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## Learning from lesbian non-gestational parents : contributions to a changing world

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Amy B. Morse  
Learning from Lesbian  
Non-Gestational Parents:  
Contributions to a Changing World

## **ABSTRACT**

This qualitative study explored narratives of lesbian non-gestational parents as they reflected on how they planned the stages of building a family, experienced their partner's pregnancy, and adapted to parenthood. The study delved into issues of personal and social identity as these shifted during this important period in family life. The present inquiry contributes to our gaps in knowledge about how planned lesbian-led families take shape and specifically about the experiences of non-gestational parents as they engage in each stage from lesbian partner to lesbian parent.

This study examines ways how non-gestational parents cultivate their family roles, explores considerations of donor characteristics or traits, and describes ways the donor stories are then narrated in family histories. The investigation illuminates non-gestational parent's beliefs about changes in personal and social identity during her partner's pregnancy, perceptions of parent / infant bonding, and strategies for negotiating a satisfying parent role. The sample was comprised of 13 lesbian non-gestational parents with children aged 14 years or younger. Results indicated that most women who take the non-gestational role feel some measure of "invisibility" particularly during their partner's pregnancy and also, face the challenge of crafting an identity barely recognized in a heteronormative culture. The data gathered for this study shows that the more prepared non-gestational parents are for the demands of forging a new family role outside

the norm and the more strategic and intentional the parents' partnership in creating a family, the more satisfied these parents were within their social contexts and in their bonded and unique relationship to their children and their partners.

**LEARNING FROM LESBIAN NON-GESTATIONAL PARENTS:**

**CONTRIBUTIONS TO A CHANGING WORLD**

A project based upon an independent investigation,  
submitted in partial fulfillment of the requirements  
for the degree of Master of Social Work.

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2013

## ACKNOWLEDGEMENTS

This writing would have been impossible without the sound of love singing its heart out in the background. Thank you, Lily, for always providing the harmony for our life together and for cheering me on even when there seemed no end in sight. Without you in the foreground and in the background of my every day, this day would never have come. I will follow *you* now.

Thank you to my children, Chloe and Lila, for their patience in hearing that their mother would be busy writing this thesis for the zillionth weekend in a row. I owe you. And to the non-gestational parent of my own children, PAH, I know you are keeping watch from heaven and I can feel your pride. Thank you.

I would like to thank my mother, father, and my uncle Robert Morse, who made this dive into a new era of study possible both because they each valued an education and because Uncle Robert championed the idea of social work.

I would like to thank the thirteen women who volunteered to participate in this study. These parents generously and articulately described both the deep and abiding love they have for their children and the challenges the world offers up to lesbians who parent. This group generously described the ways they had cultivated brilliant bonds with their babies and those strategies with which they fend off anti-gay intrusions (legal and otherwise). Most admirably, they demonstrated how to work together with one's partner to bring light and life to one's family and are teaching their children how to see the world with eyes wide open and to love it, even as it does not always see them. You are inspirational, to a person, and I thank you very much.

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## **CHAPTER I**

### **Introduction**

The purpose of this qualitative study is to investigate parenting and identity and the non-gestational, non-biological, parent in planned lesbian families. My primary aim was to learn more about four elements of the planned family experience: the decision-making process in choosing to create a family, the role of the non-gestational parent in the family, the non-gestational parent's perceptions of other's attitudes about her identity and role, and to what extent she negotiates a particular parent identity as related to the non-gestational/non-biological role. My secondary aim was to examine the challenges and unique experiences of women who are creating a parenting identity, one not easily recognized in a patriarchal society. In following the participants' lead in open-ended interviews, the lens of the study shifted slightly. It quickly became apparent that participants felt strongly about sharing their stories of making sense of a lesbian identity that included pregnancy and infants. This was particularly true of the older lesbians in the study and much less so for the youngest. Participants shared compelling views about the complexities of making donor decisions, about the challenging sociocultural (and legal) aspects of parenting outside the norm, and the work they did to recalibrate to an egalitarian partnership as the asymmetrical aspect of genetics became entwined in the family narrative.

Most research on lesbians and their families has focused on the welfare of the children and most studies have been conducted by comparing lesbian-led families to heterosexual-led families without examining the beliefs, identities, and experiences of lesbians in their own right (Johnson, 2012 and Padavic and Butterfield, 2011). My goal was to push beyond these comparison models and, as Johnson (2012) and Padavic & Butterfield (2011) have championed,

explore parenting by focusing on the unique experiences of the non-gestational parent. This new parental identity lies at the intersection of a new social identity (Stets & Burke, 2000). My aim was to uncover how non-gestational parents' experiences were influenced by the perceptions (and the judgments) of others in the public domain and the extent to which her own personal identity was challenged.

I sought a sample of 12-15 participants whose daily landscape represented life at one end of the political and social spectrum. With the exception of one, all participants in this study were raising their families in areas known for gay-friendly politics, liberal communities and schools, and access to socially aware medical practitioners.

This topic is important because as the social and cultural landscape changes, we need to enlarge the space where this parent (and her family) exists in the discourse on families, on family development, and in our social contexts. The non-gestational parent has experiences that are unique to her role in the family and deserving of greater understanding. Insight into the experiences of the non-gestational parent can contribute important knowledge to the field of social work as content for coursework and training and for social work practitioners in the field, so many of whom work with lesbians and lesbian-led families.



## CHAPTER II

### Literature Review

Shifting ideological views on the nature of family, more inclusive US laws governing rights of parents and children, and research study participants more willing to volunteer, all contribute to the growing research and information about lesbians and their families. As the privileging of heterosexual-led families is more openly challenged, lesbians and gay men are creating new roles in, and definitions for, family. According to the Human Rights Campaign, since 1995, many important advocates for children's well-being each have issued policy statements declaring that "a parent's sexual orientation is irrelevant to his or her ability to raise a child" ("Professional Organizations on LGBT Parenting," n.d.).<sup>1</sup>

Lesbian parenthood is not a new phenomenon and yet, the way lesbian-led households are constructed has shifted in the past two decades. Whereas many families led by lesbians include children from previous heterosexual relationships or include children who have been fostered or adopted, a newer pattern emerging is the planned lesbian family in which two women in a same-sex relationship choose to become parents, plan a course of alternative insemination for one woman in the couple, and raise their child together as a family.

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<sup>1</sup> American Association of Child and Adolescent Psychiatry, American Academy of Family Physicians, American Bar Association, American Academy of Pediatrics, American Medical Association, the American Psychiatric, Psychological, and Psychoanalytical Associations, Child Welfare League of America, National Adoption Center, National Association of Social Workers, North American Council on Adoptable Children, and the Voice for Adoption.

This literature review will begin with a broad overview of a) lesbian- and gay-led families and b) "comparison studies" between heterosexual- and gay-led families. The review includes an overview of literature as it is related to dynamics within lesbian families, and describes considerations for creating a planned family, including deliberations regarding genetics. The chapter concludes with a discussion of research that highlights the unique challenges of the non-biological parent and, in particular, issues of language, role, and identity.

### **Background Information: Lesbian and Gay Families**

According to a 2010 American Community Survey of 594,000 same-sex couple households in the US, 115,000 have children (Krivckas & Lofquist, 2011). In lesbian-led households with children, nearly 70% included only biological children; less than 25% of these same-sex households had only stepchildren or adopted children (Krivckas & Lofquist, 2011). While the numbers of this family population fluctuate depending on their willingness to be counted, the number of lesbian- and gay-parent households is steadily increasing and, as Goldberg & Perry-Jenkins (2007) note, these families are "represented in every state and almost every county in the country" (p. 298).

As we begin to look inside "family" in the US, to broaden our understanding of the way gender roles, attitudes, and choice have influence on whom or what makes a family, it is impossible to do so without considering a historical and social context for this "relational unit." Lesbian parenting first became visible in wider society in the 1970's and 1980's, coinciding with the removal of homosexuality per se from the DSM-II in 1973, after years of activism by gays and gay allies (Goldberg, 2009). As self-identified lesbians were more open in the community, numbers of lesbian custody cases began to emerge with lesbians losing custody of their children in "near-epidemic proportions" (Benkov, 1994, p.34).

An era of research followed focusing on the "fitness" of lesbian and gay parents. The first wave of research responded to the question, "Are children in gay families normal?" As lesbian and gay family lives are revealed in the literature, researchers seem to have more often than not, positioned them as comparison studies. Comparing lesbian and gay families against heterosexual-led families places heterosexuality as the normative, healthy measure.

**Comparison studies:** Comparison studies aim to explore whether or not children with lesbian or gay parents are disadvantaged by their parents' sexual orientation. Goldberg (2007) cites a number of studies (Chan et al., 1998; Golombok et al, 2003; Tasker & Golombok, 1997; Wainwright et al, 2004) reporting that children of gays and lesbians suffer no less than those in heterosexual-led families and that the general development of children in both types is "quite similar" (p.550). While they do not indicate the assessment methods of the studies, Tasker and Granville (2011) point to research that concludes lesbian "non-birth parents in lesbian-led families are just as involved in rearing as fathers in heterosexual, if not more so" (p.184). For instance, among others, Tasker and Granville (2011) note four different studies that found lesbian co-mothers (non-birth parents) "tended to be more involved in children's daily caregiving than were fathers in heterosexual families" (p.184). The authors describe studies that reveal the ways children in lesbian-led families benefit from more involvement from their co-mothers than children in heterosexual families from their fathers. In a Canadian study, Foster (2005) points to ways that children in lesbian-led households may, in fact, fair better than children in heterosexual-led families. Foster notes previous studies have shown that when compared to heterosexual headed families, children raised in lesbian-led households "experience greater warmth and were more securely attached in the family and see themselves (and others saw them) as more loveable and affectionate and less aggressive" (p.52).

The U.S. National Longitudinal Family Study (NLLFS) was initiated in 1986 to follow 78 children in planned families from inception to adulthood. Gartrell and Bos (2012) report from that study

At the age of 17, the NLLFS offspring were rated significantly lower in social problems, rule-breaking, aggressive, and externalizing problem behavior than an age-matched normative sample of American youth. The development of psychological wellbeing over a seventeen-year period from childhood through adolescence was the same for NLLFS offspring who were conceived with known and unknown donors... Although nearly half the NLLFS adolescents had experienced homophobic stigmatization, family closeness helped counteract its negative effects. (p. 1214)

In a large 2004 study Dutch researchers, Bos, van Balen, and van den Boom recruited 100 lesbian, two-parent families and 100 heterosexual families with children (average age of 5 years) for a study designed to examine whether lesbian families differ from male and female parent families on "factors that are assumed to influence the parent-child relationship such as experiences of parenthood, quality of couple relationship, social support and child-rearing goals" (p.761). The research team used a variety of methods to collect data including having parents keep journals to record daily activities. In fact, their study revealed that lesbian and heterosexual parents measure quite similarly in the data with interesting exceptions. As a whole, lesbian mothers appeared "less-attuned to traditional child-rearing goals (such as conformity) than heterosexual mothers" (p.759). The heterosexual mothers in the study were less satisfied with their partner's "co-parenting" participation than were the lesbian mothers (p.755). The study was conducted in the Netherlands at a time when the authors note, there was a climate of acceptance

compared to other Western countries (p.756); this social perception influences the generalizability of the study.

Despite the positive cast of the Bos, van Balen, and van den Boom (2004) research and others like it, the era of comparison studies suggests that lesbian parents struggle against marginalization in many significant ways. The families contend with anti-gay discrimination with regard to their rights to parent and adopt, in child custody and visitation cases, in fostering, and reproductive health and in negotiating new relationships in the context of "family." The results of comparison studies may be employed as a useful defense against a history of discrimination against gays and lesbians in adoption cases and custody suits, and yet, they are also problematic in that they valorize a heterocentric point of view. They support a portrayal of the lesbian or gay family through the lens of "other."

Taking a bold step forward, Lev (2010) offers a bridge from comparative models to a next wave of research that examines the GLBTQ family. She makes an important claim in a 2010 editorial in the "Journal of GLBT Family Studies." Lev writes, "GLBTQ parenting is moving into a brave new world of recognizing our particular uniqueness as parents, the gifts we give our children because we are queer, not in spite of it" (p.341). In her commentary on research trends, Lev explains,

The research proves that we are fine, healthy, and normal: our scholars question whether being normal matters; and best of all, queer parents, many of whom would never read the research and mostly couldn't care less about the theory, are building their families, on the edge of what was once a dream. We are finally beginning to move past defending our right to be here, justifying our right to parent, and insisting on simply being visible as we are. (p.347)

LaSala, in "Queering Ideas," (2007) makes the case that qualitative studies of LGBT people can contribute to the "existing theory describing general human behavior" (p.61). While it is important to have research that can assert children from lesbian families are as "healthy" as children from heterosexual families, the burden of proving "normalcy" through comparison can only be a limitation for researchers and limit the ways we come to understand lesbian-led families. The results from comparison studies leave one yearning for information that contributes to our understandings of what is *unique* to lesbian parents and children raised in lesbian-led households and how we understand characteristics of lesbian-led families.

