Similarities were revealed between the children of lesbian and heterosexual parents across a wide array of assessments of cognitive and behavioral functioning (Patterson, 2002; Perrin, 2002). More recently, Gartrell and colleagues (1996, 1999, 2000, 2005) have analyzed data from a longitudinal study of 84 lesbian-headed families who conceived their children via donor insemination. By the age of five, they reported that the children were developing normally; and in most cases, both parents were actively involved in the child's upbringing (Gartrell et al., 2000). These findings provide valuable information about the development of children born to lesbian mothers, as well as about the adjustment of such families over time, yet many questions remain in need of study.

One important issue concerns parental division of family labor and partners' satisfaction with their division of labor. In many families headed by heterosexual couples, mothers are responsible for the bulk of household and child-care labor (Cowan & Cowan, 1992). Lesbian couples, on the other hand, are more likely to report dividing household and child-care labor equally between partners (Kurdek, 1993; Peplau, Veniegas, & Campbell, 1996). Lesbian couples also report generally high satisfaction with division of labor arrangements in their households (Flaks et al., 1995; Koepeke, Hare, & Moran, 1992). If lesbian couples with children maintain equal division of labor, and if they are satisfied with these arrangements, then parents' satisfaction with these arrangements may be associated with positive outcomes for their children.

Another important issue concerns the nature and extent of children's social networks. In particular, grandparents can contribute to the healthy development of their grandchildren on many levels, both directly and indirectly. Until recently very little information has been available about the social networks of lesbian mothers and their children (Allen & Demo, 1995; D’Augelli & Patterson, 1995; Laird 1993; Patterson, 1998). In the absence of research, it has sometimes been assumed that lesbians may be estranged from their families of origin. For instance, informal reports suggest that grandparents may be less likely to remain in contact with children being reared by lesbian daughters as compared to those being reared by heterosexual daughters (Patterson, 1996; Saffron, 1996). Some anecdotal reports suggest that such stereotypes are incorrect (Laird, 1993; Lewin, 1993; Weston, 1991), but empirical research has been limited.

In order to examine these and other related issues, Patterson designed the Bay Area Families Study (Patterson, 1994). This study involved 4- to 9-year-old children who were conceived or adopted by a lesbian mother or mothers. This study examined the mental health of mothers, the mental health of children, division of household labor among parents, parents’ relationship satisfaction and the associations among these variables (Patterson, 1994, 1995a, 2001; Patterson et al., 1998).

The results of this study revealed several important findings. Based on results from standardized assessments, both mothers’ and children’s average levels of adjustment fell within the normal range for all measures (Patterson, 1994, 2001). Lesbian couples who took part in this study reported that they divided household labor and child-care in a relatively even manner (Patterson, 1995a). A third major finding was an association between division of labor and psychosocial outcomes for mothers and their
children (Patterson, 1995a). When lesbian couples shared child-care more evenly, mothers were more satisfied and children were more well-adjusted. This suggested that children might benefit from egalitarian divisions of labor.

Finally, contrary to popular stereotypes, Patterson and her colleagues reported that most children of lesbian mothers in their sample were in regular contact with grandparents, relatives, and other adults outside their immediate households (Patterson et al., 1998). Consistent with expectations based on earlier research, children who had more contact with grandparents also showed fewer internalizing behavior problems than did other children (Patterson et al., 1998). Taken together with those of previous studies, results from the Bay Area Families Study suggested that children of lesbian mothers show normal psychosocial development. Although these results were valuable, a number of limitations hindered a clear-cut interpretation of them. Data for the Bay Area Families Study were drawn from a convenience sample of families who lived in a single geographical area. In addition, the study did not include a comparison group of heterosexual families. Clearly, it would be desirable to study a larger, more diverse sample of children with lesbian mothers, and it would be helpful to include a well-matched comparison sample of children with heterosexual parents. The Contemporary Families Study was designed to address these and related issues.

The Contemporary Families Study

The Contemporary Families Study involved a sample of lesbian- and heterosexual-headed families who had conceived children via donor insemination using the resources of a single sperm bank (Chan, Brooks, Raboy, & Patterson, 1998; Chan, Raboy, & Patterson, 1998; Fulcher, Chan, Raboy, & Patterson, 2002). Although all the families were clients of a single sperm bank, they actually resided in many parts of the United States, and so the findings are not limited to a single geographic area. This sample allowed a comparison of heterosexual- and lesbian-headed families drawn from the same population. In addition, among families headed by couples (as opposed to a single parent), regardless of sexual orientation, one parent was genetically related to the child and one was not. This allowed the separation of questions regarding sexual orientation from those regarding genetic relatedness.

In this section, I describe the Contemporary Families Study and its principal results. The demographic and other characteristics of the participating families are described first. Next, assessments of adjustment of both parents and children in heterosexual- as well as lesbian-parented families and according to parental relationship status (i.e., single or coupled) are described. In families that were headed by couples, the study examined key facets of couple functioning (e.g., relationship satisfaction, division of labor), and comparisons by parental sexual orientation are reported next. The study also investigated associations of individual differences in children's adjustment with couple functioning variables. Finally, the study also explored children's contacts with grandparents and other important adults.

Although statistical details are not elaborated below, all findings described a statistically significant were at the $p < 0.05$ level. The methods and findings are summarized briefly, but additional details and commentary are available elsewhere (Chan, Raboy, et al., 1998; Chan, Brooks, et al., 1998; Fulcher et al., 2002; Flucche Suffin, Chan, Scheib & Patterson 2005). There were no significant sex difference in the data presented here, so the presentation does not consider this variable.

Description of Participating Families

Families participating in this study were all former clients of The Sperm Bank of California (TSBC, located in Berkeley, California), which has been providing reproductive services to clients regardless of sexual orientation or relationship status since 1982. Clients who had conceived and given birth prior to July 1990 were considered eligible to participate in this research (this their children were at least 5 years old at the beginning of data collection). Six families who had already participated in Patterson's Bay Area Families Study were excluded to maintain independence of data between the two studies. Also excluded was one family headed by a woman who identified herself as bisexual.

The sample consisted of 80 families — 34 headed by lesbian couples, 21 by lesbian single mothers, 16 by heterosexual couples, and 9 by heterosexual single mothers. Children averaged 7 years of age and genetically related mothers average 42 years of age. There were 26 girls and 54 boys. The families were primarily Caucasian and parents were generally well educated, with most holding a college degree and most employed at least part-time. They were relatively affluent, with family incomes well above national averages.

We explored the possibility that demographic differences might exist among the four family types. We found that, on average, lesbian birth mothers had completed more years of education than had heterosexual mothers, and lesbian nonbirth mothers had completed more years of education than had heterosexual fathers. As we would expect, families headed by couples reported higher annual household incomes than did families headed by single parents. Otherwise, no significant demographic differences emerged from these analyses.

Procedure and Results

Each eligible family was initially contacted by a letter from the Executive Director of TSBC. The letter gave a brief explanation of the study and asked each family to consider participation. Telephone calls from TSBC staff members followed these letters to describe the study more fully and to request each family's participation. When families agreed to participate, a brief, structured telephone interview about family background and current family status was conducted. It was during this interview that parents responded to questions about their child's contact with grandparents.
and other adults. Remaining materials were then mailed to participating families along with self-addressed stamped envelopes in which the participants were asked to return questionnaires to investigators. In families that consented, a parent gave the child’s teacher The Teacher’s Report Form (TRF, Achenbach, 1991). Teachers returned the form in a provided self-addressed stamped envelope.

Maternal Mental Health

Parenting stress was measured using the Parenting Stress Index- Short Form (PSI/SF; Abidin, 1995). This short form includes 63 items on 5-point rating scales, scored from strongly agree to strongly disagree. The score reflects stress directly related to the parenting role as well as stress from other life events. Items such as: “I feel trapped by my responsibilities as a parent” are included. Higher scores indicate reports of greater stress. Depressive symptoms among parents were measured with the Center for Epidemiologic Studies Depression Scale (CES-D; Radloff, 1977). On this 20 item self-report measure, respondents indicate how often they felt or behaved in a certain way on a 3-point rating scale (e.g., “I had trouble keeping my mind on what I was doing”). Higher scores indicate more depressive symptoms.

Maternal self-esteem was assessed using the Rosenberg Self-Esteem Scale (Rosenberg, 1979). This scale consists of ten statements, each with four response alternatives, indicating the respondent’s degree of agreement with each statement (e.g., “I am able to do things as well as most people”). Results were tabulated to obtain total scores, based upon the recommendations contained in Rosenberg (1979). Higher scores indicate higher self-esteem.

Our results indicated that the parents participating in this study were well adjusted when compared to available norms. Very few parents in this sample showed symptoms of serious depression or low self-esteem. There was no difference in parental adjustment between parents who were coupled or single. Likewise, there were no significant differences in reported stress, depressive symptoms or self-esteem in birth mothers as a function of sexual orientation. In families headed by couples, there were also no significant differences in adjustment measures between fathers and nonbirth mothers. In summary, parents were generally well-adjusted, and there were no significant differences in adjustment as a function of parental sexual orientation.

Couple Functioning

In order to get an overall indication of couple functioning, we assessed couples’ division of labor and marital satisfaction. The measures of couple functioning were only given to parents who described themselves as being involved in a coupled relationship. To assess division of labor in the household, as well as satisfaction with the division, Cowan and Cowan’s (1990) Who Does What? was used. This instrument was designed to measure parents’ perceptions of the current and ideal distribution of labor within the family, as well as each parent’s satisfaction with their arrangements.

