Lesbian Couples’ Relationship Quality Across the Transition to Parenthood

The transition to parenthood is a time of stress for many couples. Most research on the transition to parenthood has been conducted with middle-class, heterosexual couples. The current study uses multilevel modeling to examine predictors of change in relationship quality (love and conflict) during the transition to parenthood in 29 lesbian couples. Predictors included personality variables, work context variables, social context variables, and couple characteristics. Results suggest that personality and couple characteristics were important predictors of change in love, whereas personality and expected social support were salient predictors of change in conflict. The importance of research on this key life transition for lesbian couples is discussed.

Change in relationship quality is one of the most frequently studied aspects of the transition to parenthood. Studies of heterosexual couples have consistently documented decreased feelings of love and increased conflict across the transition (e.g., Belsky & Rovine, 1990). These changes are typically attributed to the disruption of intimacy and communication that results from the addition of a child into the marital dyad. A limitation of the research on the transition to parenthood and relationship quality has been the tendency to study average rates of change in marital quality, as opposed to variation in the pattern and extent of change. Some research has moved beyond examining central tendencies to study the prediction of individual differences in relationship change across the transition (Cox, Paley, Burchinal, & Payne, 1999). Belsky and Rovine examined patterns of change among couples whose relationship quality declined, remained stable, or increased across the transition. They found that heterogeneity in patterns of change was associated with multiple factors and that different patterns of change were largely identifiable prior to the birth. Their findings underscore the importance of examining variability within and across couples when investigating change across the transition to parenthood.

Another limitation of the transition to parenthood literature is the focus on heterosexual, middle-class couples (Cowan & Cowan, 1992). Some researchers have recognized the importance of social class as a context and have studied this transition in working-class couples (Goldberg & Perry-Jenkins, 2004). The empirical literature on same-gender couples’ transition to parenthood, however, is almost nonexistent. To date, the only prospective study of lesbian couples is the National Longitudinal Lesbian Family Study (Gartrell et al., 1996, 1999), which follows 70 lesbian couples that include a comother as well as a birth mother. Findings from this
study have been largely descriptive and have not examined change in many of the basic constructs that are typically studied across the transition to parenthood, such as relationship quality and mental health.

Bronfenbrenner (1988) has emphasized the role of context in development and has advocated for an interactionist approach that integrates person and context variables in predicting outcomes such as relationship quality. According to his ecological framework, individual development occurs within multiple and interacting contexts, with influences ranging from distal, macrolevel settings (culture, class) to proximal settings (family, work). Guided by this perspective, we explored whether work and nonwork contexts, as indexed by perceived support from work and family, predicted lesbians’ relationship quality across the transition to parenthood, controlling for the effects of individual characteristics such as personality or couple characteristics such as prebirth levels of relationship maintenance behaviors.

Individual Characteristics and Relationship Quality

Each individual’s personality characteristics play a significant role in shaping relationships with others (Daley & Hammen, 2002). Whether one is a generally negative or positive person has implications for how one experiences and perceives relationships. Although studies have linked various aspects of personality to relationship quality, neuroticism is the personality characteristic most consistently linked with negative relationship outcomes (Karney & Bradbury, 1995). We expect that higher levels of neuroticism will be negatively associated with lesbians’ feelings of love and positively related to reports of conflict across the transition to parenthood.

Couple Characteristics and Relationship Quality

Couple characteristics such as behaviors and attitudes may also be related to relationship quality. Relationship maintenance behaviors including disclosure and communication have been linked to perceived marital quality (Canary & Stafford, 1992). Weigel and Ballard-Reisch (1999) found that wives’ use of maintenance behaviors was positively related to both their own and their husbands’ perceptions of marital quality.

Division of labor has also been linked to relationship quality in heterosexual (Frisco & Williams, 2003) and lesbian couples (Chan, Brooks, Raboy, & Patterson, 1998). Several studies have found that perceptions of the division (e.g., satisfaction, fairness) matter more to marital quality and satisfaction than the actual behavior (Stevens, Kiger, & Riley, 2001).

