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A STUDY ON GAY AND LESBIAN INTERGENERATIONAL RELATIONSHIPS:

A TEST OF THE SOLIDARITY MODEL

by

JEANNE MARIE KOLLER

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ABSTRACT OF THE DISSERTATION

A Study on Gay and Lesbian Intergenerational Relationships:

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by JEANNE MARIE KOLLER

Dissertation Director:

Professor Michael LaSala

Although a growing literature exists on gay and lesbian couples and their children, little research has been conducted investigating the social support systems of this emerging new type of family unit. Social support is known to be very important to individual, couple, and family functioning. It can be argued that social support is particularly important for gay and lesbian parents due to societal stigma for their lifestyles and disapproval of their choices to become parents.

This quantitative study of 245 self-identified gay, lesbian, and heterosexual participants examined the relationships of gay and lesbian parents with family and friends and compared them to those of gay and lesbian nonparents, as well as to those of the heterosexual parents and nonparents. This analysis was done in order to assess support systems among different type of couples.

The results showed that parents (regardless of sexual orientation) seemed to live

closer to their own parents and received and provided more help to family members. The findings that gay and lesbian parents were found to be so similar to heterosexual parents on these variables lend support to a hypothesis of this study that parenthood can bring gays and lesbians closer to their own parents.

Nonparents (regardless of sexual orientation) seemed to receive and provide more help to friends than the parents groups, and lesbian nonparent couples tended to have the strongest connections with friends. The issue of gender played a probable role in these results, with women having stronger connections than men with their friends in each of these measures.

Finally, interesting results emerged about gay parents. The gay male parents seemed to have stronger connections with family than the other gay and lesbian couples, and seemed to have fewer connections with friends than the other gay and lesbian couples. It could be that gay men seeking parenthood may be a unique group with already strong family ties and desires for parenthood. Overall, this study's findings have practice implications and also provide direction for future research regarding parenthood, sexual orientation, and the importance of social support.

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CHAPTER 1: INTRODUCTION

Problem Statement

This research study is a first step in clarifying the nature of the support systems specific to gay and lesbian parents and comparing them with those of heterosexual parents, and those of gay, lesbian, and heterosexual nonparents. The importance of social support for heterosexual parents and their children is already acknowledged. Social support is particularly important for gay and lesbian parents due to societal stigma for their lifestyles and disapproval of their choices to become parents from within and outside of the gay and lesbian community. It could be argued that their sources of support may substantially differ from their heterosexual counterparts. With the growth in numbers of gay and lesbian-headed households, more research must be done on how and where these families gain much needed social support. Thus, this dissertation study attempted to begin to shed light on the support networks of lesbian and gay parents.

Social Support is Important

There is a general consensus that social support from various sources can have profound effects on moderating levels of stress. Specifically, research has found that having strong social networks of family and friends can enhance individual well-being by having a direct positive impact on mental and/or physical health (e.g., Birditt &

Antonucci, 2007; Cohen & Wills, 1985; Levitt, Guacci, & Weber, 1992; Sarason, Pierce, & Sarason, 1990), can contribute to the stability of a couple, relationship quality, relationship satisfaction, and long-term relationship success (e.g., Adams & Jones, 1997; Bryant & Conger, 1999; Kurdek, 2004; Milardo & Helms-Erikson, 2000; Murphy, 1989), can positively impact on the well-being of children (e.g., Cauce, Mason, Gonzales, Hiraga, & Liu, 1996; DeGarmo & Martinez, 2006; Mohr, 2005; Patterson, Hurt, & Mason, 1998), and can buffer against stressful events (e.g., illness, divorce, aging, single parenthood, discrimination) (e.g., DeGarmo & Martinez; DeGarmo, Patras, & Eap, 2008; Gladow & Ray, 1986; Koopman, Hermanson, Diamond, Angell, & Spiegel, 1998; Lin, Woelfel, & Light, 1985).

Since social support can have a strong positive effect on people's lives, it can also be an integral resource when coping with life events like parenthood. The entry into parenthood for heterosexual persons can be a stressful event, with different factors like the mental health status of the spouse, the expectations of parenthood, and infant characteristics, influencing the adjustment to parenthood (e.g., Belsky & Rovine, 1990; Kalmuss, Davidson, & Cushman, 1992; and Payne, 1999). Potential changes in various aspects of life (e.g., daily routine, sleep, household division of labor, roles, and support systems) are other factors that impact the transition to parenthood. For heterosexual parents, having a strong support network can ameliorate the stress that can accompany parenting (e.g., Ceballo & McLoyd, 2002; Conley, Caldwell, Flynn, Dupre, & Rudolph, 2004; DeGarmo et al., 2008). For gay and lesbian parents, not enough is known on how, or if, support networks are utilized and how they compare with those used by heterosexual parents.

The issue of support networks for gay and lesbian people is complex. Families of origin ideally can provide emotional and physical sustenance, can connect us to our past, and can provide a framework to learn about the world, which includes beliefs and attitudes. Typically, though, these ideas and visions do not include homosexuality. In fact, homosexuality is a minority status that may not be shared with their families of origin, unlike ethnic and cultural minorities where family membership is the entry point for minority status. Although there is a variety of parental responses to the news that a son or daughter is gay or lesbian, parents typically react negatively upon first learning that their son or daughter is gay or lesbian (e.g., D'Augelli, Hershberger, & Pickington, 1998; Savin-Williams, 2001, 2005; Savin-Williams & Dube, 1998; Savin-Williams & Ream, 2003; Strommen, 1990). Therefore, for many gay and lesbian persons, connections with their families of origin can be a source of difficulty and can result in painful experiences.

Partially as a result of the struggles with their family of origin, many gay and lesbian persons seek support from their “new family”—other gay and lesbian persons—which can include ex-lovers, current partner, and other friends. In fact, Kurdek (2004) found that gay and lesbian partners perceive little support for their relationships from family members and conversely perceive more support from their friends.

In addition to possibly having different sources of social support than their heterosexual counterparts, gay and lesbian parents may have to deal with additional stressors including societal discrimination, lack of support (from society and from family) for their decisions to become parents, and issues of disclosure (for themselves and their children). Given gay/lesbian-headed families face these added stressors, strong

support systems could be even more important for their mental and physical well-being and can also act as a potential buffer from the prejudices they may experience from society.

The Increase in Gay- and Lesbian-Headed Families

Although the nuclear family consisting of a married heterosexual couple and dependent children remains a dominant family type in the United States, more and more one parent households are emerging and there has been a significant increase in the number of blended families (Johnson, 2000). In 1970, 81 percent of all households were “family households” maintained by married couples or by a man and a woman living with other relatives and by 2003 that proportion dropped to 68 percent (U.S. Census Bureau, 2004a). Additionally personal choices rather than social conventions are influencing life decisions (e.g., about whether to marry, if one wants to become a parent, living alone or with others). As a result, there is a growing diversity of types of family units (Johnson, 2000). One of the newer family units to emerge is the lesbian or gay-headed family.

More frequently than ever, lesbians and gay men are choosing to become parents. This trend has become so popular that some refer to it as the “lesbian baby boom” (Patterson, 1992; Weston, 1991) or the “gay-by boom.” Although nobody knows how many gay and lesbian parents there are, most in the field agree that the numbers have increased significantly (Wingert & Kantrowitz, 2000). The 2000 United States Census Bureau identified more than 600,000 potentially gay/lesbian-headed households (“unmarried domestic partners” on the census form) and the 2006 Community Survey

from the U.S. Census Bureau found that 0.7% (or approximately 781,322 households) of the total number of households (total number of households was 111,617,402) were unmarried same-sex partner households. These numbers, though, are considered to be low estimates due to many factors including: gay/lesbian households that may not disclose their relationships, households headed by single gay/lesbian parents, and gay/lesbian parents who do not have residential custody of their children. Estimates of the number of children with gay/lesbian parents range as high as 1.6 million to 14 million children (Patterson & Freil, 2000). This current phenomenon is different than lesbians and gay men who conceived children in heterosexual marriages before coming out as gay. This new movement encompasses gay/lesbian persons who choose to become parents and form alternative families. Some lesbian/gay men become single parents. Others are coupled (i.e., in a relationship with another person) and choose to become parents, and others choose a co-parenting arrangement with others.

Discrimination Faced by Gay and Lesbian Parents

Despite the rise in gay and lesbian parents and the increase in gay and lesbian visibility in many areas of life, the social, political, and legal climate in the United States is still challenging for people in the gay/lesbian community. To date, 26 states have explicitly banned gay/lesbian marriages (through constitutional amendments), and there is only one state (Massachusetts) in which gay/lesbian couples can legally marry. Only 6 states have civil unions or domestic partnerships available to gay/lesbian couples and these recognize and grant most of the rights of marriage. Four states and the District of

Columbia offer some limited recognition and limited state rights to gay/lesbian couples (Marriage Equality USA, 2008).

Regarding adoption of children, rights vary state by state so not every gay/lesbian person has the same ability to adopt. Second parent adoption (when one parent already has parental rights and another person petitions for joint rights, without the first person giving up parental rights) is the type of adoption lesbian couples usually seek to obtain. However, only nine states permit it and in most states the laws are unclear. In Florida and Wisconsin it is expressly prohibited (Johnson, n.d.).

For gay couples or lesbian/gay singles wanting to adopt a child (via single or joint adoption), the laws also vary state to state. Florida specifically bans “homosexuals” from adopting children (single or joint adoption) and Mississippi, Michigan, and New Hampshire ban “same gender” couples (joint adoptions) from adopting children. Utah bans all unmarried couples from adopting (joint adoptions) (Johnson, n.d.).

Thus, as members of a marginalized group, gay- and lesbian-headed families lack recognition and validation from U.S. society. “Moreover, attempting to function daily in a social environment that denies one, one’s life partner, and one’s children fundamental legal protections produce stressors with which traditional families do not contend” (Speziale & Gopalakrishna, 2004, p. 180–181). Receiving social support can potentially help these families cope with this social environment in the same way social support helps members of other minority groups cope with discrimination (e.g., DeGarmo & Martinez, 2006).

Parenthood Stressors Faced by Gay- and Lesbian-Headed Families

In addition to discrimination producing stressors for gay and lesbian families, parenthood can be difficult. It can include additional stressors for gay and lesbian families that heterosexual families do not have to face. These stressors include, but are not limited to the following examples.

1. Lack of emotional support and/or outright discouragement to pursue parenthood, whereas most heterosexual married couples are encouraged to have children. Specifically, the issue of gay men and lesbians choosing to become parents can evoke strong feelings in people, and support for their entry into parenthood might be discouraged by family, friends, and society at large. In *The Lesbian and Gay Parenting Handbook* (Martin, 1993), April Martin speaks about this potential problem in a section entitled “Dealing with Negative Reactions to Our Plans” (p. 39). In a study of gay and lesbian persons who chose parenthood, Johnson and O’Connor (2002) found that the primary difficulties faced were found outside of their family units. They found in their study that most lesbian couples and a sizable minority of the gay couples met with disapproval from their families regarding becoming parents.
2. The on-going process of “coming out” to strangers as being gay or lesbian, and how to now handle that as a parent (e.g., at the child’s school, with the child’s playmates and their parents, in the neighborhood).
3. Making decisions on how to have a child. For example, lesbian couples must decide whether to adopt a child or utilize Alternative Insemination (AI). If using A.I, then another set of questions must be addressed including choosing

who will be the biological mother, if each will have a turn at being a biological mother, who will be the donor (anonymous donor or known donor). If choosing to adopt, then a different set of questions arises. These questions include where to find a child to adopt (local or abroad), whether to go to an agency or pursue a private adoption, etc., and where it is possible as a gay/lesbian person or couple to adopt a child. Some states, as mentioned before and some countries do not allow adoption of children by gay/lesbian persons. Some of these issues are also pertinent to heterosexual couples (e.g., those with infertility problems or those who choose to be parents through alternative means due to personal convictions). However, for every gay or lesbian person choosing parenthood, they must deal with making these decisions.

Social Support Networks for Gay- and Lesbian-Headed Families

With the struggles and difficulties that discrimination and parenthood can impose on gay and lesbian-headed families, it is reasonable to assume that having strong social support might be helpful. The sources and nature of that support for gay and lesbian parents is still largely unknown, but the social support systems of gay and lesbian nonparents have been researched more extensively (e.g., Kimmel & Sang, 1995; Kurdek, 2004).

Social support for anyone can vary in regard to sources of the support (e.g. family, friends, co-workers), types of support (e.g., emotional concern, information, instrumental help), number of social ties, and closeness of those ties (Schafer, 1996).

Additionally, although social ties are usually seen as a positive resource, social ties can be negative and can have a detrimental effect (Lazarus & Folkman, 1984). An example of this would be gay/lesbian persons who have families of origin that are critical and judgmental about their lifestyle and constantly berate them.

In general, many lesbians and gay men (nonparents) have reported receiving primary support from partners and friends rather than from family of origin/extended kin (Blumstein & Schwartz, 1983; Kurdek, 1988; Kurdek & Schmitt, 1987; Tully, 1989; Weston, 1991). More current research in this area of study has found similar outcomes (e.g., Kimmel & Sang, 1995; Kurdek, 2004).

However, for gay and lesbian parents, reliance on friends instead of family may not be the case. Although the number of gay and lesbian persons choosing parenthood is growing, lesbian and gay life is not traditionally child-centered. As a result, those gay and lesbian persons choosing parenthood may feel that they do not “fit” within their “new family” of friends as well as before. For some, they may find themselves lacking an adequate support system. Those who they had relied on may have very different lives and experiences now because those persons are not parents. As a result, some new parents might seek to reconnect with their family of origin, bond with heterosexual couples who have children, and/or look within the gay/lesbian community for others who have chosen parenthood. However, the extent to which these persons are integrated into the larger lesbian/gay community varies, and the extent to how much these persons are “out” (and their processes for coming out) varies.

The Need for Research on Gay- and Lesbian-Headed Families

To Contribute to Theory

The study of gay and lesbian families can contribute to the broader theoretical work within family research. Family researchers can look to gay and lesbian families to test theories and help clarify unanswered questions that apply to all families (e.g., re-evaluating role theory by examining gay and lesbian couples and their household division of labor, since that division of labor is not determined by gender and gender roles). Also, from “a methodological point of view, gay and lesbian families provide a sort of “natural experiment,” and researchers are beginning to study them from this perspective” (Johnson & O’Connor, 2002, p. 6). Therefore, a study focusing on gay and lesbian parents can be very useful for bettering our understanding of all families and relationships. Research in this area might also provide ideas about social support for other types of families that experience intergenerational strain (e.g., families where the parents disapprove of the child’s choice of spouse).

To Contribute to Social Work Practice

This information is also important to all social workers so they may better serve the needs of gay/lesbian-headed households. Social workers in different capacities can help gay/lesbian-headed families by respecting the family bonds these families have created and by serving as advocates “in navigating potentially hostile and obstructive social environments” (Speziale & Gopalakrishna, 2004, p. 181).

This is in keeping with the social work profession’s goal of social justice and it

also follows the National Association of Social Work (NASW) policy positions. Specifically, the NASW has taken a policy position in support of ending discrimination on the basis of sexual orientation and of securing legal rights to marriage, child custody, and property for gay/lesbian/bisexual/transgender persons (NASW, 2003).

To Fill a Gap in the Current Literature

With the changes and growing diversity of American families, one might think that analyzing extended family relations and resources would be of increased interest to researchers. Instead, in a literature search on families Johnson (2000) could find few citations on kinship. Within the more narrow study of gay and lesbian families there is even a greater gap in the literature. The research has been focused on child outcomes and less on the families themselves. “So far, little is known about family functioning in gay and lesbian families” (Johnson & O’Connor, 2002, p. 4).

To date much of the current literature on gay and lesbian parents focuses on individuals and dyads and rarely if at all focuses on family structure or family interaction. Therefore, little has been explored about the extended kin relations and chosen kin relations of gay and lesbian persons who choose to become parents. Since much of the literature treats gays and lesbians as a monolithic group, exploring the differences among these families in regard to kin relations would be a step towards acknowledging this diversity.

The Research Objective

This study focused on the relatively new but important area of social support

systems of gay and lesbian parents. The relationships of gay and lesbian parents with both family and friends were explored in order to gain insight into the nature and extent of their support systems. Support systems have a strong influence on individual, couple, and family well-being and the nature and extent of those support systems have been under-researched for gay and lesbian parents. In this study, the support systems of gay and lesbian parents were compared with each other, to gay and lesbian nonparents, as well as to heterosexual parents and heterosexual nonparents. Correlations between parenthood, sexual orientation, and support systems were assessed to determine the similarities and differences of sources of support, extent of support, and nature of support.

Definition of Terms

Sexual orientation, as defined by the American Psychological Association (2008) refers to an “enduring emotional, romantic, sexual, or affectional attraction towards others.” Sexual orientation exists along a continuum. This continuum ranges from exclusive heterosexuality (attraction towards opposite gender) and exclusive homosexuality (attraction towards same gender). The continuum includes various forms of bisexuality as well (attraction to same and opposite gender). The American Psychological Association is clear that sexual orientation is different from sexual behavior. Orientation refers to feelings and self-concept, and individuals may or may not express their sexual orientation in their behaviors.

The term *lesbian* typically refers to women who self-identify as having their primary sexual, affectional, and relational ties to other women (Brown, 1995). The term

gay typically refers to men who self-identify as having their primary sexual, affectional, and relational ties to other men (Conklin, 2007). The term *heterosexual* typically refers to people who self-identify as having their primary sexual, affectional, and relational ties to members of the opposite gender.

In the literature there are many definitions and concepts regarding sexual orientation, but most agree that an important component is that orientation is self-defined and may or may not be congruent with overt behavior at any point during one's lifespan. For example, Steinhorn (1998) explains that the lesbian orientation is not a singular construct and may or may not reflect a stable or exclusive pattern. She gives as an example that a woman can self-identify as being a lesbian but may be heterosexually married.

In the survey administered in this study, participants were asked to self-identify the nature of their current relationship as heterosexual, lesbian, gay, or other (and space was given to explain what "other" meant to him or her). Only completed surveys from those who identified as lesbian, gay, or heterosexual were used for the study. Those surveys where respondents self-identified as "other" (e.g., bi-sexual) or did not choose to complete that question were not used for the results of this study.

Although there are various terms used to identify gay or lesbian persons, for the purpose of this research study the terms *gay*, *gay male*, or *gay men* refer to men (self-identified) and the term *lesbian(s)* refers to the women (self-identified). If referring to both gay men and lesbians, the terms *gay/lesbian* or *lesbian/gay* will be used. The term *homosexuality* will refer to men and women.

CHAPTER II: LITERATURE AND THEORY REVIEW

As more and more gay and lesbian persons choose parenthood, the research regarding gay and lesbian parenthood has also been growing. However, the research is still in the infancy stage. In fact, research on gay and lesbian identities itself is a young area of study. Subsequently, there was not a large collection of literature directly linked to this research study. Thus, an overview of the literature on gay and lesbian issues that are indirectly related but still pertinent will be described. Also, a more in-depth review of the directly related literature will be explored.

First, the potential stressors of entry into parenthood (for heterosexual families and for gay/lesbian families) and parents' social network connections with family and friends will be examined. Next, the impact of social support systems (both with family and with friends) on the functioning of individuals, couples, and on families will be examined. Support networks for both heterosexual and gay/lesbian persons will be explored. Related issues of gender, race, poverty, and age in regard to support systems will also be discussed.

The Transition to Parenthood for Heterosexual Couples and Connections with Support Systems

There is a long history of research on the transition to parenthood. In much of the earlier literature it is argued that becoming a parent is a risk factor for individual distress

and, if applicable, relationship distress (Hobbs, 1965; LeMasters, 1957). These studies, however, were typically based on a retrospective account of the event.

More recent studies on the transition to parenthood point to the variety of ways that individuals and couples handle their transition (Belsky & Rovine, 1990; Eggebeen & Knoester, 2001; Helms-Erikson, 2001; Knoester & Eggebeen, 2006; MacDermid, Huston, & McHale, 1990; and Wallace & Gotlib, 1990). These studies have begun to examine risk factors associated with negative change experienced by new parents, and have begun to examine other factors associated with positive change experienced by new parents.

Although from the research there is still little doubt that a marital/partner relationship changes with the advent of parenthood, the situation is more complex than previously suggested. Other areas of life (e.g., work patterns, individual well-being, and relationships with extended families) are also impacted.

For example, Knoester and Eggebeen (2006) investigated different aspects of men's transition to parenthood. The main purpose of their study was to analyze whether the transition to parenthood and the addition of subsequent children for men who are already fathers impacted on men's well-being and social participation. Ultimately they found that the men had both positive and negative transformations with fatherhood. Knoester and Eggebeen (2006) took data from the National Survey of Families and Households 1 (NSFH 1) (1987 to 1988 wave) and from the National Survey of Families and Households 2 (NSFH 2) (1992 to 1994 wave). The final sample they used for this study was comprised of 3,088 men and this sample of men had been interviewed in each wave of the study.

The dependent variables were the men's psychological health, physical health, intergenerational and extended family involvement, social connections, and work behavior. The independent variables were having the addition of new children (from first wave to second wave) and whether or not the children resided with them. For their analyses, Knoester and Eggebeen (2006) controlled for the demographic differences (including the effects of marriage), and controlled for the differences in the interview measures from NSFH 1 to NSFH 2.

They found that the arrival of a new child, either one that resides with the father or one that does not reside with the father, is associated with men's feelings of depression. The depression scores were gathered from an abbreviated version of the Center for Epidemiological Studies Depression Scale (Radloff, 1977) used in the NSFH surveys. They also found that fatherhood increased men's interactions with their intergenerational and extended family, increased their service-oriented activities, increased their hours in paid employment, and decreased their socializing time. In other words, children seem to alter the organization of men's lives. However, the "psychological costs and rewards of parenting appear to balance out for men" (Knoester & Eggebeen, 2006, p. 1556). Knoester and Eggebeen note that there is "reason to believe that fatherhood transforms men's lives in ways that are functional for society" (p. 1533).

There are some significant strengths with Knoester and Eggebeen's (2006) study. Most notably, the sample was very large consisting of 3,088 men gathered from a nationally representative sample of households in the United States. Thus because this sample is representative of the population, the results are more likely to be generalizable to the population.

Some limitations, which Knoester and Eggebeen (2006) reviewed, were due to the complexity of close relationships, divorce, blended families, and parenting behaviors. These complexities led to an inability to assess the multitude of possible scenarios and their possible impact on the results. For example, their study's controls for the effects of divorce did not capture the variety of experiences that divorced men may experience.

Also, although Knoester and Eggebeen (2006) illustrated that parenthood impacted fathers' lives in various ways, and that those changes can be both negative and positive, it was not clear from this study the impact of social connections on men's well-being. The study showed that men's well-being was negatively impacted by parenthood (parenthood associated with men's feelings of depression). However, did the increase in contact and support from extended family act as a buffer? Did the decrease in spending time socializing (with friends, coworkers, or neighbors) hinder the men's well-being? What impact did the increase in service-oriented activities and hours in paid labor (both of which can enhance the level of social connections) have on the men's well-being? The study does show, though, the important finding that social support systems and the nature of social ties change with fatherhood.

Many factors have been explored regarding the transition to parenthood. The four factors that have been most studied most extensively are (a) the congruence/incongruence between division of labor and couples' belief systems (e.g., Belsky & Kelly, 1994; Belsky & Rovine, 1990; Coltrane & Ishii-Kuntz, 1992; Daniels & Weingarten, 1982; Grote & Clark, 2001; Helms-Erikson, 2001; MacDermid et al., 1990; McHale & Crouter, 1992; and McHale & Huston, 1985), (b) the characteristics of the infant, for example, the infant's gender and temperament (e.g., Belsky & Rovine; Cox,

Owen, Lewis, & Henderson, 1989; Hultsch & Plemins, 1979; Payne, 1999; Sirignano & Lachmen, 1985; Wallace & Gotlib, 1990; and Wright, Jeffrey, Heneggeler, & Craig, 1986), (c) the depressive symptoms of the spouse(s) (e.g., Campbell, Cohn, Meyers, Ross, & Flanagan, 1992; Cowan, Cowan, Herring, & Miller, 1991; and Payne, 1999), and (d) the violated expectations of parenthood, which can include expectations regarding help from extended family and social support (e.g., Belsky, Ward, & Rovine, 1986; Kach & McGhee, 1982; Kalmuss et al., 1992).

The Violated Experiences of Parenthood Framework contends that expectations of parents before the birth of their first child can impact on their adjustment to parenthood, especially if the experiences violate the parents' expectations of what was to happen. Experiences that are more negative than expected may be associated with a more difficult adjustment to parenthood, and experiences that are more positive than expected may be associated with an easier adjustment. Thus, difficult parenting experiences that were anticipated may be more often associated with reports of an easier adjustment to parenthood than such experiences that were unanticipated. Research has supported these notions (Belsky et al., 1986; Kach & McGhee, 1982; Kalmuss et al., 1992).

Pertinent to this dissertation study, Kalmuss et al. (1992) also explored the impact of relationships with extended family and friends while testing the "Violated Expectations Framework." Specifically, Kalmuss et al. interviewed 473 White, married, and pregnant women at two-time intervals: when the women were in their final trimester of pregnancy and when it was one year post-birth. The initial sample consisted of 513 women. However, 501 followed through at the second time wave interview (i.e., 12

women dropped out of the study) and then a total of 473 (of the 501 participating) provided complete data on the variables of interest to the researchers.

The dependent variable was perceived adjustment to parenthood and the independent variables were parenting expectations and experiences in nine domains (six nonmaternal domains and three maternal domains). The six nonmaternal domains were relations with spouse, relations with extended family, relations with friends, physical well-being, employment, and financial well-being. The three maternal domains were maternal competence, maternal satisfaction, and caregiving assistance from spouse. The model also included these control variables: pre-birth marital quality, work status, child temperament, and stressful life measures.

Their results indicated that women perceived their adjustment to be more difficult when parenting expectations exceeded experiences in the following domains: relationship with spouse, physical well-being, maternal competence, and maternal satisfaction. Conversely, violated expectations regarding financial well-being and support from one's networks (relationships with extended family and with friends, and caregiving assistance from spouse) did not significantly affect the ease of adjustment of parenthood.

However, this is not to say that support from one's networks was not important. In contrast, Kalmuss et al. (1992) found that there were significant net effects for expectation measures regarding relationship with extended family and caregiving assistance from one's spouse. In both cases, the expectation effects were negative, indicating that the more support one expected, the more difficult the adjustment to parenthood, *regardless* of the amount of support and assistance actually received. The

researchers speculated (and found indirect empirical support for the notion) that high expectations for support from one's social network yield difficult transitions because they are difficult to satisfy, thus increasing the likelihood of dissatisfaction with any level of support actually received.

The strengths of Kalmuss et al.'s (1992) study include the large size of their sample (473 women) and the fact that it was a longitudinal study collecting data pre-birth (women at the latter part of their pregnancy) and post-birth (12 months after giving birth). This enabled the researchers to assess perceptions before the child arrives and then assess actual parenting experiences after the child arrives. Also, to be eligible for the study the participants had to be married, between the age of 22 and 36, pregnant with their first child, receiving prenatal care as a private patient, and have no history of miscarriages or infertility. Thus they were able to control for these other factors (e.g., history of miscarriages or infertility) that may have influenced the results. They also limited their study to Whites because sample size restrictions precluded what they felt would be adequate analysis of race/ethnic diversity.

One of the limitations of the study was the same strength mentioned above: Because Kalmuss et al. (1992) ensured having a homogeneous sample and thus eliminated some complexities of analysis caused by influence of other factors (e.g., age, infertility); they also had a sample that was not representative of other groups. Thus external validity was negatively impacted and no insights were gained on how women of other backgrounds transition to parenthood.

Despite the limitations, Kalmuss et al. (1992) showed the importance of expectations on satisfaction with perceived and actual social support. Having high

expectations of what support one will receive from family and spouse before having a child, may lead to disappointment regardless of the level of support actually received after having the child.

The Transition of Parenthood for Gay and Lesbian Couples and Connections with Support Systems

The National Lesbian Family Study (NLFS)

The most extensive study to date is a longitudinal study, which is projected to span a total of twenty-five years, from 1996 to 2021. The researchers Gartrell et al. (1996) began their longitudinal study of 84 lesbian families in 1996. The general aim of this study was to learn about these lesbian families, their homes, and the communities into which the children of these parents were born. Within this longitudinal study, analysis of four data points has occurred thus far (i.e., in 1996, 1999, 2000, and 2005).

Gay male couples choosing parenthood were not included in this study. The lesbian families chosen for the study were recruited through word of mouth referrals, announcements made at lesbian events, advertisements at women's bookstores, and in lesbian newspapers. They were recruited from three metropolitan areas in which the original researchers resided: Boston, Washington, D.C., and San Francisco. In order to be eligible the lesbians had to have been in the active process of Donor Insemination (D.I.) or were already pregnant by a donor. Lesbians who planned to share in the parenting, but not get pregnant themselves were included. Of the 84 families, 39 lived in San Francisco, 37 lived in Boston, and 8 lived in Washington, D.C. Of these 84 households, 70 included

a birth mother and co-mother, and 14 households were headed by single women. Participants were predominantly White (94%), college educated (67%), and held professional or managerial positions (82%).

In the first data collection point in 1996 the researchers sought to address five main topics: relationships (if coupled, with each other regarding cohesion of the relationship and parenting, and if not coupled regarding expectations for future relationships), social supports (expectations of support and from whom was support expected), pregnancy motivations and preferences (choices made about pregnancy: donor, timing of pregnancy, who was to be pregnant), stigmatization (concerns about stigma and what sorts of stigma were of greatest concern), and coping strategies(did participants anticipate being open about their sexual orientation and family or did they anticipate being closeted).

In 1996 Gartrell et al. interviewed the chosen prospective birthmothers and co-mothers using semi-structured interviews assessing eight areas of decision-making and aspirations regarding motherhood. Combined, these eight areas addressed the five main topics of their research: the couples' relationships with each other, social supports, pregnancy motivations and preferences, stigmatization concerns, and coping strategies.

In the area of social support, four participants were estranged from their families but the others all had some contact with families of origin. 86% phoned at least biweekly and 33% visited at least monthly. Many (43%) did not reside in the same geographic region as their parents, but 9% resided in the same city.

When participants were asked about anticipated family reactions to the prospective child, 78% expected at least some relations to accept the child. Also, 24%

reported that their parents were out regarding their daughter's lesbian lifestyle, meaning that they did not keep their daughter's sexual orientation from friends and family, and would be similarly out regarding their lesbian daughter having a child. These parents were expected to be out regarding becoming grandparents when the prospective child was born. However, 15% of the participants believed that no relative would acknowledge the child.

All the prospective mothers felt that friendships were important and 35% expected the friendships would be enhanced after the birth of the child. Another 27% felt the friendships would remain unchanged after the birth of the child.

In regard to stigmatization concerns, prospective mothers were primarily concerned about raising children in a nontraditional family in a society that is homophobic and heterosexist. The issue of raising a child conceived by D.I. was another concern. Finally, the impact of multiple discriminations on non-White or non-Christian children were a concern for some of the prospective mothers.

Results from this first time series study (Gartrell et al., 1996) found in sum that the prospective children were highly desired and thoughtfully planned, mothers-to-be were strongly lesbian identified, mothers-to-be had close relationships with friends and extended family, and mothers-to-be had access to appropriate support groups.

In the second time series of the study in 1999, Gartrell et al. had follow up interviews with the same group, now new mothers of toddlers (age 2). Semi-structured interviews were completed asking questions appropriate for mothers of toddlers. Topics addressed included health concerns, parenting issues, family structure, relationship issues, time management changes, and discrimination.

It was found that the mothers' relationships with their partners suffered because the demands of child rearing were stressful. Eight couples had split up since the first time series after being together for a mean of six ($SD = 2$) years. All of these mothers felt the breakup was traumatic yet surprisingly no significant differences on any variables assessed in the semi-structured interview were found between the couples still together and the couples who had not stayed together. These variables included assessment of 11 areas of motherhood experience (e.g., effects of motherhood on careers, family of origin, overall satisfaction).

Regarding connections with family of origin, 69% reported that having a child enhanced their relationships with their parents in regard to frequency of contact and positive feelings. A total of 55% reported increased contact with their parents and 77% reported that their parents were "delighted" with the grandchild. However, birthmothers rated their mothers as closer to the index children than co-mothers rated their parents. Also, 29% of the mothers reported that the grandparents were out about their grandchild's lesbian family (i.e., that the grandparents openly shared that they had a lesbian daughter with a child and had become a grandparent). On the other hand, 3% of the grandparents fully rejected their daughter and grandchild.

Close friends remained important to the mothers, and 38% had incorporated some friends as aunts and uncles to the child. The biological fathers played various roles: 12% actively parented, 13% did not actively parent but played a role in the child's life, and 75% had no role with the child at all (either the donors were anonymous or the donor's identity could only be determined when the child is 18 years old).

Discrimination outside of the lesbian community and within the lesbian

community was of concern. Outside of the lesbian community, 23% had experienced homophobia from healthcare providers during pregnancy. This was typically experienced by the healthcare provider's refusal to acknowledge the co-mother and her parenting role. Childcare was also an issue for some of the lesbian mothers: Eight percent had difficulty finding childcare because they were lesbians and four percent had changed day care providers because they felt the staff was homophobic. Within the lesbian community, only 58% of lesbian mothers felt that the community welcomed them and 27 of the mothers (of the 42 boys) were displeased regarding the exclusion of male children at women-only events.

For protections for their families, 54% had continued or increased their political involvement, 38% became more outspoken at work regarding homophobia, 67% had wills, 61% had power of attorney for child's medical care, 31% had co-parenting agreements, and 15% had donor agreements. All eligible co-mothers (i.e., living in an area where second parent adoption can be obtained by a lesbian) ($n = 16$) had officially adopted the child.

It was also found that among couples, 75% shared the responsibilities of child rearing and considered themselves to be equal co-parents. The egalitarianism in parenting roles was also associated with balanced allocations of paid and domestic labor. In other words, these couples had similar balances with each other in the areas of number of work hours and with contributions to household chores and division of labor. This last finding Gartrell et al. (1999) felt was consistent with Dunne's studies (1997, 1998) where Dunne contrasted coupled lesbian mothers with heterosexual two parent families in the United Kingdom. It was also consistent with an article Dunne later wrote (2000)

regarding how lesbian parents are blurring and transforming the roles and meaning of parenthood, including in the areas of household division of labor and childcare.

In the third time series phase of the National Lesbian Family Study (NLFS), Gartrell et al. (2000) found that 23 of the 73 original couples (31%) from time frame one in 1996 had dissolved their relationship. The mean duration of their relationship was 8.2 years ($SD = 3.6$). Of the 23 couples that broke up, 15 had dissolved their relationships between time two (1999) and time three (2000). Gartrell et al. (2000) compared this finding with statistics on heterosexual marriages reviewed in 1999 by Chadwick and Heaton. Chadwick and Heaton found that of heterosexual couples marrying in the 1980's, 20% dissolved their marriages within 5 years and nearly one third within 10 years. They also found that the heterosexual marriages lasted an average of 7 years and that based on their estimates they suggest that over one half of all children born to heterosexual parents will experience parental divorce. Thus, Gartrell et al. (2000) suggested that their findings from the NLFS were comparable to the divorce rates of heterosexual married couples.

In the NLFS, after a couple broke up, the birthmother of these couples was more likely to retain sole or primary custody if the co-mother had not legally adopted the child. In 43% of the cases, the children spent equal time with both separated mothers. In sum 150 mothers of 85 children participated in this time frame of the study (which occurred when the index children were five years old).

A 184-item interview was modified for this third data collection point from the instrument used at the second data collection point. The modifications were made so that appropriate questions for mothers of five-year-old children could be asked. This questionnaire assessed six areas of motherhood experience: health status, parenting

experiences, relationship issues, support systems, educational choices, and discrimination concerns. Of those couples still together, 68% felt that their index child was equally bonded to both mothers. Most of the children, according to the mothers, were healthy and well adjusted. Most of the children (i.e., 87%) related well to peers.

In the area of support systems, 63% of the index children's grandparents were out about their grandchild's lesbian family. However, 17% of birthmothers and 13% of co-mothers indicated that their parents did not relate to the index child as fully being their grandchild. Gartrell et al. (2000) did not report if other family members or friends played more of an active role in the lesbian families where parents did not relate to the index child as fully as their grandchild.

