

Planned lesbian families: their desire and motivation to have children

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BACKGROUND: There is no information about the desire and motivation for children among planned lesbian families. The overall aim of this research was to examine whether planned lesbian families differ from heterosexual families in desire and motivation to have a child. The reason for studying this is that desire and motivation to have children are characteristics that are supposed to effect parenting and the parent–child relationship. **METHODS:** A total of 100 lesbian two-mother families were compared with 100 heterosexual families. All data were collected by means of questionnaires. **RESULTS:** Lesbian parents and heterosexual parents rank their parenthood quite similarly; however, happiness is significantly more important for lesbian mothers than it is for heterosexual parents and identity development is less important for lesbian mothers than it is for heterosexual parents. Furthermore, compared with heterosexual parents, lesbian parents had spent more time thinking about their motives for having children, and their desire to have a child was stronger. **CONCLUSIONS:** Lesbian parents especially differ from heterosexual parents in that their desire to have a child is much stronger. The study's findings may be helpful for counsellors in their work to inform and assist lesbian couples in their decision to have a child.

Key words: lesbian mothers/parenthood motives/planned lesbian families

Introduction

The increased access to donor insemination since the 1980s has resulted in what several authors have referred to as a baby boom among lesbians (Weston, 1991; Patterson, 1995; Morningstar, 1999). Regardless of this lesbian baby boom, there is a lack of information about the motives behind the desire of lesbian women to procreate. In the present study, parenthood motives and the desire to have children were investigated among a large group of lesbian families.

In the literature, two-mother families in which the child was born to the lesbian relationship are characterized as 'planned lesbian mother families' (Flaks *et al.*, 1995). In this relatively new family type, the two lesbian mothers (the biological mother and the social mother) planned their children together. This in contrast to lesbian families where children were born in a formerly heterosexual relationship. In The Netherlands, where this study was carried out, among heterosexual families almost every baby is 'planned', or at least not born unwanted. Fertility behaviour in The Netherlands is well regulated, unwanted pregnancies are rare, and contraception is widely available and its use is widespread (Bonsel and Van der Maas, 1994; Latten and Cuijvers, 1994).

It is difficult to say how many lesbian parents there are (Patterson and Friel, 2000). In most Western industrialized countries the total number of lesbians who have given birth to a

child within a lesbian relationship amounts to several thousands; however, this is an estimate. Probably, the majority of the parents in planned lesbian families became pregnant through donor insemination (Patterson and Chan, 1999). Lesbian women, for example, can be impregnated at an AIDs clinic with sperm from a donor. In The Netherlands almost all fertility clinics offer insemination services or IVF to unmarried women, including lesbians. There are, however, some Dutch clinics that refuse to provide such a service to lesbians or single parents (Commissie Gelijke Behandeling, 2000; de Graaf and Sandfort, 2001). Other lesbian couples opt for self-insemination using sperm provided by a male friend or relative. The present investigation was unique in that it focused on a large group of planned lesbian families, consisting of lesbian couples who attended a fertility clinic in order to become pregnant as well as lesbian couples who opted for self-insemination.

There is a body of literature that presents speculations about the motives behind human procreation in heterosexual relationships. Some authors attach great importance and great value to biological drives (Benedek, 1970a; b). From a psychoanalytic perspective, motherhood is viewed as essential for women to develop a female identity. From a feminist perspective, however, the desire to have a child has been seen as a consequence of social enforcement, and motherhood has often been criticized as a barrier to personal development and

freedom (for an overview see Thompson, 2002). Early feminist critics also associated new reproductive technologies with the glorification of traditional motherhood (Hammer, 1984; Rowland, 1984; Corea, 1985). Others, however, saw these technologies as a means to facilitate lesbian parenting and to break down compulsory heterosexuality (Arditti *et al.*, 1989).