In our study, we examine both prebirth relationship maintenance and satisfaction with the division of housework. We expect that maintenance behaviors (defined as communication behaviors designed to reduce costs and maximize rewards from the relationship) and satisfaction with housework will both be positively related to love and negatively related to conflict.

Contextual Effects on Relationship Quality

Contextual influences may also influence relationship quality. A supportive work environment or support from one’s extended family may mitigate the stressful effects of the transition to parenthood on couples’ relationships. Lesbian couples face particular difficulties because of their sexuality, such as discrimination or lack of recognition of their family from professionals and services as well as from their extended families and communities. Contextual sources of support may be particularly important for this population (Oswald, 2002).

Work-family spillover refers to the notion that one’s experiences in the work context affect one’s experiences in the family context, and the reverse. Objective aspects of the job, such as work hours, have been linked to family interactions. Doumas, Margolin, and John (2003) found that for both men and women, working fewer hours was related to more positive reports of marital interaction. Other studies have found that subjective aspects of work are more important than objective aspects of work. Allen (2001) found that employee perceptions of the extent that their workplace was supportive of their family responsibilities mediated the relationship between supervisor support and work-family conflict. Greater perceived supervisor support and flexibility has also been linked to less work-family conflict (Moen & Yu, 2000).

Although little research has examined how specific aspects of work contribute to work-family conflict for lesbians, a recent review
indicates that, in general, lesbians face employment discrimination (Croteau, Anderson, Distefano, & Kampa-Kokesch, 2000). This suggests that the work environment, including relationships with coworkers and supervisors, can be particularly stressful for lesbians. Peters and Cantrell (1993) found that lesbians were less satisfied with relationships with coworkers than were heterosexual women. Based on this literature, we chose to examine both objective and subjective aspects of work. We expect that more work hours will be negatively related to love and positively related to conflict, and greater support will be positively related to love and negatively related to conflict.

Research with heterosexual couples suggests that mothers who reported lower levels of social support are more likely to report lower marital adjustment (Graham, Fischer, Crawford, Fitzpatrick, & Bina, 2000). Bryant, Conger, and Meehan (2001) reported that conflict in extended family relations (e.g., discord with in-laws) has negative effects on marital stability. The link between social support and relationship quality has also been studied in same-gender couples. Studies have found that gay and lesbian couples were less likely to list family members as major sources of support and that support from friends was more important to relationship satisfaction than support from family (Kurdek, 1988; Kurdek & Schmitt, 1987). These studies suggest that lesbians and gay men may cope with family disapproval by finding alternative sources of support. In contrast, Caron and Ulin (1997) found that lesbian couples who experienced their families as being overtly accepting and supportive reported higher relationship quality. Taken together, these findings suggest that family support is important to couple functioning under some conditions. Of interest is whether this support is of importance during the transition to parenthood as it is a phase when rejection or acceptance by one's extended family may be particularly salient. We hypothesize that higher levels of expected support from one's own and one's partner’s family will be positively related to love and negatively related to conflict.

**Research Questions**

The current study examined relationship quality across the transition to parenthood in 29 committed lesbian couples in which one member was the biological mother of the child. Research comparing lesbian inseminating couples with heterosexual inseminating couples has found that nonbiological lesbian mothers may have an easier transition to the parental role than nonbiological fathers, thus highlighting the gendered nature of parenting and underscoring some basic similarities between biological and nonbiological mothers (Stacey & Biblarz, 2001). Empirical research and clinical accounts, however, also suggest that biological and nonbiological mothers experience the transition to parenthood differently (Gartrell et al., 1999; Weinstein, 2001). For example, Glazer (2001) noted that nonbiological mothers may feel a similar sense of exclusion from the neonatal dyad to that experienced by fathers but do not receive the societal support that allows men to work through these feelings. In our study, we differentiate women on the basis of their roles and model separate change scores for biological and nonbiological mothers.