For the whole sample in this study, by this time series 2000, 76% reported that most of their close personal friends were parents too, and 68% felt that their families had been accepted by their neighbors. Most of the mothers (75%) were also active in the lesbian community and 87% felt this fulfilled an important role for their children. However, 18% reported experiencing some homophobia from peers or teachers.

In the area of children's contact with their fathers, among the children with known donors (21 children total), 29% saw their fathers regularly and 71% saw them occasionally. One issue raised was the knowledge that a single donor could be the father of multiple children in the lesbian community, and this knowledge caused discomfort for 37% of the mothers.

The fourth times series phase of the NLFS (Gartrell, Rodas, Deck, Peyser, & Banks, 2005) involved interviews with the index children (now ten years old) and interviews with the mothers as well. A total of 78 families participated in this time series

(six families had dropped out from the study). For the interviews with the children, a ten item questionnaire was sent to the mothers to review with their children. The children were then interviewed over the telephone by the researchers. The questionnaire was designed to examine the children's feelings about growing up in a nontraditional household, having lesbian parents, and experiences with homophobia.

The semi-structured interviews with the mothers were modified from the previous time series interviews and were comprised of 70 items. In addition, the CBCL (Achenbach, 1991) instrument which measures competencies and emotional/behavioral problems in 4-18 year old children as reported by parents or other caregivers was administered. The results from this instrument with the NLFS sample were compared with the mean scores for the normative and clinical samples studied by Achenbach.

Overall the results showed that the children were comparable to children raised by heterosexual parents in both psychological and social development and that the prevalence of physical and sexual abuse for these children was lower than national norms. In regard to children's disclosure to their peers about their family situation, 57% were completely out to their peers, 39% were out to some, and 4% concealed the information about their families to their peers.

Physical health of the children was also assessed and 20 children of 74 had health problems at time series four (i.e., six had asthma, six had neurologic conditions (migraines or seizures), two had kidney/bladder reflux, and three had other medical problems. Fifteen percent had developmental disorders. Gartrell et al. (2005) compared these health findings to different national norm statistics. The prevalence of asthma in

this sample (8%) was below the national norm (14.4%) using information from the American Lung Association, 2003. The prevalence of developmental disabilities in this sample (15%) was comparable to the national norm (17%) using information from the Centers for Disease Control, 2002.

In summary, the National Lesbian Family Study (NLFS) which has two more interviews planned (when the index children are 17 years old and again, when they are 25) is an ambitious and significant study in this field. The NLFS has a sample size larger than many in this area of research and it is a longitudinal study which spans many years, thus providing an opportunity to obtain more telling information than observational data taken at one interval of time. The NLFS also includes information from the mothers and from the children (beginning at time series four) and the interviews are both thorough and detailed. The NLFS achieved some geographic diversity as well, by including families living in different geographic areas of the United States.

The NLFS was a mixed method study which used both qualitative semi-structured interviews and also used some pre-tested instruments to gather statistical information. Of the data that was qualitative in nature and derived from the interviews, the NLFS' inter-rater reliability was at acceptable levels. Specifically, in 1996 there was 85% inter-rater agreement (or higher) for each item; in 1999 there was .93 (Cohen's Kappa) inter-rater reliability achieved for the total instrument; and in 2000 there was .95 (Cohen's Kappa) inter-rater reliability achieved for the total instrument.

To date, the NLFS also has had a high retention rate of 93%. From time series one in 1996 to time series four in 2005, 78 families have remained in the study and only six

families have dropped out. This is especially good given the study's span of 9 years and given that about one third of the couples had dissolved their relationships.

Although this study is ground-breaking, it does have some limitations.

One limitation was the lack of comparison groups in the study. Although it was not the aim of this study to assess gay parenting, and thus gay men-headed families were not included in this study, no insight has been gained on how gay men parents fare in their transition to parenthood and how they compare with lesbian parents. Also, a comparison group of lesbian-headed families *not* pursuing parenthood was not included and comparisons were not generated by these authors between their findings with parents and with other studies findings about lesbian nonparent couples (e.g., dissolution rates of lesbian couples in the NLFS compared with dissolution rates of lesbian nonparent couples). A comparison group of heterosexual families was also not included. However, this was not necessarily an issue because Gartrell et al. (2000, 2005) did compare the NLFS sample findings with different heterosexual findings in other studies (e.g., divorce rates of heterosexual married couples, health of children born in heterosexual families). Also, the extended families (i.e., parents of the mothers) were not interviewed so the mothers' views of parental support are based on perceptions the mothers have and these perceptions may or may not be in keeping with their parents' views.

Although the NLFS obtained a somewhat large sample size compared to similar research in the area of gay/lesbian parenting, Gartrell et al. (1996, 1999, 2000, 2005) ran into the dilemma of having a largely White, college-educated sample. And, although the participants resided in different geographic areas, the areas they lived in were mostly urban. Having a less diverse sample, which is probably not representative of the

population (although the specifics of the lesbian parent population are not known), can impact in various ways on the outcomes and negatively impacts on external validity. For example, some lesbian/gay people of color find, or if not out anticipate, that their families are more rejecting and less accepting of their being out as a lesbian/gay person (e.g., Merighi & Grimes, 2000). Thus, for those dealing with potentially more family rejection, how do they manage their choice to have children? Would their relationships with parents strengthen like many in the sample in the NLFS or would they rely more on friends? What about lesbian-headed families that are from a lower socioeconomic class and possibly have less access to resources than the participants in the NLFS sample? Social supports for these other groups may be negligible (see Speziale & Gopalakrishna, 2004) and may impact their transition to parenthood.

Finally, the semi-structured interviews were primarily qualitative open-ended questionnaires. Some of the questions lent themselves to pre-coding but some categories were developed from the text itself. Although gathering information in this way can be rich in detail, it can be hard to quantify if it makes sense to do so. Often their data could not satisfy parametric assumptions so nonparametric tests were applied to test for associations. Thus assumptions about causality cannot be made. Although this is also the case for many studies using parametric tests (which do not meet other criteria for asserting causality) it is something which must be taken into account when assessing the conclusions.

Some findings from the NLFS are especially pertinent to this study. The findings regarding support systems (connections with family and friends) are useful. From the start of the NLFS, most of the couples were already well connected

to their families of origin and to friends. This raises the question of whether or not this group chose to become parents in part because they already had strong connections with their own family of origin.

Nonetheless, most did report that their relationships with parents strengthened after becoming parents. In the first time series in 1996 (prior to having the first child), 24% had parents that were out about their daughter being a lesbian and anticipating having a grandchild from their daughter's lesbian relationship. By 1999, 29% reported that their parents were out to people they know about their lesbian-headed family, and a year later, in 2000, 63% reported having parents who were out to people they know about their lesbian-headed family. Additionally, prior to having a child, 15% anticipated that they would have no relatives that would acknowledge the child. However, in 1999, only 3% reported that they and their child were rejected by family. Thus, looking at the increase in the numbers of grandparents being out about their daughters' lesbian families, and the less than expected rejection towards their child by family, for this sample connections with family of origin strengthened.

In regard to support from friends, most did remain connected with their friends, and some of those friends were incorporated into the family as aunts and uncles. Many of the friends had also become parents themselves. Issues that arose for the lesbian parents were a perceived lack of support from the lesbian community as a whole, and some perceived discrimination from society at large (e.g., bias in treatment from healthcare providers and schools/ teachers); this was in contrast with the perceived acceptance that most felt from their next-door neighbors.

One possibility for the acceptance by neighbors but the perceived bias from

societal institutions (e.g., healthcare providers) is that if the lesbian-headed families have more contact with people in their daily lives (e.g., other parents from the school, next-door neighbors), they may be exposed to less bias and prejudice. This is in keeping with Gordon Allport's (1954) contact hypothesis which argued that interaction with stigmatized group members can lead to reduced prejudice among dominant group members. This has been tested and supported in recent studies which found that greater contact with gay/lesbian persons (especially close connections to gay/lesbian persons), results in reduced prejudice against gay/lesbian persons (e.g., Herek & Capitano, 1996; and Lemm, 2006).

Other Studies on Gay and Lesbian Parenting

In addition to the NLFS, there are other research studies which have examined gay and lesbian parenting and have included assessments of the social support networks of the gay and lesbian parents in their studies. Johnson and O'Connor (2002) conducted a study that they hoped would shed light on family life for gay/lesbian parents. They explored family formation (how these parents came to form their families), difficulties experienced or expected to experience, strengths the parents saw in their families, and what their priorities were as parents. In analyzing family formation and difficulties experienced, Johnson and O'Connor were interested in reactions of family and friends and support received or denied from these sources.

Johnson and O'Connor (2002) conducted their study using a nation-wide sample of gay and lesbian parents. They obtained a sample of 415 participants: 79 men and 336 women. These participants represented 256 families (some were single parent families

and some were two-parent families). Not all of the two-parent families had both parents participate in the study. Also, some of the respondents were parents from previous heterosexual relationships (referred to by the authors as gay and lesbian step-families) and some were parents from their gay and lesbian relationships (referred to by the authors as primary gay/lesbian families). The participants were from 34 states and were mostly White (94%) and had education beyond high school (49% had a graduate degree).

The participants completed questionnaires which were mailed to them. Johnson and O'Connor (2002) assessed the participants' relationship by using the Dyadic Adjustment Scale (Spanier, 1976) and a two-item assessment of their division of labor (Hetherington & Clingempeel, 1992). They also assessed parenting using three measures: The Parenting Alliance 20-item questionnaire, the Gay Parenting Assessment (developed for this study), and the Parenting Practices Survey (Holden & Zambarano, 1992).

Johnson and O'Connor (2002) found that these gay and lesbian families functioned well, and reported that their sample scored as well as or better than heterosexual parents in relationship adjustment and satisfaction and communication about their children. In regard to relationship adjustment and satisfaction, Johnson and O'Connor compared their sample to studies of married heterosexual couples using the same scale (e.g., Spanier, 1976). Scores of parental alliance were compared with scores of married heterosexual parents in other studies using the same scale (e.g., Abindin & Brunner, 1995).

In regard to division of labor, Johnson and O'Connor's (2002) respondents generally described an egalitarian arrangement which echoed findings from other research studies of gay and lesbian couples who were not parents (e.g., Kurdek, 1993).

Although for most there was a fairly distributed workload, Johnson and O'Connor also found that the biological mothers tended to do more of the child-rearing than the nonbiological mothers. This was consistent with other research done (e.g., Patterson, 1995). This tendency was found in both the lesbian step-families and the primary lesbian families. The researchers speculated that the difference was in part related to the biological parent taking maternity leave and then working less hours on average outside of the home (in their sample, an average of 35 hours per week) than the nonbiological mothers (in their sample, an average of 40 hours per week).

Pertinent to this research study was Johnson and O'Connor's (2002) findings about support systems. Gay and lesbian parents (from the primary gay and primary lesbian families) expected negative reactions from family about pursuing parenthood, and many actually did get negative reactions from family. Specifically, in the area of social support from family of origin, the majority of the lesbian mothers (54%) from primary lesbian families and a sizable minority of gay fathers (34%) from primary gay families anticipated negative reactions from their families about becoming parents and 44% of the lesbian mothers and 27% of the gay fathers reported experiencing negative reactions from their families. For the gay/lesbian participants that pursued trans-racial or other special adoptions, families had additional concerns regarding how these families and their children would be accepted by others. Although Johnson and O'Connor did not specifically ask about the family's reactions changing once a child arrived, some of the participants wrote about this change anyway. Johnson and O'Connor found from this information that for many parents that experienced initial disapproval from their families about pursuing parenthood, and often times this reaction "softened" with time.

The gay and lesbian parents (from the primary gay and primary lesbian families) expected less negative reactions from friends, and although they did have less negative reactions from friends compared with family, they had more negative reactions from friends than they had expected. Specifically, 18% of the lesbians and 18% of the gay men anticipated negative reactions from their friends regarding pursuing parenthood and 24% of the lesbians and 23% of the gay men reported they experienced actual negative reactions from their friends. The respondents who explained these negative reactions indicated their friends were unhappy with the decrease in amount of time spent with friends than in the fact that they had chosen to become parents per se.

At the workplace, 9% of the lesbians and 5% of the gay men experienced some negative reactions by their employers. Johnson and O'Connor (2002) discussed how the differences were mostly related to the different ways the lesbian and gay men were becoming parents. Specifically, the lesbians in their sample who were pregnant had to deal with issues of maternity leave/extended family leave whereas the gay men in their sample, even if biologically the parent, did not need maternity leave from their jobs. Johnson and O'Connor did not expand on why the gay men parents in their sample did not need maternity leave from their workplaces.

By far the most common concern of the gay/lesbian respondents themselves about parenthood was that their children would be teased or treated unkindly by others because of the parent's sexual orientation. Eighty-five percent of the gay fathers and 82% of the lesbian mothers had these concerns for their children. Despite these concerns, the majority of the respondents (83% of the lesbian mothers and 79% of the gay fathers) had spoken with their family physician/pediatrician about their family makeup and the

majority of the respondents (80% of the lesbian mothers and 93% of the gay fathers) had disclosed their status as lesbian/gay parents to their child's teachers. Of note, the statistic of lesbian mothers disclosing to teachers is misleading because 13% of the lesbian mothers sample did not have school-aged children. Thus, most were open about their sexual orientation and their alternative families.

Johnson and O'Connor's (2002) study had many strengths. They included gay men parents and lesbian parents, and had both coupled and single parent families. The inclusion of gay men parents is of importance since so few studies include them. Also, Johnson and O'Connor made distinctions between which couples had children from previous heterosexual relationships and which couples had children from gay/lesbian relationships, and they conducted their analyses accordingly. In other words, they had sub-groups for their study (primary lesbian, step-family lesbian, mixed lesbian combination of step and primary, other types of lesbian families, primary gay, step-family gay, mixed gay combination of step and primary, and other types of gay families) and they showed the differences among and between these groups in their tables and discussion. This is especially important because how these families became families can impact their experiences. For example, a lesbian parent from a previous heterosexual marriage may be especially concerned regarding custody issues and the difficulties of forming a new blended step-family.

Another strength of Johnson and O'Connor's (2002) study was the size of their sample (obtaining a total of 415 participants) and the geographic diversity of their sample (having respondents from 34 states in different regions of the United States). The respondents lived in areas that varied in regard to the political climate towards

gay/lesbian parents and were from different types of communities (i.e., 14% from rural areas, 48% suburban, and 38% urban). The size and diversity of the geographic regions helped this sample to be more representative of different gay/lesbian families than smaller sized samples and studies with participants from only one particular region.

Another strength of Johnson and O'Connor's (2002) study was choosing instruments that had been widely used in other studies on families and had established norms, enabling them to compare their respondents' scores to other groups from other studies. They also allowed respondents in the questionnaires to give more details and write about their experiences, which helped the researchers get more in-depth information about the families' experiences.

One of the drawbacks to Johnson and O'Connor's (2002) study was the disproportion of gay men respondents compared with lesbian respondents. There were 79 individual gay men (representing 54 gay male headed households) and 336 individual lesbians (representing 202 lesbian-headed households). Then when the sub-groups were formed to show step-families and primary families, the sample had 30 primary gay families, 18 gay step-families, 6 "other" type of gay families, 115 primary lesbian families, 59 lesbian step families, 16 blended lesbian families (mix of primary and step), and 12 "other" type of lesbian families. Thus, although this study attempted to examine both gay and lesbian-headed families, most of their respondents were lesbians.

Another drawback related to Johnson and O'Connor's (2002) sample, was that it was a mostly White (94%) and educated (approximately 49% had a graduate degree) group. As mentioned in the discussion of Gartrell et al.'s (1996, 1999, 2000, 2005) studies, having a lack of representation of gay and lesbian people of color can impact on

the findings, negatively impacting external validity. Also, because of additional issues of family rejection and compounded discrimination faced by gay and lesbian people of color (e.g., Merighi & Grimes, 2000), not having a diverse sample in a research study does not allow these other issues to be assessed and analyzed.

Another possible limitation of this study was whether issues of collinearity were statistically addressed. Specifically, the study included respondents that were coupled and both their responses and their partner's responses were included in each measure. Other respondents that were coupled only had one of the two complete the study, and other respondents were single. However, in the areas that were measured, there was no mention of how the statistics took into account that some of the numbers represented people from the same family unit leading to potential issues of collinearity. An exception was the measure of division of labor which specifically discussed obtaining information from each person of the couple, and the information was used to assess their level of agreement on estimations of the workload each carries.

Overall, though, the Johnson and O'Connor (2002) study was a significant study done in the area of gay and lesbian parenting. Pertinent to this dissertation study, Johnson and O'Connor examined the support systems of gay and lesbian parents and the study highlighted the concerns that gay and lesbian-headed households have about acceptance by family, friends, workplaces, and societal institutions. These families, despite their concerns, are mostly out in different areas of their lives and manage to maintain connections with people outside of their immediate family unit. It is encouraging that families seem to "soften" in their reactions over time, which is in keeping with other studies' findings (e.g., LaSala, 2001, 2002).

In one much earlier study Stiglitz (1990) wanted to learn more about the dissolution rate of lesbian couples having children. She had noticed in her personal and clinical experience that a disproportionate number of lesbians in committed relationships were ending their relationships by the time the child was between one and three years old. She wanted to understand what was happening to these couples, especially in light of the fact that these couples had been together for some time and had spent a lot of time planning to have a child. Stiglitz wanted to see what was happening in this process and conducted a very small study which included heterosexual parent couples and lesbian parent couples.

Stiglitz (1990) sent questionnaires to ten heterosexual couples and ten lesbian couples, and received five completed questionnaires from the heterosexual couples and seven completed questionnaires from the lesbian couples. Questions on the survey assessed different components of relationship satisfaction (two years pre-birth and two years post-birth) and focused mainly on intimacy, dependency, power, and social and community support.

In the area of social support, Stiglitz (1990) found that first time lesbian mothers were more dissatisfied with the level of connection to their families of origin than were first time heterosexual mothers. Further, the lesbian mothers felt like they had less connectedness with the community compared with their heterosexual counterparts and thus felt more like a separate family.

Stiglitz (1990) suggested that commitment is a factor that may help to hold a couple through rough months post-birth. Heterosexual couples, having a socially sanctioned marriage, may be more inclined to stay and try to work through the problems.

Although this study is dated and the sample size was quite small, it's findings about the lesbian parents' perceived lack of support from family and community is consistent with more recent studies' findings and emphasizes the probable importance of social support to couples' stability and longevity.

The Importance of Social Support Networks for Heterosexual Couples and Families

Overall the research indicates that perceived positive support from one's social network increases the stability of the married couple's relationship (Bryant & Conger, 1999). For heterosexual couples who are romantically involved, but not yet legally married, the same results hold true (Johnson & Milardo, 1984; Parks, Stan, & Eggert, 1983; and Sprecher & Felmlee, 1992). In fact, most of the research conducted in this area has been on premarital romantic relationships, and fewer studies have investigated the impact of networks on the transition to parenthood, and on long-term marital relationships.

Sprecher and Felmlee (1992) examined how social support from parents and friends for the romantic relationships of young adults affects the quality of their relationships and the stability of their relationship (i.e., the likelihood of whether or not their relationship would break-up over time). Sprecher and Felmlee conducted a longitudinal study and interviewed a sample of dating couples at a Midwestern university in the fall of 1988 (Time 1), the spring of 1989 (Time 2), and the spring of 1990 (Time 3). At Time 1 in 1988, 101 couples (202 individuals) participated. Most were White (97.5%), and most were middle or upper middle class (86.6%). At Time 2, of the 166 partners still in their relationships, data for all but five partners were available. At Time 3,

of the 124 partners still in their relationships, data for all but two partners were available. In sum, of the 62 couples (of the original 101 couples) still together by Time 3, data was available for both partners at all three waves for a total of 58 couples (98%).

Three types of social network variables were the independent variables measured in this study. One type measured was “social reactions” or “network support”, which assessed how much support or discouragement the participants received from others to continue to date or be together as a couple. The second social network variable measured was “social network overlap,” which assessed the extent that the couples have shared mutual friends. The third type of social network variable measured if a partner liked the other partner’s social networks. The questions asked about the other partner’s family and the other partner’s closest friends. The dependent variable measured relationship quality using three separate measures: “love” (i.e., how much the participants felt they loved their partners), relationship satisfaction, and relationship commitment.

The variable of “social reactions” or “network support” (support or discouragement for the relationship) was positively related to all three measures of relationship quality, and these relationships were statistically significant. Further, Sprecher and Felmler (1992) found that increases/decreases over time in social support/network support were consistently and strongly associated with increases/decreases in the levels of love, satisfaction, and commitment. Sprecher and Felmler also found some gender differences in regard to impact of support on couples’ stability. They found that the more support women received from their family and friends, the more stable were their relationships. On the other hand, support from men’s social network did not have significant effects on dissolution rates.

The extent of liking the other partner's networks was not found to explain any additional variance not already explained by network support or network overlap. Finally, network overlap only seemed to have a positive effect for males at Time 3 satisfaction. At Time 1, it had a negative effect for males in regard to "love" and a negative effect for males and females in regard to commitment. The authors suggest that network overlap is not a significant and positive predictor of relationship quality because its effect may be mediated entirely by social "network support."

Overall, Sprecher and Felmlee (1992) found strong support, in their three-wave longitudinal study of romantic couples, for the notion that social network support is a significant and positive predictor of perceptions of relationship quality. Their study had some strengths: It was longitudinal with three data collection points, it had a total of 101 couples (202 individuals) participating, and measures were used that had already been developed and tested by other researchers. One drawback to this study was the sample's lack of diversity (97.5% were White and 86.6% were middle or upper middle class) which negatively impacts external validity. Also, as mentioned before, there can be differences in social ties and networks for people of color. Finally, this study examined young college aged couples, without children, and most of these students lived on campus. Social support may be very different for a student living with friends at college versus a person living on their own with their partner.

However, although this study by Sprecher and Felmlee (1992) examined unmarried college students, the results still suggest the importance of social support on relationship satisfaction, "love" in the relationship, commitment to the relationship, and

longevity of the relationship. This study supports and confirms other research about the impact social support has on couples' relationships.

Previous studies have also found that low levels of support from one's own and/or from one's partner's networks predict deterioration of romantic relationships and positive social support can have a positive and linear relationship with romantic involvement (e.g., Parks et al., 1983). The nature of social support and its potential negative interference across the stages of a couple's courtship has also been examined (e.g., Johnson & Milardo, 1984).

Parks et al. (1983) hypothesized that five characteristics of social network involvement (positive perceived support from a person's own network, positive perceived support from the partner's network, amount of communication with the partner's network, attraction to the partner's network, and range of contact with the partner's network) would be interrelated and that each network characteristic would be positively associated with romantic involvement. To test their hypothesis, they obtained a sample of 193 students (94 males and 99 females) at a college by advertising in the campus newsletter and using handbills. The participants had to be currently involved in heterosexual romantic relationships. Cohabiting couples, married couples, and couples having a partner living outside the local area were not eligible for the study. The participants were in a coupled relationship anywhere from less than two weeks to 72 months. The median time together was 11.04 months and the average age of the participants was 19 years old ($SD = 1.66$).

Data was collected from an extensive questionnaire and measures were created by Parks et al. (1983) to assess the five areas of network involvement and to assess the

dependent variable of romantic involvement. The results showed that romantic involvement and network involvement are closely associated with each other and found strong positive relationships among all the factors. A positive, linear association was found between romantic involvement and support from the network in general. This positive linear relationship was also found between romantic involvement and any one sector of the network in particular. Support from one's own network was more strongly linked to romantic involvement than support from the partner's network.

Although Parks et al.'s (1983) study was older, it had results similar to those found by Sprecher and Felmlee's study (1992), which also focused on young unmarried college students. It again emphasized the importance of the social support network's influence on a couple's well-being and stability.

Johnson and Milardo (1984) in their study wanted to examine "negative interference" from the network (i.e., opposition of the social network towards the couples' relationship) and its relation to couples' relationships. Specifically they anticipated changes in reactions from the social network as the couple goes through the stages of courtship. Very early on in a couples relationship, Johnson and Milardo anticipated no network interference but then when a couple gets more serious, and their relationships can infringe on relationships with others in the social network, they expected some opposition from the network. This opposition could be the first task that the couple must work through to survive as a couple. Then in later stages of courtship continued opposition from the network was anticipated resulting in negative consequences for the network (i.e., withdrawal of the couple from the network). Once the couple gets engaged and the marriage is imminent, the response of the network was

anticipated to shift from opposition to encouragement of both the couple's bond with one another and their bonds with family and friends. Thus, Johnson and Milardo anticipated network interference to be curvilinearly related to the couple's level of involvement.

To test their hypotheses, Johnson and Milardo (1984) obtained a simple random sample of 750 respondents from Pennsylvania State University. They had mailed letters and questionnaires to a total of 1,492 students so they had approximately a 50% response rate for their study. They measured degree of relationship involvement (if any) and degree of network interference and they found support for their hypothesis that level of network interference varies across stages of a relationship. They also found that the strength of the network's reactions to couples relationships is a function of several factors including proximity and the qualities of the role of the network member (the investment of network member to the person's past and future development). Johnson and Milardo found in their sample that negative interference was greatest when its source was immediate kin compared with friends and other relatives. Thus close family members residing near the couple may have more impact on the couple than family living farther away and/or than people not as emotionally close to the couple.

Some limitations to this study include the issue that the sample was comprised of young college aged students many of whom lived on campus. Only 5% lived with their significant other and one third of their sample reported no dating relationships at the time of their study. Social networks can be different for college students in campus housing than adults living on their own with their partners.

However, this study by Johnson and Milardo (1984) obtained a large random sample and their findings were consistent with other research. Related to this dissertation

study, their research illustrates the importance of social network on a couple's functioning. It also shows that if the network member's connections with a person are strong and if the network member is in close geographic proximity to the person, their negative interference can more severely impact on the person and their relationship. Thus it shows that social ties which are not supportive, and instead are negative, can adversely impact on a couple's well-being.

For the present dissertation study, which looked at cohabitating and/or married couples, studies of heterosexual married couples and their social networks are more directly related. In one of those studies focused on married couples, Bryant and Conger (1999) looked at three areas of social network influence: support specifically for the relationship (network members' messages of approval and disapproval), affective overlap (couples who have and maintain shared networks), and general personal support (feeling generally supported in life). The first two areas were explored in Sprecher and Felmlee's (1992) study, but Bryant and Conger added the "general personal support" domain and did not explore the degree of how much couples like their partners' support systems. Their outcome variable (dependent variable) of interest was marital success which they defined in terms of satisfaction, commitment, and stability.

Bryant and Conger (1999) study began in 1989 and subsequent interviews occurred in 1991, 1992, and 1994. The data analyzed came from a total of 451 rural White families living in eight adjacent counties in a Midwestern state. In 1989, the median age of the husbands was 39 years old and the median age of the wives was 37 years old. To participate, the families had to have two parents and at least two children: One had to have been in 7th grade and one had to have been within 4 years of age to the

child in 7th grade. The families were recruited from all public and private schools in communities of 6,500 or fewer in eight counties. Thus it was a total population sample of all families living in the rural area of interest to the researchers. Of those eligible, about 79% agreed to participate.

Personal visits were made to these families by the interviewers twice per year. These interviews included administration of questionnaires and conducting a series of videotaped discussion tasks. Each family member was paid \$10 per hour for participating. The items in the questionnaires measured the areas of social support specifically for the relationship, affective overlap (a measure of the network members shared by both spouses and liked by both spouses), personal support, and marital success. Some of the items were constructed by Bryant and Conger (1999) and some of the items were adapted from other instruments (e.g., personal support was developed from an adaptation of the Interpersonal Support Evaluation List ISEL, Cohen & Hoberman, 1983).

Bryant and Conger (1999) found that for husbands, affective overlap (shared social networks with spouses) showed the next strongest association with marital success, followed by personal support. For wives, personal support (feeling generally supported in life) showed the next highest association with marital success, followed by affective overlap. However, relationship-specific support (network member's messages of approval or disapproval) was the only significant predictor of marital success in their structural equation models.

From their findings, Bryant and Conger (1999) argue that networks influence couples' relationships and that couples' relationships in turn influence the support they receive. In other words, as a couple receives more support from their social networks, the

greater their satisfaction with their relationship, and the more stable the relationship becomes. Likewise, as a couple's relationship endures and is stable and satisfying, the more network support the couple receives. Therefore, they conclude that this is a cyclical process.

Some strengths of this study include that a large sample was obtained and it was a longitudinal study spanning five years, with data collection points occurring at four different times. Also, it was a study that looked at married couples. Much of the research on networks and romantic involvement obtain samples from college campuses and examine unmarried couples most of whom live on campus. This study filled a gap in the literature.

A limitation to this study was that it only looked at White families residing in a rural area. This study did not look at how these support systems may be the same or different for members belonging to another race, geographic area, or socioeconomic class. This lack of diversity does not allow one to generalize to the population and thus negatively impacts external validity. This is also an important limitation because support systems can vary in many ways based on socioeconomic level, ethnicity, and community (e.g., Miller-Cribbs & Farber, 2008). Thus, having a homogeneous sample of largely White respondents living in a rural mid-western area of the US can impact on the results found.

Despite the limitations, these studies on heterosexual couples and their social networks suggest the importance of social support on heterosexual couples' relationships. They also illustrate that both one's own network and the partner's network can impact on

romantic involvement and different factors (e.g., closeness with the network members and geographic proximity to the network members) can be influential.

Children, impacted by their parents' well-being (individually and as a couple), also benefit from the positive effects of social support and from the moderating effects of social support on stress. In addition to reaping benefits from their parents' social ties and social support (e.g., Hamlett, Pellergrini & Katz, 1992; Wertlieb, Weigel, & Feldstein, 1987), children can have their own social ties and support system and this support is important for their own well-being (e.g., Guest & Biasini, 2001; Guidubaldi & Cleminshaw, 1983).

Studies have assessed the impact of social support on children in many areas of life including children dealing with divorce, childhood illness, discrimination, poverty, and academic struggles. In the face of medical illness, studies have found that children fare better if they and their parents have strong social support systems. For example, Varni, Katz, Colegrove, and Dolgin (1994) conducted a study on perceived social support and adjustment of children with newly diagnosed cancer. They found that children who perceived more classmate social support reported fewer depressive symptoms and their parents reported fewer behavior problems. Hamlett et al. (1992) examined the stress on family when dealing with childhood chronic illness, and they found that mothers who perceived their own social support system to be optimal also reported fewer child behavioral problems. Similarly, Visconti (2005) assessed parental stress and child behavioral adjustment in children with Congenital Heart Disease (CHD). She found that those parents who experienced the lowest levels of stress also reported the highest amount of social support, and the parents who experienced the highest levels of stress

reported lower amount of social support and more child behavior problems. One of her conclusions was that there are benefits of social support for families of children with medical conditions.

Guest and Biasini (2001) examined if social support impacts on children living in poverty and found that social support was found to be one possible mediator of the child's reported stress on their self-esteem. In other words, enhancing children's social support may positively influence their self-esteem. In turn, self-esteem can impact other areas of the child's life including achieving goals and academic performance.

In a study assessing the impact of family support systems on children's academic and social functioning after divorce, Guidubaldi and Cleminshaw (1983) found that support systems have substantial effects on the child's school adjustment. The availability of helpful relatives, including in-laws, the availability of friends and paid care child care, a positive relationship between the child and the noncustodial parent, and the custodial parent's activities in both occupational and educational endeavors emerged as significantly related to child performance.

These studies illustrate the importance of social support to a child's well-being: emotionally, behaviorally, and academically. They also illustrate the connections between parents' perceiving adequate social support for themselves, and the related associations with child behavior and child performance.

As a whole these studies, which examined social support's impact on heterosexual families (as individuals, couples, and children), showed how vital social support is in the areas of emotional, relationship, and physical health. Therefore, it is essential that more is learned about social support and gay and lesbian families, including their sources of

social support and how their use of support is similar/different than their heterosexual counterparts.

The Importance of Social Support Networks for Gay and Lesbian Couples and Families

The relation of social support to the quality of gay and lesbian relationships has been studied. The current research overall finds that couples do better with more support, regardless of the source of that support (e.g., Jordan & Deluty, 2000; Kurdek, 1988).

The research also finds that gay and lesbian couples tend to find much of their support from friends, and not as much support from family, especially when compared to heterosexual couples (e.g., Julien, Chartrand, & Begin, 1999; Kurdek, 2001).

In two earlier studies, Kurdek (1988) and Murphy (1989) found that social support impacts aspects of a couple's adjustment. Kurdek (1988) found that high social support, particularly by partners and friends, was positively related to psychological adjustment. Frequency of support from family was unrelated to adjustment, which Kurdek (1988) attributed to the importance of the gay and lesbian community for many gay and lesbian persons. Murphy specifically examined the role of parents of the lesbian couples in connection to the quality of the lesbian couples' relationships. She found that the perception of parents' attitudes toward the couple, the partner, and the daughter's lesbianism does affect relationship quality. More recent studies echo the results that social support has an impact on aspects of a couple's relationship.

Specifically, Jordan and Deluty (2000) investigated the relationship between lesbians' disclosure of their sexual orientation with positive and negative emotionality, social support, and relationship satisfaction. To obtain a large sample, Jordan and Deluty

distributed 1500 questionnaires (which were developed for this study) to women involved in a lesbian relationship. A total of 517 (34.5%) were returned, and 18 of the 517 had insufficient data for the analysis. Thus, they had a total sample of 499 participants. For this particular study, Jordan and Deluty only included 305 participants who reported being in a serious relationship with one woman. The 305 participants were mostly White (85.6%) and 96% had at least some college.

There were six independent variables used for this study. The independent variables were: extent of *disclosure of a lesbian identity* (which was assessed using two measures), *social support* (which was assessed using the short form of the Social Support Questionnaire) (SSQR; Sarason, Sarason, Shearin, & Pierce, 1987), *self-esteem* (which was assessed using the General Self-Worth subscale of the Adult Perception Scale) (Messer & Harter, 1986), *anxiety* (which was assessed using the State-Trait Anxiety Inventory) (Spielberger, 1983), *positive affectivity* (which was assessed using the Well-being scale of Tellegen's Multidimensional Personality Questionnaire) (Tellegen, 1985), and *involvement in a lesbian relationship*. The primary dependent variable was relationship quality (satisfaction), assessed using Spanier's (1976, 1989) Dyadic Adjustment Scale (DAS).

Jordan and Deluty (2000) created a path analysis which hypothesized the predicted pathways of direct and indirect effects of causal variables on effects variables. After the analyses were done, a final pathway model was created. In this final model, social support and extent of disclosure influenced relationship quality in a positive direction. In other words, the greater the extent of disclosure and the more social support

received, the higher the level of relationship satisfaction. Discrepancy between partners' level of self-disclosure resulted in less relationship satisfaction.

In sum, more social support from all sources (i.e., friends, relatives, co-workers) resulted in a greater level of relationship satisfaction, and this correlation was significant at the $p < .05$ level. The extent of disclosure (openness regarding sexual orientation) impacted social support and to a lesser extent impacted relationship satisfaction. Jordan and Deluty (2000) suggested that disclosure may be critical to obtaining social support and building a broader social support network. Without disclosure, the individual loses the ability to discuss both good and bad aspects of the relationship and the ability to find support in the event of a crisis. This social support may be critical to the functioning of the couple.

Jordan and Deluty (2000) study has some strengths: The study obtained a large sample of 305 participants and although they also had a mostly White sample (85.6%), this percent was lower than in some of the other research (which generally had 90% or more White participants). They also used scales that had already been widely used and tested to measure some of their variables (e.g., Spanier's 1976, 1989 Dyadic Adjustment Scale).

One weakness of Jordan and Deluty's (2000) study was that their sample was probably not representative of all lesbian women because people in nonprofessional jobs, in a lower socioeconomic class, and people of color were underrepresented. Disclosure can be impacted by race/ethnic background (e.g., Merighi & Grimes, 2000) and social support networks can be influenced by economic circumstances (see Miller-Cribbs &

Farber, 2008). Despite this drawback, this study offers more evidence of the importance of social support systems on relationship satisfaction.

Kurdek (2001) assessed differences between heterosexual (nonparent) couples, heterosexual (parent) couples, gay couples, and lesbian couples in five domains pertinent to close relationships. Those five domains were individual differences, relationship schemas (i.e., what happens in the relationships, such as intimacy, autonomy), conflict resolution, social support, and relationship quality.