The Who Does What? instrument is divided into three sections: division of household tasks, decision-making and child-care within a family. Minor wording changes were made in order to make the measure suitable for lesbian mothers. Each section began by asking respondents to rate, on a scale from 1 to 9, their actual and ideal distribution of certain family tasks (1 = my partner does it all, 5 = we both do this about equally, 9 = I do it all). The first section included 13 household tasks (e.g., meal preparation and cleanup), the second section included 12 family decision-making tasks (e.g., making financial decisions), and the third section included 20 child-care tasks (e.g., bathing the child). Scores around 5 indicated a relatively equal division of labor, while high scores indicated that the respondent reported performing more of the labor. At the end of each section of this instrument, respondents were asked to indicate their overall satisfaction with that specific area of household labor. Finally, in the decision-making and child-care sections, respondents were asked to indicate global ratings of both their own and their partner’s influence over family decisions and involvement in child-care.

To assess relationship satisfaction, two instruments were used. The Locke—Wallace Marital Adjustment Test (LWMAT; Locke & Wallace, 1959) was used to indicate overall relationship quality, while the Partnership Questionnaire (Braiker & Kelley, 1979) assessed more specific aspects of couples’ relationships. The LWMAT is a 15-item self-report measure that was designed to assess marital adjustment in heterosexual marriages (e.g., “Do you confide in your partner?”). In order to make the instrument suitable for use with lesbian couples as well as heterosexual couples, minor wording changes were made. Possible scores range from 2 to 18, with higher scores indicating greater satisfaction.

The Partnership Questionnaire (Braiker & Kelley, 1979) is a 25-item instrument designed to assess components of a close relationship. We used two scales: the Love Scale, consisting of ten items relating to caring and emotional attachment (e.g., “To what extent do you love your partner at this stage?”), and the Conflict Scale, consisting of five items concerning problems and arguments (e.g., “How often do you and your partner argue with one another?”). Each partner indicates level of agreement ranging from 1 (not at all or very little) to 9 (very much or very often). Higher scores on these scales indicate more love and more conflict.

For division of labor, the results for lesbian couples indicated that overall, household tasks, family decision-making, and child-care were all seen as being shared relatively equally between the partners. Lesbian birth mothers reported doing almost the same amounts of child-care as their partners. Lesbian parents also divided time spent on work outside the home about equally. Lesbian nonbirth mothers reported working longer hours in paid employment than lesbian birth mothers, but this difference did not reach statistical significance.

There was more variation in scores for heterosexual couples. Heterosexual parents reported sharing household tasks and family decision-making relatively equally. However, for child-care, the results indicated an unequal distribution of
labor. Mothers reported doing more child-care and fathers reported doing less child-care. Indeed, heterosexual mothers reported doing more child-care than did lesbian birth mothers and heterosexual fathers reported doing less child-care than did lesbian nonbirth mothers.

Comparisons were also made between actual and ideal divisions of labor. In the areas of household tasks and family decision making, both lesbian and heterosexual respondents reported sharing these responsibilities relatively equally with their partner. They also reported that this matched their ideals. In the area of child-care, however, differences emerged as a function of parental sexual orientation. For ideal distribution of labor, heterosexual mothers indicated that they would prefer a more equitable distribution of child-care labor than they currently experienced. Fathers reported preferring that their wives assume most of the child-care; their actual score on current child-care participation was similar to their report on their ideal amount of responsibility. On the other hand, in addition to reporting the practice of equal child-care, both lesbian birth mothers and their partners reported wanting an equal division of child-care. Overall, both lesbian and heterosexual mothers preferred a more equitable division of child-care than did fathers. For lesbian mothers, this desire was realized in their actual child-care arrangements, but this was not the case for heterosexual mothers.

Regardless of their actual labor arrangements, most parents reported feeling satisfied with their current division of labor. There was no significant difference between heterosexual and lesbian parents in this regard. Likewise, there were no significant differences between birth parents and nonbirth parents and their satisfaction with the division of child-care labor. It seems that regardless of how these couples actually divided labor they were satisfied with their arrangements.

Heterosexual and lesbian couples’ scores on the LWMAT (Locke & Wallace, 1959) exceeded mean scores for similar populations, indicating high relationship satisfaction. In addition, heterosexual and lesbian couples reported high levels of love and low-to-moderate levels of conflict on the Partnership Questionnaire (Braithwaite & Kelley, 1979), suggesting that parents were generally satisfied with their relationships. Overall, lesbian and heterosexual couples reported similar levels of love, conflict, and satisfaction with their relationships.

Children’s Adjustment

To assess levels of children’s social competence and behavior problems, the Child Behavior Checklist (CBCL, Achenbach & Edelbrock, 1983) and the Teacher Report Form (TRF, Achenbach, 1991) were administered. These scales were particularly useful here because of their ability to discriminate children in the clinical vs. normative range of functioning for both internalizing (e.g., inhibited, overcontrolled behavior) and externalizing (e.g., aggressive, antisocial, or undercontrolled behavior) behavior problems. The CBCL is designed to be completed by parents, and, in families headed by couples, each parent completed a CBCL for the target child. In addition, the CBCL scale measured social competence whereas the TRF measured academic performance and adaptive functioning. The TRF utilized teacher reports. These scales were selected because they are widely used child assessment instruments for which national age and sex norms are available for both clinical and nonclinical populations. Moreover, sex- and age-specific raw scores can be converted to standard T scores that allow comparisons across age and gender groups.

Results showed that, compared to a large group of normal children, children in this sample were well adjusted according to both their CBCL and TRF scores as reported by both parents and teachers. Children’s average scores on Externalizing, Internalizing, and Total Behavior Problems scales fell well below clinical cutoffs. Likewise, Social Competence and Academic Performance and Adaptive Functioning scores for these children were well above clinical cutoffs. There was no significant difference in adjustment scores between children of lesbian parents and children of heterosexual parents. Furthermore, there was also no difference in children’s adjustment as a function of mothers’ relationship status. We found that both parents and teachers reported that children conceived via donor insemination were well adjusted.

Because the family structure variables, parental sexual orientation, and relationship status were not related to children’s adjustment in this sample, efforts to predict adjustment focused on other variables. Generally, we report the associations of family interactions and processes with children’s adjustment across family types except when interactions are revealed between family type and children’s adjustment. We turn next to results from these analyses.

Associations Between Child and Parental Adjustment

Children’s adjustment was significantly associated with parental adjustment. When parents reported more parenting distress and more dysfunctional parent—child interactions on the Parenting Stress Index, children were described as showing more behavior problems. When birth mothers reported dysfunctional interactions with their children, those children had more reported internalizing problems. Likewise birth mothers’ reports of greater parental distress and dysfunctional interactions were associated with more reports of their children’s externalizing and total behavior problems. A similar pattern emerged for nonbirth parents’ reports of parental stress and dysfunctional interactions, which were also associated with children’s externalizing and total behavior problems. Teachers’ reports of children’s behavior problems were most associated with the nonbirth parents’ reports of parental distress. There was no relationship between parents’ depressive symptom scores and children’s behavior scores, probably because parents in this sample showed very few depressive symptoms.

There were also significant associations between children’s adjustment scores and parental reports of relationship satisfaction. When couples in this sample reported higher relationship satisfaction and love, their children were less likely to show adjustment problems. For example, when birth mothers reported higher global
relationship satisfaction and higher levels of love in their couple relationship, their children showed better adjustment. Nonbirth parents' reports of relationship satisfaction and love were also associated with lower levels of children's reported behavior problems. Birth mothers who reported higher conflict with their partners also reported that their children had more behavior problems. Thus, when parents reported higher levels of relationship satisfaction and love, and lower levels of parental conflict, they also reported that their children had fewer behavior problems.

Association of Parental Division of Labor and Children's Adjustment

We also assessed the relationship between parents' division of labor, satisfaction with the division of labor, and children's adjustment. Overall, nonbirth parents' reports of greater satisfaction with the couple's division of household labor were associated with children's lower externalizing behavior problems as reported by their teachers. However, some associations differed according to parental sexual orientation.

In families headed by heterosexual couples, when fathers reported greater satisfaction with the division of family decision making, but lower levels of satisfaction in the division of household tasks, mothers’ reports of children’s externalizing problems were lower. In lesbian-headed families, the associations among division of labor and children's adjustment were more complicated. Birth mothers' reports of greater satisfaction with the division of household labor and family decision-making were associated with reports of children's lower levels of externalizing behavior. Nonbirth mothers' reports of greater satisfaction with division of family decision making were associated with their own reports of lower levels of children's externalizing behavior. Finally, in lesbian-headed families, when nonbirth mothers actually participated in more child-care tasks, the children were reported by birth mothers to have fewer externalizing problems. These complicated associations between division of labor and children’s adjustment were mediated by parents' satisfaction with the couple relationship. This mediation makes clearer the paths of influence and we examine such associations next.

