

Review Article

Lesbian Mothers, Gay Fathers, and Their Children: A Review

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ABSTRACT. There is a variety of families headed by a lesbian or gay male parent or same-sex couple. Findings from research suggest that children with lesbian or gay parents are comparable with children with heterosexual parents on key psychosocial developmental outcomes. In many ways, children of lesbian or gay parents have similar experiences of family life compared with children in heterosexual families. Some special considerations apply to the context of lesbian and gay parenting: variation in family forms, children's awareness of lesbian and gay relationships, heterosexism, and homophobia. These issues have important implications for managing clinical work with children of lesbian mothers or gay fathers. *J Dev Behav Pediatr* 26:224–240, 2005. Index terms: *lesbian, gay, mother-child relations, father-child relations, parenting.*

Pediatricians may encounter children with lesbian or gay parents in a number of health care contexts ranging from neonatal care to specialist clinics. Research into the psychosocial development of these children has indicated that development is similar in most respects to that of children with heterosexual parents. Research findings on the psychosocial development of children with lesbian or gay parents are reviewed in the first section of this review. The second section of this review examines key ways in which lesbian and gay parenting can differ from heterosexual parenting and considers how these differences may be accommodated within clinical practice. Both sections comprise a more detailed and comprehensive consideration of research findings, research strengths and limitations, and potential clinical implications than has been possible in recent technical reports and associated policy statements from the American Academy of Pediatrics on the topic of lesbian and gay parenting.^{1,2} Familiarity with the knowledge gained from studies of children brought up by lesbian or gay parents can inform the health care professional's approach to cases and his or her confidence in working with these families, facilitating an open dialogue between the professional, parents, and children.

How many lesbians, gay men, and bisexuals are involved in parenting? We can only estimate this figure since many lesbians, gay men, and bisexuals choose not to reveal their sexual identity. Estimates of the proportion of the population who identify as lesbian, gay, or bisexual vary widely from 4 to 17%, probably depending on the research

sample contacted and the way in which questions were asked.³ Large-scale surveys of lesbian and gay communities in the United States find that approximately one in five lesbians identify as mothers and about one in 10 gay men identify as fathers.⁴ Careful consideration of available data has led to an estimate of between 2 and 14 million children with lesbian or gay parents in the United States, with figures depending on the exact criteria employed.⁵ However, surveys may not have picked up the wide variety of informal parenting or caregiving arrangements that lesbians and gay men engage in as revealed by reports from small-scale studies that have used in-depth interviews to detail family relationships and responsibilities.

Parenting arrangements within families led by lesbians, gay men, or bisexuals vary widely. One of the main sources of diversity is the origin of the parenting relationship with the child. Many lesbian, gay, and bisexual parents had children within a previous heterosexual relationship, and some may continue to parent within an ongoing heterosexual relationship. For both parents and children, family relationships involve the challenge of finding ways to acknowledge the sometimes complex network of both opposite-gender and same-gender past and present relationships. Also, there may be other family events that have happened. Some of these children will have experienced the death of a parent and have to cope with bereavement. For others whose parents have separated or divorced, there may be difficulties relating to parental separation. Depending on how their parents manage their separation and whether the child has other resources and social support to draw on, the child might be more or less able to cope. Like other children of divorce, these children may have experienced conflict between their parents, financial problems, moving home

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and school, and changes in their own relationships with their resident and nonresident parent.⁶

In recent years the number of children with lesbian, gay, or bisexual parents has increased, with more lesbians and gay men having children in the context of an already established lesbian or gay identity. Survey data indicate that while lesbian women are as likely as heterosexual women to have parenting responsibilities to children living with them, they are more likely to become parents in nontraditional ways. However, for gay men, the greater difficulty involved in becoming a parent means that no form of parenthood is as common as among heterosexual men.⁵ Children are often born to lesbian mothers through donor insemination at a clinic or through self-insemination using donor sperm. Many gay men have become fathers through coparenting arrangements with lesbian mothers. Some of these men have been the sperm donors for lesbians achieving motherhood through self-insemination, while others have no direct biological connection with the child. Surrogacy agreements have enabled some gay men to become fathers.⁷ Gay men and lesbians also have become parents or carers through adopting or fostering children.⁸⁻¹¹

Our lack of knowledge in this area is particularly deficient when considering the parenting arrangements made by bisexual men and women. To date, conclusions on the developmental outcomes for children of nonheterosexual parents have been drawn mostly from studies that have recruited samples of self-identified lesbian or gay parents. While some bisexual parents openly identify as such, many do not. Consequently, it has been difficult for researchers to recruit an adequate sample. In the absence of research on the children of bisexual parents, this review has focused discussion only on the children of lesbian or gay parents.

CHILDREN RAISED BY LESBIAN MOTHERS AND GAY FATHERS: KEY DEVELOPMENTAL OUTCOMES

Research on lesbian and gay parenting has considered the influence of family background on children's psychosocial development. Research has focused on establishing evidence of outcome in relation to four key developmental areas: the quality of children's family relationships, psychological adjustment, peer relationships, and psychosexual development. Studies from North America and Europe have sampled children whose lesbian mothers had children in the context of a former heterosexual relationship that ended with separation or divorce (divorced lesbian mother families). Researchers have begun to examine developmental outcomes for children brought up by single lesbian mothers or lesbian couples from birth (planned lesbian mother families), although the eldest children featured in published research are still in early adolescence. Some empirical evidence has accumulated on the psychosocial development of children whose gay fathers had them in the context of a previous heterosexual relationship (divorced gay father families). Most of the children of divorced gay fathers do not live with their father after parental separation. Systematic research has so far not considered developmental outcomes for children brought up from birth by single

gay men or gay male couples (planned gay father families), possibly because of the difficulty of locating an adequate sample.

The following subsections review the developmental outcomes for children raised by lesbian or gay parents in the areas of their experience of family relationships and parenting, psychological adjustment, peer relationships, and psychosexual development. Literature searches were conducted based on key words "lesbian," "gay" "homosexual" with "parenting" via MEDLINE and PsychInfo considering publications from 1978 to January 2004. Material included in this review had to be published in an available journal or book and based on original analysis of empirical data relevant to developmental outcomes for children (excluded were reports of clinical case studies and research reports of limited circulation such as master's and doctoral theses and conference proceedings). Thus, the review aims to be comprehensive but is not exhaustive. Details on the samples studied and methods employed in the various studies directly contributing data on the key developmental outcomes reviewed have been summarized in Table 1. The strengths and limitations of existing research are considered subsequently in a later section.

Family Relationships and Parenting

How do children fare in families led by lesbian or gay parent(s)? Do they have close relationships with their lesbian mothers or their gay fathers? How do divorced nonresidential gay fathers manage their relationships with their children? What roles do lesbian partners or co-mothers play in the children's lives? What type of relationships do children have with their extended family? These are some of the questions addressed by researchers who have investigated the family relationships of children raised by lesbian or gay parents.

Divorced lesbian mother families. Several British and American studies published in the early 1980s considered the family relationships of children of divorced lesbian mothers, comparing parent-child relationships in these lesbian mother families with those in comparable single heterosexual mother families. These studies were unanimous in concluding that there were no systematic differences between the quality of family relationships of children of lesbian mothers and those of children living with single divorced heterosexual mothers.¹²⁻¹⁵ One study reported that children from lesbian mother families were more likely than children from single heterosexual mother families to visit their nonresident father on a regular basis,¹² although here it could have been the case that contact with father enabled these lesbian mothers to retain custody of children and so meet a criterion for inclusion in the sample.