Kurdek (2001) obtained participants from two separate longitudinal studies: one in which heterosexual married couples were participants and one in which gay and lesbian couples were participants. In both studies, seven annual assessments were obtained from each group of couples. The sample size for each sub-group at each of the seven data collection points was as follows: heterosexual parents ($n = 90, 88, 75, 66, 61, 56, 50$), heterosexual nonparents ($n = 108, 88, 59, 50, 40, 33, 29$), gay nonparents ($n = 150, 132, 122, 120, 114, 74, 66$), and lesbian nonparents ($n = 102, 92, 84, 76, 108, 90, 104$). Both partners of each couple were mailed identical surveys. Of note, the gay and lesbian couples were cohabitating but there were no requirements for how long the gay and lesbian couples had to be cohabitating. Also, the gay and lesbian partners that were also parents were not identified, so parenthood status was not teased out with the gay and lesbian groups yet the heterosexual groups were separated based on parenthood status.

The data on the variables of interest to Kurdek (2001) were obtained from different instruments which had been tested and used in other studies. To measure the domain of individual differences, eight different instruments were used to assess life satisfaction, private self-consciousness, perspective taking, expressiveness, dysfunctional

beliefs about relationships, the “big five” personality traits (i.e., neuroticism, extraversion, openness, agreeableness, and conscientiousness), facets of neuroticism, and attachment styles. To measure the domain of relationship schemas four different instruments were used to assess affective expression, dyadic cohesion; intimacy, autonomy, and equality; and interdependence. To measure the domain of conflict resolution, four measures were used to assess ineffective arguing, consensus, conflict resolution styles, and communication styles. To measure the domain of social support, two measures were used to assess sources of support and social support satisfaction. To measure the domain of relationship quality (appraisal of the relationship), three measures were used to assess relationship satisfaction, commitment to the relationship, and level of positivity/negativity in the relationship.

Since the domain of social support is related to this current dissertation study, more specifics about the measures Kurdek (2001) used to measure social support is examined. The two measures utilized were the Sarason et al.’s (1987) Social Support Scale (satisfaction of social support) and Sprecher and Felmlee’s (1992) measures of reactions from members of one’s social network to a relationship (sources of support). Sarason et al.’s (1987) instrument has respondents use a six point response format (1 = *very dissatisfied*, 6 = *very satisfied*) to indicate how satisfied they are with support received in six areas. It had a Cronbach alpha for the summed composite score of .92 and it is a widely used instrument to measure satisfaction of social support. Sprecher and Felmlee’s instrument used a nine-point response format (1 = *not at all*, 9 = *quite a lot*) to index the level of approval and support for the couples relationship from the following four sources: own family, partner’s family, own friends, and partner’s friends.

Kurdek's (2001) findings in the area of social support echoed previous studies (Bryant & Demian, 1994; Kurdek & Schmitt, 1987). Specifically he found that gay and lesbian partners obtained little support for their relationships from family members, and reported lower levels of approval for their relationship from their own family than did partners from heterosexual nonparent couples. The effect sizes of these differences were among the largest obtained in his study. In contrast, lesbian couples reported higher levels of approval for their relationships from friends (their own friends and friends of their partners) than the heterosexual nonparent couples. Kurdek (2001) raised an interesting question: Does strong support from friends buffer couples from a lack of support from family?

Differences were also found between heterosexual nonparent couples and heterosexual parent couples in the domain of social support. Partners from parent couples reported less overall satisfaction with social support than those from nonparent couples. Partners from parent couples also reported less positive quality and more negative quality than those from nonparent couples. These findings are different than some other findings from studies on heterosexual families. Knoester and Eggebeen (2006) found that fatherhood increased men's social ties to family. Johnson and Milardo (1984) asserted and found evidence that as a couple goes through the stages of courtship, ultimately family becomes encouraging and supportive of couples that stay together and marry. One would infer from Johnson and Milardo's study that this positive movement in support from family would continue once a couple had children, further entrenching that couple as a unit. On the other hand, Kurdek's (2001) study may lend possible support to Kalmuss et al.'s (1992) findings that for those who have high expectations of social

support before parenthood, satisfaction with social support is low regardless of support received after parenthood.

Kurdek's (2001) study had many strengths including the large sample size, the fact that it was a longitudinal study with seven data collection points, the use of multiple instruments for each domain, and the utilization of widely used and tested instruments to measure the five domain areas.

One significant limitation to Kurdek's (2001) study was the lack of controlling for the parenthood status for the gay and lesbian sub-groups. This is especially a problem because Kurdek (2001) included both heterosexual nonparents and heterosexual parents in his study, and their responses were analyzed according to parenthood status. Also, since Kurdek (2001) specifically wanted to compare and contrast different types of couples having this area unknown is problematic. Another limitation was that the couples were not matched on demographic variables.

This study, despite its limitations, supports other research regarding the perceived lack of support gay and lesbian couples receive from family and the perceived support they do receive from friends (e.g., Kurdek, 1988; Weston, 1991). It also raises the question about parenthood and social support based on its findings with the heterosexual groups.

Kurdek (2004) did another comparison study between heterosexual married couples (parents, $n = 80$), heterosexual married couples (nonparents, $n = 146$), gay couples (nonparents, $n = 80$), and lesbian couples (nonparents, $n = 53$), and he again examined five domains of the couples' relationship health. Kurdek (2004) was interested to know how gay couples and lesbian couples compare with heterosexual married

couples. Differences between heterosexual parents and heterosexual nonparents were not of central interest in this particular study.

The couples were again obtained from the same two longitudinal studies (see Kurdek, 2001 discussion), but additional data collection points occurred. Also, Kurdek (2004) did not include any gay/lesbian couples that were parents. In the previous study (2001) parenthood status was not assessed for the gay/lesbian couples and in this study Kurdek (2004) defended the decision not to include gay/lesbian parents because the majority of gay and lesbian cohabitating couples are childless. Also, in this study the heterosexual parents were used as the reference group.

The five domains of relationship health explored in Kurdek's (2004) study were psychological adjustment, personality traits, relationship styles, conflict resolution, and social support. Social support was included because "the partners' relationship is embedded in other relationships—such as those with family members and friends—that affect how partners behave toward one another (Kurdek, 2004, p. 882).

In the area of social support, Kurdek (2004) used the same two measures as he did in Kurdek (2001) (i.e., the Sarason et al. [1987] six-item support scale, and questions developed by Sprecher and Felmlee [1992] regarding perceptions of support from four sources: members of their own family, members of their partner's family, their own friends, and their partner's friends). Results echoed the findings from Kurdek (2001) showing that gay partners and lesbian partners perceived less support for their relationships from their own family and from their partner's family than did heterosexual parents. Lesbian partners also perceived more support for their relationships from their

own friends than heterosexual parents did. The study did not find differences between heterosexual nonparents and heterosexual parents on any social support score.

Interestingly, when differences between type-of-couple were found in the Kurdek (2004) study, 78% of these differences indicated that gay partners and lesbian partners functioned better than heterosexual partners (but most effects were small in size). The only area where gay partners and lesbian partners fared less well than heterosexual partners was in perceived levels of social support from family members.

One of the limitations in this follow-up study was using heterosexual parents as the reference group. Since Kurdek (2004) specifically excluded gay/lesbian parents from this study, it seems misguided to then compare this nonparent gay/lesbian group with heterosexual parents. Further, it would make more sense to compare the gay/lesbian nonparents with the heterosexual nonparents especially since data was collected in this study on that group.

Nevertheless, Kurdek's (2004) study also has some significant strengths including its large sample size, the fact that it was a longitudinal study spanning many years, and the use of widely used and tested instruments. Thus, the conclusions, though tentative, are important and relevant to this dissertation study. Again it supports gay/lesbian couples' perceptions of little support from family and more support from friends.

Another comparative study between heterosexual and gay and lesbian couples in regard to social networks and social support was done in 1999 by Julien et al., who hypothesized that gay/lesbian couples would have fewer family members and more friends in their separate and joint networks than heterosexual couples. They also hypothesized that gay and lesbian couples would have kinship ties that provided fewer

kinds of support than their heterosexual counterparts. Conversely, they hypothesized that gay and lesbian couples ties with friends would provide more kinds of support than friendship ties with heterosexual couples. They also suggested that gay/lesbian couples would share a larger proportion of their network than heterosexual couples.

For their study, Julien et al. (1999) obtained a sample of 133 cohabitating couples. There were a total of 266 individuals and all were White, French-speaking residents of Montreal, Canada and its suburbs. There were 50 heterosexual married couples, 50 gay couples, and 33 lesbian couples. The couples in each of these groups had to have been living together for at least two years, and some of the couples had children. However, parenting status as well as the number of children was not examined as independent variables in the analysis. It should also be noted that the heterosexual couples had on average more children than the gay and lesbian couples.

Both partners of each couple were asked to complete a set of questionnaires and participated in a 45-minute structured interview about their social network. The two partners were interviewed in separate adjacent rooms. For all the analyses, the couple was the unit of analysis.

This study examined “conjugal” adjustment of the couple and the structural characteristics of the social networks. Conjugal adjustment was measured with an adapted version of the Marital Adjustment Test (Locke & Wallace, 1959). This instrument has high internal consistency (split-half $r = .90$), good concurrent validity ($r = .86$) with the Dyadic Adjustment Scale (Spanier, 1987), and excellent validity regarding discriminating between adjusted and unadjusted couples. Julien et al. (1999) adopted their version of this instrument to eliminate any gender-specific wording.

The structural characteristics of social networks was measured with a French version of the Northern California Community Study Interview Schedule (NCCS; McCallister & Fischer, 1978). The NCCS showed good discriminating validity in urban and rural populations and in adjusted and unadjusted American heterosexual couples. Each participant's particular social network (e.g., friends, family of origin, extended family, co-workers) was also examined, including a determination of whether these people were part of a joint network (shared by the couple) or part of an independent network of each partner.

Julien et al. (1999) found that both gay and lesbian couples shared a larger portion of their social network than did the heterosexual couples. Also, the joint network of same-gender couples comprised more friends than the joint network of heterosexual couples. In looking at proportions of kin to friends, their findings showed same-gender couples having a larger proportion of friends to kin than the heterosexual couples. Overall, Julien et al. (1999) found no differences between the network structures of gay and lesbian couples, and they were similar in several dimensions of conjugal processes. They did find a tendency for different predictors of conjugal adjustment. Specifically the predictors were friend-related for gay couples and friend-and kin-related for lesbian couples.

For heterosexual couples Julien et al. (1999) found that the women tended to have more kin than husbands in the joint network. Thus, they concluded that kin support may be a crucial factor for harmony in women's intimate relationships, irrespective of their sexual orientation.

Julien et al. (1999) acknowledged that the presence of children was not a

controlled variable in their study, so they were unable to examine the influence of the presence of children on the characteristics of the couples' social networks. They suggested that future research could examine whether raising children accounts for some of the sexual orientation effects they found. Also, the measures used in this study have been normed for American English-speaking heterosexual couples and this could have potentially impacted on their results. The couples were primarily White, middle class, and from a large metropolitan area so results are not generalizable and the lack of diversity negatively impacts on external validity. Finally, once the sample was split into sub-groups, the sample size was not as large for analyses (i.e., 50 heterosexual married couples, 50 gay couples, and 33 lesbian couples).

The strengths of this study, though, included that the instruments used to measure the variables were tested and the total sample for the study was large (133 couples, 266 individuals). Thus, even though this study has some limitations, it still provides more evidence for the importance of social support systems for couples, and provides more evidence for the differences of sources of support for gay/lesbian couples and heterosexual couples. In a recent review of research literature about the social support and functioning of lesbian-headed families, Speziale and Gopalakrishna (2004) reported that for lesbian mothers, issues involving social support emerged, including inconsistent support from the lesbian community at large and fear of how their children would be treated because of their mothers' sexual orientation.

Gay and Lesbian Couples: Managing their Intergenerational Relationships

Focusing on gay and lesbian intergenerational support, LaSala (2001, 2002)

explored the impact of being partnered and its relation with family support.

Differences between gay men and lesbians in managing their intergenerational relationships were also examined.

LaSala's (2001) qualitative study found that having a partner was important to lesbians' intergenerational relationships. For this study 40 self-identified lesbians (in 20 couples) were interviewed separately about their relationships with their parents. LaSala (2001) developed a standardized interview protocol of open ended questions regarding perceptions of parental attitudes about their lesbianism and how parental opinions affected their relationships.

One result from this study was that many of the women interviewed felt that there had been an improvement over time in parental attitudes. Initially, when these women came out to their parents, 34 encountered parental disapproval and 23 experienced hostile reactions and/or rejection. As time went on, the women reported an improvement in parental attitudes. However, it was a blend of support and disapproval. Even with this parental disapproval, the majority of the women interviewed did not feel that it substantially affected their relationships with their partners.

Additionally, for most of the couples, having a partner had a beneficial influence on these family relationships. Many of the partners supported and pushed respondents to maintain contact with their families. The partners also acted as a buffer in problematic relationships with parents. There were some instances, though, where this action caused conflict and strain in the couple's relationship. These instances occurred with participants who had the most rejecting and negative parents.

In a later paper, LaSala (2002) compared how gay men and lesbians managed their intergenerational relationships. The study had a sample of 80 respondents (recruiting 20 self-identified gay male couples from the Albany, N.Y. area and using data from the LaSala 2001 study of 20 self-identified lesbian couples). The couples had to be cohabitating and each respondent had to have at least one living parent at the time of the interview. Of the 80 participants, 72 were non-Hispanic White (90%). The length of time the gay men couples were together ranged from 10 months to 27 years with a mean of 6.89 years ($SD = 5.13$). Four men were parents (two from previous heterosexual marriages and one couple where both men co-parented two children they adopted together). The length of time the lesbian couples were together ranged from one to 22 years, with a mean of 6.5 years ($SD = 3.65$). Six women were parents (three from previous heterosexual marriages and three conceived children through alternative insemination while in their current lesbian relationships).

In keeping with the results from LaSala (2001), the parent's distress and disapproval when the respondents first came out lessened as time passed for 38 of the 80 respondents. However, ten respondents (eight women and two men) reported that their parents still strongly disapproved of their sexual orientation. A total of 14 respondents (six men and eight women) reported that the parental disapproval negatively impacted on their relationships with their partners. However, 33 of the 40 gay male respondents defended their partner relationships against the parental disapproval and most of the lesbian participants did the same.

LaSala (2002) noted that the lesbian participants emphasized the importance of family connections, and although they were aware of parental disapproval, they were able

to identify intergenerational support and its benefits to their relationships with their partners. Also, the lesbian participants were more inclined to seek harmonious intergenerational connections. Gay men, conversely, tended to emphasize the importance of independence from their parents. LaSala (2002) suggested as a result, that coupled gay men may be able to tolerate distancing from family (without consequence to their relationships with their partners), whereas coupled lesbians may avoid conflict with family for the sake of the family peace (without consequence to their relationships with their partners).

A limitation of LaSala's research was the homogenous sample which was largely White (90%) and from the NY/NJ area. Also, the sample sizes of 40 for the 2001 study and 80 for the 2002 paper were small. However, given that in-depth interviews were conducted, a sample of 80 respondents is a satisfactory sample for qualitative study.

Also, LaSala's (2001, 2002) research did not shed light on the impact, if any, of parenthood on social networks and intergenerational relationships. Since small samples were used, and perhaps because of the very small sub-sample of lesbian and gay parents, LaSala (2002) found no themes regarding the effects of parenthood on intergenerational relationships. Despite these limitations, though, LaSala's research provides some insights into the influences of intergenerational influence and interactions on gay and lesbian couples.

In summation, the research shows that although some gay and lesbian couples may get less support from families than some heterosexual couples, the extent of how it impacts on the couple's adjustment and satisfaction varies. Factors such as type of couple (i.e., gay male or lesbian), extent of negativity from parents/family members, extent of

other social support resources (e.g., friends, co-workers), may influence a couple's reactions to low levels of family support. Other demographic factors (e.g., age, race, and gender) also play a role in the nature and extent of social support systems.

Influences of Age, Ethnicity and Race, Socioeconomic Status, Parental Divorce, and Gender on Social Support Systems

Age

Carstensen (1992) in a longitudinal study found that interaction frequency and satisfaction with acquaintances declined as participants aged from 18 to 50 years old. Further, the respondents increased contact with a select group of social partners and developed closer more satisfying relationships within that select group. From results of this and other studies, Carstensen (1992) proposed a theory. Carstensen's (1993, 1995) socioemotional selectivity theory posited that as individuals age, they narrow their social networks to devote more of their emotional resources to fewer relationships with close friends and family. This selective narrowing of the support system helps the person to maximize gains and minimize risks. It also proposed that there are two social motives—information seeking and emotion regulation—that vary in importance across the life span.

Lansford, Sherman, and Antonucci (1998) tested socioemotional selectivity theory using data from three cohorts of nationally representative samples to see if the size of their network differed by age, cohort, or both. Results supported this theory. Lansford et al. found that more older adults than younger adults were satisfied with the

current size of their social networks and did not want larger social networks, and these results were consistent across all three cohorts.

Other theories also posited reasons for the narrowing of support systems as people age. Activity theory (Maddox 1963, 1965) asserted that older people would want more social contact but social and physical obstacles impeded their ability to obtain that contact (e.g., deaths of loved ones, failing health, retirement). Disengagement theory (Cumming & Henry, 1961) posited that decreased social interactions as people age are the adaptive results of a mutual withdrawal of the individual from society and society from the individual as the aging person prepares for death. A common denominator of all three theories is the acknowledgement of a decrease in the breadth of a person's social network as one ages. Age was examined as a possible confounding variable for this present study given its possible impact on a respondent's support network .

Ethnicity and Race

Gays and lesbians have different ethnic, racial, and cultural identities; these may present them with unique issues and challenges. In regard to social support and family ties, Asian-Americans, African-Americans, and Mexican-Americans can be more reluctant to come out to their families than White Americans, perceiving their families and community as more rejecting of same gender orientation (e.g., Chan, 1989; Clark, 1983; Merighi & Grimes, 2000; Shernoff, 1998).

At times, identifying as gay/lesbian may seem to require negating one's

ethnic/racial background and vice versa. Chan (1989) explained that, for an Asian-American, identifying as a gay man may be perceived by the family of origin as rejection of his traditional family values and cultural heritage. Thus, an Asian-American gay man may negate his gay identity, at least within his family of origin. As a result, he may have a dual identity—one within the family or origin and one within the gay community—each with its own cultural identification.

Thus, cultural norms of deference to family values can influence a person's decision regarding whether to pursue lifestyles that go against their family of origin's values (e.g., whether or not to live an open gay/lesbian lifestyle). In a study of 218 Asian American adolescents (sexual orientation was not identified), Ying, Coombs, and Lee (1999) found that at the "age of achievement" in adolescence the majority of this group continued to espouse the Eastern values of deference and respect towards their parents and family elders in contrast to their European American peers who valued separation and individuation.

Shernoff (1998) reported that African-American gay men are at times torn between two communities that may reject them: the Black community with its potential homophobia and the gay White community with its potential racism. Families of origin which can provide a buffer against societal discrimination for people of color, can also be rejecting because of sexual orientation. Slater (1995) explains that for lesbians of color fear of being cut off by their families after coming out carries particular weight. This is because mainstream society devalues their nonwhite heritages and cultures thus making ties to families irreplaceable for these women. Slater asserts that the risks of being shunned by their families due to homophobia are especially serious. For

these reasons, race was also examined as a possible confounding variable for this present study because it can impact on family relationships and social network.

Socioeconomic Status (Income and Education)

Some research suggests that in and around communities with many poor families, the ability of kin and other informal social networks to provide relationship-based resources and provide concrete resources may be limited (see Miller-Cribbs & Farber, 2008). Kin networks may stretch the few resources they have beyond their limits—getting a constant barrage of requests to help and having limited resources to provide that help. Thus, individuals that have lower incomes are likely to report lower levels of perceived family solidarity and closeness, have less contact with network members, and have social ties with individuals who are similarly impoverished or worse off than themselves (Miller-Cribbs & Farber, 2008). On the other hand, those family members who have higher incomes and higher levels of education have been found to be more likely to provide financial assistance to a parent or a child in need, and similarly adult children are more likely to provide physical assistance to aging parents with poor health (e.g., Hoyert, 1989; Rossi & Rossi, 1990).

In regard to geographic mobility, which can impact on opportunity to access support systems, the U.S. Census Bureau (2004b) found that education accounted for only small differences in moving rates. However, movers with a bachelor's degree were more likely to have moved longer distances (23% having made an interstate move compared with 15% of those with less than a high school education making an interstate move). Further, those with graduate degrees have been found to be more likely to move

500 miles or more and be the least likely to move less than 50 miles compared with groups with less education. Thus, although studies have found that those family members with higher incomes and higher educations are more likely to provide help to family in need, they also may be more likely to live farther distances from their family. Due to the possible impact that socioeconomic status can have on support systems, socioeconomic status (assessed by education level) was examined as a possible confounding variable for this present study.

Parental Divorce

Since the 1960's, the rate of divorce in the United States has nearly doubled, but has declined slightly since hitting a high point in the early 1980's (Dafoe Whitehead & Popenoe, 2005). For the average couple marrying in the United States, the lifetime probability of separation or divorce is between 40–50 percent (Dafoe Whitehead & Popenoe). Divorce can impact on family connections and intergenerational relationships in many ways, and can hinder or enhance those relationships depending on many factors (e.g., remarriage, geographic proximity, family view of the divorce).

In a review on American kinship, Johnson (2000) reported that three years after a divorce 34% of the divorcing adult children had stronger bonds with their parents and still depended on them for help whereas 31% of the divorcing adult children had remarried and had established a new nuclear family which was relatively isolated from their kin. Johnson further reported that the remaining 35% of the divorcing adult children had developed kinship networks consisting of relatives from their new marriage, their former marriage, and their blood relatives.

Adults whose parents had divorced also have varying outcomes regarding bonds with their parents, grandparents, and extended families. Studies that have dealt with long-term consequences of divorce generally find that the emotional bonds between children and parents weaken in later life, and that this is especially true for adult children's relations with their nonresidential fathers (e.g., Amato & Booth, 1997; Bengston, Biblarz, & Roberts, 2002; Hetherington & Kelly, 2002; Silverstein & Bengston, 1997).

Conversely, a study done by Ahrons and Tanner (2003) found that most adult children felt that their relationships with their fathers 20 years after parental divorce had either improved or remained stable over time. They also found that custody did not directly impact reported changes in the quality of relationships with their fathers. Factors that were associated with worsening relationships over time between adult children and their fathers were father remarriage (especially if the adult children's relationships with step-mothers and step-siblings were seen as negative), low father involvement in early post-divorce years, and increased inter-parental conflict. Ahrons and Tanner found that although inter-parental conflict negatively impacted on relationships between adult children and their fathers, it did not impact on relationships between adult children and their mothers. This finding was consistent with other literature that shows that the bonds between the mothers and children appear to be stronger over time (e.g., Bengston et al., 2002).

Gender

Men and women have been found to have some differences in how they acquire and how they manage their social connections and intergenerational relationships.

Women are more likely to define themselves in terms of their social connections and men are more likely to define themselves in terms of their autonomous achievements (Cross & Madson, 1997). Also, women tend to maintain tighter bonds with family of origin than do men (e.g., Bott, 1971) and may benefit more than men from social support (Flaherty & Richman, 1989). Support from their families may be a crucial factor in harmony in their coupled relationships (Julien et al., 1999).

In a heterosexual marriage, if couples experience difficulties, the husbands are more dependent on their wives for support and less inclined to mobilize their network than their wives (e.g., Belle, 1987; Dunkel-Schetter, Folkman, & Lazarus, 1987; Julien & Markman, 1991). Also, the wives' information about the relationship is found to be a better predictor than the husband's information about the relationship regarding marital outcomes (Karney, Bradbury, Fincham, & Sullivan, 1994). Thus, women are considered to be the "kin keepers" and relationship experts.

Thus, as Kurdek (2001) points out, lesbian couples may benefit from having two people that are able to access social network support and are "expert" in relationships. Conversely, Kurdek (2001) wonders if gay men will suffer from having two people who are more autonomous and less adept at accessing social support.

However, gay men and lesbian women are less likely to show communication discrepancies based on gender (e.g., Julien, Arellano, & Turgeon, 1997). Thus, how gender impacts on social support networks for gay men and lesbian women, and the extent of that impact, has been examined in some recent studies (Kurdek, 2001; LaSala, 2002). Gender was examined as a possible confounding variable for this present study because of the literature showing links between gender and social networks.

Limitations to the Research on Gay and Lesbian Persons

Few Studies on Gay Male Parents

In the research area of this study—gay and lesbian parents and their support systems—few studies could be found. Of the three reviewed, two focused on lesbian parents only (i.e., the National Lesbian Family Study: Gartrell et al., 1996, 1999, 2000, 2005; and Stiglitz, 1990) and one focused on both gay and lesbian parents (i.e., Johnson & O'Connor, 2002). Within the broader category of gay and lesbian parenting (without a specific focus on support systems), the majority of the literature found in general was exclusively on lesbian parents and did not include gay men parents (e.g., Koepke, Hare, & Moran, 1992 whose study explored relationship quality of lesbian couples with children compared with lesbian couples without children; Lott-Whitehead & Tully, 1992 whose study explored the family lives of lesbian mothers; O'Connell, 1990 whose study explored the developmental impact of a mother's lesbianism on her adolescent children; Patterson, 1994, whose study explored the development of children raised by lesbian parents; and Patterson, 1995, whose study explored children of lesbian parents and the division of labor of lesbian couples). There were numerous studies including gay men couples, but typically they were not parents or parenthood status was not assessed.

Some studies found compared lesbian mothers with heterosexual mothers but did not include comparisons with gay male parents (e.g., Brewaeys, Ponjaert, VanHall, & Golombok, 1997 whose study looked at childhood development and family functioning; Flaks, Ficher, Masterpasqua, and Joseph, 1995 whose study looked at the relationships of the mothers and their children; Tasker & Golombok, 1995, 1997 whose studies looked at

children being raised in a lesbian family; Vanfraussen, Ponjaert-Kristoffersen, & Brewaeys, 2003 whose study looked at general family functioning; and Wendland, Byrn, and Hill, 1996 whose study looked at the similarities and differences among the couples). Although there has been some increase in research studies on gay men parents in the past ten years (e.g., Johnson & O'Connor, 2002), there is still a gap in the literature on gay men parents.

This lack of research on gay male parenting could be a result of several factors. It may in part be due to the suspicion that there are fewer gay men than lesbian women choosing parenthood (thus representing a much smaller group to find). In fact, gay *and* lesbian parenting itself is seen as a small group within the gay and lesbian community. Kurdek (2004) stated that he chose childless gay and lesbian couples for his study because the majority of gay and lesbian couples do not live with children.

Lack of Diversity in Samples

In much of the research to date, studies of gay and lesbian families have been based on samples comprised of predominantly White, college educated, middle-class persons. Very few studies have been able to get a more diverse group of participants regarding ethnicity, social class, income, and educational level. For example, in Kurdek's (2007) longitudinal study regarding gay and lesbian couples (not parents) and their household division of labor, 93% of the gay partners were White and 90% of the lesbian partners were White, in Gartrell et al.'s (2000) NLFS longitudinal study 93% of the lesbian mothers were White, and in Johnson and O'Connor's (2002) study 94% of the gay and lesbian parents were White.

Gay and lesbian families vary in as many ways as a heterosexual family can vary

(e.g., age of parents, socioeconomic class, ethnicity, number of children).

Gay and lesbian families can also vary in ways specific to gay/lesbian families.

For example, the families may vary regarding the degree of openness about being gay/lesbian and the degree to which others accept the gay/lesbian persons' identity in their life. Due to the various types of gay and lesbian families, it is important to have a larger and more diverse sample in research studies.

Small Sample Size

Some of the studies reviewed had large samples for their studies. Kurdek (2001) had 450 couples; Julien et al. (1999) had 133 couples; Jordan and Deluty (2000) had 305 participants; Johnson and O'Connor (2002) had 415 participants; and Gartrell et al., 1996 and Gartrell et al., 1999 had sample sizes of 154 and 156 respectively.

However, sample size was sometimes small, especially in earlier studies. Some studies not reviewed for this paper because they did not focus on gay and lesbian parents and their support systems had fewer than fifty participants (e.g., Lott-Whitehead & Tully (1992) with a sample size of 45, and Patterson (1995) with a sample size of 26). Finally some of the studies had a sample size of less than 20 participants including McCandlish (1987) with a sample size of five, Stiglitz (1990) with a sample size of 12, and O'Connell (1990) with a sample size of 11.

Research studies with small sample sizes are subject to several limitations. Sample size is one of the variables that determine the size of the standard error of the mean; ideally, these studies would achieve the minimum amount of error by obtaining the optimum sample size. The smaller the sample, the greater the risk that one will commit a

Type II error, accepting the null hypotheses that there is no difference, when in reality there is a difference. This problem is present when using parametric statistical tests and when using nonparametric tests (Black, 1999). Another problem with small samples is that it can be even harder to assert that the conclusions from the study will generalize to the population, thus adversely affecting external validity.

Poorly Matched or No Control Groups

Some of the studies had research designs that would have benefited from well-matched control groups, and instead had poorly matched groups or none at all. Particularly notable are the studies that compare gay and lesbian cohabitating couples (nonparents) with heterosexual married couples (parents) (e.g., Kurdek, 2004) or studies comparing the development of children living with a divorced mother (now identified as lesbian and involved with a female partner who may or may not be living together) to children living with a divorced mother (heterosexual and single) (e.g., Tasker & Golombok, 1995, 1997). Future research must disentangle sexual orientation, partnered status, and parenthood status.

Gays and Lesbians Treated as a Monolithic Group

Relatedly, another serious limitation in the literature is that most research regarding gay/lesbian families has stereotyped these families as a monolithic group. In other words, that being identified as gay or lesbian is enough to assume that those persons possess a certain set of characteristics that distinguishes them from others.

Demo and Allen (1996) discussed the challenges for family theory and research in

regard to the diversity within lesbian and gay families. Some of the ways in which gay or lesbian families can differ include, but are not limited to, the number of people within the family, the gender of the family members, the sexual orientation of each of the members of the family, the presence and number of children within the family, ethnicity, race, religion, social class, and family processes and traditions. Lesbian and gay family diversity also helps to illustrate and broaden our knowledge of the diversity within and between all families.

Demo and Allen (1996) recommended that future research look at both inter-family diversity and intra-family diversity. Peplau (1993) stated that “we must continue to avoid the tendency to characterize the ‘typical lesbian couple’ or the ‘typical gay male relationship.’ There are enormous variations among lesbian couples, as there are among gay male couples” (p. 411). To that end, Laird (1993) and Demo and Allen recommend examining gay/lesbian families from their own standpoints using qualitative, holistic, and ethnographic investigations of their daily lives.

Emphasis on Individuals and Dyads

Although some important information has begun to accumulate on outcomes of children raised by lesbians and gay men, and on relationships between lesbian and gay parents, most of the attention has focused on individuals and dyads, with little attention to family structure and family interaction (Demo & Allen, 1996). “As a result, our knowledge of lesbian and gay families is uneven in that we know much more about lesbian and gay partnerships than we do about other relationships in the family system (parent-child, sibling, extended and chosen kin-relations), we know more about the

outcomes for children of lesbian and gay parents than we do about outcomes for other family members and we know very little about systemic, structural and processual characteristics of these families” (Demo & Allen, 1996, pp. 430–431).

Lack of Theory

Another serious limitation in the emerging literature on gay/lesbian parents is the virtual absence of theory. “Perhaps the most salient limitation is that the bulk of research in this area is atheoretical” (Kurdek, 1994, p. 135). Theories are “models and explanations that elaborate on why events have occurred (and) are devised to describe causal relationships between actions and/or events” (Black, 1999, p. 7). The value of having a theory is in the ability to explain and predict outcomes (Black). Theory can have practical value too, as the outcomes of some research studies (which assert certain theories) can impact the procedures, processes, and/or decisions in our institutions, schools, courts, and government. Very few of the studies on gay and lesbian *parenting* mentioned theory in their reports. The following are some exceptions.

1. Lott-Whitehead and Tully’s (1992) study came from an “Ecological Viewpoint” in exploring the family lives of lesbian parents. The Ecological systems theory is based on Germain and Gitterman’s (1980) “life model”. This model sees people as constantly adapting in an interchange with many different aspects of their environment. This model is not predictive because it is circular (each part of the system impacts on others and vice versa). As a result, few, if any, conclusions can be drawn from the data. Further in this particular study Lott and Whitehead used the model but did not test it in any way. Instead of testing a theory, they used the Ecological model as a perspective or overarching framework.

2. McCandlish (1987) attempted to develop a theoretical model (grounded theory approach), and proposed a model of lesbian family development from her study. In summary, McCandlish found that each lesbian couple (note that only five families were interviewed) went through particular stages from couple formation through the decision to become parents, to the adjustments of raising young children. From this a preliminary model was created.
3. Golombok and Tasker (1996) sought to test various existing theories on influences the sexual orientation of children by conducting a longitudinal study using children from lesbian mothers and children from heterosexual mothers. They found no evidence to support that parents have a determining influence on the sexual orientation of their children. However, they did find that a greater proportion of young adults from lesbian families, than from heterosexual families, considered, or have had some involvement in same-gender relationships. Despite this openness to the idea of same-gender relationships, these same young adults considered themselves heterosexual. As a result of this data, Golombok and Tasker feel their data is compatible both with biological theories and with social-constructionist theories. Biological theories hold that sexual orientation will result from prenatal factors and genetics. Social-constructionist theories hold that there are psychological mechanisms and environmental mechanisms that impact on sexual orientation.
4. Stiglitz (1990) had noticed from her personal and professional experience that lesbian couples were ending their relationships by the time a child was between one and three years old. She believed the incidence of couple dissolution was

greater among lesbians than heterosexuals, and conducted a study with a very small sample size (five heterosexual couples and seven lesbian couples) and assessed relationship satisfaction two years pre-birth and two years post-birth. The five heterosexual couples were still together at the second assessment, three of the lesbian couples had separated, and one of the lesbian couples was working hard to stay together. She suggested the use of ABCX Model theory (Hill, 1949) to help explain the differences she noticed between couples adjustment to parenthood. Briefly, according to this theory a crisis (X) is determined by the number of stressors on a person/relationship (A), interacting with the family's supports and resources (B), and its perception of the problem or its ability to cope with the problem (C).

5. Slater (1995) proposed a "Lesbian Family Life Cycle" based on life cycle models, but altered it to reflect lesbians' experiences with the additional sources of stress they must encounter due to society's responses to their sexual orientation. However, she did not create this model by conducting her own research. Rather, she postulated this model based on sixteen years of clinical practice with lesbians and research literature. Slater's model discussed five stages that lesbian couples typically go through: formation of the couple, ongoing couplehood, the middle years, generativity, and lesbian couples over age 65. Within each life stage Slater reviewed some possible complexities faced by lesbian couples.

Theory Chosen for this Research Study

The abovementioned theories did not fit well with the research objective of this

study which was to examine the social ties of gay and lesbian parents. Thus, theories related to social ties and intergenerational networks were assessed.

Life-Course Perspective

“Perhaps the major theoretical advance in the decade of the 1990s has been the elaboration of the life-course perspective,” (Allen, Bleieszner, & Roberto, 2001, p. 134). The life-course perspective builds on the idea that the individual and society are mutually influential. From this framework one can look at how individuals change over time and one can see how the individual’s changes and life transitions are connected to and linked across family members. From that idea one can “generate research hypotheses about the complex processes of human development and how these change, or exhibit continuity, across historical time,” (Bengston et al., 2002, p. 20). The “life course perspective suggests some useful models for examining the processes of intergenerational transmission, at both the macrosocial level of history and society as well as the microsocial level of individuals and families,” (Bengston et al., 2002, p. 23).

Put another way, this framework focuses on the multiple “trajectories and social contexts (e.g., family, employment, community) shaping individual lives and the unique and overlapping paths and trajectories within families,” (Demo & Allen, 1996, p. 426). As a result, this perspective can be valuable to lesbian and gay families because it recognizes complexity and variability in life experiences. For example, depending on the social climate and intensity of anti-gay sentiment, the coming out process can have different consequences.

The life-course framework can also enrich the study of families because it can

illuminate intersections of biography and history. However, critics feel the perspective does not challenge the status quo and does not explain the marginalization of certain family types.

