Does Biology Matter?: Lesbian Couples' Transition to Parenthood and Their Division of Labor

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The effect of biological motherhood on parents' transition to parenthood and their division of labor is a much contested issue. This paper explores the impact of biological motherhood in a unique context-lesbian parenthood-where biological requirements can be analytically separated from gender effects. The analysis is based on a study of 25 middle-class lesbian couples' transition to parenthood and their division of labor. Each couple had at least one biological child under the age of six and all children were born within the context of the couples' relationship. I conducted in-depth interviews with each partner and all participants filled out a short questionnaire. The distinction between the biological and non-biological mother affected couples in three domains of motherhood: public, relational, and personal motherhood. Comothers countered public ignorance, social and legal invisibility, and the lack of biological connection to the child by sharing primary childcare and establishing a distinct parenting role within the family. The participants employed various models of the division of labor to provide one full-time mother for as long as economically possible. Desire to be with the child, economic considerations, and strong commitments to equality and shared motherhood rather than biological requirements informed decisions about leave strategies and long-term paid work arrangements. Time/availability proved to be the best predictor of involvement in family work. Conflicts erupted whenever one partner perceived the other as not doing her fair share of domestic work.

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Biological motherhood figures prominently in the transition to parenthood, both ideologically and in practical terms. The growing number of lesbian couples who choose to become parents biologically confront the same emotional and practical concerns as heterosexual parents do. Yet lesbian parents, especially those of the "lesbian baby boom," regularly encounter prejudice and discrimination because they are viewed as "unfit mothers." Comothers¹ are routinely denied public recognition as parents and birthmothers are perceived as single mothers without partners. While lesbian couples face more social disapproval and legal discrimination on their path to parenthood than do heterosexual couples, they have more options in other ways. For example, lesbian couples can usually choose who the biological mother will be and select the biological father from a variety of donors.

Lesbian couples also have more freedom in the division of labor because there are still few preconceived notions of proper lesbian parenting roles. Available data on lesbian families reflect great variety and flexibility in their division of work. The social science literature on heterosexual families shows that the division of labor, especially household labor and child-care, remains gender stratified, with women being the main caregivers in their families, regardless of their own employment status. Although, compared to their predecessors, contemporary new fathers have increased the amount of family work they perform, inequality in domestic labor remains most pronounced when young children are present. Infants and toddlers dramatically increase the amount of housework and create the need for around the clock childcare that continues to be disproportionately shouldered by mothers.

Researchers have used different theoretical frameworks to understand the role of biological motherhood and the function of gender in the transition to parenthood and the division of labor in heterosexual families. Neoclassical economic theorists have argued that women's biological role as mothers is the main reason for their primary responsibility for domestic work. Investigators who employ a gender perspective are more likely to view biological effects as short-term and to attribute women's role in the family to the dynamics of the sex/gender system that privileges men in the workplace and women in the home. Because of the overlap of and the interaction between the effects of biological motherhood and gender expectations, the categories become conflated and analytically murky in heterosexual contexts (West & Fenstermaker 1993).

This study aims to analytically untangle the effects of biological motherhood and gender inequality by analyzing lesbian couples' transition to parenthood and their division of labor. The analysis shows that biological motherhood is important in three ways. First, many birthmothers had a

stronger desire to have children biologically than their partners and often facilitated the couples' transition to parenthood. Second, the experience of biological motherhood, especially breastfeeding, created a unique bond between the child and the birthmother. Third, in the absence of biological ties, legal security, and cultural support and in the presence of strong commitments to motherhood, comothers were highly motivated to create unique relationships with their children through primary childcare and regular interaction. Overall, biological effects were short-lived and rarely resulted into long-term specialization into homemaker and breadwinner. Commitments to shared and equal parenthood, fairness in the division of work, and personal preferences with regard to paid work, housework, and childcare influenced family arrangements more consistently.

PARENTHOOD AND THE DIVISION OF LABOR IN HETEROSEXUAL FAMILIES

The persistence of inequality in the division of housework and child-care in heterosexual couples has been documented in numerous studies (Baber & Allen 1992; Blau & Ferber 1992; South & Spitzel 1994). Repeatedly, gender emerges as the main predictor for the performance of and responsibility for family work (Berk 1985; Hochschild 1989; Mederer 1993; Peterson & Gerson 1992; Walzer 1996). Pregnancy and young children tend to further accentuate gender roles and the sexual division of labor in heterosexual couples (Atkinson & Huston 1984; Belsky & Kelly 1994; Cowan & Cowan 1988; LaRossa 1981 & 1989; MacDermid et al. 1990; Perkins & DeMeis 1996; Ruble et al. 1988).

Despite the increase in labor force participation of women in general—and mothers with young children in particular (Berardo et al. 1987; Blau & Ferber 1992; Gerson 1985)—most heterosexual women are still the primary providers of family work. Perkins and DeMeis (1996) showed that even in young, college-educated, dual-earner couples the arrival of children dramatically increased the gender gap between parents that was minimal between childless partners. This situation results in a heavier work burden and greater psychological pressure on heterosexual women with young children and in a considerable leisure gap between women and men (Hochschild 1989). In turn, most working women with young children have to reduce their time and energy investments in their jobs and risk losing occupational opportunities (Gerson 1985).

Neoclassical economic theory as applied in the New Home Economics perspective argues that the root cause of this condition is women's child-bearing role.

Women not only have a heavy biological commitment to the production and feeding of children, but they also are biologically committed to the care of children in other, more subtle ways. Moreover, women have been willing to spend much time and energy caring for their children because they want their heavy biological investment in production to be worthwhile (Becker 1981:23).

Unlike feminist theories, neoclassical theory does not consider this type of arrangement to be a problem. Specialization and exchange are viewed as rational strategies to maximize economic utility in families.

While the New Home Economics stresses the importance of biological motherhood, other researchers such as Berk (1985) and Hochschild (1989) have shown that gender is the most powerful factor in explaining the unequal division of labor in heterosexual households. As Ferree (1990) poignantly states:

The gender perspective points to the symbolic construction of housework as "women's work" and as an expression of both love and subordination. This explains, as economic models fail to do, why women and men so often collaborate to maintain a system that objectively imposes unequal burdens on women (877).

Whereas early studies have focused on gender roles and gender socialization, current research employs more interactive and relational perspectives (Ferree 1990; Thompson & Walker 1989). In West and Fenstermaker's (1993) "doing gender" approach, the analysis focusses on the intersection among and between actors and structures. It explains why even in dual-earner households women perform many of the actual tasks and remain the managers of the household (Mederer 1993) and why women do more housework than men regardless of their living arrangements with the gender gap being the greatest in marriage (South & Spitze 1994).

Yet, structural constraints and opportunities are fundamental to the division of labor and partially explain shifts in gender and family ideology (Gerson 1985; Hertz 1986). Hertz (1986) found that the division of labor was more equal in the dual-career couples she studied because of comparable time and work demands placed on both partners. However, she also recognized that

until the status of housework is elevated or, more important, until fathering acquires an equivalent normative meaning for men, women will continue to be responsible for childrearing (209).

This sentiment reverberates through the literature on the transition to parenthood in heterosexual families: the division of labor becomes more gender specific with the arrival of children (Belsky & Kelly 1994, Kalmuss et al. 1992; LaRossa 1981 & 1989; MacDermid et al., 1990; Ruble et al. 1988).

Within the gender perspective the role of ideology, especially feminist attitudes, has received much attention. While most researchers agree with Gerson (1985) and Hertz (1986) that the material realities—which generally

privilege men's role in the work place²—greatly influence the division of labor in families, they also acknowledge the role gender ideology plays (Coltrane 1989).