The following section moves to the next wave of research, taking the lead from Johnson (2012), Gartrell et al (1996), Goldberg (2007) and Padavic and Butterfield (2011). Johnson (2012), in her recently published paper, "Lesbian Mothers and Their Children: The Third Wave," describes the next wave as "focusing on the unique challenges faced by these families, and how lesbian mothers are creating and raising their families on their own terms" (p.45). This challenge points to unearthing the uniqueness of, rather than the "sameness" of lesbian and heterosexual families.

**Dynamics within the family:** Gartrell, Hamilton, & Banks (1996) and Goldberg (2007) conducted studies during the transition period of lesbians before the birth of their children and after. The studies both investigated the expectations of, and ensuing relationships between, lesbian couples/families and their own parents and other relatives. Gartrell et al.'s (1996) study included 84 families, 70 partnered parents and 14 single parents. Before the birth of their children, 78% expected their child to be accepted by at least some relatives if not their own parents. As it turned out, 69% found that their relationships with relatives had been enhanced as their new child reached toddlerhood. An important distinction emerged in findings; the non-

biological parents rated their own parents as less close to the child than the birthparent's family. Gartrell et al.'s (1996) research does not explore what accounts for this difference. Others (Goldberg, 2007; Murphy, 1989) have found that lesbian parents reported similar experiences with their relatives and yet, report that friends offer the most significant support group.

Commenting on the shifts from lesbian partnership to lesbian parenthood, Goldberg (2009), in more recent research, notes that:

Some lesbian and gay parents find they have more in common with heterosexual parents than many of their childless gay friends. Becoming parents, then, may prompt changes in lifestyle and community that are somewhat bittersweet, as lesbians and gay men restructure their kinship networks in ways that reflect their changing families. (p.75)

The dimensions of this restructuring and the adjustment that lies at the intersection of parenthood for lesbians and gay led families is an area of research that deserves more attention.

Goldberg, Downing, and Sauck (2008) investigated the perceptions of children's parental preferences in lesbian-led families – a study that falls into the Johnson's next wave category of research. (Their study of 30 lesbian couples' perceptions of their 3½ -year-old children's parental preferences follows on the heels of a previous study Goldberg (2007) conducted regarding lesbian-led families at 3 months postpartum.) The authors of the 2008 study found that, over time, children's initial preference for the biological mother due to breastfeeding or differential time spent with the child, shifted to preferring both parents equally.

While this effect may be similar to a recalibration that takes place in all families in which one parent breastfeeds, the study does not highlight the unique ways lesbian parents may strategize during this transition time. The study does not include perceptions of children's preferences beyond age 3½, nor does it include parents' perceptions of how others in the family

or in their social context view their identity or their role. There is limited research regarding children's developing perceptions of their parents in planned lesbian families though, Tasker and Granville recently (2011) looked more broadly at perceptions of "family membership." The two researchers (2011) devised a genogram technique for exploring children's conceptions of family by gathering data from families in which the children were conceived by donor insemination and included input from both children and adults. Through the "Apple Tree Family" genogram, both children and adults tended to concur in a description of families as "a core unit surrounded by a wider family network that included non-biological and biological kin" (p.182). The genogram tool neutralizes titles and focuses in on role and relationship providing insights into these relationships.

Goldberg (2009) focuses in on the ways both lesbian and gay families deal with being outside the heterosexual-led family norm. She writes,

Aware of the realities of heterosexism, including the possibility that their child will be teased because of their family structure, lesbian and gay parents express concerns about how best to navigate the dual challenge of modeling a sense of acceptance and pride in one's family structure while also preparing their children for possible encounters with stigma" (p.90).

As family life moves, inevitably, into the public domain of schools, doctors' practices, and religious institutions, lesbian and gay-led families will find many opportunities to navigate assumptions of a heterosexual lifestyle and homophobic remarks, including remarks that work to negate the parent role of either parent. It is useful, then, to consider some studies in which parents articulate the benefits of being raised in same-sex parented families.



Johnson and O'Connor (2002) interviewed over 400 lesbian and gay parents and found that "89% of lesbian mothers and 82% of gay fathers felt that their children would benefit in some way from having grown up with gay parents" (p.97). The study pointed to parents' belief that growing up in a family that is perceived as "different" would be a positive foundation for their children to learn tolerance and acceptance of others. Lesbian parents also felt that while living in a heterosexist society was indeed stressful in certain ways, it also "functioned to create a greater sense of openness and communication within the family. They viewed their children as more open to discussing their difficulties with them, given that their parents could naturally empathize with their experiences of feeling different or unacceptable" (p.97). Lynch and Murray's (2000) and Muzio's (1995) studies show similar results. These studies highlight the view shared by many lesbian and gay parents that growing up in lesbian and gay households outside the norm hold many benefits for their children. Muzio (1995) reports that parents feel children would be more appreciative of human diversity as a function of their family experience and that they would cultivate a greater tolerance for diversity and sensitivity to discrimination. Muzio (1995) also notes that lesbians' shared parenting or co-parenting roles may be an asset in that children raised with this less gender-stereotyped model could witness and experience freedom from traditional men's and women's roles. Lynch and Murray (2000) make the point that children are not benefiting *as a result* of their parents' sexual orientation but rather from *living within* a family in which one's parents' sexual orientation is stigmatized.

Still, Gartrell and Bos (2012) describe in their report on adolescents with lesbian mothers that since the 1970's, research in and beyond the US has been conducted most often to determine the influence of lesbian and gay parents' sexual orientation on their children. In particular, Gartrell and Bos (2012) note that questions about whether children of lesbian or gay parents show

evidence of atypical gender identity, psychological maladjustment, stigmatization by peers or sexual abuse by parents, and whether they will identify as LGBT at maturity have driven research.

In response to just these types of questions about the psychosocial wellbeing and development of children in lesbian and gay families, the American Psychological Association (2005) published an accounting of lesbian and gay families that concluded with the following:

Not a single study has found children of lesbian or gay parents to be disadvantaged in any significant respect relative to children of heterosexual parents. Indeed, the evidence to date suggests that home environments provided by lesbian and gay parents are as likely as those provided by heterosexual parents to support and enable children's psychosocial growth. (p.15)

Having made inroads in establishing the safety of children, and perhaps, advantage, afforded children raised by lesbian or gay parents, these various types of studies may continue to have influence on issues of custody, visitation, adoption, and foster care – and, in turn, help press the boundaries of how "family" is understood. The research has its limitations; primarily, these are small studies involving predominantly white, lesbian parents who are of relatively high economic status. Still, in reference to criticism about these limitations, Gates, Badgett, Macomber, and Chambers (2007) point out the studies are "remarkably consistent in showing no negative consequences for children of GLB parents with regard to standard well-being measures" (p.4).

As research continues to surface data about lesbian and gay families, it will be important to learn about how couples' relationships and parental identities continue to evolve as their children develop. How does the division of labor, or parents' corresponding parental roles,

evolve as children grow older? What kind of supports do lesbian parents receive from their families and communities and how do families and communities influence the family system? How do child-rearing attitudes and practices evolve as the families develop? What strategies do lesbian-led families employ in the face of a heterocentric culture? As we move from the broader focus on both lesbian and gay families to focus specifically on lesbian-led families, we turn to research on the lesbian *planned* family. In particular, the next section will discuss relevant research on the creation of the *planned lesbian family* defined as one headed by two lesbians who create a family through use of donor or alternative insemination, hence a most purposeful – not accidental – beginning. (Iguarta, 2009; Nordqvist, 2012; Wall, 2011).

### **The Lesbian Planned Family: Intention and Deliberation**

This family type is necessarily founded on a series of purposeful steps that grow out of long-term planning and consideration. In the face of significant challenges as women partners move to parenthood, current research reveals that the planned lesbian family is built on a foundation of decisions and agreements.

Unlike heterosexual families, it is impossible for gay or lesbian families to be created by accident; in fact, for two lesbians who decide to create a family, planning matters. The planning process encompasses many layers of logistical and theoretical decisions often considered over a long period of time. Potential parents need to decide who will give birth to the child and deliberate about the considerations that drive this decision. They will need to decide who the donor will be and if the couple will work with a sperm bank or fertility clinic. Will the donor be anonymous? Is there insurance coverage to address the cost of insemination or doctor's visits? How do financial implications and legal issues drive the plan? Lesbian parents tend to be older than the average heterosexual parent and as such, age is a consideration for risk of pregnancy

complications including genetic diseases, gestational diabetes, and pre-eclampsia (Krivickas and Lofquist, 2011, p. 9). Using alternative insemination methods prompt other questions to settle such as: will the couple plan to use their own eggs later in life for in vitro fertilization? And, will the couple buy or store a supply of sperm from the same donor so that future children are genetically related? For lesbians planning families, there are few social models for how to imagine the answers to questions about what lies ahead and how complex social messages may influence decisions about family. Research is just beginning to tap into questions such as how the non-gestational parent considers the pregnancy stage, how breast-feeding influences parental identity and roles, how a couple who does not divide partnership roles by gender copes with a new construct of one pregnant partner and one who is "standing by," and finally, how couples resolve issues of the inclusion or exclusion of the donor.

Wall (2011) conducted an oft-sited, international study of 478 women asking "What is the most difficult thing for a lesbian woman considering parenthood?" It is interesting to note that in Wall's analysis of the 397 responses to the qualitative portion of the questionnaire, women were fundamentally "delighted to be talking about their planned reproductive decision-making process" (p.99) and that this positive stance was reflective of the *intentionality* of the decision-making. Wall's (2011) study points to the five most significant factors lesbians take into consideration: "logistics of starting a family, financial strain of adoption and / or pregnancy, loss or lack of social and familial support, obstructive laws and politics, and fear of societal intolerance" (p. 100).

The path to parenthood can be a costly one for lesbian-led families. A single cycle of IVF averages from \$8,000 to \$10,000 and success rates drop off dramatically for women after 37 years, with a higher risk of miscarriage increasing after 40 (retrieved from

<http://www.advancedfertility.com/>). The financial costs associated with getting pregnant are coupled with costs of setting up legal documents deemed essential protections for lesbian families. These parents confront legal costs for second-parent adoption, including home study fees that can range between \$1500 and \$3,000 (Goldberg, 2009) and may orchestrate legal procedures for their child's financial security by drawing up wills, trusts, and considerations for joint conservatorship (Bergen, Suter, & Daas, 2007; Goldberg, 2007). These significant costs (and a comprehensive navigation of the home state system to make certain the parents' and children's rights are protected to the fullest extent) are out of reach for many lesbian families (Goldberg 2009, Wall 2011). Wall's (2011) study points out, too, that the smaller the lesbian parents' financial resources, "the more important support of extended family members becomes"(p. 103).

**Planned lesbian families and genetics:** Once the decision to create a family is made, attention to the issue of genetics is both a practical and philosophical consideration. Goldberg (2009) has conducted several important and oft-cited studies on topics related to lesbian and gay families and their children. In her comprehensive reference book, *Lesbian and Gay Parents and Their Children: Research on the Family Life Cycle*, the author writes this about a particular stance toward biological parenthood:

Many lesbians pursue biological parenthood as opposed to adoption because they believe that their family members are more likely to accept a child who is biogenetically related to them than an unrelated adopted child. That is, they perceive their families as more likely to overlook or tolerate their sexual orientation in order to have a relationship with a 'real' grandchild or niece or nephew but not necessarily with an unrelated stranger. (p.57)

However generalizable or persuasive this belief is, it does point to the ways a biological or genetic link to offspring may have more bearing for lesbian couples than heterosexual couples who are also weighing a decision between adoption or conception. Chabot and Ames (2004) found, in their qualitative study of 10 lesbian mothers, that the influence of the women's immediate social network was significant. Reading about, talking to, and hearing of lesbians who had children by donor insemination offered a legitimized pathway to achieving parenthood.

Biological family ties and implications of race will figure into the donor plans, perhaps particularly pressing in the case of interracial partnerships. Very few studies have been conducted in exploring the experiences of lesbians navigating and crafting their own images of family or "kinship" and connectedness in relation to donor conception (Dunne, 2000).

In a most recent study, Nordqvist (2012) conducted qualitative interviews of 25 lesbian couples in England and Wales regarding their negotiation of the donor conception process and the meaning of genetic parenthood. In her study, Nordqvist (2012) particularly notes the orchestration of "foregrounding some aspects of parenthood (for example parental intention, gestation and birth) whilst marginalizing others (for example, sexual conception, gametes, and biogenetic linkages)" (p.299). While Wall's (2010) study summed up significant practical issues for lesbians planning parenthood, Nordqvist's (2012) study moves us closer to the *identity* issues that surface.