Traditionally research into the motives for wanting children has been centred on a cost–benefit model (Fawcett, 1972; 1978; Fawcett *et al.*, 1972; Hoffman, 1972; Hoffman and Hoffman, 1973; Seccombe, 1991). The underlying basis of this model is that people decide to have a child, or a further child, after weighing up the pros and cons of having children. Perceived costs seldom deter a woman from wanting a first child (Knijn, 1986; van Balen and Trimbos-Kemper, 1995), but might be an important factor in the decision about the upper limit of the number of children she wishes to have (Hoffman and Manis, 1979). Therefore, it is important to study parenthood motives from the perspective of why couples value becoming parents (van Balen and Trimbos-Kemper, 1995). In recent years a number of studies have been carried out from this perspective; however, there have been no follow-up studies on parenthood motives. Of particular interest are studies of couples that become parents after assisted reproduction (van Balen and Trimbos-Kemper, 1995; Colpin *et al.*, 1998; Langdridge *et al.*, 2000). The underlying reason for studying parenthood motivation and the strength of desire to have children was that these aspects are supposed to effect parenting and the relationship between parent and child (Levy, 1970). Lesbian mothers also have the experience of assisted reproduction help; however, parenthood motives and desire have been addressed only sporadically among lesbian mothers. The purpose of the present research was to expand what is known about parenthood motivation in planned lesbian families. The previous study is exceptional because it examined reasons for parenthood among a large group of planned lesbian families and compared these reasons with those of heterosexual families. In order to decrease the possible confounding aspects of infertility, a comparison was made with heterosexual families with naturally conceived children.

In the transition to parenthood, lesbian women are confronted with questions, sometimes critical ones, posed by their family, friends and other people in their environment (e.g. colleagues) about their motives for having a child. Lesbian women are therefore stimulated to reflect on their desire to have children and to think, and rethink, about their motives for wanting children more often than fertile heterosexual parents are. Lesbian women who opt for donor spermatozoa in a hospital have to undergo an extensive intake interview with a counsellor about their reasons for wanting to become a parent. In this respect, lesbian women are in a situation similar to that of infertile heterosexual couples, who also have to explain their decision to family, friends and counsellors. One would thus expect that lesbian couples, like infertile couples, spend more time on the thought process (reflection) concerning their desire to have a child than do fertile heterosexual couples.

Another aspect of the transition to parenthood is the strength of desire to have children. Until now, there have been no studies of the intensity of the desire to have children among

lesbian couples, and whether this desire is stronger than that of fertile heterosexual couples. It is thought that lesbian couples go to very great lengths to pursue their desire to have a child, and that this desire is very strong among lesbian women. For most lesbian women, becoming pregnant is a more complex matter than it is for fertile heterosexual couples, because lesbian women do not become pregnant by having sex with their partner. For lesbians who want to become pregnant through self-insemination it is difficult to find a sperm donor, and lesbians who have decided to go to a fertility clinic are often confronted with a long waiting list. It is assumed that through these circumstances the intensity of the desire for a child is stronger among lesbian parents compared with heterosexual parents.

In summary, the aim of this study was to investigate the motives behind parenthood, the thought process (reflection) involved in the desire to have a child and the strength of desire in lesbian parents, and to compare these aspects with heterosexual parents with no history of fertility problems. In addition, the study looked at the relationship between reflection, the strength of desire and the motives for having children.

Materials and methods

This study investigated the desire and motivation of planned lesbian families to have children, and compared these aspects with those of a group of heterosexual families with no history of fertility problems (e.g. heterosexual families with naturally conceived children). Participation in the study for both the lesbian and the heterosexual families was based on the criterion that parents had to be Dutch. We did this because the questionnaire was in Dutch and because we wanted to eliminate possible confounding of differences in ethnic background.

Recruitment and responses

The planned lesbian family group was recruited by several methods: through a medical centre for artificial insemination (response rate 41.9%; $n = 18$ couples); through a mailing list for gay and lesbian parents (response rate 78.3%; $n = 47$ couples); and with the help of individuals with expertise in the area of gay and lesbian parenting (response rate 45.3%; $n = 34$ couples). In addition, an advertisement was placed in a lesbian magazine. The total response for the lesbian family group was 55.6% ($n = 99$). Only one family responded on the advertisement.

Some respondents of the group of heterosexual families were randomly drawn from the population register of two cities. Others were contracted with the help of schools and by means of referrals from participants in the lesbian family group. The total response rate was 21.4% (population register offices 17.3%; professional contacts 24.1%; and referrals 38.7%). Using this procedure we obtained a pool of 251 heterosexual families. From this pool, 100 families were selected because they matched with the lesbian mother families on, for example, urbanization (population registration offices 42 families; professional contacts 49 families; and referrals nine families).

There were differences between the overall response rate of the lesbian family group and that of the heterosexual family group (55.6 and 21.4% respectively).

Based on the findings of previous research (Brewaeyts *et al.*, 1993; Wendland *et al.*, 1996; Jacob *et al.*, 1999) we also expected that the response rate among lesbian families would be higher than among heterosexual families. The relatively high response rate in the lesbian

family group may be associated with curiosity among lesbian couples on the topic of this study. For these lesbian couples that are recruited through the infertility clinic, a feeling of obligation to do something in return for the medical assistance they had received might have been an important reason for deciding to participate in the study. The response rate in our study among heterosexual families was low, however, comparable with the response rate of other Dutch studies on family issues (Brinkman, 2000; de Leeuw and De Heer, 2002).