**Questions about status.** The first research focus was relationship quality 1 month after the birth as prior studies suggest that relationship quality is affected dramatically by the birth (Belsky, Spanier, & Rovine, 1983). Do biological and nonbiological mothers differ in levels of relationship quality at this point, and, if so, what individual, couple, and context characteristics are related to these differences?

**Questions about change.** A second research focus was change in relationship quality across the 4-month transition to parenthood. Do biological and nonbiological mothers display different change in relationship quality, and, if so, what individual, couple, and context characteristics are related to differences in change? To our knowledge, there is no literature on change in lesbians’ relationship quality across the transition to parenthood. Based on research on change in heterosexual couples during the transition to parenthood (Cowan & Cowan, 1992), we expect love to decrease and conflict to increase across the transition.

**METHOD**

**Design**

Our sample consisted of women in 29 committed lesbian relationships who were preparing to...
give birth to their first child via insemination. An additional inclusion criterion was that at least one member of the couple had to be returning to work full time after the birth. Both partners were interviewed 1 month before the due date (Time 1, hereafter T1) and 3 months after the birth (Time 2, hereafter T2). We chose this time interval because we were interested in acute change, whereas other studies have investigated a much longer span (Gartrell et al., 1999). Notices were posted in offices of gynecologists in Massachusetts, and study information was included in several Massachusetts gay/lesbian community newsletters. Calls for participants were posted on national Web sites pertaining to lesbian issues in order to obtain a geographically diverse sample. There is some evidence that Internet sampling is superior to other methods in recruiting lesbian samples that are diverse with regard to income, education, and ethnicity (Mathy, Schillace, Coleman, & Berquist, 2002). Members of each couple were interviewed separately by phone; they were also sent a questionnaire packet to return within 1 week of the phone interview.

Sample

Table 1 provides descriptive statistics on the sample. Most participants were White, highly educated, and financially stable. Although the high educational levels might suggest high-status jobs, the women in this sample tended to be employed in moderate-status occupations; this may be because of discrimination issues. We recognize that the small size and homogeneity of our sample limits the generalizability of our findings. Such homogeneity, however, can be viewed as advantageous for detecting statistical relationships as it restricts many sources of extraneous variation. Women in this sample were generally older than first-time mothers (Centers for Disease Control and Prevention, 2002). Couples had been together for about 6 years. All mothers decreased their work hours across the transition, although nonbiological mothers worked more hours at both T1 and T2.

Measures

Relationship quality was assessed twice, at the beginning and end of the study. All other variables described here were measured prior to the birth of the child.

Work hours. Women reported the number of hours per week they spent in paid employment at T1 (prebirth).

Occupational category. Socioeconomic index scores, a measure of occupational prestige, were derived from women’s job descriptions (Nakao & Treas, 1992). These scores were then used to classify women’s occupations into six categories: senior officials (e.g., physician), professionals (e.g., professor, pilot), associate professionals (e.g., teacher, nurse), technicians (e.g., accounts manager), administrative support (e.g., clerk), and service/sales (e.g., cook).

Organizational support. Women completed an 8-item scale designed to assess perceived organizational support (Eisenberger, Huntington, Hutchinson, & Sowa, 1986). On a scale of 1 = strongly disagree to 5 = strongly agree, women were asked to choose the response that best described their work situation. Items include “my organization is willing to help me when I need a special favor” and “if given the chance, my organization would take unfair advantage of me.” The alpha coefficient estimated on our sample was .90.

NEO Personality Inventory—Revised, short form. Women completed the 97-item NEO Short Personality Inventory, which assesses major aspects of personality: neuroticism, extroversion, openness, agreeableness, and conscientiousness (Costa & McCrae, 1992). On a scale from 1 = strongly disagree to 5 = strongly agree, women chose the response that best described them. Items include “I often get angry at the way people treat me” and “I am a warm and friendly person.” In our study, we used the neuroticism subscale. The sample alpha coefficient was .91.