Both groups of children of divorced lesbian mothers and children of divorced heterosexual mothers first interviewed by Golombok and colleagues¹² in the 1970s were reinterviewed in early adulthood in the British Longitudinal Study of Lesbian Mother Families.¹⁶⁻¹⁸ The young men and women interviewed generally reported good relationships with their mother and their nonresident father, and there were no group differences between those brought up by

Table 1. Studies of Lesbian and Gay Parenting: A Guide to Methodological Considerations

Study ^a	Sample ^b	Method	Developmental Outcomes Assessed ^c
Bailey et al. ⁵⁷ (1995)	55 gay/bisexual fathers 43/82 sons (ages 17–43 yr) also participating Convenience sample No control group	Questionnaire (mailed or telephone) developed by authors using Kinsey scale ratings	Sexual orientation
Barrett and Tasker ²³ (2001)	101 gay and bisexual fathers	Structured survey questionnaire developed by authors (based on questionnaire developed by Harris and Turner ⁵⁶ [1986]).	Parenting
Bigner and Jacobsen ^{19,20} (1989)	33 gay fathers Convenience sample Control group: single heterosexual fathers	Questionnaires (Iowa Parent Behavior Inventory; Value of Children Scale)	Family relationships and parenting
Bigner and Jacobsen ²¹ (1992)	24 gay fathers Convenience sample Control group of single heterosexual fathers	Questionnaire (Attitudes toward Fathering); Experimental task (Adult responses to Child Behavior)	Parenting
Bozett ^{37–39} (1987, 1988)	14 gay fathers and 19 children (ages 14–35 yr) Convenience sample No control group	Unstructured in-depth interviews (qualitative analysis using Grounded Theory methodology)	Family relationships and parenting; peer relationships, sexual orientation
Brewaeys et al. ⁴⁶ (1997)	30 lesbian couples 30 children (ages 4–8 yr) Register sample (from donor insemination clinic) Control groups: heterosexual couples (with a naturally conceived child); heterosexual couples (with a child conceived through donor insemination in fertility clinic)	Questionnaires to parents (developed for the study) (Child Behavior Checklist, Preschool Activities Inventory)	Psychological adjustment, gender role development
Vanfraussen et al. ²⁹ (2003)	24 lesbian couples (six separated couples continuing to coparent) 37 children (ages 7–17 yr) NB: Follow-up of subsample from Brewaeys et al. (1997) Teacher reports	Semistructured interview with child (qualitative analysis) Questionnaires to children (Child Behavior Checklist) Questionnaires to teachers	Family relationships, psychological adjustment, peer relationships
Vanfraussen et al. ⁴⁷ (2002)	Register sample (from donor insemination clinic) Control group: heterosexual couples (with naturally conceived children)	(Child Behavior Checklist, Perceived Competence Scale for Children) Questionnaires to parents (Child Behavior Checklist) Questionnaires to teachers (Child Behavior Checklist–Teacher’s Report Form)	Family relationships, psychological adjustment, peer relationships
Chan et al. ^{27,44} (1998)	55 lesbian couples and single lesbian mothers 55 children (average age 7 yr, minimum age 5 yr). Teacher reports Register sample (from donor insemination clinic) Control group: heterosexual couples and heterosexual single mothers (with a child conceived through donor insemination)	Questionnaires to parents (Child Behavior Checklist, Parenting Stress Index–Short Form, Center for Epidemiological Studies Depression Scale, Rosenberg Self-Esteem Scale, Who Does What? Locke-Wallace Marital Adjustment Test, Braiker & Kelley Partnership Questionnaire) Questionnaires to teachers (Child Behavior Checklist–Teacher’s Report Form)	Family relationships and parenting, psychological adjustment
Crosbie-Burnett and Helmbrecht ²² (1993)	48 gay fathers each with a gay male partner 48 children (ages 10–19 yr) Convenience sample No control group	Self-report questionnaire (modified version of Stepfamily Adjustment Scale)	Family relationships and parenting
Flaks et al. ⁴⁵ (1995)	15 lesbian couples 15 children (ages 3 to 9 yr) Teacher reports Convenience sample Control group: heterosexual couples (with a naturally conceived child)	Questionnaires to parents (Dyadic Adjustment Scale, Parenting Awareness Skill Survey, Child Behavior Checklist) Questionnaires to teachers (Child Behavior Checklist–Teacher’s Report Form) Child measures (Wechsler IQ tests for child as age appropriate: WPPSI-R or WISC-R).	Family relationships and parenting, psychological adjustment

Table 1. (Continued)

Study ^a	Sample ^b	Method	Developmental Outcomes Assessed ^c
Gartrell et al. ⁷⁴ (1996); also follow-up interviews by Gartrell et al. ^{34,68} (1999, 2000)	84 lesbian mother families Convenience sample No control group	Semistructured interviews with mothers (parenting and family relationships, stigmatization concerns and coping strategies, peer relationships)	Family relationships and parenting, peer relationships
Gershon et al. ³⁶ (1999)	76 adolescents (ages 11–18 yr) from lesbian mother families Convenience sample No control group	Questionnaires to children (Harter Self Perception Profile for Adolescents, Wills Coping Inventory, disclosure about mother's sexual orientation and perceived stigma questionnaires developed by authors)	Psychological adjustment
Golombok et al. ²⁴ (2003)	39 lesbian mothers 39 children (age 7 yr) Teachers' reports Community sample (half from Avon Longitudinal Study of Parents and Children) Control groups: heterosexual two-parent families; single heterosexual mothers	Semistructured interview with standardized rating scale administered to mothers. Child measures (Harter Pictorial Scale of Perceived Competence and Social Acceptance, Children's Peer Relations Scale, Activities Inventory) Questionnaires to mothers (Parenting Stress Inventory, State-Trait Anxiety Inventory, Beck Depression Inventory, Golombok Rust Inventory of Marital State, Strengths and Difficulties Questionnaire) Questionnaires to teachers (Strengths and Difficulties Questionnaire)	Family relationships and parenting, psychological adjustment, peer relationships, gender role development
Golombok et al. ¹² (1983)	27 lesbian mothers 37 children (ages 5–17 yr) Teachers' reports Convenience sample Control group single heterosexual mothers and children	Semistructured interview with a standardized rating scale administered to mothers Questionnaires to mothers (Malaise Inventory, Rutter "A" Scale) Questionnaires to teachers (Rutter "B" Scale)	Family relationships and parenting, psychological adjustment, peer relationships, gender role development
Tasker & Golombok ^{17,18} (1995,1997); also Golombok & Tasker ¹⁶ (1996)	25 young adults (ages 17–35 yr) raised by lesbian mothers Control group: 21 young adults raised by heterosexual mothers NB: follow-up of subsample from Golombok et al. ¹² (1983)	Semistructured interview with a standardized rating scale (British Longitudinal Study of Lesbian Mother Families) Questionnaires (State-Trait Anxiety Inventory, Beck Depression Inventory)	Family relationships and parenting, psychological adjustment, peer relationships, psychosexual development
Golombok et al. ²⁵ (1997)	30 lesbian mothers (15 single lesbian mothers, 15 lesbian couples) 30 children (ages 3–9 yr) Teacher reports Convenience sample Control groups: single heterosexual mothers and children; two-parent heterosexual families and children	Semistructured interview with standardized rating scale administered to mothers Child measures (adaptation of Separation Anxiety Test, Harter Pictorial Scale of Perceived Competence and Social Acceptance) Questionnaires to mothers (Parenting Stress Inventory, State-Trait Anxiety Inventory, Beck Depression Inventory, Rutter "A" Scale) Questionnaires to teachers (Rutter "B" Scale)	Family relationships and parenting, psychological adjustment, peer relationships, gender role development
Tasker and Golombok ²⁸ (1998)	15 lesbian couples 15 children (ages 3–9 yr) Convenience sample Control groups: heterosexual couples (with a naturally conceived child); heterosexual couples (with a child conceived through donor insemination via fertility clinic) NB: subsample of Golombok et al. ²⁵ (1997)	Semistructured interview with standardized rating scale administered to mothers Questionnaires to mothers and fathers (Parenting Stress Inventory) Child measures (Family Relations Test)	Family relationships and parenting
MacCallum and Golombok ²⁶ (2004)	25 lesbian mothers 25 children (average age 12 yr 1 mo) Teacher reports NB: Follow-up of sub-sample from Golombok et al. ²⁵ (1997)	Semistructured interview with standardized rating scale, separate interviews for mothers and children (Child and Adolescent Functioning and Environment Schedule, Social Adjustment Inventory for Children and Adolescents) Questionnaires to children (Children's Sex Role Inventory)	Family relationships and parenting; psychological adjustment; peer relationships; gender role development

Table 1. (Continued)

