

Men not included: A review of single and lesbian mother DI families: mother-child relationships en child development

Anne BREWAEYS

Department of Developmental Psychology. Free University Brussels, Pleinlaan 2, 1050 Brussels. Belgium.

Correspondence at: anne@brewaeys.com

Abstract

The number of single and lesbian mothers who want a child by means of donor insemination (DI) increased rapidly during the past twenty years. In this article a brief overview is presented of empirical findings with regard to family relationships and child development in these non traditional families.

Findings of single DI mothers remain preliminary but no adverse effects have been identified among the still very young children. There is a larger body of knowledge with regard to lesbian DI families. Overall, no differences were found compared with heterosexual two parent families with regard to family functioning and child development. The co-mother appeared to be more involved in child rearing than fathers.

In both groups children were aware of their donor origin in an early developmental stage. Although they did not consider the donor as part of their family, the majority of children requested (non)identifying donor information.

Based on the findings so far, single and lesbian women should be accepted in DI programs and the use of identity registered donors is advisable. Further large scale follow up studies are still needed.

Key words: Single and lesbian DI mothers / family relationships and child development /donor information.

Introduction

Donor Insemination (DI) was introduced more than 100 years ago, it is therefore one of the oldest techniques in reproductive medicine. During the nineteen seventies DI practice became widely available in most Western European countries but was only practiced within a strictly confidential doctor-patient context where the doctor guaranteed the anonymity of the donor and advised patients to keep the matter a closely guarded secret. Donors were selected for their similarity with the infertile man in order to hide the use of gametes as good as possible.

It was in the eighties that lesbian couples and single women made their first appearances in Fertility Centers. Their demands introduced a number of new challenges in DI practice. Programs were meant to treat heterosexual couples but these women wanted DI not because of a fertility problem of their husband but because of the absence of such a male partner. The majority intended to inform the child about the

use of a sperm donor and many requested (non) identifying donor information (Brewaeys *et al.*, 1993). Their demand made perfectly clear that in fact, donor insemination was not a medical fertility treatment but just an alternative road to parenthood with possibly more psychological consequences than previously thought of.

It was the growing social tolerance within the western social context that stimulated these non-traditional requests. During the seventies of the previous century societal values and attitudes with regard to marriage, sexuality, contraception and child bearing changed rapidly. Economic independence of women increased, gender roles became less dichotomist and a marriage was not necessarily lifelong. Single mother families were no longer an exception and for the first time some, mainly highly educated women, started a family on their own. As a result of the gay liberation movement "homosexual orientation" was officially excluded as a psychopathology from the International Diagnostic and

Statistical Manual of Mental Disorders. Homosexuality was to be regarded as normal sexual behavior. Social tolerance towards lesbian and gay people increased tremendously and lesbian mothers became more and more visible. Consequently, a diversity of non traditional families arised.

In what follows, the most prominent features of both family types are highlighted and a brief overview is presented of the most relevant empirical findings with regard to family relationships and child development.

Similarities and differences between single and lesbian mother families

The most controversial feature of these non traditional families is *the absence of a father*. In western culture the fundamental conviction prevails that a father is essential for the healthy psychological development of a child. Children growing up without a male parental figure would be at risk for identity confusion. Fathers are believed to be of particular importance in the development of a stable gender identity. Several psychological theories have addressed this issue. The most prominent one is Psychoanalytic theory. Central is the resolution of the oedipal conflict in which the child relinquishes the symbiotic relationship with the mother and identifies with the father (Chodorow, 1978). Empirical evidence for this theory is restricted to a number of clinical case descriptions.

In both family types the absent father is replaced by a *sperm donor*. Thus all children will be unknown with half of their genetic make-up. In contrast with heterosexual DI families where there is a father figure present in the family, children of lesbian and single mothers are expected to ask question about this father absence in an early developmental stage. The majority is aware of the donor conception before the age of 5 (Brewaeys *et al.* 1995). This enables us to study the donor concept of the children involved: if informed about their donor conception, what will they want to know about the sperm donor?