It also does not recognize the influence of how powerful hierarchies (identified by feminists and other critical thinkers) intersect and impact on families. Race, gender and sexual orientation are examples of some of these hierarchies that are so important to understanding diversity among families (Demo & Allen, 1996). However, there are two theories derived from the life-course perspective's basic framework that could be utilized in research regarding alternative families such as gay/lesbian families. The two theories are Socioemotional Selectivity Theory (Carstensen, 1993, 1995) and the Solidarity Model (Bengtson, 2001).

Socioemotional selectivity theory. This theory was reviewed in the section on "age" and social ties. Briefly, Carstensen (1993, 1995) posited that as individuals age they narrow their social support networks, focusing more of their emotional resources on fewer relationships. Although this theory was not used for the basis of this study, the variable of age was incorporated into the present analyses.

The solidarity model (intergenerational solidarity). This model was chosen for this study because it was well developed, thorough, and fit the research objective. Specifically, this theory encompasses six different domains of intergenerational support, one area of intergenerational conflict, and it also looks at the number of social ties as well as the closeness of social ties. This model was derived from the life-course perspective. Bengtson et al. (2002) found three assumptions of the life-course perspective as central to the model developed on intergenerational solidarity:

1. Human development is a relational process, significantly shaping and shaped by our social connections to others;
2. The microenvironmental context of individual development is linked to increasingly higher levels of social organization, a concept at times known as nested contexts; and
3. “Intergenerational transmission processes and outcomes unfold at the intersection of events occurring on two distinct timelines: social history and individual biography” (p. 21).

Bengston (2001) proposed a hypothesis about family transitions during the 20th Century which both built on and differed from the works of theorists Burgess, Popenoe, Stack, and Stacey. Specifically, Bengston (2001) proposed that “relations across more than two generations are becoming increasingly important to individuals and families in American society” (p. 5).

Further, Bengston (2001) suggested a corollary to the hypothesis: “For many Americans, multigenerational bonds are becoming more important than nuclear family ties for well-being and support over the course of their lives,” (p. 5). Three primary factors are cited as the foundation of this hypothesis and its corollary:

1. Changes in intergenerational demography have resulted in increased opportunities and increased needs for interaction, support, and mutual influence across more than just two generations. The changes in demography refer to the changing societal and age structures so that longer years of shared lives are created.
2. Bengston (2001) reports that there is strength in intergenerational solidarity over time and there is a diversity of cross-generational types.

3. Nuclear families, due to the increase in marital instability and divorce, are less able to provide the socialization, nurturance, and support needed by family members. As a result, kin across several generations are increasingly called upon to provide some of these essential family functions. If the couples dissolution rates of gay and lesbian parents are similar to the heterosexual divorce rates, this factor may play a role for gay and lesbian parents as well.

The Solidarity Model attempts to account for patterns of “solidarity among parents and children during the adult family life; that is, intergenerational cohesion after children reach adulthood and establish careers and families of their own,” (Bengston & Roberts, 1991). It is a formal theory which has been evolving since the 1970’s when in 1974 Black and Bengston made an attempt to develop a testable conceptualization of intergenerational cohesion, and then soon after Bengston, Olander, and Haddad (1976) proposed a model of family solidarity in old age which attempted to specify the relationship between affection, association, and consensus as each contributed to intergenerational solidarity. These elements of cohesion (affection, association, and consensus) were considered to be components of a meta-construct: “family solidarity” (Roberts & Bengston, 1990).

Additional Details about the Intergenerational Solidarity Model

Bengston and Schrader (1982) identified six dimensions of family solidarity adding exchange (functional) solidarity; normative solidarity; and family structure to the three original elements of affection, association, and consensus. Brief definitions of the six conceptual dimensions of intergenerational solidarity are as follows. Affectual solidarity

is defined as the sentiments and evaluations family members express about their relationship with other members (emotional closeness). Associational solidarity is defined as the type and frequency of contact between intergenerational family members. Consensual solidarity is defined as agreement in opinions, values, and orientations between generations. Functional solidarity (assistance) is the giving and receiving of support across generations, including the exchange of instrumental assets and services emotional support. Normative solidarity is the expectations regarding filial obligations and parental obligations as well as norms about the importance of familiastic values. This solidarity dimension represents an attitude and belief system. Structural solidarity is the opportunity structure for cross-generational interaction reflecting geographic proximity between family members. (Bengston, 2001, p. 8).

In addition to the six dimensions of the Solidarity Model, Bengston et al., (2002) also included examining intergenerational feelings of conflict in their Longitudinal Study of Youth in Two Generations. This refers to the level of conflict one feels towards his/her family members.

Bengston (2001) proposed the use of this theoretical construct of “intergenerational solidarity” as a means to characterize the emotional and behavioral dimensions of the interaction, cohesion, sentiment, and support between parents and children, grandparents and grandchildren, over the course of long-term relationships. The “solidarity paradigm has proven useful in research by other investigators...It can be seen as exemplifying an operational definition of the life course theoretical perspective” (Bengston, 2001, p. 8).

In attempts to test links among the six conceptual dimensions of intergenerational

solidarity, Roberts and Bengston (1990) and Bengston and Roberts (1991) showed some correlations. Specifically, normative solidarity (perceptions of obligations) contributed to affectual solidarity (emotional closeness) and associational solidarity (contact) in a relationship where high levels of normative solidarity were predictive of levels of affection, and in turn correlated to levels of association (Bengston & Roberts). Greater association was also indicated when structural variables (e.g., residential proximity to family) were present (Bengston & Roberts).

Of note, when normative solidarity (the perceived obligation to the family) leads to helping behavior (functional solidarity), similarities between the two dimensions occurs. The difference between the two is that in the context of normative solidarity the help provided comes from a sense of familial duty, not from excess of resources, ease of access, or emotional closeness.

Intergenerational help (functional solidarity) is a key aspect of this model and the connections between this and affectual solidarity (closeness) have also been studied. According to this theoretical model if one has a close relationship, that will enhance the level of help exchanged. Additionally, not only does the quality of the relationship impact on help exchange, but the reciprocity of this exchange impacts the quality of the relationship. Thus a balance between help given and help received should increase positive emotions and improve the relationship, and conversely an imbalance should have a negative impact on the relationship (Bengston & Roberts, 1991; Roberts, Richards, & Bengston, 1991).

In Silverstein, Giarrusso, and Bengston (1998), the model is discussed in regard to the grandparent role, and how the six dimensions of this model can be used to examine

the intergenerational relationship between grandparents and grandchildren. It also demonstrated how the model can describe “nonadjacent intergenerational relationships as effectively as it does adjacent intergenerational relationships...” (Silverstein et al., pp. 144–145). Silverstein et al. also reviewed how the six dimensions of solidarity can be divided into three clusters: structural and associational solidarity comprising an interactive-opportunity cluster; affectual and consensual solidarity comprising an affective-cognitive cluster; and providing and receiving social support comprising an instrumental cluster.

Support for this Model

Over the years there have been many studies utilizing portions of this model, and the recent studies found for this review support Bengston and Roberts’s (1991) findings (e.g., Schwarz, 2006; Wood & Lioosis, 2007). Wood and Lioosis looked at the effect of stressful life events on emotional closeness between grandparents and adult grandchildren. “Complementing the findings of Bengston and Roberts, this research supports the theoretical view that high levels of normative solidarity lead to greater affectual solidarity, which in turn produces higher associational solidarity” (Wood & Lioosis, p. 380).

Schwarz (2006) examined adult daughters’ family structure and the association between reciprocity and relationship quality using a sample of 183 women. Although Schwarz examined concepts beyond the Intergenerational Solidarity model, the first part of the results of the study “confirms the central role of the model of intergenerational solidarity, namely, that the closer the affectual ties between generations,

the higher the help exchange...” (Schwarz, pp. 222–223). In regard to another concept—that of conflict—this study did not support the expectation for conflict (i.e., more conflict is not associated with less exchange).

In sum, the development of this model and its corresponding theory represents an effort to develop formal theory that is informed by results of testing and empirical studies. Thus, this model shows promise for future studies of families and it can be used to examine gay/lesbian family relationships. In fact, Bengston (2001) suggested that there is a need to obtain data reflecting the diversity of American families, and specifically noted that we need to examine the multigenerational relationships of gay and lesbian families...” (p. 13). Since this model offered a way to operationalize intergenerational solidarity, the model applied well to alternative families, and it fit the objective of this study, it was chosen for this study.

Based on the preponderance of evidence that social support is important to individuals (adults and children), couples, and families in emotional well-being, couples’ stability, satisfaction, and longevity, and serves as a buffer to life stressors, it stands to reason that social support is particularly important for gay and lesbian families. Further, social support for gay and lesbian persons is complex due to family reactions and societal prejudices, and research suggests that there is more perceived support from friends than family. To date, there is little research regarding gay parenting (in any aspect) and little research regarding the social support networks for gay and lesbian parents. Thus, to fill a gap in the literature and to shed light on this topic, this dissertation study will examine the support networks of gay and lesbian parents.

The Study Hypotheses

Hypotheses Regarding Intergenerational Solidarity With Family of Origin

1. Compared with gay/lesbian/heterosexual nonparents, gay/lesbian/heterosexual parents will score higher on all dimensions of intergenerational solidarity with family due to the probable increased need of support (emotional and instrumental). This will be in keeping with Gartrell et al.'s (1999) finding that the lesbian couples' ties to family of origin strengthened after becoming parents. Conversely, gay/lesbian/heterosexual nonparents will have lower scores of intergenerational solidarity than the gay/lesbian/heterosexual parents.
2. Compared with gay parents, lesbian parents will score higher on all dimensions of intergenerational solidarity with family due to possible gender differences between women and men in regard to family connections. Lesbian nonparents, compared with gay nonparents will score higher on all dimensions of intergenerational solidarity with family again due to possible gender differences.

Hypotheses Regarding Solidarity With Friends

3. In the areas of "Functional–Emotional Solidarity" and "Functional–Instrumental Solidarity" gay/lesbian parents and nonparents, compared with heterosexual parents and nonparents, will rely more on friends (and thus have higher solidarity scores with friends/neighbors). This will be consistent with the literature (e.g., Kurdek, 2004), which shows that gay and lesbian persons perceive less support from family and more support from friends.

4. In the areas of “Functional–Emotional Solidarity” and “Functional–Instrumental Solidarity” gay/lesbian nonparents compared with gay/lesbian parents will score higher and thus have stronger solidarity with friends/neighbors. In other words, gay/lesbian nonparents will be more connected with friends (both helping and receiving help from friends) than the gay/lesbian parents.

CHAPTER III: METHODOLOGY

Summary of Research Study Methodology

Design

For this study a nonexperimental correlational approach was used. Correlational studies are a way of scanning the field and examining interrelationships among a number of variables (Black, 1999). Correlational studies, sometimes, can also use theory to *infer* causality when explaining the outcomes. This can be done as long as it is clearly stated that the causality is inferred, not substantiated.

This correlational approach was used because in this type of research, the researcher cannot control the conditions and thus the study cannot meet the criteria of a true experiment. Also, because the study compared those with and without children, regardless of their attempts to have children, the study did not clearly meet a quasi-experimental design of a post-test observation only with control group (ex-post facto) design.

The correlational study design. The primary research question in this study involved observing the potential effects of life events (i.e., gay/lesbian/heterosexual couples who are parents and gay/lesbian/heterosexual couples who are not parents) (Independent variable) on subject characteristics (i.e., the intergenerational solidarity of the couples with their respective families of origin) (Dependent Variable).

As with all correlational studies, one cannot assume or prove causation.

Thus the focus of this correlational study was more on which variables were potentially related rather than seeking causality. Predictions made by the Principal Investigator (P.I.) and correlations found from this study should be interpreted with caution and the awareness that this study was not an experimental design.

This research study was approached by first looking at two groups meeting different “conditions.” Specifically, one group was the lesbian/gay/heterosexual couples with children and the second group was the lesbian/gay/heterosexual couples without children. The null hypothesis would be that the nature of the frequency distributions across the categories of the dependent variable is the same for both groups. In other words, parenthood (independent variable) does not influence solidarity with families of origin or with friends (dependent variable).

The next step was to look at six groups: lesbian parents, lesbian nonparents, gay parents, gay nonparents, heterosexual parents, and heterosexual nonparents. The six groups met different conditions in reference to parenthood (parents & nonparents) and in reference to sexual orientation (lesbian, gay, heterosexual). The null hypothesis would be that the nature of the frequency distributions across the categories of the dependent variable is the same for all six groups. In other words, that the combination of sexual orientation and parenthood status (independent variable) does not influence solidarity with families of origin or with friends (dependent variable).

Finally, the respondents’ gender was another independent variable examined to see if there were differences between men and women in regard to solidarity with family and friends. If the nature of the frequency distributions across the categories of the

dependent variable would be the same for men and women, the null hypothesis would be supported. Of note, although gender is a condition of belonging to certain couple-types (e.g., the lesbian couples are all women) and there is the issue of collinearity, gender is an important factor which can be influential regarding social support systems. Thus, gender needed to be incorporated into the analyses.

Sample

Criteria. To be eligible for the study, participants had to be over the age of 21, be in a relationship at least two years, and be living with their partner at least one year. Also, the participant could not be pregnant. These criteria ensured that the couples across all groups were well matched in regard to level of commitment in their relationship and household status. It also eliminated the possible ambiguity of parenthood status (to consider someone a parent or a nonparent) if someone was pregnant and was expecting to have their first child. (See Appendix A for a copy of the Eligibility Criteria form).

Recruitment. Prior to conducting this study, it was anticipated that there would be difficulty obtaining the targeted amount of gay/lesbian participants. The gay/lesbian population is considered a hard to reach research population, and locating gay/lesbian persons who have chosen parenthood can be a difficult task. Although many gay/lesbian persons choosing parenthood do get involved with gay/lesbian parenting organizations, many may not. Also, even those involved with organizations may not want to be on any listing/directory to prevent them from being identified and perhaps stigmatized. Finally, even those who can be found through organizations may not be representative of the population. As a result, probability sampling was not a realistic goal to pursue.

Therefore, other sampling strategies were used. There are four main sampling strategies that do not employ randomization and are placed in the category of non probability sampling strategies: (a) purposive sampling; (b) quota sampling; (c) snowball sampling; and (d) volunteer/accidental/convenience sampling (Black, 1999).

For this research study a combination of volunteer and snowball sampling was used. Karney, Davilia, Cohan, and Sullivan (1995) discussed using different techniques to locate hard to reach participants. One of Karney et al.'s (1995) examples was to have researchers collaborate with local community leaders and organizations. Herrerias (1993) discussed the use of print media to attract hard to reach participants. For this design both suggestions were used (i.e., collaboration with local organizations and use of print media via flyers) , and both strategies would be considered soliciting a volunteer sample.

The pitfall for both the snowball and volunteer sampling strategies is that the sample might be highly unrepresentative. However, because much of the population of gays and lesbians is hidden, its general characteristics are largely unknown and it is therefore impossible to know the qualities of a representative sample. Additionally, when the independent variable is an observed trait and cannot be manipulated as in this research design, how representative the sample is influences the validity of that variable. Certainly use of these methods limits external validity inherent in probability sampling strategies. However, new gains in knowledge obtained through these sampling strategies can justify their use, especially if the alternative is that no data is collected. If the methodological limitations are clearly stated, it is worth gathering information even if there is questionable validity (Herrerias, 1993). The sample of heterosexual respondents

also needed to be recruited. The same two methods of volunteer and snowball sampling were used (i.e., advertising and recruiting subjects from those already participating).

As a starting point to obtain gay and lesbian participants, and to help in the endeavor to have a more diverse sample, different gay/lesbian community organizations in the Tri-State (NY/NJ/PA) area of the United States were contacted. The gay/lesbian centers in the Tri-State area were initially contacted via phone, e-mail, and/or by letter. Listings of individual members were not made available to the researcher because of privacy issues. Therefore, announcements on the organization's listserv were made when possible and flyers were mailed or hand delivered to the centers. The flyers were posted and/or distributed at the centers. See Appendix B to view the two flyers utilized for this study.

Unfortunately few responses came as a result of outreach to the community centers, and some who responded were not eligible (typically they were single or were involved in a relationship for less than two years). As a result, the search had to be expanded to include community centers outside of the Tri-State area and to include other types of gay/lesbian organizations. An attempt was also made to contact centers that represented suburban and rural communities, which as mentioned previously are typically underrepresented in gay and lesbian research.

Some of the urban Gay/Lesbian Centers contacted included: The Lesbian, Gay, Bisexual, and Transgender Community Center, NYC, NY, Pride Center of West New York, Buffalo, NY, Bronx Community Pride Center, Bronx, NY, and the Gay and Lesbian Community Center of Pittsburgh, Pittsburgh, PA.

Some of the suburban and rural Gay/Lesbian Centers contacted were: The Pride

Center of NJ, North Brunswick, NJ; Connecticut Pride Center, CT; GABLES of Cape May County, NJ; Burlington County Gay and Lesbian Alliance, Moorestown, NJ; and South Jersey GLSEN.

To seek gay/lesbian parents to participate in the study, organizations focused on gay/lesbian parenting were also contacted. Some that were contacted included: Rainbow Families of New Jersey, Center Kids in NYC, Lambda Families of New Jersey, New Hampshire Gay Parents, Gay Fathers Coalition of Buffalo, Gay Fathers Group of Rochester NY, Gay and Lesbian Parenting Group of Central Ohio, Team Family Pride, Rainbow Families of Minneapolis, Minnesota, Gay Fathers of Long Island, and the Gay Fathers Forum of Greater N.Y.

To seek gay/lesbian couples (not necessarily parents), “Just Couples” in NYC, Jersey Shore Q-Spot, and the NJ Lesbian and Gay Coalition (NJLGC) were contacted. Politically oriented/ activist organizations, namely Equality Forum (Philadelphia, PA) , Gay Activist Alliance of Morris County (NJ),and Garden State Equality (NJ) were also contacted in the hope of obtaining possible respondents. These groups were either contacted by letter (with flyers enclosed), e-mails (with attached flyer), or telephone calls.

When specific contacts (e.g., members of the groups) were known to the Principal Investigator (P.I.) prior to the general outreach, interest in participating in the study seemed to be greater. When the outreach was a “cold call”, returned calls/emails to participate in the study were less.

Another way that gay/lesbian participants were sought was through “liberal” religious congregations which seek to welcome and include gay and lesbian persons at

their places of worship. From listings obtained on the internet of “gay/lesbian friendly” churches/synagogues (e.g., the NJ Lesbian and Gay Coalition’s Religious Directory), outreach emails and/or phone calls were made to the ministers, priests, and rabbis.

In general, the ministers, priests, rabbis responded to my outreach and then sent emails to members of their congregation who they thought might be interested (and met the eligibility criteria of the study). From that point, individuals emailed me with interest. This yielded a higher interest in participating than any other means and both gay/lesbian parents and gay/lesbian nonparents responded to this form of outreach.

Finally, in another attempt to obtain respondents, this researcher attended some gay/lesbian events (e.g., The NYC Pride Day Festival; The Rainbow Families Picnic, a statewide event held in Holmdel, NJ; and a central NJ Rainbow Families gathering) to meet prospective respondents and solicit their participation in this study. Also, at one event (The Jersey Pride 16th Annual LGBTI Pride Festival) this researcher was a “vendor” as well as a participant in order to meet and solicit participation in the study. This method also was fairly successful in obtaining respondents.

To obtain the sample of heterosexual respondents, people connected to their local school PFA/PTA/PTO groups were asked to complete the surveys and were asked to distribute the surveys to people they knew who were eligible and interested. Also, people connected to extracurricular activities for their children were also asked to complete the surveys and to distribute the surveys to people they knew who were eligible and might be interested.

Additionally, people known to the researcher peripherally were asked if they

could complete a survey themselves and/or distribute the surveys to others. This snowball method of sampling yielded a wider geographic range (i.e., respondents knew of others who wanted to participate in the study that lived in other areas of the country) The heterosexual parent group was an easily obtainable sample, but the heterosexual non parents were not as easy to locate. School/extracurricular events for children attract parents but no venues were specific to heterosexual nonparents. There were heterosexual “singles” events and groups, but these venues would not attract couples and there were heterosexual “parenting” events and groups which would not attract nonparents. Thus this group was found only via the snowball method. Once interest was expressed and eligibility was confirmed, surveys with consent forms were sent.

Participants. In all, three hundred forty-one (341) surveys were distributed and a total of two hundred forty five (245) surveys were returned completed with signed consent forms. Thus there was a total response rate of approximately 72%. The original aim was to obtain 300 participants comprised of six groups: 50 lesbians with children, 50 lesbians without children, 50 gay men with children, 50 gay men without children, 50 heterosexual persons with children (25 women and 25 men), and 50 heterosexual persons without children (25 women and 25 men). Instead this study received completed surveys and consent forms from 39 lesbians with children, 33 lesbians without children, 33 gay men with children, 37 gay men without children, 51 heterosexual persons with children, 48 heterosexual persons without children, 1 unidentified person with children, and 3 unidentified persons without children.

It should be also noted that the process of soliciting and obtaining the 245 completed surveys took approximately 18 months. In an effort to finish the study, the aim

of 300 completed surveys was abandoned. This decision by the researcher negatively impacted on the study in some areas:

1. Uneven sample size among the six groups – to address this issue, the primary statistical test used—Analysis of Variance (ANOVA)—compares group means. Because the sample sizes between the groups do not vary substantially, there was not a major problem with this issue statistically.
2. Related problems with smaller population sample (e.g., greater risk of Type II error—accepting the null hypothesis when there are differences).
3. Problems with lack of diversity: the sample obtained did not achieve the diversity of participants hoped for in this study.

On a positive note, of the 245 respondents this study has a total of 142 gay and lesbian persons. In comparison to the existing research on gay and lesbian parenting, this is a small step forward both in regard to sample size and in regard to the inclusion of both gay and lesbian persons in the same study.

Variables

The following is a review of the dependent variable Intergenerational Solidarity, its seven factors, and how they were each operationalized.

Associational solidarity. This refers to the frequency of contact that the respondent has with his/her parents. Each respondent (whose parent is not deceased) is asked four questions regarding how much contact he/she has had in the past year with his/her mother. Specifically the respondent is asked the following questions.

1. How much contact in the past year have you had in-person with your mother?

2. How much contact in the past year have you had by phone with your mother?
3. How much contact in the past year have you had by e-mail with your mother?
4. How much contact in the past year have you had by mail with your mother?

Each respondent is asked the same four questions regarding how much contact he/she has with his/her father. There are six response categories ranging from 1 = *None at all*; 2 = *Once or twice a year*; 3 = *Several times a year*; 4 = *Every month or so*; 5 = *Every week or so*; and 6 = *daily or more often*. Therefore, the higher the score, the more contact, and the higher the solidarity. This measure is split into two measures “Associational Solidarity with Mother” (four questions) and “Associational Solidarity with Father” (four questions).

Affectual solidarity. This reflects the degree of emotional closeness and sentiment between the respondent and his/her parents. Five questions are asked regarding the respondent’s closeness with mother. The same five questions are asked regarding the respondent’s closeness with father. Those five questions are as follows.

1. How well do you feel your mother understands you?
2. Taking everything into consideration, how close do you feel is the relationship between you and your mother at this point in your life?
3. How is the communication between you and your mother—exchanging ideas talking about things that really concern you at this point in your life?
4. Overall, how well do you and your mother get along at this point in time?
5. How well do you feel that you understand your mother?

There are six response categories ranging from 1 = *Not at all* (Not at all close; Not at all well; Not at all), 2 = *Not too well* (Not too close), 3 = *Some* (Somewhat close), 4 = *Pretty*

well (Pretty close), 5 = *Very well* (Very close), and 6 = *Extremely well* (Extremely close; Extremely well). Therefore, the higher the score, the higher the degree of closeness, and the higher the solidarity. This measure is split into two: “Affectual Solidarity with Mother” (five questions) and “Affectual Solidarity with Father” (five questions).

Consensual solidarity. This refers to the amount of intergenerational similarity or agreement in beliefs and values between the respondent and his/her parents. In this study this is only measured as perceived, not actual, because it is from the respondent’s viewpoint and perception only. This is a major drawback in this study because perceptions are not always accurate. For example, respondents may believe that they have very similar beliefs to their mothers and in actuality they may have very different beliefs than their mothers. Or, the respondents may believe that they have very different beliefs to their mothers and in actuality they may have very similar beliefs. For example, respondents may believe that they have more liberal ideas than their mothers and in actuality their beliefs may be comparable. For this study, each respondent is asked, “In general how similar are your views about life to those of your mother?” The respondent is also asked the same question about his/her father.

There are six response categories ranging from 1 = *Not at all similar*, 2 = *Not too similar*, 3 = *Some similar views*, 4 = *Pretty similar in views*, 5 = *Very similar in views*, and 6 = *Extremely similar in views*. Therefore, the higher the score, the higher the perceived similarity, and the higher the solidarity. This measure is split into two: “Consensual Solidarity with Mother” (one question) and “Consensual Solidarity with Father” (one question).

Normative solidarity. This has also been referred to as norms of familism and is measured in two ways. The first is regarding feelings of filial obligation and respondents are asked to answer six questions regarding how much responsibility adult children with families of their own have to their elderly parents in different areas of care. The participants are asked “Regardless of the sacrifices involved, how much responsibility should adult children with families of their own have...”

1. to provide companionship or spend time with elderly parents who are in need?
2. to help with household chores and repairs and/or to provide transportation for elderly parents who are in need?
3. to listen to the problems and concerns of elderly parents and to provide advice and guidance?
4. to provide for the personal and health care needs of elderly parents (for example, bathing, grooming, medication)?
5. to provide financial support and/or assist in the financial and legal affairs of elderly parents who are in need?
6. to provide housing for elderly parents who are in need?

There are five response categories ranging from 1 = *None*, 2 = *Minor*, 3 = *Moderate*, 4 = *Major*, to 5 = *Total*. Thus, the higher the score, the higher the respondent feels responsibility to help elderly parents, and the higher the solidarity.

The second way normative solidarity has been measured is in terms of a five-item scale that the Bengston Intergenerational Solidarity Model adapted from the Heller Familism Scale originally constructed in 1970 (Heller, 1970, 1976). It looks at how

respondents view connections with their family and primacy of family over individual desires/needs. Five opinions are solicited.

1. A person should talk over important life decisions (such as marriage, employment, and residence) with family members before taking action.
2. If a person finds that the life-style he/she has chosen runs so against his family's values that conflict develops, he/she should change.
3. As many activities as possible should be shared by married children and their parents.
4. Marriage should be regarded as extending established families, not just creating new ones.
5. Family members should give more weight to each other's opinions than to the opinions of others.

There are four response categories ranging from 1 = *Strongly disagree*, 2 = *Disagree*, 3 = *Agree*, and 4 = *Strongly Agree*. Thus, the higher the score, the higher the respondent's belief of the importance of family in these areas, and the higher the solidarity score.

For this study, three separate scores were analyzed. First, the eleven total questions were combined for a total score of normative solidarity. Next, the two separate measures (filial responsibility to help elderly parents and the adapted familism scale) were scored separately.

Functional solidarity. This reflects the socioemotional and instrumental support resources of the multigenerational family network. Functional solidarity in regard to socioemotional support is labeled "Functional-Emotional" and it examines the network a respondent has for emotional support. Specifically, each respondent answers three

questions regarding who they provide emotional support to and three questions regarding from whom they receive that emotional support. Beneath each area of support, the respondent can check off as many as apply. The choices are: spouse/partner; adult child; minor child; mother; father; grandmother; grandfather; brother/sister; other relatives/in-laws; friends/neighbors; and paid help (paid help is only given as a choice for receiving help, not providing help). Each possible choice is scored as a dichotomous choice, with checked (*support*) being scored as 1 and not checked (*no support*) being scored as 0. Thus, the higher the score, the more connected with those family members ,and the higher the solidarity.

The instructions and those questions are as follows. For each type of help and support listed below, put a check in the space by each person to whom you PROVIDE that kind of assistance or support. Check as many that apply.

1. Emotional Support
2. Discussing important life decisions
3. Visiting/sharing leisure activities

For each type of help and support listed below, put a check in the space by each person to whom you RECEIVE that kind of assistance or support. Check as many that apply.

1. Emotional Support
2. Discussing important life decisions
3. Visiting/sharing leisure activities
4. Functional solidarity in regard to instrumental support is labeled

“Functional–Instrumental” and it examines if a respondent relies on different

people for help with concrete services. These areas of support are operationalized as continuous measures indicating whether these types of support are received (six questions) and whether these types of support are provided to people (six questions). The same list of people is used for this factor as with the functional–emotional questions.

The instructions and those six questions are as follows. For each type of help and support listed below, put a check in the space by each person to whom you PROVIDE that kind of assistance or support. Check as many that apply.

1. Household chores
2. Transportation/shopping
3. Information and advice
4. Financial assistance
5. Help when he/she is sick
6. Child care

For each type of help and support listed below, put a check in the space by each person to whom you RECEIVE that kind of assistance or support. Check as many that apply.

1. Household chores
2. Transportation/shopping
3. Information and advice
4. Financial assistance
5. Help when he/she is sick
6. Child care

In addition to the two forms of functional solidarity (emotional and instrumental),

connections with family members were separated from connections with friends/neighbors and from paid help. Also, since nonparents would not have the need for child care, solidarity scores did not include child care in the sum when comparing parents and nonparents. However, in comparing different parent groups, child care was included.

An important note is that respondents did not have a choice of “not applicable” by each family member option (e.g., if a respondent does not have a sibling he would simply not check off the “brother/sister” option, but the respondent did not have a “N/A” choice. Thus, if a respondent has a larger family that is living, he/she may have higher solidarity scores.

In part this issue was addressed because information gathered in the demographics section asked about number of siblings. Then when conducting the analyses, this variables was taken into account. Specifically, number of siblings was an independent variable included in the regressions to “control” for the possible impact on the solidarity outcomes. Also, respondents with children would have more access to family too. This was addressed when comparing parent groups and nonparent groups.

Structural solidarity. This refers to the opportunity structure for interactions including such factors as family size and composition, age, ethnicity, gender, parental divorce, co-residence, and geographical proximity. These factors were all included in the survey and comprised the demographic section of the survey. The information (except for geographic proximity) was all categorical data. Thus there was no “score” for these items. However, in the analysis these factors were looked at to see which, if any, influenced the other areas of solidarity. For the question of geographical proximity, each

respondent was asked two identical questions (one pertaining to mother and one pertaining to father). Specifically, the question asked was, “How far from you does your mother live?” There were eight response categories ranging from 1 = *not applicable—mother/father is deceased*, 2 = *More than 500 miles from me*, 3 = *251–500 miles*, 4 = *151–250 miles*, 5 = *51–150 miles*, 6 = *5–50 miles*, 7 = *Less than 5 miles from me*, and 8 = *We live together*.

Thus, the higher the score, the closer in proximity, and the higher the solidarity. Two separate scores—“Structural Solidarity with Mother” and “Structural Solidarity with Father”—were done so that respondents with a deceased parent would not have an erroneous low solidarity score.

Intergenerational feelings of conflict. This refers to the level of conflict a respondent feels he/she has with his/her mother and with his/her father. This is measured using four questions regarding mother and four identical questions regarding father. The four questions are:

1. Taking everything into consideration, how much conflict, tension, or disagreement do you feel there is between you and your mother at this point in your life?
2. How much do you feel your mother is critical of what you do?
3. How much does your mother argue with you?
4. How much do you feel your mother makes too many demands on you?

There are six response categories ranging from 1 = *A great deal* (A great deal of conflict), 2 = *Quite a bit* (Quite a bit of conflict), 3 = *Pretty much* (Pretty much conflict), 4 = *Some* (Some conflict), 5 = *A little* (A little critical, A little conflict), and 6 = *No conflict at all*

(Not at all critical, Not at all). Thus, the higher the score, the lower the level of conflict and the higher the level of solidarity. Finally, this measure was split into two: “Conflict with Mother” and “Conflict with Father.”

For this study there are three primary independent variables. One independent variable is parenthood status (gay/lesbian/heterosexual persons who are parents and those who are not parents). Therefore this is a categorical and dichotomous variable. Another independent variable is the combination of parenthood status and sexual orientation resulting in six separate sub-groups. Specifically those groups are heterosexual parents, heterosexual nonparents, lesbian parents, lesbian nonparents, gay parents, and gay nonparents. This is also a categorical variable but it is not dichotomous. Finally, there is the independent variable gender (men and women). This is a categorical and dichotomous variable. However, an important note must be made here. It can be successfully argued that gender does not always neatly fit into two categories, and thus for this study respondents were asked to identify their gender and a space was provided (allowing the respondent to give a different or more mixed response). However, all the respondents participating in this study identified themselves as male or female.

The dependent variable is the extent of intergenerational solidarity between the respondents and their families of origin. Therefore the dependent variable is continuous in nature and there is some meaning between the scores (the higher the score the greater the solidarity). For all the dimensions of solidarity, except structural solidarity, the dependent variables are all ordinal variables. Thus there is a difference in strength of solidarity with each score, but the difference in strength from the first response to the second response (e.g., response of “not at all” to “not too well”) is not necessarily the

same difference of strength between the second response and the third response (e.g., “not too well” to “some”).

In contrast, structural solidarity measures specific distances (how far away each parent lives from the respondent) and the numbers have equal intervals. There is no zero point (because if the parent is deceased the solidarity is not measured), thus it is an interval variable, not a ratio variable.

The dependent variable consisted of six specific different types of Intergenerational Solidarity and a seventh dimension—“Intergenerational Feelings of Conflict.” Respondents were instructed *not* to answer certain sections of the survey regarding their relationship with mother or father if that parent is deceased. Therefore many of the solidarity measures were split into two separate scores—one for solidarity with mother and one for solidarity with father. Thus, the total subsample for each solidarity measure will vary depending on how many respondents have that particular parent living. This eliminated the problem of solidarity scores being inaccurate because of deceased parents. For example, a respondent with a deceased mother will not affect the results by having the lowest score for solidarity because he/she did not answer the questions regarding his/her mother.

All the dependent variables were ordinal variables except “Structural Solidarity-Mother” and “Structural Solidarity-Father.” These asked respondents how far away their mother lived from them and how far away their father lived from them, and the choices were on a numeric scale. Thus these structural solidarity variables were interval variables.

Reliability, Validity, and Testing of the Measures of Solidarity

There has been extensive examination of the measures of the solidarity constructs which support their reliability and validity. Specifically, assessments of the different measurement properties were conducted by Bengston & Roberts, 1991; Bengston & Schrader, 1982; Mangen, Bengston, & Landry, 1988; and Roberts et al., 1991.

Regarding questions in the sections on affectual solidarity, associational solidarity, and structural solidarity Mangen, et al. (1988) stated that other researchers can use these measures with a “high degree of confidence” and that the measures demonstrate “acceptable reliability and validity” (p. 232).

Specifically, the questions (from both a long form scale of ten items and a short form scale of five items) used to measure affectual solidarity (closeness) were shown to have high alpha reliability; convergent and construct validity were acceptable; and there was “reasonable discriminant validity.” (Gronvold, 1988, p. 86). For this research study the short form with five self-report questions was used.

Measures of associational solidarity (frequency of contact) showed evidence of convergent, construct, and discriminant validity. This dimension also exhibited reasonably high reliability as well as reasonably high alpha reliabilities (Mangen & Miller, 1988).

The measure of structural solidarity looks at the opportunity one has to have contact with family members. Two areas are examined: vertical kinship network and residential proximity of intergenerational kin.

The vertical kinship network looks at number of children and grandchildren, ages

of children and grandchildren, gender of children and grandchildren, gender of the respondent, and marital status.

For this study, the measure used is one of geographic proximity (specifically the participant's proximity to mother and proximity to father). These two items were the basis for the level of structural solidarity. For the proximity measure, it was found that "reliable and valid data regarding family structure can be gathered from almost any adult family member..." (Mangen & Miller, 1988, p. 47). When the middle generation respondent (an adult) and the parent of that same adult were asked about the geographic distance between them, the associations between the functional distance estimates all exceeded 0.90. This indicated that it is reliable to use either party as a source of this information. (McChesney & Mangen, 1988).

Some data regarding the vertical kinship network were also gathered from questions in this survey. These questions asked number of children, ages and gender of the children, gender of the respondent, and relationship status (which was one of the eligibility criteria for this study). No questions about grandchildren were asked.

These structural aspects of family solidarity are probably the most easily observed and determined (McChesney & Mangen, 1988). For this study the vertical kinship network will not be combined with the geographic proximity question for a total score. Instead, the kinship network will be separately examined to see if any of those structural aspects influenced other types of family solidarity.