Parental Relationship Satisfaction, Division of Labor, and Children’s Adjustment

We were interested in whether associations between parental division of labor and children’s adjustment might be mediated by parents' relationship satisfaction. The results indicated that in lesbian-headed families, nonbirth mothers’ reports of their satisfaction with the division of family decision-making were associated with their reports of higher relationship satisfaction and with the description of their children as having fewer externalizing behaviors. Furthermore, the results showed that this association was mediated by nonbirth mothers’ satisfaction with the couple relationship. When effects of relationship satisfaction and division of family decision-making satisfaction were considered simultaneously, only parents' relationship satisfaction remained predictive. Thus, the associations between parental division of labor and children's adjustment were mediated by parents’ relationship satisfaction. When parents reported higher levels of relationship satisfaction, children were described as showing fewer externalizing behaviors. We conclude that parental satisfaction is more highly associated with child outcomes than any specific division of labor. This finding is consistent with others in the literature that included only heterosexual families which show that associations between children's outcomes and parental division of labor are mediated by parents' level of marital satisfaction (e.g., Cowan & Cowan, 1992). Thus, our main finding was that parents' higher levels of satisfaction in the couple relationship were associated with lower levels of children's behavior problems.

Children’s Contacts with Grandparents and Other Adults

During the initial telephone interview, information about contact with grandparents and other adults was collected from the child’s birth mother. Mothers reported the amount of contact the target children had with grandparents. Genetic grandparents were identified by the child’s birth mother as her parents, and nongenetic grandparents were identified by the child’s birth mother as the other parent’s parents. Contact was defined as a visit, a telephone call, a card, or e-mail. Contact scores ranged from 1 to 7 (1 = no contact, 2 = less than once a year, 3 = once a year, 4 = every other month, 5 = once a month, 6 = once a week, and 7 = daily contact). If the mother did not list nongenetic grandparents, because she was single or not in contact with a former partner, the family was not included for these comparisons. Data for children whose grandparent had died were not considered in the comparisons for that grandparent. Parents also listed up to five adults, in addition to parents and grandparents who were seen as “important” in the child’s life. The adult’s gender and relationship to the child (e.g., parent’s friend, relative, neighbor, child-care provider, or coach) was recorded as well. Each of these adults was also scored for contact using the scale described earlier.

Most parents reported that their children were in at least monthly contact with their grandparents. There were no significant differences in amount of contact between grandparents and children of lesbian parents vs. children of heterosexual parents. Among couples, this was true for both genetic grandparents and for nongenetic grandparents. However, children of both lesbian and heterosexual parents were in more frequent contact with their genetic grandparents than with their nongenetic grandparents.

The amount of contact between children and other adults also did not differ according to parental sexual orientation. Children of lesbian parents had contact with as many adult relatives as did children of heterosexual parents. Contrary to stereotypes, children of lesbian parents had contact with as many adult men as did
children of heterosexual parents. Children of lesbian parents did, however, have significantly more contact with unrelated women than did children of heterosexual parents. Overall, the amount of contact with adults outside the home was similar among children of lesbian and heterosexual parents.

Overview of Results and Implications

The Contemporary Families Study was designed to examine child development and family functioning among families headed by lesbian and heterosexual parents who conceived their children via donor insemination. This sample allowed us to compare parents and children in families headed by lesbian and heterosexual parents, taking into account that only one parent is genetically related to the child.

Our first major finding was that both parents’ and children’s average levels of adjustment fell clearly within the normative range in both family types. This finding is consistent with results from earlier studies of lesbian parents and their children (Flaks et al., 1995; Steckel, 1985, 1987). Furthermore, there were no significant differences in children’s or parents’ adjustment scores according to parental sexual orientation. Considering that this result is consistent with findings from other research on lesbian women in general (Gonsiorek, 1991), lesbian mothers in particular (Patterson, 1992, 2002), children of divorced lesbian and gay parents (Patterson, 1992), and children born to lesbian mothers (Flaks et al., 1995; McCandlish, 1987; Steckel, 1985, 1987), this outcome was not surprising. Particularly in light of judicial and popular prejudices against lesbian and gay families that still exist in many parts of the United States, the result is worthy of attention. The present data revealed not only that lesbian mothers’ adjustment and self-esteem were within the normative range, but also that their children’s development was proceeding in normal fashion.

The second major finding was that both lesbian and heterosexual parents expressed high satisfaction and high levels of love within their couple relationships. There were no differences in satisfaction or warmth between heterosexual and lesbian couples. Although both lesbian and heterosexual parents reported relatively equal contributions to paid labor, household chores, and family decision making, differences did emerge in the division of labor involved in child-care. Lesbian couples divided child-care more evenly than did heterosexual couples. In families headed by heterosexual parents, mothers reported doing more child-care than did their husbands. This is consistent with previous findings on child-care arrangements among heterosexual couples (Cowan & Cowan, 1992; Perry-Jenkins & Crouter, 1990). Parents in both family types reported satisfaction with division of child-care; however, children’s adjustment was more strongly related to partners’ satisfaction with division of labor than to their reports of actual division of labor. Therefore, in well-functioning families it may be more important for children that parents negotiate a division of labor that is satisfactory to both parents than that they adhere to an egalitarian arrangement.

Another principal finding emerging from these data was that family process variables such as parental adjustment and couple adjustment were more strongly related to children’s outcomes than were family structural variables such as parental sexual orientation or relationship status. The family process variables showed the same pattern of associations in families headed by lesbian and heterosexual parents. For example, regardless of parental sexual orientation, elevated parenting stress was associated with more externalizing behavior problems among children. Parents in both family types who reported being less happy with their relationship also reported having children with more behavior problems. Patterns of family interaction were clearly related to children’s outcomes, regardless of parental sexual orientation (Patterson, 2002).

Finally, we found that children of lesbian and heterosexual parents who conceived via donor insemination were described by their parents as being surrounded by networks of supportive adults. Children of lesbian and heterosexual parents were described as being in equal amounts of contact with their grandparents. The lineal bridge between child and grandparent seemed to function without regard to parental sexual orientation. Our results suggested that grandparents were not less willing to invest time in grandchildren born in the context of a lesbian relationship than in those born in the context of a heterosexual one. Children were also said to have similar amounts of contact with other adults in addition to grandparents, regardless of parental sexual orientation. The only significant difference was that children with lesbian parents were in regular contact with more unrelated women than children with heterosexual parents. In short, consistent with earlier findings (Patterson et al., 1998), our results showed that children of lesbian parents in this sample were not living in isolation nor were they lacking adult male role models.

Several limitations of this study must be considered when interpreting the results. First, the Contemporary Families Study was cross-sectional in design and so does not afford the opportunity to examine children’s development across time. Secondly, because lesbian parents were more likely than heterosexual parents to participate, the sample may be more representative of these families. Finally, the measures used here relied on self-reports and reports from parents and teachers. Future studies that are longitudinal in design, that use representative samples, and that employ observational measures may be better able to clarify causal questions.

The results of the Contemporary Families Study have afforded some insight into families formed by lesbian and heterosexual parents who conceived via donor insemination. The study also raises many questions for further research. Questions about children’s development over time would clearly benefit from longitudinal research. Questions about the role of reproductive technology could be clarified by research on lesbian and heterosexual families formed in other ways (e.g., through adoption). Questions about broader aspects of children’s social worlds might also be addressed through research on other aspects of children’s social development.

In an age in which children are being conceived and raised in families that are growing increasingly diverse, it is important to examine the role that family constellations play in children’s development. The family structural variables studied here (e.g., number of parents and parental sexual orientation) were not associated in this
sample with children’s adjustment or with their frequency of contact with important adults such as grandparents. It was family process variables, such as parental relationship satisfaction, that were associated with children’s adjustment. Overall, results of the Contemporary Families Study were consistent with those of other studies on lesbian mothers and their children (Gartrell et al., 2000, 2005; Patterson, 2000; Perrin, 2002; Stacey & Biblarz, 2001; Tasker & Golombok, 1997) in revealing that these families can provide supportive environments in which children can grow and develop. At the same time, additional research would clearly be helpful.

The National Longitudinal Study of Adolescent Health

The Contemporary Families Study focused on the development of young children who had been conceived via donor insemination by lesbian or heterosexual parents. As valuable as the results of this study have been, it would also be useful to know more about the development of older children and adolescents with lesbian or gay parents. Some writers have suggested that caution be used when generalizing the results of research conducted with young children to adolescents (e.g., Perrin 2002). Because adolescence is a time during which issues such as personal identity, peers, and dating become very important, and because of concerns about the possible effects of same-sex parenting during adolescence (e.g., Baumrind, 1995), it is an especially important period in which to examine the development of youth with nonheterosexual parents (Wainright, Russell & Patterson, 2004; Wainright & Patterson, 2006, 2008).

Background

A small body of research has focused on development of adolescent offspring of families headed by lesbian or gay parents. In general, like the literature on children, the research on adolescents has found few differences in adjustment as a function of parental sexual orientation (Gershon, Tschann, & Jemerin, 1999; Huggins, 1989; O’Connor, 1993). For instance, Huggins (1989) reported that the self-esteem of adolescents with lesbian mothers was not reliably different than that among those with heterosexual mothers.

While parental sexual orientation has not emerged as a potent predictor of adolescent outcomes, parenting practices have been implicated as important factors in many studies. A substantial body of research indicates that parenting style influences the effectiveness of parents’ efforts to socialize their children (Steinberg & Silk, 2002). In particular, a warm and accepting style of parenting is related to optimal outcomes for adolescents (Rohner, 1999), especially if it is combined with appropriate limit setting and monitoring of adolescent behavior (Steinberg, Lamborn, Dornbusch, & Darling, 1992). Associations between parental warmth and positive outcomes have been found for adolescents from a wide variety of ethnic cultural, and socioeconomic backgrounds (Khaleque & Rohner, 2002). That these linkages have been found among such a diverse group of adolescents suggests that they might also be expected among the offspring of lesbian and gay parents.