Expected social support. Women reported their perceptions of the support they expected to receive from their own family of origin (parents, siblings) and from their partner’s family once their baby was born. Support was defined as “emotional, practical, or financial,” and women were asked to predict the degree to which their family or their partner’s family would “be there” for them and their partners once they became parents. Women rated the level of support they anticipated from their own family and from
their partner’s family on a scale of 1 = not supportive to 5 = very supportive.

**Satisfaction with housework.** Women were asked, “How satisfied are you with the current division of household tasks?” Responses were on a 5-point scale anchored at 1 = very dissatisfied and 5 = very satisfied.

**Relationship questionnaire.** Twenty-five items are distributed across four subscales: love, conflict, ambivalence, and maintenance (Braiker & Kelley, 1979). In our study, the subscale measuring maintenance was used as a predictor, and the subscales measuring love and conflict were used as outcomes. Questions such as “How much do you tell your partner what you want...
or need from the relationship?” (maintenance), “To what extent do you have a sense of ‘belonging with your partner?’” (love), and “How often do you and your partner argue?” (conflict) are answered on a 9-point scale from 1 = not at all/not very much to 9 = very much. At T1, the sample alphas for the maintenance, love, and conflict subscales pooled across women were .78, .74, and .65, respectively. At T2, the alphas for the three subscales were .71, .87, and .79.

Analytic Strategy

When individuals are nested in couples, their outcome scores are likely to be correlated. This problem of data interdependency has long been recognized by relationship researchers (Sayer & Klute, 2004). One solution is to use a modeling strategy that estimates the extent of this shared variance and provides correct standard errors for testing the regression coefficients relating predictors to outcome scores. We chose the multilevel modeling program HLM6 (Raudenbush, Bryk, & Congdon, 2004) to estimate the parameters in our models. We adapted the multivariate outcomes two-level hierarchical linear model for change that permits modeling of separate equations for both members of the dyad, as described by Raudenbush, Brennan, and Barnett (1995). Our version of the Level 1 model is parameterized to include two time points for each member of the couple, and we interpret change as the difference between the T1 and T2 score for each member.

This strategy has several advantages. First, it adjusts the outcomes for measurement error, which would otherwise have the negative effect of attenuating correlations between variables. Second, it estimates the shared variance arising from the dependence of the outcome scores between members of the couple. Third, it provides separate equations for each member of the couple, allowing the magnitude and direction of the coefficients to vary across couples.

Although we have only 29 couples, we have responses from 58 women, at two time points. The repeated measures design gives us greater power to detect effects. As we had only two scores for each member of the couple, we did not have enough information to estimate all the Level 1 quantities (intercept, slope, measurement error). To save a degree of freedom for testing the model, we weighted the outcome scores by their reliability. This precision weighting technique, described by Sayer and Klute (2004), is comparable to supplying a known estimate of measurement error variance to the HLM program rather than having this quantity estimated from the data. Weights were created as the inverse of the measurement error variance and were included in all analyses.

Level 1 model. We used the love and conflict subscales, as evaluated by each partner, as indicators of relationship quality. For each couple, each partner had a score on relationship quality, measured at two times: 1 month before the biological mother’s due date, and 3 months postbirth. The interval between T1 and T2 is 4 months. Thus, our change score is simply the difference between T1 and T2. The Level 1 model is:

\[ Y = B_1 \text{ Bio} + B_2 \text{ BioTime} + [B_3 \text{ NonBio} + B_4 \text{ NonBioTime}] + r \quad (1) \]

To facilitate estimating these difference scores, we coded time −.5 for T1 and +.5 for T2. This coding allows us to interpret the model coefficients as follows: the intercepts \( B_1 \) (for biological mothers) and \( B_3 \) (for nonbiological mothers) are the predicted outcome scores when \( T = 0 \). This point is halfway between T1 and T2 or 1 month postbirth. The slopes (\( B_2 \) and \( B_4 \)) represent the difference or change in relationship quality for a one-unit change in time (i.e., the 4-month interval). The \( r \) in the Level 1 model represents the residual or measurement error. Thus, the intercepts \( B_1 \) and \( B_3 \) reflect the level of relationship quality adjusted for measurement error. For each person, we estimate a true level (1 month postbirth) score and a true difference score.