Measures of consensual solidarity (similarities of views) had mixed results regarding reliability and validity, and one of the suggestions made was to use a single-item indicator of perceived similarity of views between the generations (Landry, Jr. &

Martin, 1988). This suggestion was followed for this research study. One item regarding similarity of beliefs with mother and one item regarding similarity of beliefs with father were asked.

The other suggestion regarding consensual solidarity was to also examine the level of generational conflict (Landry, Jr. & Martin, 1988). In later writings, the area of “Feelings of Intergenerational Conflict” was added to the solidarity model. For this study, questions regarding conflict were taken from the longitudinal study done by Bengston, et al., 2002.

The scale regarding “Intergenerational Feelings of Conflict” was adapted for the Intergenerational Solidarity Model from several sources including House & Kahn, 1985; Kahn & Antonucci, 1981; and Moos, 1974. The questions had been tested and deemed both reliable and valid.

The dimension of normative solidarity (degree of filial responsibility and sense of obligations) was measured by a scale of familism that Bengston, et al. 2002 adapted from Heller’s (1976, 1970) Familism Scale. This measure was reviewed and tested (Mangen & Westbrook, 1988) and the suggestion was to reduce Heller’s 10 item scale to a 5 item scale. Those remaining five questions were the ones used for this study and they had been shown to be internally consistent and congruent across generations (Mangen & Westbrook, 1988).

Another measure of normative solidarity was used for this study. It asked six questions regarding responsibility to elderly parents, and the questions were taken from the same longitudinal survey (Bengston et al., 2002) as the other questions. They had also been tested and deemed satisfactory in regard to validity and reliability.

Finally, the measure of functional solidarity (exchange of monies, goods, services, and emotional support) was expanded since the original set of questions was examined in Mangen et al., 1988. In the longitudinal study (Bengston et al., 2002), the questions had been expanded to include various aspects of exchange and to include “other relatives/in-laws” as an option of with whom you receive and/or provide this exchange of services. For this study the expanded version was used.

The Survey

For this study the survey used was comprised of seven sections. One was regarding demographic variables and had 4 sub-sections (personal background, education, work, and regional background). The remaining six sections were regarding the participants’ relationships with their family, especially their mother and father. Within the sections, there were questions to measure each of the dimensions of Intergenerational Solidarity. Specifically those dimensions are (a) Affectual; (b) Associational; (c) Structural; (d) Normative; (e) Functional (emotional and instrumental); and (f) Consensual. A seventh area, the area of Intergenerational Feelings of Conflict, was also assessed. (See section on measurement for more details).

In this study survey questions were selected from “The Longitudinal Study of Four-Generation Families” 2000 Survey and from a summary in a book regarding the same study in *How Families Still Matter* (Bengston, et al., 2002). In their study, to date they have used four generations of participants and used surveys and interviews at different time periods over a course of thirty years.

In contrast, this study only focused on one generation and was only studied at

one interval of time. Therefore some of the formatting of the survey and some of the survey questions had to be modified to fit with the nature and purpose of this study. The portions of the survey that Bengston et al. (2002) utilized were all tested and deemed satisfactory in both reliability and validity. See Appendix B for the informed consent form and Appendix C for the survey used in this study.

Distribution of the Surveys

The selected participants for this study were typically mailed the survey along with two consent forms (one consent form for his/her records and one consent form to sign and mail back with the survey). Some of the participants were given the survey and consent forms directly. The survey and consent forms were numbered so that it was known to the researcher who responded to the survey and who did not respond. The purpose of coding the surveys was so that follow up could be made (when possible) to those who originally did not respond to increase the overall response rate.

The information on the prospective respondents (names, email addresses, and mailing addresses) was maintained in a separate place (i.e., locked file cabinet) from the returned completed questionnaires (which were housed in a separate locked file cabinet) to insure confidentiality. However, because names were stored, it was not an anonymous study.

Couples who received the survey had only one member of each couple complete the survey (in reference to him/her only). Self addressed stamped envelopes were enclosed with the surveys to encourage a reply. Follow up was done at different time frames. A reminder email was sent (if the prospective respondent had given his/her name

and his/her email address) after one month's time to encourage completion of the survey. A second reminder email was sent after two month's time.

Throughout the process names of other prospective respondents were accepted if offered from the original pool of respondents. Additionally, when offered, more than one survey packet was mailed to the prospective respondent wishing to distribute the survey packets to people he/she knows who meet the criteria of the study. In this case, follow up was done with the prospective respondent who had contact with the Principal Investigator (P.I.) originally. For this study no compensation was offered to respondents for participating in the study, their time and their efforts.

This study was reviewed and approved by Rutgers University Office of Research and Sponsored Programs' "Institutional Review Board for the Protection of Human Subjects in Research" (I.R.B.) on 11/09/2005. Two continuations for the study were also reviewed and approved by the I.R.B. on 09/28/2006 and on 09/07/2007.

Data Analysis

In order to successfully analyze the outcomes of this study, Analysis of Variance (ANOVAs) were run using the resulting seventeen dependent variables to measure the seven areas of intergenerational solidarity. The seventeen variables were:

1. Structural Solidarity: Mother
2. Structural Solidarity: Father
3. Associational Solidarity: Mother
4. Associational Solidarity: Father
5. Affectual Solidarity: Mother

6. Affectual Solidarity: Father
7. Conflict Solidarity: Mother
8. Conflict Solidarity: Father
9. Consensual Solidarity: Mother
10. Consensual Solidarity: Father
11. Functional –Emotional Solidarity: Receive from family
12. Functional–Emotional Solidarity: Provide to family
13. Functional–Instrumental Solidarity: Receive from family (not including childcare)
14. Functional–Instrumental Solidarity: Provide to family
15. Normative Solidarity: Total score
16. Normative Solidarity: Filial responsibility with elderly parents
17. Normative Solidarity: Adapted familism scale

As mentioned earlier, five of the areas of “Intergenerational Solidarity” were divided into two measures: one regarding solidarity with mother and one regarding solidarity with father. This was done because there are sections of the research survey which instructed respondents to answer the questions only if their mother was living or only if their father was living. If either was deceased the respondent was instructed to go to the next section of the survey. Thus if the total parental scores were analyzed it would impact the results and give lower scores of solidarity if the mother and/or father of the respondent was deceased.

The measure of functional solidarity was sub divided into four measures: Two

which measured “Functional–Emotional Solidarity” and two which measured “Functional–Instrumental Solidarity”. The first sub division separating “Functional–Emotional Solidarity” from “Functional–Instrumental Solidarity” is done in keeping with the theory which is being tested which posits that there are two distinct areas of “Functional Solidarity”. The other sub division done split each functional solidarity dimension into help received from family (not including childcare) and help given to family. This was done because what someone provides may be different than what they receive. For example, a person may be very connected to his/her mother but because the mother is elderly and ill, the person primarily gives support and receives little back.

Also, in the theory being tested it is asserted that reciprocity is important regarding solidarity (i.e., the more reciprocal the support, the greater the chance of strong solidarity). Therefore, it was important to see if the scores were reciprocal and potential impact on solidarity.

Finally, in the instrumental dimension, child care was not included in the total score because nonparents have no children and thus cannot receive childcare. If child care was included the overall solidarity score would be impacted giving non parents a lower score for intergenerational solidarity.

Further analysis was done looking only at parents and including the area of childcare in the statistics to assess if there were differences among the groups of parents (heterosexual, lesbian, gay) in regard to childcare received from family.

This study also asked the research question about solidarity with friends and if that changes with parenthood among the groups. The only measures in this questionnaire that measured connections and solidarity with friends/neighbors was in regard to

functional solidarity. Therefore ANOVA's were run using the following dependent variables:

1. Functional–Instrumental Solidarity: Receive from Friends and Neighbors (without childcare)
2. Functional–Instrumental Solidarity: Provide to Friends and Neighbors
3. Functional–Emotional Solidarity: Receive from Friends and Neighbors
4. Functional–Emotional Solidarity: Provide to Friends and Neighbors

Unmatched Groups

The surveys included sections of questions regarding demographic variables. Specifically these sections were: Personal Background (which includes household composition, gender of family members, ages of family members, ethnic background) , Educational Attainment , Work (which includes household income), and Regional Background (which includes type of community, area of the United States in which family resides, and whether the town/city is an urban area, suburban area, rural area, or mix).

Although it would have been ideal to have the six groups of respondents (heterosexual parents, heterosexual nonparents, lesbian parents, lesbian nonparents, gay Parents, and gay nonparents) well matched regarding these demographic variables, it was not possible to accomplish this task. Due to the difficulty in obtaining participants for this study in general, no extra measures were taken to accomplish the task of matching the six groups.

Since this research study did not match the sub-groups based on demographics

and structural variables (predicted to be influential on Intergenerational Solidarity), Regressions were calculated to help interpret the results in a meaningful way. Specifically, regressions incorporating the independent variables originally analyzed by ANOVAS (i.e., parenthood status, the combination of parenthood status and sexual orientation, and gender) were included as well as the independent variables: age, race, and educational level. The independent variables number of siblings and parental divorce were also included in the regressions to attempt to control for differences in family size (and family opportunity) and possible family obstacles of solidarity. The regressions were run (in each solidarity dimension that had significant results with the original study questions) to see if these demographic differences impacted the outcomes.

CHAPTER IV: FINDINGS

The Respondents

Although there was some diversity among the 245 respondents, the sample was still predominately White and college educated. In sum 199/245 respondents were White (81.2%) compared with 73.9% in the US 2006 Community Survey (U.S. Census Bureau, 2006). In this study 23/245 respondents were Latino/Latina (9.4%) compared with 12.2% in the 2006 U.S. Community Survey; 9/245 respondents were Asian (3.7%) compared with 4.2% in the U.S. 2006 Community Survey; 7/245 respondents were Black (2.9%) compared with 12.4% in the U.S. 2006 Community Survey; and 7/245 respondents were “Other” (2.9%) (U.S. Census Bureau, 2006).

In regard to educational level, 194/245 respondents had at least a college education (79.2%) compared with 27% in the U.S. 2006 Community Survey (U.S. Census Bureau, 2006). A total of 115 of those 194 respondents indicated they had a post-college educational level (46.9% of total) and a total of 79 of those 194 respondents indicated they were a college graduate (32.2% of total). High school graduates accounted for 14/245 respondents (5.7%) and special technical school/business school/ some college accounted for 37/245 respondents (15.1%).

Household income level was varied, but most earned over \$60,000. Of the 240 respondents that answered this question (5 respondents did not answer and so there is missing data for this variable), 1.2% of the respondents reported a household income of

less than \$30,000; 10% of the respondents had a household income of between \$30,000–\$59,999; 28.8% of the respondents had a household income of between \$60,000–\$99,999; 40.4% of the respondents had a household income between \$100,000–\$199,999; and 19.6% of the respondents had a household income over \$200,000. This contrasts with the US. 2006 Community Survey (U.S. Census Bureau, 2006) which shows that 51.3% have a household income of less than \$50,000 and only 3.4 % have a household income of over \$200,000. In 2006, the median household income in the United States was \$48,451 (U.S. Census Bureau, 2006). However, most of the respondents (82.1%)resided in states with the highest costs of living in the United States. Specifically, 58% of the respondents reported they reside in New Jersey which has the third highest cost of living, 12.2% of the respondents reported they reside in New York which has the fifth highest cost of living, 4.5% reported they reside in Massachusetts which has the ninth highest cost of living , 3.7% reported they reside in Connecticut which has the seventh highest cost of living , and 3.7% reported they reside in California which has the highest cost of living (Missouri Economic Research and Information Center, 2007).

In regard to type of community, of 241 answering this question (4 did not respond so there is missing data) 22.8% live in urban areas; 62.2% live in the suburbs; 9.1% live in rural areas; and 5.8% live in a mixed area (which by description was a mix of urban and suburban neighborhoods). Thus, 90.8% of respondents reside in a metropolitan area, in comparison to 80.1% of the total U.S. population in 1998 residing in a metropolitan area (U.S. Census Bureau, 2001). See Table 1 for a detailed description of the demographics of the sample population for this study.

Table 1

Summary Frequencies of Demographics for this Study

	<i>N</i>	%
All sample	245	
Parenthood status		
Parent	124	50.6
Nonparent	121	49.4
Sexual orientation		
Heterosexual	99	40.4
Lesbian	72	29.4
Gay	70	28.6
Not designated	4	1.6
Parenthood status & sexual orientation		
Heterosexual parent	51	20.8
Lesbian parent	39	15.9
Gay parent	33	13.5
Heterosexual nonparent	48	19.6
Lesbian nonparent	33	13.5
Gay nonparent	37	15.1
Not designated	4	1.6
Ethnicity/Race		
White/Non-Hispanic	199	81.2

	<i>N</i>	%
Latino/Latina	23	9.4
Black/African American	7	2.9
Asian	9	3.7
American Indian	0	0
Other (mix of 2 or more)	7	2.9
Household income		
Less than \$30,000	3	1.2
\$30,000–59,999	24	9.8
\$60,000–99,999	69	28.2
\$100,000–199,999	97	39.6
\$200,000 or more	47	19.2
Not designated	5	2.0
Educational level		
Less than college	51	20.8
College graduate	79	32.2
Post graduate schooling	115	46.9

Of the parents in this sample ($n = 124$), 51/124 were heterosexual (41.13%), 39/124 were lesbian (31.45%) and 33/124 were gay (26.61%). The number of children each respondent had ranged from 1 child to 6 children. Heterosexual parents had the most children ($M = 2.14$), gay parents had the next highest number of children ($M = 2.09$), and the lesbian parents had the least ($M = 1.92$). The majority of the heterosexual parents (48/51, 94.12%) were the biological parents of their children. One of the heterosexual parents utilized reproductive assistance with egg donation, one was a biological parent and a step parent, and one was a step parent and an adoptive parent.

The lesbian and gay parents also indicated how they are related to their children (e.g., adoptive, biological) but they were not asked from what relationship they had their child(ren). Thus, some may have been biological parents, adoptive parents, and/ or step parents from previous heterosexual relationships, previous gay/lesbian relationships, and/or from their current gay/lesbian relationships. Not surprisingly, though, most of the gay men parents (63.64%) were parents through adoption and most of the lesbian parents were either the biological parents (41.03%) or parents through 2nd parent adoptions (28.21%). See Table 2 for a detailed summary of the relationships each sub-group of parents had with their children and the number of children.

Table 2

Parents: Number of Children and Their Relationship to Their Children

	Parents					
	Hetero		Gay		Lesbian	
	(%)	<i>n</i>	(%)	<i>n</i>	(%)	<i>n</i>
All parents		51		33		39
Number of children						
One	25.49	13	27.27	9	35.9	14
Two	45.1	23	51.52	17	46.15	18
Three	23.53	12	9.09	3	10.26	4
Four	3.92	2	9.09	3	5.13	2
Five	0	0	3.03	1	2.56	1
Six	1.96	1	0	0	0	0
Relationship						
Biological	94.12	48	21.21	7	41.03	16
Adoptive	0	0	63.64	21	0	0
2 nd parent adoptive	0	0	0	0	28.21	11
Step parent	0	0	3.03	1	10.26	4
Biological and step	1.96	1	3.03	1	12.82	5
Step and adoptive	1.96	1	9.09	3	5.13	2
Assist w/ egg donation	1.96	1	0	0	0	0
Missing data	0	0	0	0	2.56	1

The Findings Regarding Solidarity With Family

Prior to the review of the findings is a review of the study hypotheses proposed regarding intergenerational solidarity with family of origin.

1. Compared with gay/lesbian/heterosexual nonparents, gay/lesbian/heterosexual parents will score higher on all dimensions of intergenerational solidarity with family due to the probable increased need of support (emotional and instrumental).
2. Compared with gay parents, lesbian parents will score higher on all dimensions of intergenerational solidarity with family due to possible gender differences between women and men in regard to family connections. Lesbian nonparents, compared with gay nonparents will score higher on all dimensions of intergenerational solidarity with family again due to possible gender differences.

Overall findings were mixed. See Tables 3, 4, 5, and 6 for details. One-way ANOVAs were run for each of the domains of intergenerational solidarity (dependent variables). Parenthood status, gender, and the combination of parenthood status and sexual orientation were the independent variables in each of these ANOVAs. In summary, parents did show higher levels of solidarity with family than nonparents in regard to receiving and providing concrete task help (functional–instrumental), receiving and providing emotional support (functional–emotional), and living in closer geographic proximity to their mothers and fathers (structural).

Women showed higher levels of solidarity with family than men in regard to receiving and providing concrete help (functional–instrumental) and receiving and providing emotional support (functional–emotional). There were no significant

differences between men and women in the areas of normative solidarity and structural solidarity.

In the area of normative solidarity (total score and familism scale), the differences were not based on parenthood status or gender, but instead were based on sexual orientation. Generally, heterosexual respondents had higher normative solidarity with their family than gay/lesbian respondents. However, gay male parents had the highest mean scores regarding filial responsibility to elderly parents and scored similarly with heterosexual respondents in regard to familism.

Finally, there seemed to be no differences between groups based on any of the three independent variables (parenthood status, gender, and combination of parenthood status and sexual orientation) when it came to emotional closeness (affectual solidarity); frequency of contact (associational solidarity); similarity of beliefs (consensual solidarity); and level of conflict (feelings of conflict). Therefore, in these areas, the null hypothesis was supported.

A Review of the Statistics

The areas where significant differences emerged are reviewed here:

1. Functional–Emotional Solidarity: Received from Family

(Emotional support received from family)

(See Table 3 for details)

There were significant differences between the following groups:

- a. Parents ($M = 10.59$, $SD = 3.67$) received more emotional support from family than nonparents ($M = 8.79$, $SD = 3.62$, $p < .001$);

- b. Heterosexual parents ($M = 11.78, SD = 3.63$) received more emotional support from family compared to:
 - Lesbian nonparents ($M = 9.36, SD = 2.92, p < .05$)
 - Gay nonparents ($M = 6.97, SD = 3.61, p < .001$)
 - Lesbian parents ($M = 9.41, SD = 3.42, p < .05$);
- c. Lesbian parents ($M = 9.41, SD = 3.42$) received more emotional support from family compared to:
 - Gay nonparents ($M = 6.97, SD = 3.61, p < .05$);
- d. Gay parents ($M = 10.27, SD = 3.54$) received more emotional support from family compared to:
 - Gay nonparents ($M = 6.97, SD = 3.61, p < .01$);
- e. Women received more emotional support from family ($M = 10.18, SD = 3.54$) compared to men ($M = 9.10, SD = 3.92, p < .05$).

Table 3

ANOVAs for Functional–Emotional Solidarity: Received by and Provided to Family

	Received <i>M</i> (<i>SD</i>)	<i>N</i>	Provided <i>M</i> (<i>SD</i>)	<i>N</i>
Parenthood status				
All sample	9.70 (3.75)	245	10.70 (3.73)	245
Parent	10.59 (3.67)	124	12.09 (3.42)	124
Nonparent	8.79 (3.62)	121	9.27 (3.50)	121
<i>F</i> test	14.85***		40.58***	
Parenthood status & sexual orientation				
All sample	9.73 (3.75)	241	10.75 (3.73)	241
Hetero N-P	9.83 (3.61)	48	9.90 (3.74)	48
Lesbian N-P	9.36 (2.92)	33	9.61 (2.78)	33
Gay N-P	6.97 (3.61)	37	8.27 (3.62)	37
Hetero parent	11.78 (3.63)	51	13.45 (3.47)	51
Lesbian parent	9.41 (3.42)	39	11.08 (2.93)	39
Gay parent	10.27 (3.54)	33	11.33 (3.23)	33
<i>F</i> test	8.47***		12.35***	
Gender				
All sample	9.70 (3.75)	245	10.70 (3.73)	245
Male	9.10 (3.92)	109	10.12 (3.95)	109
Female	10.18 (3.54)	136	11.16 (3.49)	136
<i>F</i> test	5.14*		4.82*	

+*p* < .10 **p* < .05 ***p* < .01 ****p* < .001

2. Functional–Emotional Solidarity: Provided to Family

(Emotional support provided to family)

(See also Table 3 for details).

There were significant differences between the following groups:

- a. Parents ($M = 12.09$, $SD = 3.42$) provided more emotional support to family than nonparents ($M = 9.27$, $SD = 3.50$, $p < .001$);
- b. Heterosexual parents ($M = 13.45$, $SD = 3.47$) provided more emotional support to family when compared to:
 - Heterosexual nonparents ($M = 9.90$, $SD = 3.74$, $p < .001$)
 - Lesbian nonparents ($M = 9.61$, $SD = 2.78$, $p < .001$)
 - Gay nonparents ($M = 8.27$, $SD = 3.62$, $p < .001$)
 - Lesbian parents ($M = 11.08$, $SD = 2.93$, $p < .05$);
- c. Lesbian parents ($M = 11.08$, $SD = 2.93$) provided more emotional support to family when compared to:
 - Gay nonparents ($M = 8.27$, $SD = 3.62$, $p < .01$);
- d. Gay parents ($M = 11.33$, $SD = 3.23$) provided more emotional support to family when compared to:
 - Gay nonparents ($M = 8.27$, $SD = 3.62$, $p < .01$);
- e. Women ($M = 11.16$, $SD = 3.49$) provided more emotional support to family than men ($M = 10.12$, $SD = 3.95$, $p < .05$).

3. Functional–Instrumental Solidarity: Received from Family (without childcare)

(Concrete task services received from family)

(See Table 4 for details).

There were significant differences between the following groups:

- a. Parents ($M = 9.48, SD = 3.63$) received more concrete help from family, not including childcare, than non parents ($M = 8.44, SD = 3.03, p < .05$);
- b. Heterosexual parents ($M = 10.57, SD = 4.06$) received more concrete help from family, not including childcare, compared to:
 - Gay nonparents ($M = 6.97, SD = 2.61, p < .001$);
- c. Women ($M = 9.40, SD = 3.46$) received more concrete help from family, not including childcare, than men ($M = 8.43, SD = 3.21, p < .05$).

4. Functional–Instrumental Solidarity: Provided to Family (without childcare)

(Concrete task services provided to family)

(See Table 4 for details).

There were significant differences between the following groups:

- a. Parents ($M = 14.67, SD = 5.24$) provided more concrete help to family, not including childcare, than nonparents ($M = 9.82, SD = 4.55, p < .001$);
- b. Heterosexual parents ($M = 15.86, SD = 5.97$) provided more concrete help to family, not including childcare, compared to:
 - Lesbian nonparents ($M = 11.03, SD = 3.93, p < .001$);
- c. Heterosexual nonparents ($M = 10.17, SD = 5.54$) provided *less* concrete help to family, not including childcare, compared to:
 - Gay parents ($M = 13.88, SD = 4.57, p < .05$)

- Lesbian parents ($M = 13.72, SD = 4.57, p < .05$)
 - Heterosexual parents ($M = 15.86, SD = 5.97, p < .001$);
- d. Gay nonparents ($M = 8.62, SD = 3.36$) provided *less* concrete help to family, not including childcare, compared to:
- Gay parents ($M = 13.88, SD = 4.57, p < .001$)
 - Lesbian parents ($M = 13.72, SD = 4.57, p < .001$)
 - Heterosexual parents ($M = 15.86, SD = 5.97, p < .001$).

There were no significant differences between men and women regarding providing help to family.

Table 4

ANOVAs for Functional–Instrumental Solidarity With the Family

	Functional–instrumental solidarity: Received from family (without childcare) <i>M (SD)</i>	<i>N</i>	Functional–instrumental solidarity: Provided to family (without childcare) <i>M (SD)</i>	<i>N</i>
Parenthood status				
All sample	8.97 (3.38)	245	12.31 (5.47)	242
Parent	9.48 (3.63)	124	14.67 (5.24)	124
Nonparent	8.44 (3.03)	121	9.82 (4.55)	118
<i>F test</i>	5.98*		58.76***	
Parenthood status & sexual orientation				
All Sample	9.00 (3.39)	241	12.35 (5.48)	238
Heterosexual nonparent	9.17 (3.01)	48	10.17 (5.54)	48
Lesbian nonparent	9.15 (3.02)	33	11.03 (3.93)	30
Gay nonparent	6.97 (2.61)	37	8.62 (3.36)	37
Heterosexual parent	10.57 (4.06)	51	15.86 (5.97)	51
Lesbian parent	8.95 (3.57)	39	13.78 (4.57)	39

	<i>M (SD)</i>		<i>M (SD)</i>	
Gay parent	8.55 (2.51)	33	13.88 (4.57)	33
<i>F</i> test	5.44***		13.19***	
Gender				
All sample	8.97 (3.38)	245	12.31 (5.47)	242
Male	8.43 (3.21)	109	11.95 (5.88)	109
Female	9.40 (3.47)	136	12.60 (5.13)	133
<i>F</i> test	5.02*		0.86	

+*p* < .10, **p* < .05, ***p* < .01, ****p* < .001

5. Structural Solidarity: Mother (geographic proximity to mother)

(See Table 5 for details).

There were significant differences between the following groups:

- a. Parents ($M = 5.34$, $SD = 1.74$) lived closer to their mothers than nonparents ($M = 4.48$, $SD = 1.89$, $p < .01$);
- b. Heterosexual nonparents ($M = 4.38$, $SD = 2.01$) lived *farther* away from their mothers compared to gay parents ($M = 6.09$, $SD = .97$, $p < .01$);
- c. Gay nonparents ($M = 4.23$, $SD = 1.84$) lived *farther* away from their mothers compared to gay parents ($M = 6.09$, $SD = .97$, $p < .01$);
- d. Specifically, gay and heterosexual non parents lived on average about 151–250 miles away from their mothers compared with gay parents who lived on average 5–50 miles away from their mothers; Parents lived on average 51–150 miles away from their mothers and nonparents lived on average 151–250 miles away from their mothers.

There were no significant differences between men and women regarding geographic proximity to mother.

6. Structural Solidarity: Father (geographic proximity to father)

(See Table 5 for details).

There were significant differences between the following groups:

- a. Parents ($M = 4.82$, $SD = 1.83$) lived closer to their fathers than nonparents ($M = 3.91$, $SD = 1.83$, $p < .01$).
- b. Parents lived on average 51–150 miles away from their fathers and non parents lived on average 151–250 miles away from their fathers.

- c. Heterosexual nonparents ($M = 3.62$, $SD = 1.93$) lived *farther* away from their fathers compared to heterosexual parents ($M = 5.20$, $SD = 1.76$, $p < .05$)
- d. Specifically, heterosexual nonparents lived on average 151–250 miles from their fathers compared with heterosexual parents who lived on average 51–150 miles from their fathers.

There were no significant differences between men and women regarding geographic proximity to father.

Table 5

ANOVAs for Structural Solidarity With the Family

	Structural solidarity:		Structural solidarity:	
	Mother	<i>N</i>	Father	<i>N</i>
	<i>M (SD)</i>		<i>M (SD)</i>	
Parenthood status				
All sample	4.92 (1.86)	189	4.39(1.88)	135
Parent	5.34(1.74)	96	4.82(1.83)	71
Nonparent	4.48(1.89)	93	3.91(1.83)	64
<i>F</i> test	10.62**		8.32**	
Parenthood status & sexual orientation				
All sample	4.92(1.85)	186	4.41(1.88)	133
Heterosexual	4.38(2.01)	40	3.62(1.93)	29
Nonparent				
Lesbian nonparent	4.96(1.70)	25	4.71(1.68)	14
Gay nonparent	4.23(1.84)	26	3.85(1.69)	20
Heterosexual parent	5.34(1.711)	44	5.20(1.76)	35
Lesbian parent	4.72(2.03)	29	4.10(1.95)	21
Gay parent	6.09(.97)	22	5.07(1.59)	14
<i>F</i> test	3.98**		3.45**	
Gender				
All sample	4.92(1.86)	189	4.39(1.88)	135
Male	5.03(1.72)	79	4.40(1.76)	55

	Structural solidarity:		Structural solidarity:	
	Mother	<i>N</i>	Father	<i>N</i>
	<i>M (SD)</i>		<i>M (SD)</i>	
Female	4.85(1.95)	110	4.38(1.97)	80
<i>F</i> test	.43		.51	

+*p* < .10, **p* < .05, ***p* < .01, ****p* < .001

6. Normative Solidarity: Total Score (Obligations to family)

(See Table 6 for details). There were significant differences between the following groups:

- a. Gay nonparents ($M = 32.20$, $SD = 5.75$) had lower normative solidarity compared to
 - Gay parents ($M = 35.73$, $SD = 3.92$, $p < .05$)
 - Heterosexual parents ($M = 35.59$, $SD = 4.11$, $p < .05$);
- b. Heterosexual Nonparents ($M = 35.56$, $SD = 4.63$) had higher normative solidarity compared to
 - Lesbian parents ($M = 32.11$, $SD = 4.60$, $p < .05$);
- c. There was a significant difference at the $p < .001$ level between all six sub groups (i.e., based on couple type);
- d. There were no significant differences between men and women.

7. Normative Solidarity: Filial responsibility to elderly parents

(See Table 6 for details).

There were significant differences between the following groups:

- a. There was a significant difference at the $p < .05$ level between all six sub groups (i.e., based on couple type);
- b. Heterosexual nonparents ($M = 22.29$, $SD = 3.54$), heterosexual parents ($M = 22.47$, $SD = 3.34$) and gay parents ($M = 22.94$, $SD = 2.85$) had the highest mean scores, indicating a higher sense of responsibility towards elderly parents;

There were no significant differences between men and women.

8. Normative Solidarity: Adapted Familism scale

(See Table 6 for details).

There were significant differences between the following groups:

a. Gay nonparents ($M = 11.34$, $SD = 1.81$) had lower normative solidarity (familism) compared to:

- Heterosexual nonparents ($M = 13.27$, $SD = 1.78$, $p < .001$)

- Heterosexual parents ($M = 12.88$, $SD = 1.86$, $p < .01$)

- Gay parents ($M = 12.79$, $SD = 1.71$, $p < .05$);

b. Lesbian nonparents ($M = 12.03$, $SD = 1.79$) had lower normative solidarity (familism) compared to

-Heterosexual nonparents ($M = 13.27$, $SD = 1.78$, $p < .05$);

c. Lesbian parents ($M = 11.60$, $SD = 1.99$) had lower normative solidarity (familism) compared to

- Heterosexual nonparents ($M = 13.27$, $SD = 1.78$, $p < .01$);

d. Heterosexual parents ($M = 12.88$, $SD = 1.86$) and heterosexual nonparents ($M = 13.27$, $SD = 1.78$) had the highest mean scores. Gay nonparents ($M = 11.34$, $SD = 1.81$) and lesbian parents ($M = 11.60$, $SD = 1.99$) had the lowest mean scores;

There was a significant difference at the $p < .001$ level between all six sub-groups (i.e., couple type).

There were no significant differences between men and women in normative solidarity (familism). See Table 6 for a summary of normative solidarity with family.

Table 6

ANOVAs for Normative Solidarity With the Family

	Normative solidarity: Total score		Normative solidarity: Filial responsibilities to elderly parents		Normative solidarity: Familism scale	
	<i>N</i>	<i>M (SD)</i>	<i>N</i>	<i>M (SD)</i>	<i>N</i>	<i>M (SD)</i>
Parenthood status & sexual orientation						
All sample		34.34 (4.78)		21.82 (3.71)	240	12.40 (1.94)
	233					233
Heterosexual Nonparent	48	35.56 (4.63)	48	22.297 (3.54)	48	13.27 (1.78)
Lesbian Nonparent	33	33.94 (4.34)	33	21.91 (3.48)	33	12.03 (1.79)
Gay nonparent	35	32.20 (5.75)	37	20.63 (4.91)	37	11.34 (1.81)
Heterosexual parent	49	35.59 (4.11)	51	22.47 (3.34)	51	12.88 (1.86)
Lesbian parent	35	32.11 (4.60)	38	20.45 (3.44)	38	11.60 (1.99)
Gay parent	33	35.73 (3.92)	33	22.94 (2.85)	33	12.79 (1.71)
<i>F</i> test		5.26***		3.00*		7.11***
Parenthood status						
All sample	236	34.37 (4.77)	244	21.82 (3.70)	244	12.42 (1.95)

	Normative solidarity: Total score		Normative solidarity: Filial responsibilities to elderly parents		Normative solidarity: Familism scale	
	<i>M (SD)</i>	<i>N</i>	<i>M (SD)</i>	<i>N</i>	<i>M (SD)</i>	<i>N</i>
Parent	34.59 (4.46)	118	21.95 (3.38)	123	12.49 (1.93)	118
Nonparent	34.14 (5.07)	118	21.69 (4.02)	121	12.34 (1.98)	118
<i>F</i> test	.52		.29		.36	
Gender						
All sample	34.37 (4.77)	236	21.82 (3.70)		12.42 (1.95)	
Male	34.58 (4.88)	106	22.03 (3.85)		12.43 (1.84)	
Female	34.19 (4.69)	130	21.66 (3.58)		12.41 (2.05)	
<i>F</i> test	.39		.60		.00	

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

To better understand these findings on normative solidarity, further analyses were conducted. First, for the familism measure, all five questions were analyzed using the combination of sexual orientation and parenthood status as the independent variable and additional ANOVAs were run. Two of the five questions showed significant differences between groups. Specifically the items “A person should talk over important life decisions (such as marriage, employment, and residence) with family members before taking action” and “If a person finds that the life-style he/she has chosen runs so against his family’s values that conflict develops, he/she should change” (with a range of response options from 1 = *strongly disagree* through 4 = *strongly agree*), yielded significant differences at the $p < .05$ and $p < .01$ levels respectively.

When this second question was isolated and the ANOVA was run looking at parenthood status and sexual orientation, the difference between groups was highly significant ($p < .001$). In looking at multiple comparisons using the Bonferroni Post-Hoc tests, it revealed many significant differences between heterosexual and gay/lesbian respondents’ answers. The gay and lesbian groups (regardless of parenthood status) had “low” solidarity. In other words, the gay/lesbian respondents were more likely to disagree about changing one’s lifestyle because of family. The heterosexual parents ($M = 1.82$, $SD = .52$) and heterosexual nonparents ($M = 1.92$, $SD = .45$) had the highest mean scores on this question. However, the heterosexual respondents also had mean scores that indicated that they *disagreed* that one should change their lifestyle because of family. The differences between the gay/lesbian groups and the heterosexual groups were about how *strongly* the respondents disagreed with the statement of changing one’s lifestyle due to family. These results seem to make sense given that the gay/lesbian respondents in this

study were already self-identified as being gay/lesbian, were cohabitating with their significant others at the time of completing the survey, and thus were probably already living a life-style that may be in opposition to their families' values. This is an inference, however, because this study did not examine the extent of the respondent's disclosure of their sexual orientation and the reactions of family/friends to that disclosure.

The other question in the familism measure yielding significant between group differences was about talking over important life decisions with family before taking action. It was anticipated that again the heterosexual respondents would have higher mean scores and the gay/lesbian respondents would have lower mean scores based on the notion that the gay/lesbian respondents may rely more on friends than family and may have had to have some separateness from family in order to live their gay/lesbian lifestyle. Surprisingly, gay parents ($M = 3.00$, $SD = .56$) and heterosexual nonparents ($M = 3.00$, $SD = .51$) had the highest mean scores and lesbian nonparents had the next highest mean score ($M = 2.85$, $SD = .62$). Gay nonparents had the lowest mean score ($M = 2.56$, $SD = .65$).

In summary, geographic proximity to parents, emotional support provided and received, and concrete help provided and received were significantly impacted by parenthood status. In these areas, parents had higher levels of solidarity with family than nonparents. Gender also impacted emotional support provided and received, and concrete help received from family, with women having higher solidarity than men in these areas.

Sexual orientation resulted in statistically significant differences in the domain of normative solidarity. In the normative solidarity (total score) measure, heterosexual nonparents scored higher than lesbian parents in this measure with a statistically

significant difference ($p < .05$). In the normative solidarity familism score measure heterosexual parents and nonparents had the highest mean scores indicating higher levels of solidarity with family. Yet in the normative solidarity filial responsibility to elderly parents measure, gay parents had the highest mean score indicating higher solidarity with family. Overall there were more differences based on sexual orientation than based on parenthood status in the areas of normative solidarity (primacy of family over the individual) . This is also confirmed because the ANOVA examining the normative solidarity scores and using parenthood status alone as the independent variable yielded no significant differences.