Measures

Data concerning parenthood motivations, the time parents had spent thinking about the reasons for having children (reflection) and the desire to have a child (strength of desire) were collected by means of a questionnaire. The instruments in this study have been used in previous research on parenthood motives among involuntary childless couples (van Balen and Trimbos-Kemper, 1995), in research where IVF mothers were compared with mothers who conceived in a traditional way (Colpin *et al.*, 1998), and in research among female university students who did not yet have children (Gerson, 1983). All questions about parenthood motives, reflection and the strength of desire to have a child referred to the first child.

Parenthood motives. The Parenthood Motivation List (van Balen and Trimbos-Kemper, 1995) was used to measure the motives for having a child. Six motives were distinguished in this self-report questionnaire: (1) happiness; (2) motherhood/fatherhood; (3) well-being; (4) identity; (5) continuity; and (6) social control. Happiness referred to the expected feelings of affection and happiness in the relationship with children (e.g. 'Children make me happy'). Motherhood/fatherhood referred to the expectation that parenthood will provide life-fulfilment (e.g. 'Experience pregnancy/birth'). Well-being referred to the expected positive effects for the family relationship (e.g. 'Makes life complete'). Identity referred to the desire to have children as a means of achieving adulthood and identity strengthening (e.g. 'Sign of being grown up'). Continuity referred to the desired affective relation with grown-up children and the wish to live on after death through one's children (e.g. 'To continue living'). Social control referred to implicit or explicit pressure from outside the couple to procreate (e.g. 'Is expected by others'). Each dimension consisted of three items and respondents were asked to rate the importance of each item at the moment they first thought about realizing their desire to have children. Responses were rated, on a three-point scale (1 = not important to 3 = very important). In the present study Cronbach's alpha for happiness, motherhood/fatherhood and well-being were good ($\alpha = 0.62, 0.60$ and 0.65 , respectively). Cronbach's alpha on identity, continuity, and social control were just sufficient ($\alpha = 0.52, 0.50$ and 0.50 , respectively).

Reflection. To measure the thought process (reflection) involved in the process of deciding to have children, we inquired about how often parents had thought about the reasons for having children (1 = never, 3 = often).

Strength of desire to have children. The strength of the parent's desire to have children (intensity of desire) was assessed on a six-point Likert scale. The following question was asked: 'What were you willing to give up in order to have children?' (1 = it didn't really matter to me, 6 = more than anything). The respondents were also asked to compare the strength of their desire to have children with the strength of their partner's desire.

Subjects

A total of 100 lesbian mother families and 100 heterosexual families with no history of fertility problems participated in this study. Because all questions about parenthood motives, reflection and the strength of desire to have a child referred to the first child, we defined the

biological mother of the first child in the lesbian family as the lesbian biological mother, and the other mother in the lesbian family as the lesbian social mother. Only a minority (33%) of the social mothers of the first child had later given birth to a further child. The majority of the lesbian couples (58%) applied to an AIDs clinic and used sperm from an anonymous (45%) or identifiable donor (13%). Nearly half of the lesbian couples (42%) opted for self-insemination.

Most families in our study, both lesbian mother and heterosexual parent families, lived in an urban area (91 and 94%, respectively). The mean age of the lesbian biological mothers at the time the first child was born was significantly higher than that of the heterosexual mothers (lesbian mothers: mean 34.6 years, SD 3.32; heterosexual mothers: mean 31.6 years, SD 3.84; $P < 0.001$). The lesbian social mothers' mean age at the time of birth of the first child was significantly higher than that of the heterosexual fathers (lesbian mothers: mean 35.4 years, SD 6.03; heterosexual fathers: mean 33.3 years, SD 3.85; $P < 0.01$).

No significant difference was found between the family types with regard to educational level and mean duration of the relationship. In both groups, most parents (75.5%) had studied at a higher professional or academic level. The mean duration of the couples' relationship was 14.9 years for the lesbian couples (SD 3.87) and 14.8 years (SD 4.89) for the heterosexual couples.

Statistical analysis

To test for differences between lesbian parents and heterosexual parents on the transition to parenthood, multivariate ANOVAs were performed with parenthood motives, reflection and desire as dependent variables, and family type as an independent variable. When Wilks' criterion was significant, a series of one-way ANOVAs was carried out in order to compare lesbian biological mothers with heterosexual mothers, and lesbian social mothers with heterosexual fathers.

