Technical Report: Coparent or Second-Parent Adoption by Same-Sex Parents

ABSTRACT. A growing body of scientific literature demonstrates that children who grow up with 1 or 2 gay and/or lesbian parents fare as well in emotional, cognitive, social, and sexual functioning as do children whose parents are heterosexual. Children’s optimal development seems to be influenced more by the nature of the relationships and interactions within the family unit than by the particular structural form it takes.

CURRENT SITUATION

Accurate statistics regarding the number of parents who are gay or lesbian are impossible to obtain. The secrecy resulting from the stigma still associated with homosexuality has hampered even basic epidemiologic research. A broad estimate is that between 1 and 9 million children in the United States have at least 1 parent who is lesbian or gay.1

Most individuals who have a lesbian and/or gay parent were conceived in the context of a heterosexual relationship. When a parent (or both parents) in a heterosexual couple “comes out” as lesbian or gay, some parents divorce and others continue to live as a couple. If they do decide to live separately, either parent may be the residential parent or children may live part-time in each home. Gay or lesbian parents may remain single or they may have same-sex partners who may or may not develop stepparenting relationships with the children. These families closely resemble stepfamilies formed after heterosexual couples divorce, and many of their parenting concerns and adjustments are similar. An additional concern for these parents is that pervasively heterosexual legal precedents have resulted in denial of custody and restriction of visitation rights to many gay and lesbian parents.

Increasing social acceptance of diversity in sexual orientation has allowed more gay men and lesbians to come out before forming intimate relationships or becoming parents. Lesbian and gay adults choose to become parents for many of the same reasons heterosexual adults do. The desire for children is a basic human instinct and satisfies many people’s wish to leave a mark on history or perpetuate their family’s story. In addition, children may satisfy people’s desire to provide and accept love and nurturing from others and may provide some assurance of care and support during their older years.

Many of the same concerns that exist for heterosexual couples when they consider having children also face lesbians and gay men. All parents have concerns about time, finances, and the responsibilities of parenthood. They worry about how children will affect their relationship as a couple, their own and their children’s health, and their ability to manage their new parenting role in addition to their other adult roles. Lesbians and gay men undertaking parenthood face additional challenges, including deciding whether to conceive or adopt a child, obtaining donor sperm or arranging for a surrogate mother (if conceiving), finding an accepting adoption agency (if adopting), making legally binding arrangements regarding parental relationships, creating a substantive role for the nonbiologic or nonadoptive parent, and confronting emotional pain and restrictions imposed by heterosexism and discriminatory regulations.

Despite these challenges, lesbians and gay men increasingly are becoming parents on their own or in the context of an established same-sex relationship. Most lesbians who conceive a child do so using alternative insemination techniques with a donor’s sperm. The woman or women may choose to become pregnant using sperm from a completely anonymous donor, from a donor who has agreed to be identifiable when the child becomes an adult, or from a fully known donor (eg, a friend or a relative of the nonconceiving partner). Lesbians also can become parents by fostering or adopting children, as can gay men. These opportunities are increasingly available in most states and in many other countries, although they are still limited by legal statutes in some places.

A growing number of gay men have chosen to become fathers through the assistance of a surrogate mother who bears their child. Others have made agreements to be coparents with a single woman (lesbian or heterosexual) or a lesbian couple.2–4 Still other men make arrangements to participate as sperm donors in the conception of a child (commonly with a lesbian couple), agreeing to have variable levels of involvement with the child but without taking on the responsibilities of parenting.

When a lesbian or a gay man becomes a parent through alternative insemination, surrogacy, or adoption, the biologic or adoptive parent is recognized within the legal system as having full and more or less absolute parental rights. Although the biologic or adoptive parent’s partner may function as

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a coparent, he or she has no formal legal rights with respect to the child. Most state laws do not allow for adoption or guardianship by an unmarried partner unless the parental rights of the first parent are terminated. An attorney can prepare medical consent forms and nomination-of-guardian forms for the care of the child in the event of the legal parent’s death or incapacity. These documents, however, do not have the force of an adoption or legal guardianship, and there is no guarantee that a court will uphold them. Some states recently have passed legislation that allows coparents to adopt their partner’s children. Other states have allowed their judicial systems to determine eligibility for formal adoption by the coparent on a case-by-case basis. Coparent (or second-parent) adoption has important psychologic and legal benefits.