Although they have the absence of a father in common, two essential differences remain between lesbian and single mothers. Lesbian women applying for DI intend to raise their child together with their female partner. In contrast with single mothers, their child will grow up with two parents instead of one. Sharing educational tasks with a partner is different from doing it alone. Being a single parent might induce extra stress for mother and child.

On the other hand, single mothers appear to be mainly heterosexual, thus their children will not have to deal with their mothers' homosexuality and with potential homophobic reactions. There is now

abundant evidence that social stigmatization affects quality of life negatively and impairs social development.

Empirical follow up studies

Single mother families

Since the number of single mother families has dramatically increased in western society, data of several population studies have become available (Hetherington and Clingempeel, 1992; Ringback *et al.*, 2003). The great majority of these families were single parents after divorce and children had a known father. Results are unanimous. Mothers perceive more parental stress, have more psychological and physical health problems. When the children are compared with children raised in two parent families they appear to have more problems on all variables involved: physical health, psychopathology, addiction, cognitive development, socio-emotional development and the ability to engage in intimate relationships.

There are however a number of crucial differences between the families mentioned above and mothers who have chosen to become a single parent by means of DI. Most children in the previously meant studies experienced parental separation. As it is well known that parental conflict and divorce have a negative impact on children, these data tell us little about children of mothers who were single by choice. Moreover the majority of single mother families had a low socio-economic status and are very often confronted with poverty, both factors that influence the family climate negatively.

Single mothers by choice

Who are those single women who want a child by means of a sperm donor and what do we know about their children? Studies remain sparse, samples are small and not always representative. Most children studied were younger than 5 years. Consequently, crucial questions about the quality of life of adolescents and adults have not yet been addressed.

Motives and demographic features. All interviewed women were very much aware of their biological clock which did not allow any further delay of their child project. Their mean age when applying at the fertility clinic appeared to be higher than 35 years in all studies (Leiblum *et al.*, 1995; Klock *et al.*, 1996; Murrey and Golombok 2005). Most of these women went through a period of grief for not having found the appropriate partner at the appropriate moment. So, becoming a single DI mother was not their first choice. When looking at their educational and professional status, results were

unanimous, the majority of these women belonged to a socio economic privileged group, had a high professional status and were financially independent.

Psychological, relational and social characteristics. The majority of studies reported that mothers were psychologically healthy and could rely on a supportive social and family network. Moreover, single mothers felt more satisfied with being a mother than a control group (Leiblum *et al.*, 1995; Klock *et al.*, 1996; Murray and Golombok, 2005). Only one Belgian study, describing characteristics of applying single women, labelled 20% of the group as being psychologically unstable (Baetens *et al.*, 1995). However, diagnosis was based on clinically impression without the use of standardized instruments. All studies reported that these women had meaningful *partner relationships* in the past. What these findings do not tell us is why they failed to develop long lasting partner relationships. Did some of these women lack the abilities to develop intimate relationships or is it the changing social context that makes it hard for some well educated women to find the right man?

Family relationships and the psychological development of children. When compared with two headed families, no major differences were found in the quality of parent child relationships. However the children studied were mostly of a pre-school age (Golombok *et al.*, 1997; Murray and Golombok 2005). Two studies investigated 7 year old children (Flaks *et al.*, 1995; MacCallum and Golombok, 2004). MacCallum and colleagues reported more interaction between mother and child in the single families, but also more disputes in disciplinary interactions. Chan and colleagues failed to find any difference between single and two headed DI families with regard to mother-child interaction.

No difference was found in the psychological development of the children (social, emotional and behavioural development) compared with two headed families. The only difference found in one study of the 7 year old children was that children of fatherless families perceived themselves to be less cognitively and physically competent than their peers in father-present families (MacCallum and Golombok 2004).