Models that account for interactive processes between and among actors and structures rather than one-dimensional causal models may explain best the influence material realities have over gender ideology and vice versa. While some couples especially those with young children might spiral into more gender segregated behaviors and attitudes, others, like the participants in Hertz's study (1986), might develop more egalitarian practices and gender ideologies.

PARENTHOOD AND THE DIVISION OF LABOR IN LESBIAN NUCLEAR FAMILIES

The term lesbian nuclear family describes a very specific kind of lesbian family that consists of a lesbian couple and their children. In this case, I will further narrow the lens by only discussing lesbian couples who had children biologically—families of the so-called lesbian babyboom. They are relatively rare compared to single lesbian families or joined lesbian families with children from prior heterosexual or homosexual relationships.³ This type of lesbian nuclear family closely resembles intact heterosexual nuclear families. They have two adult parents, one being the birthmother, and all their children were conceived within the context of the couple's relationship. Both parents consider the children their children and raise them as a parental unit.

Motherhood, the quintessential expression of femininity in many societies, pushes lesbian parents into a highly policed, gendered arena (Phoenix & Woollett 1991). Often motherhood in conjunction with lesbianism has been viewed as mutually exclusive culturally and as a reason for legal intervention (Falk 1989). According to Lewin (1993), the single mothers in her sample often experienced conflicts between their identities as mothers and as lesbians because of the fear of repercussions from their social environment, especially fathers, and because of the lack of understanding from lovers.

Since the couples in my study decided to have children together, they avoided conflicts typical for joint families. However, having two equally committed mothers can result in different sets of problems.

Practically every aspect of heterosexual parenting roles is associated with either masculinity or femininity. Yet if all female parenting behaviors are of the role of mother, who is the second female parent? The lesbian couple must construct a

clear set of dual female parenting roles, within a social frame that suggest this cannot be done (Slater 1995, 49).

Thus, lesbian couples face the unique opportunity and challenge of developing models of parenthood and the division of labor that are independent of gender specific expectations.

When neoclassical economic theory is applied to lesbian nuclear families, a number of hypotheses about their division of labor emerge. In most cases, lesbians have a choice in deciding who will be the birthmother. Since being pregnant and giving birth disrupts labor force participation for at least a few months, one would expect the partner with less economic power to bear the child. Financially, the family could more easily absorb the full or partial income loss of the person who earns less. In other cases, occupational investments could be the primary grounds for decision making. Whoever is more likely to benefit from uninterrupted career development would be more likely to be the comother. Given the reasoning above, one might also predict that the birthmother would be the primary caretaker of the child as well as perform the majority of the household chores.

The scant research done on lesbian cohabitating couples and the division of labor indicates that lesbian couples tend to be more egalitarian and flexible in their work arrangements than heterosexual or gay cohabitating couples (Blumstein & Schwartz 1983; Kurdek 1993; Reilly & Lynch 1990). Similarly, other evidence suggests that lesbian nuclear families share household and childcare labor quite equally (McClandish 1987; Patterson 1995a & 1995b; Rohrbaugh 1989; Sullivan 1996). These findings imply that other factors might exert more influence on work arrangements than biological motherhood.

Although differences may result if partners belong to different racial, ethnic, class, and/or age groups, gender inequality as well as heterosexism affect comothers and birthmothers similarly outside the family. However, gender could be significant with respect to intra-couple transactions (West & Fenstermaker 1993). Issues of social accountability so central to heterosexual families (Coltrane 1989; West & Fenstermaker 1993), play out very differently in lesbian households. Because both partners are women they would be perceived as equally responsible for proper housekeeping.

Analyzing the impact of ideological stances, especially feminism, on the division of labor in this type of lesbian family, might be another useful approach. Feminist attitudes could play an important role in these families because there are still no culturally sanctioned models of the division of labor in lesbian couples that could override commitment to equality.

METHOD AND SAMPLE

The following discussion is based on a study of 25 lesbian nuclear families. I conducted one individual interview per participant which allowed each partner to voice her own experiences, concerns and interests with respect to the transition to parenthood and the division of labor. In addition, each interviewee filled out a short questionnaire. Besides giving demographic information, the respondents were asked how many hours per week they spent on housework, childcare, paid labor, and schooling and how they divided up specific housework and childcare tasks.

All couples had one or more children under the age of six and one parent was the biological mother of each child. All children were conceived within the context of the couple's relationship. Both partners were generally committed to a two parent model with relatively strong family boundaries. Five couples had two children, all others had one. Eighteen of the children were under two years old. The remaining twelve ranged in age between three and eight. All but one birthmother had breastfed her children.

The respondents were highly educated (10% high school, 10% associates, 26% bachelors, 26% masters, 28% professional or doctoral degrees) and 68% worked full-time (18% part-time, 8% on leave, 6% unemployed). Their average income per family was \$106,000 per year while the median income was \$90,000. These figures are especially high given the lack of access to at least one male wage. Thirteen couples lived in houses they owned. Six families resided in condominiums; another six occupied rented apartments. Except for one Asian American (2%), one African American (2%) and three Caribbean American respondents (6%), all participants were European American (90%). The respondents ranged in age between 27 to 49 years with a mean and median of 38 years.

Ideologically, the participants were generally on the left politically (approximately 80% were Democrats), more than half were religiously active, and only 27% did not identify as feminist. While about the same number of birthmothers (50%) and comothers (46%) were *strongly* committed to feminist beliefs, those who did not consider themselves feminists were more likely to be comothers (36% of comothers vs. 18% of birthmothers).

To locate the participants, I employed four different methods. Six of the participating couples were identified through different personal contacts. Ten couples responded to an advertisement about the study in *Kids' Talk*, the newsletter of Center Kids, The Family Project of the Lesbian and Gay Community Services Center in New York City. In addition, I contacted four couples at functions for lesbian and gay families that were spc nsored by Center Kids or The Lesbian and Gay Parents Coalition International.

And finally, five couples were referred by other participating families. Referrals were restricted to one couple per family.

This sample is obviously not representative of the general population, nor is it typical for the lesbian community or even lesbian mothers (Allen & Demo 1995). However, many studies of lesbian baby boom families show similar compositions⁴ (Patterson 1995a & 1995b; Sullivan 1996). The high levels of education, income, political liberalism, feminist convictions and racial homogeneity might be partly due to the urban environments that have been studied—mainly New York and San Francisco—and partly to the very deliberate process of becoming a parent. Twenty-four out of 25 couples used donor insemination—a method that requires knowledge and in most cases money and the willingness to involve outside institutions. Also, most mothers were in their thirties by the time they had their first baby. Like heterosexual middle-class women, many postponed childbearing until they were occupationally settled and had reached a point of financial security and personal maturity.

However, for the specific purpose of understanding the role of biological motherhood and gender within the nuclear family framework but outside the grasp of gender inequality, these families can add much to our understanding of the dynamics involved in the transition to parenthood and the division of labor. This is not to say that class, race/ethnicity, and location are inconsequential. On the contrary, more research is needed in these areas to understand the influence of these variables on the transition to parenthood and in the division of labor in families and on many other family choices. Yet, as with studies of dual-career, white, urban couples, the atypical case can often illuminate underlying social patterns.

Below I first discuss different stages and aspects of the transition to parenthood: how desire to carry a child decided who would be the biological mother; how careful and deliberate planning governed the creation of a child-friendly environment; and how comothers and birthmothers developed strategies for claiming equal identities as mothers in three domains—public, relational, and personal motherhood. Second, I show the degree to which commitment to equal motherhood, feminist ideology, gender, rational choices, and biological imperatives, such as breastfeeding, influenced the division of paid work and domestic labor.