Level 2 model. Each coefficient in the Level 1 equation becomes an outcome at Level 2, to be predicted by a set of Level 2 predictors.

\[
\text{Biological Mother :} \\
B_1 = \gamma_{10} + [\text{predictors}] + u_1 \\
B_2 = \gamma_{20} + [\text{predictors}] + u_2
\]
Nonbiological Mother:

\[ B_3 = \gamma_{30} + [\text{predictors}] + u_3 \] (4)

\[ B_4 = \gamma_{40} + [\text{predictors}] + u_4 \] (5)

In Equations 2 and 3, \( \gamma_{10} \) is the average 1-month postbirth score and \( \gamma_{20} \) is the average difference score for love for the biological mother. In Equations 4 and 5, \( \gamma_{30} \) and \( \gamma_{40} \) represent the same entities for the nonbiological mother. At Level 2, each set of true scores associated with a couple is treated as varying randomly over the population of couples; that is, they can take on different values across couples. The \( u \)'s are the Level 2 random effects, and their variance represents the heterogeneity of individual scores around the average. We estimate the variance of the \( u \)'s and their covariance; this latter estimate captures the shared variance in couple scores.

**Taxonomy of Models**

To answer our research questions, we compared a series of models. For each model, our strategy was to compare the model deviance statistic or goodness of fit against the deviance of a competing model. The difference in deviances is distributed as a chi-square statistic (\( \chi^2 \)). This allows us to use a likelihood ratio test to make decisions about the best fitting model. If the test reveals that the difference in deviances is non-significant, we retain the more parsimonious model.

For each outcome, we fit a baseline model (Model 1) without any Level 2 predictors. This strategy allowed us to estimate the average change trajectory (defined by the two parameters, the intercept and slope) as well as heterogeneity across couples around that average trajectory. Second, we fit a model (Model 2) that adds neuroticism (personality) to determine whether it explains the differences in trajectories across couples. If the latter model was a better fit, we retained neuroticism in all future models. Next, the results of the model including work characteristics (Model 3) was compared to the model based on personality alone. For the final comparison (Model 2 vs. Model 5), couple characteristics were added to the model with personality and tested against the model with personality alone. Model 5 was a significantly better model and was retained for interpretation (\( \Delta \chi^2 = 16.5, df = 8, p = .009 \)).

**RESULTS**

**Descriptive Characteristics of the Sample**

Table 1 presents the means, standard deviations, and \( t \) tests for all variables displayed for biological and nonbiological mothers. Inspection of the table entries reveals few differences by role status. Birth mothers reported higher levels of neuroticism and were working fewer hours.

**Model Comparisons**

**Model comparisons predicting love.** The baseline model predicts biological mothers’ and nonbiological mothers’ love scores with separate biological mother and nonbiological mother intercepts and slopes. Tests of the variance components revealed significant variability in both intercepts and slopes for both biological and nonbiological mothers.

The model with personality (Model 2) was a better predictive model than the baseline. We chose to use Model 2 as the reference model for further comparison. For the next comparison (Model 2 vs. Model 3), we included work characteristics. The model comparison test allowed us to retain the more parsimonious personality model. For the next comparison (Model 2 vs. Model 4), the set of social context predictors was added to the model with personality. Again, the model comparison test allowed us to retain the more parsimonious personality model. For the final comparison (Model 2 vs. Model 5), couple characteristics were added to the model with personality and tested against the model with personality alone. Model 5 was a significantly better model and was retained for interpretation (\( \Delta \chi^2 = 16.5, df = 8, p = .009 \)).

**Model comparisons predicting conflict.** The baseline model revealed significant variability in slope for nonbiological mothers only. We followed a similar model-fitting and comparison strategy, with the following results: (a) the model with personality was a better predictor...