Study ^a	Sample ^b	Method	Developmental Outcomes Assessed ^c
Gottman ⁵⁵ (1990)	35 daughters (ages 18–44 yr) of lesbian mothers Convenience sample Control group: daughters of heterosexual mothers	Questionnaires to mothers and children (Expression of Affection Inventory, Conflict Tactics Scale) Questionnaires to mothers (Strengths and Difficulties Questionnaire, State-Trait Anxiety Inventory; Beck Depression Inventory) Questionnaires to teachers (Strengths and Difficulties Questionnaire) Questionnaires to children (Personal Attribute Questionnaire, Sexual Orientation Method, California Psychological Inventory)	Psychological adjustment, gender role development, sexual orientation
Green ⁵³ (1978)	21 children of 7 lesbian mothers Convenience sample of lesbian mothers (all of whom involved in child custody litigation with ex-husband) No control group (report includes data on children of transsexual parents)	Child measures (clinical interview, Draw-A-Person Test)	Gender role development, sexual orientation
Green et al. ¹³ (1986)	50 lesbian mothers 56 children (ages 3–11 yr) Convenience sample Control group: single heterosexual mothers and their children	Semistructured interview with a standardized rating scale administered to mothers Questionnaires to mothers (Bem Sex Role Inventory, Adjective Checklist, Jackson PRF-E, son or daughter questionnaire devised by authors for this project) Child measures (WPPSI or WISC, Draw-a-Person Test, interview devised by authors covering sexual identity, peer relations and preferred play activities)	Psychological adjustment, peer relationships, gender role development
Harris and Turner ⁵⁶ (1986)	10 gay parents and 13 lesbian parents Convenience sample Control group of 2 single heterosexual male parents and 14 single heterosexual female parents	Structured survey questionnaire developed by authors	Parenting, gender role development
Turner et al. ⁴¹ (1990)	10 gay fathers and 11 lesbian mothers NB: subsample from Harris & Turner ⁵⁶ (1986)	Structured interviews	Parenting
Hoeffer ¹⁴ (1981)	20 lesbian mothers 20 children (aged 6 to 9 years old) Convenience sample Control group: single heterosexual mothers and their children	Structured interviews with mothers (maternal preference for child's toys). Structured interviews with children. Child measures (adapted version of Block's Toy Preference Test)	Gender role development
Huggins ³⁵ (1989)	18 children of lesbian mothers (ages 13–19 yr) Convenience sample Control group: 18 children of single heterosexual mothers	Structured interviews with children Child measures (Coopersmith Self-Esteem Inventory)	Psychological adjustment
Javaid ⁵⁴ (1993)	26 lesbian mothers 26 children (ages 6–25 yr) Convenience sample Control group: 26 children of single heterosexual mothers	Nonstructured clinical psychiatric interviews with mothers Nonstructured clinical psychiatric interviews with children	Gender role development
Kirkpatrick et al. ¹⁵ (1981)	20 lesbian mothers 20 children (ages 5–12 yr) Convenience sample Control group: 20 children of single heterosexual mothers	Semistructured interviews with mothers. Semistructured interviews with children. Child measures (play-room observations; WISC; human figure drawing)	Family relationships and parenting; psychological adjustment; gender role development
Lewis ⁴⁹ (1980)	21 children of lesbian mothers (ages 9–26 yr) Convenience sample No control group	Semistructured interviews with children (psychodynamically oriented analyses)	Peer relationships

Table 1. (Continued)

Study ^a	Sample ^b	Method	Developmental Outcomes Assessed ^c
McCandlish ⁴³ (1987)	7 children of lesbian mothers (ages 1.5–7 yr) Convenience sample No control group	Structured interviews with mothers and children (interviewed together) Home observations of children (object-relations perspective)	Psychological adjustment; gender role behaviour
Miller ⁴⁰ (1979)	40 gay fathers and 14 children (ages 14–33 yr) Convenience sample No control group	Semistructured interviews with fathers Semistructured interviews with children (including Kinsey Scale ratings of sexual orientation) Participant observations of families	Family relationships and parenting; peer relationships; sexual orientation
O'Connell ⁵⁰ (1993)	11 children of lesbian mothers (ages 16–23 yr) Convenience sample No control group	Semistructured interviews (unspecified qualitative analysis of themes)	Peer relationships; sexual orientation
Patterson ⁴⁸ (1994); also Patterson ³⁰ (1995) and Patterson et al. ³³ (1998)	37 lesbian mothers (26 lesbian couples) 37 children of lesbian mothers (ages 4–9 yr) Convenience sample No control group	Structured interviews for mothers (family relationships) Standard open-ended interviews with children (on gender-role identity). Questionnaires to mothers (Who Does What? Locke-Wallace Marital Adjustment Test; Child Behavior Checklist). Child measures (Children's Self-View Questionnaire)	Family relationships and parenting; psychological adjustment; gender role behavior
Steckel ⁴² (1987)	11 lesbian mothers 11 children (ages 3–4 yr) Convenience sample Control group: 11 heterosexual couples (with a naturally conceived child)	Structured interviews with mothers Q-sort administered to parents and child's teachers Child measures: Projected Structured Doll Technique interview	Psychological adjustment
Wyers ⁵² (1987)	32 gay fathers and 34 lesbian mothers Convenience sample No control group	Face-to-face structured interviews with questionnaire component developed by author	Peer relationships

WPPSI-R, Wechsler Preschool and Primary Scale of Intelligence—Revised; WISC-R, Wechsler Intelligence Scale for Children—Revised.

^aResearch reports are listed alphabetically by author per table row, except where separate reports use the same participants (for these reports details are entered in same table row).

^bSample details are given only for those who directly participated in the study.

^cDevelopmental outcomes assessed correspond to the subsection categories used in the present review and may or may not be described as such in the original work.

lesbian mothers or heterosexual mothers. Since the first phase of the study, more than 80% of the single divorced heterosexual mothers had cohabited with a new male partner, or remarried, while a similar proportion of the original group of lesbian mothers had cohabited with a female partner. Therefore, in the follow-up interviews, most of the children in both groups could comment on their relationship with their mother's new partner(s). In general, sons and daughters from lesbian mother families reported more positive relationships with their mother's new partner compared with the young people from heterosexual mother families.¹⁸ In the lesbian mother families, the role that the mother's girlfriend took in the household varied considerably between families; sometimes she took on a major role in child care as "a second mother," while in other cases, the young person described their mother's partner more as "a big sister" or "a close family friend." The sons and daughters of lesbian mothers rarely described their mother's girlfriend as intruding on family relationships, whereas some of the young people with divorced and repartnered heterosexual mothers described their relation-

ship with their stepfather with some hostility, if he was seen as trying to take on a father's role.

Divorced gay father families. Current evidence suggests that the parenting of divorced gay fathers is similar to that of divorced heterosexual fathers. The gay fathers and heterosexual fathers contacted by Bigner and Jacobsen^{19–21} remembered similar kinds of reasons for wanting to become a father. Both the gay fathers and the heterosexual fathers were nonresident parents and reported similar degrees of involvement in their children's activities. In their responses to a parenting inventory, there were indications that the gay fathers tended to be stricter than the heterosexual fathers in setting appropriate standards for their children's behavior. Gay fathers also reported that they employed reasoning strategies and were responding to their children's needs more often than were the heterosexual fathers surveyed. The gay fathers also reported being more cautious than the heterosexual fathers in expressing physical affection to their partner in front of their children.