A MATTER OF DESIRE: TO BE OR NOT TO BE A BIRTHMOTHER

As for many other couples, the transition to parenthood for lesbian couples starts with the decision to have a child. Unless one or both partners

experiences fertility problems, lesbian couples have the unique advantage of having a choice of who will carry a child. Contrary to the predictions of the New Home Economics, biological motherhood was primarily a result of the desire to bear a child rather than economic utility.⁵ Loretta, a birthmother, described how overwhelming her wish to carry a child had been:

I had this burning desire to have a child. I don't think she really felt that strongly about it. I was going to die if I didn't have a kid. At some point, in the back of my mind I had considered marrying a man, if I didn't come up with some idea or some way to do it.

Like many heterosexual women (Gerson 1985), a number of participants had felt so strongly about becoming mothers that they only had entered their current relationships after their partners showed strong interest in having children. In Helen's case, a prior relationship had deteriorated because of her former partner's unwillingness to commit to parenthood.

When I was about 33 I did realize that I did want to have a child. Unfortunately, my current lover did not. Ultimately, that let to a break-up. We were together 7 years and that was hard. Then it's been a few years looking for a relationship with someone who wanted to raise a child.

In six cases both partners were interested in bearing a child. In one family both mothers had given birth to one girl each. The remaining five couples had one child and were planning to have another by the comother. In these instances age became the deciding factor along with the strength of desire. Economic considerations were rarely mentioned and were clearly secondary in the decision-making process of who would bear the first child. Financial matters became more important, however, when couples thought about having another one. Delores put it this way:

Sometimes I look at him and he is such a great kid and I think, "Oh, two would be twice as fun." And then I think, "You must be out of your mind." No, I don't think we will have another one. Actually, financially I am sure we couldn't do it.

One surprising finding regarding economic issues was that in the 11 out of 12 families in which both partners were employed full-time, the birthmothers grossed the same (n=3) or substantially more than their partners—between \$2,000 and \$40,000 more per year. This finding runs counter to assumptions of the New Home Economics that the choice of biological mother would primarily be based on economic considerations. Rational choices might explain, though, why these birthmothers returned to full-time employment after their maternity leaves.

Given the strength of motherhood ideology in connection with gender identity, I anticipated significant conflict over the decision of who would carry the first child (Phoenix & Woollett 1971). Instead of having conflict around birthmotherhood, many couples in my study struggled with the de-

cision to have a child at all. In nine families both partners had equally strong feelings about having children. In another eight couples, birthmothers had to coax their partners into expanding their families. Two birthmothers even agreed to carry the primary responsibility for the child and for childcare in order to gain their lovers' support. Another two couples were at the brink of dissolving their relationship over the issue of children.⁶

While for the majority of parents motherhood was a chief adult aspiration, these eight comothers were clearly opposed to having children because they felt unequipped to be good parents or were afraid their lives would change too drastically. However, after much deliberation and soul searching they decided to support their partner's decision to have a child. In their narratives, many stressed that after the early tribulations they clearly enjoyed having children. Wendy, the comother of a one-year-old, put it this way,

It was really Angela's dream. At first I was completely closed to it. I just never considered it a possibility. Now I can't imagine life without her. You just fall in love with the baby. I would hate to have to choose between Angela and the baby.

This result suggests that mothering behavior produces strong maternal identities even in cases where there was opposition to having a child in the first place (Ruddick 1983). This finding is even more meaningful because it is shared mothering rather than primary mothering as in heterosexual or single parent households. That is, the child would not be without a mother if the coparent refused to take on a mothering role. A result of both parents' strong maternal commitment was a very child-centered family life (cf. Coltrane 1989). This child-centeredness was also reflected in many other aspects of family planning and life.

PLANNING PARENTHOOD

Once the decision to have a child was made, most parents meticulously planned the transition to parenthood. Since lesbians are not prone to unintended pregnancies, all couples in my sample carefully mapped out every step toward parenthood. Most couples devised a plan of action to create a child-friendly environment before they tried to get pregnant. They paid much attention to material as well as emotional factors.

Sheila: I had a list of all the things I wanted to accomplish before I got pregnant. I wanted Lucy to come out to her mother. I wanted to make some more money. I wanted to have health insurance and life insurance, disability insurance. And I wanted to talk to my parents about the idea of my having a child because I didn't want to show up one day and say I'm pregnant and then have to deal with whatever their reaction would be.

Occupational choices and career development played an important role in deciding about the timing of having a child. Amanda, a comother, explained how she was preparing to become the birthmother of their second child:

I have to have a job first in order to have a child. I have to have insurance. Once I get the job I'll probably wait a few months and then start trying. It will be at least a couple of years.

Surprisingly, I found very little conflict over whose work or career should have primacy at any given moment. When one partner took off time from work to be with the child/ren it was either seen as a privilege or the couple had decided to take turns providing for the child full-time.

The process of starting a family often involved strategies that maximized the family unit's economic utility. In these instances, rational choice theory is useful in explaining some aspects of the transition to parenthood (Friedman & Diem 1993). In moments of conflict, however, equality considerations and individual interests whether material in nature or not regularly overrode the family unit's economic utility concerns. Part of this finding might be explained by most families' privileged economic circumstances. They could afford the luxury of forgoing the higher income or of postponing occupational advancement. However, I did not find that families at the bottom of the income distribution favored the economic rationale any more than did those at the top.

For example, the starting point for most decisions in this area was the assumption that both partners' paid work commitments were equally important independent of their level of income. This became clear in one case in which this assumption was violated. Shirley, a birthmother of twins, was the main provider in the family—she made \$65,000 while her partner grossed \$25,000. When she suggested that the comother might want to become the primary caregiver for their children, she encountered strong resistance.

I actually wanted her to stay home because of the cost of daycare and the benefit to the children. I was thinking that it would be a very admirable thing to stay home and raise the kids. But she wasn't really interested at all. I was surprised that it offended her.

From a rational choice perspective, Shirley's proposal was an effective way to maximize utility through specialization into homemaker and breadwinner. In this case, efficiency considerations ran counter to Jackie's basic sentiments. Generally, however, maximizing utility and optimizing individual choice were not mutually exclusive.

The interviews suggest that the ease with which couples usually were able to design their employment and family care arrangements was based on shared value systems rooted in feminism and egalitarian parenting ide-

ology. For both partners paid work had been a central part of their identity and family work was seen as rewarding and challenging by both. Neither the home nor the workplace per se offered more beneficial experiences which resulted in great flexibility in the division of labor and minimized the impact of biological motherhood (Sullivan 1996).

Planning parenthood involved another choice that called for much deliberation. One of the most difficult questions the couples had to address was whether to use a known or unknown donor (Reimann 1996). Almost all participants considered a known donor at some point. But only 24% of the parents ended up knowing the person who volunteered the sperm. The legal uncertainties of having a recognized father prevented most from using a known donor. The potential negative effects on the child not knowing his/her father were outweighed by fears of potential personal and legal conflicts.

Although the choice of known or unknown donor did not have any influence on the division of work per se, it did illustrate how consciously and conscientiously the participants approached parenthood. In addition, discussions of the importance of biology, in this case paternal genes, indicated that couples viewed biological links as quite significant with regard to the physical and psychological health and make-up of their children.

