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Adolescents in planned lesbian families in the U.S. and the Netherlands: Stigmatization, psychological adjustment, and resilience

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CHAPTER

2

Stigmatization and Resilience in
Adolescent Children of Lesbian
Mothers



2 Stigmatization and resilience in adolescent children of lesbian mothers ¹

Abstract

This chapter provides a review of the historical and cultural milieu in which lesbians formed families in the late twentieth century, the psychosocial development of children of lesbian mothers, and the influence of factors that protect them from the negative influences of homophobia. It is argued that the focus of research in lesbian families should expand from comparing children in lesbian households with their counterparts in heterosexual families to examining personal, family, and community resources that can reduce the negative impact of homophobia on young people.

¹ This chapter is based on Van Gelderen, L., Gartrell, N., Bos, H. & Hermanns, J. (2009). Stigmatization and Resilience in Adolescent Children of Lesbian Mothers, *Journal of GLBT Family Studies*, 5, 268-279.

2.1 Introduction

In 1995, a cover story of *The Advocate* (May) asked: “Can gays and lesbians protect their children from homophobia?” Fourteen years later, researchers are just beginning to answer this question. To date, the vast body of literature on same-sex parents has focused on their children’s socioemotional development. Most studies compared the children of lesbian mothers with children in heterosexual families on measures of gender identity and psychological adjustment—two primary areas of concern in lesbian mother custody cases (Sandfort, 2000). Only recently, investigators have begun to examine how different styles of parenting can affect the well-being of children raised in lesbian or gay households—specifically when it comes to protecting them from the negative influence of stigmatization. This chapter will show how this new direction in lesbian and gay family research may eventually answer the question posed by *The Advocate* more than a decade ago.

2.2 Historical Cultural Milieu

For most of the twentieth century, women who were attracted to other women faced societal pressure to partner with men to raise children. Many lesbians elected to suppress their sexual feelings for other women or to express them in a highly secretive way (Golombok, 2000). Since the gay liberation movement of the 1970s, increasing numbers of lesbians have come out. Lesbians who bore children in the context of heterosexual relationships faced considerable opposition when they sought to retain custody during divorce proceedings (Blumenfeld & Raymond, 1988). In contrast to typical heterosexual divorce settlements, judges almost always granted custody to the father if the mother had come out as lesbian (Golombok, 2000). These decisions were based on the notion that heterosexual fathers were more suitable parents than lesbian mothers, even though there was no empirical evidence for this judicial opinion (Patterson, Fulcher, & Wainright, 2002). This cultural climate prompted the first systematic studies on children whose mothers came out, retained custody after divorcing or separating from the children’s fathers, and then raised the children in lesbian households (Golombok, 2000).

In the mid-1980s, the lesbian baby boom was launched as large numbers of lesbians began to conceive children through donor insemination. These families today are referred to as *planned lesbian families*, whether the children are parented by a single lesbian or a lesbian couple (Golombok, 2000). This terminology distinguishes such families from those in which the children were conceived in heterosexual relationships and later raised in lesbian households after the mothers came out and re-partnered with a woman. A by-product of the lesbian baby boom is a growing body of literature on the psychological adjustment of children raised in planned lesbian families.

The National Longitudinal Lesbian Family Study (NLLFS) was initiated in 1986 to follow

a cohort of lesbian mothers with age-matched children from the time the children were conceived (first wave of data collection) until they reach the age of 25 years (sixth wave of data collection) (Gartrell et al., 1996; Gartrell et al., 1999; Gartrell et al., 2000; Gartrell, Rodas, Deck, Peyser, & Banks, 2005). The longitudinal design of the NLLFS is considered one of the most effective methods of documenting the psychosocial evolution of contemporary families (Hicks, 2005; Lambert, 2005). The aim of this study on planned lesbian families is to report on the innovative parenting styles of lesbian mothers, to assess the effects of homophobic stigmatization on the psychological development of the children, and to explore ways of reducing the impact of homophobia on children's lives and well-being (Gartrell et al., 1996).