Demographic information about the sample showed that lesbian families and heterosexual families differed on the parental age at the time the first child was born. Therefore, when one-way ANOVAs showed a significant difference between lesbian biological mothers and heterosexual mothers, or between lesbian social mothers and heterosexual fathers, the initial group comparisons was followed by an ANOVA with parental age at the time the first child was born as a covariate.

To assess the relationship between reflection, the strength of desire and the motives for having children, correlation coefficients (Pearson's product moment correlation, r) were calculated between these studied variables separately for lesbian mothers (both biological and social) and heterosexual parents (both fathers and mothers).

Results

Parenthood motives, reflection and desire

Multivariate analysis of variance was performed to establish whether there were any significant differences between the lesbian families and the heterosexual families on parenthood motives, reflection and the intensity of the desire to have children. The results of the Wilks' criterion reflected a significant effect [$F(8, 384) = 18.21, P < 0.001$]. Table I presents the means and the SDs for lesbian biological mothers, lesbian social mothers, heterosexual mothers and heterosexual fathers on all the variables assessed, as well as the results of univariate ANOVAs between lesbian biological mothers and

Table I. Parenthood motives, reflection, and intensity of desire (means and SD) for lesbian and heterosexual parents

| | Lesbian biological mothers | Heterosexual mothers | Lesbian social mothers | Heterosexual fathers | Lesbian biological mothers versus heterosexual mothers (<i>P</i>) | Lesbian social mothers versus heterosexual fathers (<i>P</i>) |
|---------------------|----------------------------|----------------------|------------------------|----------------------|---|---|
| Parenthood motives | | | | | | |
| Happiness | 2.75 (0.33) | 2.60 (0.46) | 2.66 (0.44) | 2.40 (0.48) | <0.01 | <0.001 |
| Parenthood | 2.41 (0.45) | 2.33 (0.55) | 2.15 (0.59) | 2.07 (0.53) | NS | NS |
| Well-being | 1.98 (0.48) | 2.02 (0.58) | 1.86 (0.52) | 2.08 (0.61) | NS | <0.01 |
| Continuity | 1.46 (0.40) | 1.53 (0.45) | 1.33 (0.36) | 1.48 (0.44) | NS | <0.01 |
| Identity | 1.24 (0.34) | 1.42 (0.45) | 1.26 (0.40) | 1.47 (0.47) | <0.001 | <0.01 |
| Social control | 1.10 (0.22) | 1.12 (0.20) | 1.07 (0.20) | 1.15 (0.29) | NS | <0.01 |
| Reflection | 2.42 (0.61) | 1.93 (0.54) | 2.25 (0.59) | 1.87 (0.51) | <0.001 | <0.001 |
| Intensity of desire | 4.59 (0.88) | 3.85 (1.18) | 4.27 (1.10) | 3.57 (1.06) | <0.001 | <0.001 |

NS = not significant.

heterosexual mothers, and between lesbian social mothers and heterosexual fathers.

Parenthood motives. As described, six categories of motivation were discerned: happiness, well-being, parenthood, identity, continuity and social control. As shown in Table I, the order of the motives is quite similar for lesbian parents and heterosexual parents. The overall scores on such motives as happiness and parenthood are relatively high, whereas they are relatively low on social control. Univariate ANOVAs between lesbian biological mothers and heterosexual mothers on parenthood motives revealed significant differences on two scales (Table I). Happiness was significantly more important for lesbian biological mothers than for heterosexual mothers [$F(1, 1.15) = 7.15, P < 0.01$], and identity development was a significantly more important motive for heterosexual mothers than it was for lesbian biological mothers [$F(1, 1.65) = 10.38, P < 0.001$]. For happiness and identity development, the differences between biological and heterosexual mothers remained significant after controlling for parental age at the time of birth of the first child [happiness: $F(1, 0.81) = 4.98, P < 0.05$; identity development: $F(1, 1.02) = 6.40, P < 0.01$]. No significant differences between lesbian biological mothers and heterosexual mothers were established either for the motive parenthood or for well-being, continuity and social control.