COMOTHERHOOD: MOTHERHOOD THAT DOES NOT DARE TO SPEAK ITS NAME

Another arena in which biological concepts loom large are issues concerning biological and nonbiological motherhood. As with the participants in Lewin's study (1993), both birthmothers and comothers identified strongly as mothers. Lillian, a birthmother, framed her identity development as, "I moved out of my narrow focus from 'I'm a lesbian' to 'I'm a lesbian and a mother and I have these other connections.' "While birthmotherhood can draw on rich cultural and social resources, comotherhood is a still tenuous concept.⁷

I suggest that there are three analytically distinct domains of mother-hood that inform the experience of comotherhood: public motherhood, relational motherhood, and personal motherhood. Public motherhood addresses how the law and social customs define motherhood as well as how motherhood is publicly reproduced through social interaction. Relational motherhood refers to the definition of motherhood shared by parents and their children as well as its symbolic reproduction through everyday contact among family members. For example, Ruddick (1983) showed how the experience of nurturing a child can create mothering attitudes and be-

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haviors independent of biology or gender. Relational motherhood also stresses the importance of the interactions between parents. They can support or question each other's ability to mother, have parental power struggles or share parental rights and responsibilities. This aspect is especially meaningful in these families because the mothering role is shared. Lastly, personal motherhood is similar to the idea of motherhood as identity. It is part of a person's sense of self and purpose and is reproduced through interaction with other identities and lived experience.⁸

All three domains of motherhood are positively linked and reinforce each other when mothers fit the culturally supported notion of "good mothers." Women who are, by definition, deemed "bad mothers," such as single mothers, teenage mothers, welfare mothers and lesbian mothers, experience various degrees of conflict between the different domains (DiLapi 1989; Phoenix & Woollet 1991). Lesbian comothers face an even more difficult situation because they are often not viewed as mothers at all (Slater 1995).

Public Motherhood: Legally as well as socially, comothers are mostly invisible and have no clearly defined public parenting role (Falk 1989; Martin 1993). The absence of a biological connection between the comother and her child/ren (24 of 25) made them extremely vulnerable legally. This was one reason why many chose anonymous donors.

In social situations, some comothers felt insecure about their relationship with their children because of the lack of publicly acknowledged motherhood. For example, strangers may stop lesbian parents on the street, in the supermarket, or at a restaurant and will ask who the "mother" is. Cybill explained why such encounters were emotionally taxing:

I have no trouble when I'm alone with Jack and somebody asks me, "Is he yours?" And I say, "Yes." When I'm with Janet, if anybody asks, I point to her. It's odd. But that's why the adoption is important too. It would make me more comfortable with that.

Issues of accountability and information management loom large in situations in which negative and/or false cultural assumptions are not mediated by personal relationships (Goffman 1963). To counter her invisibility, Wendy, a comother, admitted that she became more "proprietary" in public picking up her daughter more often and carrying her. Similar to what Blaisure and Allen (1995) observed in feminist heterosexual couples, lesbian parents committed "public acts of equality" showing the world that both were equal mothers.

As Cybill pointed out, legal validation is another option that can alleviate some of the pressure. However, second parent adoptions are still rare and costly. Another strategy to minimize the need for public explanations included child and comother sharing a last name to avoid questions

from healthcare professionals, teachers, and representatives from various other institutions.

Interracial and mixed-race couples reported an additional concern—the "nanny" issue. One reason for matching the donor with the comothers' ethnic heritage was to minimize the likelihood that the comother would be mistaken for the nanny in public. Lucy explained:

We wanted [an Asian] donor so that the kid would hopefully look at least half Asian. That when I would take him out and say that he is my son people would not say, "Oh, no way." If we had a caucasian donor and the baby would have blond hair and blue eyes and I'd take the baby out they would think, "Oh, this is the maid. This is the nanny."

However, these strategies were not always successful and comothers faced a complex mix of heterosexism and racism.

While lesbian couples struggle daily for equal parenting status because of heterosexism, heterosexual couples committed to equality confront obstacles because of sexism. Heterosexual families who choose alternative parenting arrangements also find themselves constantly accountable to their social environment (Coltrane 1989). Blaisure and Allen's (1995) finding that vigilance becomes a central feature of successful attempts to achieve domestic equality in heterosexual couples parallels the need of lesbian mothers to constantly assert their equal parenting status in public. The influence of such vigilance on relationships and parenting behavior and experience calls for further investigation

Relational Motherhood: In the face of public ignorance and sometimes hostility, the home became a place of refuge for many families. Yet, without clearly defined expectations for comothers, nonbiological mothers often felt insecure about their status as mothers (McCandlish 1987; Slater 1995; Stiglitz 1990).

Gabrielle: My biggest fear was that I wouldn't be her mother. But now that I'm with her and I see the way she looks at me when I come in the door. You don't really foresee that. She just adores us.

As I will show below, in the absence of the attachment forged through bearing and nursing a baby, comothers developed many other ways of thoroughly bonding with the child.

Nina: All the time that Teresa was nursing it was really tough. I didn't feel as close to Maya as Teresa did. Although I did all the bathing. I bathed her every night and that was an intense thing for us. And we worked out that I would give her a bottle once a day.

A strong sense of relational motherhood ensued from regular interaction between the mothers and the children. Interviewees stressed the importance of "family time" and "togetherness," characteristics of many lesbian relationships (Slater 1995), which expanded child-centeredness into familycenteredness and reinforced shared commitments to equality. Coltrane (1989) also observed that the egalitarian heterosexual families in his sample were very child-centered.

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Interestingly, the parents in my sample described their experiences as less problematic—although not conflict-free—than couples in earlier studies (Rohrbaugh 1989; Stiglitz 1990). This change might be an indication of subculturally developed models of coparenting that have surfaced with the relative normalization of lesbian babyboom families in gay-friendly urban centers. Most of the families in my study were members of lesbian and gay family support and lobbying groups that have sprung up all over the country. These groups offered a safe space to exchange parenting experiences and to confront difficult family dynamics.

Egalitarian heterosexual parents also violate conventional assumptions about proper parenting roles. By expanding the concept of relational motherhood to relational parenthood, common experiences emerge. As comothers, fathers constantly confront the need to account for their primary caregiving (Coltrane 1989; West & Fenstermaker 1993). Strong relational parenthood becomes the source of strength for both fathers and comothers to claim their equal parenting role in public. A firm sense of personal parenthood also is sustained by partners' shared definition of equal parenting and strong interactional bonds with the child. Clearly neither biological ties, as in the case of biological fathers, nor being a woman, as in the case of comothers, automatically result in equality in parenting. Rather, shared active involvement in and responsibility for childcare and childrearing are necessary to sustain equal parenting.

Personal motherhood: Both, comothers and birthmothers, experienced identity shifts that moved parenthood to the center of their sense of self. For comothers, the question of how the child would address her often reflected a growing sense of motherhood.

Gabrielle: At first, I thought that she could call me Gabrielle and then she wouldn't always have to come out talking about her home life. But once I held that little baby in my arms—I don't think that if I had physically had her that I could love her anymore than I do. I wanted to be mom or mommy or something. I just didn't want to be "Gabrielle, my mother's friend." I feel that this is my daughter.

Alexandra closely linked the need to be called mommy with not being the birthmother: "For me, I'm not willing to give up [being called Mommy]. Virginia is more flexible, maybe she can be because she is the birthmother." The desire to be called "mommy" also reflected the highly gendered experience of parenthood. Even comothers who did not insist on being called mom appreciated having a special name that was not just their first name and implied a mothering relationship with the child. The issue of naming,

also partly reflected in the use of the comother's last name, reveals the importance of seeing oneself in the mother role.

The narratives also revealed in other ways that most comothers did not primarily conceptualize themselves as parents but as mothers.

Once I agreed to be her mom, I was there from the very beginning because I knew that that would be the only way I could do it. I could have played around with other ideas like I could be more like a father. I knew that it probably wouldn't work out that way, that I would be another mom.

Gender specific identification demonstrated that having a child was an extremely gendered experience. This finding supports the results of other studies that found a powerful resurgence of conventional female and male gender expectations and behaviors in many heterosexual new parents (Belsky & Kelly 1994).