Lesbian mother families

There is these days a considerable body of knowledge on lesbian mothers and their children. The design and research questions changed over the years and a brief overview will be presented. In the early eighties of previous century a number of custody cases withdraw children from their lesbian mothers assuming that they could not be fitted parents. These women were divorced and came out as homosexuals

after their divorce. So, a number of researchers developed studies in which these mothers and their children were compared with divorced heterosexual single mothers (Golombok *et al.*, 1983; Green *et al.*, 1986). When the first lesbian couples started to apply at fertility clinics for Donor Insemination, new questions were raised. In the previous lesbian families, all children had a known father since their mother divorced after having lived for a number of years in a heterosexual family. Little was known about the psychological effect of being fatherless right from birth. New studies emerged. This time lesbian mothers were compared with heterosexual DI families in which a father was present (Brewaeys *et al.*, 1997; Chan *et al.*, 1998). When it appeared from previous studies that all these young children were doing fine, there was a need for long term follow up studies. Indeed, young children do not have the cognitive and emotional abilities to fully understand the special features of their family. And it is only during adolescence that they fly out in the often homophobic world. A number of longitudinal studies investigated adolescents and adults. They interviewed the children themselves about having a lesbian mother and being donor conceived (Golombok and Tasker 1996; VanFraussen *et al.*, 2003; Garttrel *et al.*, 2005).

Despite the differences in research designs, numbers of participants and used instruments, findings of a large body of studies were strikingly unanimous.

With regard to the *development of family relationships* during childhood and adolescence, lesbian mothers did not differ in the quality of the parent-child interaction compared with heterosexual DI and Naturally Conceived families. They were equally emotional involved and equally disciplining the child. Grandparents did accept these children as their offspring and were equally involved than grandparents in the heterosexual families.

However, a number of interesting differences with the heterosexual family did appear. The co-mother, the biological mother's lesbian partner was more involved in all aspects of child rearing than the heterosexual father. And this was particularly so during childhood. Furthermore, educational tasks were more equally divided between lesbian mothers than between mother and father in the heterosexual families (Brewaeys *et al.*, 1997). When adolescent children themselves were interviewed about their family relationships, it appeared that they were equally attached to both mothers. Moreover, children of lesbian mothers communicated more about emotional issues with the co-mother than children in the heterosexual families with the father (Vanfraussen *et al.*, 2003).

The *psychological development* of children raised by lesbian mothers was similar in all studies.

Children were well adjusted and showed normal emotional and behavioral development compared with heterosexual controls. A few studies investigated gender role development during childhood. Results failed to find any difference between a child raised in a lesbian family compared with a heterosexual family. One study reported on the sexual identity of adults raised in a lesbian family and again there were no indications that these adults developed a homosexual orientation (Golombok and Tasker 1996). Social development and the quality and number of contacts with peers was also within the normal range (Vanfraussen *et al.*, 2003).

Social stigmatization. All these findings are pretty reassuring and one wonders whether children experience any homophobic reaction in their social surroundings. A number of studies investigated this issue in detail. In the study of Vanfraussen *et al.* it was found that children became more secretive about their non-traditional family when growing older. Children appeared to be more selective to whom they disclosed their two mother family unit. And although peer teasing did not occur more frequently, if they were teased it was about themselves being homosexual or similar issues (Vanfraussen *et al.*, 2001; Vanfraussen *et al.*, 2003). In the US Study by Gartrell (2005) and colleagues nearly half had experienced some form of homophobia and those who did, reported more psychological distress.

Children's donor concept

A number of studies investigated the donor concept of the children raised in lesbian mother families (Vanfraussen *et al.*, 2001; Vanfraussen *et al.*, 2003; Gartrell *et al.*, 2005; Scheib *et al.*, 2005). Children of lesbian and single mothers are informed about the use of a donor in an early developmental stage and this is in sharp contrast with the majority of heterosexual parents. Even though children of the former families and heterosexual DI families cannot be compared (the latter have a father), findings about their donor concept remain relevant. If children are aware of their donor origin, what is then his role in their donor and family concept.