Nordqvist (2012) suggests that the way in which lesbian parents position the donor with regard to potential parenthood is perhaps the most critical consideration in their planning. Most parents in Nordqvist's (2012) study preferred anonymous donors, fewer hoped for the donor to play a role tangential to parenthood, and fewer still preferred a donor who would be involved in the upbringing of the child (p. 301). The lesbian couples in the study that preferred anonymous

donors most often planned for this avenue as a way to protect their autonomy of parenthood and then focused in on the cultivation of their own "joint parenthood." By choosing donor anonymity the women safeguard their position as a joint parenthood and, too, avoid the potential threat of a challenge from the natural legal parent (p.301). Nordqvist (2012) articulates the complexity of negotiation for parenthood reflected in many studies. She eloquently theorizes:

The couples' accounts carefully balanced kinship values such as the couple relationship: being the bases of parenthood, with love, intimacy, responsibility and knowing one's origins. The construction of parenthood that emerged sidelined heterosexuality, fatherhood and biogenetic links, whilst emphasizing parenthood as a dyadic project, confined to the loving couple and as based on ethics of care, love, intention and financial responsibility. (p.302)

For many lesbian parents, the draw to know one's origins problematizes the choice of the anonymous donor. As author, Aimee Klemptauer Miller (*She Looks Just Like You: A Memoir of (Nonbiological Lesbian) Motherhood*) noted in her memoir and in a 2012 Smith College symposium, she and her partner intended to protect their parenting as a "dyadic project" just as Nordqvist (2012) describes. Miller wrestled with whether to choose an anonymous donor and described the couple's efforts to balance their need to protect the authority of their parenthood with the anticipation that their child may someday want to know her genetic roots, pursue the donor's identity and, perhaps even, cultivate a relationship with him. Similarly, many couples in Nordqvist's (2012) study negotiated the terms of an intimacy contract with the sperm donor articulating the distinction between "family" and "heritage" and, in the process of protecting their autonomy of parenthood, allowed for "meeting the child's need" (p.303). Participants in Nordqvist's (2012) study highlight the idea that a known family donor requires being able to

disentangle genetic relatedness from parenthood and this, they viewed, was simply too risky.

"The donor had a conceptual value, but only insofar as the information could be made available *at a later stage* and only as long as it did not threaten the parental authority of the lesbian couple" (p. 305). This decision, one with significant implications for each family member, is an inescapable feature of the planned lesbian family. However, this element of decision-making is not only about the psychological or personal needs of the couple; considerations for legal implications are felt particularly by the non-gestational parent whose right to parenthood requires, still, some point of interaction with the legal system.

The studies, on the whole, provide insights about the decisions planned lesbian families consider. Research shows that there is no inherent harm in being raised by lesbian parents and illustrates the unique challenges and choices they face in creating families. This literature review narrows in to focus in on the family and on the role and identity of the non-genetic parent. Once lesbian partners have deliberated and attended to the challenges of becoming parents by donor insemination, the planned lesbian family now confronts a new challenge to identity: regardless of the equal nature of their non-gendered roles and positions, one parent is the birth parent – and one is not.

### **The Non-Gestational Parent in Planned Families**

Johnson (2012), Padavic and Butterfield (2011), and Clarke, V. (2008) and the foundational work of Muzio (1993) explore roles of lesbian mothers with a special emphasis on the role of "the non-biological mother." Their studies, like many studies of lesbians who parent, are focused on the identity and role negotiation as it is significantly influenced by the tensions of the legal challenges to parental identity, something instantly conveyed on heterosexual parents at the moment of their child's birth. Yet, looking toward family functioning, Goldberg and Perry-



Jenkins (2007) interviewed lesbian couples 3 months pre- and again 3 months post-birth. During this primary stage of parenting, the research reveals the biological parent taking the lead in childcare while the non-biological parent work more hours of paid work – even as both parents share equally in housework. Goldberg refers to this study in her later work (2009) noting that despite their unequal contributions to childcare, the majority of women (60% of birth mothers and 80% of non-birth mothers) considered both partners to be equal co-parents (p.76). The remainder of the women in her study perceived of the birth mother as "the more primary parent" (p.76). They attribute this to "breastfeeding, the biological or genetic bond, and the fact that the birth mother spent more time with the child. Importantly, many non-birth mothers used a number of strategies to compensate for the biological differential and their inability to breastfeed" (p.76).

Tasker and Granville (2011) report from their study of 15 children in 17 lesbian-led families that collected data from children and from their parents, "The lesbian mother who did not give birth to her child may struggle to achieve social and cultural recognition of her parenting role and this may have implications for her identity *within* her family too" (p.184).

Padavic and Butterfield's (2011) conducted a qualitative study of 17 women participating in a support group in a state that denied them legal rights of parenthood. The study focused on the ways non-biologically related and non-legally related women parents determine parental identity in a social system "that continually reminds her of her liminal identity" (p.176). Their data revealed that roughly half of the participants associated with identities related to "mother" and "father" while the other half perceived their identities as a collectively generated category they termed "mather," a hybrid of mother and father. The women referred to themselves as "mathers" in the public domain and requested the term be used in turn. In this, the group individually and collectively created a social identity that carved out new parenting territory.

This socially motivated linguistic move is an important element of staking a claim to a personal and parental identity in a heteronormative culture (Berger, Suter, & Dass, 2006). Yet, the study describes the women's "external and internal assaults on their sense of themselves as parents" (p.192) and found that many institutions and individuals they encountered challenged their parental identity claims. As compelling as the Padavic and Butterfield's (2011) study is regarding the struggle for parental claims, this research specifically examined the challenges of non-birth parents who lived in states where they were denied legal rights of parenthood. What might we learn from the negotiated roles of non-biological parents in states where they are free to marry or where second-parent adoption is legal? If the legal struggles are diminished, what will emerge as non-biological parental identities are crafted outside that sort of legal resistance?

**The non-gestational parent: language and identity:** It is a telling phenomenon that memoirs and essays describing the particular experience of the non-gestational or non-biological parent are increasingly found on bookstore shelves (Aizley, 2004; Goldberg & Rose, 2010; Miller, 2010; Thompson, 2002). Hammack & Cohler (2011) describe the importance of these types of narratives in more fully making meaning of identity:

The analysis of memoirs of subordinated groups is extremely useful in social science research because it provides a window into the way in which particular individuals create coherence through life writing while simultaneously seeking to influence the master narrative of the group through their account. (p. 165)

The proliferation of non-biological parent memoirs illustrates a need to explain and describe one's experience, one that lies at the edges of a heteronormative society. In effect, Hammack & Cohler (2011) make the case that personal narratives force open the discourse by pushing back against the stigma (p. 165).

Aizley (2004), the editor of a collection of first-person essays by non-biological parents, makes the case that the writings are written for:

non-biological moms everywhere who grapple not only with the usual trials and tribulations of parenthood, but also with the sometimes arduous and revolutionary task of creating their own role as mother/parent in their homes as well as in the outside. It is for the women who would remind us that, just because they are women with children, they are not necessarily 'mom's or 'mommies.' It's for those who until now have had to look toward fathers in an effort to locate themselves in the vast open waters of parenting. (p.xii)

The memoirs offer anecdotes of varying paths to parenthood, describe a range of perspectives of the non-biological parent on the gendered role of "mother," and represent a claim to an undeniable place in the parent and family discourse (Gabb, 2005). They represent personal narratives of the non-birth mother who persists in claiming an identity of her own.

In a recent (2012) symposium at Smith College memoir author, Aimee Klempnauer Miller, explained to the audience her negative reaction to the term "other mother:"

*'Other mother?'* That label is too much like *'not real' mother*. And, I don't like 'co-mother' either. It's sort of like saying, [she gestures, looking from her left hand to her right,] 'pilot...co-pilot.' That sounds as if one parent is really in charge and the other is ... *not*. In my case, I am 'Mama.' It was just not that hard to come up with our *own* language to describe me in our own family.

In their essay "In Search of a Name for Lesbians Who Mother Their Non-Biological Children," Brown and Perlesz (2008) describe a sentiment also reflected in parents' memoirs:

There is no universally accepted, understood, or recognized term that adequately describes and defines the relationship of a parenting lesbian to her children when she has not given birth to those children. The power of language to legitimize, or the lack of language as it serves to devalue identity, is symbolic of how society views her (p.454).

In a planned lesbian family, the non-gestational parent is not a stepparent, foster or adoptive parent and, as such, she challenges the norms that dominate cultural definitions of parenthood and family (Brown & Perlesz, 2008). The challenge is that motherhood is primarily a manifestation of genetic tie, of blood connection and the lesbian mother who has not given birth confounds this perception (Bergen, Suter, & Daas, 2006; Muzio, 1996,). References to "other mother" or "non-biological mother" are examples of describing the parent through the lens of "not," which can serve to devalue or distort an emphasis on who this parent is and ways in which she contributes to and is connected to her child (Bergen et al., 2006). It is significant, as Brown & Perlesz, (2008) point out, that titles suggesting a cooperating or parallel relationship such as "co-parent" or "co-mother," projects a "sameness" that is also inadequate. These terms do not contribute to highlighting the difference between or uniqueness of the two parents.

As Crawford (1987) notes, "Having children pushes a lesbian into regular social contact with the straight world" (p.200). The need for those in the public domain to make sense of the non-biological (co-mother, co-parent, other mother, social mother) parent's "place" in relation to her own family is "felt as persistent" (Miller, 2010). Brown and Perlesz (2008) have found vast differences between lesbian-parented planned families and stepfamilies, both in how the parenting relationship is negotiated and the choice of language to describe this relationship. They write:

What becomes more difficult for these [planned] families is the translation of this

ordinary and normal experience into the other mainstream culture that disqualifies this experience and labels it as odd, unusual, or at worst, wrong or bad for the children (p.463).

In a review of literature in the "Journal of GLBT Family Studies," Brown & Perlesz (2008) identify 45 different terms used to describe the non-biological lesbian parent. They conclude that the language is determined by negotiated roles and understandings of motherhood and family dynamics within families and it has the power to "acknowledge and affirm the distinctive parenting contribution of lesbian mothers who have not given birth to their children" (p.465).

### **Summary**

For those who press against the boundaries of family norms by creating planned families, forming an identity as the non-gestational parent can be especially challenging. While the biological parent is afforded a genetic, blood tie to motherhood, the non-birth parent is bound to the child through intentionality (Bergen, Suter, & Daas, 2006; Dunne, 2000; Goldberg, 2007). It is the family's task to seek a legal and, in many cases, costly tie to parenthood through second-parent adoption (Wall, 2011). Planned lesbian non-biological motherhood is a socially constructed identity, one with a contemporary history and few role models. These lesbian parents are forging ahead in cultivating new social roles, at the same time that generational expectations of motherhood naturally shift. Unlike heterosexual mothers, one can assume that non-biological lesbian mothers are in new territory without benefit of their own mothers' roles and styles fitting their circumstances. Some lesbian parents find that their connection to heterosexual women through motherhood is a stronger tie than to their lesbian non-parent friends and community and thus, the non-biological parent, in forming a parental identity, will need to do so side-by-side the heterosexual mothering ideal (Goldberg 2009).

The challenges of identity formation for non-biological lesbian parents in planned families can be viewed through the lenses of both social identity theory and identity theory. Identity theory explains that the self is reflexive in that it can "categorize, classify, or name itself in particular ways in relation to other social categories or classifications" (Stets & Burke, 2000, pp. 224). In social identity theory, a person holds a social identity through a common social identification or self-perception as one of the same group (Burke & Stryker, 2000; Stets & Burke, 2000). There are specific focal points of social identity formation that are salient for the non-biological mother: self-categorization and social comparison (Hogg and Abrams 1998). If this parent views herself as a member of the group (motherhood), but the heteronormative group does not view her in the same way, what becomes of her social identity? (Berger, Suter, & Dass, 2006; Hequembourg & Farrel, 1999; Wall, 2011; Goldberg & Smith, 2008; Sophie, 1986).

Berger et al. (2006) describe symbolic resources lesbian parents use in attempts to construct an identity as a legitimate parent: "address terms signifying motherhood for nonbiological mothers, children's last names, and legal moves" (p. 215). The idea of symbolic resources is a fruitful one for further study in understanding the proactive ways that lesbian parents, and non-biological parents in particular, activate and confirm a tie between the mother and child. Stets and Burke (2000) explain that at the essence of identity theory is the "categorization of the self as an occupant of a role, and the incorporation, into the self, of the meanings and expectations associated with that role and its performance" (p. 225). The non-birth parent in a planned family is navigating new territory both as parenting roles naturally shift over generations and pressing against the definitions of normed heteronormative gender parent roles. Yet, even as this parent might incorporate "the meanings and expectations associated with that role and its performance" (p.225), this effort does not necessarily manifest in acceptance or

group membership in socially constructed motherhood. The published memoirs and blogs of non-biological mothers which stake a claim to the discourse of parenthood align with the Bergen et al. (2006) argument that "increasing numbers and visibility of lesbian families and the increased sharing of information about strategies...may herald increasing social and, perhaps eventually, more widespread legal recognition for non-biological mothers" (p.217).

The current study focuses in on the non-biological parent and her experiences of parenthood. Parents are asked to describe their decision to parent, the experiences and beliefs that led to the decision to be the non-birth parent, and to articulate their views and strategies with regard to identity. Though it is likely that the findings of the present study will reflect many of the unique challenges of the non-biological parent described in this review, it is equally likely that new ideas or themes will emerge as the legal challenges continue to diminish and parents of all types press to be included in the discourse on family.

## **CHAPTER III**

### **Methodology**

The purpose of this study is to investigate parenting and identity and the non-gestational, non-biological, parent in planned lesbian families. I examined intention, quandaries, bonds, and coping strategies utilized by parents during the planning and post-birth years. The investigation explored these parents' choices with regard to gestational roles, considerations inherent in making choices regarding donor as a person or donor as contribution, implications of the partners' pregnancy phase for the non-gestational parents' identity, feeding and strategies for cultivating parent and child bonds, and the evolution of ideas about the characteristics of identity. The population under investigation was lesbian, non-gestational parents of children at least 14 years or younger. The information and data was obtained from parents who lived with the gestational parent for at least the first two years of their child's life.