Despite numerous reports that children raised by same-sex parents are as well-adjusted as their counterparts in heterosexual families (Bos, Van Balen, & Van den Boom, 2007; Brewaeys, Ponjaert, Van Hall, & Golombok, 1997; Chan, Raboy, & Patterson, 1998; Gartrell et al., 2005; Golombok, Tasker, & Murray, 1997), public opinion in the United States still holds that a family consisting of a father and a mother is the ideal environment in which to raise children (Cantor et al., 2006). According to the World Value Survey (2005), 64% of Americans surveyed believed that children need both a father and a mother. A recent Gallup Poll (2009) found that when Americans were asked, "Do you think homosexual couples should or should not have the legal right to adopt a child?" 54% felt that lesbian and gay couples should not. Negative public opinions on same-sex parenting in the United States are also reflected in its legal and policy landscape: same-sex marriage is only available in a few states, and fostering and adoption are sometimes available but seldom without complications (Rosato, 2006).

Negative attitudes toward lesbians and gays find their way into schools and play groups. Nearly 25% of mothers participating in a nationwide American survey said that their children had been rejected by peers because their mothers were lesbian (Morris, Balsam, & Rothblum, 2002). In the NLLFS, by the time the children were 10 years old, nearly half the children had experienced homophobia in the form of other children saying mean things about their mothers (Gartrell et al., 2005).

2.3 Psychosocial development of children and adolescents in planned lesbian families

It is well established that psychosocial adjustment of children and adolescents is related to the quality of the parent-child relationship (Baumrind, 1989). Likewise, the relationship between children and their parents does not take place in a social vacuum but is embedded in the cultural contexts in which children grow up (Bronfenbrenner, 1988).

The more intensely homophobic the climate in which children are raised, the more difficult

it is for mothers to ward off negative influences and the more likely the children are to be teased or bullied by their peers (Bos, Van Balen, Van den Boom, & Sandfort, 2004). Teasing, harassment, and bullying compromise the well-being of children, especially when the teasing focuses on minority-group status (Fischer, Wallace, & Fenton, 2000; Golombok et al., 2003; Tasker & Golombok, 1995; Verkuyten & Thijs, 2001).

Yet when children in lesbian families are compared with their counterparts in heterosexual families, they show no significant differences in social competence (Flaks, Ficher, Masterpasqua, & Joseph, 1995) or psychological adjustment (Bos et al., 2007; Brewaeys et al., 1997; Chan et al., 1998; Golombok et al., 1997). Similarly, the Child Behavior Check List (CBCL) scores of young children in planned lesbian families are comparable to scores in normative samples (Gartrell et al., 2005).

Recent studies on children with lesbian parents have assessed the association between experiences of stigmatization and psychosocial adjustment. In a Dutch study of children in planned lesbian families, homophobic bullying was associated with increased problem behavior and lowered self-esteem (Bos & Van Balen, 2008). Among ten-year-old NLLFS children, those who had been subjected to homophobia demonstrated higher externalizing problem behavior scores on the CBCL than those who had not (Gartrell et al., 2005).

In contrast to the number of studies on younger children in planned lesbian families, relatively little research has been conducted on the adolescent offspring of lesbian parents (Gershon et al., 1999; Golombok & Tasker, 1996; Golombok et al., 1997; Tasker & Golombok, 1995; Wainright & Patterson, 2006; Wainright, Russell, & Patterson, 2004; Wainright & Patterson, 2008). The majority of these studies focused on teens who had been conceived in the mother's previous heterosexual relationship.

Researchers have found that adolescents and young adults who had been raised by lesbian mothers were well-adjusted (Golombok & Tasker, 1996; Golombok et al., 1997; Tasker & Golombok, 1995). Recently, studies utilizing data from the National Longitudinal Study of Adolescent Health (Add Health)—whose participants were drawn from a stratified random sample of all American high schools—found that on a large array of variables related to school and personal adjustment, teens with same-sex parents did not differ significantly from a matched group of adolescents living with opposite-sex parents (Wainright & Patterson, 2006; Wainright et al., 2004; Wainright & Patterson, 2008). Also, no differences were found in substance use, delinquency, victimization (Wainright & Patterson, 2006), and peer relations (Wainright & Patterson, 2008).