In summary, the research on adolescent offspring of lesbian and gay parents suggests that they are developing in positive ways. However, research has been limited and generally based on small samples, the representativeness of which can be difficult to assess (Stacey & Biblarz, 2001). The research described later is the first to assess development of adolescents living with same-sex parents, using data that are drawn from a large national sample. The sample is drawn from the National Longitudinal Study of Adolescent Health (known as Add Health) which includes participants from many different backgrounds, from many parts of the United States (Bearman, Jones, & Udry, 1997; Resnick et al., 1997).

Examination of the existing research indicates that many studies of the offspring of lesbian or gay parents focus on a single outcome or on a small set of outcomes. The Add Health study assessed adolescent adjustment in many different ways, including various aspects of psychosocial well-being, school functioning, romantic relationships and behaviors, substance use, delinquency, victimization, and the qualities of family and peer relationships. Data from the Add Health study thus afforded a broad overview of adolescent adjustment.

Our research assessed normative levels of adjustment among adolescent offspring of same-sex couples, and also explored factors associated with individual differences in adjustment and behavior within this group. We assessed structural variables such as family type (i.e., whether the parent has a same-sex or other-sex parent), as well as family and relationship variables such as adolescents’ perceptions of parental warmth, care from adults and peers, autonomy, and parental perceptions of the quality of their relationships with adolescent offspring. Based on previous findings with children (e.g., Chan, Brooks, et al., 1998; Flaks et al., 1995; Golombok et al., 2003), we expected to find few differences in adjustment between youth living with parents who had same-sex vs. other-sex partners. Consistent with the literature on sources of individual differences among adolescents, however, we did expect to find associations between family and relationship variables and adolescent outcomes. Details of the studies are presented in Wainright et al. (2004) and in Wainright and Patterson (2006, 2008).

Description of Participating Families

Participating families were drawn from a large national sample of adolescents in the United States collected by Quality Education Data for the National Longitudinal Study of Adolescent Health (Bearman et al., 1997). Add Health is a school-based study of the health-related behaviors of adolescents in grades 7–12. A sample of 80 eligible high schools was initially selected. Schools were stratified to ensure that this sample was representative of US schools with respect to region of country, urbanicity, school type, ethnicity, and school size. More than seventy percent of the originally sampled high schools were recruited by AddHealth. If a high school
refused to participate, a replacement school within its stratum was selected. Participating schools provided rosters of their students and, in most cases, agreed to administer an In-school Questionnaire during one class period. They also assisted in identifying their feeder schools (i.e., those schools that include seventh grade and send their graduates to that high school). The final sample consisted of a pair of schools in each of 80 communities, with the exception of some high schools that spanned grades 7–12, and therefore functioned as their own feeder schools (Bearman et al., 1997).

All students who completed an In-school Questionnaire plus those who did not complete a questionnaire but who were listed on a school roster were eligible for selection into the core in-home sample. Students in each school were stratified by grade and sex, and approximately 17 students were randomly chosen from each stratum so that a total of approximately 200 adolescents were selected from each of the 80 pairs of schools. A total core sample of 12,105 adolescents was interviewed.

Most interviews were conducted in 1995 in the participants’ homes. All data were recorded on laptop computers. For less sensitive sections, the interviewer read the questions and entered the respondent’s answers. For more sensitive sections, the respondent listened to pre-recorded questions through earphones and entered the answers directly.

A parent, preferably the resident mother, of each adolescent respondent interviewed in Wave 1 of data collection was asked to complete a questionnaire covering topics including, among others, parents’ marriages and marriage-like relationships; neighborhood characteristics; involvement in volunteer, civic, or school activities; health-affecting behaviors; education and employment; household income and economic assistance; and parent—adolescent communication and interaction.

Data employed in the present study were collected through the in-home interviews and surveys, as well as in-school surveys of students (collected in 1994–1995) and through the in-home questionnaires of parents. Offspring of same-sex couples were identified through a two-step process. We first identified families in which parents reported being in a marriage or marriage-like relationship with a person of the same sex. Because no data had been collected on parents’ sexual identities, per se, families headed by gay, bisexual, or lesbian parents who did not report that they were in a marriage or marriage-like relationship at the time of data collection could not be identified. In the second step, the consistency of parental reports about gender and family relationships was examined. To guard against the possibility that some families may have been misclassified due to coding errors, we retained only those cases in which parental reports of gender and family relationship were consistent (e.g., a parent reported being female and described her relationship to the target adolescent as “biological mother”). Any families in which parental reports of gender and family relationships did not make sense or did not fit our criteria (e.g., a parent reported being female and described her relationship to the target adolescent as “biological father”) were discarded. This procedure was designed to ensure that, insofar as possible, only adolescents whose parents reported being involved in a marriage or marriage-like relationship with a person of the same sex were selected for further study. The number of families headed by

male same-sex couples was very small \((n = 6)\). Results of preliminary analyses that included these families were nearly identical to those including only families headed by female same-sex couples. To simplify interpretation of results, we excluded these six families from the final sample.

The focal group of families identified through this process consisted of 44 adolescents, 23 girls, and 21 boys. Approximately 68% of the adolescents identified themselves as European-American or white, and 32% identified themselves as nonwhite or as biracial. On average, the adolescents were 15 years of age, with a range of 12–18 years of age. Average household income for families in the focal group was approximately $45,500 per year.

The resources of the Add Health database allowed the construction of a well-matched comparison group of adolescents. Each of the offspring of same-sex parents was matched with an adolescent from the Add Health database who lived with other-sex parents. This matching was accomplished by generating a list of adolescents from the Add Health database who matched each target adolescent on the following characteristics: sex, age, ethnic background, adoption status (identified via parent reports), learning disability status, family income, and parent’s educational attainment. The first matching adolescent on each list was chosen as the comparison adolescent for that target adolescent. The final sample included 88 families, including 44 families headed by mothers with female partners and 44 comparison families headed by other-sex couples.

To assess the degree to which our focal group of 44 families with same-sex parents was representative of the overall population from which it was drawn, we compared the demographic characteristics of the focal group with those for the entire Add Health core sample \((n = 12,105)\). We compared adolescent age, parent age, household income, adolescent gender, racial identification, adoption status, and parental education in the two groups. For the entire Add Health core sample, average age of adolescent participants was 15 years and parent’s average age was 42 years. Average household income was $47,400 per year. The sample was 52% female, 38% nonwhite, 1% adopted, and 42% of parents were college-educated. None of these comparisons was statistically significant. Thus, the focal group of 44 families was demographically similar to the population from which it was drawn.

We also explored a more stringent approach to identification of families with same-sexed parents. In this approach, we used the two principal criteria described earlier (1) parent described as being in a “marriage or marriage-like relationship” and (2) parental report data about gender and family relationships were clear and consistent; in addition we required that (3) the responding parent reported being unmarried, and (4) the adolescent reported no other-sex parental figure in his/her household. The fourth criterion required that if an adolescent reported living with his biological mother, he reported no male figure (e.g., biological father, stepfather) as residing in the household.

Because there was no way for adolescents to indicate that they lived in more than one household (e.g., in joint custody situations), we believe that application of the more stringent criteria effectively eliminated from the sample many adolescents from divorced families in which one or both parents were currently involved in same-sex
relationships. Thus, use of the more stringent criteria had the disadvantage of failing to include many families of interest, but had the advantage of including only very clear cases in which adolescents described themselves as living only with two same-sex adults, and in which parents described themselves as unmarried, and as involved in a "marriage or marriage-like relationship" with a person of the same sex. In short, these families conformed in every particular to an idealized image of lesbian mother families. We identified 18 such families, and completed all analyses with this sample and a matched comparison group of 18 families (in which parents reported being involved in other-sex relationships). Results were essentially identical to those reported later, revealing few group differences, but much within-group variation in outcomes that was significantly associated with the quality of family relationships. The data from the larger sample are presented later, however, because it more nearly represents the real (rather than the idealized) variety of families in which parents are involved in same-sex relationships.

We examined data from Add Health regarding various aspects of adolescent adjustment and adolescent relationships with parents. Composite variables were created from the Add Health Home Interviews and In-School Questionnaires for adolescents' self-reported levels of depressive symptoms, anxiety, self-esteem, school grades, trouble at school, and school connectedness. Composite variables were also formed for adolescents' reports of their perceptions of parental warmth, caring from adults and peers, their integration into their neighborhood, and their autonomy. Adolescents' romantic attractions, relationships, and behaviors were assessed with individual items.

Procedures, Materials, and Results

In this section, the procedures, materials, and results are described. We begin with assessments of adolescent adjustment and school functioning, then go on to romantic and sexual behavior, family and relationship variables, substance use, delinquency and victimization, and adolescent peer relations. The varied array of assessments provides a comprehensive overview of adolescent outcomes in the two groups of families. Further details can be found in Wainright et al. (2004) and in Wainright and Patterson (2006, 2008).

Adolescent Psychosocial Adjustment and School Functioning

Adolescent depressive symptoms were assessed with a 19-question version of the CES-D (Radloff, 1977) scale from the In-Home Interview. This scale of depressive symptoms included questions about the frequency of symptoms such as feeling depressed, feeling too tired to do things, and feeling lonely. Possible scores on this scale, based on the sum of the 19 items, ranged from 0 to 57, with higher scores indicating greater levels of depressive symptoms.