Two studies have considered the partnership status of divorced gay fathers and how this relates to quality of

parenting. High ratings of family satisfaction given by divorced gay fathers, gay male partners, and children were associated with the extent to which a new gay partner was reported to have become integrated into family life.²² Findings from the British Gay and Bisexual Parenting Survey (BGBPS) indicate that gay parents with male partners (and particularly men who lived with their lover) rated themselves as being more successful than single gay parents at managing a variety of common parenting challenges.²³

Planned lesbian-led families. Several studies have investigated the quality of family relationships for children raised in planned lesbian-led families; no published research has yet examined planned gay father families. Golombok and colleagues²⁴ investigated the quality of parent-child relationships in a community sample of lesbian mother families, two-parent heterosexual families, and single heterosexual mother families with elementary school-age children recruited via the Avon Longitudinal Study of Parents and Children (ALSPAC). In this study, interviews with mothers and co-mothers/fathers in each type of family were rated for the quality of parent-child interaction (ratings of the extent to which the parent enjoyed playing and spending time with the child and took responsibility for caregiving). Lesbian mothers reported positive relationships with their child; in fact, in comparison with the heterosexual mothers interviewed, the lesbian mothers reported smacking their children less and engaged more frequently in imaginative and domestic play. A separate previous study using the same measures with a self-selected sample of lesbian-led families found that children raised in planned lesbian single- or two-parent families experienced closer relationships with their birth mother than did the children in two-parent heterosexual families but not in comparison with children raised by single never married heterosexual mothers.²⁵ When these children were followed up at age 12 years, children in single- and two-parent lesbian mother families and single heterosexual mother families reported more daily interaction with their mother and perceived her as more available than did children from two-parent heterosexual families.²⁶ However, mothers in both the lesbian mother and single heterosexual mother groups generally reported more severe disputes with their children than did mothers in the two-parent heterosexual families.

Chan and colleagues²⁷ questioned parents with children conceived through donor insemination and found that while the lesbian couples and heterosexual couples reported relatively equal divisions of paid employment and of household and decision-making tasks, the lesbian couples shared child care more equally than did the heterosexual couples surveyed. Two other studies similarly report that the nonbiological mothers of the children in two-parent lesbian-led families were in general more involved in their children's care than were fathers in the two-parent heterosexual families.^{28,29} However, children's data have revealed no differences between children in lesbian-led and children in heterosexual families in terms of the warmth of the child's relationship with their nonbiological mother or father.²⁸ Two studies using independent samples have found that children whose lesbian parents shared child care were

reported to have higher levels of psychological adjustment.^{27,30} Findings from the ALSPAC data set indicate no differences between co-mothers and fathers in levels of parental warmth or involvement.²⁴ However, in comparison with fathers in heterosexual families in this study, the co-mothers in the lesbian-led family group smacked their children less frequently and tended to have fewer disputes with them. Various factors may explain these findings, including gender differences in parenting style or the information that about half of the co-mothers were in a stepparenting relationship with the study child, which may have meant they were more cautious in disciplining the child.

One concern for children with lesbian and gay parents may be that they and their parents would be isolated in a world full of heterosexual relationships and lack contact with their extended family. It is often suggested that relationships between lesbians and gay men and their families of origin may become strained during the "coming out" process, although many lesbians and gay men do report good relationships with at least some heterosexual relatives.^{31,32} Patterson and colleagues³³ reported that most of the children in planned lesbian-led families in their sample had regular contact with grandparents, other relatives, and male and female friends of their family. Children in regular contact with their grandparents were generally rated by their mothers as having fewer behavior problems, while children in regular contact with unrelated adults also rated themselves more positively on general psychological well-being. Findings from the National Lesbian Family Study similarly indicate mostly good relationships between lesbian-led families and grandparents.³⁴

Psychological Adjustment

The psychological adjustment of children of lesbian mothers has been systematically measured in many research investigations; however, little research has been conducted with children of gay fathers. Concern about the psychological well-being of children with lesbian and gay parents may reflect concern that family relationships (such as parental conflict, parental separation, and parental mental health problems) might negatively affect the mental health of the children concerned; however, none of these factors are directly connected with having a lesbian or gay parent. Reservations concerning the well-being of children of lesbian or gay parents also may arise because of the worry that children will be exposed to prejudice because of their family constellation and that this will make them more vulnerable to emotional distress and low self-esteem.

Divorced lesbian mother families. Findings concerning the psychological adjustment of children in lesbian mother families were first reported in studies collecting interview and questionnaire data on the development of school-age children who lived with their lesbian mothers after their mother and father separated or divorced.^{12,13,15} These studies were designed with single heterosexual mother control groups to establish whether there were any effects of being brought up in a lesbian-led family over and above possible effects of parental separation on children's psychological

adjustment; no differences were found. Green and colleagues¹³ also found no group differences in children's intellectual ability on standardized intelligence tests. In the study conducted by Kirkpatrick and colleagues,¹⁵ interviews with the child's mother were rated by an independent child psychiatrist, who was unaware of the mother's sexual orientation, as to whether the child showed symptoms of psychiatric disorder. There was no difference in the average psychiatric ratings of the children in the divorced lesbian mother and divorced heterosexual mother groups. Approximately 10% of children in both types of household were rated as having some level of diagnosable psychiatric disorder.

Golombok and colleagues¹² also made independent assessments, collecting class teacher's reports of the psychological adjustment of the children sampled. The scores of the children of divorced lesbian mothers did not differ from those of the children of divorced heterosexual mothers. Furthermore, the rates of problem behaviors noted for the children of lesbian mothers were within the normal range for children in heterosexual two-parent families. When the children in this sample were followed up in early adulthood, no group differences were found between the young people brought up by divorced lesbian mothers and the comparison group on either standardized questionnaire or interview data.^{17,18}

Low self-esteem is likely to be a precursor of poor mental health, and a couple of studies have examined the self-esteem of adolescent children of divorced lesbian mothers. Huggins³⁵ found no group differences in self-esteem scores between adolescent sons and daughters of divorced lesbian mothers and the adolescent offspring of a comparable group of divorced heterosexual mothers. Gershon and colleagues³⁶ focused on variation in self-esteem levels among adolescents from lesbian mother families. They found that adolescents who perceived higher rather than lower levels of stigma associated with having a lesbian mother tended to have lower self-esteem. The adolescents' assessment of their own coping skills influenced the extent to which the perception of stigma influenced their self-esteem. In the face of high perceived stigma, adolescents who reported more decision-making coping skills had higher self-esteem. But those adolescents who tended to rely on coping skills involving high levels of social support had lower levels of self-esteem if they perceived more social stigma associated with having a lesbian mother. Adolescents who disclosed more about their mother's lesbian identity reported higher self-esteem specifically regarding close friendships.

Divorced gay father families. No systematic evaluations of either the self-esteem or psychiatric state of the children of gay fathers have been published. Anecdotal reports from gay fathers and their children suggest no concern about serious emotional or behavioral problems.^{23,37-40} Turner and colleagues⁴¹ attributed any difficulties that their group of gay fathers saw their children having to the distress of parental divorce rather than having a gay parent. Although distress after parental separation is often mentioned, no study has systematically investigated how children respond to the loss of contact with a gay father or lesbian mother who loses custody or visitation rights with their children.

Planned lesbian-led families. Interviews,⁴² home observations,⁴³ and carefully controlled studies in the United States,⁴⁵ Belgium,⁴⁶ and Britain²⁴⁻²⁶ indicate that children born to lesbian mothers and children born to heterosexual mothers have similar levels of psychological adjustment. In the controlled studies, children were rated on standard measures of psychological adjustment as reported by the mothers themselves and independently by the child's class teacher. The study by Chan et al⁴⁴ of children aged around 7 years old conceived by donor insemination to single- or two-parent lesbian or heterosexual families found that neither family structure nor parental sexual orientation influenced scores on any measures of children's psychological adjustment. In this study, increased levels of parenting stress, parental conflict, and relationship dissatisfaction were associated with increased behavioral problems among the children concerned, irrespective of family structure or parental sexual orientation. In only one study did the children's class teachers report that 10-year-old donor insemination children from lesbian-led families experience more difficulties than naturally conceived children in heterosexual families (specifically in terms of attention problems), although neither data from the mothers or children themselves revealed any group differences.⁴⁷

No differences were found between preschool and school-age children born to lesbian couples by donor insemination and a comparison group of children of heterosexual couples in terms of intellectual ability or number of emotional problems reported by mothers.⁴⁵ In Steckel's⁴² research on socioemotional development, the children of lesbian mothers were compared with the children of single heterosexual mothers and found to be less aggressive and more affectionate, as rated by mothers and teachers and as seen in their performance on a projective measure. Patterson⁴⁸ reported that the scores of elementary school-age children in her sample of children born to (or adopted by) single lesbian mothers or lesbian couples did not differ from population norms of levels of social competence or behavioral problems or whether they saw themselves as being aggressive, sociable, or shy. The children in Patterson's study did tend to report more negative reactions to stress (for example, anger and fear) but also reported a greater sense of well-being (joy and contentment) than average for children of heterosexual parents. The reasons for these differences are not clear: They may either be linked to more exposure to stress in their everyday lives or reveal greater emotional responsiveness to both positive and negative experiences.