The study was a qualitative study using open-ended questions to gather the narrative data. Using narrative data allowed for an analysis of how the women in this study create meaning of their lives as lesbian non-gestational parents.

### **Sample**

A purposive, snowball sampling technique was used to recruit participants. I contacted specific individuals, in person, via e-mail and Facebook whom I already knew or could direct me toward parents who might be interested in participating. Inclusion criteria for participating were the following: 1) parents who were 18 years old or older; 2) parents who identified as lesbian; 3) non-gestational parents with a child age 14 or younger who was conceived through an assisted



conception process; and 4) parents who live in the same household with the biological parent partner for at least their first two years of parenthood. The final sample size was 13 participants.

I made an effort to recruit a diverse sample in regard to race, ethnicity, and age. During my initial contact with a potential participant, I stated the required criteria for participation.

### **Ethics and Safeguards**

The interviews were conducted in person, in a semi-private public space, such as the local library, to ensure confidentiality. I conducted phone interviews at the convenience of the participant or if the participant did not live in the same area as the researcher. The interviews were audiotaped with the consent of the participant. To ensure confidentiality per federal guidelines and the agreement with participants, once recorded the data was transcribed by a professional transcriber who signed a pledge of confidentiality. All identifying information was removed. The coded information and other documents were password protected during the research process and will be stored for at least three years in a secure location, after which time all information will be destroyed if no longer needed.

I explained the purpose and the design of the research project, and the nature, benefits, and risks of participation. I informed participants that the interview was voluntary. I explained that all information gathered would be held with strict measures of confidentiality per federal guidelines. I explained that participants were free to withdraw at any time during the interview, or after the interview was conducted and that all of their information will be withdrawn from the study and immediately destroyed provided they withdrew by April 1, 2013. Each participant signed an Informed Consent Letter (see Appendix B) and I provided participants with a copy of the Letter of Consent with my signature.

Participants were informed that there would be no financial compensation for their participation in the study. They were informed that although they might not directly benefit, aside from sharing their experience, their participation could provide insight regarding the support of non-gestational parents that could assist other social workers, mental health clinicians and community members in better understanding how to meet the needs of lesbian parents. By learning about how the non-gestational parent experiences the decision-making process, the initial transitional years, and their developing role, it is possible for clinicians, individuals, and practitioners who work with lesbian-led families may develop and implement improved treatment interventions. In addition, the practitioners may be better positioned to advocate for the removal of unnecessary barriers and gaps in service for lesbian parents.

### **Data Collection**

The Smith College School for Social Work Human Subjects Review Committee approved this study (see Appendix A). Participants were provided with the Informed Consent letter at the time of face-to-face interviews and in advance, in the case of interviews conducted over the telephone.

Data was obtained through semi-structured interviews that ranged from 45- minutes to one hour, depending on the length of their answers and their desire to expand beyond the interview questions I raised. The questions were open-ended to elicit in-depth responses from participants that describe the challenges, concerns, and perceptions about the new roles and identities of parenthood. Participants were asked at least ten open ended questions pertaining to their decision-making process regarding their non-gestational role and the ways they might characterize their position and identity within the family. Participants were also asked about others' perceptions of their non-gestational parent role (including those of their partner, the

child's grandparents and extended family members, their child, and those in the public arena). Participants were asked to supply basic demographic information including racial and ethnic identity, age of both parents, age of children, and length of relationship with their partner, legal marriage status, second parent adoption status, and employment status. Narrative data were gathered by means of audiotaping. A professional transcriber who signed a confidentiality agreement, transcribed all interviews, and identifiable information was disguised or removed to ensure confidentiality.

### **Data Analysis**

I gathered data by tape recording interviews. Each transcript was coded thematically, making note of the various stages of creating a planned family, such as "considering lesbian identity and pregnancy," "choosing donor," "sharing the transition of pregnancy," "bonding," "role and relationships." Data were analyzed by conducting a constant comparative method. I looked for common patterns and themes among participants with an eye to the stages, challenges and strategies, observing both similarities and differences in response. Quotes from participants most illustrative of themes were noted for inclusion in the findings section. The coding process required numerous readings of each interview searching for similarities and differences throughout the data. This type of constant comparative analysis supported an analysis of participants' reflections surfaced by repeating themes and exceptions to those themes.

I created a memo of potential themes with brief descriptions of meanings and a reference list of relevant participant quotes. I shared the collection of codes and possible themes with my advisor and with her guidance, defined the final set of themes and structure for the findings section.

The openness of this type of analysis, rather than searching for evidence of a hypothesis, allowed for unexpected results to emerge. Participants spoke much more extensively about the donor considerations than I had anticipated. The notion of thinking and acting in strategic ways *with one's partner* in meeting the demands of cultivating a family role that is new in our culture emerged as an important element in many interviews. Those interviewed described "bonding" as an unexpectedly powerful new force between the nursing parent and infant, one that many parents worked intentionally to create for themselves. Coming to an understanding about infant/parent bonding, sharing one with the nursing parent and cultivating one's own as a facet of embracing parenthood was an unexpected common theme and one that deserves a study of its own.

## CHAPTER IV

### Findings

#### Introduction

This chapter presents themes that emerged from an analysis of data collected from qualitative interviews with a sample of 13 non-gestational lesbian parents. All study participants were the non-biological and non-gestational parent of at least one child aged 14 or younger conceived using donor insemination and born into the planned lesbian-led household. Table 1 provides an overview of the demographic characteristics of the sample.

**Table 1. Demographic Characteristics of the Sample**

Variable	Participants
Age	Mean (43), range (33 to 52)
Race	
white	100%
Ethnicity	
Euro American	54%
Eastern European Jewish	23%
French/Native American	8%
Mexican European	8%
Portuguese European	8%
Employment Status	

Work full-time	54%
Work half-time	31%
Full-time parent	15%
<b>Geographic Location</b>	
New England	92%
Mid-Atlantic States	8%
<b>Marital Status</b>	
State-recognized marriage	92%
State does not allow same sex marriage	8%
Length of Relationship	Mean (12 years) range (2 to 25)
<b>Adoption Status</b>	
Child legally adopted	77%
Paperwork in process	15%
State forbids lesbian second parent adoption	8%
Age of Partner	Mean (38 years), range (33 to 51)
Age of Children	Mean (5.5 years) Range (8 months to 16 years)
<b>Race/Ethnicity of Children</b>	
Same as parent	92%
Declined to respond	8%

All study participants took part in hour-long, one-on-one, open-ended interviews that engaged them in reflecting upon the following aspects of parenthood:

- Decision-making in coordinating and achieving pregnancy
- Expected and unexpected challenges in creating a family
- Perceived needs regarding donor selection
- Perspectives on the pregnancy phase
- The post pregnancy year
- Evolution of a personal identity and social parental identity

A qualitative analysis of interview data revealed some strong commonalities in study participants’ parenting experiences. The foundation of each planned families rests on the couple's shared intentionality in creating their family. This shared enterprise transforms, over time, differently for the child bearing parent and the non-gestational parent. Table 2 displays major themes that emerged, viewed through the lens of shared challenges and strategies. Many of the shared challenges identified in Table 2 stem from the fact that there is no culturally embedded precedent for study participants and their partners to follow on their journey to parenthood. The strategies in Table 2 show the central role that intentionality—planned approaches that guide how the family will function and support all members—has played in helping study participants redefine our society’s traditional paradigms of parenthood and create strong family units.

**Table 2. Major Themes**

Shared Challenges	Shared Strategies
<ul style="list-style-type: none"> <li>• <b>Forging A Parental Identity:</b> All study participants needed to develop new ways of thinking—about themselves and being a parent—and discard traditional definitions of family</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Having Supportive Partners:</b> Partners play an important role in ensuring that doctors, teachers, and others in children’s lives do not marginalize non-gestational parents.</li> <li>• <b>Anticipating Challenges:</b> Being prepared</li> </ul>

<ul style="list-style-type: none"> <li>• <b>Redefining Sense of Self Past 40:</b> Older study participants experienced greater challenges in forging a parental identity than younger participants.</li> <li>• <b>Choosing the Role:</b> Many study participants found that deciding who would be the biological parent led them to reexamine their identity.</li> <li>• <b>Feeling “Invisible”:</b> Many study participants felt invisible, and this was exacerbated by how others viewed and treated them.</li> <li>• <b>Navigating Early Bonding:</b> Finding ways to bond with infants was disconcerting for many study participants at first—and had the potential to create discord in partnerships.</li> <li>• <b>Defining the Donor’s Role:</b> Many participants and their partners needed to carefully consider and discuss how the family would view the donor.</li> </ul>	<p>for challenges and receiving outside support is key to paving a smooth pathway for the non-gestational parent.</p> <ul style="list-style-type: none"> <li>• <b>Sharing a Name:</b> Choosing a shared name—a new name or hyphenation of both partners’ names—can help the family coalesce.</li> <li>• <b>Honoring Children’s Feelings:</b> Listening to and honoring children’s feelings about sperm donors can help families—and children—grow stronger.</li> </ul>
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Each of the following sections provides an in-depth examination of these shared challenges and shared strategies. Participants' names have been changed to pseudonyms.

### **Shared Challenges**

**Forging a parental identity:** Findings indicated that in the earliest stages of parenthood—planning the family, deciding who will carry the child, getting pregnant, nursing—the couple is called upon to make difficult decisions that have the potential to put stress on their bond. As each phase of cultivating a family presents itself, the non-gestational parent's role and her relationships within the family undergo a redefinition, a recalibrating of who she is in relation to her partner, her child, and the world around her. The majority of the participants reported that this process of forging a parental identity is extremely challenging. The decision about who will be the gestational parent is sometimes determined by the health risks in carrying a child to term or the ability to conceive. Many of the interviewees identified age and accompanying risks for pregnancy, heterosexist legal and medical support challenges, and accompanying restrictive stereotypes of the lesbian female identity as challenges to forging an identity as a parent.

For some, their core lesbian identity was integral to deciding which woman would carry the child. Each of the parents described a range of issues that influenced their decisions to have a family and, most often, began by reflecting on her identity as a lesbian as it is integrated with her sense of "self."

**Redefining sense of self past 40:** Findings from this study suggested that it was considerably more difficult for older lesbians to forge a parental identity than it was for younger lesbians. Generally, the older the woman, the more significant was the work to assimilate a "parent" identity with a "lesbian" identity.

Some parents explained that the idea of birthing a baby simply did not "compute" with their lesbian identity. Esther, a 52-year old lesbian parent, reflected on having grown up with expectations that parenthood was a privilege solely of heterosexual-led families. Representative of many of the older lesbians in the study, she shared this generational aspect of identity:

It's not something growing up I imagined I *could* do. I was born in 1960, so as a lesbian in those particular decades, there wasn't like a sort of ready path to parenting. When I'd come out, I'd known what was possible for us. I had accepted it and said, 'All right, that's it. I'm a lesbian and I won't have children.'

For most of the older lesbians in the study, the words "pregnant lesbian" had been internalized as contradictory terms. For some of the participants who came out in the 1970's or early 1980's the feminist movement and "gay liberation" were hard at work pushing against the prevailing view (and DSM classification) of homosexuality as a mental disorder. Margot's view helps us appreciate the effort to recalibrate this view of identity:

I always wanted to be a parent. It was always in my paradigm of what I wanted out of my life, being the mother. And so, coming out at 19 challenged that very consciously for me. So much so, that I entered therapy for the first time about this issue. How was I going to live a life as a lesbian and be the mother I thought I'd be one day? It didn't seem possible.

Similarly, Deborah a 52-year-old mother of a toddler commented:

When my daughter was born, I was 49. I had not come up seeing myself giving birth to a child. I always thought maybe it was my destiny or my fate, you know, because I am a lesbian and that's just how it was going to be.

Polly, younger than Margot or Deborah, did not have the same reaction. She and her partner, parents of an adopted child and a child through donor assistance, said:

We both always wanted to be parents. And just because we were in a same sex relationship, we felt that that wasn't something that should hold us back. So we decided to move forward with exploring what was out there.

Two older women in the study, Esther and Char, had no intention of becoming parents but met and fell in love with women who were determined to have families and to bear children. These two participants each reacted by reconsidering their lesbian identity and the extent to which theirs was elastic enough to incorporate "lesbian parent."

Esther explained:

I consider myself a butch...I made it this far without having kids. You know sort of the androgynous period of the '80's? I lived there very comfortably. I came from a time of feeling like the benefit of being a lesbian was there was no accidental pregnancy. You know, lesbians were just lesbians. And then all of a sudden lesbians started having babies. My lesbian community shifted tremendously.

For these parents, the *feasibility* of becoming a parent was novel, an unexpected cultural turn, and with that, they describe a recalibration of identity. For others, the idea of motherhood ran counter to a fundamental aspect of *being a* lesbian. Some women expressed views of their lesbian identity as directly linked to a rejection of all heterosexual-based gender roles including that of bearing children. For several parents, this element of identity remains a confusing issue. For some of the participants, choosing not to bear their children arose from a conception of a lesbian or queer identity did not include using their bodies to bear children. Char, parent of a 10-year-old child, offered a reflection that helps illuminate this point of view:

I never thought of myself as biologically having children...I never wanted to. I've been thinking a lot, lately, about gender and what that means and I never connected with that

part of being female. I call myself queer. I'm non-gender conforming. I didn't connect with that kind of female experience. As I mulled over the decision whether to carry or not, the sense of my queer identification has to do with where I'm at and where I was at and why it has never occurred to me that *I* would bear a child."