In our own longitudinal study of lesbian families we interviewed the children themselves. When they were 5 years old, they could all tell the interviewer a story in which it appeared very clearly that they had two mothers and no father. In their concept the donor was reduced to seeds (no person) and remained absent in their representation of their family. Children had no or little awareness that their family was different (Brewaeys *et al.*, 1995). The question remained what these children would think of their donor origin once they had reached a more advanced

stage of cognitive and social development. In the second interview, when children were between 8 and 18 years old, it was obvious that both mothers were still considered as the only parents and none of the children regarded the donor as a family member. (Vanfraussen *et al.*, 2003). When children were between 8-18 years of age, the question was asked what they wanted to know about the donor. Please keep in mind that all were conceived by means of an anonymous donor and children were aware of that. Forty one percent of the boys and 10% of the girls said that, if they had the opportunity, they would have liked to meet the donor. Their major motive was curiosity about physical and personality characteristics and about the existence of half siblings. Nine percent of the boys and 32% of the girls were happy with non identifying information and 50% of the boys and 58% of the girls did not need any information at all (Vanfraussen *et al.*, 2001).

Similar results were found in two American studies (Gartrell *et al.*, 2005 and Scheib *et al.*, 2005). Whether or not children were conceived by an anonymous or identifiable donor, seemed to make only a small difference in their curiosity (Gartrell *et al.*, 2005). Note worthy is the high number of searches found in the study by Joanna Scheib and colleagues. Here all donors were identity registered and the number of adolescents who wished to meet the donor in future was up to 80%.

Discussion

In this article a brief overview was presented of the most relevant empirical findings with regard to family relationships and child development in single lesbian mother families.

The sparse studies investigating single women applying for DI outline a picture of last chance mothers not wanting to wait any longer for an appropriate partner. Overall these women were highly educated, financially independent, had a supportive social network and did not rule out men in their future lives. Although minor differences had been identified between single mother and two parent families, no major negative effect was found on family relationships and child development. Findings remain preliminary and the majority of children involved were of pre-school age. Questions about emotional, social and identity development during adolescence and adulthood remain unanswered. Taking into account the trend in Western Society in which a growing number of women remain single and tend to delay their child wish, applications at Fertility centres are growing continually, reason enough to set up large scale longitudinal studies.

In contrast with the former group, there is a larger body of evidence about lesbian mother families and no adverse effect of lesbian motherhood could be identified. Family relationships were stable and co-mothers were more involved in child rearing than fathers. Children were doing well and there were no signs of an atypical gender role development or homosexual orientation. An issue needing more attention however is the effect of social stigmatization on the family. One should realize that the families studied so far were privileged: mothers were white, well educated and living in a tolerant social environment. During the last twenty years, motherhood is no longer a taboo among the majority of lesbian women in western society. Lesbian women applying at Fertility Centers these days are younger and come from a wider social and educational background. Replication studies of these new emerging group are still needed.

The majority of children who are informed in an early developmental stage about their donor conception are curious about certain donor characteristics and a respectable number wants to meet him. It appears that their main motive is to find a better understanding of themselves and develop a stable sense of identity. What we don't know is if the absence of a father figure influenced their curiosity. In the study by Vanfraussen and colleagues (2003) boys outnumbered girls in their wish to meet the donor. These findings are in sharp contrast with results of adoption research which unanimously finds that girls are much more curious than boys about their birth parents. The fact that there is no father figure to identify with in the lesbian families, might have caused the gender difference.

In conclusion, in the past twenty years single and lesbian mother families became more and more visible, social acceptance increased and a variety of non traditional families arised. No adverse effects for the children have yet been identified. In my opinion, these women should be included in DI programs. Just like all other DI applicants they fare well with appropriate counseling that addresses their specific characteristics and needs. Taking into account that the majority of their children wishes (identifying) donor information, only identity registered donors should be used.

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