Golombok and colleagues²⁵ reported findings on the self-esteem of children from planned lesbian-led families comparing their scores with those of children in single heterosexual mother families and those of children brought up by their mother and father together. No differences were found in children's self-esteem domains of maternal or peer acceptance across the different family groups. However, the children in father-absent families were on average less confident about their physical skills and cognitive or academic abilities compared with children in father-present families, although no differences were observable between children in lesbian households and single heterosexual mother families in these respects. These results may indicate

that fathers are important in terms of the child's developing sense of self-esteem in physical and cognitive realms. Another possible explanation is that these school-age children may already sense societal disapproval of their family constellation, which may influence their developing sense of self. However, the group differences in self-esteem found by Golombok and colleagues in elementary school-age children have not been found at follow-up²⁶ or by other teams investigating children entering adolescence.⁴⁷

Peer Relationships and Peer Prejudice

One of the fears concerning the well-being of children of lesbian and gay parents is that they themselves will be subjected to prejudice because of the sexual identity of their parent(s). There is considerable variability in the extent to which lesbian and gay parents and their children can be "out" in public, and this likely depends on the level of acceptance and visibility of lesbian and gay people in the area in which they live. How children deal with the possibility of prejudice depends on how obvious they believe that their parent's sexual orientation to be, how much they identify with their parent's sense of being different, their age, and whether they live with their lesbian or gay parent. Several studies have assessed the peer relationships of children of divorced lesbian mothers or divorced gay fathers, considered whether these children experience prejudice, and examined the processes through which they mostly manage to avoid or cope with prejudice.

Divorced lesbian mother families. A few studies have investigated the quality of peer relationships among school-age children raised by lesbian mothers after parental divorce. Golombok and colleagues¹² found no differences in the quality of friendships experienced by children raised in lesbian or heterosexual families post-divorce. In each group, only two children showed clear signs of peer relationship problems, and about a third of the children in each group were reported by their mothers as having minor troubles with peer relationships (such as shyness, difficulty in maintaining friendships, and/or quarrelling). Green and colleagues¹³ also found no differences between children brought up by lesbian mothers post-divorce and those brought up by single heterosexual mothers post-divorce when considering either maternal ratings of children's sociability and social acceptance or their own perceptions of their popularity with peers.

Much of the concern about possible teasing and bullying from peers at school has focused on how the adolescent sons and daughters of lesbian or gay parents might cope with possible homophobic prejudice. The sons and daughters of the lesbian and single heterosexual mothers seen by Golombok and colleagues^{17,18} who were followed up as young adults were asked to reflect on their peer relationships over their school career. Those from lesbian mother backgrounds reported close friendships during adolescence, and over half of the group had been able to tell at least one close friend about their family background without encountering a negative response. When asked in general terms whether they had been teased or bullied during their high school years, young adults from lesbian mother families were no

more likely than those from heterosexual single-parent families to report having experienced peer stigma during adolescence. However, the daughters, and particularly the sons, of lesbian mothers did tend to be more likely than those in the comparison group to recollect peer group teasing about their own sexuality. They may either have been subjected to more peer prejudice or may have been more likely than the young adults in the comparison group to recollect teasing about sexuality given its pertinence to their family background. In two other studies, worries about losing friends and "being judged" were common concerns for adolescent children; however, no specific incidents of stigma were reported by the sons and daughters of lesbian mothers during their interview.^{49,50} Children coped with their concern by mostly keeping secret their mother's lesbian identity, although this often aroused feelings of shame and disloyalty.⁵⁰ How to deal with potential prejudice is a major concern among many lesbian mothers, and it is possible that children in lesbian-led families are often protected from prejudice against their lesbian mother(s) because of the way their family manage and negotiate interactions with the world outside their home.⁵¹

Divorced gay father families. Estimates vary as to how likely children with gay fathers are to experience stigma and relationship problems with peers or adults outside the family. Wyers⁵² reports that 74% of the children of gay fathers in his survey were believed by their fathers to have experienced some relationship problems because of their father's sexual identity. Many of the relationship problems reported consisted of children's concerns about what to tell others about parental sexual orientation or worrying that they might be ostracized by peers. Only a fifth of fathers reported that their children had experienced any actual incidents of prejudice or discrimination. Studies reporting findings from in-depth interviews with gay fathers and their children found only a few instances in which children recalled experiencing homophobia because of having a gay father.³⁷⁻⁴⁰ Bozett's analyses of the interview material that he collected reveal the effectiveness of the "boundary control" strategies exercised by both gay fathers and their children. Most of the gay fathers whom Bozett interviewed were alert to circumstances in which there was potential for prejudice and then took steps to avoid disclosure to protect their children; for example, avoiding public display of any gay signifiers (such as jewelry or books) or taking steps to evade detection that a male friend was in fact their partner.³⁷ Most children were able to work out who they could safely tell about their father's sexual identity.³⁸

Planned lesbian-led families. To date, evidence of the peer relationships of children in planned lesbian-led families is limited, perhaps because researchers in this area have focused on preadolescent children and concern about peer relationships has mostly been raised in connection with adolescent children. Golombok and colleagues²⁴ report a nonsignificant trend toward greater peer relationship difficulties among children in lesbian-led families than in the comparison groups as indicated by mothers on a standardized inventory, but neither the children themselves, nor their class teachers, indicated that children with lesbian mothers were experiencing more peer relationship problems than controls.

Data from children, mothers, and teachers indicate that children in the early years of adolescence were no more likely to experience peer relationship difficulties than were children in either single- or two-parent heterosexual families.²⁶ The Belgian study of 10-year-old children in planned lesbian-led families found that most children told close friends about their two-mother family unit and that most friends reacted positively to this. Comparative data from the same study revealed that children in lesbian-led families were no more likely than children in heterosexual families to report being teased generally by peers, although they were specifically more likely to report family-related teasing incidents.⁴⁷

Psychosexual Development: Gender Role Development and Sexual Orientation

One of the most researched aspects of the development of children of lesbian mothers and gay fathers is their psychosexual development. Several of the early studies of divorced lesbian mothers investigated the consequences for children's early gender role development, and this also has been examined for children in planned lesbian mother families. More recently, a number of studies have investigated whether the adult sons and daughters of lesbian mothers or gay fathers are likely to be gay or lesbian themselves. Having a lesbian or gay parent does not seem to influence gender role development, and the large majority of sons and daughters of lesbian or gay parents grow up to identify as heterosexual. Growing up with a lesbian or gay parent may be associated with broadening the young person's consideration of possible sexual identities.

Divorced lesbian mother families. Several aspects of children's early gender role development have been assessed by studies comparing the development of children of lesbian mothers post-divorce with that of a comparable group of children of single heterosexual mothers. Researchers, who have investigated the preferred toys, games, activities and friendships of children of lesbian mothers, have found children's preferences to be no different from those of other children; the sons of lesbian mothers preferred masculine toys or activities and the daughters chose feminine ones.^{12-15,53,54} In one study, the lesbian mothers were more likely than the heterosexual mothers to indicate that they preferred their child to play with a mixture of masculine and feminine toys, but maternal preference appeared to have no connection with the actual toys and activities chosen by daughters and sons.¹⁴ There also seems to be no evidence that the children of lesbian mothers are deprived of contact with adults of the opposite gender if they live with their lesbian mother after parental divorce. Kirkpatrick and colleagues¹⁵ found that, in comparison with the heterosexual mothers in their study, the lesbian mothers interviewed were more concerned that their sons and daughters should have contact with men and also took more steps to ensure it.