Adolescent anxiety was measured with a 7-item scale from the In-Home Interview that included questions about the frequency of symptoms such as feeling moody or having trouble relaxing. Items were measured on a scale of 0 (never) to 4 (every day), with scores ranging from 0 to 28, and higher scores indicating higher levels of anxiety.

Self-esteem was assessed using a 6-item scale from the In-School Questionnaire that included items such as feeling socially accepted and feeling loved and wanted. Items were measured on a scale of 1 (strongly disagree) to 5 (strongly agree), with scores ranging from 6 to 30, and higher scores indicating higher self-esteem.

School outcomes measured included grade point average (GPA), school connectedness, and trouble in school, all assessed in the In-Home Interview. GPA was measured on a 4-point scale where 4 = A, 3 = B, 2 = C, and 1 = D, or lower. Following Seal, Ireland, and Borowsky (2003), it was assessed by taking the mean of grades received in four school subjects (English, Mathematics, History/Social Studies, and Science) in the current or most recent school year.

School connectedness was measured using a 5-item scale that assessed respondents' feelings of integration into their school. Items, which were averaged to form the adolescent's score, included the degree to which adolescents felt close to other students, felt like part of their school, felt safe in their school, felt that teachers treated students fairly, and were happy at their school. Possible scores ranged from 1 (strongly disagree) to 5 (strongly agree). Adolescents' trouble at school was assessed with a 4-item scale that included items such as problems getting homework done and problems in getting along with classmates. Items were measured on a scale of 0 (never) to 4 (every day) and the mean of the four items was taken, with higher scores indicating more trouble in school.

Results showed that, overall, adolescents reported positive psychosocial outcomes, with low levels of depressive symptoms ($M = 10.73$, on a scale of 0–57) and anxiety ($M = 0.82$, on a scale of 0–4), and high levels of self-esteem ($M = 4.02$, on a scale of 1–5). Similarly, adolescents reported positive school outcomes, with fairly high GPAs ($M = 2.81$, on a scale of 1–4), high levels of school connectedness ($M = 3.69$, on a scale of 1–5), and low levels of trouble in school ($M = 1.05$, on a scale of 0–4). Higher scores indicated greater levels of that outcome for all variables.

As expected, there were no significant differences in adolescents' psychosocial adjustment, which included depressive symptoms, anxiety, and self-esteem, between offspring of same-sex couples and offspring of comparison families headed by other-sex couples. We found a significant multivariate effect for family type for school outcomes, which was significant in the univariate analyses for school connectedness. Adolescents with same-sex parents were more connected at school than were those living with other-sex parents. We found no differences as a function of gender for psychosocial adjustment or school functioning, and no significant interactions between gender and family type for psychological adjustment or school outcomes. Overall, adolescent psychosocial and school adjustment did not differ as a function of family type or adolescent gender.
Adolescent Romantic Relationships, Attraction, and Behaviors

Adolescents' romantic attractions were assessed with two yes/no questions, "Have you ever been attracted to a female?" and "Have you ever been attracted to a male?" Female adolescents who answered yes to the first question and male adolescents who answered yes to the second question were classified as having had a same-sex attraction. To assess dating behavior, adolescents were asked three yes/no questions: whether they had had a romantic relationship in the past 18 months, whether they had had a same-sex romantic relationship in the past 18 months, and whether they had ever engaged in sexual intercourse.

Analyses of adolescents' reports of romantic attractions and behaviors revealed no difference between the groups in the percentage of adolescents who reported ever having engaged in sexual intercourse (34% of adolescents with same-sex parents and 34% of those with other-sex parents). There was also no significant difference between the groups in the percent of adolescents who had had a romantic relationship in the past 18 months (68% of adolescents with same-sex parents and 59% of those with other-sex parents, ns). Fewer than ten adolescents reported same-sex attractions and same-sex romantic relationships in the past 18 months, so under stipulations that permit use of these data, group comparisons are not presented. Reports of romantic relationships, attractions, and behaviors did not differ as a function of age or gender except that older adolescents were more likely than younger ones to report having had a romantic relationship in the past 18 months.

Family and Relationship Variables

Parental warmth toward the adolescent was assessed using the mean of five items from adolescent reports collected during the In-Home Interview. Self-report items included adolescents' perceptions of parents' warmth and caring toward adolescent, perceived level of family's understanding and attention, and adolescents' feelings of closeness to parents. For questions in which adolescents were asked about each of their parents, we used the response for the parent who was described as more warm and loving. Scores ranged from 1 (not at all) to 5 (very much), with higher scores indicating greater warmth.

Adolescents' perceptions of their integration into the neighborhood in which they lived were measured using a scale of three yes/no (1 = yes, 0 = no) items taken from the In-Home Interview. Items included whether adolescents know people in their neighborhood, talk with neighbors, or feel that their neighbors look out for each other. The three items were summed, and possible scores ranged from 0 to 3, with higher scores indicating greater neighborhood integration.

Adolescents' perceived autonomy was assessed with a scale of 7 yes/no (1 = yes, 0 = no) items that addressed the extent to which adolescents are allowed to make decisions about aspects of their lives such as food, bedtime, TV viewing, and friends. The seven items were summed, and possible scores ranged from 0 to 7, with higher scores indicating greater autonomy. Adolescents' perceived care from adults and friends was measured with three items regarding how much the adolescent believed that adults, teachers, and friends care about them. The mean of the three items was taken as the adolescent's score, and possible scores ranged from 1 (not at all) to 5 (very much), with higher scores indicating perceptions of more caring. Parents' perceptions of the quality of their relationship with their child were assessed with a scale of six items from the parent's in-home interview. Items included questions about the parent's assessment of trust, understanding, communication, and the general quality of their relationship with their child, and were measured on a scale of 1–5, with scores ranging from 6 to 30, and higher scores indicating closer relationships.

Results showed that overall, adolescents reported positive family relationships. Adolescents' reports of parental warmth were high. On a scale of 1–5, with higher scores indicating greater warmth, the mean for the entire sample was 4.36, with a range of 2.80–5.00. Very few youngsters reported low-quality relationships with parents. In fact only one adolescent in the focal group and nobody in the comparison group had scores lower than 3 on the scale. Similarly, adolescents' perceptions of others' (teachers, adults, and friends) care for them were high (M = 4.07), with a range of 2.33–5.00. Adolescents also reported relatively high levels of autonomy (M = 5.26, Range = 1.00–7.00) on a scale of 1–7, with higher scores indicating greater autonomy. Their average assessment of their integration into their neighborhoods was 2.30 on a scale of 0–3, with higher scores indicating greater integration. Parents' perceptions of the quality of the parent–child relationship were also high, with a mean of 4.20 on a scale of 1–5, with higher scores indicating more positive relationships.

Consistent with results for psychosocial and school outcomes, there were no differences in adolescent reports of family and relationship processes, including parental warmth, care from others, personal autonomy, or neighborhood integration, as a function of family type.

Comparisons with Add Health Core Sample

To what degree did outcomes for adolescents in our focal and comparison samples differ from those for the population from which the samples were drawn? To explore this question, we obtained mean scores (or percentages for categorical variables) for each of the dependent variables. Using one-sample t tests and χ² tests, as appropriate, we compared means for our focal sample to those for the entire Add Health core sample. None of these comparisons was statistically significant. Thus, outcomes for adolescents with same-sex parents in our focal sample did not differ significantly from those for a representative group of American adolescents.
Associations among Family Relationships and Outcome Variables

Having found almost no associations between family type and adolescent adjustment, we wanted to explore possible associations between processes in the adolescent’s environment and adolescent outcomes. In particular, we examined correlations among adolescents’ perceptions of parental warmth, care from adults and peers, autonomy, and neighborhood integration; parents’ perceptions of the quality of the parent—child relationship; and measures of adolescent adjustment. We also conducted simultaneous multiple regression analyses to determine whether these family and relationship variables were significant predictors of adolescent adjustment, while controlling for family type, adolescent gender, and socioeconomic status. Regression analyses were conducted separately for adolescents’ depressive symptoms, anxiety, self-esteem, GPA, school connectedness, and trouble in school. Family type, adolescent’s gender, parental education, and family income were also included as predictors. We did not examine romantic attractions and behavior because of the small number of adolescents in either group reporting same-sex attractions or romantic relationships.

Results showed that, as expected, quality of family relationships was significantly associated with many adolescent outcomes, including school connectedness, anxiety, and trouble in school. The association between adolescents’ depressive symptoms and parental report of the quality of the parent—adolescent relationship was not statistically significant. Adolescents’ anxiety was associated with adolescent gender, with being male associated with less anxiety. Adolescents’ reports of trouble in school were associated with the quality of the parent—child relationship and level of parental education; less trouble in school was associated with more positive relationships with parents and having parents with higher levels of education. School connectedness was associated with family type, the quality of the parent—child relationship, and care from adults and peers, with a significant interaction between family type and care from adults and peers. Greater school connectedness was associated with having same-sex parents, reporting higher levels of care from adults and peers, and having parents who reported a more positive parent—child relationship. Adolescents’ perceived care from adults and peers had a stronger effect on school connectedness for adolescents living with same-sex parents than for those living with other-sex parents. Adolescents’ GPFs were not associated with any family and relationship variable or SES variable. In summary, adolescents’ reports of family and relationship processes such as quality of the parent—child relationship and care from adults and peers were associated with several measures of adolescent functioning, and were better predictors of adolescent adjustment than were family type or adolescent gender.