Residual differences in early gender socialization appeared to reemerge as one became a parent with interactional pressures to adopt more traditional gender roles. (Perkins & DeMeis 1996:90)

While there are many ways to increase the sense of motherhood in all three domains, comothers cannot compensate for the symbolic and physical power of biological motherhood represented in pregnancy, childbirth, and the ability to breastfeed an infant. Breastfeeding, in particular, has proven to be a juncture in relational parenthood. If the non-nursing parent is able to develop an intimate relationship with the infant through other means, equality between the parents in the long run becomes more likely (Ehrensaft 1990). Below I discuss how birthmothers and comothers experienced and interpreted breastfeeding and how it affected relational motherhood.

BREASTFEEDING: IDYLL AND REALITY

Most mothers in this study, like their heterosexual counterparts (Ehrensaft 1990), felt very strongly that breastfeeding was important for the healthy development of the child. Except for one mother, all breastfed their children. Nineteen mothers nursed their babies between two weeks and 24 months with an average of 8 months and in 8 cases the birthmothers were breastfeeding at the time of the interview. Given the intensive nature of nursing, it was necessary to spend at least the first few months at home with the child. Nursing newborns often were fixated on the birthmothers and responded badly to their absence. Although most birthmothers favored nursing their children, not all enjoyed the experience without reservations. For some birthmothers, the intensive nature of nursing became burdensome after a few months. Helen explained:

I enjoyed it. But there were times when it made me feel like a prisoner because for the first three months she wouldn't take a bottle. And I couldn't be away from her for more than two hours without risking her totally suffering.

In a few other cases the baby had trouble nursing, turning breastfeeding into an arduous chore. Despite the inconveniences and problems they faced, most birthmothers experienced breastfeeding as rewarding.

Loretta: It was a very nurturing, motherly kind of thing. I think everybody benefitted from it. I felt that I was enjoying motherhood to the fullest experience that I could have. I enjoyed nursing him.

Interestingly, the birthmothers in my sample expressed negative sentiments toward breastfeeding as freely as positive ones. Negative aspects of nursing included a sense of being "on call" 24 hours a day and physical discomfort (LaRossa & LaRossa 1989). By stressing negative breastfeeding experiences, birthmothers "did shared motherhood" by trying to downplay the importance of biology for their partners' sake. Sheila was one of the few birthmothers who expressed the feeling that her biological link to her son made her more his mother.

I think that there is also a kind of deeper emotional level where since I gave birth to him and the long time I was breastfeeding I felt like I was his mother. Lucy is his mother too in a different way.

Her willingness to verbalize this feeling might be due to the fact that her partner had no interest in being a birthmother and only agreed to having a child if Sheila would be the primary caregiver. By clearly establishing a primary mother, Sheila and Lucy easily fell into two distinct parenting roles that did not challenge one another. Sheila was more responsible for the child while Lucy managed the household.

On the other hand, the differences in the accounts of Helen and Colleen show how a comother's frustrated desire to bear children can have a strong effect on how a couple experiences and interprets breastfeeding.

Helen: At times in the beginning, she was a little jealous because she would make comments like, "I can't feed her. I wish I could feed her." I felt a little bad although I felt that breastfeeding was important. She didn't make too much of a scene over it although it made it more clear to her that it wasn't her biological child. That probably accentuated that.

Interviewer: Has Helen's breastfeeding been difficult for you?

Colleen: Never. In the beginning, I wanted to feed her. I did feed her eventually. I spent other time with her. Now the baby is really bonding with me because I'm home.

In Colleen's case, the experience of infertility added to her frustrations around breastfeeding. By downplaying the impact of nursing and stressing other aspects of relational motherhood such as feeding and being the pri-

mary caregiver, she was able to assert her own sense of competence and equality as a mother.

Nursing a child is a unique possibility for strengthening a sense of relational motherhood. Birthmothers as well as comothers were very conscious of the intense bonding experience nursing created.

Sheila (birthmother): I enjoyed the feeling that I was important to him. There is something so special and wonderful about that. You are totally bonding and you are providing what he needs even beyond the nutritional stuff.

Corinne (comother): I felt that they had this incredible bond and he loves it. He gets so much joy out of breastfeeding. And she is clearly his favorite. They bond more.

Like many fathers (Ehrensaft 1990; Schwartz 1995) and comothers in other studies (Rohrbaugh 1989; Slater 1995; Stiglitz 1990), some parents in my sample felt that breastfeeding made equal parenting of an infant difficult if not impossible.

Lillian (birthmother): We knew that it wouldn't exactly promote us being equal parents. On the other hand, Tracey was saying, "I don't want to be equal. I want to have flexibility." But after two weeks, we just bagged it. Tracey realized that she was really hurt and upset about not being part of that and wanting to feed her. And it certainly wasn't any great gift to my life [because it was extremely painful].

Tracey (comother): [She breastfed] for a very short time. One of the reasons was that I couldn't reconcile how I was supposed to deal with the fact that I couldn't feed this child.

In addition to a sense of inequality, the inability to nurse was very frustrating for comothers because they felt unable to comfort the infant when s/he was hungry. This frustration might have challenged some comothers' gender identity because mothers are culturally expected to be able to feed their children.

At the same time, comothers, like fathers, were also very conscious of the benefits of breastfeeding. Amanda, a comother, pointed out, "Actually, it has been a blessing because it quiets her down in so many situations where you really want her to quiet down." And many comothers were more than happy not to have to nurse their child at night. Corinne, a comother, had no trouble admitting that:

At three and four in the morning I was really glad he refused to take a bottle. Even if I would get up to bring him to her, I could go back to sleep. But she had to do the breastfeeding.

As shown above, nursing has multiple meanings and often is experienced positively as well as negatively. But not only does breastfeeding affect the relationship between mothers and their children it also strongly impacts the relationship between partners.

The partners must learn to sustain their intimacy with less time, less uninterrupted attention, and less energy available for their connection as lovers. These stresses are familiar to most parents; however, since lesbian partners often build their relationships on exactly these elements the latter couples may especially feel the impact of the relational changes that accompany parenting. (Slater 1995:95)

For example, nursing mothers often had very little interest in sexual encounters which sometimes led to stress in the relationship. In addition, the experience of being on call 24 hours a day was often so draining emotionally and physically that nursing mothers felt that there was little left to give to their partners.

The emotional as well as functional intensity of breastfeeding, however, was short-lived. Once breastfeeding became supplemental or the baby was weaned, the birthmothers experienced much greater freedom in their choices—one being to go back to work.

BEYOND BIOLOGICAL TYRANNY: PAID LABOR ARRANGEMENTS

The couples in my study tried to minimize negative economic consequences of having children in accordance with rational choice principles. Yet, as mentioned earlier, whenever there were serious conflicts between maximizing economic utility and being with their children, the children tended to win out. All participants stressed how important it was for the child to have a full-time mother for as long as possible—exhibiting high levels of child-centeredness. The couples' relatively high income probably allowed them to be more flexible in their work arrangements than families with less income. On the other hand, relative affluence was a result of many years of occupational investment making it less likely for individual women to sacrifice years of career development.

Choices regarding the division of labor led couples to several different family arrangements with only four (16%) families following the logic of the new home economics by specializing long-term into homemaker and provider. However, temporary specialization as well as various levels of specialization did occur in most families.

Models of the division of paid labor during early parenthood varied along three analytical dimensions: (a) leave-taking strategies; (b) levels of specialization resulting from length of leave; (c) levels of specialization due to job flexibility. Biological imperatives—primarily the birthmother's need for recuperation and the child's feeding requirements—did influence the couples' decisions about parental leaves and other changes in paid work. However, decisions about the length of maternal or parental leaves and the

return to part-time or full-time work were often independent of biological necessities. Instead, they were based on the desire to be full-time with the child, the perception of the baby's needs, the positive and negative experiences around full-time caregiving, the availability of parental employer benefits, commitments to paid labor, and the need for a second income.