Earlier it was noted that the sub-groups of respondents were not well matched in areas of demographics and structural components. This is important both for statistics and in regard to the theory being tested. In order to control for that, several steps were taken.

Regressions were run for each solidarity measure that showed significant findings. In addition to the variables tested in the ANOVAs (i.e., gender, sexual orientation and parenthood, and parenthood status), the regressions incorporated the independent variables: age, educational level, and racial/ethnic background. In regard to both educational level and racial/ethnic background, the variables were condensed due to the numbers in certain categories being too low. Specifically, in regard to educational level, in the original questionnaire survey there were five options to choose from: less than high school, high school graduate, specialized technical school graduate, college graduate, and post-college schooling. Since there were no respondents with less than a high school diploma and relatively few in the high school or specialized technical school categories, these three options were condensed into one category—high school graduate.

Thus, there were three options for the regression analysis: high school graduate, college graduate, and post-college (graduate schooling). In regard to racial/ethnic background, in the survey questionnaire there were six options to choose from: White (non-Hispanic), Black or African-American, Latino/Latina, Asian, American Indian, and Other (which then gave space to describe). Due to the low numbers of non-White respondents, the racial/ethnic variable was changed from the six original options to two options: White and non-White.

The variables “number of siblings” and “if respondents’ parents divorced” were also included in the regressions because the theory being tested asserts that structural factors (like family size and parental divorce) can impact on solidarity. Number of children was not included as a variable in the regressions even though number of children certainly does impact family size. This was decided because this study examined parents compared with nonparents.

Overall these regressions (conducted using SPSS software) had the problem of collinearity due to using all three primary variables: gender, parenthood status, and the combination of parenthood status and sexual orientation. The problem with collinearity was the result of these three variables having too much overlap with each other. For example, to be a lesbian you must also be a woman and to be a gay man you must also be a man (so gender is one of the conditions for sexual orientation). To avoid the problem of collinearity, the regressions were run again but instead of using all three primary independent variables, only the variable of the combination of sexual orientation and parenthood status was used. The same additional variables (i.e., age, race, educational level, parental divorce, and number of siblings) were included.

The new set of regressions did not have problems with collinearity and they showed that the independent variable of sexual orientation and parenthood status does have an effect on the dependent variables of intergenerational solidarity. The direction of those relationships echoed the ANOVA results. However, all nine regressions had relatively low R square values, showing a somewhat weak relationship between the independent variables and the dependent variables. This means other variables not included in this study are impacting on solidarity with family. The following specific relationships were also found.

Structural solidarity with mother. The independent variables of age, race, parental divorce, and number of siblings had small size coefficients and did not show significant effects on structural solidarity with mother (geographic proximity to mother). Gender (as an independent variable in an earlier ANOVA) also did not show a significant relationship with geographic proximity to mother.

On the other hand, education level (college graduate) did have a larger coefficient ($r = .54$, $SE = .31$, $p < .10$) but it was not significant at the $p < .05$ level. Compared with respondents who had post-college schooling, respondents with college education only would increase the score of structural solidarity with mother by .54 (i.e., live closer to their mothers). Compared with respondents who had post-college schooling, respondents with less than a college education ($r = -.03$, $SE = .35$) would decrease the score of structural solidarity with mother by .03 but this relationship was not statistically significant. Thus, it can be concluded that the educational level of the respondents may be a confounding variable, with respondents with a college education living closer to their

mothers than those with less than a college education, but it is not a variable that yields statistically significant differences.

The largest size coefficients, though, were all six sub-groups of sexual orientation and parenthood status. In particular, heterosexual nonparents ($r = .97$, $SE = .40$, $p < .05$) and gay nonparents ($r = -1.15$, $SE = .44$, $p < .05$) showed significant relationships with structural solidarity with mother. Compared with heterosexual parents, being a heterosexual nonparent would increase the score of structural solidarity with mother by .97. Conversely, compared with heterosexual parents, being a gay nonparent would decrease the score of structural solidarity with mother by 1.15. Thus, for gay nonparents compared with heterosexual parents there was an inverse relationship with solidarity (i.e., lower solidarity). In other words, gay nonparents lived farther away from their mothers.

The R square value for this regression was .130. This means that although the independent variables have a relationship with structural solidarity, other variables not identified in this study have an impact. See also Table 7 for details.

Structural solidarity with father. The independent variables of age, race, and number of siblings all had small size coefficients and did not show significant effects on structural solidarity with father. Gender (as an independent variable in an earlier ANOVA) also did not show a significant relationship with geographic proximity to father.

Similar to structural solidarity with mother, education level (college graduate) had a higher coefficient ($r = .71$, $SE = .37$, $p < .10$). Compared with respondents who had post-college schooling, respondents with college education only would increase the score of structural solidarity with father by .71. Compared with respondents who had

post-college schooling, respondents with less than a college education ($r = .41$, $SE = .43$) would increase the score of structural solidarity with father by .41. The variable for less than college education showed a smaller size coefficient than college graduate respondents and neither variable was statistically significant in the regression.

Educational level may be a confounding variable which impacts geographic proximity with father, with college graduates living closer to their fathers than those with less than a college education, but it is not a statistically significant variable.

In addition to educational level, the variable of parental divorce impacted on geographic proximity with father. Respondents whose parents did not divorce ($r = .76$, $SE = .34$, $p < .05$), compared with respondents whose parents did divorce, would increase the score of structural solidarity with father by .76 (i.e., would live closer to their fathers). Thus, parental divorce is also a confounding variable which impacts geographic proximity with father, and it is statistically significant at the $p < .05$ level. This finding affirms the Solidarity Model's contention that parental divorce can impact on structural solidarity.

Three of the six sub-groups of sexual orientation and parenthood status had the highest coefficients and significant relationships. Specifically, lesbian nonparents ($r = 1.25$, $SE = .59$, $p < .05$), gay parents ($r = 1.40$, $SE = .59$, $p < .05$), and heterosexual parents ($r = 1.69$, $SE = .46$, $p < .001$) had the highest size coefficients. Compared with heterosexual nonparents, lesbian nonparents would increase the score of structural solidarity with father by 1.25, gay parents would increase the score of structural solidarity with father by 1.40, and heterosexual parents would increase the score of structural solidarity by 1.69.

The *R* square for this regression was .190. This means that although the variables have a relationship with geographic proximity to father, other variables have an impact that were not identified in this study.

(See also Table 7 for details).

Table 7

Regression: Structural Solidarity With the Mother and Father

	Solidarity with mother <i>r</i>	Solidarity with mother <i>SE</i>	Solidarity with mother <i>p</i>	Solidarity with father <i>r</i>	Solidarity with father <i>SE</i>	Solidarity with father <i>p</i>
Age	-.01	.02		-.01	.02	
Number of siblings	-.01	.08		-.04	.09	
Less than college	-.03	.35		.41	.43	
College graduate	.54	.31	+	.71	.37	+
Post graduate	---	---		---	---	
Parents divorced	---	---		---	---	
Parents did not divorce	-.26	.31		.76	.34	*
Non-White	.18	.34		.56	.41	
White	---	---		---	---	
Heterosexual Nonparent	.97	.40	*	---	---	

	Solidarity with mother <i>r</i>	Solidarity with mother <i>SE</i>	Solidarity with mother <i>p</i>	Solidarity with father <i>r</i>	Solidarity with father <i>SE</i>	Solidarity with father <i>p</i>
Lesbian nonparent	-.367	.449		1.25	.59	*
Gay nonparent	-1.15	.44	*	.15	.53	
Lesbian parent	-.66	.44		.71	.53	
Gay parent	.63	.47		1.40	.59	*
Heterosexual parent	---	---		1.69	.46	***
Constant	4.60	.76	***	2.73	.93	**
<i>R</i> square	.130			.190		

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Functional-instrumental solidarity: Received from family. The independent variables number of siblings, educational level, parental divorce, and race had small size coefficients and did not show significant relationships with regard to help received from family. Age did have a significant effect ($r = -.11$, $SE = .02$, $p < .001$). The coefficient was negative in value, and this shows an inverse relationship between age and help received from family. In other words, as age increases, extent of help received from family decreases.

The variables with the largest size coefficients again were from the six sub-groups of the variable of sexual orientation and parenthood status. Gay non-parents ($r = -1.63$, $SE = .69$, $p < .05$) and heterosexual parents ($r = 2.00$, $SE = .63$, $p < .01$) had the largest size coefficients and showed significant relationships. Compared with heterosexual nonparents, gay nonparents would decrease the score of help received from family by 1.63 and heterosexual parents would increase the score of help received from family by 2.00.

The variable of gender, which was tested by running an earlier ANOVA, had a significant relationship with help received from family. Specifically, women had statistically higher scores than men. Therefore, women received more help from family than men. Thus, the finding that gay nonparents received the least help from family and heterosexual parents received the most help from family could in part be a function of gender, not just parenthood status and sexual orientation. The R square for this regression was .216. This shows that the variables for this regression do have a relationship to help received from family, but other variables not included in this regression also have an impact. One of those variables is probably gender (See also Table 8 for details).

Table 8

Regression: Functional–Instrumental Solidarity With the Family

	Help received from family	Help received from family	Help received from family	Help provided to family	Help provided to family	Help provided to family
	<i>r</i>	<i>SE</i>	<i>p</i>	<i>r</i>	<i>SE</i>	<i>p</i>
Age	-.11	.02	***	-.12	.03	***
Number of siblings	.07	.12		.13	.18	
Less than college	-.16	.57		.48	.89	
College graduate	---	---		---	---	
Post graduate	-.10	.47		.67	.73	
Parents divorced	---	---		---	---	
Parents did not divorce	-.18	.47		.58	.73	
Non-White	.15	.59		-.99	.89	
White	---	---		---	---	

	Help received from family <i>r</i>	Help received from family <i>SE</i>	Help received from family <i>p</i>	Help provided to family <i>r</i>	Help provided to family <i>SE</i>	Help provided to family <i>p</i>
Heterosexual nonparent	---	---		---	---	
Lesbian nonparent	.40	.71		1.47	1.14	
Gay nonparent	-1.63	.69	*	-.80	1.07	
Lesbian parent	.41	.70		4.45	1.08	***
Gay parent	-.04	.72		4.60	1.11	***
Heterosexual parent	2.00	.63	**	6.46	.98	***
Constant	13.42	1.03	***	14.22	1.61	***
<i>R</i> square	.216			.283		

+*p* < .10, **p* < .05, ***p* < .01, ****p* < .001

Functional–instrumental solidarity: Provided to family (Concrete help provided to family). The results regarding help provided to family were very similar to the results regarding help received from family. The independent variables of number of siblings, educational level, parental divorce, and race had small size coefficients. The variable of gender (analyzed by running an earlier ANOVA) did not have a statistically significant relationship with help provided to family. Again age ($r = -.12$, $SE = .03$, $p < .001$) had a small size coefficient and a small standard error and it had a highly significant relationship with help provided to family. Similarly to help received from family, age has an inverse relationship with help provided to family. As age increases the amount of help provided to family decreases.

The variables with the largest size coefficients were lesbian parents ($r = 4.45$, $SE = 1.08$, $p < .001$), gay parents ($r = 4.60$, $SE = 1.11$, $p < .001$), and heterosexual parents ($r = 6.46$, $SE = .98$, $p < .001$). All three also showed a highly significant relationship with help provided to family. Compared with heterosexual nonparents, lesbian parents would increase the score of help provided to family by 4.45, gay parents would increase the score of help provided by 4.60, and heterosexual parents would increase the score of help provided to family by 6.46. Since the coefficients were positive numbers, it shows that these three groups of parents have higher solidarity in regard to help provided to family. In other words, parents provided more help to family than the nonparent groups. The R square for this regression was .283. This is another low value for R square, which suggests there are other variables not included in this study that impact help provided to family (see also Table 8 for details).

Functional–emotional solidarity: Received from family (Emotional support received from family). Functional–emotional solidarity had very similar findings as functional–instrumental solidarity. The variables of number of siblings, educational level, parental divorce, and race had low size coefficients and no significant results. Age again showed an inverse significant relationship ($r = -.12$, $SE = .02$, $p < .001$). Thus, as age increases the amount of emotional support from family decreases. Also, emotional support received from family was impacted by the variable gender. Specifically, the ANOVA run earlier showed that women received more emotional support from their family than men.

In the regression, the variables with the largest size coefficients were gay non parents ($r = -2.28$, $SE = .74$, $p < .01$) and heterosexual parents ($r = 2.61$, $SE = .68$, $p < .001$). Compared with heterosexual nonparents, gay nonparents would decrease the score of support received from family by 2.28 and heterosexual parents would increase the score by 2.61. This confirms that the gay nonparents receive the least emotional support from family and the heterosexual parents receive the most emotional support from family. However, because gender impacts help received, with women receiving more help than men, the differences between gay nonparents receiving the least help and heterosexual parents receiving the most help could be a result of gender as much as a function of sexual orientation.

The R square for this regression is .265. This too is a low R square value and means there are other variables (including gender) which impact support received but were not included in the regression analysis. (See Table 9 for details).

Table 9

Regression: Functional–Emotional Solidarity With the Family

	Support received from family	Support received from family	Support received from family	Support provided to family	Support provided to family	Support provided to family
	<i>r</i>	<i>SE</i>	<i>p</i>	<i>r</i>	<i>SE</i>	<i>p</i>
Age	-.12	.02	***	-.09	.02	***
Number of siblings	.17	.13		.08	.12	
Less than college	-.21	.61		-.44	.61	
College graduate	---	---		---	---	
Post graduate	.13	.50		-.04	.50	
Parents divorced	---	---		---	---	
Parents did not divorce	.33	.50		.62	.49	
Non-White	.16	.58		.35	.57	
White	---	---		---	---	
Heterosexual nonparent	---	---		---	---	

	Support received from family <i>r</i>	Support received from family <i>SE</i>	Support received from family <i>p</i>	Support provided to family <i>r</i>	Support provided to family <i>SE</i>	Support provided to family <i>p</i>
Lesbian nonparent	-.09	.76		.02	.76	
Gay nonparent	-2.28	.74	**	-1.23	.73	+
Lesbian parent	.31	.74		1.76	.74	*
Gay parent	1.09	.76		1.89	.76	*
Heterosexual parent	2.61	.68	***	4.05	.67	***
Constant	13.90	1.10	***	12.70	1.09	***
<i>R</i> square	.265			.271		

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Functional–emotional solidarity: Provided to family (Emotional support provided to family). In keeping with the other functional solidarity measures, number of siblings, educational level, parental divorce, and race again had small size coefficients and no significant results. Age again showed an inverse significant relationship with providing emotional support to family ($r = -.09$, $SE = .02$, $p < .001$). Thus as age increases, amount of help provided to family decreases.

Gender also impacted emotional support provided to family. The ANOVA run earlier, with gender as the independent variable and emotional support provided to family as the dependent variable, showed that women provided more emotional support to family than men.

In the regression, the variables with the largest size coefficients were heterosexual parents ($r = 4.05$, $SE = .67$, $p < .001$), gay parents ($r = 1.89$, $SE = .76$, $p < .05$), lesbian parents ($r = 1.76$, $SE = .74$, $p < .05$). All had significant results and all had positive value coefficients showing higher degree of emotional support provided to family. Compared with heterosexual nonparents, heterosexual parents would increase the score of support provided to family by 4.05, gay parents would increase the score of support provided to family by 1.89, and lesbian parents would increase the score of support received by 1.76. Although gender was shown to impact emotional support provided, with women providing more emotional support than men, gay male parents provided more support than lesbian nonparents. This shows that the variable of parenthood was also a factor with emotional support provided.

The R square for this regression was .271. The R square shows that although the independent variables in this study have a relationship with emotional support

provided to family, other variables must also impact that were not included in this study. (Go back to Table 9 for regression summary details).

Normative solidarity with family: Total score (primacy of family and responsibilities to elderly parents combined score). The variables age, number of siblings, educational level, and parental divorce had small coefficient sizes and no significant results. The variable of race, non-White however, did have a significant relationship ($r = -.68$, $SE = .32$, $p < .05$). non-White respondents, compared with White respondents, would decrease the score of normative solidarity with family by .68. This variable had a negative value coefficient which shows an inverse relationship with normative solidarity. In other words, the non-White respondents had lower solidarity with family.

In the regression, the variables with the highest coefficients and having significant relationships were lesbian parents ($r = -1.48$, $SE = .42$, $p < .01$), lesbian nonparents ($r = -1.10$, $SE = .42$, $p < .05$), and gay nonparents ($r = -1.75$, $SE = .41$, $p < .001$). All had negative value coefficients so they all showed an inverse relationship in regard to normative solidarity. In other words, these groups had lower solidarity. Compared with heterosexual nonparents, lesbian parents would decrease the normative solidarity score by 1.48, lesbian nonparents would decrease the normative solidarity score by 1.10, and gay nonparents would decrease the normative solidarity score by 1.75. The regression had an R square value of .174. This is a low R square value, which means other variables not included in this analysis impact on normative solidarity (See Table 10 for details).

Table 10

Regression: Normative Solidarity With the Family

	Total score <i>r</i>	Total score <i>SE</i>	Total score <i>p</i>	Elder care <i>r</i>	Elder care <i>SE</i>	Elder care <i>p</i>	Fami- lism <i>r</i>	Fami- lism <i>SE</i>	Fami- lism <i>p</i>
Age	-.01	.01		-.03	.02		-.01	.01	
Number of siblings	-.07	.07		.01	.14		-.07	.07	
Less than college	.21	.34		-.18	.68		.14	.33	
College graduate	---	---		---	---		-.07	.28	
Post grad	.07	.28		-.28	.56		---	---	
Parents divorced	.38	.28		.72	.56		.38	.28	
Parents did not divorce	---	---		---	---		---	---	
Non-White	-.68	.32	*	-.08	.64		-.68	.32	*
White	---	---		---	---		---	---	
Heterosexual nonparent	---	---		---	---		-.20	.38	
Lesbian nonparent	-1.01	.42	*	-.16	.85		-.81	.41	+

	Total score <i>r</i>	Total score <i>SE</i>	Total score <i>p</i>	Elder care <i>r</i>	Elder care <i>SE</i>	Elder care <i>p</i>	Fami- lism <i>r</i>	Fami- lism <i>SE</i>	Fami- lism <i>p</i>
Gay nonparent	-1.75	.41	***	-1.51	.82	+	-1.55	.41	***
Lesbian parent	-1.48	.42	**	-1.59	.83	+	-1.28	.41	
Gay parent	-.23	.42		.88	.85		-.03	.41	
Heterosexual parent	-.20	.38		.43	.75		---	---	
Constant	13.95	.61	***	23.12	1.22	***	14.02	.64	***
<i>R</i> square	.174			.075			.174		

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Normative solidarity: Filial obligations to elderly parents. None of the independent variables had significant relationships at the $p < .05$ level with this dependent variable. The variables with the largest size coefficients were all from the sexual orientation and parenthood status variable. Gay nonparents ($r = -1.51$, $SE = .82$, $p < .10$) and lesbian parents ($r = -1.56$, $SE = .83$, $p < .10$) had the largest size coefficients and the best levels of significance (although neither were significant at the $p < .05$ level). Both had negative R values, showing an inverse relationship. In other words, gay nonparents and lesbian parents were the least inclined to feel obligation to help elderly parents. Compared with heterosexual nonparents, gay nonparents would decrease the score of normative solidarity (filial obligations) by 1.51 and lesbian parents would decrease the score of normative solidarity (filial obligations) by 1.56.

The regression had an R square value of .075 which is a very low value, meaning other variables impact a person's sense of responsibility to elderly parents than the variables examined in this analysis. See also Table 10 above for details.

Normative solidarity: Adaptation of familism scale (primacy of family over the individual). The variables age, number of siblings, educational level, and parental divorce all had small size coefficients and no significant relationships. Race, non-White ($r = -.68$, $SE = .32$, $p < .05$) had a significant relationship. This variable had a negative value coefficient which shows an inverse relationship with familism. Compared with White respondents, non-White respondents would decrease the score of normative solidarity (familism) by .68. In other words, non-White respondents had lower solidarity in regard to familism.

In the regression, the variables with the largest size coefficients were lesbian parents ($r = -1.28$, $SE = .41$), gay nonparents ($r = -1.55$, $SE = .41$, $p < .001$), and lesbian nonparents ($r = -.81$, $SE = .41$, $p < .10$). All had negative value coefficients so this showed an inverse relationship with solidarity (i.e., that these groups had lower solidarity and thus were less inclined to place family needs over the individual). The lesbian parents variable did not have a significant relationship at the $p < .10$ level and the lesbian nonparents variable did not have a significant relationship at the $p < .05$ level. Compared with heterosexual parents, lesbian parents would decrease the score of normative solidarity (familism) by 1.28, gay nonparents would decrease the score of normative solidarity (familism) by 1.55, and lesbian nonparents would decrease the score of normative solidarity (familism) by .81.

The R square for this regression was .174. As with the other regressions, this value is low and shows that other variables not included in this analysis must impact on one's belief that family needs are primary. See also Table 10 above for details.

Summary

In all nine regressions, the variable of sexual orientation and parenthood status had the largest coefficients and the most effect on the solidarity measures. Structural solidarity (geographic proximity) to mother and father were both somewhat impacted by educational level. If the respondent was a college graduate, he/she lived closer to parents than those with less or those with more education. The variable parental divorce also impacted on geographic proximity to father. If a respondent's parents were divorced, the respondent lived farther away from his/her father.

Functional solidarity (emotional and instrumental) provided to family and received by family was impacted by age of the respondent. In all four measures, as age increased, amount of help received or provided to family decreased. Gender, based on earlier ANOVAs run, also impacted help received and emotional support received and provided. If a respondent was female she was more apt to receive concrete help and emotional support from family and was more likely to provide emotional support to family.

Normative solidarity (obligations to family and primacy of family over the individual) was impacted by race in the familism score and thus in the total score as well. The familism score is the value/belief of primacy of family over individual needs. In this measure, non-Whites had lower solidarity.

The Findings Regarding Solidarity With Friends

Prior to reviewing the results, the study hypotheses regarding solidarity with friends were as follows.

1. In the areas of “Functional–Emotional Solidarity” and “Functional–Instrumental Solidarity” gay/lesbian parents and nonparents, compared with heterosexual parents and nonparents, will rely more on friends (and thus have higher solidarity scores with friends/neighbors).
2. In the areas of “Functional–Emotional Solidarity” and “Functional–Instrumental Solidarity” gay/lesbian nonparents compared with gay/lesbian parents will score higher and thus have stronger solidarity with friends/neighbors. In other words,

gay/lesbian nonparents will be more connected with friends (both helping and receiving help from friends) than the gay/lesbian parents.

A Review of the Statistics

Overall the findings were mixed. See Tables 11 and 12 for details.

In summary, nonparents had higher solidarity with friends/neighbors than parents. The non parents were more likely to provide and receive emotional support and concrete task help to friends/neighbors than the parents groups. This supports part of the second hypothesis. In fact lesbian nonparents were the group that had the highest solidarity with friends/neighbors and this supports a portion of both the first and second hypotheses.

When looking at the six sub-groups based on parenthood and sexual orientation between group significant differences emerged in (a) Functional–Emotional Solidarity received from friends and neighbors ($p < .01$, see Table 11 for details) and (b) Functional–Instrumental Solidarity received from friends and neighbors ($p < .01$, see Table 12 for details).

However, when looking at Post Hoc Tests Multiple Comparisons, only four specific significant relationships occurred and all four involved lesbian nonparents having statistically higher mean scores than some other groups.

In regard to functional–emotional solidarity (emotional support received) from friends, lesbian nonparents ($M = 2.73$, $SD = .63$) had higher solidarity than gay parents ($M = 2.00$, $SD = 1.06$, $p < .05$). In regard to functional–emotional solidarity (emotional support provided) to friends, lesbian nonparents ($M = 2.82$, $SD = .392$) had higher solidarity than gay parents ($M = 2.06$, $SD = .90$, $p < .01$). In regard to functional–

instrumental solidarity (concrete task help received) from friends, lesbian nonparents ($M = 1.85$, $SD = 1.12$) had higher solidarity than gay parents ($M = .88$, $SD = .78$, $p < .01$), and lesbian nonparents ($M = 1.85$, $SD = 1.12$) had higher solidarity than heterosexual parents ($M = 1.14$, $p < .05$). Functional–instrumental solidarity provided to friends and neighbors showed a total between groups difference ($p < .10$) and no individual comparisons among the six sub-groups showed significant differences. See Table 11 for details.

When gender was analyzed, statistically significant results emerged in three of the four ANOVAs. In all four domains of functional solidarity with friends, women were more inclined than men to give concrete help, receive concrete help, give emotional support, and receive emotional support from friends.

1. Women ($M = 1.40$, $SD = 1.00$) were more likely to receive concrete help from friends compared to men ($M = 1.11$, $SD = .97$, $p < .05$).
2. Women ($M = 2.51$, $SD = .84$) were more likely to receive emotional support from friends compared to men ($M = 2.15$, $SD = 1.05$, $p < .01$).
3. Women ($M = 2.52$, $SD = .80$) were more likely to provide emotional support to friends compared to men ($M = 2.27$, $SD = .95$, $p < .05$).
4. Women ($M = 1.53$, $SD = .97$) were more inclined to provide concrete help to friends compared to men ($M = 1.44$, $SD = 1.29$) but this was not a statistically significant result.

See Tables 11 and 12 for details.

Table 11

ANOVAs of Functional–Emotional Solidarity (Emotional Support): Friends

	Functional–emotional solidarity: Received from friends <i>M (SD)</i>	<i>N</i>	Functional–emotional solidarity: Provided to friends <i>M (SD)</i>	<i>N</i>
Parenthood status				
All sample	2.35 (.96)	245	2.41 (.88)	245
Parent	2.22 (1.00)	124	2.26 (.95)	124
Nonparent	2.48 (.90)	121	2.56 (.76)	121
<i>F</i> test	4.64*		7.57**	
Parenthood status & sexual orientation				
All sample	2.36 (.95)	241	2.41 (.87)	241
Heterosexual nonparent	2.50 (.90)	48	2.46 (.82)	48
Lesbian nonparent	2.73 (.63)	33	2.82 (.39)	33
Gay nonparent	2.24 (1.04)	37	2.43 (.90)	37
Heterosexual parent	2.22 (.99)	51	2.35 (.93)	51
Lesbian parent	2.46 (.88)	39	2.36 (.96)	39
Gay parent	2.00 (1.06)	33	2.06 (.90)	33
<i>F</i> test	2.69*		2.74*	

	Functional–emotional solidarity: Received from friends <i>M (SD)</i>	<i>N</i>	Functional–emotional solidarity: Provided to friends <i>M (SD)</i>	<i>N</i>
Gender				
All sample	2.35 (.96)	245	2.41 (.88)	245
Male	2.15 (1.05)	109	2.27 (.95)	109
Female	2.51 (.84)	136	2.52 (.80)	136
F test	8.86**		5.26*	

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Table 12

ANOVAs of Functional–Instrumental Solidarity (Concrete Help): Friends

	Functional–instrumental solidarity: Provided to friends <i>M (SD)</i>	<i>N</i>	Functional–instrumental solidarity: Received from friends <i>M (SD)</i>	<i>N</i>
Parenthood status				
All sample	1.49 (1.12)	242	1.27 (.99)	245
Parent	1.34 (.98)	124	1.13 (.94)	124
Nonparent	1.64 (1.24)	118	1.41 (1.03)	121
<i>F</i> test	4.53*		5.12*	
Parenthood status & sexual orientation				
All sample	1.50 (1.13)	238	1.28 (.99)	241
Heterosexual nonparent	1.40 (.96)	48	1.25 (.89)	48
Lesbian nonparent	1.77 (1.19)	30	1.85 (1.12)	33
Gay nonparent	1.89 (1.58)	37	1.30 (1.05)	37
Heterosexual parent	1.37 (1.06)	51	1.14 (.92)	51
Lesbian parent	1.44 (.85)	39	1.36 (1.04)	39
Gay parent	1.21 (.99)	33	.88 (.78)	33
<i>F</i> test	1.93+		3.71**	

	Functional–instrumental solidarity: Provided to friends		Functional–instrumental solidarity: Received from friends	
	<i>M (SD)</i>	<i>N</i>	<i>M (SD)</i>	<i>N</i>
Gender				
All sample	1.49 (1.12)	242	1.27 (.99)	245
Male	1.44 (1.29)	109	1.11 (.97)	109
Female	1.53 (.97)	133	1.40 (1.00)	136
<i>F</i> test	.35		5.15*	

+*p* < .10, **p* < .05, ***p* < .01, ****p* < .001

In summary, when comparing two groups, parents and nonparents, nonparents had higher solidarity with friends than parents in all four measures. In regard to instrumental help received from friends, nonparents ($M = 1.4$, $SD = 1.03$) were more likely to receive help from friends than parents ($M = 1.13$, $SD = .94$, $p < .05$). Nonparents ($M = 1.64$, $SD = 1.24$) also had higher solidarity regarding help provided to friends than parents ($M = 1.34$, $SD = .98$, $p < .05$). Nonparents, therefore, were more likely to receive concrete help from friends and provide concrete help to friends than parents.

In regard to emotional support provided to friends, nonparents ($M = 2.56$, $SD = .76$) again had higher solidarity than parents ($M = 2.26$, $SD = .95$, $p < .01$). Nonparents ($M = 2.48$, $SD = .90$) also received more emotional support from friends than parents ($M = 2.22$, $SD = 1.00$, $p < .05$).

Lesbian nonparents had statistically significant higher solidarity scores than gay parents regarding emotional support received, emotional support provided, and concrete help received from friends. However, women had statistically higher solidarity than men in the same three domains of support and help. Thus, the differences between lesbian nonparents and gay parents may be in part a function of gender.

Because the sub-groups of respondents were not well matched in areas of demographics and structural components four regressions were run. Specifically, the functional solidarity dimensions with friends were the dependent variables. Gender, parenthood status, and the combination of parenthood status and sexual orientation were three of the independent variables. The demographic variables of age, educational level, and race were also included as independent variables. As was done for

the regressions with solidarity with family, the variables of educational level and race/ethnicity were condensed so that educational level had three options (high school graduate, college graduate, and post-college schooling), and race/ethnicity had two options (White and non-White). This was done due to the lack of diversity among the groups and the low numbers of certain categories.

Other independent variables in the regressions were number of siblings and parental divorce. They were included in the regressions because the theory being tested asserts that structural factors (like family size and parental divorce) can impact on solidarity. Number of children was not included as a variable in the regressions even though number of children certainly does impact family size. This was decided because this study examined parents compared with nonparents.

As happened with the original regressions with solidarity with family, there was the problem of collinearity due to using the three primary independent variables of gender, parenthood status, and the combination of parenthood status and gender. There was too much overlap with these three groups. Thus, the regressions were re-run using only the primary independent variable of the combination of parenthood status and sexual orientation. The new set of regressions did not have the same collinearity problem. However, due to the overall small sample size for this study the regression estimates may not be reliable, especially with so many independent variables. Thus, caution must still be exercised when drawing conclusions.

Functional-instrumental solidarity: Received from friends/neighbors. The variables age, number of siblings, parental divorce, and race had small size

coefficients and no significant relationships. The variable of less than a college education had a larger coefficient size and a significant relationship ($r = .43, SE = .18, p < .05$). Compared with college graduates, respondents with less than a college education would increase the score of help received from friends by .43. The coefficient was larger for “less than college” than for “post-college,” showing that the respondents with less education received more concrete help from their friends.

In the regression, lesbian nonparents had the largest size coefficient and the relationship was highly significant ($r = .66, SE = .22, p < .01$). Compared with heterosexual nonparents, lesbian nonparents would increase the score of help received from friends by .66. This coincides with the ANOVA results showing lesbian nonparents having the strongest solidarity in this area. However, because gender has a significant relationship with help received, the lesbian nonparents could have the highest scores due to gender.

The R square for this regression was .114. This is a low R square value, so other variables (including gender) impact help received that were not included in this regression. See Table 13 for details.

Table 13

Regression: Functional–Instrumental Solidarity With Friends and Neighbors

	Help received from friends	Help received from friends	Help received from friends	Help provided to friends	Help provided to friends	Help provided to friends
	<i>r</i>	<i>SE</i>	<i>p</i>	<i>r</i>	<i>SE</i>	<i>p</i>
Age	-.01	.01		-.01	.01	
Number of siblings	-.02	.04		.01	.04	
Less than college	.43	.18	*	.27	.21	
College graduate	---	---		---	---	
Post graduate	.12	.15		.20	.17	
Parents divorced	.24	.15		.15	.17	
Parents did not divorce	---	---		---	---	
Non-White	.19	.17		.13	.20	
White	---	---		---	---	
Heterosexual nonparent	---	---		---	---	

	Help received from friends	Help received from friends	Help received from friends	Help provided to friends	Help provided to friends	Help provided to friends
	<i>r</i>	<i>SE</i>	<i>p</i>	<i>r</i>	<i>SE</i>	<i>p</i>
Lesbian nonparent	.66	.22	**	.37	.27	
Gay nonparent	.10	.21		.53	.25	*
Lesbian parent	.25	.22		.12	.25	
Gay parent	-.30	.22		-.14	.26	
Heterosexual parent	-.06	.20		.01	.23	
Constant	1.07	.32	**	1.25	.38	**
<i>R</i> square	.114			.055		

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Functional–instrumental solidarity: Provided to friends (concrete help provided to friends). Age, Number of siblings, parental divorce, race, and educational level all had small size coefficients and none had significant relationships with help provided to friends/neighbors. Gender also did not have a significant relationship, which was determined by running an earlier ANOVA.

The only variable with a significant relationship with help provided to friends/neighbors was the variable gay nonparents ($r = .53$, $SE = .25$, $p < .05$). Compared with heterosexual nonparents, gay nonparents would increase the score of help provided to friends by .53.

The R square value for this regression was .055. This is a very low R square value and means that there are other variables not included in this analysis that impact on help provided to friends. (See also Table 13 above for details).

Functional–emotional solidarity: Received from friends/neighbors (emotional support received from friends). Number of siblings, parental divorce, and educational level all had small size coefficients and no significant relationships. Age ($r = -.01$, $SE = .01$, $p < .05$) and race, non-White ($r = .33$, $SE = .16$, $p < .05$) did have significant relationships with support received from friends/neighbors.

Age, which is a ratio variable, had a negative value coefficient, which means it has an inverse relationship with support received. In other words, the older the respondent, the less support received from friends/neighbors. Race, non-White had a positive value coefficient at a significant level. Compared with White respondents, non-White respondents would increase the score of support received from friends by .33. This

indicates that race impacted support received and non-White respondents received more emotional support from friends.

In the regression, gay parents had the largest size coefficient ($r = -.48$, $SE = .21$, $p < .05$). Since the coefficient had a negative value, it shows an inverse relationship with support received from friends/neighbors. Compared with heterosexual nonparents, gay parents would decrease the score of support received from friends by .48. In other words, gay parents would be less likely to receive support from friends/neighbors.

The R square value for this regression was .099. This too is a very low R square and shows that there are other variables not included in this analysis that impact emotional support received from friends (see Table 14 for details).

Table 14

Regression: Functional–Emotional Solidarity With Friends and Neighbors

	Support received from friends	Support received from friends	Support received from friends	Support provided to friends	Support provided to friends	Support provided to friends
	<i>r</i>	<i>SE</i>	<i>p</i>	<i>r</i>	<i>SE</i>	<i>p</i>
Age	-.01	.01	*	-.01	.01	*
Number of siblings	.01	.04		-.04	.03	
Less than college	-.02	.17		-.18	.16	
College graduate	---	---		---	---	
Post graduate	.03	.14		.08	.13	
Parents divorced	-.13	.14		-.01	.13	
Parents did not divorce	---	---		---	---	
Non-White	.33	.16	*	.28	.15	+
White	---	---		---	---	
Heterosexual nonparent	---	---		---	---	

	Support received from friends <i>r</i>	Support received from friends <i>SE</i>	Support received from friends <i>p</i>	Support provided to friends <i>r</i>	Support provided to friends <i>SE</i>	Support provided to friends <i>p</i>
Lesbian nonparent	.22	.21		.38	.19	+
Gay nonparent	-.22	.20		.03	.19	
Lesbian parent	.02	.21		-.08	.19	
Gay parent	-.48	.21	*	-.37	.19	+
Heterosexual parent	-.25	.19		-.06	.17	
Constant	2.90	.30	***	2.93	.28	***
<i>R</i> square	.099			.106		

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

Functional–emotional solidarity: Provided to friends/neighbors (emotional support provided to friends). Number of siblings, educational level, and parental divorce had small size coefficients and showed no significant relationships with support provided to friends/neighbors. Age ($r = -.01$, $SE = .01$, $p < .05$) and race, non-White ($r = .28$, $SE = .15$, $p < .10$) showed some relationships to support provided. Race was not significant at the $p < .05$ level. It showed, though, that compared with White respondents, non-White respondents would increase the score of support provided to friends by .28.