Rita is a 41-year-old, full-time caregiver and non-gestational parent of her daughter.

When asked about the extent to which her lesbian identity influenced the decision not to carry, she responded that as a lesbian, being a birth parent just simply did not "fit."

For many lesbians, particularly those who came out in the latter decades of the 1990's, the recalibration of what was possible and how they might play a role in creating a family was a necessary first step. For some, mostly parents who came out in the more recent decade, the cultural changes in the US have shifted the very notion of what it means to be a lesbian parent.

**Choosing the role:** Information gained from this study indicated that many participants encountered challenges in choosing which partner would be the gestational parent. Most participants described reexamining their identity as a female, as lesbian, and a partner. Some women felt very sad about not being able to create a child together or that they were unable to carry a child. Factors such as health or age (particularly a factor for lesbian parents as these couples tend to be older than first-time heterosexual parents) can render "choice" irrelevant. Almost every participant described wrestling with their beliefs about "blood relation," "lineage," and biological connection.

In every planned lesbian family (or any couple who uses donor conception), there exists a genetic asymmetry as a result of the third party donation. In every participant's family, the genetic asymmetry was explained or explored in her narrative. In almost every family, this genetic asymmetry *mattered*. The extent to which the asymmetry matters appears to rest on many

factors. As we learn about the experiences of non-gestational parents, it is important to appreciate 1) the changing nature of identity, 2) the role homophobia plays in one's experience of a role that sits outside societal norms (and understanding), and the ways the parent, the gestational parent, and the baby have influence over or drive each other's lived experience and sense of identity. Each of these factors may be influenced by implications of introducing genetic asymmetry to the make up of the family. The extent to which, or length of time the implications of "asymmetry" matters, differs for individual parents. The non-gestational parent may feel a sense of genetic "deficit" which, in turn, may be diminished by the individual's or the couple's intentional strategies to change the paradigm. The strategies that diminish implications of "asymmetry" were often described as "wrestling with the shadow of 'deficit.'" Feeling "lesser" may be a fundamental problem for the non-gestational parent. The social pressures of heteronormativity lean toward the concept of asymmetric as deficit, rather than a unique characteristic. Each non-gestational parent interviewed described, to some degree, the effort to ward off an internalization of this negativity in cultivating a fulfilling social identity.

Determining which woman will carry the baby is a decision that has real influence on the formation of a "parental identity" in the months (and in many cases, years) that follow. In lesbian and gay families, the *legal* claim to parenthood may be costly, is inevitably time-consuming and/or complicated, and was mostly experienced by these parents as a heterophobic insult to their identity. This threat is a legitimate one, given the history of custody cases, and was felt most acutely by the non-gestational parent. It is her right to parenthood that is not secure – even if she is legally married to the biological mother.

In states where there is no route to "second parent adoption," securing a legal claim to parenthood can be convoluted. One non-gestational parent, whose state has no provision for

second parent adoption, described the prospect of having to sue her current partner for joint custody simply to obtain equivalent legal rights to parenthood. The fear of losing all claims to one's child simply because one was not the "carrier" manifested as a subtext to almost every participant interview.

The power imbued in a court of law to, in effect, erase one's parental identity was described by many participants as an indignity difficult to explain (*if explained*) to their child. Lena, whose son is 10 years old, has never told him he is legally "adopted." She said:

I have a certificate in the basement with a Polaroid of us where I become his 'official' parent. And, yet, somehow this adoption certificate I have, it somehow feels like it *undoes* something that I want him to assume about our family connection.

Some participants considered the societal implications of not carrying—the valorization of the pregnant woman and the status that is afforded her—and worked to press against it.

Connie, the non-gestational parent of a 2 year old, explained her own decision-making process:

I've always felt incredibly maternal and like I was meant to be a parent, but I never thought the child had to come from my body. So, as I was able to tease out what were *my* actual desires and what was *society's* view of what makes a woman and what makes a mother... I was able to figure out that I really did not have to buy into that. I did not have to give birth to our child in order to be the mother.

For some non-gestational parents, not being the carrying parent represented a loss for which, they would later discover with dismay, they were unprepared. This study included two participants who each had a deep desire to be the gestational parent and who, over several years of attempts, were unable to conceive. Maisie had imagined she would be the one to carry their child yet, after a period of time she accepted a fertility specialist's determination that she was

unable to conceive. Maisie describes the subsequent process of her partner becoming pregnant and her own experience with the this turn of events:

We tried for a year and a half. She had one miscarriage, and we had one vial of sperm left. And like all those stories, with the last vial, she got pregnant. And as happy as I was, there was a way that as the pregnancy progressed, it was awful for me. I was mad. I was mad at her. I was mad at myself. I was mad at my body for failing me. And she was mad at me for not being there to be as joyful and supportive as ... I went to all the appointments and showed the sonogram photos around but there was a part of me that was absent. Absolutely, without question, it was really tough.

For each lesbian who launches herself into the journey toward parenthood, the necessary decision-making affords time for reflecting on how the choice to create a family will influence and shift one's identity. In more broadly understanding the diverse experiences of non-gestational parents, it is important to recognize there may be a period of loss or of painful envy such as Maisie describes. A sense of "invisibility" may be profoundly felt. The power of a loss experienced while inhabiting intimate space with one's pregnant or nursing gestational partner—with whom one is "sharing" the experience of creating a family—may be compounded for those non-gestational mothers who wanted to conceive and were unable.

**Feeling “invisible”:** The pregnancy stage marks the beginning of the public "coming out" as lesbian parents. Friends and families are brought into the partner story, interactions with medical personnel are part and parcel of the pregnancy phase, and the physical and often emotional, experiences of the two women in the couple continue to progress in unique ways. Findings indicated that those in the public realm very often acted in ways that rendered the non-gestational partner "invisible" during this phase, and many women felt the diminishment acutely.

Connie, like many others, experienced a marginalization of her role mostly because the press of heterosexuality as the social norm makes little, if any, room for her role. She paired two pressures: being "othered" and her own internalization of expectations regarding women's social roles and identities. She described her experience this way:

When we were in this very queer positive town there was not as often a question about my role as a parent-to-be. But if we were in the South, there's a lot of time when you're being the invisible parent. Like people trying to figure out if you're the sister, the best friend. It was really hard. I think a lot of it goes back to me kind of, still, trying to tease out the 'what does it mean to be a woman?' question. What does it mean to be a mother? And all those messages you get about who you are based on what your body does.

Unlike heterosexual fathers whose "bystander" status is predetermined by biology and gender role, non-gestational parents need to make sense of their new roles for themselves, in relation to their child-bearing partners' role and, as members of a cultural realm. While one partner will be instantly afforded the legal status of "mother," the other will need to, quite literally, apply for it. While one parent is seen as the mother, the other's identity as a mother is not visible.

When asked how she coped with feelings of invisibility, Rita said:

As a femme, my wife experiences invisibility all the time, so it's a little bit humbling, now, for me to experience that piece of homophobia or queer oppression. Strangers on the street would completely ignore me when my wife and I were together. And that was really hard. With people that we knew, everybody was SO excited. But, there was no recognition [of my role] from the outside world, except from our midwives.



When asked about responding to this public diminishment, Rita's response was energized. She described feeling either "invisible" or "intruded upon:"

During pregnancy, there's just so little you can do to strategize about the invisibility thing. And people feel this sense of entitlement to ask about the pregnancy. They felt fine asking [about how it was achieved]. During pregnancy either I was invisible or ... felt invaded.

Esther spoke about the fortitude required of the non-gestational partner during the pregnancy phase. In the context of making the decision about which woman would carry the baby, she and her partner considered the psychological ramifications of being "other" in a heterosexist culture. They anticipated the ways the non-gestational partner and her role would be minimalized and prepared for the pressure by taking the roles that matched the energy each had for dealing with "exclusion." She reflected:

My partner was just so desirous of pregnancy. Wanted the experience of being pregnant. And I didn't. I knew I wanted to be a parent at that point, but the whole inhabitation and so forth, I didn't have that desire. We were also really clear that my partner was way too insecure to have had the roles reversed and not be the pregnant one. I would be able to bear the outsider position in a way she couldn't.

Almost every non-biological parent referred to the pregnancy as though a shared state of mind would result in a baby; almost every parent used the reference, "when we were pregnant," at least once in the interviews. The interviews described a sense of powerful intrapsychic work couple share and wrestle with as they enlarge their image of partnership to include parenthood. It was less common for non-gestational parents to describe themselves without a role *within* the family during this stage. While biologically dissimilar, this felt sense of a shared experience of

pregnancy was often challenged by others in the public sphere. Yet Lena described how the sense of invisibility or role confusion could also be felt *within* the couple:

Things came up that were trickier than I expected. I expected there to be no problems. I thought that I would probably get to nurse the baby if I wanted to, even though I wasn't going to make milk. And my partner said, "No way. That is something that has to be just between the baby and me." I didn't think about it much in advance. It didn't even occur to me that I might get cut off at some parts. She [said], "Well when you have a baby you can do it that way but this is my turn." And I was like, hey, I *am* having the baby. You know? But I'm not pregnant with the baby. I wasn't imagining that we would run into that but we ran into it a lot.

Some parents expressed envy or jealousy of their partner's pregnancy. A few experienced a period of grief; as their partner's belly grew bigger, the biological connection the partner shared with the baby became more evident and seemed to hold greater meaning. What had been a logical choice about who would carry, in reality became for some parents, an experience colored by ambivalence. Margot and Deborah shed light on this idea. Margot explained:

I desperately wanted to be a mother. I was not terribly inclined to be pregnant.

Eventually, we decided that my partner would be the better choice. [Later], I was really aware of feeling like I wanted to be present at every appointment, every step of the way and my partner was wanting that too. But it pointed to an anxiety that led to me keeping myself very present. As if I wasn't there, I would be one step closer to invisibility.

Deborah described the twin feelings of keen anticipation of the baby's arrival and grieving about a certain loss of "lineage:"

There were times when it was like a grieving process of being so excited about this pregnancy and yet... wanting to pass down that name and things. Then being so excited to envision what our baby's going to look like and then...remembering, she's not going to look like me. I had moments of feeling really sad, of feeling like who am I? Of having to deal with my own feelings of legitimacy and about my identity. It just takes a lot of unexpected energy.

Still, for some the role of non-gestational parent is just a natural, comfortable fit for both parents. Cheryl reflected back on her partner's pregnancy and though she does not have the power of a name for the role she embraces, nonetheless, it is a secure fit. Her description conveyed the intimacy of the "partnership" that pregnancy is for so many lesbian couples:

I remember feeling a little sad; when my partner was away at work - so was the fetus.

Once it started moving, I loved to put my hand on her belly all the time. I would get jealous when she would feel it kick and I couldn't feel it. But I didn't want to get pregnant and had felt clear about that. I was very comfortable in my role. I started to really identify with the dads. If dad wasn't such a gendered term, I would really embrace it.

Some participants spent these months recalibrating their sense of what it meant to be a lesbian, to be a mother, of how their body and their motherhood were linked, or wrestled with a shift in role and relationship with their partner. Much of this work functioned internally, silently, and some women were more prepared for the changing sense of self than others. Some discovered strategies for coping with the lack of public recognition in contrast to the valorized status their partner received. Most found that their partner was sympathetic and often, strategic, about dealing with the cultural jabs and internal worries experienced by non-gestational parents

at certain turns of the pregnancy. And still, a few women who were unprepared for the challenges, or who felt invalidated, found this a trying time in their primary relationship.

Inevitably, the baby's arrival introduces a new stage of parenthood that requires cultivating an attunement to the baby's physical and emotional needs. The nursing stage provides a window on yet another iteration of the non-gestational parent's shifting identity.

**Navigating early bonding:** Most non-gestational parents in the study described the bond between the nursing mother and their baby as "awesome" or "formidable" in its intensity. Findings suggested that during this period many of these parents struggled, at some level, in building a bond that helped them feel necessary or connected to the baby in an equivalent way to that of their partner's. The feeding care of an infant is an intimate act and in families that support breastfeeding as the only way to feed a newborn, one parent has a life saving job to fulfill and the other parent may grow to feel ineffectual. In the planned lesbian family, the nursing bond can create an asymmetrical balance that mimics or drives home familiar feelings of "otherness" and invisibility experienced during their partner's pregnancy stage.

Maisie described the nursing mother as a "powerful archetype." She had been envious of her partner's role as gestational parent and had dreaded the nursing process, which she imagined would feel like an unbearable loss. As happened for several couples in the study, for health reasons, nursing was not possible for the biological parent. For these parents, the absence of nursing was experienced as a relief from the imbalance of roles in the pregnancy stage. Maisie, who had wanted to carry but was unable to conceive, reflected back on the infancy stage:

I've talked with other [non-gestational] moms about nursing and it can be such an achingly difficult time. In some ways that piece went away for us because we were *both* back doing what we knew. The baby was drinking out of bottles and it equalized things,

so I didn't experience that imbalance. For as sad and devastated as I was, unable to shake the loss I felt during that period of pregnancy, the nursing mom is such a powerful archetype. I can't even imagine what that would have felt like on top of not being able to carry the baby. There was no question that early period [of her nursing] would have been very, very difficult.