Historically, gay men and lesbians have been prevented from becoming foster parents or adopting children and have been denied custody and rights of visitation of their children in the event of divorce on the grounds that they would not be effective parents. Legal justifications and social beliefs have presumed that their children would experience stigmatization, poor peer relationships, subsequent behavioral and emotional problems, and abnormal psychosexual development. During the past 20 years, many investigators have tried to determine whether there is any empiric support for these assumptions.

RESEARCH EVIDENCE

The focus of research has been on 4 main topic areas. Investigators have concentrated on describing the attitudes and behaviors of gay and lesbian parents and the psychosexual development, social experience, and emotional status of their children.

Parenting Attitudes and Behavior, Personality, and Adjustment of Parents

Stereotypes and laws that maintain discriminatory practices are based on the assumption that lesbian mothers and gay fathers are different from heterosexual parents in ways that are important to their children’s well-being. Empirical evidence reveals in contrast that gay fathers have substantial evidence of nurturance and investment in their paternal role and no differences from heterosexual fathers in providing appropriate recreation, encouraging autonomy, or dealing with general problems of parenting. Compared with heterosexual fathers, gay fathers have been described to adhere to stricter disciplinary guidelines, to place greater emphasis on guidance and the development of cognitive skills, and to be more involved in their children’s activities. Overall, there are more similarities than differences in the parenting styles and attitudes of gay and nongay fathers.

Similarly, few differences have been found in the research from the last 2 decades comparing lesbian and heterosexual mothers’ self-esteem, psychologic adjustment, and attitudes toward child rearing. Lesbian mothers fall within the range of normal psychologic functioning on interviews and psychologic assessments and report scores on standardized measures of self-esteem, anxiety, depression, and parenting stress indistinguishable from those reported by heterosexual mothers.

Lesbian mothers strongly endorse child-centered attitudes and commitment to their maternal roles and have been shown to be more concerned with providing male role models for their children than are divorced heterosexual mothers. Lesbian and heterosexual mothers describe themselves similarly in marital and maternal interests, current lifestyles, and child-rearing practices. They report similar role conflicts, social support networks, and coping strategies.

Children’s Gender Identity and Sexual Orientation

The gender identity of preadolescent children raised by lesbian mothers has been found consistently to be in line with their biologic sex. None of the more than 300 children studied to date have shown evidence of gender identity confusion, wished to be the other sex, or consistently engaged in cross-gender behavior. No differences have been found in the toy, game, activity, dress, or friendship preferences of boys or girls who had lesbian mothers, compared with those who had heterosexual mothers.

No differences have been found in the gender identity, social roles, or sexual orientation of adults who had a divorced homosexual parent (or parents), compared with those who had divorced heterosexual parents. Similar proportions of young adults who had homosexual parents and those who had heterosexual parents have reported feelings of attraction toward someone of the same sex. Compared with young adults who had heterosexual mothers, men and women who had lesbian mothers were slightly more likely to consider the possibility of having a same-sex partner, and more of them had been involved in at least a brief relationship with someone of the same sex, but in each group similar proportions of adult men and women identified themselves as homosexual.

Children’s Emotional and Social Development

Because most children whose parents are gay or lesbian have experienced the divorce of their biologic parents, their subsequent psychologic development has to be understood in that context. Whether they are subsequently raised by 1 or 2 separated parents and whether a stepparent has joined either of the biologic parents are important factors for children but are rarely addressed in research assessing outcomes for children who have a lesbian or gay parent.