Two leave-taking strategies emerged from the analysis. First, the overlap strategy involved both partners taking off from work at the same time. The majority of the couples (18 or 72%) used this method. Some biological mothers had difficult births and needed their partners to take care of the baby and the house while they recuperated. Other couples viewed it as an opportunity to create a sense of family, share the delight of having a newborn, and provide an opportunity for the comother to bond with the child early on.

Birthmothers generally stayed home longer while comothers returned to work after a few weeks. Comothers early return to work was most often necessitated by financial pressures and/or job requirements. Only two comothers mentioned having difficulty arranging for parental leaves. On the other hand, many birthmothers' desire to have a child implied the hope to be able to stay with the child full-time for as long as possible. Veronica and Gabrielle were willing to lose 60% of their family income and move to a remote, lesbian-unfriendly neighborhood in order to allow Veronica to stay home for a year. Like many fathers (Belsky & Kelly 1994), Gabrielle, the comother, felt, "Obviously, she does more [childcare] than I do because she is home with the baby. But I almost feel that that is my gift to her that she can stay home with her."

The overlap strategy invoked strong cultural notions of the interdependence of biological and relational motherhood which turned comothers into "second mothers"—at least temporarily. An intricate web created by birthmothers' desires to be full-time mothers, strong cultural notions of the importance of a full-time parent during the early months of a child's life, the need for financial security, and basic biological requirements drew many lesbian couples into fairly conventional leave patterns.

Others resisted the notion of primacy of biological motherhood by using a consecutive leave-taking strategy, where partners took successive parental leaves. Seven couples (28%) used this method to minimize paid labor disruptions for each partner while allowing extended full-time family child-care and individual bonding of both parents with the baby. Like the other women in this study, these mothers shared the strong commitment to providing extended care for the child.

Corinne (comother): He was four months and I went back when he was a little over seven months. We were really reluctant to leave him with a sitter alone. And I really wanted that time off to bond.

Relational and personal motherhood played important roles for women who chose this arrangement. First, as the temporary primary caregiver each developed a sense of competence and responsibility as the mother of her child. Unlike in the overlapping strategy both parents had experienced the joys and burdens of full-time childcare and being the main provider. Many mentioned that sharing that experience had deepened their rapport. In addition, both partners learned to respect and appreciate the ability of their partners to mother.

The consecutive leave strategy could create a safeguard against what Schwartz (1995) has termed the "siren call of motherhood," birthmothers' resistance toward sharing child responsibilities with a partner. The willingness to temporarily give up control of the baby and trust that the partner will take good care of her/him is a necessary condition for equal parenting. Consecutive leaves empowered birthmothers as well as comothers to recognize themselves and each other as competent and reliable caregivers—an important aspect of relational and personal motherhood. Simply being of the same gender or sharing a feminist values did not automatically result in equally sharing parenting of an infant. Although all birthmothers acknowledged their partners as mothers of their children, there were degrees of willingness to give up control over the child during the early months.

Another analytical dimension of the division of labor is specialization that results from the length of parental leave. These distinctions follow the rationale of the New Home Economics: specialization becomes more pronounced and more rational the longer one person is primarily responsible for family or paid work because a partner becomes more economically efficient in her area of responsibility. I distinguish three levels of specialization: no specialization (leaves of less than six months); short-term specialization (leaves of six to twelve months); long-term specialization (more than twelve months of discontinued employment). Thirteen couples (52%) did not specialize in this sense, while seven (28%) chose short-term specialization, and in five families (20%) specialization was long-term.

In four out of five cases, extended specialization followed the home-maker/breadwinner model with the birthmother being the homemaker and the comother the primary provider (Sullivan 1996). When birthmothers returned to paid work it was part-time and/or the income was viewed as supplementary. This strategy supports the primacy of biological motherhood and relegates participation in the other partner's primary sphere to the "helper role" (Coltrane 1989).

Interestingly, in absolute terms, three out of the four comothers in these families did not consider themselves strongly committed to feminism

and they were also less feminist relative to their partners. Less commitment to equality allowed these women to take on the provider role more easily while viewing the birthmother as the primary mother. In addition, these same three comothers loved to cook and they shared cooking at least equally with their partners. DeVault (1987) has pointed out that feeding the family is one aspect of "women's work" that involves creating and maintaining a sense of family through practical as well as symbolic work. I would suggest that by doing feeding work, these comothers were able to reassert their femininity and establish a strong relational bond with their families in addition to their primary role as providers.

Loretta and Jenny also decided on long-term specialization in order to provide a full-time mother for their son and advance their educational development. Unlike the other four couples, they employed the consecutive leave strategy. Loretta, the birthmother, had quit her job, went back to school for her bachelors degree and took primary care of their son for the first two years. After that point, she returned to full-time employment while her partner went to college and was the primary caregiver for the next two years. Taking turns was advantageous to both mothers professionally but it also strengthened both partners' relational and personal motherhood experience. Even their sense of public motherhood was increased—especially for the comother. Loretta related the following story which also exemplifies how little social awareness there is of lesbian mothers.

We had met a play group early on. They were all straight couples. At first, Jennie used to bring Steven to the group. Then one day, I had to bring him. "What do you mean you are his mother?" "It's Jennie." It took them a while [to understand it]

As the primary caregiver, comothers were automatically assumed to be "the mother." By privileging the mother identity, it invoked heterosexist assumptions and rendered a parent's lesbian identity invisible.

Seven couples chose short-term specialization. In all cases, birthmothers took between six and twelve months of leave while all but one of their partners worked full-time. Three took advantage of very generous maternity benefits; the remaining four had quit their jobs to be with their children. While three of the mothers were on leave at the time of the interview, four had already returned to full-time employment. The young age of the children made it difficult to predict the enduring effects of short-term specialization.

No specialization: The majority of couples (52%) did not take extended parental leaves. And six of the thirteen couples employed the consecutive leave strategy. Because of the short term and consecutive leave arrangements in almost half the cases, one might predict that the couples valued

both partners' paid work equally and that each was highly committed to her job.

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Many indicated that they had been very happy about going back to work. Virginia, a birthmother, admitted:

I learned that I'm not the kind of mother who wants to be home all day with the baby. I was restless enough in my job before Langston that I thought I was going to resent going back. It has been very surprising to me how much having Langston has made me appreciate my job. I was so starved for adult company and for intellectual engagement that I was just in seventh heaven for at least a month.

Two other factors accounted for their high levels of work orientation. Most participants had decided to have children toward the end of their child-bearing age. They had committed themselves to their occupational advancement for many years, and most felt very secure in their work.

Last but not least, most families depended on the second income to hold on to their living standards. During their childless years, most couples had become accustomed to a very comfortable middle-class lifestyle. Ruth, a birthmother, described the dilemma many families faced.

[If] we could have the kind of money we have and I didn't have to work, I'd go for it [not working]. It would be more important to me to have more time with Hudson than to be independent financially. But still between us we want to have it.

Hertz (1986) found a similar dynamic in her sample—affluence created the need for more money to maintain the standard of living.

While length of leave is one indicator of specialization, another more lasting dimension is the amount of flexibility a job offers in order to tend to family obligations. Most women's professional identities remained strong but many made long-term paid labor adjustments to spend more time with their children. Adjustments ranged from working at home to going part-time or taking less demanding jobs. As Schwartz (1995) pointed out in her study of heterosexual egalitarian couples, flexible work schedules were of the utmost importance to maintain equality in the division of work. Demand/response capability (Coverman 1985) or time/availability is crucial in the sense that only a parent who is present can equally share in housework and childcare responsibilities. Time/availability was the best predictor for time spent on domestic labor in these families.

Four of the couples in the "no specialization" category had arranged for the comother (three) or the birthmother (one) to work at home. Two comothers worked full-time but had the flexibility to provide some of the childcare during the day while the other two split their time between two part-time jobs, one at home and one outside the home. Part-time work in general offered more flexibility to respond to ever changing childcare de-

mands. Other arrangements included one partner going to work later while the other would come home earlier.