No significant differences were established between lesbian social mothers and heterosexual fathers on the motive parenthood. On the other hand, they differ significantly from each other on the motives happiness, well-being, continuity, identity development and social control (Table I). For lesbian social mothers, happiness was a significantly more important motive than it was for fathers [$F(1, 3.35) = 15.88, P < 0.001$]. Nevertheless, well-being [$F(1, 2.46) = 7.65, P < 0.01$], continuity [$F(1, 1.09) = 6.76, P < 0.01$], identity development [$F(1, 2.22) = 11.55, P < 0.01$] and social control [$F(1, 0.38) = 6.05, P < 0.01$] were less important motives for lesbian social mothers than they were for fathers. These differences remained significant after controlling for the age of the parent at the time of the birth of the first child [happiness: $F(1, 3.43) = 16.21, P < 0.001$; well-being: $F(1, 1.70) = 5.33, P < 0.05$; continuity:

$F(1, 0.79) = 4.93, P < 0.01$; identity development: $F(1, 1.71) = 8.92, P < 0.001$; social control: $F(1, 0.35) = 5.51, P < 0.01$].

Within lesbian families, the biological mothers of the first child differed significantly from the social mothers on the motives happiness, parenthood and continuity: these motives were more important for the former than for the latter group [happiness: $t(99) = 2.11, P < 0.05$; parenthood: $t(98) = 3.66, P < 0.001$; continuity: $t(98) = 2.91, P < 0.01$]. Being the social mother of the first child does not mean that this woman is not the biological mother from one or more of the other children born to the relationship later on. In comparison to those social mothers who did not become a biological mother, parenthood and continuity were significantly more important for those social mothers who became a biological mother for the second or third child (parenthood: mean 2.50, SD 0.51 versus mean 1.98, SD 0.56, $P < 0.001$; continuity: mean 1.44, SD 0.38 versus mean 1.27, SD 0.34, $P < 0.05$).

Mothers in heterosexual families differed significantly from fathers in that for mothers happiness and parenthood were more important as a motive than they were for fathers [happiness: $t(98) = 2.94, P < 0.01$; parenthood: $t(98) = 3.81, P < 0.001$].

Reflection. Univariate ANOVAs between lesbian biological mothers and heterosexual mothers, and between lesbian social mothers and heterosexual fathers, on the time they had spent thinking about the reasons for having children (reflection) revealed significant differences (see Table I). Lesbian biological mothers and lesbian social mothers had spent significantly more time on this process than had heterosexual mothers and heterosexual fathers, respectively [lesbian biological mothers versus heterosexual mothers: $F(1, 12.00) = 36.64, P < 0.001$; lesbian social mothers versus heterosexual fathers: $F(1, 7.26) = 23.60, P < 0.001$]. After controlling for parent's age (at the time the first child was born) these differences remained significant for the former and for the latter comparison [$F(1, 7.86) = 24.27, P < 0.001$ and $F(1, 7.74) = 25.59, P < 0.001$, respectively].

We also analysed whether parents within lesbian families, and parents within heterosexual families, differ from each other on reflection. Within lesbian families, biological mothers of the

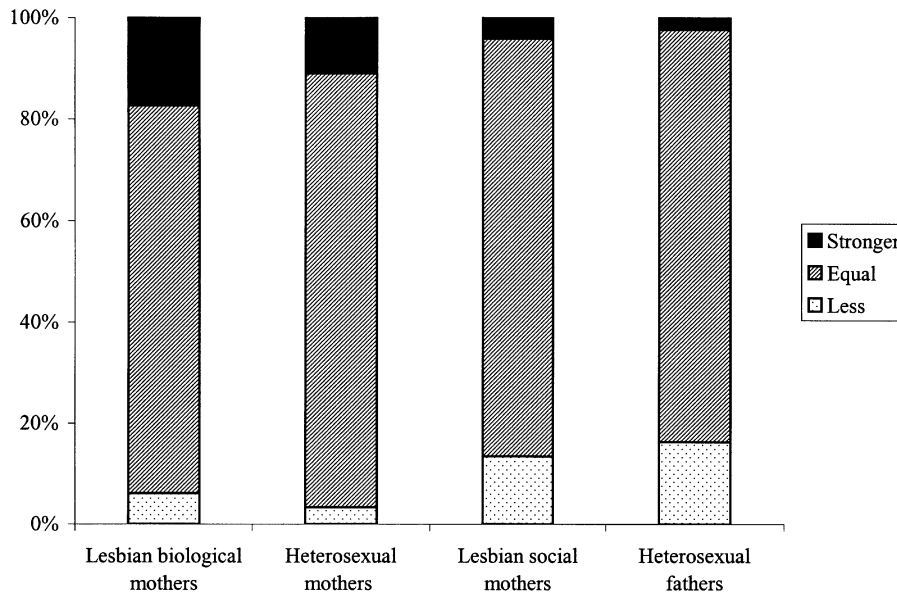


Figure 1. Perception of one's own desire to have a child compared with partner's desire.

first child had spent significantly more time thinking about the reasons for wanting children than their partners had [$t(97) = 2.21, P < 0.05$]; in heterosexual families mothers and fathers did not differ significantly from each other on this aspect. On reflection, social mothers in lesbian families who later became pregnant with a further child did not differ significantly from those mothers who did not become a biological mother at all.