Studies that have researched samples of lesbian mothers with adolescent or young adult sons and daughters have investigated whether the children of lesbian mothers are themselves likely to identify as lesbian, gay, or bisexual. An

early clinical investigation found that all four adolescent sons and daughters of lesbian mothers interviewed reported only heterosexual erotic fantasies.⁵³ Similarly, only one daughter identified as lesbian in O'Connell's⁵⁰ sample of 11 sons and daughters of lesbian mothers, although nine sons and daughters remembered previously thinking that they might be lesbian or gay and fearing possible prejudice because of it. Gottman⁵⁵ surveyed the adult daughters of divorced lesbian mothers and compared their reports of sexual fantasies and sexual object choice (not actual behavior) with those indicated by adult daughters of divorced heterosexual mothers. Approximately 74% of the daughters in either group of lesbian or heterosexual mothers indicated heterosexual object choice, while 16% in both groups indicated homosexual object choice only and 8% indicated both same-sex and opposite-sex object choice. Although the sexual orientation of the adolescent offspring was not specifically sought at interview, many of the adolescents interviewed by Huggins³⁵ spontaneously discussed their own sexuality. Whereas one of the 18 adolescent children of divorced heterosexual mothers identified as homosexual, none of the 18 adolescent sons and daughters of divorced lesbian mothers surveyed did.

Findings from the British Longitudinal Study of Lesbian Mother Families (BLSLMF) also indicate that the large majority of children who grew up in lesbian-led families identify as heterosexual on reaching adulthood.¹⁶⁻¹⁸ Only two of the children of lesbian mothers, both daughters, identified as lesbian. Interestingly, statistical analyses of the BLSLMF interview data revealed no differences in the proportions of the young adults from lesbian and heterosexual mother groups who reported feelings of same-gender attraction. However, those from lesbian families were more likely to consider the possibility of having a same-sex relationship and also to have had one. Analyses of the prospective data indicated that those who showed more interest in same-gender sexual relationships were those whose childhood family environment had been characterized by an openness and acceptance of lesbian and gay relationships.¹⁶ Irrespective of whether the young person had same-gender or opposite-gender sexual relationships, both sons and daughters of lesbian mothers were more able than those with heterosexual mothers to discuss sexual matters with their mother.¹⁸

Divorced gay father families. Data on the gender role behavior of children of gay fathers come from a small survey of gay fathers.^{41,56} Compared with the more feminist lesbian mothers also surveyed, the gay fathers in the sample were more likely to report that they encouraged their children to play with sex-typed toys. Findings from interviews with some of the gay fathers and lesbian mothers indicate that nearly all their children age 12 years and younger seemed to be developing typical sex-role identification and that sons and daughters also showed typical sex-typed behavior.

A number of researchers have reported findings on the sexual orientation of the young adult children of gay fathers. As with the children of lesbian mothers, the majority of children of gay fathers grow up to be heterosexual. Bailey and colleagues⁵⁷ surveyed gay fathers to ask whether their

sons older than the age of 17 years were heterosexual, bisexual, or gay (half of this group of sons also completed telephone interviews so that data supplied by fathers could be confirmed). More than 90% of sons were reported by their fathers to be heterosexual, with only 9% of sons considered gay or bisexual. Further analyses examined the factors associated with the sexual orientation of sons. None of the environmental features considered—the number of years that sons had lived with fathers, frequency of contact with their fathers, sons' present acceptance of their fathers' gay identity, or the quality of the father-adult son relationship—distinguished heterosexual from gay or bisexual sons. Bailey et al.⁵⁷ consequently argued that a small effect of genetic transmission is the most plausible explanation for the proportion of gay and bisexual sons identified. Other studies, unfortunately with smaller sample sizes, considered the sexual orientation of both sons and daughters of gay fathers. In the study by Turner and colleagues,⁴¹ none of the children older than 12 years were reported by their gay fathers to have indicated any interest in gay or lesbian relationships. Miller,⁴⁰ from his interviews with gay fathers, found that only one of the 21 sons and three of the 27 daughters were considered to be gay, lesbian, or bisexual. In the group of 19 children of gay fathers interviewed by Bozett,³⁸ two sons identified as gay and one daughter considered herself bisexual. Findings from the British Gay and Bisexual Parenting Survey (BGBPS) indicate that gay or bisexual fathers generally did not think that either sons or daughters had experienced difficulties in the development of their own sexuality, while a nonsignificant trend in the data suggested that fathers thought that sons especially benefited from having a gay or bisexual father in terms of helping the young person to accept his own sexuality.²³

Planned lesbian-led families. No studies have examined the gender development of children in planned gay father families. Several studies have evaluated the gender development of children born to lesbian mother(s), and these reach different conclusions. Studies in the United Kingdom,²⁴ Belgium,⁴⁶ and the United States⁴⁸ have found that preschool- and elementary school-age boys and girls born to, or adopted by, lesbian mothers show typical gender role behaviors according to maternal report and at home observation.⁴³ The results of another study may indicate possible gender role differences in early adolescence: Sons of both lesbian mothers and single heterosexual mothers showed more feminine, but no less masculine, characteristics of gender role behavior than did sons of heterosexual parents.²⁶ Different results for children and adolescents may reflect real developmental differences or be a product of methodological differences (the investigation of the gender role behavior in childhood in contrast to the measurement of attitudes and self-perception in adolescence).

Limitations of Existing Research and Research Recommendations

Studies on children with lesbian and gay parents have been conducted by different research teams from North America and Western Europe and constitute important evidence that children are generally not influenced by their

parent's sexual orientation on the key developmental outcomes assessed. Much more research is needed, not only to explore uncharted aspects of family life, such as how children fare in planned gay father families or with adoptive lesbian or gay parents, but also to check some of the inadequacies of existing research.

Problems have been identified with the concepts and categories used in research on lesbian and gay parenting, and it has been argued that the research field itself is constrained by heterosexism (the ubiquitous assumption that everyone is heterosexual and that this is desirable).⁵⁸ The conceptualization of sexual identity has been mostly unsophisticated in existing research. Little is known about the sexual identities or sexual histories of participating parents except that they self-identified as lesbians or gay men, ignoring the fluidity and complexity of definitions of sexual orientation. Future studies need to use a battery of questions to examine variability in the sexual identities and sexual histories of both parents and their sons and daughters. Stacey and Biblarz⁵⁸ also argue that existing research has a heterosexist focus in addressing concerns raised about whether the children of lesbian or gay parents are disadvantaged, which has meant comparing lesbian and gay parenting outcomes with those set by heterosexual parent control groups and population norms. This has left difference and diversity in lesbian and gay parenting and child outcomes underexplored and unappreciated. Studies have not examined whether children of lesbian and gay parents are advantaged in terms of increased awareness or tolerance of diversity.⁵⁹ Researchers also have not examined why and how lesbian or gay parents are oppressed or considered possible interventions to prevent this.⁵⁸

The diverse ways in which developmental outcomes have been defined and measured have created difficulties for systematic review. Probably for this reason only one review paper has attempted a meta-analysis of research findings in this area, and these authors only considered psychological adjustment and sexual orientation (the two most clearly delineated developmental outcomes).⁶⁰ With few exceptions, many of the research methods used in the studies listed in Table 1 have untested validity or reliability and only a few have population norms, for example, the Child Behavior Checklist.⁶¹ Only the methodologically stronger studies have sought confirmation of assessed developmental outcomes from a teacher or other adult outside the family circle,^{12,24–26,42,44,45,47} whereas weaker studies do not have independent reporters to validate parent or child self-report.

The majority of lesbian and gay parents and their children participating in studies have been recruited through advertising (the convenience samples identified in Table 1). In many contexts, it is still not safe for lesbians and gay men to be publicly "out" about their sexuality, so a representative sample of lesbian and gay parents and their children probably constitutes an unattainable goal at present.

Consequently, most of the lesbian and gay parents who have participated in research have been white, middle class, and more "out" about their sexuality, and we know little about how sexual identity and ethnicity interact in relation to lesbian and gay parenting.⁶² The few studies that have moved beyond some of these sampling constraints are those on

children in planned lesbian-led families that have used fertility clinic records to contact a systematic sample,^{27,29,44,46,47} but since many lesbians bypass fertility clinics, findings from these studies may not be representative of children in planned lesbian-led families generally. Golombok and colleagues²⁴ recruited approximately half of their lesbian-led families from the ALSPAC in Britain but to boost their sample size used snowballing to contact additional families through ALSPAC participants. These authors report that only about one fourth of the lesbian mothers in this sample conceived their children through fertility clinics.