Maisie was the only parent in this small study to describe such intense regret about not being able to conceive, yet her experience must speak for many non-gestational parents who would choose to bear the family's children if they were able. When asked about supports in the face of the double bind of experiencing invisibility during pregnancy and simultaneously processing her grief Maisie was at a loss for what would have helped. She praised the rare support groups geared specifically for non-gestational parents available where she lived.

Cheryl puzzled about the bond between her partner and their son. While Cheryl was a full time caregiver for him, she described the nursing mother's bond to be a primary force, an invisible and mysteriously boundaried, connection with which she could not compete:

She was always number one. She had that really sort of special bond that I missed out on. But I was there. I curled up with them when they nursed; it was a really special time and I really valued it. But now that she's at work and he's with me all day, if she's around he's not very interested in me, he wants to be in her arms. So, I mean we joke. We say it's the boobs, but I do think that has a lot to do with it. You know, nursing just creates a bond.

Several parents described feeling envious of the bond between the nursing parent and the infant. Polly felt breastfeeding was important for the baby and yet, like all other study participants who were not breastfeeding, she had to sort out and understand the bond-she-felt-outside-of. Polly described the eventual bottle-feeding of her baby as "a celebration." She had

wanted the bond she could see her wife developing with their baby but wondered if that same bond would ever be possible for the non-gestational parent to recreate. She said:

We knew nursing was important for skin-to-skin contact. It's instinct and it was what we wanted it to be. We had learned in class that you should strictly breast feed for at least the first four weeks. At the end of the four weeks, it was like a celebratory thing! We took pictures of that moment... Once I could feed her, she and I developed a bond, like what I had been jealous my wife had. But still, I don't think it's the same as theirs.

Margot thought a lot about the deep attachment between the nursing parent and the infant and the attunement that is often developed out of the nursing interactions. She explained the ways she intentionally reached beyond a biological bond to cultivate her own deep mother-child connection:

I've been aware over the years of not feeling like...well, I don't have this biology to fall back on...Nursing with our first child was really hard for me. I really wanted her to find as much comfort in being able to be fed by me via the bottle. I worked really hard at creating an environment that had all sorts of good attachment stuff in it besides a breast. By the time our second child was born I was so much more secure in my role as a mother even though I didn't produce milk ...My original fear was this child has these basic needs as an infant and the most basic of them is to be fed and my body can't produce what she needs. I had to realize that she needs lots of things, I also I know I can be physically close with her and provide the skin sensations and I would sing to her. And spend lots and lots of time just finding a way together, the baby and I, toward soothing, being soothed, calmed. And spending 10 hours every other day for those first few months, we found our way toward equilibrium...

Two out of the thirteen non-gestational parents in the study nursed their babies, though without breast milk. They reported much less confusion, loss, or envy regarding their roles in the newborn stage. Sharing nursing or having both parents only bottle-feed seemed to ease that sense of a lesser bond. Most parents whose gestational partner nursed found a settled place and a bonding balance after the first six months of infancy. Some participants "settled in" to a rhythm of connected parenting by recognizing the value of their care taking and no longer valorizing nursing as the ultimate in care. Others "settled in" by building a relationship with the child that reflected their own personalities, interests, and temperaments.

The personal and social identity of the non-gestational parent grows and develops over the course of the planning, the pregnancy, the nursing, and the eventual bonding that brings balance back into the family. The asymmetry of genetics, the powerful bonding of nursing, and the lack of role models (in the parent's personal history and in her cultural realm) can significantly challenge the non-gestational parent's sense of building a family unit. Each participant in this study described intentional moves to press through these various challenges. The effort required can be measured in proportion to the extent of a sense of shared values within the couple dynamic and the sensitivity of one's partner to the struggle. Margot, for example, articulated a "couple dynamic" that supported the evolving balance in her relationship:

It's our goal; mostly it's implicit in the way we act, to be mutually involved and with the same energy and presence in an *egalitarian* way. I wouldn't say 'equivalent.' I really enjoy what we bring to our children about who we are as individuals. And I like seeing our children go to each of us for different things. We each have really differentiated roles and that feels important to me. But yes, it is our intention to be kind of equal partners in developing those separate relationships...I am aware of watching these mother-daughter

relationships develop on love and attachment, attention and presence that I know wouldn't be different if they had my same color eyes or something [genetic] like that.

And that feels beautiful and even more reliable because it's so intentional.

Study participants who, unlike Margot, had not worked out key elements of their relationship and roles (“what we bring to our children”) found it much more challenging to forge a satisfying personal and social parenting identity.

**Defining the donor role:** Information from this study indicated that parents needed to carefully consider the donor role in the family. For non-gestational parents, the extent to which one holds a perception of "genetics as a significant bonding agent" is often evident in how the donor is chosen. Attempting to assert facets of one's identity by choosing specific "like-characteristics" or "traits" that matched those of the non-genetic parent proved to be an important factor in how study participants determined the choice of donor. Participants described, in great detail, their beliefs about how the relationship between *parental identity* and *biological tie* influenced considerations for donor choice and the ways the "donor conversations" between couples unfolded.

A few parents referred to the donor as a related person, for instance, as someone present in the child's life regarded as an "uncle" figure. Other non-gestational parents in the study experienced the donor as a sort of mythic figure that is not to be wholly trusted. For many couples in the U.S. today, and in particular for the non-gestational parent, the donor represents a legal threat to parenthood and is to be avoided entirely. Parents' in this study held views that ranged from envisioning the donor as a "person" their child might want—and had the right to—meet in the future, to enacting a full erasure of the *personhood* of the one who donated. This



erasure was achieved by acknowledging only the biological element of necessary sperm donated in "the same way you might donate blood when someone needed it."

Some lesbian couples choose to use "known" donors. Couples might choose a friend or a relative to be the sperm donor. Lesbians who use known donor sperm are open to risk, a donor process that may subsequently have significant legal consequences for the parents, the child and the donor. As of 2013, laws that govern known sperm donor rights are not uniform across jurisdictions. (In some states the Artificial Insemination (AI) statute, which may erase the sperm provider's parental rights, does not apply if women conceive with donor sperm at home, outside the purview of a medical setting (Vaughn, 2013). Those who reject the medicalization of conception push against this limitation of the current AI statute.)

Some women choose "open donors" by using a sperm bank donor who is willing to be contacted at some future date by the parents and/or the child. Finally, some lesbians are adamant about maintaining the anonymity of the donor. For some in this study, anonymity was chosen as a "relief from an imagined parental interloper." This section reviews considerations for donor choice and explores, through participant voice, the extent to which donor choices are connected to the evolving parental identity of the woman who does not share a genetic link with her child.

Study participants' chose to use an anonymous donor (n=5) less often than those who chose either a known or an open donor (n=8). Two of non-gestational parents interviewed for this study (Lena and Barbara) maintain close relationships with the third-party donor for their children (characterized by the familial but slightly removed "uncle" label). Both Lena's and Barbara's families have legal agreements with the donors designed to protect their sole rights to decision-making and parental obligations to their children.

Lena is the only non-gestational parent in the study to refer to a donor specifically as her child's "father." Lena described the donor's relationship with her son this way:

Our son knows who his father is and knows that it's his father and given options, he feels more like an uncle. I can't imagine a more ideal situation but I hope there are lots and lots of them... We came to agreements, did research and looked up legal forms so that you are protected and knew what kind of medical research to do. They signed the paper and they did all the tests. They have made a point of visiting us once a year or we'll visit them. It's just as easy as can be. He and my son love to see each other.

Lena's story was unique in the collection of interviews in describing a donor relationship as one of "father" yet, similar to the other donors, their donor had no standard obligations or legal privileges of a father role. She and her son's biological mother remain the legal parents of record though Lena alternately described the donor as her son's "father" and his "helper."

Referring to the family constellation, she said:

Most things I have wanted [my son] to know his whole life so that he would never remember finding out. Like he's always known that [the donor] is his helper. That [the donor] helped [the biological mother] and I make a baby. And you have to have a man part. And we have [the donor] and so [the donor] is biologically his father. They might look alike. Like if you see [the father's] baby pictures. I have been telling my son the story since he was pre-verbal so that he would never remember finding out.

Lena's parental identity is uncompromised by the presence of the father and she has continued to welcome his relationship and role in the family a decade after her son was born. The success of incorporating the father's position in the family dynamic appears to rely on a clear

understanding and an acceptance of each person's role and identity within the familial construction.

Barbara's description of their known donor relationship tells an analogous story. Yet, *unlike* Lena, Barbara is very clear that her child has no father; her daughter has a "donor." Barbara explained, "We have a legal agreement. He doesn't consider our daughter to be *his* child. And so we are not referring to him as the biological father, we're referring to him as our donor. And keeping that really clear."

There is a notable link between Barbara's family history of growing up in, as she describes, "a motley crew" and the ease with which she accepted family arrangements that might sit outside the norm. While she explained that it was very difficult for her wife to accept that they could not create a child together who would be biologically, genetically related to both of them, Barbara described being more comfortable with the less traditional family ties. She explained:

She really wanted *my* baby and that has always been hard for her. It's not that it hasn't been hard for me...Of course it would be amazing! But, for me, my upbringing of having a lot of siblings who are stepsiblings... I have parents who are stepparents. So I feel like I have more of a motley crew family that makes it so I don't need to be genetically related to the people I care about and call my family. I *feel* genetically related, you know, I *feel* biologically related to her. I guess I'm technically not but there's no gap there for me.

The other parents in the study view and describe their use of third party assisted conception quite differently than Lena and Barbara. Examining each non-gestational parent's donor needs and the ways "donor" is incorporated into the fabric of each family's story helps us see how non-gestational parents' varied perceptions of their personal and social identities can be related to donor choice.

Parents in all types of families embrace and construct new parental identities and roles based on foundations of varying levels of self-esteem and confidence. This psychology of individual history has an effect on the extent to which anyone might be challenged by forging a new role—this non-gestational parent role in a lesbian partnership—that sits outside the heterocentric view of family. Lena and Barbara's perceptions of the donors who helped create their families represent one end of the spectrum.

At the other end, a few parents described the donor role as without personhood, the *person* who is the donor is erased. Elaine and her wife gave the *mechanics* of the creation priority over *biological tie* and in that way, diminished the valorization of either parent's (or donor's) role.

Margot felt that the anonymity of the donor person was a defense against marginalization and against a social identity that might render her role as a parent invisible. She articulated her perspective of the challenges ahead:

The concrete steps of arranging for all of it didn't overwhelm me or cause me anxiety. We knew we wanted an anonymous donor. In particular, I was anxious. I did not want to be in the background or be the secondary parent. I wanted to be very primary. And yet, I wasn't going to get pregnant. So while I felt physically that being the non-biological mother was the right decision for me, I was quite anxious about how I would be perceived. How one would anyone make the connection between my not being pregnant and my being a primary parent mother? Throwing in a known donor felt like it complicated that for me.

The next section examines the ways non-gestational parents and their partners help make these connections between parent and child clear, socially and within the family.

## Shared Strategies

**Having Supportive Partners:** The study data indicated that for many study participants, the strength of a shared commitment to "be in it together" helped the non-gestational parent through the challenges of invisibility and the boundaries of primary bond. Barbara described a very sturdy partnership with her wife who appears to understand the power of her position and the need for her to consciously open up the privileged space she has as the biological parent, both in public and in the family structure:

We get questions like, 'Oh, who's the mom?' A lot. I can get sad or I can get offended or I can come back with a really positive tone in my voice and say, 'We both are!' I really expect and count on my wife, who is the biological parent, to step up and also say, 'We both are!' We've been very careful to share bedtime duties, share bath time and changing the baby. And when I've been gone all day, I take care of her at the end of the day and I am the primary even though my wife is still in the house. So we're really conscious, really intentional about it...

In this reflection, Barbara describes a sensitivity that was referred to over and over again by non-gestational parents as the most important support during a time that challenged their grounded sense of identity. Partners' ability to share parenting and to actively participate in opening the boundaries of bonding to include the non-gestational parent proved to be essential in helping non-gestational parents find their way.

Parents described strategies for activating their sense of parenthood as built on their *intention*, not on roles determined by biology. The lesbian parents' shared motherhood as primarily constructed by intention—not biology—is new in a heterosexist culture. While living in a lesbian- and gay-friendly area, utilizing gay-friendly medical services, parents still find they

need to press against ingrained norms. It helps the non-gestational parent if the other parent understands that she needs to work hard not to fall into the trap of allowing others to champion her biological tie; she needs to collaborate in her partner's effort to be seen. Connie described a doctor visit that helps illustrate this point:

The pediatrician's office was a place I needed to assert my right to parenthood. All the questions were directed to my partner. Nothing was directed at me. It was just assumed that because she was nursing, that she would know more or be more invested in the questions that the pediatrician had. We decided I would take the lead in situations like that. Even if the questions were directed right at her, she [would] sit silently and I would be the one to answer. We are very cognizant of how we present ourselves as a family and as being very unified. And, I feel, the less you plan around it, the more likely it is to create a scenario you're not happy with.