KEEPING THE HOME FIRES BURNING: THE DIVISION OF HOUSEWORK AND CHILDCARE

Neoclassical economic theory implies that birthmothers are by biological necessity best suited to perform childcare and by extension housework. Numerous studies on heterosexual families show that mothers indeed tend to be the primary caregivers for their children, in addition to being responsible for running the household. Mothers in heterosexual dual-earner couples who become primarily responsible for childcare underscore the dilemma women face who are invested in their work as well as in their families (Hertz 1986; Mederer 1993; Perkins & DeMeis 1996; Silberstein 1992 & 1996).

Is there a similar disjunction in lesbian families? Other studies have found that lesbian couples were more egalitarian in their division of housework than similarly located heterosexual couples (Blumstein & Schwartz 1985; Kurdek 1993; Reilly & Lynch 1990). Similarly, lesbian families with children exhibited greater equality in family work than commonly observed in heterosexual families (McClandish 1987; Patterson 1995b; Rohrbaugh 1989, Sullivan 1996).

On an aggregate level, the participants in my study divided housework and childcare quite equally. By comparing partners to each other, I found that birthmothers reported spending slightly more time on childcare while comothers spent slightly more time on paid work (Patterson 1995a). Unlike in other studies, birthmothers also indicated that they performed slightly more housework than their partners. High standard deviations indicated, however, rather large intra-couple work discrepancies. In all three categories, paid work, childcare, and housework, about 40% of the participating couples stated that they spent equal time in these areas. The remaining 60% indicated that either the birthmother (about 30%) or the comother (about 30%) spent substantially more time in one of the work spheres. Weekly estimates tend to be rather vague and lack pinpoint accuracy. While hours in employment are in most cases more objective, estimates of childcare and housework also reflect personal commitment and emotional involvement. 10

Partners' views of the performance of specific tasks might be more instructive in assessing equality in arrangements (Ferree 1990). Birthmothers reported doing slightly more cooking, dishes, gardening, cleaning, and pet care. Comothers, on the other hand, were more likely to take care of

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the car and the grocery shopping. Laundry, taking care of company, and repairs around the house were shared equally. Despite the high levels of sharing on an aggregate level, in some couples either the birthmother or the comother was exclusively or primarily responsible for certain household chores.

Childcare, on the other hand, was shared equally on an aggregate level and on the intra-couple level. Both partners played with and disciplined the child, took her/him to bed, and fed him/her equally. Even though some couples reported that one parent performed certain childcare tasks more often, no mother was exclusively responsible for any of them.

Both time commitments and task performances indicated that biological mothers performed slightly more of the work than their partners but stayed within a 60/40 split which implies relative equality (Schwartz 1995). However, on the intra-couple level, many participants specialized in certain work arenas and/or tasks. Neither biological motherhood nor gender role socialization can account for the differences in the performance of labor because birthmothers did dramatically more of the housework and childcare in some couples while comothers did more family work in others.

Gender identity and the performance of gendered tasks also did not explain the discrepancies. Since I have no self-reported information on the participants' gender identity, I used Coltrane's list of household chores and their primary performance by either women, men, or both. In the four couples who exhibited a long-term specialization into breadwinner and homemaker, comothers did more of the "masculine chores" while birthmothers were more likely to perform "feminine tasks." All other couples showed mixed performances of these tasks.

The best predictor of involvement in family work was time spent on paid labor supporting the time/availability hypothesis (Coverman 1985). In full-time dual-earner couples (twelve), both partners spent about equal time in both paid and domestic work and either shared family responsibilities to a high degree or traded off tasks within each work sphere. In families in which only one partner was full-time employed (nine), the other would be primarily responsible for childcare and in most cases housework. In four cases the primary home person was the comother and in another five it was the birthmother. Yet, time/availability was not the reason for the fairly equal or equitable division of labor but rather a consequence of conscious planning of the transition to parenthood.

Relative fairness in the division of labor overall, however, did not preclude conflict over doing housework and childcare. As other researchers have pointed out (Coleman 1991; Ferree 1990), not all housework tasks are equal. Some tasks are inherently more pleasurable than others and

much depends on personal preferences and the urgency and repetitiveness of the work. Cleaning was the one chore that was the most common reason for conflict because it was the most disliked and least preferred household task. To reduce stress over cleaning, Mindy suggested, "One way to not have conflict around household labor is to minimize it." Decreasing housework implied either lowering standards—a source of conflict around housework for eleven couples—or hiring somebody to do major cleaning (ten). Because of the relative affluence of most couples, hiring somebody was one easy option to lower conflict around cleaning. Hochschild (1989) found similar stressors in her study of heterosexual couples. Whereas women cut back on standards and housework, men often found themselves pressured to get more involved.

Complementing preferences as a principle in the division of labor also reduced conflict and made doing chores more enjoyable.

Regina: I really like cooking. I hate unloading the dishwasher. I like organizing which is great for balance because Gloria hates organizing things. I don't mind vacuuming. I don't like to do laundry which is good because Gloria likes laundry. Gloria: I don't mind washing dishes. I love doing the laundry. I love ironing. I don't mind vacuuming. But I hate dusting.

Couples who had such natural ways of dividing the work generally experienced less conflict around housework. However, even in Gloria and Regina's case, cleaning the house was their primary source of contention.

Household duties were also an issue for women on parental leave. Many stressed that they stayed home to be with the child and not to perform chores. In fact, they abhorred feeling like the "housewife." Danielle, a birthmother on extended parental leave, put it this way, "We get into trouble when it feels like I'm staying home to clean the house all the time." Because of their feminist consciousness, many participants viewed childcare and, to a lesser extent, housework as an important area of self-expression and fulfillment. Yet, whenever a mother felt like "a housewife" implying that her work was devalued in some way, conflicts had a more emotional edge. Both attitudes toward domestic labor often coexisted peacefully. However, sometimes they caused internal identity conflicts in interviewees or external conflicts between partners.

Although many women did not mind housework per se, they were clearly more interested and invested in childcare as a site for positive family experiences. Childcare was clearly less of a source of conflict than housework. Generally, mothers enjoyed caring for their children even when it meant changing smelly diapers. Baths and bedtime rituals were especially high on the list. Conflict mainly erupted around nighttime duties (five couples) and the sense that childcare responsibilities were not equally shared in absolute (four) or relative terms (four). Since most partners viewed each

other as equal mothers and most were strongly committed to feminist ideals of equality and justice, childcare inequality questioned core believes and resulted in confrontation.

"Relational motherhood," how partners viewed each other as mothers and how mothers related to their children and vice versa, was at the core of many decisions about the division of work. Comothers' invisibility as public mothers and their strong sense of relational motherhood propelled them into bonding with their children through primary care. Consecutive parental leaves and primary or shared caregiving allowed comothers to meaningfully bond with their children and create two female parenting roles in one family (Slater 1995).

Whoever was home with the child full-time tended to feel more competent in their mothering roles because they knew their children's preferences and their everyday routines. Often the less involved parent deferred to the judgement of the primary caregiver—comother or birthmother. Ideally, that sense of accomplished relational motherhood would carry over into periods when the former full-time mother would return to paid labor.

Another interesting motivator for sharing childcare was a sense of solidarity, of "we are in this together." Many women stressed that they felt obliged to relieve the primary caregiver as often as possible. Most had experienced the exhaustion of full-time childcare and full-time mothers openly demanded support from their partners. Feeling exhausted and the need for relief was often expressed and did not diminish the sense of good mothering.

Because of the young age of the children there was much flux in the divisions of work and routines changed constantly. To understand the long-term effects of early childcare and housework arrangements, longitudinal information would be needed. The short-term effects of the various divisions of labor, however, indicate that biological motherhood per se did not necessitate specific work arrangements.