Substance Use

Adolescents’ use of tobacco was assessed with a composite variable (Sieving et al., 2000) that uses four items to classify adolescents into one of seven levels of tobacco use (1 = “never smoked,” 3 = “currently smoking 1–2 cigarettes per day,” 5 = “currently smoking 6–10 cigarettes per day,” 7 = “currently smoking >20 cigarettes per day”). Friends’ use of tobacco was assessed by asking how many of three best friends smoke at least 1 cigarette per day.

Use of alcohol was assessed with three variables from the adolescent interviews. We used a composite variable (Sieving et al., 2000), which uses two items to create an eight-level variable about adolescents’ use of alcohol in their lifetime and in the past 12 months (1 = “2–3 drinks lifetime,” 3 = “drank alcohol on 1 or 2 days in the past 12 months,” 5 = “drank 2–3 days a month in the past 12 months,” 7 = “drank 3–5 days a week in the past 12 months,” 8 = “drank every day or almost every day in the past 12 months”). Adolescents were instructed to exclude “a sip or taste of someone else’s drink.” Individual items measured how often in the past 12 months adolescents had binged on alcohol (5 + drinks in a row) and had gotten drunk. Scores for these items ranged from 1 (never) to 7 (every day or almost every day).

Lifetime and current marijuana use were assessed with a composite variable (Sieving, et al., 2000), which uses two survey items from the Adolescent H1 to form a seven-level variable (1 = “never used marijuana,” 3 = “< 3 times in lifetime, no use in past 30 days,” 5 = “2–3 times in past 30 days, Adolescents’ risky use of alcohol and drugs was assessed with a scale of eight items (1 = yes, 0 = no) from the adolescent interviews that asked whether the adolescent had driven a car, gone to school, gotten into a fight, or carried a weapon while consuming alcohol or drugs. The sum of the eight items was taken, with higher scores indicating more risky use.

Relationship and physical problems caused by adolescents’ use of alcohol were assessed with a scale of nine items from the adolescent interviews asking about the frequency of being hung over, sick, in a fight, or in a situation that was later regretted, or in trouble with parents, school, or friends or dates because of alcohol use in the past 12 months. Items were measured on a scale of 0 (never) to 4 (5 or more times) and the mean of the nine items was taken, with higher scores indicating more problems.

Adolescents’ joint occurrences of substance use and sexual activity were assessed using a scale of six items (1 = yes, 0 = no) from the adolescent interviews, asking whether the adolescent had used drugs, alcohol, or been drunk the first time (three items) or most recent time (three items) he or she had sexual intercourse. The sum of the six items was taken, and higher scores indicated more joint occurrences.

Results showed that, overall, adolescents reported positive outcomes. They reported moderate use of cigarettes and alcohol, with 25% reporting that they had ever smoked regularly and 44% reporting that they had drunk alcohol when they were not with their parents. Reports of adolescents’ frequency of alcohol use ($M = 2.91$) and tobacco use ($M = 1.94$) were low. Adolescents also reported low levels of alcohol abuse, including binging ($M = 1.82$) and getting drunk ($M = 1.81$). Their reports of physical and relationship problems because of alcohol use ($M = 0.24$) were low, as were their reports of risky use of drugs and alcohol ($M = 0.53$) and reports of joint occurrences of sexual activity and drug or alcohol use ($M = 0.23$).

As expected, we did not find a statistically significant difference in adolescents' reports of their frequency of alcohol, tobacco, or marijuana use as a function of family type. In addition, our analyses revealed no significant difference in the number of three best friends who smoke or frequency of getting drunk or binge smoking.
drinking. Consistent with results for the substance use, we found no significant difference in problems arising from alcohol or drug use (relationship and physical problems, risky use of alcohol and drugs, and sex while under influence of alcohol or drugs) as a function of family type.

Delinquent Behavior and Victimization

Adolescent delinquent behavior was assessed with ten items from the portion of the adolescent interviews in which adolescents listened to questions through head-phones and recorded their answers on a laptop computer. These items ask about the occurrence of activities such as damaging others’ property, shoplifting, and getting into fights in the past 12 months. Scores on this scale were the sum of the ten items (1 = yes, 0 = no), with higher scores indicating more delinquent behaviors.

Adolescents’ experiences as victims and witnesses of violence were assessed with five items from the adolescent interviews asking how often adolescents had been shot at, cut, or jumped, had a gun or knife pulled on them, or had seen someone shot or stabbed. Scores were the sum of five items (1 = yes, 0 = no). Higher scores indicated more victimization.

Results showed that, overall, adolescents reported low levels of delinquent behavior (M = 1.81) and victimization (M = 0.39). Analyses also revealed no difference in adolescents’ delinquent behavior between offspring of same-sex couples and offspring of comparison families headed by different-sex couples. Similarly, we found no difference in adolescents’ experiences as victims or witnesses of violence as a function of family type.

Associations Among Family Relationships, Substance Use, Delinquency, and Victimization

Having found no associations between family type and adolescent risk behavior, we explored possible associations between processes in the adolescent’s environment and adolescent outcomes. We conducted regression analyses separately for use of tobacco, alcohol, and marijuana, as well as victimization and delinquent behavior. Family type, gender, parental education, and family income were included as predictors. Variables and interactions that were not statistically significant predictors were removed from the models.

Results showed that, as expected, quality of family relationships was significantly associated with many adolescent outcomes. Adolescents’ tobacco use was associated with parental report of the quality of the parent—adolescent relationship and with adolescents’ reports of caring from adults and peers. As expected, greater perceived care from others and more positive relationships were associated with lower levels of tobacco use.

Adolescents’ use of alcohol, use of marijuana, and delinquent behavior were associated with parental report of the quality of the parent—adolescent relationship, with more positive relationships associated with less use of alcohol and marijuana and less delinquent behavior. Interactions between family type and predictor variables were not significant. In summary, adolescents’ reports of family and relationship processes such as quality of the parent—child relationship and care from adults and peers were associated with several measures of adolescent outcomes, and were better predictors of adolescent risk behavior than was family type.

Adolescent Peer Relations

Another important dimension of adolescent adjustment is peer relations. To explore experiences with peers among the offspring of same-sex and other-sex couples, we studied not only the adolescents’ self-reported friendships but also their popularity among their peers, as described by their peers.

Adolescents’ reports of the quality of their peer relationships were measured with a scale of nine items, including questions about how much the adolescent feels friends care about him or her, feels close to people at school, and feels like a part of their school; as well as frequency of trouble getting along with other students, feeling that people were unfriendly, getting into any physical fights or serious physical fights, and being jumped. Negative items were reverse-coded. These items were standardized and the sum was taken, with higher scores indicating more positive relationships.

The adolescent’s perceived support from, and amount of time spent with his or her five best male friends and five best female friends were measured with 10 yes/no items (three items each about time with male friends and time with female friends; two items each about support from male friends and support from female friends). The support items asked whether the adolescent had talked to the friend about a problem or talked to the friend on the telephone during past seven days. The time items asked whether the adolescent had gone to the friend’s house, hung out with the friend during the past 7 days, or spent time with the friend during the past weekend. The three support items were summed for all five friends of each gender, and possible scores ranged from 0 to 15. The two time items were summed for all five friends of each gender, and possible scores ranged from 0 to 10. Higher scores indicated more support from or time spent with friends.

Adolescents’ self-report data on their friendship networks were available for a subset (n = 56) of adolescents in our sample. Analyses revealed that this subset of adolescents did not differ on family income or parental education from those adolescents for whom these data were not available. Our analyses of network variables are limited to this smaller sample.

The number of friends the adolescent reported having in his or her school was measured as the number of friendship nominations (up to 10) the adolescent made for students in his or her school. The presence of a best female friend was assessed
with a yes/no item indicating whether the adolescent nominated a female friend in
the school as his or her best friend. Similarly, the presence of a best male friend was
assessed with a yes/no item that indicates whether the adolescent nominated a male
friend in his or her school as a best friend. Peer-report network data were available
to augment the information provided by adolescents regarding their friendship
networks. As with the adolescent self-report network data, analyses of these data are
limited to the subset of adolescents \(n = 56\) for whom network data were available.
Variables constructed by Add Health staff (Carolina Population Center, 1997) from
peer-report data include adolescent popularity, network centrality, network density,
network heterogeneity, and several network traits.

Adolescents’ popularity was calculated as the number of times an adolescent
was nominated as a friend by other students in his or her school, with higher scores
indicating greater popularity in the adolescent’s network. Adolescents’ centrality
within their friendship network (Bonacich, 1987; Carolina Population Center, 1997)
assesses whether adolescents are located in prominent positions within their
friendship network and connected to many peers in their peer group. Higher numbers
indicate greater centrality.

The density of adolescents’ friendship networks, including students who were
ominated by the adolescent as a friend and students who nominated the adolescent
as a friend, assesses how many interconnections exist among students in the peer
group, which is related to how likely adolescents are to know others in their school
(Huynie, 2000). Higher numbers indicate greater network density.