Although homophobic experiences negatively affect children's well-being (Bos & Van Balen, 2008), studies show that children of lesbian mothers as a group score as highly on tests of overall psychological adjustment as children in heterosexual families. Growing up in a family with same-sex parents is clearly not a risk factor. But repeated outside insults—

teasing and bullying by peers—can damage self-esteem (Astor, Benbenishty, Pitner, & Meyer, 2004; Cassidy, 2009). These findings prompted researchers to look for mechanisms and behavior that promote resilience in children who experience homophobia.

2.4 Factors promoting resilience in children

Children derive their ability to cope with distress through personal attributes as well as influences of family and community (Prelow, Bowman, & Weaver, 2007). Characteristics that are positively associated with healthy psychosocial adjustment in children include the ability to regulate emotion and to develop coping strategies (Masten & Powell, 2003). Having these capabilities can also ameliorate the influence of difficult circumstances on a child's well-being. For example, reaching out for social support can generate solutions, decrease isolation, and ward off depression (Vanderbilt-Adriance & Shaw, 2008).

Family contributions to children's mental health come primarily in the form of effective parenting. Quality parenting—providing love and nurturing, a sense of safety and security—is related to psychosocial well-being at all stages of child development (Prelow et al., 2007). Having a warm and supportive relationship with a parent bolsters children who face negative life events, minimizing the destructive psychological impact (Frosch & Mangelsdorf, 2001; Golombok, 2000; Hetherington & Stanley-Hagan, 1999). Parents teach children the skills they need for later developmental tasks, give them guidelines for acceptable behavior, and provide opportunities for cognitive and social stimulation (Masten & Coatsworth, 1998). Poor guidance is linked to inferior academic skills and inadequate peer acceptance, as well as to higher rates of delinquency and externalizing behavior (Sandstrom & Coie, 1999). Parental monitoring—especially in older children and adolescents—is another means by which parents influence their children's development (Ladd & Pettit, 2002; Mounts, 2000). Knowing who a teen's friends are and being informed about the teen's leisure activities are associated with fewer teenage behavioral problems and higher self-esteem (see for an overview: Parke, 2004).

Community-level contributions to a child's well-being include neighborhood networks, youth organizations, and schools (Bronfenbrenner, 1988). Community programs that give youths opportunities to participate in activities where they have choices, make decisions, and share responsibility help teens develop new skills and increase their self-esteem (Shonkoff & Phillips, 2000). Contributions on the community level can also affect the child indirectly through influences on parents (Prelow et al., 2007). As an example, families that have frequent contact with one another are more likely to monitor the behavior of each other's children (Sampson, 1992). In turn, monitoring children's behavior has a positive influence on children's psychosocial well-being (Parke, 2004).

Research on factors that moderate the effects of homophobic stigmatization on the

development of children and adolescents is an understudied topic. Gershon and colleagues (1999) examined the relationship between teens' perceived stigma and self-esteem and how coping skills interacted with stigma to affect well-being. Teens who used effective coping strategies in response to homophobia showed higher scores on self-esteem than those with similar experiences who did not use such strategies. Disclosure also improved psychological well-being: adolescents who were more open to peers about their mothers' lesbianism had higher levels of self-esteem (Gershon et al., 1999).

Short (2007) found in a study of Australian lesbian mothers that maternal education and political activism enhanced the development of children whose peers were hostile about their mothers' lesbianism. The mothers coped with cultural homophobia by having a sociopolitical understanding of heterosexism and a familiarity with the literature on family studies; they also participated in the GLBT community.