Age, though, was significant at the $p < .05$ level and age had the same inverse relationship with support provided as it did with support received. In other words, as age increases, the amount of emotional support provided to friends/neighbors decreases.

In the regression, lesbian nonparents ($r = .38$, $SE = .19$, $p < .10$) and gay parents ($r = -.37$, $SE = .19$, $p < .10$) had the largest coefficients but neither were significant at the $p < .05$ level. Compared with heterosexual nonparents, lesbian nonparents would increase the score of support provided to friends by .38 and gay parents would decrease the score of support provided to friends by .37. Thus lesbian nonparents reported providing more emotional support to friends and gay parents reported providing the least emotional support to friends. It could be that gender was a factor in addition to parenthood status and sexual orientation in regard to providing emotional support to friends.

The R square value for this regression was .106. This is a low R square value. Thus, different variables (including gender) have an impact on this measure but were not included in the regression analysis. (See also Table 14 above for details).

Summary

In the regression analysis, educational level had an effect on functional–instrumental solidarity received from friends but not at a statistically significant level. Lesbian nonparents had the strongest relationship to help received. Gender, not included in the regression but analyzed by running an earlier ANOVA, had a significant ($p < .05$) relationship with help received. Thus, lesbian nonparents could have the highest solidarity with friends due to three factors: gender (being female), parenthood status (not having children), and sexual orientation (being lesbian).

In regard to help provided to friends, only gay nonparents parents had a significant relationship, and it showed they have a higher solidarity level with friends. Age had a significant relationship with functional–emotional solidarity (emotional support provided to friends and received from friends). In both cases, as age increased, level of support decreased.

Race also had a relationship with emotional support (provided to friends and received from friends), but it was not significant at the $p < .05$ level. Gender, not included in the regressions, did have significant relationships shown by earlier ANOVAs that were run. Women reported receiving more emotional support from friends than men (significant at the $p < .01$ level) and providing more emotional support to friends than men (significant at the $p < .05$ level).

All four of the regressions had low R square values. Thus, the variables used in these analyses were not telling the whole story. Other variables not included must be impacting the scores of the solidarity measures. However, because the R squares had a

value other than zero, it does show that some relationships exist between the variables used in these analyses and the scores of the solidarity measures.

Other Findings

Childcare Received From Family and Friends

Comparisons were made between the three types of parent groups (i.e., gay parents, lesbian parents, and heterosexual parents) regarding childcare help received from family and childcare help received from friends. ANOVAs were run with childcare received from family (or from friends) as the dependent variables. Significant differences were found regarding childcare received from family, but no significant differences were found regarding childcare received from friends.

Childcare received from family showed a significant between groups difference ($p < .05$). Descriptives and Post Hoc tests with multiple comparisons revealed that heterosexual parents received the most childcare help from family ($M = 2.24$, $SD = 1.50$) and this was significantly different than lesbian parents ($M = 1.38$, $SD = 1.25$, $p < .05$). Gay parents received more help than lesbian parents but less help than heterosexual parents ($M = 1.91$, $SD = 1.67$) but it was not significantly different than either.

Emotional Support and Concrete Help Received from Paid Services

Although support from paid services was not a primary variable of this study, questions in the functional–emotional (emotional support) domain and the functional–

instrumental (concrete help) domain included the response option category of receiving help from paid services. Comparisons were made between the six types of couple groups to see if there were any significant differences between the groups. ANOVAs were run with emotional support received from paid help and concrete help received from paid help as the dependent variables. Significant differences were found between the groups in the area of emotional support received from paid services (e.g., from psychotherapists, psychiatrists) at the $p < .05$ level. Lesbian nonparents ($M = .64, SD = .96$) and gay nonparents ($M = .60, SD = .93$) received the most emotional support from paid services. Lesbian parents ($M = .46, SD = .79$), heterosexual nonparents ($M = .31, SD = .75$), and heterosexual parents ($M = .28, SD = .57$) received less emotional support from paid services than lesbian nonparents and gay nonparents. Gay parents ($M = .15, SD = .44$) received the least emotional support from paid services. If gay parents were not included, the lesbian and gay groups received the most emotional support from paid services and the heterosexual groups received the least emotional support from paid services. The gay parents group was again different in regard to sources of support than their gay/lesbian counterparts.

In the domain of receiving concrete help from paid services (e.g., help with household chores, transportation/shopping), significant differences were also found between the six groups at the $p < .05$ level. The four gay/lesbian groups obtained the most concrete services from paid help. Specifically, in descending order from most help to least help, the lesbian nonparents ($M = .82, SD = .95$), gay parents ($M = .70, SD = 1.02$), gay nonparents ($M = .68, SD = .97$), and lesbian parents ($M = .59, SD = .72$) obtained the most concrete help from paid services and heterosexual parents ($M = .47,$

$SD = .90$) and heterosexual nonparents ($M = .23$, $SD = .59$) obtained the least amount of concrete help from paid services. Thus, there were differences between the groups based on sexual orientation.

Educational Level and Its Impact on Concrete Help From Paid Services

It was suspected that one's educational level (which can impact financial well-being) might influence the ability to secure concrete help from paid services, with those with higher educations and higher incomes seeking and obtaining more help from paid services than those with less education and lower incomes. Two ANOVAs were run to look at educational level and household income level and their possible relationships with obtaining concrete help from paid services.

First an ANOVA was run with educational level as the independent variable and concrete help received from paid services as the dependent variable to test this possibility. The results from this ANOVA showed that the higher the education, the more help received from paid services. Post college respondents had the highest mean scores ($M = 1.02$, $SD = 1.22$), college graduates had the next highest mean score ($M = .95$, $SD = 1.00$), and those with less than college had the lowest mean score ($M = .41$, $SD = .67$). The difference between those with less than a college education and those with post college education was statistically significant at the $p < .05$ level. Thus, when concrete help is needed (e.g., transportation, help with household projects) those with higher levels of education may hire help and those with lower levels of education may rely more on friends.

A second ANOVA was run with household income level as the independent variable and concrete help received from paid services as the dependent variable. Those with a household income of between \$100,000–\$199,999 had the highest mean score with help received from paid services ($M = 1.12$, $SD = 1.22$), and those with a household income of over \$200,000 had the next highest mean score of help received from paid services ($M = .96$, $SD = 1.13$). The two groups with the lowest household incomes: those with an income between \$60,000–\$99,999 ($M = .67$, $SD = .89$) and those with an income of \$30,000–\$59,999 ($M = .13$, $SD = .35$) had the lowest mean scores of help received from paid services. Thus, in general, the higher the household income the more paid services were obtained and the lower the household income the less paid services were obtained. The F test score was 2.62 and there was a level of significance of .054 among the four groups based on level of household income. Thus, those with higher education and those with higher household incomes, were more likely to obtain paid services than those with less education and lower household incomes.

Exploring More on Race and Normative Solidarity: Familism

Because the race/ethnicity category was condensed from six options to two (White and non-White) for the regressions and the category “Other” had mean scores that were so low, some additional analyses were conducted to see what would happen if all six racial groups were assessed by running an ANOVA in the normative solidarity domain measuring familism.

The ANOVA found that there was a between groups difference at $<.01$. The PostHoc Tests with multiple comparisons showed that the Asian sub-group ($M = 13.89$,

$SD = 1.83$) had the highest mean score and was statistically higher than the “Other” (i.e., two or more racial groups) sub-group ($M = 11.00$, $SD = 3.83$, $p < .05$). The Latino/Latina sub-group had the next highest mean score ($M = 13.52$, $SD = 1.81$) and was statistically higher than the White sub-group ($M = 12.23$, $SD = 1.81$, $p < .05$) and the “Other” sub-group ($M = 11.00$, $SD = 3.83$, $p < .05$). Table 15 summarizes the ANOVA results from the three questions that resulted in significant group differences in the familism measure. Thus, the regression which showed non-Whites having low normative solidarity in the familism score was impacted by the group “Other” which had particularly low solidarity scores. The rest of the non-White racial groups all had higher mean scores in familism than the White respondents. This finding is consistent with the literature showing that some racial groups have particularly strong connections with family, and family values are considered paramount to individual values.

Table 15

ANOVA: Race and Normative Solidarity (Familism): Three Questions From the Familism Scale With Significant Results

		Should give more weight to family's opinions		Should share activities with parents		Should change lifestyle if against family's values
	<i>N</i>		<i>N</i>		<i>N</i>	
<hr/>						
Race						
All sample	243	2.55 (.65)	244	2.51 (.63)	243	1.51 (.56)
White	197	2.51 (.62)	198	2.45 (.61)	197	1.45 (.54)
Black	7	2.71 (.49)	7	3.00 (.58)	7	1.86 (.69)
Latino	23	2.87 (.63)	23	2.74 (.54)	23	1.74 (.54)
Asian	9	2.89 (.60)	9	2.89 (.33)	9	2.00 (.50)
Other	7	2.00 (1.15)	7	2.29 (1.11)	7	1.29 (.49)
<i>F</i> test		3.74**		3.42*		4.48**

+ $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$

CHAPTER V: DISCUSSION OF THE FINDINGS

In this dissertation study, parents rather than nonparents regardless of their sexual orientation showed higher levels of family solidarity with receiving and providing emotional support (i.e., emotional support, discussing important life decisions, and visiting/sharing leisure activities) and with receiving and providing concrete instrumental help to family (i.e., transportation and shopping, household chores, information and advice, and help when sick). Parents rather than nonparents regardless of sexual orientation also tended to live closer to their own parents. The findings that gay and lesbian parents were found to be so similar to heterosexual parents on these variables lend support to a hypothesis of this study that parenthood is associated with gays and lesbians being closer to their own parents, despite whatever disappointments and misgivings there may have been between the gays and lesbians and their parents in the past. It supports research which suggests that parenthood can strengthen bonds between adult gay/lesbian people and their family of origin (e.g., Gartrell et al., 1999).

Parenthood and Family Connections for Gay and Lesbian Couples

For many gay and lesbian persons disclosure to parents about their sexual orientation can be a very difficult process and, although parental reactions vary widely, many parents react negatively upon first learning their son or daughter is gay/lesbian (e.g., D'Augelli et al., 1998; Savin-Williams, 2001, 2005; Savin-Williams & Dube, 1998;

Savin-Williams & Ream, 2003; Strommen, 1990). Many of these parents go through a process very similar to the mourning of a loss of a loved one (e.g., Bernstein, 2003; Savin-Williams & Dube). The parents of gay and lesbian children then must decide to whom they disclose the news of their child's homosexuality to, and may go through their own "coming out" process as parents of a gay/lesbian child. With the news their son or daughter is gay/lesbian, some parents feel sadness, anger, guilt, embarrassment, and/or shame, and these emotional reactions can impact the parents' decisions on the extent of disclosure to their own friends and family. Many parents struggle with the news that their son or daughter is gay/lesbian and do not feel comfortable disclosing the news to others that their children are gay/lesbian (Bernstein). Thus, parents' own discomfort with their child's homosexuality and desires to have a "normal" heterosexual child impact on their ability to accept their child's sexual orientation.

The decision of some gay/lesbian persons to become parents themselves may potentially change some of the perceptions of their family towards them. The gay/lesbian persons who become parents may be seen as being more similar to heterosexual persons and having more in common with heterosexual society (e.g., Lewin, 1994; Oswald, 2002). Also, some researchers have found that when parents learn that a son or daughter is gay/lesbian, the fear that they will not have grandchildren from this child is a significant reason for some of the disappointment (e.g., LaSala, 2002). So, parenthood status may also allay some of the disappointments, allowing for closer relationships between gays, lesbians, and their own families.

Likewise, gay/lesbians who do become parents may want to have their family involved as grandparents, aunts/uncles, etc., if not for themselves, for the benefits of their

children. Martin (1993) noted that parents of adult gay/lesbian children can improve in their attitudes for the sake of the grandchildren. Although this can be painful for some gay/lesbian persons (because their family didn't support them when they initially came out as gay/lesbian), grandchildren can provide a means by which family of origin can get to know and appreciate their adult gay/lesbian children in a different context and vice versa.

In a literature review discussing resiliency within gay and lesbian family networks, Oswald (2002) noted that parenthood can promote resiliency for gay and lesbian persons in several ways. Oswald explained that to the extent that the gay and lesbian parents use the benefits of parenthood to obtain greater support for their family networks, the greater their resiliency. Oswald felt that parenthood could offer gay/lesbian people at least partial access to the social benefits of parenthood, including being perceived as more similar to heterosexual people and having more in common with heterosexual society. She felt that this may help to reconcile previously difficult relationships with loved ones and could lead to the creation of an even more comprehensive system of social support. Oswald discussed that a benefit of gay and straight integration (i.e., gay, lesbian, and heterosexual members of the family network involved in each other's lives) is that it can promote resiliency by increasing the support resources to all members of the network.

Slater (1995) who proposed a lesbian family life cycle, talked about how lesbian couples social involvements are influenced by where the couples are in the family life cycle. She gave as an example that a lesbian couple in their 20's may feel independent of the heterosexual mainstream and feel impervious to societal rejection. This may be

enhanced by being active in the lesbian community. Then, years later social connections in the mainstream may feel more important to the couple as they may become more reliant on mainstream resources and no longer feel as comfortable in a youth-oriented lesbian community. Meanwhile, families of origin, Slater asserts, “frequently grow in their acceptance of the lesbian couple over time and may relinquish (or at least soften) their initial dismay or rejection” (Slater, 1995, p. 35).

This leads to another possible factor influencing gay/lesbian parents’ stronger connections with family of origin than gay/lesbian nonparents. It may be that these couples had a certain level of commitment and/or longevity before embarking on parenthood, especially given the difficulties and complexities involved in becoming parents. Thus these couples may have had improvements in their relationships with their parents over time *before* pursuing parenthood. In the literature, it has been shown that there can be improvement over time for gay/lesbian couples in the level of acceptance by families (e.g., Gartrell, 1999; Hancock, 1995; LaSala, 2002; Slater, 1995) and this may in turn increase the comfort level of the couples with their families.

In the literature on heterosexual couples, Johnson and Milardo (1984) asserted that as a couple becomes more involved (e.g., moving from courtship to engagement to marriage) the family of origin moves from giving no negative interference or opposition during the early courtship stage, to negatively interfering and being opposed to the couple as the couple gets closer, to then becoming more encouraging of the couple’s bonds with each other and more encouraging of the bonds between family and the couple. In contrast to Johnson and Milardo’s finding of a curvilinear relationship between family support and a couple’s involvement from courtship to marriage for heterosexual couples, perhaps

for gay/lesbian couples there is more of a direct linear path between family support and gay/lesbian couples involvement from early courtship to relationship longevity. Specifically, the family of origin begins with little support (if any) for the gay/lesbian couple and then with time there can perhaps be an improvement in the comfort level and overall level of acceptance from the family for the gay/lesbian couple. This is consistent with Gordon Allport's (1954) contact hypothesis which argued that interaction with stigmatized group members can lead to reduced prejudice among dominant group members. This has also been tested and supported in recent studies which found that greater contact with gay/lesbian persons (especially close connections to gay/lesbian persons), results in reduced prejudice against gay/lesbian persons (e.g., Herek & Capitano, 1996; and Lemm, 2006). Thus, parents may become more accepting of their children's homosexuality and same gender relationships due to on-going contact with them over time.

Also, over time the parents of gay/lesbian children have an opportunity to go through their own grieving process about the "loss" of the expectations of having a heterosexual child and their own "coming out" process (i.e., disclosing that they are parents of a gay/lesbian child). In this journey, the parents may become better educated about homosexuality through the media, reading related books, attending support groups, and/or by knowing others who also have gay/lesbian children. Ultimately they may see their children as happier and they may become more accepting of their children and their lifestyles (e.g., Bernstein, 2003, Savin-Williams & Dube, 1998). Thus, the longer the time that gay/lesbian persons are out to family about their sexual orientation, the greater the chance that the family will grow in acceptance.

This present study did not ask how long a couple was together (only that they had to be together at least two years and cohabitating for one year to participate in the study), and did not ask about the extent of disclosure to family about being gay/lesbian or how long ago they had disclosed to family about being gay/lesbian. Thus, these important factors (i.e., longevity of a couple, extent of disclosure to family, and amount of time that has passed since disclosure to family), which can influence a family's level of comfort and acceptance with their son or daughter's sexual orientation and their son or daughter's coupled relationship, were not assessed in this study. Therefore, in this study it is unknown whether or not gay and lesbian parents' closeness to their own parents may have been influenced by relationship longevity and disclosure.

The Importance of Networks of Friends for Gay and Lesbian Persons

Another significant finding emerged regarding parenthood status and connections with friends. In summary, nonparents had higher solidarity with friends/neighbors than parents on all four operationalized measures. This supports the notion that if a couple is childless they will be more inclined to draw support from friends/neighbors and provide support to friends/neighbors than a couple with children. This may be due in part because couples with children have less time and resources to give to their friends and, as seen earlier, couples with children may be more emotionally connected to their family of origin. Also, in this study the sample of nonparents lived farther away from their families than the sample of parents did. Nonparents, therefore, may have needed to rely more on friends because of the geographic distances between them and their families. However, in

addition to parenthood status, gender and sexual orientation also played significant roles regarding connections with friends.

Regarding functional–emotional solidarity(emotional support) with friends, gender impacted on the results. Women were more inclined to give emotional support to friends and receive emotional support from friends than men. They were also more inclined to receive concrete help from friends. As discussed before, women tend to be the social connectors and relationship keepers and men tend to be more autonomous (e.g., Bott, 1971; Cross & Madson, 1997; Flaherty & Richman, 1989). Thus it is consistent to find that the women had stronger emotional ties with their friends than men. Further it makes sense that one of the lesbian groups (the nonparents) had the highest mean scores in this domain of solidarity.

The study's findings were also consistent with previous gay/lesbian research because the gay and lesbian couples did show stronger connections with friends than heterosexual couples and the lesbian couples tended to have stronger emotional ties with family and friends than the gay couples. The latter result may have been impacted by gender differences because women scored higher in these areas than the men did in this study. However, the gay nonparents, who were most inclined to provide concrete help to friends, showed that gender was not the whole picture regarding connections with friends. Consistent with the literature, both gay men and lesbians tended to have strong support networks with friends (e.g., Crosbie-Burnett & Helmbrecht, 1993; Kurdek, 1988).

Specifically, this study showed that the lesbian nonparents had the highest mean score of solidarity with friends in functional–emotional solidarity (providing and receiving emotional help) and the highest mean score of solidarity with friends in

functional–instrumental solidarity: receiving concrete help from friends. Gay nonparents had the highest mean score of solidarity with friends in functional–instrumental solidarity: providing concrete help to friends. Gay nonparents also had the next to highest household income (second only to gay parents) and thus may have been in a better position financially to assist friends with concrete help as men tend to earn more than women and a couple with two men might have more financial resources. In this study, these financial differences did result in both gay sub-groups (parents and nonparents) having the highest household incomes, followed by (in descending order) heterosexual parents, lesbian parents, lesbian nonparents, and lastly heterosexual nonparents.

Gay Parents: Some Important Findings

However, an exception to the gay and lesbian couples strong connections with friends was the gay parents group. The gay parents had the lowest mean scores of all six types of couples groups in each of the four measures assessing solidarity with friends. Conversely, gay parents had some of the highest mean scores in regard to connections with family.

Gay Parents and Their Connections With Family

Gay parents in this study had scores closest to heterosexual parents in many of the solidarity domains. This is potentially an important finding that needs to be explored. One of the areas that gay parents scored similarly to heterosexual parents was in the domain of normative solidarity (expectations of family responsibilities and obligations to family). When the measures for normative solidarity were analyzed based on

respondents' parenthood status, there were no differences between parents and nonparents. However, sexual orientation seemed to influence this area of solidarity and statistically significant differences emerged in each of the normative solidarity measures. In all three of the normative solidarity measures (i.e., total score, familism score, and filial responsibilities to elderly parents score), heterosexual parents and heterosexual nonparents had higher mean scores of solidarity than lesbian parents, lesbian nonparents, and gay nonparents. In other words, heterosexual respondents were more inclined to put family needs above their own and were more inclined to feel responsibility towards their elderly parents.

However, an important exception was the group of gay parents. The gay parents had some of the highest mean scores on individual questions on the familism measure and also had the highest mean score in regard to filial obligation to elderly parents (believing that adult children should help elderly parents in various capacities). The gay parents thus also had a high total score of normative solidarity.

Normative solidarity was not the only domain where gay parents had high mean scores. In regard to geographic proximity to mother, gay parents had the highest mean score, meaning they lived closer to their mothers than any other couple type. They also had the second highest mean score regarding living closest to father (heterosexual parents lived the closest) and the second highest mean score for concrete help provided to family (heterosexual parents provided the most help). When the groups of parents were compared in regard to help received from family for childcare, gay men again had the second highest mean scores (second to heterosexual parents but receiving more childcare help from family than lesbian parents). In the areas of emotional support received from

family and emotional support provided to family, gay parents again had the second highest mean scores (and were second only to heterosexual parents).

These last two findings are particularly interesting because in the two areas of emotional support, women were more inclined than men to receive emotional support and provide emotional support to family and these differences between women and men were at a statistically significant level. Thus, it would make sense for the lesbian parents (because they are an all women group) to have higher mean scores than the gay parents (because they are an all male group). Yet, this did not occur.

In one of the few studies to include gay parents, Johnson and O'Connor's (2002) sample did show some differences between the gay parents and lesbian parents regarding social support from family. Johnson and O'Connor reported that the gay men in their study faced less opposition from their own families about their plans to become parents than did the lesbians. Specifically, 54% of the lesbian mothers anticipated negative reactions from their own families, while 34% of the gay fathers anticipated negative reactions from their own families. In regard to experiencing actual negative reactions from their own families, 44% of the lesbian mothers and 27% of the gay fathers reported having those reactions from their families. Johnson and O'Connor speculated that since most of their sample of gay fathers adopted children, that the families may view the adoptions as selfless acts providing homes for children who have no homes. Conversely, the lesbians primarily used alternative insemination and thus elected to bring children into the world. This decision may be viewed by the families as fulfilling the needs of the adults to have children and not thinking of the potential impact on the children themselves.

One possibility for the gay parents' high scores in the solidarity measures with family may be that gay men who choose to be parents may have particularly close bonds with their family of origin before becoming parents. This was mentioned earlier—namely, that lesbians and gay men who become parents may be a group who has certain bonds of closeness with their family of origin to begin with in comparison with the gay and lesbian nonparents. It could be that for the gay men, this is even more the case. Considering how difficult it is for gay men to become parents compared to lesbians (surrogacy and adoption are arguably more difficult than pregnancy through alternative insemination) and social conditioning issues (women are considered more suitable to parenthood), perhaps gay men who choose parenthood are a special group in that they are more relationship and family oriented to begin with compared with gay men who do not choose parenthood. Also, since there are fewer gay men choosing parenthood than lesbians, it can be argued that gay men choosing parenthood need even more social support to have the confidence to embark on this path to parenthood. Without enough social support, gay men may feel that parenthood is simply not an option. Thus, those that do pursue parenthood may be getting adequate social support from their families.

As mentioned above, one issue faced by gay men who would like to be parents is dealing with the adoption process or surrogacy. For many lesbian couples alternative insemination is the chosen route for parenthood, and one member of the couple thus becomes the biological mother of a child. Although lesbian couples face various decisions (e.g., using sperm from known donor or anonymous donor, insemination at home with partner or in physician's office) and possible costs (purchasing sperm, storing

sperm, paying for inseminations at a reproductive endocrinologist's office) alternative insemination in general can be easier and less costly than surrogacy or adoption.

Although a gay man can inseminate a woman who agrees to be a surrogate mother, more often gay men seek to adopt a child already conceived (Johnson & O'Connor, 2002). This may be due to some of the difficulties associated with surrogacy including finding a woman willing to carry a baby to term on behalf of the gay couple, and the very real possibility she may change her mind during the pregnancy or after the baby is born. Thus, many gay men choose adoption instead. Either way, gay men can have potentially more obstacles to become parents (e.g., financial cost, the adoption application and interview process, and potentially long wait times before the adoption is granted) and at the same time they may not enjoy the possible reconciliatory benefits with their parents of having a biologically related child and thus providing a biologically related grandchild. Therefore, already having close social ties with family of origin may provide gay couples with emotional and concrete help which would in turn assist the gay couples to pursue parenthood despite these obstacles. Another factor which may impact on a family's support for gay men choosing parenthood (as Johnson & O'Connor, 2002 noted in their study) is that the families may be more supportive of adoption of children who need a home instead of purposively bringing children into this world.

Another issue gay men who would like to be parents face is the social conditioning that women may be more suited to parenthood than men and the social conventions that women should aspire to become parents and men should aspire to obtain educational and workplace goals. Even in recent studies on the roles of men and women in regard to parenthood, education, and work, women tended to place a higher value on

parenthood and aspired to parenthood more than men and men tended to place a higher value on education and work than women (e.g., Cinamon & Rich, 2002; Devos, Blanco, Rico, & Dunn, 2008). Therefore, gay men who seek to become parents must defy societal expectations and also probably have their own internal desires and aspirations for parenthood, so they might be more family oriented than their nonparent counterparts. Also, the parents of gay men seeking parenthood may believe that women are naturally better suited to be parents compared to men and thus they might believe that their sons need more emotional support and concrete help from them in order to be good parents.

These potential factors (i.e., the difficulty of adoption and surrogacy and society's conventions about gender roles) and the notion that gay men seeking parenthood may be a unique group with already strong family ties and desires for parenthood are of course speculative. More research is needed to explore these issues with gay men parents.

Gay Parents and their Connections with Friends

In the present study in the area of solidarity with friends, gay parents had the lowest mean scores for each domain of solidarity across all six groups of couple types. Gay parents received and provided the least concrete help to friends and they received and provided the least emotional support to friends. Therefore, gay parents were an anomaly compared with the other gay and lesbian couples and their connections with friends.

The group of gay parents in this study had the highest average household income of all six types of couples (averaging between \$100,000 and \$199,999 household income) and worked the least amount of hours in their jobs (both the gay parent respondents and

their partners had the lowest mean number of work hours per week, averaging 28.48 hours per week and 30.54 hours per week respectively). Thus they had more time and more income than any of the other couples, yet they had the lowest solidarity scores with friends, including the provision of concrete assistance to friends.

One possible explanation is that if this group of gay parents in fact has closer bonds with their families, they may also be a group of people who do not need to have a “second family” comprised of friends. If they get adequate support from family, live closer with their parents, and feel a greater sense of responsibility to their family, they may be more inclined to put their energies and commitment to family, not friends. Since there have been so few studies with a focus on gay parenting, it is not known how this study’s sample compares with other gay fathers and their solidarity with family and friends.

Therefore, another possibility is that this particular study and its sample of gay parents are not typical of other gay parents in the population. First, this study had a very small sample of gay parents ($n = 33$) and second this group of parents became parents through various processes with different children. Although the majority of the gay men parents in this study (63.64%) adopted all their children and this is typically the most common means gay men pursue parenthood, 21.21% were biological parents, 9.09% were a combination of step and adoptive parents, 3.03% were step-parents, and 3.03% were a combination of biological and adoptive parents. Thus, some of these men had “blended” families and although it is inferred, some of these gay men parents probably conceived children in previous heterosexual relationships. Therefore, having come from a

heterosexual relationship with biologically-related children, this group may have more in common with some heterosexual parents than with other gay/lesbian groups.

Gay and Lesbian Groups' Use of Paid Services

The results from the "Other Findings" section pertaining to paid services received yielded interesting results. Specifically, the results showed that the four gay and lesbian groups obtained more paid services for concrete paid services (e.g., house cleaning services, transportation services) than the heterosexual groups and the gay/lesbian groups (excluding gay parents) obtained more paid services for emotional support (e.g., psychotherapy) than the heterosexual groups. These results seemed to be influenced by sexual orientation because household income available to pay for these services was not the only factor. The household incomes for the two gay men groups were the highest of the six groups, followed by (in descending order from highest household income to lowest household income), the heterosexual parents, lesbian parents, lesbian nonparents and heterosexual nonparents. Thus, if household income was the main factor in paid services used, the lesbian groups would have less paid services not more. Instead, the lesbian nonparents obtained the most paid services for emotional help ($M = .64$, $SD = .96$) and obtained the most paid services for concrete services ($M = .82$, $SD = .95$) and the gay parents, in another instance of being an anomaly with the gay/lesbian groups, obtained the least amount of paid services for emotional support ($M = .15$, $SD = .44$) yet earned the highest household income.

The finding that the lesbian parents, lesbian nonparents, and gay nonparents all obtained the most paid services for emotional support (e.g., psychotherapy) raised the

question of if these groups need more support (due to dealing with societal stigma, discrimination, and possible issues with family of origin) than the heterosexual groups. Meyer (2003) found in conducting meta-analyses of population-based epidemiological studies that the lesbian, gay, and bisexual populations had higher rates of stress-related psychiatric disorders (e.g., those related to anxiety, stress, and substance abuse) compared with their heterosexual counterparts. These differences, while not large, have been found consistently across studies (e.g., Cochran, Sullivan, & Mays, 2003; Mays & Cochran, 2001). Thus, this present study's findings are consistent with the results from other studies.

Another question that this present study's findings raised is whether or not the gay/lesbian population uses mental health services more often (and perhaps may have a higher comfort level in seeking those services) than the heterosexual population. In studies done looking at rates of use of mental health services, it has been found that lesbians and gays use the mental health system at higher rates than heterosexuals (Dworkin, 2000). Again, this shows that this present study's findings are consistent with other research findings.

Finally, given that the gay men parents did not fit with the other gay/lesbian groups (and obtained the least amount of paid services for emotional support) it raises the question of whether the gay men parents closeness with family of origin provides them with enough emotional support that they are less in need of getting that emotional support elsewhere (i.e., from friends or from paid services).

Other Findings Related to Age, Race, and Income

Functional–Instrumental and Emotional Solidarity With Family

In regard to receiving concrete instrumental help from family members, heterosexual parents had the highest score of solidarity with family. However, two groups of *nonparents* (heterosexual and lesbian respondents) had the next highest solidarity scores. This is where the confounding variables of age and income enter the equation.

Heterosexual nonparents were the youngest group in this study with a mean age of 39.04, and lesbian nonparents were the next youngest group with a mean age of 43.58. Age was shown to have an inverse relationship with help/support received and help/support provided to family (i.e., as age increases, help decreases). The two oldest groups in this study were gay parents (mean age 45.06) and heterosexual parents (mean age 44.92). Thus, in addition to parenthood impacting help received or provided to family, age was a factor.

This finding regarding age having an inverse relationship with help received/provided is not surprising. In this solidarity domain, the number of people a respondent had provided help to and received help from was added for a total solidarity score. Thus, the more family members one had connections with the greater the solidarity score. Therefore, this domain measured the *number of people* in a respondent's family network, not the closeness of the ties in that network. This finding, therefore, is in keeping with the theories that as people age they have more narrow social networks than when people are younger (e.g., Carstensen, 1993, 1995; Lansford et al., 1998), but these results *do not* explain *why* the older respondents had a smaller network. This study did

not ask if the respondents had these family members *available* to them (e.g., if a sibling or other relatives were deceased) and did not ask about their *satisfaction* with their support networks.

Heterosexual nonparents and lesbian nonparents also had the lowest household incomes compared with the other type of couple groups, with heterosexual nonparents earning the least. If these two groups were in general less well off financially, their families may have felt more responsibility to help their adult children out with concrete services. Thus, this might also explain their higher scores on functional solidarity (receiving help) from family.

Structural Solidarity With Family

In regard to structural solidarity (how far away geographically mother and father lived from respondent), there were statistically significant differences among the six groups of heterosexual, gay, and lesbian parents and nonparents. Heterosexual parents and gay parents tended to live closer to their mother and to their father than the other groups. The next groups inclined to live close to mother/father were the lesbian nonparents and the lesbian parents. The groups that lived farthest from their parents were the heterosexual nonparents and the gay nonparents. Thus, for most of the groups parents tended to live closer to their own parents than the nonparents. The exception was the two lesbian groups with lesbian nonparents living closer than lesbian parents.

One confounding variable regarding geographic proximity to parents was parental divorce. Parental divorce seemed to play a role in geographic proximity to father. Specifically, there was a greater distance geographically from father if there had been a

divorce. In this study 49/245 respondents had parents that divorced. Most (42/49) reported that their mother had custody after the divorce. Five had parents who had joint custody, one had a father who had custody, and one had a different custodial arrangement. Of the six sub-groups, lesbian parents were the *most* likely to have parents that were divorced, and thus would be more likely to live farther away from their fathers.

The impact of parental divorce on geographic proximity to father may be due to the fact that after a divorce, parents no longer reside together and there may be greater likelihood that one may move farther away from the children. There may also be hard feelings or strained relationships if the divorce was bitter. Finally, with this sample, the majority lived with their mother after the divorce so there may have been less bonding with their fathers.

Educational level also played a role in geographic proximity to both mother and father, but the amount of the effect of education on proximity was small and was not significant at the $p < .05$ level. College graduates lived closer to their parents than those with less education and those with more education.

Functional–Instrumental and Emotional Solidarity with Friends

Age had an inverse relationship with emotional support received from friends and emotional help provided to friends. In other words, as the age increased the level of support decreased. As discussed in regard to family solidarity, this finding with age is consistent with the literature that finds as people age their support network narrows (e.g., Carstensen, 1993, 1995).

Educational level also played a role in concrete help received from friends. Those

who had less than a college education had statistically higher solidarity with friends in this area than those with more education. This was probably related in part to having a lower level of financial independence and less ability to pay for help with concrete and/or emotional support services (e.g., Household cleaning, household projects, transportation services, psychotherapy). The respondents with less than a college education also had lower household earnings on average than the other groups. They also received less concrete help from paid services than those with higher educations.

To understand the relationships in more detail, analyses reported in the results section under “Other Findings” had been conducted. ANOVAs were run with educational level and household income level as independent variables and concrete help received from paid services as the dependent variable. The results showed that the higher the education, the more concrete help received from paid services. Post college respondents had the highest mean scores ($M = 1.02, SD = 1.22$), college graduates had the next highest mean score ($M = .95, SD = 1.00$), and those with less than college had the lowest mean score ($M = .41, SD = .67$). The difference between those with less than a college education and those with post college education was statistically significant at the $p < .05$ level.

The results also showed that the higher the household income, the more concrete help received from paid services. Those with a household income of between \$100,000 and \$199,999 had the highest mean score with help received from paid services ($M = 1.12, SD = 1.22$), and those with a household income of over \$200,000 had the next highest mean score of help received from paid services ($M = .96, SD = 1.13$). The two groups with the lowest household incomes—those with an income between \$60,000–

\$99,999 ($M = .67$, $SD = .89$) and those with an income of \$30,000–\$59,999 ($M = .13$, $SD = .35$)—had the lowest mean scores of help received from paid services.

Thus, when concrete help is needed (e.g., transportation, help with household projects) those with financial resources may hire help and those without financial resources may rely more on friends. Knowing the possible relationship between household income and extent of help received from friends, raises the question of how this may have impacted on the result of lesbian nonparents receiving the most help from their friends. The lesbian nonparents had the next to lowest average household income (heterosexual nonparents had the lowest).

Overall the findings of this study seemed to be consistent with much of the literature. Variables of gender, race, and age all impacted on results in expected ways—women were more inclined to have stronger emotional connections with family and friends, non-White respondents were more inclined to view family as primary over individual needs, and older respondents had more narrow social networks.

This Study's Results and The Solidarity Model

The Solidarity Model proposed by Bengston (2001) was used as the guiding theory for this study. The Solidarity Model attempted to account for patterns of solidarity among American parents and children during the adult family life. In other words, it aimed to assess the intergenerational cohesion after children reached adulthood and established careers and families of their own (Bengston & Roberts, 1991).

Bengston's (2001) hypothesis was that intergenerational relationships are becoming increasingly important to individuals and families in America. He also

suggested a corollary to that hypothesis that asserted that for many Americans intergenerational ties are becoming more important than nuclear family ties for well-being and support over the course of their lives.