**Anticipating challenges:** In addition to having an agreement with her partner to show a united front in the face of minimalizing her parental role, Connie's description points to a crucial element in easing the way for the non-gestational parent: planning. In the descriptions and stories study participants offered, "being prepared" (individually or as a couple) for what was in store, for what might be challenged publicly, or for what might be experienced as a difficult stage in finding one's parental place in the family, turned out to be a key to paving a smooth pathway for the non-gestational parent.

Rita described this sense of preparation and partnership—and support from those outside the relationship—as especially helpful:

I have a good network of people who told me there's nothing that she knows more than you. There's nothing she's offering that is any more than you except for her body. That's

it. I also thought about male oppression. Non-gestational parents haven't been told for so long that 'you're supposed to be the provider, not the caretaker.' And that their babies need their "mother." I just didn't get those same messages men get and so my yearning to be in there was just as strong as hers. It was really important that we had agreement. That we stuck to it. You know the baby carrier on your chest? We said whoever *wasn't* wearing him would answer all the questions people have in public.

While living in a culture that makes assumptions about motherhood based on biology, it helps enormously if both parents confront this together. Maisie graciously described this social tendency as "people just trying to organize information." In the doctor's office, the administrative assistant who looks at the couple with the infant and asks, "Who's the mom?" is likely simply "organizing information." The stewardess who stops at the couples' row just before takeoff and asks, "Which one of you is the mom?" is, in that moment, focused on safety and getting everyone strapped into seatbelts. Yet, the organizing framework of heteronormativity is potentially felt as microaggressions against the non-gestational partner and these small insults add up over time. Having a partner who is sensitive to the injuries experienced as a family and also to the unique ways the non-gestational parent might be rendered invisible, makes the pain less isolating.

**Sharing a name:** Naming was used as a strategy for claiming some right to parenthood and for helping the family unit coalesce. Many parents chose to drop their last names and chose a "family" name shared by all members of the family. One child was given the non-gestational parent's last name as a way to publicly "cement" her rights to ownership. Some parents chose to hyphenate their names; most of these chose the order of names by whichever combination was easier to say. The parents' discussion about naming was viewed as an important one; the ways

they wanted their children to refer to them, and the ways they wanted their family to be referred to, was noted as strategic in some way in almost every interview.

**Honoring children's feelings:** Two parents spoke eloquently about another strategy to strengthen the family. Both felt it was important to honor children's right to feel curious about the sperm donor or express a sense of loss about the absence of the sperm donor from their lives. Further, they felt that insights they gained in the process of forming a satisfying parental identity would help them support their children if and when they might struggle with "feeling different from" their peers. Esther described it this way:

It was about the psychological relationship that children have with the sperm donor and how important it is to let that be and to invite it rather than be threatened by it. There are times when my kids have said, either directly or indirectly, I really wish I had a dad. I know that in some families that can be a painful conversation or experience. I think one of the gifts I can give them is to totally allow that. To let them have the experience of two unequivocally loving and committed parents, which they experience. And this longing for, wish for, this person who helped make them. And so much as that can be experienced as a loss, I think that's a plus. I really do. I think allowing a space for that is going to enhance who they are in the world.

Maisie also reflected on the advantages for children of lesbian-led families of having two deeply invested parents and the acceptance of the loss their own child might feel in not having a father. She made the link between the ways she and her wife navigated the non-biological/biological parent status.

It's possible to realize that it can be a special thing to have this special kind of family configuration and at the same time it can be a little sad that I don't have a dad in the way



that most of my friends do. I used to think that you couldn't live with both because they're like conflicting models or ways of being. I think what I'm trying to model for my daughter is that both can happen. I feel like for my wife and I, that's been a very big piece of navigating this whole bio-mom / non-bio mom. It's like this ghost or other dynamic that we have to acknowledge. That it isn't just about being comfortable with our two-mom status. It's about being realistic and acknowledging that it is different and that there is some sadness and giving up of that other typical or more common family configuration. And to name it, rather than just ignoring it. Of course I want my family to be proud of who we are. We are. And I want my daughter to feel comfortable in the constellation that we are.

These two parents' interviews help us see more vividly the ways that non-gestational parents are able to use their intrapsychic experience of coming to terms with "difference" or learning to live comfortably outside the boundaries of the norm as a gift for their children. Many parents spoke of the advantages their children share with others who are raised in families where there is some "othering" in their social identity.

All the non-gestational parents interviewed in this study wrestled to some extent with their part in creating a family. And, while the degree of "reaching equilibrium" varied across the sample, each parent did describe a sense of coming to terms with the challenges they had met along the way. Every parent described a deep, abiding love for their child and pointed to the importance of sensitivity on the part of the other parent, support from outsiders and friends, and a shared vision for cultivating a unique family culture.

## **CHAPTER IV**

### **DISCUSSION**

The purpose of this qualitative study was to investigate parenting and identity and the non-gestational parents in lesbian planned families. The study shines a light on four essential elements of the non-gestational parents' part in creating a family: decisions and choices made in choosing family planning roles, needs regarding donor choice, non-gestational parents' personal and social identity shifts during a partner's pregnancy, and perceptions of bonding during the nursing and the early infancy stages. This chapter discusses the study findings and highlights key demographic information.

The purpose of this study was to further explore the unique nature of the lesbian non-gestational parenting role as there is still limited research on the topic. It is important to understand the extent to which lesbian non-gestational parents' personal and social identities are pressured by anti-gay bias and the challenges of forging a parental identity that has such a brief sociocultural history. This study has implications for social workers, medical practitioners and those who work with lesbian families as they embark on creating families and in the early years of cultivating strong family bonds and skills as individual parents. Conceivably, the findings will increase practitioners' understandings of the diverse ways lesbian non-gestational parents view donor traits or characteristics and the extent to which these views are linked to perceptions of parental identity, ego strengths of the parent, and couple satisfaction. The study was designed to help practitioners learn more about how the non-gestational parent meets the personal and social

context of "becoming a parent" while her partner is pregnant, the extent to which she values nursing as a bonding strategy, and the strategies she employs to negotiate a satisfying parent role and bond of her own.

In exploring the details of findings and previous related research, it is important to consider the context of politics and sociocultural landscape currently in the US and relevant information about the specific site of the study.

### **Relevant Demographic Information.**

By mid-2013, same-sex marriage had been legalized in twelve US states. Beginning in the 1980's some states began to allow second parent adoption - a parental status for which non-gestational parents must apply. As each state has its own laws governing adoption (most often case-by-case) the legal right of parenthood for many non-gestational parent is not guaranteed. Social attitudes about gays and lesbians have shifted more quickly in the past decade than at any time in US history and yet, while this more progressive trend is notable, the forces of homophobia are, nonetheless, formidable. Homophobia, whether external or internalized, continues to challenge non-gestational parents in cultivating satisfactory social identities.

All but one parent lived in areas known for large populations of lesbians with access to gay-friendly schools and medical practices and affirming religious communities. The discussion and interpretation of this study's findings should be filtered with this unique social lens. Therefore, the geographic location and moment in time of the study have influence on the findings. This sample's descriptions of "invisibility," are felt deeply even within such a progressive context. A comparative study of participants raising families where the supports are much more modest or do not exist at all, or where the pressures of homophobia are much more acutely felt, would be instructive.

Thus, we view these findings as representative of the "best of circumstances" at this moment in time. We begin with a consideration of the current literature about lesbian non-gestational parents and new insights this study data reveals.

### **Themes, Findings, and Related Research**

This study sought to move away from a tradition of "comparison study" comparing lesbian families to heterosexual families (Johnson, 2012). Often the non-gestational parent has viewed through the same lens as the biological parent in studies focused on lesbian parenting or lesbian-led families and (the effects on) their children (Benkov, 1994; Chabot & Ames, 2004; Clarke, 2008; Iguarta, 2009; Levy, 1989; Tasker & Granville, 2011; Wall, 2011). This current study provides an examination of lesbian non-gestational parents specifically and the challenges and strategies for expanding the roles of "parenthood" to include their roles and identity in families.

**Intentionality.** The planned lesbian family represents a construction rooted in intentionality and decisions that spring from how the parent views her personal identity and how she perceives and reckons with her social identity ((Bergen, Suter, & Daas, 2006; Dunne, 2000; Goldberg, 2007). When asked about the most important elements of the non-gestational experience, many participants described "intentionality" as foundational. This parallels Wall's (2011) international study about the most difficult factors in creating lesbian-led families. Wall (2011) reported that the intentionality of the decision-making process led to participants' eagerness to talk about their plans and how they achieved parenthood. Intentionality was named by parents in the study, as a powerful foundation for attachment and for a strong and reliable family bond. In previous studies, lesbian planned families makes note of the duration of and diligence of planning for the family (Bos et al, 2004; Chabot & Ames, 2004; Ehrensaft, 2008; Franklin, 2009). While

planning is a necessary feature of conception, in this study, the intention to create a family permeated the family narratives.

**Identity as it linked to biological asymmetry in the family.** Because they did not participate genetically in the conception of their children, most study participants reported grappling with the question of heritage, blood line, and how to compensate for this lack of genetic connection to the family. The traditional connections mostly mattered because they contrasted with the biological parents' connection (understood as "what gets passed to the child") and because the donor exists as a "third party" who *is* genetically linked. When parents experienced the third party link as a "ghost-like presence," particularly during the pregnancy and early infancy stages, they seemed to grapple emotionally with a sense of "loss." Many participants noted a need to resolve these at some point during the planning and/or during their partner's pregnancy. For most, the baby's arrival banished that niggling feeling of disconnection. For some, the felt sense of asymmetry or disconnect met head-on with the nursing bond. It was striking that nearly every participant reported the interviews cathartic, as an opportunity to look back at a heady time that had been hard to describe to a small audience (if anyone) who could authentically relate. These feelings, that are unique to the non-biological lesbian parent (because of the divergent path of her partner's child bearing experience) are most often explored in memoirs, through online blogs, and support groups (Miller, 2010). Formal research that explores qualitatively the range of non-biological lesbian mothers' perceptions of "bloodline" and "heredity" in planned families would fill a gap.

The quest for the perfect donor preoccupied many of the parents in the study for months, in one case several years, before a choice was made. Some parents wanted to replicate their own "traits" as closely as possible. They chose race, color of eyes, hair, and build so to replicate their

appearance as closely as possible. Others leaned toward choosing characteristics that most resembled the non-gestational parent; one parent looked for a musical talent, another reported that she and her partner searched for indications that the donor shared her values. Ehrensaft (2008), in her discussion of the psychological experiences of lesbian mothers, describes families in which "babies are conceived from science rather than sex" (p. 161). Ehrensaft (2008) further points out that the medical world has surged ahead of the legal and mental health field "to make quick, unprecedented legal decisions and to develop psychological understanding of the experience of "Molly and me, and donor makes three." (p. 162) Ehrensaft's (2008) inclusion of "three" (referencing a third person) is negated by several parents in this study. One parent referred to the sperm necessary for conception as simply "a donation." There was no "three" as she attached no personification there.

**Invisibility as a result of two features: the social reality of heterocentrism and the consequences of living beyond the current conceptualization of parenting roles.** Pregnancy appears to represent a most complex stage of the family's creation. During this period, society grants the gestational parent—and in some cases she may intentionally or unintentionally take advantage of—the valorization of "maternity." One parent expressed her sense of the cultural value of maternity and nursing as a "Madonna archetype." At the same time, just as Wall (2011) describes, the non-gestational parent may be thrown off, disavowed of the valued elements of the shared partnership experience that existed before the two women's roles diverged. While one woman is visibly determined to be the "mother," the other's presence offers no such social cues. For many participants, this divergent stage represented a radical departure from what the couple or the non-gestational parent intended—that, in fact, "*we* are having a baby." Though the

couples' definitions of conception prioritized *intentionality* over biology, living in heterosexist context pressed against it.

Gattrell, Hamilton, & Banks (1996) conducted a study of the early years of lesbian-led families. In their study of 84 families, the non-gestational parents reported that their own parents were less close to their grandchildren than the biologically related grandparents even as their children reached toddlerhood. This was not quite the case for the parents in this study. While the non-biologically related grandparents were less enthusiastic at first, each one rebounded as soon as the child was born. One hypothesis is that, as attitudes toward gays and lesbians continue to change, the grandparents' reactions are less about disapproval as about being confronted with the complexity of their *own* changing identities. Once the baby is physically present, they can more easily assume a "grandparent" identity. Goldberg (2007) and Murphy (1989) found that the friends of lesbian parents offered the greatest supports. And yet, just as Goldberg (2009) later reported, most lesbian parents' friend circles had changed from gay and lesbian to heterosexual-led family friends. Many parents in this current study described a similar change. In particular, one parent lamented the radical shift in her friendships. She felt deeply the loss of her lesbian non-parent friendships as her world became more child-centered. She was surprised to begin navigating, for the first time as an adult, the social context of heterosexual families.

The degree to which one feels "invisible" during this stage is both a measure of the heterosexist nature of this moment in time *and*, an indication of the lack of place, definition, prevalence, or value for the role of the non-gestational parent. While most participants described a felt sense of being rendered invisible; it would be interesting to pursue the question of how that felt sense relates to "isolation." While some lesbians in this study took advantage of rare "non-gestational parent support groups," those who attended parent-preparation courses in hospital

settings described times when they had to choose between staying with the fathers- or mothers-to-be; there was no "group" that represented their experience of "sharing motherhood."