Studies with larger, representative samples are needed to confirm existing findings. Data displayed in Table 1 reveal that most of the studies reviewed had relatively small sample sizes, thus increasing the possibility of type II errors (the chances of concluding that no group differences exist when the groups actually do differ to some extent). Constrained by heterosexism and homophobia, most national surveys have not asked respondents questions about sexual identity; therefore, it has not been possible to locate a random representative sample of children with lesbian or gay parents. Routine inclusion of appropriate questions in national surveys would be useful in this respect, yet this crucially depends on increased public acceptance of diversity.

Many of the studies of children of lesbian mothers include control groups of children of heterosexual mothers (details of any control groups employed are listed in Table 1 under the relevant studies). While current studies have yet to employ matched-pair designs, many have been able to match study and comparison groups and thus begun to rule out potential confounding variables such as the age of children and parent(s), family structure, route to parenting, socioeconomic status, and sometimes other characteristics such as ethnicity and family size.

None of the lesbian mother studies reviewed in Table 1 indicate that the participating lesbian mothers, or their children, were blind to the objectives of the research. Some of the studies attempt to collect, or at least score, part or all the data with the researcher blind to the study group or hypotheses.^{12,13,15–18,24–26,35,36,44–48,55} Without these quality control procedures, conscious or unconscious biases may have been introduced.

Research on children from gay father families is even more limited than that on children in lesbian-led families. Few research teams have focused on gay fathers and their children, perhaps because gay fathers are less likely than lesbian mothers to have their children living with them. In general, research on the children of gay fathers lacks the sophistication of much of the research on children of lesbian mothers. Just one of the gay father studies listed in Table 1 blinds participants, as well as the researchers collecting and scoring data, to the study's objectives and design.⁵⁷ Only a few studies have contacted the children of gay fathers to cross-validate data gathered from fathers, and these studies have lacked control groups of comparable children of heterosexual fathers.^{37–40,57} Also, absent from published research on children of gay fathers are confirmatory reports on the child's well-being from an independent source, such as the child's class teacher, or data from independent observers, for example, on father-child

interaction. Therefore, extra caution is needed in interpreting the findings from existing research on gay fathers and further research is required.

Research funding and research agendas have been shaped by the assumption that patients and their families are heterosexual. Reviews of health care services for lesbian and gay patients and their families reveal that lesbians, gay men, and bisexuals perceive widespread discrimination.^{63,64} We have limited knowledge about certain areas of family life for children brought up by lesbian or gay parents that may be particularly relevant for pediatric practice, and research is needed on how children and lesbian and gay parents perceive pediatric services.⁶⁵ For instance, little is known about whether maternity and early pediatric services adequately meet the needs of children of lesbian mothers or gay fathers. We know that lesbian mothers-to-be, and especially lesbian co-mothers-to-be, often feel marginalized in attending fertility clinics, and in Britain private fertility and maternity services have been set up outside the British National Health Service especially to cater for the needs of lesbian mothers and co-mothers.⁶⁶ McCandlish⁴³ found that the five lesbian co-mothers in her study felt generally unacknowledged by extended family and others outside the home during the pregnancy. Perhaps because of this, the lesbian co-mothers also recollected some initial anxieties about "bonding" with the child, although both mothers and co-mothers reported strong family relationships at the time that they were interviewed (when children ranged in ages between 18 months and 7 years old).

THE CONTEXT OF LESBIAN AND GAY PARENTING: KEY ISSUES AND IMPLICATIONS FOR PRACTICE

The research reviewed above suggests that lesbian or gay parenting does not affect children's functioning on key developmental outcomes. However, the context of lesbian and gay parenting does differ from that of heterosexual parenting on several counts: variation in family forms, children's awareness of parental sexual identity, and the impact of heterosexism and homophobia. Clinical work would benefit from reviewing the implications of these differences in parenting experience for children in lesbian mother or gay father families.

Variation in Family Forms

It is important for the pediatrician to carefully assess the assignment of parental responsibilities within each child's family; in relation to any particular health care issue, who cares for the child's physical or emotional well-being on a day-to-day basis? As reviewed above, there are many family forms in which lesbian and gay parenting occurs; children may be parented by a single lesbian mother or gay father or by a lesbian or gay couple. Ex-partners, friends, sperm donors, egg donors, or surrogates may provide additional parenting. When a mother and/or father are bisexual, family relationships may be even more complex. Responsibilities for each child's well-being may be shared among family members in different ways at different times. The longevity of family relationships is likely to be a key

factor affecting the strength of parenting relationships. Just as in heterosexual families, the end of a lesbian or gay couple relationship or the start of a new relationship may mean reconsideration of parental responsibilities and a need for new explanations of family relationships.⁶⁷ It is also important to recognize that in many lesbian mother or gay father families, those who the child considers as parents may not themselves be together in an intimate relationship. Furthermore, children living under the same roof may not share the same parents.

Various reports and research findings suggest that greater acknowledgment needs to be given to the strength of children's relationship with their co-mother in planned lesbian-led families and to the co-mother's involvement in child care^{10,27-30,68} and with the mother's lesbian partner in divorced lesbian mother families.¹⁸ Recognition also needs to be given to the parenting role that the male partners of gay fathers play.²²

Many lesbians and gay men have developed extensive social networks that offer support beyond that experienced in most friendships reported by heterosexual men and women in times of crisis, such as the illness of a child. These networks have been characterized as "families of choice" in which relationships are bound by mutual obligations of emotional, practical, and/or financial support.^{69,70} These relationships effectively function as kinship relationships, and in describing how the child of lesbian or gay parents is supported by family relationships, it is necessary to consider these connections.

Implications. In assessing each child's health care needs, care should be taken to involve the whole family and consider the relevant emotional and practical support systems that family members can call on. One issue that lesbian mother or gay father families might need to address at a family consultation is whether family members hold different definitions of family relationships and responsibilities in relation to a particular health care issue and how these differences can be accommodated. For example, a daughter may seek emotional support from her mother's ex-girlfriend, whereas her mother's new partner may feel that this is inappropriate because she manages most of her daily physical care.

Routine invitations to consultations and greater consideration of the views of coparents and partners in each case would be a useful starting point with respect to involving nonbiological parents. Alongside this, health care professionals obviously need to be aware of the local legal requirements on who can give medical consent for the child's health care treatment. Legal recognition of a nonbiological parent's status varies between different countries and states. Various arguments have been put forward in favor of coparent or second-parent adoption because of the psychosocial, economic, and legal benefits that it may bring to the child in recognizing and clarifying existing family relationships.^{1,2,10,71}

The Child's Awareness of Lesbian and Gay Relationships

One issue that pediatricians and other health care professionals who come into contact with the children of lesbian

and gay parents may encounter is whether the child is aware that his or her parent(s) is (are) lesbian or gay. This likely depends on the child's age and on whether he or she has grown up with openly lesbian or gay parent(s) or whether a parent has identified as lesbian, gay, or bisexual after having children. Fathers in the British Gay and Bisexual Parenting Survey (BGBPS) indicated that older children were more likely than younger children to show awareness of their gay or bisexual parent's identity.²³ In the BGBPS, those fathers whose children were aware of having a gay father reported greater acceptance from daughters than from sons in relation to their father's coming out. Most of the young adults with divorced lesbian mothers who were followed up in the British Longitudinal Study of Lesbian Mother Families (BLSLMF) could not recollect a particular incident when they became aware that their mother was lesbian; some remembered finding out when their mother told them, but most described a gradual dawning of realization.¹⁸ Young adults whose mothers identified as lesbian early on in their sons' or daughters' life generally reported that they first became aware of being different from other children because their fathers did not live with them. Only later did they realize that they were different because their mother had a close relationship with a woman. They usually became aware of the sexual aspect of their mother's lesbian relationship only after understanding sexual relationships more generally; for example, one daughter recalled having seen their mother and her partner sharing a bed, but this was not remembered as having sexual connotations or even viewed as out of the ordinary.