The considerable research literature that has accumulated addressing this issue has generally revealed that children of divorced lesbian mothers grow up in ways that are very similar to children of divorced heterosexual mothers. Several studies comparing children who have a lesbian mother with children who have a heterosexual mother have failed to document any differences between such groups on personality measures, measures of peer group relationships, self-esteem, behavioral difficulties, academic success, or warmth and quality of family relationships. Children’s self-esteem has been
shown to be higher among adolescents whose mothers (of any sexual orientation) were in a new partnered relationship after divorce, compared with those whose mothers remained single, and among those who found out at a younger age that their parent was homosexual.22

Prevalent heterosexism and stigmatization might lead to teasing and embarrassment for children about their parent’s sexual orientation or their family constellation and restrict their ability to form and maintain friendships. Adult children of divorced lesbian mothers have recalled more teasing by peers during childhood than have adult children of divorced heterosexual parents.23 Nevertheless, children seem to cope rather well with the challenge of understanding and describing their families to peers and teachers.

Children born to and raised by lesbian couples also seem to develop normally in every way. Ratings by their mothers and teachers have demonstrated children’s social competence and the prevalence of behavioral difficulties to be comparable with population norms.8,24 In fact, growing up with parents who are lesbian or gay may confer some advantages to children. They have been described as more tolerant of diversity and more nurturing toward younger children than children whose parents are heterosexual.25,26

In 1 study, children of heterosexual parents saw themselves as being somewhat more aggressive than did children of lesbians, and they were seen by parents and teachers as more bossy, negative, and domineering. Children of lesbian parents saw themselves as more lovable and were seen by parents and teachers as more affectionate, responsive, and protective of younger children, compared with children of heterosexual parents.25,27 In a more recent investigation, children of lesbian parents reported their self-esteem to be similar to that of children of heterosexual parents and saw themselves as similar in aggressiveness and sociability.15

Recent investigations have attempted to discern factors that promote optimal well-being of children who have lesbian parents. The adjustment of children who have 2 mothers seems to be related to their parents’ satisfaction with their relationship and specifically with the division of responsibility they have worked out with regard to child care and household chores.28 Children with lesbian parents who reported greater relationship satisfaction, more egalitarian division of household and paid labor,29 and more regular contact with grandparents and other relatives were rated by parents and teachers to be better adjusted and to have fewer behavioral problems.

Children in all family constellations have been described by parents and teachers to have more behavioral problems when parents report more personal distress and more dysfunctional parent-child interactions. In contrast, children are rated as better adjusted when their parents report greater relationship satisfaction, higher levels of love, and lower interparental conflict regardless of their parents’ sexual orientation. Children apparently are more powerfully influenced by family processes and relationships than by family structure.

SUMMARY

The small and nonrepresentative samples studied and the relatively young age of most of the children suggest some reserve. However, the weight of evidence gathered during several decades using diverse samples and methodologies is persuasive in demonstrating that there is no systematic difference between gay and nongay parents in emotional health, parenting skills, and attitudes toward parenting. No data have pointed to any risk to children as a result of growing up in a family with 1 or more gay parents. Some among the vast variety of family forms, histories, and relationships may prove more conducive to healthy psychosexual and emotional development than others.

Research exploring the diversity of parental relationships among gay and lesbian parents is just beginning. Children whose parents divorce (regardless of sexual orientation) are better adjusted when their parents have high self-esteem, maintain a responsible and amicable relationship, and are currently living with a partner.22,31 Children living with divorced lesbian mothers have better outcomes when they learn about their mother’s homosexuality at a younger age, when their fathers and other important adults accept their mother’s lesbian identity, and perhaps when they have contact with other children of lesbians and gay men.22,24 Parents and children have better outcomes when the daunting tasks of parenting are shared, and children seem to benefit from arrangements in which lesbian parents divide child care and other household tasks in an egalitarian manner as well as when conflict between partners is low. Although gay and lesbian parents may not, despite their best efforts, be able to protect their children fully from the effects of stigmatization and discrimination, parents’ sexual orientation is not a variable that, in itself, predicts their ability to provide a home environment that supports children’s development.
REFERENCES


Technical Report: Coparent or Second-Parent Adoption by Same-Sex Parents
Ellen C. Perrin and Committee on Psychosocial Aspects of Child and Family Health
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