**Navigation of a bonded parent/child relationship.** The participants appeared eager to use the interview as an opportunity to sort out feelings about the loaded issue of "bonding." The question of what constitutes a bond, or how a bond is achieved, was reported to be of great importance during the nursing and early infant stages. While the couple, before pregnancy or parenthood, may have felt like "equal partners," the nursing infant seemed to complicate this aspect of the couple's relationship. Most women felt, if even for a brief time, that a tide had shifted; now a "bond" existed between the nursing parent and the infant that the non-nursing parent felt she needed to earn. Some parents described trying to replicate it, some found relief from being "left out" by reminding themselves that nursing was vital to their baby's health and that the bond was an element of nursing. Others who may have struggled at first, soon realized through experience, that bonding could be forged in a multiplicity of ways and that relationships are not built on genetic links or feeding practices alone.

Goldberg, Downing and Sauck's (2008) study of parental preferences in lesbian-led families confirms that over time, children's preferences for the nursing parent shifts toward preferring parents equally. Most parents described their child's preference as not "equal" but rather determined by personality and role. Nonetheless, the nursing bond shifted satisfactorily. It appeared, through the stories told by participants, that the sting of the infant's rejection was less, for those who were prepared and for those whose couple partnership was a strategic one. One of the participants in this study lovingly articulated how her understanding of the bond developed. She came to understand, from her own experience, that the parent/child relationship is bound not by genetics or parent role but by "*love and attachment, attention and presence.*"



This participant's words echo Franklin's (2009) who writes about "biological relations" in her essay in *Gender & Society*. Here, Franklin warns us about the terms "biological" and "biogenetic," with the complaint that the description of biological has been, in a way, subsumed by, the term biogenetic:

Ignoring all of the other 'biological' ways people are related to one another, such as all of the intense physical and material connections involved in living together, feeding and clothing each other, providing care and nurture, and acquiring shared habits and knowledge. These are known as ways of life, and they are biological facts of human reproduction too. (p. 577)

**The creation of an egalitarian "motherhood" partnership.** Muzio (1993), in writing about lesbian couples who make the shift to parenthood, commented that,

lesbian couples who, before the pregnancy or birth, may have experienced themselves as more alike than different are confronted with a profound different-ness. This newly found sense of different-ness relates, of course, to the changing roles pregnancy and birthing impose. (p. 224)

Every parent in this study referred to a substantial turn in the relationship, just as Muzio describes. Muzio is a leader in research on lesbian relationships and lesbian-led families and her work is notable for the sensitivity she brings to insights about the role of the non-gestational lesbian partner. In the study I conducted, this sense of "different-ness" began even as lesbian parents contemplated and made decisions regarding one's identity and whether it was flexible enough to include pregnancy. Once again, the more *prepared* participants were for the different pathways ahead (and whose partners were sensitive to the ways these differences might challenge each other and the couple dynamics) the more adept they were in reckoning with these

changing roles. In her description of lesbians and the implications of co-parenting, Muzio (1996) notes:

The different-ness extends to the intrapsychic struggles with femininity and (M)otherhood both partners undoubtedly confront after the birth of the baby. As such, lesbian couples who have babies must reorganize their sense of themselves and their relationships in unique and profound ways. (p. 225)

Participants described a reframing and internalization of new identities and roles in their relationships. In addition, some parents reflected on the "reorganization" of their couple dynamic and how this reorganizing included "sharing motherhood." One participant described that parenting together as co-parents meant that their parenting was infused "with the same energy and presence." She reflected on the couples' unique roles for their children within the family and their intention to be "equal partners in developing those separate relationships."

Participants who were able to reflect on these types of changes described an evolution of phases from the contemplation of a family and on through their child's development. Participants with the oldest children described their relationships with their children as influenced by each new major social context of their children's lives. Esther, a non-gestational parent of two children who participated in this study, said, "Sometimes I'll say *I'm* Jeb's mother because it might be a situation where I don't want to say I'm *one* of Jeb's mothers, you know, to protect him. But in another situation, I might say I'm *one* of Jeb's mothers. You know, I'm Jeb's parent." In this description, Esther recalibrates her public identity relative to the social context, as it matters to her child's identity.

Muzio's (1996) comment that parents "reorganize their sense of themselves and their relationship in unique and profound ways" (p.225) points to the ways lesbian parent dynamic

evolves. In the couples represented by the non-gestational parents in this study, none intended to recreate the heterosexual gender model – or to reinvent a father in the family. Indeed, all participants described a tendency toward an egalitarian or deeply committed gender-neutral "parenthood" partnership - with differing roles. Some characterized themselves as one of "two mothers." Yet, a few used the language "mother" very sparingly in describing their role. One parent highlighted her view of the "feminine traits" that she valued and how this femininity manifested in their parenting. She said very specifically that as a non-gestational parent she "identifies as a mother." She was quite firm that neither parent used the descriptor "co-parent:"

We don't use that language. We are both mothers. Mothers, absolutely, without question...I think our daughter's lucky that she got two moms who, you know, are dotting and caring and there is this kind of female mothering energy that is different and that it is a positive thing to feel so supported and to know that she has two parents that are really emotionally available for her. We bring different strengths and different kinds of things to the parenting equation but I think what we have in common is that we are both really emotionally invested in being her parents.

### **Limitations**

The sample size of the study was small (n=13) and, therefore limits the generalizability of the findings. The sample was racially homogenous (all participants identified as Caucasian or white). Due to the limited amount of time to conduct the research, I was able to interview just 13 participants. Future research would benefit from a more extensive reach of both time and sample size. Future research should focus on a diverse sample size situated in a different or wider geographic range and that lift the experiences of the non-gestational parent as the focus of study.

The length and depth of responses to the interview questions varied and it would have been instructive to do the interviews in two parts. (Many women stopped mid-way and remarked about the provocative nature of the interview. In these cases, it would have been illuminating to allow for self-reflection and to conduct a round-two of interviews at a later date.) The qualitative interview questions and the flexibility to "follow the participant" allowed for a collection of deeply personal and meaningful data. The intimacy of the conversations and the reflexive nature of the participants (effects that may stem from having spent so much time contemplating each step of becoming a parent) elicited laughter, occasional tears of sadness, and several follow-up letters from participants expressing their thanks for a welcomed opportunity to talk about a subject not often shared nor its complex nature valued.

Every effort was made to recognize any biases in facilitating the interviews, when analyzing the data, and in maintaining neutrality in terms of my perceptions and observations of the data. My goal was to critically analyze the beliefs and experiences of the participants; yet, my stance is one that appreciates both their courage in raising families in a heterosexist culture and the commitment and intentionality required in creating a planned lesbian-led family.

### **Implications and Conclusions**

While some of the women who participated in this study came of age in an era holding the belief that motherhood was not an option for a lesbian partnership or as a single lesbian, women who are just now approaching early age of partnership are not quite so bound by this shift. Yet, the decisions and choices to be made in creating a family are not typical, open discourse nor are the social ramifications of lesbian parent identity easily navigated in our still heteronormative society. The hoops lesbian parents are required to jump through such as second-parent adoption, fighting for the legal right to appear on the birth certificate, and the need

to create informal/formal agreements with known donors that protect their "primary" status of parenthood, are just some of the stresses lesbian parents and lesbian-led families are subjected to – and that need to be understood by all who work with families.

It is important to explore the psychological defenses that come into play when sorting out issues of the donor. The family narrative will inevitably include a reference to the sperm that made the pregnancy possible. It is illuminating to understand how this "outside" support is manifested in narratives. Various possibilities describe the support as devoid of personhood, "it's a donation, a vial of sperm, nothing more" or as a father-removed hovering over the immediate family constellation or something in between. Useful questions to examine focus on the basis or beliefs are these donor narratives constructed. What happens when the genetics of the family are asymmetrical and the fabric of the family narrative is stretched thin by the tensions of differing psychological responses to that "outside" support? And what is a textured narrative that successfully weaves together the richness of the story and all of its characters, the family resiliently holds a narrative enhanced by the ways the biological and social blend?

Further study could be beneficial for lesbian planned families, enlarge our understanding the family creation process, and support practitioners who work with families in schools, medical and mental health settings. A greater appreciation for the emotional experiences and the challenges (both personal and logistical) of filling the lesbian non-gestational parent role would support these parents, and would help expand practitioners' perceptions of "family." The demands of forging a personal and social identity in a heterosexist culture are considerable and, yet, I walked away from every single interview with thoughts of how lucky these children were to have such reflective, determined, parents. It would benefit all of us who work with families to

elevate the discourse about "family" by working harder to understand and embrace the unique characteristics of lesbian planned families.

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## Appendix A



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December 12, 2012

Amy Morse

Dear Amy,

Thank you for making the requested changes. Great job and I agree with your exceptions to our suggestions. Your project is now approved by the Human Subjects Review Committee.

*Please note the following requirements:*

**Consent Forms:** All subjects should be given a copy of the consent form.

**Maintaining Data:** You must retain all data and other documents for at least three (3) years past completion of the research activity.

*In addition, these requirements may also be applicable:*

**Amendments:** If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

**Renewal:** You are required to apply for renewal of approval every year for as long as the study is active.

**Completion:** You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Best of luck on a very interesting study!

Sincerely,

A handwritten signature in black ink, reading "David L. Burton". The signature is written in a cursive style with a long horizontal flourish extending to the right.

David L. Burton, M.S.W., Ph.D.  
Chair, Human Subjects Review Committee

CC: Kristin Mattocks, Research Advisor

## APPENDIX B

### Informed Consent

**Name:** \_\_\_\_\_

**Title of Study:** Learning from lesbian non-biological parents: Contributions to a changing world

**Principal Investigator:** Amy Morse

Dear Participant,

My name is Amy Morse. I am a graduate student at Smith College School for Social Work. I am conducting research to learn more about the lives of lesbians who parent. The focus of this study is, in particular, on the experiences of the non-biological parent in lesbian-led families. Should you choose to participate, you will be asked specific questions about your role in the decision process that led to creating your family, how you perceive your parental identity and experience your role(s) in the family context, and how you understand other's perceptions of your identity as a parent. The data collected will be used in my MSW thesis, publications and for presentations.

Your participation in my study is voluntary. I am asking you to participate in one audiotaped interview. You may refuse to answer any or all of the questions. The interview will be comprised of open-ended questions about your experiences as a non-biological parent in a planned lesbian-led family and a set of 8 demographic questions. The interview will take 45-60 minutes to complete. The interview will be transcribed by a professional transcriber who will sign a confidentiality pledge.

To be eligible you must be: 18 years or older, identify as a lesbian, able to participate in a 45-minute interview in English, the non-biological mother of a child conceived by your current partner through an assisted conception process, and you must currently live in the same household as the birth parent and your child.

There is minimal risk involved in your participation. However, an interview discussing themes of identity and parenting may raise some emotional discomfort. You have the right to not answer a question, stop the audiotaping, or end the interview at any time. I will provide a list of free or low-cost referral resources should you have interest in using them. Through the interview process, you will have opportunities to share your experiences of parenting roles and identity. You will have an opportunity to talk about aspects of your role that you may not have explored

before. It is my hope that you can benefit from the knowledge that your contributions will expand the body of research about non-biological lesbian parents making this population more visible and better understood. Unfortunately, there is no monetary or material compensation offered in exchange for participation in the study.

To protect your identity, all information will be held confidential. Data will be held in a secure location and password protected for a period of three years and as required by Federal guidelines and then destroyed. Any and all identifying information will be removed before the data is shared with my research advisor, or anyone other than me has access to any of the data. In publications or in presentations, the data will be presented as a whole and when brief illustrative quotes or vignettes are used, they will be carefully disguised. Should I need the materials beyond the three-year period for research, they will continue to be kept in a secure location and will be destroyed when no longer needed.

Participation in this study is entirely voluntary and once you agree to participate, you may change your mind and withdraw at any time leading up to, during the interview, or by April 1, 2013. If you choose to withdraw, all materials pertaining to you will be immediately destroyed. However, once you have signed this form and the interview period is complete, you will no longer be able to withdraw your data. You may contact me by phone at XXX-XXX-XXXX if you have additional questions or you wish to withdraw. Should you have any concerns about your rights or about any aspect of the study, you are encouraged to call me at this number or you may contact the Chair of the Smith College School for Social Work Human Subjects Review Committee at 413.585.974.

### **RESEARCH SUBJECTS' RIGHTS**

**MY SIGNATURE INDICATES THAT I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION AND THAT I HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, MY PARTICIPATION, AND MY RIGHTS AND THAT I AGREE TO PARTICIPATE IN THE STUDY.**

I will keep a copy of this form for my records. I understand that if I am not satisfied with the manner in which this study is being conducted or if I have questions regarding my rights as a study participant, I may contact the Chair of the Smith College School for Social Work Human Subjects Review Committee at (413.585.7974).



**Participant** \_\_\_\_\_ **date** \_\_\_\_\_

**Principal Investigator** \_\_\_\_\_ **date** \_\_\_\_\_

Contact:

Amy Morse

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*Please keep a copy of this form for your records.*

*Thank you for your participation!*