Two other studies focused on community support. Bos and Van Balen (2008), in a study of 8- to 12-year-old Dutch children, found that having frequent contact with other children who have a lesbian mother or gay father protects against the negative influence of stigmatization on self-esteem. One interpretation of this finding is that stigmatized children cope with rejection by identifying or identifying more strongly with their in-group (Crocker & Major, 2003; Tajfel & Turner, 2004; Turner, Brown, & Tajfel, 1979) and that this identification protects them psychologically from some of the negative experiences of stigmatization (Branscombe, Schmitt, & Harvey, 1999). Similarly, the fourth wave of the NLLFS found that the 10-year-old children were more resilient in response to homophobia if their mothers participated in the lesbian community (Bos, Gartrell, Van Balen, Peyser, & Sandfort, 2008). The NLLFS mothers' affiliation with the lesbian community was indicative of the support they receive from this association. In addition, the data showed that attending a school that includes lesbian/gay lifestyles in its educational program (i.e., GLBT curriculum) moderated the relationship between homophobic stigmatization and psychological adjustment in children (Bos et al., 2008). When the mothers chose a school with GLBT curricula—or facilitated the development of GLBT curricula while their child was attending—the children were prepared for the prospect of homophobia and learned what it meant to be stigmatized for being different. This type of educational environment has the potential, in turn, to reduce harassment and bullying (Longres & Etnyre, 2004).

The abovementioned aspects—contact with other children with lesbian or gay parents, the mothers' participation in the lesbian community, and attending a school with GLBT curricula—are not only contributions at the community level: they are also indicative of parental guidance—a form of family support. Lesbian mothers can monitor their children's social activities by ensuring that their children have frequent contact with children from similar families—at school, in the neighborhood, and in the community. These forms of

parental guidance ensure that a child's daily life will be characterized by an affirmative lesbian or gay social environment.

2.5 Future directions for research

Research on planned lesbian families has focused primarily on younger children. In comparing children in planned lesbian families with children in two-parent heterosexual families, the aim was to assess whether lesbians could be good enough parents to be granted custody, to foster, or adopt (Sandfort, 2000). These studies contributed to the growing body of empirical data on the well-being of children in lesbian families that could be cited for litigation and legislation (Golombok, 2007). The findings of these investigations—carried out in several Western countries—were consistent: in psychosocial adjustment, children in planned lesbian families were functioning as well as their counterparts in heterosexual families (see overview by Bos et al., 2005).

More recently the focus has changed to examining diversity in lesbian families, specifically, to understand how stigmatization affects children's self-esteem (Golombok, 2007). Although growing up in a lesbian family is not in itself a risk factor in the psychological development of children, homophobia does exist within our society, and it has implications for family life. Discrimination hurts everyone involved: 10-year-old NLLFS children who experienced homophobia felt angry, upset, or sad about the incidents, and experiencing homophobia was associated with higher levels of problem behavior (Gartrell et al., 2005). However, children who had contact with other GLBT families, attended schools with GLBT curricula, and whose mothers participated in the lesbian community demonstrated more resilience in response to homophobic incidents (Bos, 2004; Bos & Van Balen, 2008). But more exploration of factors that counteract the negative effects of homophobia is needed.

In particular, the relationships between experiences of stigmatization, the psychological adjustment of adolescent children in lesbian families, and factors that reduce the negative influence of stigmatization on well-being should be investigated. Teens are susceptible to social stigma, especially when they belong to a minority group (Baumrind, 1995; Bukowski, Sippola, & Hoza, 1999; Mrug, Hoza, & Bukowski, 2004; Rivers et al., 2008).

Research questions could include the following:

- “How do mothers prepare their teenage children for homophobic bullying?”;
- “What kinds of coping strategies do teens have at their disposal when they are targeted for discrimination?”;
- “Do schools respond effectively to homophobic bullying?”; and
- “Does parental preparation, personal coping strategies, and the school's

responsiveness buffer a teen’s response to experiences of discrimination?”

The fifth wave of the NLLFS—when the children are 17 years old—will answer some of these questions. The findings will expand our understanding of the factors that promote healthy psychosocial development of teens raised in lesbian households who experience homophobia. We hope that other investigators will join us in searching for factors that ameliorate the effects of homophobic discrimination in the lives of children and adolescents with same-sex parents.