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than the baseline model, (b) adding work predictors did not improve the model fit (Model 2 vs. Model 3), (c) adding social context predictors did improve the model fit at the $p = .10$ level of confidence (Model 2 vs. Model 4: $\Delta \chi^2 = 12.58$, $df = 8$, $p = .09$), and (d) adding couple characteristics did not improve the fit (Model 2 vs. Model 5). Thus, Model 4 was retained as the most parsimonious and best fitting model.

Table 2 presents the parameter estimates and deviance statistics for the best fitting models (Model 5 when love is the dependent variable, Model 4 when conflict is the outcome). The other models are available upon request. In Table 2, “Level” refers to the score 1 month postbirth, or midway across the transition, and “Rate” refers to the difference score between T1 and T2.

Neuroticism remains a strong predictor of level of love for biological mothers, and a strong predictor of rate of love for both biological and nonbiological mothers, irrespective of what other variables are in the model. We confirmed our hypothesis that neuroticism was negatively related to level and rate of love. Biological mothers who score high on neuroticism report less love 1 month postbirth and both biological and nonbiological mothers who score high on neuroticism experience more decline in love during the 4-month transition to parenthood.

Inspection of estimates for Model 5 reveals that couple characteristics are related to change in love for biological mothers, and to the 1-month postbirth love score for nonbiological mothers. High levels of maintenance behaviors are associated with greater declines in love for biological mothers. For nonbiological mothers, higher levels of maintenance behaviors and feeling satisfied with the division of labor are related to higher levels of love 1 month postbirth.

We interpret our results on love through the comparison of fitted trajectories (latent difference scores) for prototypical women at substantively interesting values of the predictors. These are graphs of the dependent variable against time, plotted to display statistically important effects on change. In this case, we chose to plot at low (25th) and high (75th) percentile values of the neuroticism and maintenance distributions to reflect the range of effects of these predictors on change in love. Figure 1 presents these prototypical trajectories,
for biological mothers (Panel A) and non-biological mothers (Panel B). The effect of neuroticism on level is revealed by comparing the displacement in elevation of the trajectories at Time 0, holding maintenance constant. The effect of maintenance on rate is indicated by the difference in the tilt of the slopes representing high and low maintenance, holding neuroticism constant. Biological mothers who reported low levels of neuroticism, as well as low levels of maintenance, experienced almost no change in love. Women with high levels of neuroticism and high levels of maintenance reported the most significant decreases in love across the transition.

With regard to conflict, inspection of the entries in Table 2 reveals that neuroticism affects level of conflict for both biological and nonbiological mothers but is not a consistent predictor of rate of change in conflict. Recall that level represents the score 1 month postbirth. Thus, our hypothesis that women who were more neurotic would report higher levels of conflict midway through the transition was supported.

Inspection of estimates for Model 4 reveals that support from family is related to level of conflict for biological mothers and rate of change in conflict for nonbiological mothers. For birth mothers, expecting a high level of support from one’s partner’s family is related to less conflict 1 month postbirth. Contrary to our hypothesis, nonbiological mothers who expected a high level of support from their partner’s family prior to the birth experienced steeper increases in conflict.

Figure 2 presents prototypical conflict trajectories for both biological and nonbiological mothers. We chose to plot at low (25th) and high (75th) percentile values of neuroticism and expected support from partner’s family to illustrate the range of their effects on change in conflict. As Panel B shows, nonbiological mothers who expected low levels of support experienced little change in conflict, whereas those who reported high levels of neuroticism and expected high levels of support experienced marked increases in conflict.

**Sensitivity Analyses**

Sensitivity analyses revealed two extreme outliers on the love scale, both nonbiological mothers. We removed the outliers and reestimated all models on the smaller sample. Model comparisons revealed that in general the pattern, direction, and significance of the regression coefficients remained the same, but there was no longer significant heterogeneity in nonbiological mothers’ rates of change. Our
prediction of these rates may not be robust and requires replication.