Strength of desire to have children. With respect to the strength of desire to have children, lesbian biological mothers differ significantly from heterosexual mothers (see Table I). The mean score of the lesbian biological mothers on the six-point Likert scale measuring the strength of desire was significantly higher than the mean score for heterosexual mothers [$F(1, 27.38) = 25.22, P < 0.001$]. This effect remained significant after controlling for the parent's age at the time the first child was born [$F(1, 28.52) = 26.35, P < 0.001$].

Analysis also indicated that lesbian social mothers and heterosexual fathers differ significantly from each other on the intensity of the desire to have a child (see Table I). In comparison to heterosexual fathers, the mean score among lesbian social mothers on desire was significantly higher [$F(1, 24.11) = 20.49, P < 0.001$]. The differences remained significant after controlling for the age of the parent at the time the first child was born [$F(1, 28.41) = 6.05, P < 0.05$].

Furthermore, within lesbian families the strength of desire to have children was significantly higher for the biological mother than it was for the social mother of the first child [$t(99) = 2.11, P < 0.05$]. On the strength of desire, social mothers in lesbian families who later became pregnant with a further child did not differ significantly from those mothers who did not become a biological mother at all. Within heterosexual families, the parents did not differ from each other on desire. The strength of desire to have children among mothers in heterosexual families was not significantly greater than among fathers in heterosexual families.

Lesbian biological mothers and lesbian social mothers did not significantly differ from mothers and fathers in heterosexual families, with respect to how respondents compared their own desire with that of their partner (see Figure 1). However, there were significant differences between biological and social mothers in lesbian families, as well as between mothers and fathers in heterosexual families: 19% of the lesbian biological mothers experienced their own desire to have children as being stronger than their partner's desire, in comparison with 2.1% of the lesbian social mothers. Only 3.1% of the biological mothers in lesbian families versus 16.5% of the social mothers perceived their own desire as being weaker [$\chi^2(2) (n = 195) = 22.71, P < 0.001$]. Among the social mothers of the first child, there were no significant differences on this aspect between those mothers who are and those who are not the biological mother of one of the other children.

In heterosexual families, more mothers than fathers experience their own desire as being stronger than that of their partner (11.0% as opposed to 2.3%), and 3.3% of the mothers and 16.3% of the fathers reported their own desire as being weaker than that of their spouse [$\chi^2(1) (n = 177) = 12.75, P < 0.01$].

In addition, the mutual assessment of the desire to have a child was analysed. In 84.5% of the lesbian families and in 79.3% of the heterosexual families there is a similarity between the perceptions of the strength of the child wish between both partners.

Relation between reflection, the strength of desire and motives

Reflection and strength of desire. For lesbian parents (both the biological and the social mother), an intense desire to have children correlated with a high level of reflection (biological mothers: $r = 0.27, P < 0.01$; social mothers: $r = 0.32, P < 0.001$). Among heterosexual parents (both mothers and

Table II. Pearson correlation coefficients between parenthood motives and reflection and strength of desire for children for lesbian and heterosexual parents

| Parenthood motives | Reflection | | | | Strength of desire | | | |
|--------------------|--------------------------------|----------------------------|-----------------------|---------|--------------------------------|----------------------------|-----------------------|---------|
| | Lesbian families | | Heterosexual families | | Lesbian families | | Heterosexual families | |
| | Biological mothers first child | Social mothers first child | Mothers | Fathers | Biological mothers first child | Social mothers first child | Mothers | Fathers |
| Happiness | 0.30** | 0.26* | 0.06 | 0.04 | 0.05 | 0.38*** | 0.22* | 0.39*** |
| Parenthood | 0.29** | 0.24* | 0.06 | 0.01 | 0.31** | 0.41*** | 0.28** | 0.20* |
| Well-being | 0.28** | 0.16 | 0.13 | 0.07 | 0.04 | 0.21* | 0.23* | 0.36*** |
| Continuity | 0.17 | 0.10 | 0.04 | 0.13 | 0.10 | 0.01 | 0.20* | 0.15 |
| Identity | 0.18 | 0.09 | 0.03 | 0.05 | 0.10 | 0.09 | 0.12 | -0.02 |
| Social control | 0.01 | 0.11 | 0.21* | 0.21* | -0.06 | -0.13 | 0.33*** | 0.03 |

* $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$.

fathers), no significant correlation between reflection and strength of desire was found.