In order to assess the degree of diversity in adolescents’ friendship networks,
which included students who were nominated as friends by the adolescent and
students who nominated the adolescent as a friend, we used heterogeneity measures
of grade, age, and race computed by Add Health staff. Higher numbers indicate
greater diversity in a trait. We assessed two characteristics of adolescents’ friend-
ship networks with the mean value on that characteristic or behavior for students in
the adolescent’s peer network. These characteristics included grades and number of
extracurricular activities. Higher scores indicate higher grades or more activities
(Carolina Population Center, 1997). Adolescents’ perceived care from adults and
friends was measured with three items regarding how much the adolescent believed
that adults, teachers, and friends care about them. The mean of the three items was
taken as the adolescent’s score, and possible scores ranged from 1 to 5, with higher
scores indicating perceptions of more caring.

Perceived parental warmth toward the adolescent was assessed using the mean
of five items from adolescent reports. Self-report items included adolescents’ per-
ceptions of parents’ warmth and caring toward adolescent, perceived level of fam-
ily’s understanding and attention, and adolescents’ feelings of closeness to parents.
For questions in which adolescents were asked about each of their parents, the
response for the parent who was described as more warm and loving was used.
Scores ranged from 1 to 5, with higher scores indicating greater warmth. Cronbach’s
Alpha for the parental warmth scale was 0.70 for this sample.

Adolescents answered 8 yes/no items describing activities adolescents some-
times engage in with their mothers. Adolescents reported whether or not they had

engaged in each of the activities with their resident mother in the past 4 weeks.
These items included going shopping, playing a sport, talking about someone the
adolescent is dating, going to the movies, discussing a personal problem, talking
about grades, talking about a school project, and talking about other things going
on in school. The eight items were summed, with possible scores ranging from 0 to 8.
Parents’ perceptions of the quality of their relationship with their adolescent were
assessed using a scale made up of six items, with higher scores indicating closer
relationships.

Analyses of the data were conducted in two major steps. The first set of analyses
evaluated the degree to which adolescents living with same-sex couples differed in
their family relationships and peer relations from the comparison group, and they
employed two-way (family type: same- vs. other-sex parents X gender of adoles-
cent) ANOVAs and MANOVAs. The second set of analyses explored associations
of adolescent peer relations with assessments of family and relationship processes.
Simultaneous multiple regression analyses were used to determine whether these
processes were significant predictors of adolescent adjustment, while controlling
for family type, adolescent gender, and socioeconomic status. We expected that
family type would be less important than family relationships and processes in
accounting for variation in the quality of adolescent peer relations, and that pro-
cesses related to positive outcomes for adolescents would be similar, regardless of
family type, and that no interactions between family type and relationship pro-
cesses would emerge.

Adolescents also reported that they spent time with between one and two male
friends and between one and two female friends, on average, in the past week
engaging in activities such as going to the friend’s home, hanging out, and talking
on the phone.

As expected, there were no differences in the number of friends that adolescents
ominated in their school nor in the quality of their peer relations as a function
of family type. Girls rated the quality of their peer relations slightly more pos-
itive than did boys, but this comparison did not reach statistical significance.
There was no significant difference between groups in the percentage of adoles-
cents who reported having a best male friend; 64% of adolescents with same-sex
parents and 68% of those with other-sex parents reported this. Adolescents who
reported having a best female friend (68% of adolescents with same-sex parents
and 40% of adolescents with other-sex parents, \(n=\) ) were somewhat more likely to
be living with same-sex couples, but this difference did not reach statistical
significance. Analyses of adolescents’ reports of time spent with and support
received from male and female friends also revealed no significant differences as
a function of family type. There was, however, a significant effect for gender;
girls reported more support from female friends than did boys. All of the analyses
were run again with family income and parent’s education as covariates. As the
results did not differ between the two analyses and as the influence of demog-
ographic characteristics was not a focus of our research, demographic results are
not presented here. Overall, adolescent reports of peer relations did not differ as
a function of family type.
With regard to peer reports of peer relations, adolescents in this sample were nominated as a friend by an average of almost five schoolmates. As expected, analyses of peer reports of the adolescent’s peer relations, including popularity, network centrality, and network density, revealed no significant differences as a function of family type. There was, however, a significant effect for adolescent gender, with girls having higher popularity ratings than did boys.

We also used peer report data to calculate the heterogeneity of the adolescent’s friendship network with respect to age, race, and school grades. On average, this sample of adolescents had networks that were moderately diverse, and there were no significant differences as a function of family type or adolescent gender. In summary, adolescents living with same-sex parents had friendship networks that were very similar in heterogeneity and member characteristics to those of adolescents living with other-sex parents.

Overall, as reported earlier, adolescents reported positive family relationships. Adolescents’ reports of parental warmth were high. With regard to time spent with their parents, adolescents reported an average of more than three activities with their mother in the past four weeks. As described, adolescents’ perceptions of others’ care for them were high, as were parents’ perceptions of the quality of the parent—adolescent relationship.

In line with our expectations, there were no significant differences in adolescent reports of family and relationship processes, including parental warmth, activities with mother, or care from others as a function of family type. Girls did, however, report higher levels of care from adults and peers, and greater participation in activities with their mothers, than did boys.

In order to assess the degree to which outcomes for adolescents in our focal and comparison samples differed from those for the population from which the samples were drawn, we obtained mean scores from the Add Health Core Sample for each of the dependent variables. Using one-sample t-tests and chi-squared tests, we compared means for our focal sample to those for the entire Add Health core sample. None of these comparisons was statistically significant. Thus, peer relations for adolescents with same-sex parents in our focal sample did not differ significantly from those of a nationally representative group of American adolescents.

We also explored possible associations between processes in the adolescent’s environment and adolescent peer relations. Simultaneous multiple regression analyses were used to determine whether these family and relationship variables were significant predictors of adolescent peer relations, while controlling for family type, adolescent gender, and socioeconomic status. Regression analyses were conducted separately for adolescents’ reports of the quality of their peer relations and the number of friends nominated by the adolescent as friends, as well as for peer reports of popularity, network centrality, and network density. Family type, adolescent’s gender, parental education, and family income were also included as predictors, with family type and adolescent gender remaining in all models for comparison. Demographic variables and family and relationship variables that were not statistically significant predictors were removed from the models.

Results showed that, as expected, family and relationship variables were significantly associated with many measures of adolescent peer relations. Adolescents’ reports of the quality of their peer relations were significantly associated with parents’ reports of the quality of the parent—adolescent relationship and with the adolescents’ reports of caring from adults and peers, with more positive parent—adolescent relationships and more perceived care from adults and peers associated with more positive peer relations. Similarly, the number of school friends reported by adolescents was associated with the quality of the parent—adolescent relationship and the number of activities done with mother, with more positive parent—adolescent relationships and more activities with mother associated with having more friends at school.

Peer reports of adolescent peer relations were also significantly associated with family and relationship variables. Peer reports of adolescents’ popularity were significantly associated with the number of activities with mother, with more activities with mother associated with greater popularity. Adolescents’ centrality in their peer networks was associated with the quality of the parent—adolescent relationship; more positive relationships were associated with greater network centrality. There was also a significant association between network centrality and parental education, with higher levels of parental education associated with greater network centrality. There were no significant associations among the density of adolescent’s peer networks and family and relationship variables.

In summary, adolescent peer relations were associated in expected ways with several family and relationship variables. Adolescent reports of care from adults and peers and number of activities with mother, as well as parental reports of the quality of the parent—adolescent relationship, were significantly associated with numerous measures of adolescent peer relations. Also as predicted, family type was not significantly associated with any measure of adolescent peer relations, but several associations were found among these measures and adolescent gender. Overall, these results suggest that family and relationship process variables are more important predictors of adolescent peer relations than is family type.

Summary of Results

The results of this research showed that, across a diverse array of assessments, including measures of adolescent adjustment, school functioning, delinquent behavior, victimization, substance abuse, and qualities of family and peer relationships, adolescents with female same-sex parents did not differ significantly from a matched group of adolescents living with different-sex parents. Regardless of family type, adolescents were more likely to report positive outcomes when they had close relationships with parents. Consistent with results from research with younger children, it was qualities of adolescent—parent relationships rather than family composition that was significantly associated with adolescent adjustment (Golombb, 1999).
Confidence in the present findings is bolstered by the strengths of the Add Health study (Bearman et al., 1997), which allowed for examination of important outcomes among adolescents living with female same-sex parents, compared with a well-matched sample of adolescents living with different-sex parents, using data from a large national sample. Results of our current study add significantly to those from earlier studies, which were most often smaller in their size, less representative in their sampling, and less comprehensive in their assessment of adolescent outcomes (Stacey & Biblarz, 2001). The clarity of results from our broad array of assessments, however, strengthens our confidence that adolescents living with same-sex parents were functioning well in many domains, both at home and at school. Despite many strengths of this research, however, there were also limitations. For instance, parents were not asked directly about their sexual identities, and we were thus forced to rely on indirect assessments (e.g., parents' reports of being in a "marriage or marriage-like relationship" with a person of the same sex). As a result, we were unable to identify or study adolescents who lived in households headed by single or divorced mothers. The sample size of the current study is larger than those of much of the previous research with this population, but the finding of no group differences would be strengthened by replication in larger samples.

An unexpected aspect of our results was the finding that adolescents' feelings of connectedness at school varied as a function of family type. Adolescents living with same-sex parents reported feeling more connected to school than did those living with other-sex parents. Inasmuch as school connectedness among adolescents has been associated with fewer problem behaviors and with greater emotional well-being (Resnick et al., 1997), this finding suggests that adolescents with same-sex parents might be expected to show more favorable adjustment. For measures of adjustment such as self-esteem and depressive symptoms, however, we found no effects of family type. Consequently, the best interpretation of this intriguing finding remains unclear.