**DISCUSSION**

The goal of the current study was to examine whether contextual influences such as work characteristics and expected social support, as well as couple characteristics, influence lesbians’ relationship quality during the transition to parenthood above and beyond the effects of personal characteristics.

Results reveal that on average, lesbians’ love decreased across the transition, whereas conflict increased. These data are consistent with research on heterosexual couples (Belsky et al., 1983). Less time alone as a couple and the stress induced by widening one’s repertoire of roles to include that of parent are potential explanations for these changes. We also examined variability within these couples, that is, what factors help to differentiate those whose relationships suffered from those whose relationships fared better?

**Personal Characteristics**

With regard to love, birth mothers whose personality styles were characterized by greater neuroticism reported lower postbirth levels of love, and both biological mothers and nonbiological mothers who scored high on neuroticism reported more postbirth conflict. This is consistent with research that has found neuroticism and relationship satisfaction to be inversely related (Karney & Bradbury, 1995). With regard to change, greater neuroticism was related to steeper declines in love for all women but was not a predictor of change in conflict. This suggests that, in the context of a demanding life change such as becoming a parent, a neurotic personality style may affect one’s relationship more through perceptions, attributions, and feelings (e.g., decreased satisfaction with and love for one’s partner), and less through behavior (e.g., fighting more).

**Influence of the Work Context**

Contrary to our hypothesis, aspects of work were not significantly related to love or conflict. This is inconsistent with research that has found an inverse relationship between hours worked and marital quality (Doumas et al., 2003), and research that linked workplace support to lower work-family conflict (Moen & Yu, 2000). The majority of the women in the current sample, however, were employed in middle-class occupations. It is possible that among lesbians employed in lower status occupations (e.g., jobs...
characterized by less autonomy and flexibility), aspects of work might have more powerful effects. Working-class heterosexual couples often work alternating shifts as a child-care strategy, meaning less time together, and potentially compromised relationship quality (Perry-Jenkins, Goldberg, & Pierce, 2005); the same may be true for working-class lesbians. Also, given that birth mothers’ work hours tended to change across the transition (some returned full time, some returned part time, and a few stayed home), prebirth work hours may not be a meaningful predictor for birth mothers. Postbirth work arrangements may have greater implications for relationship stability. It is also possible that work affects other outcomes such as individual well-being but has less influence on relationship quality. Longitudinal investigation of work effects is necessary to explore this question. In addition, researchers should evaluate the effect of family-friendly workplace policies, such as domestic partnership benefits, on lesbians’ well-being and relationship quality.

Influence of the Social Context

Expected social support did not have a significant effect on love. With regard to conflict, the model with expected social support and personality was a better fit to the data than the model with personality alone. For biological mothers, high levels of expected support from one’s partner’s family were associated with lower average levels of conflict. As Figure 2 shows, nonbiological mothers who expected high levels of support from their partner’s families reported increases in conflict. What might explain this? Nonbiological mothers who expected their partner’s families to be very supportive tended to report increased conflict, perhaps as a result of frustrated expectations. Biological mothers’ families may undermine the nonbiological mother’s relationship to the child, seeing them as “less of a mother”; thus, nonsupport from one’s partner’s family may be particularly salient for nonbiological mothers, and family membership may become an issue of tense discussion between partners. Another possibility is that biological mothers’ families do in fact meet or even surpass nonbiological mothers’ expectations for support, but their frequent presence or greater involvement ultimately causes conflict between the partners.

Influence of Couple Characteristics

Characteristics of the couple were associated with love for lesbian mothers. For nonbiological mothers, engaging in higher levels of maintenance behaviors prior to the birth was associated with higher levels of love at the midpoint of the transition. Failure to perform relationship maintenance may not be associated with increased conflict, but on a more subtle level, it may reflect or be related to one’s feelings of love toward one’s partner, at least among nonbiological mothers. Interestingly, prebirth levels of maintenance had the opposite effect on change in love, for birth mothers. As displayed in Figure 1, the birth mothers whose feelings of love declined most drastically were those who scored highest on neuroticism and maintenance behaviors at T1. Women who scored low on neuroticism and reported low levels of maintenance at T1 experienced no change in love. What might account for this? Post hoc analyses reveal that maintenance behaviors decline across the transition. It is possible that among some women—that is, women with a neurotic personality style who are actively experiencing the transition of giving birth and welcoming a child into their lives—a decrease in talking about the relationship, or a decrease in carrying out activities to enhance the relationship, is particularly disruptive.