Motives and reflection. Table II shows the correlation between parenthood motives and reflection for lesbian mothers (both biological and social) and for heterosexual parents (both mothers and fathers). For lesbian mothers (both biological and social), the most important parenthood motives were significantly correlated with reflection. The more important were the motives happiness and parenthood, the more time they had spent thinking about the reasons for having children. For lesbian biological mothers, well-being was also significantly correlated with reflection. The more important this motive, the more time lesbian biological mothers had spent on reflecting about having children. In addition, for lesbian mothers (both biological and social) no significant correlation was found between the less important motives (identity development, continuity and social control) and reflection.

For the parents in the comparison group of heterosexual families, the motives happiness, parenthood, well-being, identity development and continuity did not correlate significantly with reflection; however, social control—the least important motive—did correlate significantly. The more important the motive of social control, the more time the heterosexual parents (both mothers and fathers) had spent thinking about their reasons for wanting children.

Motives and strength of desire. Table II also shows the correlation between parenthood motives and the strength of desire to have a child. For lesbian biological mothers, the strength of this desire was significantly correlated with the motive parenthood. The more important this motive, the stronger the desire to have children. For lesbian biological mothers, no significant correlations were obtained between the strength of desire and any of the other five motives. For lesbian social mothers and for fathers in heterosexual families, the strength of desire was significantly correlated with the motives happiness, parenthood and well-being—the three most important motives for this group. The more important these motives were for lesbian social mothers and heterosexual fathers, the stronger the desire to have a child. Among mothers in the heterosexual comparison group it appeared that only identity development was not significantly correlated with the desire to have children. However, the more importance these mothers

attached to such motives as happiness, motherhood, well-being, continuity and social control, the stronger the intensity of desire to have children.

Discussion

The aim of this study was to examine the differences between lesbian mother families and heterosexual families in the process of transition to parenthood. A total of 100 planned lesbian families and 100 heterosexual families were compared on several aspects of the decision-making process related to parenthood.

Before discussing and interpreting the results, it should be mentioned that the educational level of the planned lesbian families involved in this study is high. However, several studies have shown that lesbian women tend to be more highly educated (McCandlish, 1987; Steckel, 1987; Johnson *et al.*, 1994; Patterson, 1994; Flaks *et al.*, 1995; Sandfort, 1998). The high educational level among lesbian mothers might be associated with the pioneers position planned lesbian families have in society. The educational level of the heterosexual families involved in this study is also relatively high. An over-representation of respondents with a high level of education in mail surveys has been found before (e.g. Siemiatycki, 1979; Picavet, 2001). In our study an over-representation of respondents with a high level of education was found in both family types, and therefore the groups were comparable to each other on this aspect.

An important limitation of the present study is that parenthood motives, reflection on parenthood motives and the strength of desire to have children were studied retrospectively. According to Crespi (2001), most lesbian couples decide to have children many years before they actually take any action. It is probable that the analytic decision making (e.g. seeking a donor) and the experiences of reproductive assistance (long waiting lists and a conception process that costs more time to get pregnant than natural conception) might influence the scores of the lesbian mothers on the questionnaires.

In this study, lesbian mothers were significantly older than heterosexual parents at the time they had their first child. There are several reasons to expect that having children at a later age is a characteristic that is more or less bound to lesbian parenthood. For example, lesbian couples who have decided to

have children are confronted with having to seek a sperm donor and long waiting lists in infertility clinics. Also, the actual conception process is more time-consuming than natural conception. Therefore, when significant difference between lesbian parents and heterosexual parents occurred, we also carried out an ANOVA with parental age at the time the first child was born as a covariate.

In this study, the hierarchy of parenthood motives of lesbian parents was quite similar to those of heterosexual parents. Lesbian parents (both biological and social mothers) and heterosexual parents (both mothers and fathers) scored relatively high on such motives as happiness and parenthood, and relatively low on social control. Research on motives for parenthood among involuntarily childless couples (van Balen and Trimbos-Kemper, 1995) and IVF mothers (Colpin *et al.*, 1998) revealed similar findings concerning the hierarchy of motives. Just like among fertile heterosexual parents, happiness and parenthood were the most frequently mentioned motive category, and motives such as continuity of family name were seldom given (Weeda, 1989). Even though those studies concerned a different group, the similar hierarchy is not surprising. In Western societies motivations are part of the realm of an expression of personal development and involve notions of the unique parent-child relationship. Motives that express the interest of the group, social pressure, continuity or heredity are less important nowadays in Western societies (van Balen and Inhorn, 2002).