With only one exception, processes linked to positive outcomes for adolescents were similar across family type. Only one interaction of family type and relationship processes emerged as statistically significant. This single significant interaction revealed that adolescents' perceived care from adults and peers was a better predictor of feelings of connectedness at school for adolescents with same-sex as compared to other-sex parents. While greater caring from adults and peers may be more tightly linked with school connectedness for the offspring of same-sex parents, it is not clear why that would be true of school connectedness but not no other outcome. Pending replication in other samples, this result should be viewed with caution. Overall, the family relationships and processes associated with positive adjustment were remarkably similar for adolescents with same-sex and other-sex parents.

General Discussion and Implications

The research summarized above suggests several substantive conclusions. In the section that follows, conclusions suggested by the research are enumerated briefly. This is followed by a discussion of their implications for theories of social development, and by an overview of their implications for family law and policy. The section concludes with a discussion of future directions for research.

Overview of Research Findings

The results of our research revealed that, on nearly all of a large array of variables related to school and personal adjustment, children and adolescents with same-sex parents did not differ significantly from carefully matched groups of those living with other-sex parents. Regardless of family type, youngsters were more likely to show favorable adjustment when they perceived more caring from adults and when parents described close relationships with them. Thus, it was the qualities of parent—child and parent—adolescent relationships, rather than the structural features of families (e.g., same- vs. other-sex parents), that were significantly associated with child and adolescent adjustment (Golombok, 1999; Patterson, 2000, 2006). These results are important both for their relevance to theories of development (Golombok & Tasker, 1994) and for their potential bearing upon laws and policies relevant to families headed by lesbian and gay parents (Patterson et al., 2002; Stacey & Biblarz, 2001).

Although family type was not related to most child or adolescent outcomes in this research, youngsters' adjustment was clearly linked with the qualities of relationships within the family. These results were consistent with expectations based on earlier work with children and adolescents in the population at large (Khauleque & Rohn, 2001; Steinberg & Silk, 2002). We found that, regardless of family type, when parents reported more satisfying relationships with their children and adolescents, these youngsters were likely to be developing in positive ways. In other words, adjustment was not linked with family type (e.g., same- vs. other-sex parents), but was strongly associated with the qualities of relationships within the family.

These results have emerged from research that involves many different groups of participants, living in many different parts of the United States. Both child and adolescent samples have been studied. Both white and nonwhite children and teenagers have participated. The results have emerged from our work and also from that of many other researchers. All of these factors add to confidence in the results.

These results have also emerged with great consistency from studies using a wide variety of research methods. Some research has employed survey and questionnaire methods to obtain self-report data from participants. Other studies have employed parents, teachers, and peers as informants. Still others have drawn on archival data such as school records. In all these cases, the convergence of findings obtained from divergent methodological approaches has been noteworthy.

Thus many concerns that were expressed about the early research in this area are no longer as compelling as they might once have been. Whereas early studies were based on convenience samples, much recent work employs stronger sampling methods. Whereas early studies relied heavily on self-reports, current research includes many other methodological approaches. Whereas early studies focused largely on upper-middle-class white samples, current studies involve a much wider
array of participants. Thus, one can have greater confidence than ever before in the conclusions based on findings of empirical research in this area.

**Implications for Theories of Socialization**

Major theories of human development have often been interpreted as predicting that children and adolescents living with same-sex parents would encounter important difficulties in their adjustment. This has been seen as especially true during adolescence (Baumrind, 1995). The fact that results from research fail to confirm such views leads to questions about the extent to which predictions of the theories have been disconfirmed (Patterson, 2000). In particular, results of recent research on children and adolescents who are not living with other-sex parents (e.g., Patterson, 2000; Stevens et al., 2002) suggest that theorists may need to reconsider the importance of different-sex parents for personal and social development (Silverstein & Auerbach, 1999).

A number of different approaches might be examined. It might be argued that certain kinds of family interactions, processes, and relationships are beneficial for children's development, but that parents need not be heterosexual to provide them. In other words, variables related to family processes (e.g., qualities of relationships) may be more important predictors of child adjustment than are variables related to family structure (e.g., sexual orientation, number of parents in the home). This approach has been taken in much research on other nontraditional family forms (Patterson & Hastings, 2006).

Many theoretical perspectives are compatible with an emphasis on function. For instance, attachment theory (Ainsworth, 1985a; b; Bowlby, 1988) emphasizes the functional significance of sensitive parenting in creating secure relationships, but does not stipulate the necessity of any particular family constellation or structure. Similarly, self-psychology (Kohut, 1971, 1977, 1984) describes the significance of mirroring and idealizing processes in human development, but does not insist on their occurrence in the context of any specific family structure. Perspectives such as attachment theory and self-psychology would appear to be compatible with an emphasis on functional rather than structural aspects of family life, and hence to provide possible interpretive frameworks within which to conceptualize further research in these directions.

**Implications for Law and Policy**

Our findings also have implications for public policies that involve children of lesbian parents (Patterson, 2007; Patterson et al., 2002). Inasmuch as the results of research suggest that children and adolescents living with same-sex parents develop in much the same ways as do those living with other-sex parents, they provide no justification for limitations on child custody or visitation by lesbian parents, nor do they provide justification of any kind for discrimination in regards to adoption or foster care (Wald, 2006). Our findings provide no warrant for legal or policy discrimination against adolescents with same-sex parents (Patterson et al., 2002).

As Pawelski and colleagues (2006) have shown, legal recognition of same-sex couple relationships is likely to prove beneficial both to same-sex couples and to their children (see also Wolfson, 2004). Through the financial benefits of same-sex marriage, domestic partnership or civil union, couples are likely to attain greater economic stability. Through social and emotional benefits, couples are likely to obtain greater happiness, support, and psychological security. Children of such couples are also likely to benefit. Results of the research described provide no reasons to deny such equal benefits to same-sex couples or to their children.

The results of research described also give no reason to discriminate in any way against lesbian or gay parents in matters relating to child custody or visitation (Patterson, 2007). When heterosexual parents divorce and one assumes a lesbian or gay identity, the other may attempt to use this in order to gain advantage in court. Inasmuch as the data reveal no reasons to believe that sexual orientation is important in parenting, there is no warrant for such discriminatory behavior.

Finally, the research results provide no support for denial or abridgement of the rights of lesbian or gay adults in matters relating to adoption or foster care. The results of research give no reason to consider sexual orientation of prospective foster or adoptive parents. On the contrary, the accumulated data suggest that lesbian and gay adults may represent a relatively untapped resource for children needing foster care or adoptive homes (Wald, 2006).

Overall, the results of research in this area can play an important role in legal and policy debates. By providing empirical evaluation of widely held ideas about lesbian and gay parents and their children, research can provide valuable information for use in the policy process. The availability of accurate information can help make it possible for law and policy to support all families.

**Future Directions**

Research on lesbian and gay parents and their children has been fruitful, but much remains to be learned. Sexual orientation and family life is a large topic, and it has only recently become the focus of research. There are many useful directions for future research to take.

There are a number of topics in need of greater study. We need to know more about the process of family formation among lesbian and gay individuals, especially about the ways in which stigma and discrimination may enter into the process. Adoptive families and families formed via surrogacy in the lesbian and gay community are in need of study. We need to know more about family processes, as they unfold over time, in different environments.

We need to learn more about how lesbian and gay parents and their children cope with prejudice and discrimination, both institutionalized and otherwise.
What are the costs and benefits to different approaches that families can take? How do individuals and families remain resilient, even in the face of massive discrimination? And how do the characteristics of environments make a difference, in this regard?

From a methodological perspective, many options for future research can also be discerned. For instance, work as that conducted by Gartrell and her colleagues, 1999, 2000, 2005) is very much needed in order to understand changes in family processes over time. Physiological assessments have yet to be well integrated with other assessment techniques in this area, but much could be gained from the effort to do so.

In conclusion, research on lesbian and gay parents and their children has already made many contributions. Research in this area has challenged significant theoretical traditions and informed legal and policy debates. Despite the progress of recent years, many avenues exist for researchers to pursue. Much remains to be learned about sexual orientation and family lives.

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References


Love, Marriage, and Bab: Sexual Minorities- and Bi 54th Nebraska Symposium

Marvin R. Goldfried

One of the benefits of being the discussor unconstrained and freewheeling in commer taken advantage of this benefit, and my cor sional, and political. After describing how I go on to discuss the heterogeneity of the “LGB” label, and the complications that s- These labels, although more sociopolitically are associated with discrimination and bias – as well. I also comment on some of the issu parenting, the change in attitudes toward s closing the gap between the LGB and main start with the personal.

My Involvement in LGB Issues

After many years of silence, I have decided man, but as the father of a gay son. My son I knew that he was probably gay when he \(1974)\) on gender atypicality, and saw that tics in young boys who eventually identifie ring to play with girls, dislike of rough-a professionals about what we should do, am was a long wait. We did what we could t encouraged him to go to a college that we came out to us during his freshman year.

This was all personal and did not become later. One major turning point occurred as Pride parade in New York City. As the Para Gays (PFLAG) contingent marched by, we lend them our support. It soon became evi. We were carrying signs reading “You wi