Bengston (2001) cited three primary factors as the foundation of this hypothesis and its corollary.

1. Changes in intergenerational demography have resulted in increased opportunities and increased needs for interaction, support, and mutual influence across more than just two generations. The changes in demography refer to the changing societal and age structures so that longer years of shared lives are created.
2. Bengston (2001) reports that there is strength in intergenerational solidarity over time and there is a diversity of cross-generational types.
3. Nuclear families, due to the increase in marital instability and divorce, are less able to provide the socialization, nurturance, and support needed by family members. As a result, kin across several generations are increasingly called upon to provide some of these essential family functions.

Bengston's Solidarity Model was based on heterosexual nuclear families and their extended families, and studies conducted to test this model also focused on heterosexual families. Intergenerational relationships of gay/lesbian-headed families were not explored using this model. Given that a fair number of gay/lesbian couples and families experience negative reactions from their families of origin it was not known if they would be more reliant on each other (and friends from the gay/lesbian community) than on their families of origin for support. Therefore, it was unknown if Bengston's hypothesis that

intergenerational relationships are becoming increasingly important would apply to gay and lesbian-headed families.

This study's results showed that gay and lesbian parents were very similar in their connections with family as were heterosexual parents, and that parents (regardless of sexual orientation) lived closer to their own parents and had stronger connections in some of the solidarity dimensions with family than nonparents. Although Bengston (2001) cited marital instability and divorce as one of the factors contributing to the increasing importance of intergenerational ties, it could be that for this study's sample parenthood (as a possible stressor) may have been a reason to call upon extended family for support. This study, therefore, suggests that gay and lesbian-headed families with children may, like their heterosexual counterparts, utilize intergenerational relationships for support. It cannot be determined, though, if gay and lesbian families with children have an increasingly important need to have intergenerational ties because this was not a longitudinal study.

Also, with the exception of the gay male parents, the lesbian parents, lesbian nonparents, and the gay nonparents all scored lowest on the normative solidarity dimension compared with the heterosexual parents and heterosexual nonparents. Normative solidarity (perceptions of obligations), in studies done assessing the interactions and relationships between the solidarity dimensions (e.g., Bengston & Roberts, 1991), has been seen as a contributing factor for affectual solidarity (emotional closeness) and associational solidarity (contact). In this study, there were no significant differences among groups (based on parenthood status, gender, or the combination of parenthood status and sexual orientation) in affectual solidarity (emotional closeness) or

in associational solidarity (contact). Yet there were significant differences found among groups based on sexual orientation in normative solidarity. Thus it would appear that in this study normative solidarity was *not* a contributing factor to affectual and associational solidarity.

Normative solidarity (perceptions of obligations) has also been linked to the degree of helping behavior (functional solidarity) (e.g., Bengston & Roberts, 1991). This study seems to lend possible support for this link between normative solidarity and functional solidarity. Specifically, in this study heterosexual parents and gay parents had the two highest total scores for normative solidarity and they also had the two highest scores in functional–emotional solidarity (both in receiving and providing emotional support) and the two highest scores in functional–instrumental solidarity (providing concrete help). Heterosexual parents also scored the highest in functional–instrumental solidarity (receiving concrete help) but gay parents actually had one of the lowest solidarity scores regarding receiving concrete help.

In this study, lesbian parents and gay nonparents had the two lowest total scores in normative solidarity. The gay nonparents also had the lowest scores for functional–instrumental solidarity (both in receiving and providing concrete help) and had the lowest scores for functional–emotional solidarity (both in receiving and providing emotional support). The lesbian parents had the fourth lowest scores in functional–instrumental solidarity (receiving concrete help) and in functional–emotional solidarity (receiving emotional support). However, the lesbian parents had similar high scores to gay parents and heterosexual parents regarding functional–instrumental solidarity (providing concrete help) and in functional–emotional solidarity (providing emotional support). In other

words, lesbian parents, despite low normative scores regarding obligations to family, still provided help (concrete and emotional support) to their families. They provided this help to family despite the fact that they reported receiving little help from their families (emotional support and concrete help).

Further work on this theory could have been done in this study by further analyzing the relationships between the different solidarity dimensions, seeing more of how they interact and influence each other. Over the years this type of study has been done to better understand the construct of intergenerational solidarity (e.g., Bengtson & Roberts 1991) but this was not the focus of this study and was not explored in this study. Also, future studies could aim to look at respondents (gay/lesbian and heterosexual) who have had dissolved relationships to assess if relational distress/marital instability/divorce is a primary factor with increased intergenerational solidarity as Bengtson asserts.

Strengths of This Study

By including gay male parents and comparing groups at multiple levels, this study was a holistic and thorough approach to sorting out complex relationships. Unlike Kurdek's (2001, 2004) studies which did include gay, lesbian, and heterosexual couples too, this present study considered parenthood in the analyses. Also, demographic variables of gender, age, and race were explored, and this shed light on some of the differences among the families that were not simply a function of sexual orientation or parenthood status. The findings from this study were impacted by parenthood status, so it confirms that comparing like couples with regard to parenthood status is important. Parents regardless of sexual orientation tended to give and receive more emotional

support and concrete help with family than nonparents and also tended to live closer to family than nonparents.

Unlike many of the studies in the field of gay/lesbian research, this study was also theory-driven. By using a theory that was already formulated and tested on intergenerational heterosexual families and using the measurements that were also formulated and tested by those theorists, the results from this study may have more meaning. The value of having a theory is in the ability to explain and predict outcomes (Black, 1999). Although generalizations that have universal application are rare, especially in the social sciences, the use of theories or probabilistic explanations can provide logical deductions about tendencies in groups and can identify potentially meaningful variables that fit in with the model (Black, 1999). Theory can have practical value too, as the outcomes of some research studies (which assert certain theories) can impact the procedures, processes, and/or decisions in our institutions, schools, courts, and government, and for social work, in policy, program development, and direct practice.

Another strength of this study was the relatively high response rate obtained. A total of 341 surveys were distributed and a total of 245 completed surveys were returned for a response rate of 71.85%. Most of these surveys were distributed via postal mail after initial contact by email. Some of the surveys had instead been distributed in person at gay/lesbian events (and some of those completed surveys were collected the same day). The surveys distributed using direct contact yielded a near 100% response rate yet the surveys distributed via the mail yielded a lower response rate. Combined the response rate was adequate, especially given that it is frequently a problem in survey research to

have low response rates from postal, email, or telephonic interviews. Direct contact with participants usually yields greater response rates (Black, 1999).

Limitations and Suggestions for Further Research

This study had certain limitations which impacted on the results. Therefore, the findings need to be assessed with these limitations in mind. This study did not obtain a random sample for any of the groups and it is hard to know if this sample is representative of the population. Since gays and lesbians comprise a largely hidden population, the characteristics of the gay/lesbian population are not really known and therefore it is impossible to know the qualities of a representative sample. However, given the large percentage of White educated respondents in this study, it is probably safe to assume that this sample is not representative. Thus, these findings are only true for this particular sample.

Since this sample was smaller than had been desired, the six types of couples may have had more differences between them than the results showed. If this is the case the null hypothesis was accepted in four domains of solidarity with family, when it possibly should have been rejected (Type II error). Thus, future research in this area could benefit from larger samples. Increasing sample size so that each of the six sub-groups were larger would tell us if there are more differences between groups than was found in this study and would reduce the chance of committing Type II error.

Another drawback to the present study was that because the sample was comprised of volunteers who chose to participate in the study, one could argue that the respondents may be different than those that did not choose to participate. Perhaps the

respondents were better connected to their families and thus were more interested in completing surveys about family relationships than people who had serious struggles with their families. Given the difficulty in finding gay/lesbian parents and nonparents couples, it would be hard for future researchers to conduct a study without relying on respondents who volunteer to participate. However, perhaps efforts could be made to recruit gay and lesbian parents who experience family conflict, and research on this population could further illuminate the complex relationship between parenthood, sexual orientation, and social support.

An additional limitation to the present study is that it can be argued that the results showing differences between the parents and nonparents groups may not be accurate. It could be that those who chose parenthood to begin with may be more connected with their families of origin than those who chose to remain childless. Only asking respondents about their current relationships with family and friends does not tell us what those relationships were like prior to parenthood (for the parents groups) and thus it is not known whether parenthood brought the respondents closer to their family or if they were a group that was closer to their family and less close with their friends to begin with compared with the nonparent groups.

Thus, a suggestion for future research would be to conduct a longitudinal study (instead of having only one point of data collection) to control for this possible confounding variable. The study should examine people and their connections with family before and after becoming parents and comparing them with people who choose not to become parents (and this latter group would need to be distinguished from those who wanted to have children but had fertility issues). Therefore, solidarity (before and

after parenthood) could be examined with the same respondents instead of comparing one group of parents and one group of nonparents. Finally, a longitudinal study that also included members of the family of origin of the respondent would yield even richer and perhaps more telling results. Then it would also be in keeping with Bengtson et al., 2002's longitudinal study examining intergenerational relations of heterosexual families and the results could be compared.

Another very serious limitation emerged in this study. Unfortunately it was only realized once the data was being analyzed. Although all participants were asked a number of specific questions regarding if they had children, the context in which the child was born or adopted (i.e., in a previous heterosexual relationship, in a previous homosexual relationship, in the current relationship) was not asked. Specifically, the survey first asked if the respondent and partner had any children, and if so, the number of children. Next the survey asked the respondent to list their children with spaces available for sons and daughters, with their ages and the nature of the respondent's relationship with the son/daughter (e.g., biological parent, adoptive parent). Thus, although from these questions the number of children, gender of the children, ages of the children, and nature of relationship with the children (e.g., biological, adoptive) were known, it was not known if the gay/lesbian respondents had the children from a previous heterosexual relationship and/or in a previous/current gay/lesbian relationship. From the answers given to the questions that were asked, and from the comments that the respondents wrote, it could be inferred that many of the gay/lesbian parents participants did have their children with their current gay/lesbian partner. However, it was not clear if that was the case for all of them. The issue then of gay/lesbian persons "choosing parenthood" together could

not be disentangled from gay/lesbian persons conceiving children in a heterosexual marriage and then coming out afterwards as gay/lesbian. Other possible blended family arrangements were also not known. If this information was known, this information may have explained in part how or why the gay men parents group was different from their gay/lesbian counterparts. Thus, future research studies should be sure to ask respondents this critical information.

In this present study levels of intergenerational solidarity were measured and compared between groups. This study did not look at which solidarity measures (if any) impact other solidarity measures, or which ones have a causal relationship with others. These relationships of the solidarity dimensions to each other are a part of Bengtson's (2001) Solidarity Model, and this portion of the theory was not tested at all in this study. Future studies including this would be helpful.

Lastly, the present study yielded low regression coefficients for the different domains of solidarity with the primary variables used in this study. This indicates that there are other variables not identified in this study which contribute to solidarity with family and friends. For example, perhaps family of origin history (e.g., childhood trauma, family history of substance abuse, family history of mental illness), a respondent's mental health status, and a respondent's substance abuse history/current use could influence a person's connections with their family and with their friends. These possible variables, along with many others, were not examined in this study. Future studies could seek to incorporate variables not included in the present study to see if they have stronger relationships with the different domains of solidarity.

Implications for Social Work Direct Family Practice

As is found in many studies, there were more similarities between gay/lesbian groups when compared with heterosexual groups than differences between them. Also, there were more similarities between parents and nonparents than differences between them. The findings that gay and lesbian parents were found to be so similar to heterosexual parents on these variables confirmed the hypothesis of this study that parenthood is associated with gays and lesbians being closer to their own parents and family. Thus, parenthood might promote healing of strained family relationships and can promote resiliency for gay and lesbian persons.

Therefore, social workers in direct practice need to recognize that despite potential historic or current parental disapproval, gays and lesbians might move closer to their families of origin and give and receive more support from their families of origin as they transition to parenthood. This may occur even if friends had been the primary source of support in the past. As a result, practitioners might need to assist their gay/lesbian clients (parents or parents-to-be) improve their relationships with their parents if that is what is desired and needed.

This study also suggested that gay men who seek parenthood may be a unique group in the gay and lesbian community they may, more so than their gay/lesbian counterparts, have stronger bonds with their families and less connections with their friends. The social ties and support from their families then helps them to pursue parenthood in a society which discourages gay/lesbian persons from being parents and also looks more to women to be the ones to desire and pursue parenthood. This study

also showed, in contrast to gay and lesbian parents, gay and lesbian nonparents may have more social support from friends than from family of origin.

Therefore, social workers in direct practice need to be aware of these possible differences and not assume that all gay/lesbian clients share the same level of closeness with family or friends. Thus, they would also need to realize that gay men choosing parenthood may have unique needs which would have to be explored.

Ultimately, though, social workers need to remember that families can be alike and can be different in many ways. Thus, a family's identification based on any one factor (e.g., sexual orientation of the couple, parenthood status) will not be a useful way of knowing what that family needs. A full assessment of the level of social support received and provided by family of origin and by a network of friends needs to occur. Having support from family and friends can impact on the couples' success as a couple, their own mental health, and the children's well being. Therefore, understanding the support received, or denied, towards heterosexual, gay, and lesbian parents can better our understanding on how to best help them and their families.

The social work clinician also needs to remember that other factors, such as age, race, gender, educational level, and income, can influence the social support networks for their clients. As seen, for many as they age, social support networks narrow in scope, and more energy is put into fewer relationships. Regarding gender, many women seem to be the relationship keepers, and many men tend to be more autonomous. Educational level and household income can impact ability to pay for services and support oneself, so they also impact a person's dependency on family and friends. Finally, race can impact family values, family primacy over individual needs, and levels of acceptance of homosexuality.

Understanding some of the complex interconnections of age, gender, race, financial means, parenthood, and sexual orientation and their effects on types and extent of support systems used will increase the social worker's sensitivity to the diversity among and between families, and the diversity and variation of those families' values.

APPENDIX A

MAIL SURVEY QUESTIONNAIRE ELIGIBILITY

MAIL SURVEY QUESTIONNAIRE

For the gay/lesbian respondents:

To be eligible to participate in this study you must:

- Be 21 years of age or older
- Consider yourself to be gay/lesbian
- Be in a relationship with a same sex partner for at least 2 years and have been living together at least 1 year
- Only one person within the couple needs to participate in the study
- Not be pregnant at this time

For the heterosexual respondents:

To be eligible to participate in this study you must:

- Be 21 years of age or older
- Consider yourself to be heterosexual

- Be in a relationship with an opposite sex partner for at least 2 years and have been living together at least 1 year
- Only one person within the couple needs to participate in the study
- Not be pregnant at this time

APPENDIX B

INFORMED CONSENT

Authorization to Participate in Research

A Study on Intergenerational Relationships- A Test of the Solidarity Model

You are invited to participate in a research study that is being conducted by Jeanne Koller-Bottone, MSW, a student and doctoral candidate in the Social Work Department at Rutgers University. The purpose of this research is to determine if parenthood impacts on family relationships. Both heterosexual persons and gay/lesbian persons will participate in this study, and their relationships with family members will be the focus of the study. Participation in this study will help to advance our knowledge of families and extended family relationships.

Approximately 300 subjects over the age of 21 will participate in this study, and each individual's participation will last approximately 15-20 minutes. The study involves completion of one questionnaire.

If you agree to take part in this study, you will be assigned a random code number that will be used on the questionnaire. Your name will appear only on a list of subjects, and will be linked to the code number that is assigned to you. That list of subjects will be stored in a locked file cabinet and will only be seen by me- Jeanne Koller-Bottone. Names and other information will not be revealed in the study report or outcomes. Therefore, data collection is confidential but not anonymous. If you would like to receive a copy of the results of this study you may request that and I will send out a copy to you after the study is completed.

There is little foreseeable risk in participating in this survey. However, for some participants questions about family and relationships may cause some discomfort. It is important to remember that participation in this study is voluntary. You may choose not to participate, and you may withdraw at any time during the study process. There will be no consequences to withdrawal from this study. In addition, you may choose not to answer any questions with which you are not comfortable. In the unlikely event that you become very upset through the study process, you can call me directly and a referral for counseling services (or other mental health services) will be made. The cost of any counseling services pursued, however, will be at your own expense.

If you have any questions about the study you may contact me at 732/577-0740. If you have any questions about your rights as a research subject, you may contact the Rutgers University Institutional Review Board for the Protection of Human Subjects, Office of

Research and Sponsored Programs, 3 Rutgers Plaza, New Brunswick, NJ 08901-8559,
Tel. 732/932-0150 ext. 2104 or Email: humansubjects@orsp.rutgers.edu. You will be
given a copy of this consent form for your records.

Sign below if you agree to participate in this research study:

Subject _____ Date _____

Principal Investigator _____ Date _____

APPENDIX C

Questionnaire**SECTION I: DEMOGRAPHICS****A. *Personal Background***

1. What is your age? _____ What is your gender? _____
2. What Racial/Ethnic category do you feel best describes you?
(check only one)
 White or non-Hispanic Caucasian
 Black or African-American
 Latino/Latina/Hispanic
 Asian
 American Indian
 Other _____
3. What is your current living arrangement?(check only one)
 Living with partner as though married or legally married
 Characterize that relationship with your partner
 Heterosexual Lesbian Gay Other
 Living with a roommate, but not a partner (you are NOT eligible for this study)
 Living alone (you are NOT eligible for this study)
4. Do you and your partner have any children? (Please include biological, adopted, and step-children)?
 No – If no, are you and your partner considering having children?
 Yes No Undecided
 Yes- If yes, how many?
 Number of Children: _____

Due to the increase in couples having children through alternative means (e.g., coupling with someone who already has children; conceiving a child with reproductive assistance; adopting a child; etc.) we are interested in knowing how you became a parent in reference to each child you parent. Below, please list the ages and *nature of your relationship* (e.g., adoptive parent, biological parent) with each son and daughter. Use whatever terms you feel most comfortable with to describe that relationship. There is space for up to six sons and up to six daughters. If you have more than six sons or more than six daughters, please add the additional information in the extra space given:

C. Work

1. Are you or your partner CURRENTLY employed for pay? (Check only one status for you and one for your partner.)

	<u>You</u>	<u>Partner</u>
Employed full-time.....	—	—
Employed part-time.....	—	—
Unemployed (looking for work)....	—	—
Not employed for pay (includes Housework, volunteer).....	—	—
Retired.....	—	—

2. Have you EVER been employed for pay?

___ No. > Please go to Question 6

___ Yes. If yes:

- a. What kind of work did you do in the FIRST job you had after you finished full-time education? (For example, registered nurse, supervisor of order department, gasoline engine assembler)

___ Not finished with full-time education

IF YOU are NOT CURRENTLY WORKING for pay, please go to question 6

For the following questions: If you have more than one job, answer about the one at which you work the most hours.

3. What kind of work are YOU doing in your current job? (For example, registered nurse, supervisor of order department, gasoline engine assembler).

4. How many hours a week do YOU usually work at this job?

Hours per week _____

5. If YOU have a SECOND job for which you get paid, how many hours a week do you usually work at this second job?

Hours per week _____

Not applicable _____

IF your PARTNER is NOT CURRENTLY WORKING for pay, please go to question 9

6. What kind of work is your PARTNER doing in his/her current job? (For example, registered nurse, supervisor of order department, gasoline engine assembler).

7. How many hours a week does your PARTNER usually work at this job?

Hours per week _____

8. If your PARTNER has a SECOND job for which he/she gets paid, how many hours a week does he/she usually work at this second job?

Hours per week _____

Not applicable _____

9. What was YOUR TOTAL HOUSEHOLD INCOME for last year? (Please check the highest amount)?

- Under \$30,000
- Between \$30,000-59,999
- Between \$60,000-99,999
- Between \$100,000-199,999
- Over \$200,000

10. If you are currently employed, what was YOUR salary for last year? (Please check the highest amount).

- Under \$30,000
- Between \$30,000-59,999
- Between \$60,000-99,999
- Between \$100,000-199,999
- Over \$200,000

D. Regional Background

1. In what state of the United States do you currently reside?

2. Which best describes the community in which you live?
 - Urban/City
 - Suburbs/Outskirts of a city
 - Rural/Far from city
 - Mixed community (e.g., I live in a suburban development less than ¼ mile from a city center and to the other side is a more rural tract of land)
If it is a mixed community, please describe:

3. Which best describes the socio-economic level of the community in which you reside?
 - Affluent/The highest income level
 - Upper-middle class
 - Middle class
 - Lower-middle class/Working class
 - Poor/The lowest income level
 - Mixed community. Please describe:

YOUR RELATIONSHIP WITH YOUR PARENTS

We want to know about your biological/adoptive parents and whether or not they are still living. **If you have adoptive parents, answer about them.** Otherwise, answer about your biological parents.

1. Please indicate if your parents are your biological or adoptive parents:
 - Mother: Biological
 - Adoptive
 - Father: Biological
 - Adoptive
2. Did your parents legally marry?
 - Yes
 - No > If no, Did they live together as though married?

- Yes
 No
3. Did either of your parents become widowed while married (or living with) each other?
 Mother: No
 Yes
 Father: No
 Yes
4. Did your parents ever divorce (or stop living together)?
 No
 Yes> If yes,:
- a. How old were you? ____
 If you were under the age of 18 at the time of the break-up, who had custody of you?
 Mother had sole custody
 Father had sole custody
 Joint custody
 Other (please specify: _____)
- b. Did the custody arrangements change over time?
 No
 Yes> If yes, how? _____
5. Are your parents still living?
 Mother: Yes
 No> If no, what year did she die? _____
 Father: Yes
 No> If no, what year did he die? _____

SECTION II: YOU AND YOUR FATHER- If your father is deceased, please go directly to SECTION III (Question 15)

1. How well do you feel your father understands you? (Circle the number)
1. Not at all
 2. Not too well
 3. Some
 4. Pretty well
 5. Very well
 6. Extremely well
2. Taking everything into consideration, how close do you feel is the relationship between you and your father at this point in your life? (Circle the number)
1. Not at all close
 2. Not too close
 3. Somewhat close
 4. Pretty close
 5. Very close
 6. Extremely close
3. How is the communication between you and your father-exchanging ideas or talking about things that really concern you at this point in your life?(Circle the number)
1. None at all

2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

4. Overall, how well do you and your father get along at this point in time? (Circle the number)

1. Not at all well
2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

5. How well do you feel that you understand your father? (Circle the number)

1. Not at all well
2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

6. In general how SIMILAR are your views about life to those of your father?
(Circle the number)

1. Not at all similar
2. Not too similar
3. Some similar views
4. Pretty similar in views
5. Very similar in views
6. Extremely similar in views

7. How much contact in the past year have you had IN PERSON with your father?
(Circle the number)

1. None at all
2. Once or twice a year
3. Several times a year
4. Every month or so
5. Every week or so
6. Daily or more often

8. How much contact in the past year have you had BY PHONE with your father?
(Circle the number)

1. None at all
2. Once or twice a year
3. Several times a year
4. Every month or so
5. Every week or so
6. Daily or more often

9. How much contact in the past year have you had BY E-MAIL with your father?
(Circle the number)
1. None at all
 2. Once or twice a year
 3. Several times a year
 4. Every month or so
 5. Every week or so
 6. Daily or more often
10. How much contact in the past year have you had BY MAIL with your father?
(Circle the number)
1. None at all
 2. Once or twice a year
 3. Several times a year
 4. Every month or so
 5. Every week or so
 6. Daily or more often
11. Taking everything into consideration, how much conflict, tension, or disagreement do you feel there is between you and your father at this point in your life? (Circle the number)
1. A great deal of conflict
 2. Quite a bit of conflict
 3. Pretty much conflict
 4. Some conflict
 5. A little conflict
 6. No conflict at all
12. How much do you feel your father is critical of what you do? (Circle the number)
1. A great deal
 2. Quite a bit
 3. Pretty much
 4. Some
 5. A little critical
 6. Not at all critical
13. How much does your father argue with you? (Circle the number)
1. A great deal
 2. Quite a bit
 3. Pretty much
 4. Some
 5. A little
 6. Not at all

14. How much do you feel your father makes too many demands on you? (Circle the number)

1. A great deal
2. Quite a bit
3. Pretty much
4. Some
5. A little
6. Not at all

SECTION III: YOU AND YOU MOTHER If your mother is deceased, please go directly to Section IV

15. How well do you feel your mother understands you? (Circle the number)

1. Not at all
2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

16. Taking everything into consideration, how close do you feel is the relationship between you and your mother at this point in your life? (Circle the number)

1. Not at all close
2. Not too close
3. Somewhat close
4. Pretty close
5. Very close
6. Extremely close

17. How is the communication between you and your mother-exchanging ideas or talking about things that really concern you at this point in your life?(Circle the number)

1. None at all
2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

18. Overall, how well do you and your mother get along at this point in time? (Circle the number)

1. Not at all well
2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

19. How well do you feel that you understand your mother? (Circle the number)

1. Not at all well
2. Not too well
3. Some
4. Pretty well
5. Very well
6. Extremely well

20. In general, how SIMILAR are your views about life to those of your mother? (Circle the number)

1. Not at all similar
2. Not too similar
3. Some similar views
4. Pretty similar in views
5. Very similar in views
6. Extremely similar in views

21. How much contact in the past year have you had IN PERSON with your mother? (Circle the number)

1. None at all
2. Once or twice a year
3. Several times a year
4. Every month or so
5. Every week or so
6. Daily or more often

22. How much contact in the past year have you had BY PHONE with your mother? (Circle the number)

1. None at all
2. Once or twice a year
3. Several times a year
4. Every month or so
5. Every week or so
6. Daily or more often

23. How much contact in the past year have you had BY E-MAIL with your mother? (Circle the number)

1. None at all
2. Once or twice a year
3. Several times a year

4. Every month or so
5. Every week or so
6. Daily or more often

24. How much contact in the past year have you had BY MAIL with your mother? (Circle the number)

1. None at all
2. Once or twice a year
3. Several times a year
4. Every month or so
5. Every week or so
6. Daily or more often

25. Taking everything into consideration, how much conflict, tension, or disagreement do you feel there is between you and your mother at this point in your life? (Circle the number)

1. A great deal of conflict
2. Quite a bit of conflict
3. Pretty much conflict
4. Some conflict
5. A little conflict
6. No conflict at all

26. How much do you feel your mother is critical of what you do? (Circle the number)

1. A great deal
2. Quite a bit
3. Pretty much
4. Some
5. A little critical
6. Not at all critical

27. How much does your mother argue with you? (Circle the number)

1. A great deal
2. Quite a bit
3. Pretty much
4. Some
5. A little
6. Not at all

28. How much do you feel your mother makes too many demands on you? (Circle the number)

1. A great deal
2. Quite a bit

3. Pretty much
4. Some
5. A little
6. Not at all

SECTION IV- YOUR BELIEFS AND OPINIONS ABOUT FAMILY AND FAMILY OBLIGATIONS

Caring for elderly parents- Regardless of the sacrifices involved, how much responsibility should adult children with families of their own have...

1. To provide companionship or spend time with elderly parents who are in need?
 1. None
 2. Minor
 3. Moderate
 4. Major
 5. Total

2. To help with household chores and repairs and/or to provide transportation for elderly parents who are in need?
 1. None
 2. Minor
 3. Moderate
 4. Major
 5. Total

3. To listen to the problems and concerns of elderly parents and to provide advice and guidance?
 1. None
 2. Minor
 3. Moderate
 4. Major
 5. Total

4. To provide for the personal and health care needs of elderly parents (for example, bathing, grooming, medication)?
 1. None
 2. Minor
 3. Moderate

4. Major
5. Total

5. To provide financial support and/or assist in the financial and legal affairs of elderly parents who are in need?

1. None
2. Minor
3. Moderate
4. Major
5. Total

6. To provide housing for elderly parents who are in need?

1. None
2. Minor
3. Moderate
4. Major
5. Total

Connections with family-

1. A person should talk over important life decisions (such as marriage, employment, and residence) with family members before taking action.

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

2. If a person finds that the life-style he/she has chosen runs so against his family's values that conflict develops, he/she should change.

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

3. As many activities as possible should be shared by married children and their parents.

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

4. Marriage should be regarded as extending established families, not just creating new ones.

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

5. Family members should give more weight to each other's opinions than to the opinions of outsiders.
1. Strongly disagree
 2. Disagree
 3. Agree
 4. Strongly agree

Proximity to parents-

1. How far from you does your **MOTHER** live?
 1. Not Applicable- mother is deceased
 2. More than 500 miles from me
 3. 251-500 miles
 4. 151-250 miles
 5. 51-150 miles
 6. 5-50 miles
 7. Less than five miles from me
 8. We live together
2. How far from you does your **FATHER** live?
 1. Not Applicable- father is deceased
 2. More than 500 miles from me
 3. 251-500 miles
 4. 151-250 miles
 5. 51-150 miles
 6. 5-50 miles
 7. Less than five miles from me
 8. We live together

Activity, help, and support with friends, relatives, and parents-

For each type of help and support listed below, put a check in the space beneath each person to whom YOU PROVIDE that kind of assistance or support. CHECK AS MANY AS APPLY.

1. **Emotional support-**
 1. Spouse/partner ___
 2. Adult Child (ren)___
 3. Minor Child (ren) ___
 4. Mother___
 5. Father___
 6. Grandmother___
 7. Grandfather___
 8. Brother/Sister___
 9. Other relatives/in-laws ___
 10. Friends/neighbors___
2. **Discussing important life decisions-**
 1. Spouse/partner ___
 2. Adult Child (ren)___
 3. Minor Child (ren)___

4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
10. Friends/neighbors__

3. **Visiting/sharing leisure activities**

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren) __
4. Mother__

Visiting/sharing leisure activities (continued)

5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
10. Friends/neighbors__

4. **Household chores**

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren) __
4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
- 10 .Friends/neighbors__

5. **Transportation/shopping**

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren)__
4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
10. Friends/neighbors__

6. **Information and advice**

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren) __
4. Mother__

5. Father__
 6. Grandmother__
 7. Grandfather__
 8. Brother/Sister__
 9. Other relatives/in-laws __
 10. Friends/neighbors__
- 7. Financial assistance**
1. Spouse/partner __
 2. Adult Child (ren)__
 3. Minor Child (ren) __
 4. Mother__
 5. Father__
- Financial assistance (continued).**
6. Grandmother__
 7. Grandfather__
 8. Brother/Sister__
 9. Other relatives/in-laws __
 10. Friends/neighbors__
- 8. Help when he/she is sick**
1. Spouse/partner __
 2. Adult Child (ren)__
 3. Minor Child (ren) __
 4. Mother__
 5. Father__
 6. Grandmother__
 7. Grandfather__
 8. Brother/Sister__
 9. Other relatives/in-laws __
 10. Friends/neighbors__
- 9. Child care**
1. Spouse/partner __
 2. Adult Child (ren)__
 3. Minor Child (ren) __
 4. Mother__
 5. Father__
 6. Grandmother__
 7. Grandfather__
 8. Brother/Sister__
 9. Other relatives/in-laws __
 10. Friends/neighbors__

Turning things the other way, we're interested in learning about the kinds of help and support YOU RECEIVE from family, friends, and others. For each type of help and support listed below, put a check in the space next to the person who gives you that kind of assistance or support. CHECK AS MANY AS APPLY.

- 1. Emotional support**
1. Spouse/partner __

2. Adult Child (ren)___
 3. Minor Child (ren) ___
 4. Mother___
 5. Father___
 6. Grandmother___
 7. Grandfather___
 8. Brother/Sister___
 9. Other relatives/in-laws ___
 10. Friends/neighbors___
 11. Professionals and paid helpers___
- 2. Discussing important life decisions**
1. Spouse/partner ___
- Discussing important life decisions (continued)**
2. Adult Child (ren)___
 3. Minor Child (ren) ___
 4. Mother___
 5. Father___
 6. Grandmother___
 7. Grandfather___
 8. Brother/Sister___
 9. Other relatives/in-laws ___
 10. Friends/neighbors___
 11. Professionals and paid helpers___
- 3. Visiting/sharing leisure activities**
1. Spouse/partner ___
 2. Adult Child (ren)___
 3. Minor Child (ren) ___
 4. Mother___
 5. Father___
 6. Grandmother___
 7. Grandfather___
 8. Brother/Sister___
 9. Other relatives/in-laws ___
 10. Friends/neighbors___
 11. Professionals and paid helpers___
- 4. Household chores**
1. Spouse/partner ___
 2. Adult Child (ren)___
 3. Minor Child (ren) ___
 4. Mother___
 5. Father___
 6. Grandmother___
 7. Grandfather___
 8. Brother/Sister___
 9. Other relatives/in-laws ___
 10. Friends/neighbors___

11. Professionals and paid helpers__

5. Transportation/shopping

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren) __
4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
10. Friends/neighbors__

Transportation/shopping (continued)

11. Professionals/paid helpers__

6. Information and advice

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren)__
4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
10. Friends/neighbors__
11. Professionals/paid helpers__

7. Financial assistance

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren) __
4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__
8. Brother/Sister__
9. Other relatives/in-laws __
10. Friends/neighbors__
11. Professionals/paid helpers__

8. Help when you are sick

1. Spouse/partner __
2. Adult Child (ren)__
3. Minor Child (ren) __
4. Mother__
5. Father__
6. Grandmother__
7. Grandfather__

8. Brother/Sister__
 9. Other relatives/in-laws __
 10. Friends/neighbors__
 11. Professionals/paid helpers
9. **Child care**
1. Spouse/partner __
 2. Adult Child (ren)__
 3. Minor Child (ren) __
 4. Mother__
 5. Father__
 6. Grandmother__
 7. Grandfather__
- Child care (continued)**
8. Brother/Sister__
 9. Other relatives/in-laws __
 10. Friends/neighbors__
 11. Professionals/paid helpers__

APPENDIX D

PARTICIPATE IN RESEARCH**HELP US BUILD OUR KNOWLEDGE ABOUT COUPLES AND
THEIR FAMILIES**

Are you over the age of 21?
Are you in a relationship at this time?

If so, we want to speak with you...

Participate in Rutgers University research exploring family relationships and social support systems of couples. Information can help families, and educate the mental health professionals who may assist them.

- **Voluntary and confidential**
- **Short questionnaire- Only about 15-20 minutes of your time**
- **African American and Latino families are urged to reply**
- **Research approved for human subjects by Rutgers University Institutional Review Board**

Please contact Jeanne Koller, M.S.W. at 732/577-0740 or jeannekoller@comcast.net for details.

PARTICIPATE IN RESEARCH

HELP US BUILD OUR KNOWLEDGE ABOUT GAY AND LESBIAN COUPLES AND THEIR FAMILIES

Are you Gay or Lesbian and over the age of 21?
Are you in a relationship at this time?

If so, we want to speak with you...

Participate in Rutgers University research exploring family relationships and social support systems of gay and lesbian families. Information can help gay and lesbian families, and educate the mental health professionals who may assist them.

- **Voluntary and confidential**
- **Short questionnaire- Only about 15-20 minutes of your time**
- **African American and Latino families are urged to reply**
- **Research approved for human subjects by Rutgers University Institutional Review Board**

Please contact Jeanne Koller, M.S.W. at 732/577-0740 or jeannekoller@comcast.net for details.

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CURRICULUM VITA

Jeanne Marie Koller, LCSW, CEAP

September 1997–Present	Rutgers University Graduate School of Social Work New Brunswick, NJ A.B.D. status in Ph.D. program, Social Work Anticipated graduation October 2008
September 1987–May 1989	Master's in Social Work Hunter College School of Social Work New York, NY
September 1980–May 1984	Bachelor of Business Administration University of Massachusetts, Amherst Graduated Cum Laude
June 1999–Present	Psychotherapist Private Practice Freehold and Shrewsbury NJ offices
January 2006–May 2006	Visiting Adjunct Professor for MSW Program Rutgers University, School of Social Work New Brunswick, NJ
September 1994–May 1999	Regional Manager/Senior Counselor REACH, Inc. Murray Hill, NJ
December 1989–August 1994	Counselor REACH, Inc. Murray Hill, NJ
August 1986–August 1987	Case Manager Division of Youth and Family Services New Brunswick, NJ
June 1988–August 1988	Case Manager Division of Youth and Family Services New Brunswick, NJ

June 1985–July 1986	Case Manager South Shore Mental Health Agency Quincy, MA
August 1988–June 1989	Social Work Intern District Council 37 New York, NY
September 1987–June 1988	Social Work Intern University Settlement House New York, NY