SUMMARY

Throughout this paper I show how biological motherhood, rational choices, gender, and feminist ideology shaped the transition to parenthood and the division of labor. The three domains—public, relational, and personal motherhood—are the central analytical tool to understand various interactions between these four interpretive frameworks. Relational motherhood is particularly informative with respect to the development of a comother role and the division of labor in these families. Each couple's

transition to shared motherhood involved intense interactions between all family members and conscious negotiations between partners.

Whether the desire for a child was a result of female gender socialization or a biological urge, the process of creating a home for the child was based on feminist values and involved carefully developed and executed plans. Still unencumbered by fixed expectations about proper parenting roles, respect for personal preferences and commitment to equality in motherhood and the division of work created an atmosphere in which occasions of maximizing self-interest rarely threatened overall fairness. Either self-interested behavior was seen as also benefitting the family as a whole or partners were able to negotiate trade-offs that would balance the scales in the long run.

The primacy of ideology did not deny the importance of material constraints and opportunities. Rather, it ensured that inequalities and imbalances were short-lived or compensated for on other levels. As with many egalitarian heterosexual couples (Schwartz 1995), flexibility in work arrangements was critical to balanced relationships. Conflicts erupted whenever one partner felt that the premise of fairness was breached.

Whether these findings hold true for other lesbian mothers who are less privileged economically, belong to different racial or ethnic groups, and/or differ significantly in other ways from the women in this study will have to be determined by future research.

LOOKING BEYOND: SUGGESTIONS FOR FUTURE RESEARCH

Although lacking the kind of social and public support most other families in their socio-economic bracket take for granted, both birthmothers and comothers tried to create a most beneficial environment for their children. However, without legal recognition and support from social institutions, children in lesbian families will continue to encounter social discrimination and legal insecurities despite their parents' efforts (Reimann 1996). The long-term effects of discrimination on children and parents' relationships require further investigation.

Longitudinal data on the impact of various strategies of caregiving during infancy on long-term work arrangements in lesbian families are also desperately needed. If the strategies the families in this study employed to further equality have positive effects on long-term equity, they could prove useful to other prospective parents who seek equality in their relationships. If these strategies are unrelated to work arrangements at later points, gen-

der and/or biological motherhood might prove to be more powerful than evidenced in this study.

Feminist ideology, so prominent among the participants, is another area that requires further investigation. The analysis showed that comothers who were less committed to feminism were more likely to take on a provider role while comothers with stronger feminist ideals were less likely to do so. The male provider role has been frequently identified as the source of marital inequality (Schwartz 1995; Ferree 1990). If feminist attitudes among lesbians reduce their likelihood to become long-term primary providers in their families, feminist attitudes among men might have similar consequences.

Biology played a limited, yet crucial, part in the transition to parenthood. More research on how early biological requirements limit and define future parenting roles is needed to more clearly understand how ideological commitments to equality and material necessities for the reproduction of a family interact.

The exploratory nature of this research and other studies leave many questions about lesbian couples' transition to parenthood and their division of work unanswered. Class differences have not been sufficiently addressed. The effects of race, ethnic and cultural diversity are unknown. It is also unclear how geographical location impacts on the lives of lesbian families. Last, the extent to which the involvement in familial, social, and political networks influences these issues demands further exploration.

ENDNOTES

- I chose the term comother for the non-biological mother because it encompasses the
 social as well as biological implications while stressing the partnership aspect of parenting.
 Whenever it was necessary to make a distinction between the two partners, I used the
 term comother for the non-birthing partner and birthmother for the biological mother
 of a child. In all other cases, I refer to both partners as parents or mothers.
- As Acker (1990) has pointed out, "The abstract, bodiless worker, who occupies the abstract, gender-neutral job has no sexuality, no emotions, and does not procreate." (151)
 Women who do procreate do not fit this organizational logic and frequently encounter lack of support if not discrimination because of their familial obligations outside the workplace.
- 3. Although there are no reliable figures available, an estimated 6 to 14 million children of 1 to 5 million lesbian mothers and 1 to 3 million gay fathers live in the United States today. The vast majority of these children were born into heterosexual relationships. However, an increasing number of lesbians and gay men have children after they come out—that is after acknowledging their homosexuality. Changes in reproductive technology, increased access to adoption, and greater acceptance of diverse family forms are at the root of what has been termed the "gaybie boom." Part of this phenomenon is an

increasing number of lesbians bearing children after coming out—an estimated 5,000 to 10,000 women by 1990 (Patterson 1992).

 This impression was also supported by personal discussions with Terry Boggis of Center Kids in New York, and other researchers who work with this population.

5. Desire was a expression frequently used in this context. Birthmothers as well as comothers often described their own or their partners' interest in bearing children versus their own or their partners' lack of interest with this term.

Only one birthmother clearly had no desire to bear a child. However, her partner was facing insurmountable fertility problems which prompted her to carry the child. In another case, both mothers were uninterested in bearing a child. After lengthy discussions, one of them agreed to be the birthmother because adoption seemed too complicated to them.

- 6. A comparison of this sample with couples in which women who desired to have children did not prevail and those who never considered having children would offer more insight into the dynamics of the decision-making process.
- 7. One of the most crucial debates in legal theory as well as social scientific circles currently revolves around the question of who is a parent and what constitutes parenting behavior. (Charlotte Patterson, author of many articles on lesbian and gay parenting, personal communication).
- 8. A domain does not imply ideological, political, legal, or behavioral consistency or the absence of conflict between various definitions and enactments of motherhood. These distinctions rather help to analyze different levels of mothers' experiences.

Many authors differentiate between, for example, social motherhood and biological motherhood. New reproductive technologies, in particular, have created further distinctions between genetic and gestational motherhood (Rothman 1989; Strathern 1992). In contrast, my analytical distinction between these various domains of motherhood focusses on interactions between mothers and their social environment rather than on categorizing different aspects of the mother/child relationship.

9. Second parent adoption refers to adoptions in which the (un)married partner of a legal parent is granted full parental rights to the child without the custodial parent loosing her/his privileges. While second parent adoptions are fairly routine in cases of heterosexual remarriage, unmarried couples face many more obstacles.

One comother in this sample had been able to adopt her daughter because Massachusetts has a statewide second parent adoption policy. At the time of the interviews, lesbian families in New York were waiting for the state's highest court to rule on second parent adoptions. In November of 1995, the court ruled in favor of such adoptions for unmarried heterosexual and homosexual partners. The court's decision is currently under appeal. Legal and political battles over second parent adoptions are ongoing in many parts of the country.

- parts of the country.

 I found that the childcare estimate of some birthmothers and a few comothers were inflated. A frequent complaint when filling out the questionnaire was that it was extremely difficult for the participants to estimate total weekly hours. After comparing time spent on the different types of work with the narratives, I created adjusted estimates. As a result, birthmothers still spent more time on childcare but the difference was reduced from 4.36 to 1.12 hours with an average of 36.26 hours per week. The high estimates, however, did indicate that birthmothers strongly identify with their caretaking role. Other studies have found that biological mothers were more strongly identified as mothers (cf. personal motherhood) than non-biological mothers (Patterson 1995b). Birthparents' stronger desire to become mothers compared to coparents would support such an explanation.

 Coltrane also studied dual-earner couples with children in which the division of labor
- 11. Coltrane also studied dual-earner couples with children in which the division of labor was fairly equal. His list of chores that continue to be gender specific is a good measure of deeply gendered tasks. For example, he identified taking out trash, doing household

repairs, taking care of the car, and investments as domains of male responsibility. Women, on the other hand, performed a disproportionate amount of dusting, planning menus, grocery shopping, laundry, buying clothes, and writing or phoning relatives and friends.

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