Although the order of the motives was quite similar for lesbian parents and heterosexual parents, one motive (e.g. happiness) was more important and most other motives were less important for the former than they were for the latter group. It is reasonable that for lesbian parents, who had made an active decision to have a child and who had gone through years of procedures and waiting, happiness as a motive is more important, because this motive might be more explicit and manifest for them than for fertile heterosexuals. Nonetheless, most other motives were less important for lesbian parents than for the control group of heterosexual parents. Motherhood identity as an important aspect of achieving adulthood might be less important for lesbian women than for heterosexual women (fertile and infertile) because lesbian women experience achieving adulthood as the integration of their lesbian identity into a positive understanding of self. Identity motives also refer to gender roles, and these motives are less important for lesbian women than they are for heterosexual men and women (Lippa, 2000). Furthermore, in society, for a heterosexual woman, the identity of being a mother is still considered to be evidence of her femininity (Morell, 1994; Ulrich and Weatherall, 2000). It was also found that for mothers who were social mothers of the first child but who were at the same time also biological mothers of one of the other children in the lesbian relationship, motives such as parenthood and continuity were more important compared with 'only social mothers'. It might be that because of the experience of a pregnancy and the bond with an own biological child the former group valued those parenthood motives as more important than the latter group.

The lesbian biological and social mothers had spent more time thinking about the reasons for wanting to have children

(reflection) compared with heterosexual parents, and the strength of desire to have children was also stronger for lesbian mothers. More reflection on their parenthood motives might be a result of the socio-cultural context regarding homosexuality in general and lesbian (and gay) parenthood in particular. de Graaf and Sandfort (2001) observed less favourable attitudes towards lesbian and gay men in their review of 73 research reports from the period 1990–2000 on the social position of lesbians and gay men in The Netherlands. Regarding parenthood, public opinion holds that a traditional family consisting of heterosexual partners, rather than of lesbian or gay partners, is the ideal environment in which to raise children (van der Avort *et al.*, 1996; van de Meerendonk and Scheepers, 2003). As a consequence of this socio-cultural context, for lesbian couples the transition to parenthood is a careful process of weighing options and taking implications into account (Touroni and Coyle, 2002). Furthermore, although the number of planned lesbian families has been increasing in recent years, parents in lesbian two-mother families are still pioneers in society. It might be that because of an awareness of this position, lesbian parents spent more time on the question of why they want to have children. From anecdotal stories and interview studies, it is known that the main concerns of lesbian women in their transition to parenthood are related to the possible negative implications of raising a child in a non-traditional family in a heterosexist and homophobic society (Leiblum *et al.*, 1995; Gartrell *et al.*, 1996; Weeks *et al.*, 2001). Lesbian women are concerned about their children's possible disadvantage in their relationships outside the family caused by the prejudice they would encounter from their peers (Touroni and Coyle, 2002). However, research conducted among young adults who grew up in lesbian mother families in the UK has found that as children they were no more likely than the children of a heterosexual mother to have been teased or bullied by peers (Tasker and Golombok, 1997; Golombok, 2000).

For lesbian biological and social mothers, but not for heterosexual parents, an intense desire to have children correlated with a high level of reflection, and motives such as happiness and parenthood were significantly and positively correlated with reflection. Lesbian couples, like infertile heterosexual couples, have to go through a long and difficult process before they finally have a child, and the decision to have children is not taken lightly (Gartrell *et al.*, 1996; Touroni and Coyle, 2002). Several correlations were also found between parenthood motives and the strength of desire to have a child. The more important a motive, the stronger the desire to have a child. In general, the longing for happiness, parenthood feelings and the optimization of well-being correlated significantly with the desire to have a child. For lesbian biological mothers, however, only the motherhood motive (including such items as parental feelings and the experience pregnancy and birth) was significantly positively correlated with the strength of desire to have a child. In this respect, it is interesting that van Balen and Trimbos-Kemper (1995) also found, in a group of involuntarily childless women, that the expectation that parenthood would provide life-fulfilment was considerably more important.

For professionals who are assisting lesbian couples in decision-making about parenthood, these findings may help professionals to reflect and discuss the desire for children and the meaning of a child with their lesbian clients.

Although there are differences in parenthood motives between lesbian parents and heterosexual parents, we can conclude that hierarchy in parenthood motives in both groups is similar. However, lesbian parents differ from heterosexual parents in that they think more about their motives for having a child, and therefore their desire to have a child is stronger.

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