As yet researchers have not investigated how awareness of their parent's sexual identity comes about for children brought up from birth by lesbian or gay parents. Growing up in an openly lesbian or gay environment will likely lead to gradual awareness of the different implications of lesbian or gay identity. Reviewing the story of how they were born and how their family formed may be particularly important for children conceived by donor insemination or children fostered or adopted by lesbian or gay parents. Age-appropriate explanations will need updating, and changing family circumstances may require a reconsideration of these issues.⁷ Research suggests that compared with heterosexual parents using donor insemination services lesbian parents tend to be more open with their children about donor insemination.⁷²⁻⁷⁵ Developing different ways of explaining and denoting biological and social relationships is likely to play a part in achieving greater openness. For example, in planned lesbian-led families, there will be different ways of denoting family relationships; in some lesbian couples, both women will be called "mother" or "mama" by the child, and in other cases, one might be called by her first name or a nickname. Similarly, families will vary as to whether the sperm donor is involved in the child's life and how he is referred to by the family.

Implications. In a general way, pediatricians and other health care professionals can be useful in providing information for lesbian and gay parents and their children by depicting a variety of family forms and providing age-appropriate descriptions of several ways in which conception occurs. Mitchell⁷⁵ suggests that "Giving language and

visibility to variations in family form and reproductive technology affords children of lesbian and gay families a sense of reality, and enhances their feelings of inclusion and legitimacy.”

It is also useful to review information provided at the clinic and the general clinical environment to consider whether these depict a wide enough range of family forms. For example, information leaflets and posters may depict only heterosexual couples caring for children and medical forms may ask for marital status rather than relationship to the child.^{65,71,76}

In families in which a parent has recently announced a lesbian or gay identity, it may be useful for the clinician to consider the child's understanding of this in relation to the child's age and with respect to his or her family. A useful model of children's differing responses to their mothers' sexual identity from heterosexual to lesbian has been outlined.⁷⁷ This model suggests that children may move from denial or anger through depression to later acceptance, and various ways to help lesbian mothers support their children are explored. It is also important for health care professionals and pediatricians to recognize that the child's understanding of his or her family and how their family unit is viewed by others outside their family may not be fully developed. For example, a young girl may not recognize that the man with whom she and her father have lived for sometime is in fact her father's boyfriend. She always refers to him by his first name and either is not aware, or does not want it publicly acknowledged, that this man is her father's partner. The young girl may have only heard the word "gay" used as a term of abuse in the school playground and not as a term for a loving relationship. The best way for a practitioner to approach this is probably to be aware that families vary in their level of openness and to use words and terms for family members that are used by the child and older siblings and adults in the family. Health care professionals should also bear in mind that different members of the family might be more or less comfortable with their sexual identity and family constellation. Some of the young adults in the BLSLMF mentioned that they were uncomfortable when their mother and her partner were more open about their relationship than the young person wished when school friends might see it, although the majority of young adults felt that their mother and her partner had been discreet enough.¹⁸

Heterosexism and Homophobia

One aspect that is common to lesbian and gay parents and their children is coping with the constant possibility of experiencing the effects of prejudice against lesbians and gay men (often described as homophobia). Homophobia takes many forms and may result in discrimination, verbal abuse, or even physical abuse. Pediatricians and other health care professionals may see children who have been directly affected by homophobia or who have been traumatized through seeing their lesbian or gay parents attacked. Fear of possible homophobia is also a stressful experience. Less obvious than homophobia, although also associated with negative consequences, is heterosexism. If children are aware of their lesbian or gay parent's sexuality, they will also

have to contend directly with the frequent assumption that all families have heterosexual parents. The child, like his or her parents, will constantly have to make decisions about when it is safe to "come out" about his or her family and be aware of the possibility of homophobia in each new social situation encountered.

The child's experiences of coping with homophobia will likely be influenced by the wider context in which he or she lives, for example, the kind of relationships that they have with their extended family and their ethnicity, social class, and rural or urban locality. As yet research has not examined how these aspects might affect children's abilities to cope. Various ethnic and religious groups will have different attitudes toward lesbians and gay men and may be more or less tolerant of diversity in family life.^{78,79} Furthermore, children from marginalized ethnic groups may have had previous experiences of dealing with prejudice that could make it either easier or more difficult to cope with homophobia.

Implications. Avoiding heterosexism involves carefully appraising all aspects of work with children and families to consider whether lesbian and gay parents are excluded. Working with children of lesbian or gay parents also involves being aware that they may have been directly or indirectly affected by homophobia. Practitioners should review their own practice and attitudes toward lesbians and gay men and their children. If they do not feel confident in their practice or think that their own views or experiences may hinder working with this patient group, they should review this with professional colleagues and if necessary refer the family on. Particularly for heterosexual professionals, who are perhaps for the first time aware that they are caring for a child with lesbian, gay, or bisexual parents, it is very useful to discuss issues with lesbian and gay colleagues as well as consulting the literature and websites. Many lesbian and gay parents will be experienced in educating others about their family and be pleased to be asked about family matters relevant to their family in an open and nonprejudiced atmosphere. Lesbian, gay, and bisexual health care professionals should be aware that their own experiences provide invaluable insights into how to manage care appropriately for children in these families; however, they also need to be suitably cautious when thinking how their own particular experiences might apply to specific cases and not assume similarity of issues because of common sexual identity. Providing health care for children with lesbian or gay parents provides a privileged opportunity to gain knowledge about how families take care of children's health.

Lesbian and gay parents are not necessarily visible, and it is very difficult in some countries and states to be "out" as a lesbian or gay man. It is therefore important to keep open the possibility that any of the families encountered in professional practice may contain a lesbian, gay, or bisexual parent. A child may live with their mother and father, and yet either of the parents may have (or previously have had) a same-sex relationship, which may or may not affect the child's care. It is useful for professionals seeing families always to inquire whether there are other adults who play a part in the child's life.

On the other hand, health care professionals can sometimes make lesbian or gay parents feel uncomfortable with the feeling that they have to justify all aspects of their family life. Lesbian and gay parents and their children may be annoyed that they have to explain their family relationships to each health care professional encountered, despite details having been described on their first visit. Or these families may feel that they are being asked questions that would not be put to heterosexual parents or their children; for example, one aspect of this may be undue scrutiny of why the lesbian or gay parent decided to have children.⁸⁰

For children in lesbian mother or gay father families, decisions about letting others know about family relationships may be more problematic if there is a lack of clarity about family relationships or an ambiguity within the family as to how to make careful judgments about informing people outside the family circle. Discussion with a non-judgmental health care professional of the pros and cons of different ways of informing others can sometimes help family members clarify their own position and hear different points of view within their family. Perrin and Potter⁸¹ each discuss useful ways of proceeding when discussing a challenging case of the difficult behavior at school of a 6-year-old boy raised by two lesbian parents; each author suggests that the boy's difficulties might be linked to problems integrating his family background within a new school setting.

CONCLUSIONS

Findings from the existing research studies indicate that while there is obviously variation among children with lesbian and gay parents, they are as a group just as likely as children with heterosexual parents to show typical adjustment on the various developmental outcomes assessed.^{2,59,60,71,82-97} Seldom have reports dissented from this general conclusion.^{98,99} Perrin and the Committee on the Psychosocial Aspects of Child and Family Health

conclude "Children's optimal development seems to be influenced more by the nature of the relationship and interactions within the family unit than by the particular structural form it takes."² This conclusion is perhaps particularly relevant to practitioners who are by the very nature of their work more likely to see children from lesbian or gay parent families who are referred with problems than children without difficulties.

While there is no evidence that children experience difficulties because of being brought up by lesbian or gay parents, it is also important to remember the variation in their experiences. Like children brought up by heterosexual parents, some children in these families will be doing well while others may be currently experiencing problems. Research findings to date indicate that some family processes, such as the effects of parenting stress, parental conflict, and parental mental illness, have similar consequences for children across different types of family form, irrespective of parental sexual orientation.

Pediatricians and health care professionals generally need to think carefully about how dealing with children with lesbian and/or gay parents may affect their work. On the one hand, they need to avoid mistakenly assuming that any problems that a child with lesbian or gay parents presents with are necessarily connected with parental sexual orientation. Experience of treating other children with similar health problems is obviously not irrelevant to assisting the children of lesbian or gay parents. Conversely, there may be aspects of the case, particularly with regard to the management and treatment of the condition, that do need to be considered in relation to the special context of lesbian and gay parenting.

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