Among nonbiological mothers, those who were more satisfied with the division of labor reported higher levels of love for their partner. This mirrors the results of research by Chan et al. (1998), who found that satisfaction with the division of labor was related to relationship satisfaction for nonbiological but not biological mothers. Why were these effects present for nonbiological mothers only? Qualitative data indicate that at the prebirth interview, a number of nonbiological mothers reported a recent increase in their responsibility for housework because their pregnant partners were less able to perform household chores. Many nonbiological mothers take on added responsibilities during the transition without the rewards of visibility (and corresponding sympathy) that their pregnant partners receive. Given that their partners were doing the work of carrying their child, it is understandable why these women’s discontent and frustration with the status quo might not manifest in overt conflict but, rather, affect their feelings of closeness to their partners.
Conclusions, Limitations, and Future Directions

This study represents the first prospective, short-term longitudinal investigation of lesbian couples’ relationship quality across the transition to parenthood. It is also the first longitudinal study of the effects of the work context on lesbians’ relationships, and it makes a methodological contribution; to our knowledge, it is the first study to investigate within-dyad difference scores using a multilevel model.

The current study has a number of limitations. First, it is a small sample with 29 couples; thus, all quantitative analyses should be viewed with caution, and replication of the current study design is imperative. Second, couples were interviewed only twice, within a short time span. The findings observed here could represent acute phenomena that would dissipate over a longer time span. Third, it is possible that the volunteer sample of lesbian couples recruited for this study may have resulted in a bias toward families without problems. Fourth, this is a highly educated, professional sample, and mostly White, a limitation of most studies of lesbian couples (Patterson, 1992). It does not capture the class, occupational, racial, and ethnic diversity of the lesbian community (Simmons & O’Connell, 2003).

Why was the current project unsuccessful in obtaining a more diverse sample? It may be that too few sources of recruitment were used. There is some evidence that multiple sources of recruitment enhance the likelihood of obtaining a diverse sample of lesbians (Rothblum, Factor, & Aaron, 2002). It is also possible that among lesbians, socioeconomic status tends to be conflated with method of becoming a parent. Lesbians who are more affluent tend to choose insemination and international adoption, whereas lesbians with fewer resources tend to opt for domestic adoption (which typically means older children, often with siblings, and often with emotional/behavioral problems). This study excluded lesbians adopting older children, and thus may have inadvertently focused on couples who were more advantaged. Future studies should solicit participation from lesbians who are adopting domestically in order to tease apart these issues.

These women’s middle-class status can be viewed as a protective factor. Although they live in a heterosexist society, their social class may enable them to “buy” a more supportive niche than less affluent lesbians. Middle-class lesbians may also have more freedom in terms of dividing labor equally, thus avoiding potential conflicts. Middle-class occupations tend to offer more fair leave policies (at least for birth mothers), which may facilitate an easier transition to parenthood. Finally, if less advantaged lesbians do tend to use domestic adoption, they are more likely to have children with special needs, complicating their transition. Future research with more diverse samples can help to determine how and to what extent social class shapes lesbians’ transition to parenthood.

Studies with larger samples and longer follow-up can help to determine whether certain effects are acute or have lasting implications. In addition, racial, class, and economic diversity exists within this group, and it is a role for future research to determine how to best capture it. Finally, the transition to parenthood for lesbian and gay couples who are adopting, and for lesbian and gay single parents, represents unexplored areas of research. Future research should include these groups in order to contribute to a slowly growing literature on gay and lesbian couples and families.

NOTE

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